

DOE ORDER #
9 6 RF 0 5 9 6 0

DIST	LTR	ENC
Bengal, P.		
Benson, C. A.		
Burdick, W. J.		
Evans, C. S.		
Findley, M.		
Guinn, L.		
Hopkins, J.		
Jenkins, K.		
Jierree, C.		
Konwinski, G.		
Law, J. E.	X	X
Lovseth, T. P.		
Luker, R. S.		
McAnally, J. L.		
Motyl, K. M.		
Primrose, A. L.		
Power, A.		
Rukavina, F.		
Steffen, D. E.		
Tyson, A. M.	X	X
Zeile, H.		



**Rocky Mountain
Remediation Services, L.L.C.**
... protecting the environment

Rocky Flats Environmental Technology Site
P.O. Box 464
Golden, Colorado 80402-0464
Phone: (303) 966-2678
Fax: (303) 966-8244



000064152

October 21, 1996

96-RF-05960
96-RM-ER-0138-DOE

Joseph A. Legare
Acting Assistant Manager, Environmental Compliance
DOE, RFFO

Attn.: J. Stover

MONTHLY DISCHARGE MONITORING REPORT - NPDES PERMIT NO. CO-0001333 - JLM-187-96

Action: Transmit to EPA and CDPHE

The September 1996 Discharge Monitoring Report (DMR), required by the Rocky Flats Plant National Pollutant Discharge Elimination System (NPDES) Permit is attached.

During the month of September 1996, there were no discharges from Pond A-3 (Outfall 002) or Pond C-2 (Outfall 007). Pond B-5 (Outfall 006) began discharge on 9/18/96, but was halted on 9/19/96 for 24 hours to allow for settling from a precipitation event of greater than 0.5 inches. Discharge resumed on September 20, 1996, but was again halted due to the possible contamination event at the T-3/T-4 trench areas. There was no impact to Site surface water from this event. Discharge was again restarted on September 23, 1996, and was continuous through September 30, 1996. There was continuous discharge from Pond B-3 (Outfall 001) and the Sewage Treatment Plant (Outfall STP) during the reporting period.

Pond A-4 (Outfall 005) outlet works construction project was completed by emptying the water used for hydrostatic testing the discharge pipe. The discharge lasted 10 minutes with approximately 300-500 gallons of total flow measured at the gauging station below the outlet works. The required samples for Non-volatile Suspended Solids (NVSS) and Total Chromium were collected. Based on a discussion between D. Terrell, EPA, and J. Stover of your staff on September 16, 1996, the quarterly WET testing requirement was waived as there was insufficient water discharged to reach other surface waters.

Quarterly Whole Effluent Toxicity (WET) testing results are included with this month's report. Toxicity for fathead minnows was shown in a sample collected from a July 1996 Pond B-5 discharge. No toxicity was shown for ceriodaphnia. The most probable cause for the toxicity is the combined effect of the total ammonia concentration (2.24 mg/l) and high pH (9.2 S.U.) which resulted in the formation of un-ionized ammonia. High pH is routinely seen at the terminal ponds during periods of hot weather as a result of increased algal growth. No toxicity was seen at the Sewage Treatment Plant during the quarter.

It is necessary that the Principal Executive Officer sign and date the letter and the DMR forms. Per verbal request of the EPA, forms for those discharge points which were not active are included with the notation of "No Discharge." Additional monitoring data as required by the NPDES Federal Facilities Compliance Agreement is attached on a separate sheet. The NPDES permit requires that the report be postmarked

DODD, R. P. X X
DUDSTAN, L. A. X X
LICHWEG, R. E. X X
HUFFMAN, F. M. X X

RMRS CC (ORO)	X	X
CORRES CONTROL	X	X
TRAFFIC		
CLASSIFICATION		
UCNI		
UNCLASSIFIED	X	X
CONFIDENTIAL		
SECRET		

AUTHORIZED CLASSIFIER
SIGNATURE
DOCUMENT CLASSIFICATION
REVIEW WAIVER PER
CLASSIFICATION OFFICE
DATE
IN REPLY TO RFP CC NO.

ACTION ITEM STATUS
 OPEN CLOSED
 PARTIAL

LTR APPROVALS:
ORIG & TYPIST INITIALS:

1/18

ADMIN RECORD
BZ-A-000481

Joseph A. Legare
October 21, 1996
96-RF-05960
Page 2

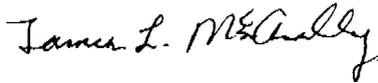
no later than October 28, 1996, and be sent to the following:

Mr. Don Terrell
8-ENF-T
Water Management Division
U.S. E.P.A., Region VIII
999 - 18th Street, Suite 500
Denver, CO 80202-2466

Colorado Department of Public Health and Environment
Attention: Mr. Robert Shukle
Monitoring and Enforcement Section
WQCD - PE - B2
4300 Cherry Creek Drive South
Denver, CO 80222-1530

If you have any questions or desire additional information on this matter please contact K. M. Motyl at extension 2172.

I certify that, to the best of my knowledge and that of my staff, the information used to fill out the DMR is complete and accurate.



James L. McAnally
President, RMRS L.L.C.

LAD:slm

Original and 1 cc - Joseph A. Legare

Attachments:
As Stated

cc:
J. Dion - DOE - Bldg. 460
J. Hill - Kaiser-Hill - Bldg. 111
G. H. Setlock - Kaiser-Hill - Bldg. T130C
D. A. Ward - SSOC - Bldg. 750

2

September 1996

Sewage Treatment Plant Effluent Metals Data

Metal, total	Result, ug/l
	<u>09/03/96</u>
Antimony	<60.0
Arsenic	<3.3
Beryllium	<5.0
Cadmium	<5.0
Copper	<25.0
Iron	<100.0
Lead	<3.0
Manganese	<15.0
Mercury	<0.2
Nickel	<40.0
Silver	<10.0
Zinc	<20.0

Sewage Treatment Plant Effluent Volatile Organic Compound Data

VOC	Result, ug/l
	<u>09/17/96</u>
Benzene	<10
Bromoform	<10
Carbon Tetrachloride	<10
Chlorobenzene	<10
Chlorodibromomethane	<10
Chloroethane	<10
Chloroform	4 J
Dichlorobromomethane	<10
1,1-Dichloroethane	<10
1,2-Dichloroethane	<10
1,1-Dichloroethylene	<10
1,2-Dichloropropane	<10
1,3-Dichloropropylene	<10
Ethylbenzene	<10
Methyl bromide	<10
Methyl chloride	<10
Methylene chloride	<10
1,1,2,2-Tetrachloroethane	<10
Tetrachloroethylene	<10
Toluene	<10
1,2-Trans-dichloroethylene	<10
1,1,1-Trichloroethane	<10
1,1,2-Trichloroethane	<10
Trichloroethylene	<10
Vinyl chloride	<10

J - Compound found, but below Practical Quantitation Limit (PQL). Quantitation is estimated.

REGION VIII GUIDANCE FOR ACUTE WHOLE EFFLUENT REPORTING

PERMIT NAME RF NPDES No CO-000/333 OUTFALL NO. 995

50% MORTALITY TEST: PASS FAIL LC50 > 100 %

Test Animal & Age Ceriodaphnia dubia ^{<24 hrs.} Sample type, Time & Date Grabs; 0900, 1100, 1300, 1500

Analysis Time & Date: Begin 1430 7/10/96 End 1427 7/12/96 7/9/96

Dilutions (% Effluent) *

NUMBER ALIVE	0%	6.25%	12.5%	25%	50%	75%	100%
Start of test	20		20	20	20	20	20
After 24 hrs	20	20	20	20	20	20	20
After 48 hrs	20	20	20	20	20	20	20
After 72 hrs	20						
After 96 hrs	20						

* normally, a minimum of five plus control (0%)

Dilutions (% Effluent)

MAX/MIN VALUES	0%	6.25%	12.5%	25%	50%	75%	100%
Diss. Oxygen	7.4/6.9	1.0	7.6/6.6	7.6/6.7	7.6/6.8	7.6/6.9	7.6/7.1
Temp °C	20.7/19.2	1	20.8/19.0	20.9/19.0	21.0/19.1	21.0/19.3	20.7/19.5

Receiving Water Used For Dilution (Y or N)? N

Hardness: Receiving Water NA Effluent 163 Recon. Water (if used) 162

Initial Total Residual Cl₂ in 100% Effluent: <0.01

Initial NH₃ (as N) in 100% Effluent: 23.2

pH in 100% Effluent: Initial 7.3 After 24 Hours: 7.9

pH in 0% Control: Initial 8.0 After 24 Hours: 8.0

COMMENTS _____

THE SEACREST GROUP

ANALYST'S NAME Jim Case, Stacie Duncan

LABORATORY _____

SIGNATURE/DATE Jelly X. Case 7/26/96

7/2/93

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REGION VIII GUIDANCE FOR ACUTE WHOLE EFFLUENT REPORTING

PERMIT NAME RF NPDES No CO-000/333 OUTFALL NO. 995

50% MORTALITY TEST: PASS FAIL LC50 >100 %

Test Animal & Age Pimephales promelas ^{14 days} Sample type, Time & Date Grebs: 0900, 1100, 1300, 1500

Analysis Time & Date: Begin 1030 7/10/96 End 1030 7/14/96 7/9/

Dilutions (% Effluent) *

NUMBER ALIVE	0%	6.25%	12.5%	25%	50%	75%	100%
Start of test	20		20	20	20	20	20
After 24 hrs	20		20	20	20	20	20
After 48 hrs	20		20	20	20	20	20
After 72 hrs	20		19	20	20	20	20
After 96 hrs	20		19	20	20	20	20

* normally, a minimum of five plus control (0%)

Dilutions (% Effluent)

MAX/MIN VALUES	0%	6.25%	12.5%	25%	50%	75%	100%
Diss. Oxygen	7.0/5.2		6.9/5.5	6.8/5.6	6.8/5.2	7.0/5.3	7.0/4.4
Temp °C	21.0/20.2		21.0/20.4	21.0/20.3	21.0/20.3	20.9/20.2	20.9/20.4

Receiving Water Used For Dilution (Y or N)? N

Hardness: Receiving Water NA Effluent 143 Recon. Water (if used) 165

Initial Total Residual Cl, in 100% Effluent: <0.01

Initial NH₃ (as N) in 100% Effluent: 23.2

pH in 100% Effluent: Initial 7.7 After 24 Hours: 7.9

pH in 0% Control: Initial 8.7 After 24 Hours: 7.5

COMMENTS _____

THE SEACREST GROUP

ANALYST'S NAME Tim Nickels, John Zastrow

LABORATORY _____ SIGNATURE/DATE Jelly X. Carr 7/22/96

REGION VIII GUIDANCE FOR ACUTE WHOLE EFFLUENT REPORTING

PERMIT NAME RF NPDES No 00-000/333 OUTFALL NO. B5

50% MORTALITY TEST: PASS FAIL LC50 97.6%

Test Animal & Age Pimephales promelas ^{14d.} Sample type, Time & Date Grab; 0950; 7/22/96

Analysis Time & Date: Begin 1030 7/23/96 End 1040 7/27/96

Dilutions (% Effluent) *

NUMBER ALIVE	0%	6.25%	12.5%	25%	50%	75%	100%
Start of test	20	/	20	20	20	20	20
After 24 hrs	20	/	20	20	20	19	9
After 48 hrs	20	/	20	20	19	19	9
After 72 hrs	20	/	20	20	19	19	9
After 96 hrs	20	/	20	20	19	19	9

* normally, a minimum of five plus control (0%)

Dilutions (% Effluent)

MAX/MIN VALUES	73 0%	6.25%	12.5%	25%	50%	75%	100%
Diss. Oxygen	7.0 6.8	/	7.3/6.3	7.2/6.3	7.2/6.6	7.3/6.5	7.4/6.4
Temp °C	21.0/20.0	/	20.9/20.0	20.9/20.0	20.8/20.0	20.8/20.0	20.9/19.9

Receiving Water Used For Dilution (Y or N)? N

Hardness: Receiving Water NA Effluent 104 Recon. Water (if used) 162

Initial Total Residual Cl₂ in 100% Effluent: <0.01

Initial NH₃ (as N) in 100% Effluent: 2.24

pH in 100% Effluent: Initial 9.2 After 24 Hours: 8.7

pH in 0% Control: Initial 8.9 After 24 Hours: 8.8

COMMENTS _____

LABORATORY LAUREST GROUP

ANALYST'S NAME Tim Nickels John Zastrow

LABORATORY _____

SIGNATURE/DATE [Signature] 7/29/96

7/2/93

Facility Name/Address (Inclusive)
 NAME USDOE-ROCKY FLATS PLANT
 ADDRESS BOX 928
 GOLDEN CO 80402

STP A
 DISCHARGE NUMBER
 C00001333
 PERMIT NUMBER

MAJOR
 F - FINAL
 DISCHARGE FROM 5/10/96 TO 3/31/96
 Continuous Discharge 9/1/96 - 9/30/96
 *** NO DISCHARGE ***

Attachment 3
 96-RF-05960
 Page 1 of 1
 Form App. 32040-0004

FACILITY LOCATION
 ATTN: ~~JAMES W. WATKINS~~ Joseph A. Legare
 MONITORING PERIOD
 YEAR 96 MO 09 DAY 01 TO YEAR 96 MO 09 DAY 30
 FROM (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX. (63-67)	FREQUENCY OF ANALYSIS (64-67)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
PH	*****	*****	*****	6.7	7.1	(12) S.U.	0	7/7	grab
00400 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	6.0	9.0	SU	0	DAILY	GRAB
SOLIDS, TOTAL	*****	*****	*****	MINIMUM	MAXIMUM	SU	0	DAILY	GRAB
SUSPENDED	*****	*****	*****	< 4	< 4	mg/l	0	2/7	comp
00530 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	30DA AVG	7 DA AVG	MG/L	0	TWICE/WEEK	COMPOS
OIL AND GREASE	*****	*****	*****	*****	no discharge	mg/l	N/A	N/A	N/A
FREON EXTR-GRAV METH	*****	*****	*****	*****	10	mg/l	0	DAILY	GRAB
00556 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	DAILY MX	MG/L	0	2/7	comp
PHOSPHORUS, TOTAL (AS P)	*****	*****	*****	3.2	4.5	mg/l	0	TWICE/WEEK	COMPOS
00665 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	30DA AVG	DAILY MX	MG/L	0	TWICE/WEEK	COMPOS
CHROMIUM, TOTAL (AS CR)	*****	*****	*****	< 0.008	< 0.010	mg/l	0	1/7	comp
01034 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	30DA AVG	DAILY MX	MG/L	0	WEEKLY	COMPOS
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	(0.3) MGD	*****	*****	MG/L	N/A	Contin	Rcordr
50050 1 0 0 EFFLUENT GROSS VALUE	REPORT	0.20	0.34	*****	*****	MG/L	N/A	CONTIN	RCORDR
CHLORINE, TOTAL	30DA AVG	*****	DAILY MX	*****	*****	MG/L	N/A	CONTIN	UOUS
RESIDUAL	*****	*****	*****	0.01	0.01	mg/l	N/A	7/7	grab
50060 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	REPORT	REPORT	MG/L	N/A	DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph A. Legare
 Acting Asst. Mgr.
 Environmental Compliance, DOE
 TYPED OR PRINTED
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 803 | 966-7000
 AREA CODE NUMBER
 TELEPHONE DATE
 COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 IF THERE IS A VISIBLE SHEEN OF OIL AND GREASE REPORTED, A GRAB SAMPLE MUST ALSO BE TAKEN AND REPORTED ON THIS DMR. IF NO VISIBLE SHEEN WAS REPORTED THEN OIL AND GREASE, SHOULD BE REPORTED AS NO DISCHARGE FOR THE MONTH.
 EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.
 REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.
 00269/940107-1736
 JANEIE
 PAGE 1 OF 1

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME USDOE-ROCKY FLATS PLANT
 ADDRESS P O BOX 928
GOLDEN CO 80402

MAJOR

C00001333
 PERMIT NUMBER

STP A
 DISCHARGE NUMBER

F - FINAL OMB No. 2040-0004
 DISCHARGE FROM MANAGED-TREATMENT PT
 Continuous Discharge 9/1/96 - 9/30/96
 *** NO DISCHARGE ***

FACILITY
 LOCATION
 ATTN: JAMESXXXXXXXXXX Joseph A. Legare

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-65)	SAMPLE TYPE (69-70)
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
COLIFORM, FECAL	*****	*****	*****	*****	< 1	(13) #/100ML	0	2/7	grab
GENERAL	*****	*****	*****	*****	200	400	0	TWICE/ WEEK	GRAB
74055 1 0 0	*****	*****	*****	*****	300A GEO	7 DA GEO 100ML	0	TWICE/ WEEK	GRAB
EFFLUENT GROSS VALUE	*****	*****	*****	*****	2.0	(19) mg/l	0	2/7	Comp
800 CARBONACEOUS	*****	*****	*****	*****	10	25	0	TWICE/ WEEK	COMPOS
05 DAY, 20C	*****	*****	*****	*****	300A AVG	DAILY MX MG/L	0	TWICE/ WEEK	COMPOS
80082 1 0 0	*****	*****	*****	*****	*****	*****	0	7/7	visua
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
OIL AND GREASE	*****	0	(94)	*****	*****	*****	0	DAILY	VISUAL
VISUAL	*****	INST MAX	NO=0	*****	*****	*****	0	DAILY	VISUAL
84066 1 0 0	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL
PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	0	DAILY	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph A. Legare
 Acting Asst. Mgr.
 Environmental Compliance, DOE

TYPED OR PRINTED REF0

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 IF THERE IS A VISIBLE SHEEN OF OIL AND GREASE REPORTED, A GRAB SAMPLE MUST ALSO BE
 THIS DMR. IF NO VISIBLE SHEEN WAS REPORTED THEN OIL AND GREASE, 00556, SHOULD
 BE DISCHARGE FOR THE MONTH.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 303 966-7000

AREA CODE NUMBER

TELEPHONE DATE

9 REPLACES EPA FORM T-40 WHICH MAY NOT BE USED

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
 NAME **USDOE-ROCKY FLATS PLANT**
 ADDRESS **PO BOX 928**
GOLDEN
CO 80402

PERMIT NUMBER
C00001333

DISCHARGE NUMBER
STP W

MAJOR
F - FINAL
WHOLE EFFLUENT TREATMENT
Continuous discharge 7/1/96 - 9/30/96
***** NO DISCHARGE *****

Form Approved.
 OMB No. 2040-0004

MONITORING PERIOD
 YEAR **96** MO **07** DAY **01**
 TO YEAR **96** MO **09** DAY **30**

ATTN: ~~XXXXXXXXXXXX~~ **Joseph A. Legare**

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (46-53)			NO EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)			
P/F STAIRE 48HR ACU CERIODAPHNIA	*****	*****		*****	> 100	(9A)	0	Qtrly	comp
TGM38 1 0 0 EFFLUENT GROSS VALUE	*****	*****	****	*****	REPORT PASS=0 DAILY MX FAIL=1		0	QTRLY	COMPOS
P/F STAIRE 96HR ACU PIMEPHALES PROMELAS	*****	*****	****	*****	> 100	(9A)	0	Qtrly	comp
TGN6C 1 0 0 EFFLUENT GROSS VALUE	*****	*****	****	*****	REPORT PASS=0 DAILY MX FAIL=1		0	QTRLY	COMPOS
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
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
Joseph A. Legare
Acting Asst. Mgr.
Environmental Compliance, DOE,
 TYPED OR PRINTED **RFFD**

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
303 966-7000

AREA CODE NUMBER
303 966-7000

TELEPHONE

DATE

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

PERMITTEE NAME/ADDRESS (Include Facility Name, Location, City, State, Zip)
 NAME **USDOE ROCKY FLATS PLANT**
 ADDRESS **Q BOX 928 GOLDEN CO 80402**

PERMIT NUMBER **C00001333**
 DISCHARGE NUMBER **001 A**

Form Approved. OMB No. 2040-0004
 F - FINAL FROM POND Approval expires 10-31-94
 Continuous discharge 9/1/96 - 9/30/96
 *** NO DISCHARGE ***

FACILITY **JANETI** LOCATION **ROCKY FLATS PLANT** ATTN: **Joseph A. Legare**

MONITORING PERIOD FROM **93** YEAR **09** DAY **01** TO **93** YEAR **09** DAY **30**

PARAMETER (32-37)	(3 Card Only) QUANTITY OR LOADING (54-61)		(4 Card Only) QUANTITY OR CONCENTRATION (54-61)		AVERAGE (46-53)	MINIMUM (38-45)	MAXIMUM (34-61)	UNITS	NO. EX (62-67)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE	MAXIMUM	AVERAGE	MAXIMUM							
800, 5-DAY (20 DEG. C)	*****	*****	*****	*****	*****	*****	*****	(19)	N/A	1/7	grab
00310 1 0 1 EFFLUENT GROSS VALUE	*****	*****	*****	*****	5.7	*****	7.5	mg/l	*****	WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	*****	*****	*****	*****	*****	*****	*****	MG/L	*****	WEEKLY	GRAB
00530 1 0 1 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	MG/L	*****	WEEKLY	GRAB
NITROGEN, NITRATE TOTAL (AS N)	*****	*****	*****	*****	*****	*****	*****	MG/L	*****	WEEKLY	GRAB
00620 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	3.6	*****	4.7	MG/L	0	1/7	grab
CHLORINE, TOTAL RESIDUAL	*****	*****	*****	*****	*****	*****	*****	MG/L	*****	WEEKLY	GRAB
50060 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	0.08	*****	0.08	MG/L	0	7/7	grab
BOD, CARBONACEOUS	*****	*****	*****	*****	*****	*****	*****	MG/L	*****	DAILY	GRAB
05 DAY, 20C	*****	*****	*****	*****	1.3	*****	1.6	MG/L	N/A	1/7	grab
80032 1 0 1 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	MG/L	*****	WEEKLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 Joseph A. Legare
 Acting Asst. Mgr.
 Environmental Compliance, DOE
 TYPED OR PRINTED
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 303 966-7000
 AREA CODE NUMBER
 TELEPHONE
 DATE
 YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 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. AM ADVISE THAT INFORMATION IS 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 include fines up to \$10,000 and or maximum imprisonment of between 6 months and 3 years.)

PERMITTEE NAME/ADDRESS (Include Facility Name and location if different)
NAME USDOE ROCKY FLATS PLANT

ADDRESS P O BOX 928
GOLDEN CO 80402

00001333
PERMIT NUMBER

002 A
DISCHARGE NUMBER

MAJOR

Form Approved.
OMB No. 2040-0004
DISCHARGE ~~FORM~~ NO DISCHARGE ~~TABLES~~ TABLES 10-31-94

MONITORING PERIOD
FROM YEAR 98 MO 09 DAY 01 TO YEAR 98 MO 09 DAY 30

ATTN: ~~XXXXXXXXXXXXXXXXXX~~ Joseph A. Legare

*** NO DISCHARGE ~~TABLES~~ TABLES ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	(3 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	*****	*****			*****				
00400 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	6.0 MINIMUM	*****	9.0 MAXIMUM		DAILY GRAB	
NITROGEN, NITRATE TOTAL (AS N)	*****	*****	*****	*****	*****	*****		DAILY GRAB	
00620 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	20 DAILY MX		DAILY GRAB	
FLOW IN CONDUIT OR THRU TREATMENT PLANT	*****	*****	(03)	*****	*****	*****		DAILY INSTANT	
50050 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****		DAILY INSTANT	
SAMPLE MEASUREMENT									
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph A. Legare
Acting Asst. Mgr.
Environmental Compliance, DOE

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 FOR 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
303 966-7000
AREA CODE NUMBER

TELEPHONE DATE
YEAR MO DAY

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

NO CHANGE FROM REQUIREMENTS PRIOR TO FFCA - SEE PAGE 8 OF THE PERMIT. THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OTHER THAN TRACE AMOUNTS. COMPOSITE SAMPLING FOR NITRATES IS ALLOWED.

SEE PERMIT

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used.

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

003577940107-1736

PAGE 1 OF 1
JANET E

PERMITTEE NAME/ADDRESS (include Facility Name and Location if different)
USOUE-ROCKY FLATS PLANT
GOLDEN
ADDRESS BOX 923

FACILITY
GOLDEN
LOCATION
ATTN: ~~XXXXXXXXXXXX~~ Joseph A. Legare

PERMIT NUMBER
C00001333

DISCHARGE NUMBER
006 W

MONITORING PERIOD
 FROM YEAR **76** DAY **07** TO YEAR **76** DAY **30**

MAJOR
F - FINAL
WHOLE EFFLUENT TREATMENT SYSTEM (WETTS)
Discharge 7/17/96-7/31/96, 9/18/96-9/19/96
***** NO DISCHARGE 1--1 ***9/20/96 a**

Form Approved.
 OMB No. 2040-0004

NOTE: Read instructions before completing this form. 9/23

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (46-53)	UNITS (46-53)	AVERAGE (46-53)	MAXIMUM (46-53)	UNITS (46-53)			
P/F STAYRE 48HR ACU	*****	*****	(9A)	> 100		(9A)	0	Qtrly	grab
CERIODAPHNIA	*****	*****		*****	REPORT PASS=0			QTRLY	GRAB
TGM38 1 0 0	*****	*****		*****	DAILY MX FAIL=1				
EFFLUENT GROSS VALUE	*****	*****		*****	(9A)				
P/F STAYRE 96HR ACU	*****	*****		*****	97.6		1	Qtrly	grab
PIMEPHALES PROMELAS	*****	*****		*****	REPORT PASS=0			QTRLY	GRAB
TGN6C 1 0 0	*****	*****		*****	DAILY MX FAIL=1				
EFFLUENT GROSS VALUE	*****	*****		*****					
SAMPLE MEASUREMENT									
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MAJOR

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

C00001333
PERMIT NUMBER

007 A
DISCHARGE NUMBER

MONITORING PERIOD
FROM **96 09 01** TO **96 09 30**
YEAR MO DAY

LOCATION
ATTN: ~~XXXXXXXXXXXX~~ **Joseph A. Legare**

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

PARAMETER (32-37)	QUANTITY OR LOADING (54-61)			QUALITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)			
FLOW RATE	*****	*****	(03)	*****	*****	*****			
00056 1 0 0 EFFLUENT GROSS VALUE	*****	*****	REPORT DAILY MX MGD	*****	*****	*****		DAILY GRAB	
CHROMIUM, TOTAL (AS CR)	*****	*****	*****	*****	*****	(28)			
01034 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****		ONCE/ MONTH	
DURATION OF DISCHARGE	*****	*****	*****	*****	*****	*****			
81381 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****		SEE PERMIT	NOT AT PERMIT

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph A. Legare
Acting Asst. Mgr.
Environmental Compliance, DOE
TYPED OR PRINTED **RF10**

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
303 966-7000

TELEPHONE DATE

AREA CODE NUMBER YEAR MO DAY

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 INFORMATION IS SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION. THERE ARE THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 23 U.S.C. § 1319. Penalties under these statutes may include fines up to \$19,000 and/or maximum imprisonment of between 6 months and 5 years.

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

C0001333 PERMIT NUMBER
007 W DISCHARGE NUMBER

MAJOR
F - FINAL OMB No. 2040-0004
WHOLE EFFLUENT TREATMENT PLANT

Form Approved.

MONITORING PERIOD
FROM YEAR 90 MO 07 DAY 01 TO YEAR 90 MO 09 DAY 30

ATTN: ~~JANEITE~~ Joseph A. Legare

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

PARAMETER (32-37)	(1 Card Only) QUANTITY OR LOADING (54-61)			(4 Card Only) QUALITY OR CONCENTRATION (46-53)			NO. EX. (62-63)	SAMPLE TYPE (69-70)
	AVERAGE (46-51)	MAXIMUM (54-55)	UNITS (54-56)	MINIMUM (38-43)	AVERAGE (46-53)	MAXIMUM (54-61)		
P/F STATRE 43HR ACU CERIODAPHNIA TGM38 1 0 0	*****	*****		*****	*****	(9A)		
EFFLUENT GROSS VALUE	*****	*****		*****	*****	REPORT PASS=0 DAILY MX FAIL=1 (9A)		QTRLY GRAB
P/F STATRE 96HR ACU PIMEPHALES PROMELAS TGM6C 1 0 0	*****	*****		*****	*****	REPORT PASS=0 DAILY MX FAIL=1 (9A)		QTRLY GRAB
EFFLUENT GROSS VALUE	*****	*****		*****	*****	REPORT PASS=0 DAILY MX FAIL=1 (9A)		QTRLY GRAB
SAMPLE MEASUREMENT								
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NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Joseph A. Legare
Acting Asst. Mgr.
Environmental Compliance, DOE
TYPED OR PRINTED
18/18

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 18 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
303 AREA CODE
966-7000 TELEPHONE NUMBER

TELEPHONE DATE

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