

SUMMARYPILGRIM 1 DISCHARGE MONITORING REPORT

In accordance with the Federal Clean Water Act, amended (33USC 1251 Et. Seq: the "CWA"), and the Massachusetts Clean Water Act, as amended (M.G.L., C21, 26-53), regarding effluent limitations, monitoring requirements and other conditions set forth in the Pilgrim NPDES Permit (Federal Permit Number MA0003557, and State Permit Number 359), Parts I and II, the following information is submitted for the period October 1, 1987 - December 31, 1987.

I. Discharge Points Covered in this Report

<u>Discharge Point</u>	<u>Discharge Identification</u>
001	Condenser Cooling Water
002	Condenser Backwash and Slime Control
003	Intake Screen Wash
010	Service Cooling Water
011	Makeup Water and Demineralizer Waste Discharge

II. Summary and Notes of Discharge Report

- A. The flow at points 001 and 010 are calculated from system pump capacity and are equal to the total flow for all pumps in each system running at full capacity for a 24-hour period. The flow at point 011 is measured by noting sump levels before and after discharge. Flow at point 002 is a conservative figure obtained by calculating flow if backwashing took place for 24 hours. Flow at point 003 is calculated from system pump capacity and mean operating time.
- B. The temperature at points 001 and 002 is measured by resistance temperature detectors (RTD's).
- C. Periodically, total residual chlorine (TRC) concentration in the service cooling water (010) exceeds Permit requirements (0.25 ppm daily average TRC and 0.50 ppm daily maximum TRC), primarily because of the number of service water pumps in operation. Chlorine levels are lowered as a corrective measure although the dilution provided by the circulating water flow keeps total residual chlorine concentrations discharged to Cape Cod Bay below 0.1 ppm.
- D. Via USEPA letter to Boston Edison Company dated December 1, 1983, Pilgrim Station has been given permission to increase its Service Cooling Water (010) flow rate from 11.7 million gallons/day (MGD) to 19.4 MGD.

IE 48 1/1

- E. Thirty day average, intake screen wash (003) flow periodically exceeds Permit levels (0.336 MGD) because of continuous screen washing required for removal of heavy debris loads, caused by coastal storms. A letter requesting an increase in this Permit limit from 0.336 MGD to 2.02 MGD was sent to T.E. Landry of the USEPA Compliance Branch (BECO Letter 5.84.048) on December 13, 1984.
- F. Intake traveling water screens were operated without dechlorination pumps operating on 10/10, 10/22 and 10/19(2). There was one occurrence on each date unless otherwise noted.
- G. Pilgrim Station Marine Ecology Semi-Annual Report #30 was sent to the USEPA and Mass. Division of Water Pollution Control (DWPC) on October 30, 1987, as required by the NPDES Permit (BECO Letters 5.87.067 and 5.87.068).
- H. The Pilgrim Station 1988 Environmental Monitoring, Thermal Discharge Fish Surveillance, and Dissolved Nitrogen Saturation Reduction Programs and Plans were submitted to the USEPA and Mass. DWPC on December 30, 1987 in conformance with the NPDES Permit (BECO Letters 5.87.084 and 5.87.085).
- I. On October 14, 1987 a telecon (BECO Telecon 4.87.097) was conducted with the USEPA to obtain approval to discharge approximately 7,000 gallons of water from a fire water storage tank to Cape Cod Bay, with the dilution of one circulating seawater pump. The discharge was necessitated to repair a leak in the tank's valve pit and contained 22 ppm of nitrites.
- J. A November 20, 1987 telecon (BECO Telecon 4.87.130) was made to the USEPA to notify them that the PNPS discharge chlorine (TRC) concentration exceeded NPDES Permit limits (0.1 ppm) on that date. The TRC discharge excursion lasted approximately 1/2 hour and peaked at a concentration of 1.4 ppm. Circulating water system chlorination was suspended to investigate the problem.

2

UNITED STATES DEPARTMENT OF AGRICULTURE
BUREAU OF PLANT INDUSTRY
WASHINGTON, D.C.

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PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER.
TEMP SHALL AT NO TIME EXCEED A 15 DEGREE RISE OVER TEMP OF INTAKE WATER.

NAME BOSTON ED #1 PLYMOUTH PLANT
 ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA 02360
 FACILITY _____
 LOCATION _____
 ATTN: C. J. MAHIS, STATION MANAGER

MAC003557
 PERMIT NUMBER

001 1
 DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
87	11	01		87	11	30

(30-31) (32-33) (34-35) (36-37) (38-39) (40-41)

COOLING WATERS

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)			QUALITY OR CONCENTRATION (54-61)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	*****	*****			46.9	47.7	48.9		0		
EFFLUENT CROSS VALUE	PERMIT REQUIREMENT	*****	*****	***				D56.F			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00000 1 0	*****	*****			*****	*****	*****		0		
EFFLUENT CROSS VALUE	PERMIT REQUIREMENT	*****	*****	***							
CHLORINE, TOTAL RESIDUAL 00000 1 0	*****	*****			0.01	0.01	0.20		1	SEE SUMMARY NOTES # II, J.	
EFFLUENT CROSS VALUE	PERMIT REQUIREMENT	*****	*****	***				MG/LI			
	SAMPLE MEASUREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K. P. ROBERTS
STATION MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

[Signature]

TELEPHONE

617 746-7900

DATE

1 18 88

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER.
 TEMP. SHALL AT NO TIME EXCEED A 37 DEGREE RISE OVER TEMP OF INTAKE WATER.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA 02340

FACILITY _____
 LOCATION _____

ATTN: C. J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE MONITORING REPORT

MA0003557

PERMIT NUMBER

002.1

DISCHARGE NUMBER

F + PENAL
 CONDENSER BACKWASH

Apprenticeship 2-22-88

MONITORING PERIOD

FROM YEAR 87 MO 11 DAY 01 TO YEAR 87 MO 11 DAY 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 5)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (52-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0	SAMPLE MEASUREMENT	000000	000000		no backwash				0		
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OF THRU TREATMENT PLANT 00000 1 0	PERMIT REQUIREMENT	000000	000000	000							
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OF THRU TREATMENT PLANT 00000 1 0	SAMPLE MEASUREMENT	no backwash			000000	000000	000000		0		
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OF THRU TREATMENT PLANT 00000 1 0	PERMIT REQUIREMENT	REPORT	000000	000							
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K. P. ROBERTS
STATION MANAGER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7900

1 18 88

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTIMATED BY A FLOWMETER. THIS SHALL BE DONE CONTINUOUSLY. SEE PERMIT PAGE 7 FOR CONDITIONS REGARDING THE

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)

NAME BOSTON EQ #1 PILGRIM PLANT
ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA 02360

FACILITY _____
LOCATION _____

ATTN: C. J. MAHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE
DISCHARGE MONITORING REPORT (Form 100)

MA0003557
PERMIT NUMBER

0021
DISCHARGE NUMBER

PC-FINAL
CONDENSER BACKWASH

Other Use: Annual Report 9-20-80

MONITORING PERIOD							
FROM				TO			
YEAR	MO	DAY		YEAR	MO	DAY	
87	12	01		87	12	31	
(26-27)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)	

MAJOR (SUBR 5)

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		no thermal backwash					
	PERMIT REQUIREMENT	*****	*****	*** ****						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00000 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	7.1	7.7		*****	*****	*****			
	PERMIT REQUIREMENT	REPORT	255.0 GALTY HW	MGD				*** ****		SYSTEM
	SAMPLE MEASUREMENT									
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
K. P. ROBERTS
STATION MANAGER
TYPED OR PRINTED

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AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED
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OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION
IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIG-
NIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING
THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND
33 USC § 1319. Penalties under these statutes may include fines up to \$10,000
and/or maximum imprisonment of between 6 months and 3 years.

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE
617 746-7900
AREA CODE NUMBER
DATE
1 18 88
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

THE PH SHALL NOT VARY MORE THAN 0.5 STANDARD UNITS FROM THAT OF THE INTAKE WATER. FLOW RATE IS TO BE ESTI-
MATED AS IN PERMITTING. THE PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 7 FOR CONDITIONS REGARDING TH
E PERMITTING OF DISCHARGE.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location & Address)

NAME BOSTON ED #1 PILGEM PLANT

ADDRESS ROCKY HILL ROAD

KFD #1

PLYMOUTH

FACILITY

LOCATION

ALING C. J. MAHIS, STATION MANAGER

PARAMETER (32-37)

FLOW IN CONDUIT OR
THRU TREATMENT PLANT
50000 L/D
SOLID GELSS VALUE

SAMPLE MEASUREMENT

PERMIT REQUIREMENT

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PERMIT REQUIREMENT

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K.P. Roberts

STATION MANAGER

TYPED OR PRINTED

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

THE IMPROPERLY MAINTAINED SCREENS SHALL BE REPAIRED OR REPLACED WITHIN 30 DAYS OF THE DATE OF THE VIOLATION. ALL FIRM SCREENS MUST BE MAINTAINED AND TRAPPED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER. IF A FIRM SCREEN IS NOT MAINTAINED OR TRAPPED, THE FIRM SHALL BE RESPONSIBLE FOR THE INTAKE STRUCTURES TO PREVENT REIMPINGEMENT.

EPA Form 3320-1 (Rev. 10-79) PREVIOUS EDITION TO BE USED UNTIL SUPPLY IS EXHAUSTED

(REPLACES EPA FORM 1-40 WHICH MAY NOT BE USED) 00274/122786-1502

PAGE 1 OF

NATIONAL POLLUTANT DISCHARGE MONITORING REPORT (NPDES)

DISCHARGE MONITORING REPORT (NPDES)

(17-29)

P - FINAL

INTAKE SCREEN WASH

MA00033557

PERMIT NUMBER

003 A

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 87 MO 10 DAY 31 TO YEAR 87 MO 10 DAY 31

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	QUANTITY OR LOADING (34-35)			QUALITY OR CONCENTRATION (36-37)			NO. OF ANALYSIS (54-55)	FREQUENCY OF ANALYSIS (54-55)	SAMPLE TYPE (59-70)
	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)	AVERAGE (46-53)	MINIMUM (46-53)	MAXIMUM (54-61)			
FLOW IN CONDUIT OR THRU TREATMENT PLANT	0.023	0.252		0.00000	0.00000	0.00000	0.00000	0	
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PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form No. 3320-1
Approved August 2-80-85

NAME BOSTON ED 31 PILGRIM PLANT
ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA 02360

MA0003557
PERMIT NUMBER

003 A
DISCHARGE NUMBER

P + FINAL
INTAKE SCREEN WASH

FACILITY
LOCATION
ATTN: C. J. MATHIS, STATION MANAGER

MONITORING PERIOD
FROM YEAR 87 MO 11 DAY 02 TO YEAR 87 MO 11 DAY 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (34-51)			(4 Card Only) QUALITY OR CONCENTRATION (52-59)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.601	2.02		*****	*****	*****		1	366 SUMMARY	NOTES # II. E.
	PERMIT REQUIREMENT	0.336	2.02					***			
		3001 AVG	08717 MAX	MGD				*****			
	SAMPLE MEASUREMENT										
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K. P. ROBERTS
STATION MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED
AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED
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IS TRUE ACCURATE AND COMPLETE I AM AWARE THAT THERE ARE SIG-
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33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000
and/or maximum imprisonment of between 6 months and 3 years.

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7900

1 18 87

AREA
CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

THE TEMPERATURE OF THE INTAKE WATER SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RFD #1

PLYMOUTH

MA 02360

FACILITY

LOCATION

ATTN: C.J. MAHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE MONITORING

MA0003557

PERMIT NUMBER

000 A

DISCHARGE NUMBER

PERMIT FINAL

INTAKE SCREEN WASH

MONITORING PERIOD

FROM YEAR 87 MO 12 DAY 01 TO YEAR 87 MO 12 DAY 31

MAJOR (SICR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (59-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.859	2.02		*****	*****	*****			
50000 1 0	PERMIT REQUIREMENT	0.936	2.02							
EQUILIBRIUM GROSS VALUE		50000 AVE	50000 MAX	MGD				***		SEE SUMMARY NOTES I.E.

	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
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	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <u>K. P. ROBERTS</u> <u>STATION MANAGER</u> TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 5 months and 5 years.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE <u>617 746-7900</u>		DATE <u>1 18 88</u>		
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

THE TEMPERATURE OF THIS DISCHARGE SHALL AT NO TIME EXCEED THE TEMPERATURE OF THE INTAKE WATER.
ALL FISH OR AQUATIC ANIMALS ACCIDENTALLY COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER
AS SOON AS POSSIBLE. AVOID ANY STRUCTURES TO PREVENT REIMPINGEMENT.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA 02360

FACILITY
 LOCATION

ATTN: C. J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION ACT
 DISCHARGE MONITORING REPORT (DMR)

(12-16)

(17-19)

MA00C3557

PERMIT NUMBER

010 A

DISCHARGE NUMBER

P - FINAL
 SERVICE COOLING WATER

Order No. 3040-0100
 Approval Expires 8-30-88

MONITORING PERIOD

FROM YEAR 87 MO 10 DAY 01 TO YEAR 87 MO 10 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 5)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	4.5	7.2		*****	*****	*****		0		
	PERMIT REQUIREMENT	11.7	REPORT	MGD				*** ***			
CHLORINE, TOTAL RESIDUAL 50060 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		0.07	0.12	0.15		2	SEE SUMMARY NOTES 4 J.C.	
	PERMIT REQUIREMENT	*****	*****	*** ***				MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K. P. ROBERTS
STATION MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 3 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746-7900

1 18 88

AREA
 CODE NUMBER

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CONTINUOUS CHLORINATION OF STATION WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM FLOW CAPACITY CURVES AND OPERATIONAL HOURS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA 02360

NATIONAL POLLUTANT DISCHARGE MONITORING

MA0003557

PERMIT NUMBER

410 8

DISCHARGE NUMBER

P: FINAL

SERVICE COOLING WATER

Revised 10-20-88

FACILITY
 LOCATION

ATTN: C. J. MATHIS, STATION MANAGER

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	87	11	01		87	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00050 1 0	SAMPLE MEASUREMENT	3.8	7.2		*****	*****	*****	0		
REFLUENT GROSS VALUE	PERMIT REQUIREMENT	11.7	REPORT	MGD						SEE SUMMARY NOTES II-C.
CHLORINE, TOTAL RESIDUAL 00050 1 0	SAMPLE MEASUREMENT	*****	*****		0.09	0.13	0.16	1		
REFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***						CONTINGENCY USED
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
K. P. ROBERTS
STATION MANAGER
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT (SEE 10 USC § 1001 AND 33 USC § 1319). Violators under these statutes may be liable for up to \$10,000 fine and/or maximum imprisonment of between 6 months and 3 years.

SIGNATURE OF PRINCIPAL EXECUTIVE
 OFFICER OR AUTHORIZED AGENT

TELEPHONE
617 746-7900
 AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CONTINUOUS CHLORINATION OF DOMESTIC WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM PUMP CAPACITY CURVES AND OPERATIONAL HOURS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT
 ADDRESS ROCKY HILL ROAD
RFD #1
PLYMOUTH MA 02360
 FACILITY
 LOCATION
 ATTN: C. J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE MONITORING REPORT

MA0003957
 PERMIT NUMBER

010 A
 DISCHARGE NUMBER

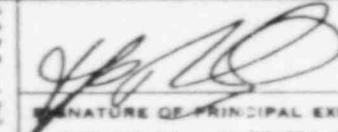
FINAL
 SERVICE COOLING WATER

MONITORING PERIOD
 FROM YEAR 87 MO 12 DAY 01 TO YEAR 87 MO 12 DAY 31
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 5)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. RX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00000 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	3.7	7.2		*****	*****	*****			
	PERMIT REQUIREMENT	11.7		MGD						
CHLORINE, TOTAL RESIDUAL 00000 1 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		0.09	0.11	0.12			
	PERMIT REQUIREMENT	*****	*****	***						
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 a day or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE		
<u>K.P. ROBERTS</u> <u>STATION MANAGER</u> TYPED OR PRINTED		 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	<u>617 746-7900</u> AREA CODE NUMBER	<u>1</u> YEAR	<u>18</u> MO

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

CONTINUOUS CHLORINATION OF SERVICE WATER SYSTEM MAY BE USED FOR MACROINVERTEBRATE CONTROL. FLOW RATE SHALL BE ESTIMATED FROM FLOW METER READINGS AND OPERATIONAL HOURS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RFD #1

PLYMOUTH

MA 02350

FACILITY

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE MONITORING REPORT (NPDES)

MA0003557

PERMIT NUMBER

011-A

DISCHARGE NUMBER

F - FINAL

MAKE UP WATER AND DEMINERALIZE

Case No. 2000-0000
Approval expires 3-30-88

MONITORING PERIOD

FROM YEAR 87 MO 10 DAY 01 TO YEAR 87 MO 10 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 5)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-55)			(4 Card Only) QUALITY OR CONCENTRATION (58-63)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		6.5	*****	7.9	0		
00400 1 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****						GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	2.5	33.0	0		
00530 1 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	*****	*****	****						GRAB
FLOW, IN CONDUIT UP THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.003	0.013		*****	*****	*****	0		
50050 1 0 EFFLUENT GROSS VALU	PERMIT REQUIREMENT	0.005 300A AVG	0.05 DAILY MAX	MGD				*** ****		SYSTEMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K. P. ROBERTS
STATION MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617-746-7900
AREA CODE NUMBER

1 18 88
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

FORMERLY DESIGNATED DISCHARGE - 1917. TAMPLES TAK V IN COMPLIANCE WITH THE MONITORING REQUIREMENTS SPECIFIC TO ABOVE SHALL BE TAKEN AT A POINT PRIOR TO MIXING WITH ANY OTHER STREAM. SEE PG 11 OF PERMIT FOR BIOLOGICAL MONITORING REQUIREMENTS.

PERMITTEE NAME/ADDRESS (Include
Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RFD #1

PLYMOUTH

MA 02350

FACILITY

LOCATION

ATTN: C. J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION ACT
DISCHARGE MONITORING REPORT (DMSR)

MA0003557

PERMIT NUMBER

011 A

DISCHARGE NUMBER

F - FINAL

WAKE UP WATER AND DETERMINE SIZE

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	87	11	01		87	11	30

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(1 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.8		0	
00400 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***				SU		
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	0.13	1.6		0	
00500 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***				MG/L		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.001	0.010		*****	*****	*****		0	
00050 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.015 30DA AVG	0.06 DAILY MAX	MGD				*** ***		ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K. P. ROBERTS
STATION MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

[Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

617 746-7900

AREA CODE

NUMBER

DATE

1 18 87
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

FORMERLY DESIGNATED DISCHARGE POINT. SAMPLES TAKEN IN COMPLIANCE WITH THE MONITORING REQUIREMENTS SPECIFIC TO ABOVE SHALL BE TAKEN AT A POINT PRIOR TO MIXING WITH ANY OTHER STREAM. SEE PG 11 OF PERMIT FOR BIOLOGICAL MONITORING. FOR DETAILS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME BOSTON ED #1 PILGRIM PLANT

ADDRESS ROCKY HILL ROAD

RFD #1

PLYMOUTH

MA 02350

EAGLE

LOCATION

ATTN: C.J. MATHIS, STATION MANAGER

NATIONAL POLLUTANT DISCHARGE MONITORING

DISCHARGE MONITORING

MA0003557

PERMIT NUMBER

011 A

DISCHARGE NUMBER

ST. FINAL

MAKE UP WATER AND DEMINERALIZE

MONITORING PERIOD

FROM YEAR 87 MO 12 DAY 01 TO YEAR 87 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR S)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		7.0	*****	7.7	0		
00400 1 0 EFFLUENT CROSS VALU	PERMIT REQUIREMENT	*****	*****	****				50		RAW
SOLIDS, TOTAL SUSPENDED 00300 1 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	*****	*****		*****	1.09	23.2	0		
	PERMIT REQUIREMENT	*****	*****	****				MG/L		RAW
FLOW, IN CONDUIT OF THRU TREATMENT PLANT 00000 1 0 EFFLUENT CROSS VALU	SAMPLE MEASUREMENT	0.001	0.011		*****	*****	*****	0		
	PERMIT REQUIREMENT	0.015 300A AVG	0.05 DAILY MAX	MGD				****		ESTIMA
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

K.P. ROBERTS
STATION MANAGER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 32 USC § 1319. Penalties under these statutes may include fines up to \$5000 and/or maximum imprisonment of between 6 months and 5 years.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

617 746 7900

1 18 08

AREA CODE NUMBER

YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

FORMERLY DESIGNATED BY CHINA RIVER. SAMPLES TAKEN IN COMPLIANCE WITH THE MONITORING REQUIREMENTS SPECIFIED ABOVE SHALL BE TAKEN AT A POINT PRIOR TO MIXING WITH ANY OTHER STREAM. SEE PG 11 OF PERMIT FOR BIOLOGICAL MONITORING.

BOSTON EDISON
Executive Offices
800 Boylston Street
Boston, Massachusetts 02199

Ralph G. Bird
Senior Vice President — Nuclear

BECO 88-015

United States Environmental Protection Agency
Region I
Permits Processing Unit — Room 2109
John F. Kennedy Federal Building
Boston, MA 02203

January 28, 1988

Massachusetts Division of Water Pollution Control
Lakeville Hospital
Lakeville, MA 02346

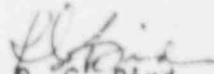
License DPR-35
Docket 50-293

DISCHARGE MONITORING REPORT

Dear Sirs:

Enclosed is the Discharge Monitoring Report for Pilgrim Nuclear Power Station (PNPS), NPDES Permit Number MA0003557 (Federal) and Number 359 (State).

The period covered by this report is October 1, 1987 through December 31, 1987.


R. G. Bird

RDA/gp/1624

Attachments: 1. Summary
2. Discharge Monitoring Report

cc: U. S. Nuclear Regulatory Commission
Region I
631 Park Avenue
King of Prussia, PA 19406

U. S. Nuclear Regulatory Commission
Attn: Document Control Desk
Washington, D.C. 20555

Senior NRC Resident Inspector
Pilgrim Nuclear Power Station

IE 48
1/1