



PPG Industries, Inc. Chemicals P.O. Box 1000 Lake Charles, Louisiana 70602

July 13, 1992

Ms. Diana Gamble
U.S. Environmental Protection Agency
Water Management Division
Enforcement Branch (6WE)
1445 Ross Avenue
Dallas, TX 75202-2733

RE: June 1992 DMR - LA0000761

Dear Ms. Gamble:

Enclosed is the DMR for June, 1992. No exceedences of permit limitations occurred this month.

If you have any questions concerning this report, please contact Mark W. Wood at (318) 491-4450.

Respectfully,

A handwritten signature in dark ink, appearing to read 'D. C. Angell', is written over a horizontal line.

D. C. Angell
Works Director, Environmental Assurance

SL 024823

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

NAME P.L.S. & S.

ADDRESS P.O. BOX 1006

LAKE CHARLES

LA 70602

FACILITY

LOCATION

ATTN: TOM G. BROWN, WORKS MANAGER

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

(216)

(1719)

LA000761

101 A

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	<u>92</u>	<u>06</u>	<u>01</u>		<u>92</u>	<u>06</u>	<u>30</u>
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

1A J08

Form Approved.

OMB No. 2040-0004.

F - FINAL Approval expires 6-30-91.

PPG CANAL PLANT A

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

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)	SA T (69)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT	1047	2607	(20)	*****	*****	*****	()	0	THREE/WEEK	0
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1431 DAILY AV	3021 DAILY MX	LBS/DY	*****	*****	*****	*** ****		THREE/CON WEEK	
C PER, TOTAL (AS CU) 01042 1 0 0	SAMPLE MEASUREMENT	1.5	2.7	(26)	*****	*****	*****	()	0	THREE/WEEK	0
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	9.6 DAILY AV	23.9 DAILY MX	LBS/DY	*****	*****	*****	*** ****		THREE/CON WEEK	
NICKEL, TOTAL (AS NI) 01067 1 0 0	SAMPLE MEASUREMENT	2.6	7.0	(26)	*****	*****	*****	()	0	THREE/WEEK	0
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	7.4 DAILY AV	19.3 DAILY MX	LBS/DY	*****	*****	*****	*** ****		THREE/CON WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	3.06	4.59	(03)	*****	*****	*****	()	NA	CONTINUOUS	0
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	*****	*****	*****	*** ****		CONTINUOUS	
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	0.2	0.6	(26)	*****	*****	*****	()	0	THREE/WEEK	0
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	10.2 DAILY AV	30.1 DAILY MX	LBS/DY	*****	*****	*****	*** ****		THREE/CON WEEK	
M' CURY, TOTAL (AS HG) 71900 1 0 0	SAMPLE MEASUREMENT	0.03	0.05	(26)	*****	*****	*****	()	0	THREE/WEEK	0
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.13 DAILY AV	0.30 DAILY MX	LBS/DY	*****	*****	*****	*** ****		THREE/CON WEEK	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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 18 USC § 1339. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

Tom G. Brown

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

92 07

AREA CODE

NUMBER

YEAR

MO

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

SL 024824

Facility Name/Location (if different)

NAME PL 100ADDRESS PL 100LA 7000LA 7000

DISCHARGE MONITORING REPORT (DMR)

(216)

(1719)

LA 7000

PERMIT NUMBER

LA 7000

DISCHARGE NUMBER

1000

Form Approved.

OMB No. 2040-0004.

Final Approval expires 6-30-91.

CPC CANAL PLANT B

FACILITY

LOCATION

ATTN: TOM G. BROWN, WORKS MANAGER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	72	06	01		72	06	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)		(3 Card Only) QUANTITY OR LOADING (46-51)			(4 Card Only) QUALITY OR CONCENTRATION (46-51)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMI TYP (69)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
BOD, 5-DAY (20 DIS. C)	SAMPLE MEASUREMENT	(NOT REQ'd BY PERMIT)		(20)	*****	*****	*****	()	NA	
30310 1 0 0 0	PERMIT REQUIREMENT	OPTIONAL DAILY AV.	OPTIONAL DAILY MX	LBS/DY	*****	*****	*****	***	WEEKLY	CONF.
EFFLUENT GROSS VALUE								***		
SOLIDS, TOTAL SOLIDS	SAMPLE MEASUREMENT	1499	2651	(20)	*****	*****	*****	()	0	THREE/WEEK COM
00030 1 0 0 0	PERMIT REQUIREMENT	4270	51865	LBS/DY	*****	*****	*****	***	THREE/WEEK	CONF.
EFFLUENT GROSS VALUE		DAILY AV.	DAILY MX					***	WEEK	
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	7.3	18.1	(20)	*****	*****	*****	()	0	THREE/WEEK COM
01042 1 0 0 0	PERMIT REQUIREMENT	18.2	49.3	LBS/DY	*****	*****	*****	***	THREE/WEEK	CONF.
EFFLUENT GROSS VALUE		DAILY AV.	DAILY MX					***	WEEK	
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	5.0	14.9	(20)	*****	*****	*****	()	0	THREE/WEEK COM
01067 1 0 0 0	PERMIT REQUIREMENT	10.2	26.8	LBS/DY	*****	*****	*****	***	THREE/WEEK	CONF.
EFFLUENT GROSS VALUE		DAILY AV.	DAILY MX					***	WEEK	
CARBON TETRACHLORIDE	SAMPLE MEASUREMENT	0	0	(20)	*****	*****	*****	()	NA	THREE/WEEK COM
32102 1 0 0 0	PERMIT REQUIREMENT	REPORT DAILY AV.	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	CONF.
EFFLUENT GROSS VALUE								***	WEEK	
CHLOROPHORM	SAMPLE MEASUREMENT	9.9	22.0	(20)	*****	*****	*****	()	NA	THREE/WEEK COM
32100 1 0 0 0	PERMIT REQUIREMENT	REPORT DAILY AV.	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	CONF.
EFFLUENT GROSS VALUE								***	WEEK	
CHLOROPHANE, TOTAL WEIGHT	SAMPLE MEASUREMENT	0.1	0.2	(20)	*****	*****	*****	()	NA	THREE/WEEK COM
34011 1 0 0 0	PERMIT REQUIREMENT	REPORT DAILY AV.	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	CONF.
EFFLUENT GROSS VALUE								***	WEEK	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS MANAGER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

92 07

AREA CODE

NUMBER

YEAR

MO

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

FORWARD TO EPA 01/01/91.

SL 024825

Facility Name/Location (if different)

NAME LA 70002ADDRESS LA 70002LA 70002

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

LA 70002

PERMIT NUMBER

LA 70002

DISCHARGE NUMBER

AD 1A

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

PPG CATAL PLANT B

FACILITY

LOCATION

ATTN: TOM G. BROWN, WORKS MANAGER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	72	06	01		72	06	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)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	BANI TYP (69)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
HEXACHLOROCYCLOPENTADIENE	SAMPLE MEASUREMENT	0.12	0.34	(26)	*****	*****	*****	()	NA	THREE/WEEK COM
34391 1 0 1	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	COM
EFFLUENT GROSS VALUE								****		
METHYLENE CHLORIDE	SAMPLE MEASUREMENT	0.1	0.3	(26)	*****	*****	*****	()	NA	THREE/WEEK COM
34423 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	COM
EFFLUENT GROSS VALUE								****		
TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	0.6	2.7	(26)	*****	*****	*****	()	NA	THREE/WEEK COM
34475 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	COM
EFFLUENT GROSS VALUE								****		
1,1-DICHLOROETHANE	SAMPLE MEASUREMENT	0.1	0.3	(26)	*****	*****	*****	()	NA	THREE/WEEK COM
34496 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	COM
EFFLUENT GROSS VALUE								****		
1,1-DICHLOROETHYLENE	SAMPLE MEASUREMENT	0.3	0.8	(26)	*****	*****	*****	()	NA	THREE/WEEK COM
34501 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	COM
EFFLUENT GROSS VALUE								****		
1,1,1-TRICHLORO-ETHANE	SAMPLE MEASUREMENT	0.2	0.4	(26)	*****	*****	*****	()	NA	THREE/WEEK COM
34506 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	COM
EFFLUENT GROSS VALUE								****		
1,1,2-TRICHLORO-ETHANE	SAMPLE MEASUREMENT	0.6	4.6	(26)	*****	*****	*****	()	NA	THREE/WEEK COM
34511 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LBS/DY	*****	*****	*****	***	THREE/WEEK	COM
EFFLUENT GROSS VALUE								****		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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 18 USC § 1339. (Penalties under these statutes may include fines up to \$100,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

92 07

AREA CODE

NUMBER

YEAR

MO

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

PERMIT NUMBER 17/12/91.

SL 024826

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

NAME PPG IND.

ADDRESS P. O. BOX 1000

LAKE CHARLES

LA 70602

FACILITY

LOCATION

ATTN: TOM G. BROWN, WORKS MANAGER

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

LA0000701

PERMIT NUMBER

201 A

DISCHARGE NUMBER

1aJ0d

Form Approved.

OMB No. 2040-0004.

F - FINAL Approval expires 6-30-91.

PPG CANAL PLANT B

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	06	01		92	06	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)		(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)	SAMP TYP (69-7)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
1,2-DICHLOROETHANE, TOTAL WEIGHT 34531 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.6	10.7	(26)	*****	*****	*****	()	NA	THREE/WEEK	COM
	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	***			
1, TRANS-DICHLORO- ETHYLENE 34546 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	1.3	(26)	*****	*****	*****	()	NA	THREE/WEEK	COM
	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	***			
VINYL CHLORIDE 39175 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.0	0.3	(26)	*****	*****	*****	()	NA	THREE/WEEK	COM
	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	**			
TRICHLOROETHYLENE 39180 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.6	1.9	(26)	*****	*****	*****	()	NA	THREE/WEEK	COM
	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	***			
HEXACHLOROBENZENE 39700 1 0 1 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.06	0.16	(26)	*****	*****	*****	()	NA	THREE/WEEK	COM
	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	***			
FLUORIDE, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	10.42	12.76	(03)	*****	*****	*****	()	NA	CONTINUOUS	ROO
	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	MGD	*****	*****	*****	***			
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.9	3.6	(26)	*****	*****	*****	()	0	THREE/WEEK	GRAI
	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	***			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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.)

Amil C. Angell
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

92 07

AREA
CODE

NUMBER

YEAR

MO

DAY

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

PERMIT MODIFIED 07/01/91.

SL 024827

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

NAME PPG INDU

ADDRESS P.O. BOX 1000

LAKE CHARLES LA 70602

FACILITY

LOCATION

ATTN: TON G BROWN, WORKS MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

LA0000701

PERMIT NUMBER

(17-19)

201 A

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 92 MO 06 DAY 01 TO YEAR 92 MO 06 DAY 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NAJUD

Form Approved.

OMB No. 2040-0004.

F - FINAL Approval expires 6-30-91.

PPG CANAL PLANT B

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

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)	SAM. TYP (69-7)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINATED HYDRO- CARBONS, GENERAL 74052 1 0 0	SAMPLE MEASUREMENT	15	32	(26)	*****	*****	*****	()	0	THREE/WEEK COM	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY				***			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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

318 491-4500

DATE

92 07

AREA
CODE

NUMBER

YEAR

MO

D.

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

PERMIT MODIFIED 07/01/91.

SL 024828

Facility Name/Location (if different)

NAME PPG 2000

ADDRESS P. O. BOX 2000

LAKE CHARLES

LA 70022

FACILITY

LOCATION

ATTN: TOM G. BROWN, WORKS MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(216)

(1719)

LA000701

JUL 1

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	06	01		92	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJON

Form Approved.

OMB No. 2040-0004.

Final Approval expires 6-30-91.

PPG CANAL PLT B 2ND FLUSH

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAMPLING TYPE (69-71)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
HEXACHLOROBTADIENE	SAMPLE MEASUREMENT	2.27	6.56	(26)	*****	*****	*****	()	NA	THREE/WEEK GRA
34391 1 0 1	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	***		
EFFLUENT GROSS VALUE								***		
HE CHLOROBENZENE	SAMPLE MEASUREMENT	0.25	0.66	(26)	*****	*****	*****	()	NA	THREE/WEEK GRA
39700 1 0 1	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	LBS/DY	*****	*****	*****	***		
EFFLUENT GROSS VALUE								***		
FLOW, IN CONDUIT OR	SAMPLE MEASUREMENT	1.24	8.55	(03)	*****	*****	*****	()	NA	THREE/WEEK INSI
THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	MGD	*****	*****	*****	***		
50050 1 0 1								***		
EFFLUENT GROSS VALUE										
CHLORINATED HYDRO-	SAMPLE MEASUREMENT	*****	*****	()	*****	*****	46860	(28)	NA	THREE/WEEK GRAB
CARBONS, GENERAL	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	***		
74052 1 0 2								***		
EFFLUENT GROSS VALUE								UG/L		
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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

318 491-4500

DATE

92 07 1

AREA CODE

NUMBER

YEAR

MO

D.

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

PERMIT VALIDITY 07/01/91.

SL 024829

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

NAME LA 10002

ADDRESS LA 10002

LA 10002

LA 10002

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

(216)

(1719)

LA 10002

LA 10002

PERMIT NUMBER

DISCHARGE NUMBER

10002

Form Approved.

OMB No. 2040-0004.

Final Approval expires 6-30-91.

SALICA PONDENTS DITCH

FACILITY

LOCATION

ATTN: LA 10002, WORKS MANAGER

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
92	00	01	92	00	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)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMI TYF (69)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
HEXACHLOROCYCLOTRIENE	SAMPLE MEASUREMENT	0.00002	0.0002	(20)	*****	*****	*****	()	NA	THREE/WEEK	GR
34391 1 0 1	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LB5/DY	*****	*****	*****	***	NA	THREE/WEEK	GR
EFFLUENT GROSS VALUE											
HE CHLOROBENZENE	SAMPLE MEASUREMENT	0.0000	0.0000	(20)	*****	*****	*****	()	NA	THREE/WEEK	GR
39700 1 0 1	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	LB5/DY	*****	*****	*****	***	NA	THREE/WEEK	GR
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR	SAMPLE MEASUREMENT	0.018	0.092	(03)	*****	*****	*****	()	NA	THREE/WEEK	IN
THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	AGD	*****	*****	*****	***	NA	THREE/WEEK	IN
50050 1 0 1											
EFFLUENT GROSS VALUE											
CHLORINATED HYDRO- CARBONS, GENERAL	SAMPLE MEASUREMENT	*****	*****	()	*****	*****	294	(28)	NA	THREE/WEEK	GR
74052 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	***	NA	THREE/WEEK	GR
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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 31 USC § 11319. (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

318 491-4500

AREA
CODE

NUMBER

DATE

92 07

YEAR MO

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

PERMIT 1000200 6/1/91.

SL 024830

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

NAME P.L. & S.

ADDRESS LA 70602

LAKE CHARLES

LA 70602

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

170000701

PERMIT NUMBER

501 1

DISCHARGE NUMBER

Form Approved.

OMB No. 2040-0004.

Approval expires 6-30-91.

SUN OF 201, 301 & 401

FACILITY

LOCATION

ATTN: TOM G. BROWN, WORKS MANAGER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	06	01		92	06	30

*** NO DISCHARGE ***

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 (62-64)	FREQUENCY OF ANALYSIS (64-68)	SAM TY (69)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
HEXACHLOROBUTADIENE	SAMPLE MEASUREMENT	0.72	6.61	(20)	*****	19.0	80.8	(28)	NA	THREE/WEEK CA
34391 1 0 1 ADMIN	PERMIT REQUIREMENT	REPORT	REPORT		*****	REPORT	REPORT			THREE/WEEK
EFFLUENT GROSS VALUE		DAILY AV	DAILY MX	LBS/DY		DAILY AV	DAILY MX	UG/L		THREE/WEEK
H1 CHLOROBENZENE	SAMPLE MEASUREMENT	0.13	0.69	(20)	*****	6.96	18.3	(28)	NA	THREE/WEEK C
39700 1 0 1 ADMIN	PERMIT REQUIREMENT	REPORT	REPORT		*****	REPORT	REPORT			THREE/WEEK
EFFLUENT GROSS VALUE		DAILY AV	DAILY MX	LBS/DY		DAILY AV	DAILY MX	UG/L		THREE/WEEK
	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

TOM G. BROWN, WORKS 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)

Tom G. Brown
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

AREA CODE

NUMBER

DATE

92 07

YEAR MO

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

AD 91-1416 EFF 7/01/91. PERMIT MODIFIED 5/7/91.

SL 024831

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

NAME PPG IND.

ADDRESS P. O. BOX 1000

LAKE CHARLES

LA 70602

FACILITY

LOCATION

ATTN: TOM G BROWN, WORKS MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

LA0000701

PERMIT NUMBER

001 A

DISCHARGE NUMBER

MAJOR

Form Approved.

OMB No. 2040-0004.

F - FINAL Approval expires 6-30-91.

PPG CANAL

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	06	01		92	06	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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (34-43)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAM TVI (69)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE		*****	*****	()	*****	*****	107	(15)		NA	CONTINUOUS DO
PH 00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	()	6.1	*****	8.5	(12)		O	CONTINUOUS DO
BROMOFORM 32104 1 0 1 ADMIN EFFLUENT GROSS VALUE		26.7	84.6	(26)	*****	13.5	42.7	(28)		NA	THREE/WEEK COM
HEXACHLOROBTADIENE 34391 1 0 1 ADMIN EFFLUENT GROSS VALUE		2.19	7.00	(26)	*****	1.103	3.520	(28)		NA	THREE/WEEK COM
HEXACHLOROBENZENE 39700 1 0 1 ADMIN EFFLUENT GROSS VALUE		.28	.89	(26)	*****	.139	.450	(28)		NA	THREE/WEEK COM
FLOW, IN CONDUIT OR TH. TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE		237.5	237.6	(03)	*****	*****	*****	()		NA	CONTINUOUS DO
PH RANGE EXCURSIONS, > 60 MINUTES 82581 1 0 0 EFFLUENT GROSS VALUE		0	*****	(93)	*****	*****	*****	()		O	CONTINUOUS DO

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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 KNOWLEDGE 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

318 491-4500

92 07

AREA CODE

NUMBER

YEAR

MO

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

SAMPLE AT MOBILE BRIDGE 1 & 2.

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS.

SL 024832

AO 91-1414 EFF

EPA Form 320 (Rev. 9-88) Previous editions may be used.

(REPLACES EPA FORM T-46 WHICH MAY NOT BE USED.)

01/14/91 1203-1703

PAGE 1 OF

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

NAME **RPG IND.**

ADDRESS **P. O. BOX 1000**

LAKE CHARLES

LA 70602

FACILITY

LOCATION

ATTN: **TOM G BROWN, WORKS MANAGER**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE M NIT RING REPORT (DMR)

LA0000761

PERMIT NUMBER

001 A

DISCHARGE NUMBER

MAJOR

Form Approved.

OMB No. 2040-0004.

F - FINAL Approval expires 6-30-91.

RPG CANAL

MONITORING PERIOD

FROM YEAR **92** MO **06** DAY **01** TO YEAR **92** MO **06** DAY **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)		(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)	SAMPL TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH RANGE EXCURSIONS, MONTHLY TOTAL ACCUM 82582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	()	*****	0	*****	(14)	0	CONTINUOUS	ROG
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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 KNOWLEDGE OF THESE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SERIOUS PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC 1001 AND 18 USC 1343. (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

318
AREA CODE

401-4500
NUMBER

92
YEAR

07
MO

1
DA

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

SAMPLE AT MOBILE BRIDGE 1 & 2.

THERE SHALL BE NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM EXCEPT IN TRACE AMOUNTS. AO 1414 EFF

7/1/91
EPA FORM 3320-1 (Rev. 8-88) Previous editions may be used.

(REPLACES EPA FORM 7-88 WHICH MAY NOT BE USED.)

115/911203-1743

PAGE 2 OF

SL 024833

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

NAME PPG IND.

ADDRESS P.O. BOX 1000

LAKE CHARLES LA 70602

FACILITY

LOCATION

ATTN: TOM G BROWN, WORKS MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

LA0000701

PERMIT NUMBER

002 A

DISCHARGE NUMBER

MONITORING PERIOD

FROM YEAR 92 MO 06 DAY 01 TO YEAR 92 MO 06 DAY 30
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJUD

Form Approved.

OMB No. 2040-0004.

P - FINAL Approval expires 6-30-91.

CALCASIEU SHIP CHANNEL

*** NO DISCHARGE ***

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 (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	()	8.5	*****	9.3	(12)	0	ONCE/DISCH GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****		***						
FL , IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	(NOT REQ'D)	6.05	(03)	*****	*****	*****	()	NA	DAILY ESTIMAT.
50050 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD				***		
	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

TOM G. BROWN, WORKS 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]
SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

318 491 4500

92 07 13

AREA
CODE

NUMBER

YEAR

MO

DA

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

PERMIT MODIFIED 07/01/91.

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

NAME PG 100
ADDRESS P. O. BOX 1000
LAKE CHARLES LA 70602

FACILITY
LOCATION

ATTN: TOM G BROWN, WORKS MANAGER

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

(2-16)

LA0000761

PERMIT NUMBER

(17-19)

003 A

DISCHARGE NUMBER

MAJOR

Form Approved.

OMB No. 2040-0004.

F - FINAL Approval expires 6-30-91.

CALCASIEU SHIP CHANNEL/BARGE

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

SL 024835

PARAMETER (32-37)		(3 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 (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****	()	7.3	*****	7.8	(12)		0 THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	SU			
FI , IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	(NOT REQ'd)	0.54	(03)	*****	*****	*****	()		NA THREE/WEEK	ESTIM
50050 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	*****	***			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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.)

Tom G. Brown

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

AREA
CODE

NUMBER

DATE

92 07

YEAR MO DA

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

PERMIT MODIFIED 07/01/91.

NAME PKS 140ADDRESS U.S. 304 1000LAKE CHARLES LA 70602

FACILITY

LOCATION

ATTN: TOM G. BROWN, WORKS MANAGER

DISCHARGE MONITORING REPORT DMRI

(2-16)

(17-19)

LA0000701

PERMIT NUMBER

004 A

DISCHARGE NUMBER

JAYOU

Form Approved.

OMB No. 2040-0004.

- FINAL Approval expires 6-30-91.

JAYOU VERDINE (OLIM DITCH)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

SL 024836

PARAMETER (32-37)		(J Card Only) QUANTITY OR LOADING (46-53)			(K Card Only) QUALITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****	()	5.4 ¹	*****	9.5 ¹			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****			0 CONTINUOUS RECORD
FLOW, IN CONDUIT OR TH TREATMENT PLANT	SAMPLE MEASUREMENT	37.29	41.03	(33)	*****	*****	*****			
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AT	REPORT DAILY AT	HGD	*****	*****	*****	***		NA CONTINUOUS RECORD
PH RANGE EXCURSIONS, > 60 MINUTES	SAMPLE MEASUREMENT	0	*****	(93)	*****	*****	*****			
82581 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	DAILY AT	DAILY AT	CCUR/ MONTH	*****	*****	*****	***		0 CONTINUOUS RECORD
PH RANGE EXCURSIONS, MONTHLY TOTAL ACCUR	SAMPLE MEASUREMENT	*****	*****	()	*****	3	*****			
82582 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	IM- UTES		0 CONTINUOUS RECORD
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TOM G. BROWN, WORKS 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 OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

318 491-4500

DATE

92 07 1

AREA
CODE

NUMBER

YEAR

MO

DAY

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

PERMIT MODIFIED 07/01/91.

¹Excursions were <60 minute duration.