BP PRODUCTS NORTH AMERICA, Inc., WHITING REFINERY
2815 INDIANAPOLIS BLVD., WHITING, INDIANA 46394

PERMIT NO IN0000108 OUTFALL 001 Oct-02 Oct PROCESS WATER EFFLUENT

PARAMETER	HX. CHRM	TL.CHRM	PHENOL	SELENIUM	ORTHO-P	FECAL C.
CODE	Q01032	Q00034	Q32730	CO1147	C00670	**
SAMPLE TYPE						
PERMIT	24	24	24	24	--	GRAB
ACTUAL	24	24	24	24	24	GRAB
FREQUENCY						
PERMIT	1/7	1/7	3/7	2/YR	--	5/7
ACTUAL	1/7	1/7	3/7	2/YR	2/7	5/7

LIMITS:										
AVG.		2.01		23.90						200
MAX.		4.48		68.53						400
DATE	mg/l	LB/D	mg/l	LB/D	mg/l	LB/D	ug/l	LB/D	MG/L	COLONIES
1	--------	--------	--------	--------	0.01	1.69			--------	--------
2	<0.005	<0.9	<0.01	<1.7	--------	--------			--------	--------
3	--------	--------	--------	--------	0.01	1.67			0.51	--------
4	--------	--------	--------	--------	--------	--------			--------	--------
5	--------	--------	--------	--------	--------	--------			--------	--------
6	--------	--------	--------	--------	0.01	1.56			0.12	--------
7	--------	--------	--------	--------	--------	--------			--------	--------
8	--------	--------	--------	--------	0.01	1.52			--------	--------
9	<0.005	<0.8	<0.01	<1.7	--------	--------			--------	--------
10	--------	--------	--------	--------	0.01	1.52			0.28	--------
11	--------	--------	--------	--------	--------	--------			--------	--------
12	--------	--------	--------	--------	--------	--------			--------	--------
13	--------	--------	--------	--------	<0.01	<1.50			0.77	--------
14	--------	--------	--------	--------	--------	--------			--------	--------
15	--------	--------	--------	--------	<0.01	<1.40			--------	--------
16	<0.005	<0.7	<0.01	<1.3	--------	--------			--------	--------
17	--------	--------	--------	--------	0.01	1.34			0.31	--------
18	--------	--------	--------	--------	--------	--------			--------	--------
19	--------	--------	--------	--------	--------	--------			--------	--------
20	--------	--------	--------	--------	0.01	1.23			0.36	--------
21	--------	--------	--------	--------	--------	--------			--------	--------
22	--------	--------	--------	--------	0.01	1.04			--------	--------
23	<0.005	<0.3	<0.01	<0.5	--------	--------			--------	--------
24	--------	--------	--------	--------	0.01	0.50			0.43	--------
25	--------	--------	--------	--------	--------	--------			--------	--------
26	--------	--------	--------	--------	--------	--------			--------	--------
27	--------	--------	--------	--------	0.01	1.35			0.61	--------
28	--------	--------	--------	--------	--------	--------			--------	--------
29	--------	--------	--------	--------	0.01	1.28			--------	--------
30	<0.005	<0.6	<0.01	<1.2	--------	--------			--------	--------
31	--------	--------	--------	--------	0.01	1.28			0.72	--------
AVERAGE	<0.005	<0.7	<0.01	<1.3	<0.01	<1.35			0.46	0
HIGHEST VAL.	<0.005	<0.9	<0.01	<1.7	0.01	1.69			0.77	
LOWEST VAL.	<0.005	<0.3	<0.01	<0.5	<0.01	<0.50			0.12	
OVER LIMIT		0		0		0				0

CERTIFIED OPERATOR : David J. Orlen NO. 14118 exp. 6/30/04 DATE : AUTHORIZED AGENT : [signature] 11.25.02

--MEANS NOT TESTED THIS DATE

**FECAL COLIFORM ARE LIMITED FROM APRIL 1 TO OCT. 1 WHEN REFINERY SANITARY SEWERS ARE DISCHARGING TO AMOCO WWTP.

OFFICE OF WATER MANAGEMENT
DEC 5 11 03 AM '02

BP PRODUCTS NORTH AMERICA Inc., WHITING REFINERY
2815 INDIANAPOLIS BLVD., WHITING, INDIANA 46394

PERMIT NO IN0000108 OUTFALL 001 Oct-02 OCT PROCESS WATER EFFLUENT

PARAMETER	FLOW	BOD	COD	pH	TSS	OIL	NH3-N	SULFIDE
CODE	Q50050	Q00310	Q00340	C00400	Q00547	Q00550	Q00610	Q00745
SAMPLE TYPE								
PERMIT	CONT	24	24	GRAB	24	3/DAY	24	24
ACTUAL	CONT	24	24	GRAB	24	3/DAY	24	24
FREQUENCY								
PERMIT	CONT	5/7	3/7	3/7	5/7	5/7	5/7	1/7
ACTUAL	CONT	5/7	3/7	3/7	5/7	5/7	5/7	1/7

LIMITS:														
AVG			4161		30323			3646		1368		1030		23.1
MAX			8164		58427	6.5-9		5694		2600		2060		51.4
DATE	MG/D	mg/l	LB/D	mg/l	LB/D	pH	mg/l	LB/D	mg/l	LB/D	mg/l	LB/D	mg/l	LB/D
1	20.3	3.5	593	71	12020	--------	14.0	2370	3.6	609	<0.10	<17	--------	--------
2	20.4	3.7	630	--------	--------	7.7	14.4	2450	3.0	510	<0.10	<17	--------	--------
3	20.0	4.4	734	--------	--------	--------	16.8	2802	4.2	701	--------	--------	--------	--------
4	22.2	--------	--------	76	14071	7.8	--------	--------	4.1	759	<0.10	<19	--------	--------
5	21.2	--------	--------	69	12200	--------	--------	--------	--------	--------	<0.10	<18	--------	--------
6	18.7	4.3	671	--------	--------	--------	16.0	2495	--------	--------	--------	--------	--------	--------
7	18.9	3.6	567	--------	--------	7.9	13.6	2144	3.8	599	<0.10	<16	0.04	6.3
8	18.2	3.1	471	74	11232	--------	13.2	2004	3.0	455	<0.10	<15	--------	--------
9	20.2	4.3	724	--------	--------	7.9	14.0	2359	3.6	606	<0.10	<17	--------	--------
10	18.2	6.8	1032	--------	--------	--------	21.2	3218	7.6	1154	--------	--------	--------	--------
11	10.0	--------	--------	89	7423	7.8	--------	--------	7.2	600	<0.10	<8	--------	--------
12	18.3	--------	--------	83	12668	--------	--------	--------	--------	--------	<0.10	<15	--------	--------
13	18.0	4.7	706	--------	--------	--------	14.8	2222	--------	--------	--------	--------	--------	--------
14	17.7	3.5	517	--------	--------	7.6	12.8	1890	3.6	531	0.57	84	0.05	7.4
15	16.8	5.0	701	80	11209	--------	17.2	2410	4.3	602	0.49	69	--------	--------
16	15.7	4.2	550	--------	--------	7.7	15.6	2043	2.4	314	<0.10	<13	--------	--------
17	16.1	4.3	577	--------	--------	--------	13.6	1826	3.4	457	--------	--------	--------	--------
18	16.5	--------	--------	72	9908	7.2	--------	--------	4.7	647	<0.10	<14	--------	--------
19	15.1	--------	--------	88	11082	--------	--------	--------	--------	--------	<0.10	<13	--------	--------
20	14.7	3.0	368	--------	--------	--------	12.8	1569	--------	--------	--------	--------	--------	--------
21	15.9	3.1	411	--------	--------	7.2	17.6	2334	3.5	464	<0.10	<13	0.04	5.3
22	12.5	7.1	740	121	12614	--------	39.3	4097	7.6	792	<0.10	<10	--------	--------
23	6.3	7.7	405	--------	--------	7.6	50.0	2627	6.5	342	<0.10	<5	--------	--------
24	6.0	3.1	155	--------	--------	--------	27.0	1351	4.7	235	--------	--------	--------	--------
25	8.0	--------	--------	107	7139	7.6	--------	--------	3.0	200	1.25	83	--------	--------
26	9.8	--------	--------	104	8500	--------	--------	--------	--------	--------	3.85	315	--------	--------
27	16.2	2.2	297	--------	--------	--------	16.0	2162	--------	--------	--------	--------	--------	--------
28	15.4	2.8	360	--------	--------	7.7	23.0	2954	2.7	347	3.28	421	0.04	5.1
29	15.4	2.4	308	68	8734	--------	18.7	2402	3.2	411	3.92	503	--------	--------
30	14.6	2.4	292	--------	--------	7.6	18.5	2253	3.1	377	2.14	261	--------	--------
31	15.3	1.5	191	--------	--------	--------	13.0	1659	2.6	332	--------	--------	--------	--------
AVERAGE	15.9	3.9	522	81	10677	7.6	17.3	2332	4.0	524	<0.67	<88	0.04	6.0
HIGHEST VAL.	22.2	7.7	1032	121	14071	7.9	50.0	4097	7.6	1154	3.92	503	0.05	7.4
LOWEST VAL.	6.0	1.5	155	68	7139	7.2	12.8	1351	2.4	200	<0.10	<5	0.04	5.1
OVER LIMIT			0		0	0		0		0		0		0
TOTAL	492.6													

CERTIFIED OPERATOR : David J. Oller NO. 14118 exp.6/30/04 DATE : ENVIRONMENTAL ENGINEER : 11-25-02

--MEANS NOT TESTED THIS DATE

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME BP PRODUCTS NORTH AMERICA INC.
ADDRESS WHITING REFINERY
2815 INDIANAPOLIS BOULEVARD
WHITING IN 46394
FACILITY BP PRODUCTS NORTH AMERICA INC.
LOCATION WHITING
ATTN: ASHOK K. JHAWAR, PLANT MGR.

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

MAJOR
F - FINAL
EFFLUENT

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

IN0000108004A1002

IN0000108	[redacted]
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	10	01	TO	02	10	31

For Any Questions call Jeff Ewick at 317-233-0676

*** NO DISCHARGE [X] ***

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUANTITY OR CONCENTRATION MINIMUM	QUANTITY OR CONCENTRATION AVERAGE	QUANTITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	********	********		No Discharge	********	No Discharge	(12)	0	*	*
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	********	6 MINIMUM	********	9 MAXIMUM	SU		WEEKLY	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	********	********		********	No Discharge	No Discharge	(19)	0	*	*
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	15.0 DAILY MX	MG/L		ONCE/MONTH	GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	********	********		********	No Discharge	No Discharge	(19)	0	*	*
00680 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	110 DAILY MX	MG/L		WEEKLY	GRAB
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTVE OFFICER

Authorized Agent:
Ashok K. Jhawar
Business Unit Leader
Whiting Business Unit

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowlege and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations.

Ashok K. Jhawar

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	2002	11	21
AREA CODE	NUMBER	YEAR	MO	DA

COMMENTS AND EXPLANATION OF ANY VIOLATION *(Reference all attachments here)*

* Required to sample on 1st discharge of week. Outfall 003 was closed the entire month of October.

INDUSTRIAL MAJC
WHITING, LAKE COUNT

INDUSTRIAL MAJOR LAKE COUNTY

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME BP PRODUCTS NORTH AMERICA INC.
ADDRESS WHITING REFINERY
2815 INDIANAPOLIS BOULEVARD
WHITING IN 46394
FACILITY BP PRODUCTS NORTH AMERICA INC.
LOCATION WHITING
ATTN: ASHOK K. JHAWAR, PLANT MGR.

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

MAJOR
F - FINAL
EFFLUENT

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

IN0000108B003A1002

IN0000108	[redacted]
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	10	01	TO	02	10	31

For Any Questions call Jeff Ewick at 317-233-0676

*** NO DISCHARGE [X] ***

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUANTITY OR CONCENTRATION MINIMUM	QUANTITY OR CONCENTRATION AVERAGE	QUANTITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	********	********		No Discharge	********	No Discharge	(12)	0	*	*
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	********	6 MINIMUM	********	9 MAXIMUM	SU		WEEKLY	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC	SAMPLE MEASUREMENT	********	********		********	No Discharge	No Discharge	(19)	0	*	*
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	15.0 DAILY MX	MG/L		WEEKLY	GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	********	********		********	No Discharge	No Discharge	(19)	0	*	*
00680 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	110 DAILY MX	MG/L		WEEKLY	GRAB
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTVE OFFICER

Authorized Agent:
Ashok K. Jhawar
Business Unit Leader
Whiting Business Unit

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowlege and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations.

Ashok K. Jhawar

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	2002	11	21
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATION *(Reference all attachments here)*
*Required to sample on 1st discharge of week. Outfall 004 was closed the entire month of October.

INDUSTRIAL MAJO
WHITING, LAKE COUNT

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME BP PRODUCTS NORTH AMERICA INC.
ADDRESS WHITING REFINERY
2815 INDIANAPOLIS BOULEVARD
WHITING IN 46394
FACILITY BP PRODUCTS NORTH AMERICA INC.
LOCATION WHITING
ATTN: ASHOK K. JHAWAR, PLANT MGR.

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

MAJOR
F - FINAL
EFFLUENT

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

IN0000108	[redacted]
PERMIT NUMBER	DISCHARGE NUMBER

*IN0000108002A1002

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	10	01	TO	02	10	31

For Any Questions call Jeff Ewick at 317-233-0676

*** NO DISCHARGE [ ] ***

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUANTITY OR CONCENTRATION MINIMUM	QUANTITY OR CONCENTRATION AVERAGE	QUANTITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPL TYPE
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********		********	3	3	(19)	0	5 TIME /WEEK	GRAB
	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	REPORT DAILY MX	MG/L		5 TIMES/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 [redacted] 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	********	********		********	0	1	(19)	0	5 TIME /WEEK	GRAB
	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	5.0 DAILY MX	MG/L		5 TIMES/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 [redacted] 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	********	********		********	2	3	(19)	0	5 TIME /WEEK	GRAB
	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	REPORT DAILY MX	MG/L		5 TIMES/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	92.5	96.7	(03)	********	********	********		0	DAILY	CONT
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	********	********	********	********		DAILY	CONT
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********		********	∠ 0.04	∠ 0.04	(19)	0	1X /WEEK	GRAB
	PERMIT REQUIREMENT	********	********	********	********	REPORT MO AVG	0.05 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, TOTAL 82220 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	2867.7	(3R)	********	********	********		0	ONCE/ MONTH	RCTOT
	PERMIT REQUIREMENT	********	REPORT MO TOTAL	MGAL	********	********	********	********		ONCE/ MONTH	RCOTO
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTVE OFFICER

Authorized Agent:
Ashok K. Jhawar
Business Unit Leader
Whiting Business Unit

TYPED OR PRINTED

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Ashok K. Jhawar

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	2002	11	26
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATION *(Reference all attachments here)*

INDUSTRIAL MAJO
WHITING, LAKE COUNT

INDUSTRIAL MAJOR LAKE COUNTY

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME BP PRODUCTS NORTH AMERICA INC.
ADDRESS WHITING REFINERY
2815 INDIANAPOLIS BOULEVARD
WHITING IN 46394
FACILITY BP PRODUCTS NORTH AMERICA INC.
LOCATION WHITING
ATTN: ASHOK K. JHAWAR, PLANT MGR.

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

IN0000108	[redacted]
PERMIT NUMBER	**DISCHARGE NUMBER**

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	10	01	TO	02	10	31

MAJOR
F - FINAL
EFFLUENT

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

*IN0000108002A1002

For Any Questions call Jeff Ewick at 317-233-0676

*** NO DISCHARGE ☐ ***

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUANTITY OR CONCENTRATION MINIMUM	QUANTITY OR CONCENTRATION AVERAGE	QUANTITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	32	36	(04) DEG.C	0	5 TIME /WEEK	CONTIN
	PERMIT REQUIREMENT	********	********		********	REPORT MO AVG	REPORT DAILY MX			5 TIMES/WEEK	CONTIN
TEMPERATURE, WATER DEG. CENTIGRADE 00010 [redacted] 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	********	********	********	********	20	25	(04) DEG.C	0	5 TIME /WEEK	CONTIN
	PERMIT REQUIREMENT	********	********		********	REPORT MO AVG	REPORT DAILY MX			5 TIMES/WEEK	CONTIN
WASTE HEAT REJECTION RATE 00179 [redacted] 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	739	1,045	(05) MBTU/ HR	********	********	********	********	0	5 TIME /WEEK	CONTI
	PERMIT REQUIREMENT	1700 MO AVG	2000 MX DA AV		********	********	********			5 TIMES/WEEK	CONTIN
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	8.1	********	8.3	(12) SU	0	THREE/ WEEK	GRAB
	PERMIT REQUIREMENT	********	********		7 MINIMUM	********	9 MAXIMUM			THREE/WEEK	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	<0.3	0.3	(19) MG/L	0	THREE/ WEEK	GRAB
	PERMIT REQUIREMENT	********	********		********	REPORT MO AVG	5.0 DAILY MX			THREE/WEEK	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 [redacted] 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	********	********	********	********	<0.3	0.3	(19) MG/L	0	THREE/ WEEK	GRAB
	PERMIT REQUIREMENT	********	********		********	REPORT MO AVG	5.0 DAILY MX			THREE/WEEK	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 [redacted] 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	********	********	********	********	<0.3	<0.3	(19) MG/L	0	THREE/ WEEK	GRAB
	PERMIT REQUIREMENT	********	********		********	REPORT MO AVG	REPORT DAILY MX			THREE/WEEK	GRAB

NAME/TITLE PRINCIPAL EXECUTVE OFFICER

Authorized Agent:
Ashok K. Jhawar
Business Unit Leader
Whiting Business Unit

TYPED OR PRINTED

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Ashok K. Jhawar

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	2002	11	2
AREA CODE	NUMBER	YEAR	MO	DA

COMMENTS AND EXPLANATION OF ANY VIOLATION *(Reference all attachments here)*

INDUSTRIAL MAJC
WHITING, LAKE COUNT

PERMITTEE NAME/ADDRESS *(Include Facility Name/Locatio*

NAME BP PRODUCTS NORTH AMERICA INC.

ADDRESS WHITING REFINERY
2815 INDIANAPOLIS BOULEVARD
WHITING IN 4

FACILITY BP PRODUCTS NORTH AMERICA INC.

LOCATION WHITING

ATTN: ASHOK K. JHAWAR, PLANT MGR.

PARAMETER		AVI
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	4
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	M
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	4
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	M
PHENOLICS, TOTAL RECOVERABLE	SAMPLE MEASUREMENT	4
32730 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	M
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	1
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	R M
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*
FLOW, TOTAL	SAMPLE MEASUREMENT	*
82220 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*

NAME/TITLE PRINCIPAL EXECUTVE OFFICER

Authorized Agent:
Ashok K. Jhawar
Business Unit Leader
Whiting Business Unit

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COMMENTS AND EXPLANATION OF ANY VIOLATION *(Referen*

* Chlorine testing required only when c

** Fecal coliform testing required only

INDUSTRIAL MAJOR, LAKE COUNTY

EPA FORM 3320-1 (08-95) Revised by Indiana (August 2001)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME BP PRODUCTS NORTH AMERICA INC.
ADDRESS WHITING REFINERY
2815 INDIANAPOLIS BOULEVARD
WHITING IN 46394
FACILITY BP PRODUCTS NORTH AMERICA INC.
LOCATION WHITING
ATTN: ASHOK K. JHAWAR, PLANT MGR.

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

MAJOR
F - FINAL
EFFLUENT

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

IN0000108	001A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	02	10	01	TO	02	10	31

For Any Questions call Jeff Ewick at 317-233-0676

*** NO DISCHARGE ☐ ***

NOTE: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUANTITY OR CONCENTRATION MINIMUM	QUANTITY OR CONCENTRATION AVERAGE	QUANTITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	522	1032	(26) LBS/DY	********	3.9	7.7	(19) MG/L	0	5 TIME /WEEK	COMP 24
	PERMIT REQUIREMENT	4161 MO AVG	8164 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			5 TIMES/WEEK	COMP24
OXYGEN DEMAND, CHEM. (LOW LEVEL) (COD) 00335 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	10677	14071	(26) LBS/DY	********	81	121	(19) MG/L	0	THREE /WEEK	COMP 24
	PERMIT REQUIREMENT	30323 MO AVG	58427 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			THREE/WEEK	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	7.2	********	7.9	(12) SU	0	THREE/ WEEK	GRAB
	PERMIT REQUIREMENT	********	********		6.5 MINIMUM	********	9 MAXIMUM			THREE/WEEK	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2332	4097	(26) LBS/DY	********	17.3	50.0	(19) MG/L	0	5 TIME /WEEK	COMP 24
	PERMIT REQUIREMENT	3646 MO AVG	5694 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			5 TIMES/WEEK	COMP2
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	524	1154	(26) LBS/DY	********	4.0	7.6	(19) MG/L	0	WEEK-DAYS	GRAB
	PERMIT REQUIREMENT	1368 MO AVG	2600 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			WEEK DAYS	GRAB
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<88	503	(26) LBS/DY	********	<0.67	3.92	(19) MG/L	0	5 TIME /WEEK	COMP 24
	PERMIT REQUIREMENT	1030 MO AVG	2060 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			5 TIMES/WEEK	COMP2
SULFIDE, TOTAL (AS S) 00745 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	6.0	7.4	(26) LBS/DY	********	0.04	0.05	(19) MG/L	0	1X /WEEK	COMP 24
	PERMIT REQUIREMENT	23.1 MO AVG	51.4 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			WEEKLY	COMP2

NAME/TITLE PRINCIPAL EXECUTVE OFFICER

Authorized Agent:
Ashok K. Jhawar
Business Unit Leader
Whiting Business Unit

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowlege and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment for knowing violations.

Ashok K. Jhawar

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	2002	11	26
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATION *(Reference all attachments here)*

INDUSTRIAL MAJO
WHITING, LAKE COUNT

INDUSTRIAL MAJOR LAKE COUNTY

bp

Whiting Business Unit
2815 Indianapolis Blvd.
PO Box 710
Whiting, IN 46394-0710

DEC 27 2 44 PM '02

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

November 27, 2002

Mr. Greg Glover
Indiana Department of Environmental Management
Office of Water Management
100 North Senate
Indianapolis, IN 46206-6015

RE: NPDES Permit No. IN 0000108
Exceedance of Daily Maximum Limit for Total Suspended Solids at Outfall 001

Dear Mr. Glover:

This letter serves as a follow-up to our initial phone notification on November 22, 2002, concerning the exceedance of the daily maximum limit for total suspended solids (TSS) at Outfall 001 on November 20, 2002. We became aware of the non-compliance at approximately 2:30 pm (CST) on November 21, 2002 when the initial composite sample analysis was completed. The initial analysis of the November 20 composite sample was 120 mg/l TSS. The discharge loading from Outfall 001 was calculated at 7,506 pounds of TSS. Our daily maximum allowable TSS is 5,694 pounds. We were back in compliance with the TSS discharge loading the next day.

As a precautionary measure BP continued its water shedding program, reduced the outfall flows, and called for a third party analysis of our findings. An investigation is currently underway to identify the cause of the exceedance.

Sincerely,

for Ms. Karleen James
Environmental Superintendent, HSE