



Boston Edison

Pilgrim Nuclear Power Station
Rocky Hill Road
Plymouth, Massachusetts 02360-5599

October 15, 1998
BECO Ltr. 5.98.104

Planning and Administration (SPA)
U.S. Environmental Protection Agency
P.O. Box 8127
Boston, MA 02114-8127

Massachusetts Dept. of Environmental Protection
20 Riverside Drive
Lakeville, MA 02347

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 September 1998.

Should you have any questions on this report, please direct them to our Principal Marine Biologist, Mr. Robert Anderson, at (508) 830-7935.

Respectfully,


J.F. Alexander
Regulatory Affairs
Group Manager

RDA/dcg/598104

Attachments: 1. Summary
2. Discharge Monitoring Report

cc: U. S. Nuclear Regulatory Commission
Document Control Desk
Washington, DC 20555

Mass. Dept. of Environmental Protection
Office of Watershed Management
627 Main Street
Worcester, MA 01608

100143 U. S. Nuclear Regulatory Commission
Region I
475 Allendale Road
King of Prussia, PA 19406

Senior NRC Resident Inspector
Pilgrim Nuclear Power Station

9810200189 980930
PDR ADDCK 05000293
R PDR

1/1
IE25

ATTACHMENT 1 TO BECo LETTER 5.98.104

SUMMARY

PILGRIM I DISCHARGE MONITORING REPORT

In accordance with the Federal Clean Water Act, as amended (33USC 1251 et seq: the "CWA"), and the Massachusetts Clean Water Act, as amended (M.G.L.; Chap. 21, 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 September 1998.

I. Discharge Points Covered in this Report

<u>Discharge Point</u>	<u>Discharge Identification</u>
001	Condenser Cooling Water
002	Thermal Backwash for Biofouling Control
003	Intake Screen Wash
004, 005, 006, and 007	Yard Drains (April and September)
008	Sea Foam Suppression
010	Service Cooling Water
011	Makeup Water and Demineralizer Waste Discharge

II. Summary and Notes of Discharge Report

- A. The flows at points 001 and 010 are calculated from system pump capacity and are equal to the total for all pumps in each system running at full capacity for a 24-hour period. The flow at 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. Flows at points 003 and 008 are calculated from system pump capacity and mean operating time.
- B. The temperatures at points 001 and 002 are measured by resistance temperature detectors (RTD's).
- C. Periodically, total residual chlorine (TRC) concentration in the service cooling water (010) exceeds permit requirements (0.50 ppm daily average TRC and 1.00 ppm daily maximum TRC) prior to mixing with any other stream, primarily because of the number of service water pumps in operation. Chlorine injection levels are lowered as a corrective measure. The dilution provided by the PNPS circulating water flow keeps total residual chlorine concentrations discharged to Cape Cod Bay below the NPDES permit limit of 0.1 ppm.
- D. For stormwater outfalls 004, 005, 006 and 007, samples are collected by grab sampling. Samples are handled and stored in accordance with 40 CFR 136. No additional inputs to these stormwater outfalls occur downstream of the sampling locations.

- E. Intake traveling water screens were operated with dechlorination pumps on in September.
- F. No sawdust was applied to seek and seal PNPS condenser leaks in September 1998.
- G. The following boron and sodium nitrite discharges (ppm) occurred in September 1998 from discharge point #001. All discharges were below NPDES permit limits prior to entering Cape Cod Bay.

<u>Date Discharged</u>	<u>Gallons Discharged</u>	<u>Concentration Before Discharge</u>	<u>Concentration Discharged</u>
Boron			
9/17/98	9,519	1.0	0.0013
Sodium Nitrite			
9/17/98	9,519	45.0	0.0581

- H. By Telecon on October 1, 1998, the USEPA approved the use of PNPS NPDES Permit storm drain #005 for the intermittent discharge of Station heat and demineralizer water, used for testing the heating system, within NPDES Permit chemical and physical limits prior to entering Cape Cod Bay (BECO Telecon 4.98.009)
- I. September 1998 yard drain monitoring showed a pH value of 5.4 at yard drain #004 which is below the lower NPDES Permit Limit of 6.0. This may be attributable to a low natural rainwater pH of 4.4 at that time.

ATTACHMENT 2 to BECo LETTER 5.98.104

DISCHARGE MONITORING REPORT

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 **PILGRIM NUCLEAR POWER STATION**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

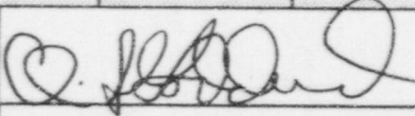
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
MA0003557
 PERMIT NUMBER
001 1
 DISCHARGE NUMBER
 MONITORING PERIOD
 FROM **98 09 01** TO **98 09 30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

Form Approved. OMB No. 2040-0004
 Approval expires 05-31-98
12345
CONDENSER COOLING WATER
 (SUBR S)
 F - FINAL
 MAJOR
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				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 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	95.9	(15)	0	99/99	RC
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	102	OF			CONTINUOUS
OXIDANTS, TOTAL RESIDUAL 34044 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0.06	0.09	(19)	0	WH/DS	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	0.1	0.1	MG/L		WHEN DISCH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	436.6	446.4	(03)	*****	*****	*****		0	99/99	ES
	PERMIT REQUIREMENT	447.0	510.0	MGD	*****	*****	*****	****			CONTINUOUS
TEMP. DIFF. BETWEEN INTAKE AND DISCHARGE 61576 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	29.7	(15)	0	99/99	CA
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	32	OF			CONTINUOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C.S. GODDARD
PLANT 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

TELEPHONE **508 830-8100**
 DATE **98 10 13**
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
PH SHALL NOT VARY MORE THAN 0.5 PH STANDARD UNITS FROM INTAKE WATER. SEE PERMIT PAGE 5 PARAGRAPHS M&N FOR BORON AND SODIUM NITRATE REPORTING REQUIREMENTS. ATTACH ALL RELATED REPORTS TO THIS FORM. A BARRIER NET SHALL BE MAINTAINED AT THE THERMAL END OF DISCHARGE CANAL AT ALL TIMES.

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 **PILGRIM NUCLEAR POWER STATION**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

MA0003557
 PERMIT NUMBER

002 1
 DISCHARGE NUMBER

THERMAL BACKWASH
(SUBR S)
F - FINAL
MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval expires 05-31-98
12345

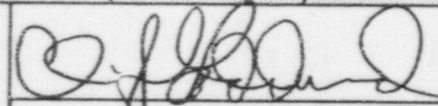
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
98	09	01	98	09	30
(20-21)		(22-23)		(24-25)	
		(26-27)		(28-29)	
				(30-31)	

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				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 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	107.6	(15)	0	99/99	RC
EFFLUENT GROSS VALUE FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	120	OF		CONTIN	CORD
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	18.6	(03)	*****	*****	*****	DAILY MX	0	WH/DS	ES
	PERMIT REQUIREMENT	*****	255.0	MGD	*****	*****	*****	****		WHEN	ESTIMA
			DAILY MX	MGD				****		DISCHR	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C.S. GODDARD
PLANT 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

TELEPHONE **508-830-8100**
 DATE **98 10 13**
 AREA CODE NUMBER YEAR MO DAY

COMMENTS 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 AS IF BACKFLUSHING TOOK PLACE FOR 24 CONTINUOUS HOURS. SEE PERMIT PAGE 8 FOR CONDITIONS REGARDING THE FREQUENCY OF DISCHARGE.

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 **PILGRIM NUCLEAR POWER STATION**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

MA0003557
 PERMIT NUMBER

003 A
 DISCHARGE NUMBER

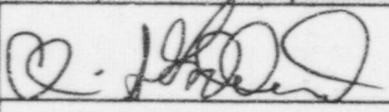
MONITORING PERIOD
 FROM **98 09 01** TO **98 09 30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

Form Approved.
 WQS No. 2040-0004
 Approval expires 05-31-98
12365

INTAKE SCREEN (SUBR S)
F - FINAL MAJOR

***** NO DISCHARGE *****
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (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 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.62	1.32	(03) MGD	*****	*****	*****			0 01/01	ES
	PERMIT REQUIREMENT	4.1 NO AVG	4.1 DAILY MX	MGD	*****	*****	*****	****	****	DAILY	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 C.S. GODDARD PLANT 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. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 6 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 	TELEPHONE	DATE		
			508 830-8108	10	13	

COMMENTS 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 SHELLFISH AND OTHER ORGANISMS COLLECTED OR TRAPPED ON INTAKE SCREEN SHOULD BE RETURNED TO WATER OF AMBIENT TEMP. SUFFICIENTLY DISTANT FROM INTAKE STRUCTURES TO PREVENT REINTRODUCMENT.

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 **PILGRIM NUCLEAR POWER STATION:**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

MA0003557
 PERMIT NUMBER

004 A
 DISCHARGE NUMBER

YARD DRAINS
(SUBR S)
F - FINAL
MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval Expires 05-31-98
12305

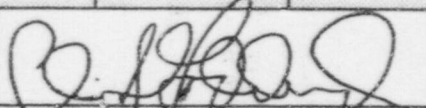
MONITORING PERIOD
 FROM YEAR **98** MO **09** DAY **01** TO YEAR **98** MO **09** DAY **30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***
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PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	6.0	6.0	(19) MG/L	0	02/YR	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	30 NO AVG	100 DAILY MX	MG/L		SEMI-ANNUAL	GRAB
OIL AND GREASE FREON EXTR-GRAY MET 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	1.6	1.6	(19) MG/L	0	02/YR	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	15 DAILY MX	MG/L		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C.S. GODDARD
PLANT 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

TELEPHONE **508.830.8100**
 DATE **98 10 13**
 AREA CODE NUMBER YEAR MO DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
 NAME **BOSTON ED #1 PILGRIM PLANT**
 ADDRESS **ROCKY HILL ROAD**
RFD #1
PLYMOUTH MA 02360
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16)
MA0003557
 PERMIT NUMBER

005 A
 DISCHARGE NUMBER

YARD DRAINS
(SUBR S)
F - FINAL
MAJOR

Form Approved.
 OMB No. 2040-0004.
 Approval expires 05-31-98
12365

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
98	09	01	98	09	30

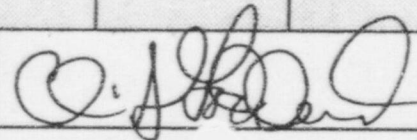
FROM (20-21) (22-23) (24-25) TO (26-27) (28-29) (30-31)

*** NO DISCHARGE ***
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PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0		*****	*****		*****	13.5	13.5	(19) MG/L	0	02/YR	GR
EFFLUENT GROSS VALUE		*****	*****	****	*****	30 NO AVG	100 DAILY MX	MG/L		SEMI-GRAB ANNUAL	
OIL AND GREASE FREON EXTR-GRAV MET 00556 1 0 0		*****	*****		*****	3.2	3.2	(19) MG/L	0	02/YR	GR
EFFLUENT GROSS VALUE		*****	*****	****	*****	REPORT	15 DAILY MX	MG/L		SEMI-GRAB ANNUAL	
	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
C.S. GODDARD
PLANT 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

TELEPHONE
508-830-8100
 AREA CODE NUMBER

DATE
98 10 13
 YEAR MO DAY

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

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 **PILGRIM NUCLEAR POWER STATION**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
MA0003557
 PERMIT NUMBER
006 A
 DISCHARGE NUMBER

YARD DRAINS
(SUBR 5)
F - FINAL
MAJOR

Form Approved.
 OMB No. 2040-0004
 Approval Expires 5-31-98
 12305

MONITORING PERIOD
 FROM YEAR MO DAY TO YEAR MO DAY
 FROM **98 09 01** TO **98 09 30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(2 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	5.3	5.3	(19) MG/L	0	02/YR	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	30 NO AVG	100 DAILY MX	MG/L		SEMI-ANNUAL	GRAB
OIL AND GREASE FREON EXTR-GRAV METH 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	2.7	2.7	(19) MG/L	0	02/YR	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	15 DAILY MX	MG/L		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C.S. GODDARD
PLANT 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]

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
508 830-8100
 AREA CODE NUMBER
 DATE
98 10 13
 YEAR MO DAY

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

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 **PILGRIM NUCLEAR POWER STATION**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
MA0003557
 PERMIT NUMBER
007 A
 DISCHARGE NUMBER
 MONITORING PERIOD
 FROM **98 09 01** TO **98 09 30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

YARD DRAINS
(SUBR S)
F - FINAL
MAJOR

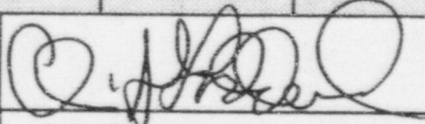
Form Approved
 OMB No. 2040-0004
 Approval Expires 05-31-98
12589

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	12.8	12.8	(19) MG/L	01/YR	GR	
	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	100 DAILY MX	MG/L			
OIL AND GREASE FREON EXTR-GRAV METR 00556 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	2.4	2.4	(19) MG/L	002/YR	GR	
	PERMIT REQUIREMENT	*****	*****	****	*****	REPORT	15 DAILY MX	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
C.S. GODDARD
PLANT 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 6 years.)


 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE **508-830-8100**
 DATE **98 10 13**
 AREA CODE NUMBER YEAR MO DAY

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

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 PILGRIM NUCLEAR POWER STATION
 LOCATION PLYMOUTH MA 02360
 ATTN: C.S. GODDARD, PLANT MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)

MA0003557
 PERMIT NUMBER

008 A
 DISCHARGE NUMBER

MONITORING PERIOD
 YEAR MO DAY YEAR MO DAY
 FROM 98 09 01 TO 98 09 30
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

SEA FOAM SUPPRESSOR NO DISCHARGE
 (SUBR S)
 F - FINAL
 MAJOR

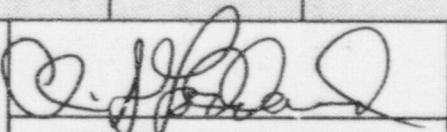
Form Approved.
 Approval expires 05-31-98
 12345

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			UNITS	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 50050 1 0 0 EFFLUENT GROSS VALUE	C	C	(03)	*****	*****	*****	MGD	0	01/01	ES	
	PERMIT REQUIREMENT	0.73 MO AVG	0.73 DAILY MX	MGD	*****	*****	*****	*****	DAILY	ESTIMA	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 C.S. GODDARD
 PLANT 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. § 1318. (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
 508 830-8100 98 10 13
 AREA CODE NUMBER YEAR MO DAY

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

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 **PILGRIM NUCLEAR POWER STATION**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
MA0003557
 PERMIT NUMBER
010 A
 DISCHARGE NUMBER
 MONITORING PERIOD
 FROM **98 09 01** TO **98 09 30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

Form Approved.
 PLANT SERVICE CODE **000000**
 (SUBR S)
 F - FINAL
 MAJOR
 Approval expires **05-31-98**
12345

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXIDANTS, TOTAL RESIDUAL 34044 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	0.2	0.4	(19) MG/L	0	01/01	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	0.5 MO AVG	1.0 DAILY MX	MG/L			CONTINUOUS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	13.9	*****	(03) MGD	*****	*****	*****		0	09/99	ES
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	19.4 MO AVG	*****	MGD	*****	*****	*****	****			CONTINUOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C.S. GODDARD
PLANT 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

TELEPHONE **508.830-8100**
 DATE **09 10 13**
 AREA CODE NUMBER YEAR MO DAY

COMMENTS 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 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 **PILGRIM NUCLEAR POWER STATION**
 LOCATION **PLYMOUTH MA 02360**
 ATTN: **C.S. GODDARD, PLANT MANAGER**

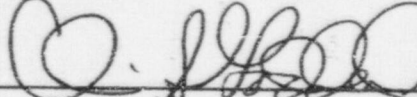
NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
 DISCHARGE MONITORING REPORT (DMR)
 (2-16) (17-19)
MA0003557
 PERMIT NUMBER
011 A
 DISCHARGE NUMBER
 MONITORING PERIOD
 FROM **98 09 01** TO **98 09 30**
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

Form Approved.
 MAKE UP WATER AND CONDENSATE
 (SUBR S)
 F - FINAL
 MAJOR
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	0	0	(19) MG/L	0	01/BA	GR
	PERMIT REQUIREMENT	*****	*****	****	*****	30 MO AVG	100 DAILY MX	MG/L		ONCE/ BATCH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0003	0.0003	(03) MGD	*****	*****	*****		0	WH/DS	ES
	PERMIT REQUIREMENT	0.015 MO AVG	0.06 DAILY MX	MGD	*****	*****	*****	****		WHEN DISCHR	ESTIMA
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
C.S. GODDARD
PLANT MANAGER
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 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
508-830-8100
 AREA CODE NUMBER
 DATE
98 10 13
 YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 SEE PAGE 5 OF PERMIT PARAGRAPH N FOR SODIUM NITRATE REPORTING REQUIERMENTS. ATTACH ALL RELATED REPORTS TO THIS FORM