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 DANIEL J. SAJKOWSKI

ATTN: ~~DENNIS J. SEITH~~ PLANT MANAGER

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	MO	DAY	YEAR		MO	DAY	YEAR
FROM	10	01	04	TO	10	31	04

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
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	∠ 0.6	∠ 0.7	(26) LBS/DY	********	∠ 0.005	∠ 0.005	(19) MG/L	0	WEEKLY	COMP 24
	PERMIT REQUIREMENT	2.01 MO AVG	4.48 DAILY MX			REPORT MO AVG	REPORT DAILY MX			WEEKLY	COMP24
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	∠ 1.1	∠ 1.4	(26) LBS/DY	********	∠ 0.01	∠ 0.01	(19) MG/L	0	WEEKLY	COMP 24
	PERMIT REQUIREMENT	2.19 MO AVG	6.83 DAILY MX			REPORT MO AVG	REPORT DAILY MX			WEEKLY	COMP24
PHENOLICS, TOTAL RECOVERABLE 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	∠ 1.08	∠ 1.50	(26) LBS/DY	********	∠ 0.01	∠ 0.01	(19) MG/L	0	THREE /WEEK	COMP
	PERMIT REQUIREMENT	20.33 MO AVG	73.01 DAILY MX			REPORT MO AVG	REPORT DAILY MX			THREE/WEEK	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	13.4	18.0	(03) MGD	********	********	********	********	0	DAILY	CONTIN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX							DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	******	******	(19) MG/L	0	*NA	*NA
	PERMIT REQUIREMENT					REPORT MO AVG	0.05 DAILY MX			TWS WEEK	GRAB
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	******	******	(13) #/ 100ML	0	**NA	**NA
	PERMIT REQUIREMENT					200 MO AVG	400 DAILY MX			TWS WEEK	GRAB
FLOW, TOTAL 82220 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	413.9	(3R) MGAL	********	********	********	********	0	ONCE/ MONTH	RCOTOT
	PERMIT REQUIREMENT		REPORT MO TOTAL							ONCE/ MONTH	RCOTOT

NAME/TITLE PRINCIPAL EXECUTVE OFFICER OR AUTHORIZED AGENT

Authorized Agent:
Daniel J. Sajkowski
Business Unit Leader

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	11	22	2004
AREA CODE	NUMBER	MO	DAY	YEAR

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

* Chlorine testing required only when chlorinating this stream.

** Fecal coliform testing required only when refinery sanitary sewers are discharging to the BP WWTP.

INDUSTRIAL MAJOR
WHITING, 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: ~~DENNIS J. SEITH~~ DANIEL J. SAJKOWSKI
PLANT MANAGER

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	002A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	MO	DAY	YEAR		MO	DAY	YEAR
FROM	10	01	04	TO	10	31	04

IN0000108002A1004

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	33	(04) DEG.C	0	5 TIMES /WEEK	CONTIN
	PERMIT REQUIREMENT					REPORT MO AVG	REPORT DAILY MX			5 TIMES WEEK	CONTIN
TEMPERATURE, WATER DEG. CENTIGRADE 00010 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	********	********	********	********	17	19	(04) DEG.C	0	5 TIMES /WEEK	CONTIN
	PERMIT REQUIREMENT					REPORT MO AVG	REPORT DAILY MX			5 TIMES WEEK	CONTIN
WASTE HEAT REJECTION RATE 00179 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	843	959	(05) MBTU/ HR	********	********	********	********	0	5 TIMES /WEEK	CONTIN
	PERMIT REQUIREMENT	1700 MO AVG	2000 MX DA AV							5 TIMES WEEK	CONTIN
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	8.3	********	8.4	(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	50 DAILY MX			THREE WEEK	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	********	********	********	********	<0.3	<0.3	(19) MG/L	0	THREE /WEEK	GRAB
	PERMIT REQUIREMENT					REPORT MO AVG	50 DAILY MX			THREE WEEK	GRAB
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 7 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 OR AUTHORIZED AGENT

Authorized Agent:
Daniel J. Sajkowski
Business Unit Leader

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	11	22	2004
AREA CODE	NUMBER	MO	DAY	YEAR

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

INDUSTRIAL MAJOR
WHITING, 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: ~~DENNIS J. SEITH~~ DANIEL J. SAJKOWSKI
PLANT MANAGER

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	002A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	MO	DAY	YEAR		MO	DAY	YEAR
FROM	10	01	04	TO	10	31	04

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

*** NO DISCHARGE ☐ ***

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CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	2	3	(19) MG/L	0	5 TIMES /WEEK	GRAB
	PERMIT REQUIREMENT					REPORT MO AVG	REPORT DAILY MX			5 TIMS/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 2 0 0 EFFLUENT NET VALUE	SAMPLE MEASUREMENT	********	********	********	********	0	1	(19) MG/L	0	5 TIMES /WEEK	GRAB
	PERMIT REQUIREMENT					REPORT MO AVG	5.0 DAILY MX			5 TIMS/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 7 0 0 INTAKE FROM STREAM	SAMPLE MEASUREMENT	********	********	********	********	2	3	(19) MG/L	0	5 TIMES /WEEK	GRAB
	PERMIT REQUIREMENT					REPORT MO AVG	REPORT DAILY MX			5 TIMS/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	88.4	91.2	(03) MGD	********	********	********	********	0	DAILY	CONTIN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX							DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	∠ 0.05	∠ 0.05	(19) MG/L	0	WEEKLY	GRAB
	PERMIT REQUIREMENT					REPORT MO AVG	0.05 DAILY MX			WEEKLY	GRAB
FLOW, TOTAL 82220 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	2740.5	(3R) MGAL	********	********	********	********	0	ONCE/ MONTH	RCOTOT
	PERMIT REQUIREMENT		REPORT MO TOTAL							ONCE/ MONTH	RCOTOT
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTVE OFFICER OR AUTHORIZED AGENT

Authorized Agent:
Daniel J. Sajkowski
Business Unit Leader

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	11	22	2004
AREA CODE	NUMBER	MO	DAY	YEAR

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

INDUSTRIAL MAJOR
WHITING, LAKE COUNTY

JOR
FINAL
FLUENT

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

I N 0 0 0 0 1 0 8 0 0 3 A 1 0 0 4 *

ons call Jeff Ewick at 317-233-0676

NO DISCHARGE [X] ***

E: Read Instructions before completing this form

UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
(12) SU	0	*	*
		WEEKLY	GRAB
(19) MG/L	0	*	*
		WEEKLY	GRAB
(19) MG/L	0	*	*
		WEEKLY	GRAB

TELEPHONE		DATE		
219	473-3179	11	22	2004
AREA CODE	NUMBER	MO	DAY	YEAR

INDUSTRIAL MAJOR
WHITING, LAKE COUNTY

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

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ADDRESS WHITING REFINERY
2815 INDIANAPOLIS BOULEVARD
WHITING IN 46394

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LOCATION WHITING

ATTN: ~~DENNIS J. SEITH~~ DANIEL J. SAJKOWSKI
PLANT MANAGER

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
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MAJOR
F - FINAL
EFFLUENT

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

IN0000108	004A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD						
	MO	DAY	YEAR		MO	DAY	YEAR
FROM	10	01	04	TO	10	31	04

IN0000108004A1004

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

*** NO DISCHARGE [X] ***

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PH	SAMPLE MEASUREMENT	********	********		No Discharge	********	No Discharge	(12)	0	*	*
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			********	6.0 MINIMUM		9.0 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	REPORT 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 OR AUTHORIZED AGENT

Authorized Agent:
Daniel J. Sajkowski
Business Unit Leader

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TELEPHONE		DATE		
219	473-3179	11	22	2004
AREA CODE	NUMBER	MO	DAY	YEAR

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 MAJOR
WHITING, LAKE COUNTY

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

PERMIT NO IN0000108 OUTFALL 001 Oct-04 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	6.5-9	3646	1368	1030	23.1
MAX		8164	58427		5694	2600	2060	51.4
DATE	MG/D	LB/D	mg/l LB/D	pH	mg/l LB/D	mg/l LB/D	mg/l LB/D	mg/l LB/D
1	17.4	—	— —	7.7	— —	<0.3 <44	<0.10 <15	— —
2	16.4	—	— —	—	— —	— —	<0.10 <14	— —
3	18.0	1.2	180 35	—	5.5 826	1.7 247	<0.10 <15	0.01 1.5
4	17.4	1.9	276 —	7.7	26.0 3773	0.6 85	0.17 24	— —
5	17.0	1.5	213 32	—	8.0 1134	0.5 71	0.22 31	— —
6	17.1	1.2	171 —	7.6	9.5 1355	0.3 39	— —	— —
7	15.7	1.2	157 40	—	8.5 1113	<0.3 <43	4.88 700	— —
8	17.2	—	— —	7.8	— —	— —	2.31 347	— —
9	18.0	—	— —	—	18.7 2682	0.5 66	1.73 229	0.01 1.3
10	17.2	2.1	301 48	7.7	12.0 1591	0.9 101	0.75 84	— —
11	15.9	1.5	199 —	—	26.0 2927	1.4 196	0.26 36	— —
12	13.5	1.6	180 47	7.6	18.0 2522	1.5 156	— —	— —
13	16.8	1.6	224 —	—	20.0 2085	0.5 49	4.50 439	— —
14	12.5	1.8	188 47	7.8	— —	— —	0.63 60	— —
15	11.7	—	— —	—	25.0 2294	1.3 106	4.37 357	0.01 0.8
16	11.4	—	— —	7.8	22.0 1798	0.7 50	0.44 32	— —
17	11.0	2.1	193 51	—	42.0 3012	0.8 59	<0.10 <7	— —
18	9.8	2.0	163 —	7.9	14.0 1027	0.8 63	— —	— —
19	8.6	2.4	172 65	—	41.0 3214	0.8 65	0.13 11	— —
20	8.8	1.5	110 —	7.8	— —	— —	0.48 44	— —
21	9.4	3.3	259 76	—	16.7 1838	0.9 89	<0.10 <10	<0.01 <0.01
22	9.7	—	— —	7.7	16.0 1588	0.8 67	<0.10 <8	— —
23	11.1	—	— —	—	11.3 942	1.0 78	<0.10 <8	— —
24	13.2	1.8	198 41	7.7	20.0 1568	1.3 92	<0.10 <8	— —
25	11.9	1.3	129 —	—	34.0 2410	0.5 41	<0.10 <13	— —
26	10.0	2.4	200 40	7.8	— —	— —	<0.10 —	— —
27	9.4	1.7	133 —	—	13.3 1597	— —	— —	— —
28	8.5	2.4	170 57	7.7	17.9 1966	<0.8 <86	<1.02 <113	0.01 1.2
29	9.9	—	— —	—	42.0 3773	1.7 247	4.88 700	0.01 1.5
30	15.0	—	— —	7.8	5.5 826	<0.3 39	<0.10 <7	0.01 <0.01
31	14.4	1.8	216 44	—	3773	0	0	0
AVERAGE	13.4	1.8	192 46	7.7	1966	<0.8	<1.02	0.01
HIGHEST VAL.	18.0	3.3	301 76	7.9	3773	1.7	4.88	0.01
LOWEST VAL.	8.5	1.2	110 32	7.6	826	<0.3	<0.10	0.01
OVER LIMIT			0	0	0			0
TOTAL	413.9							

CERTIFIED OPERATOR : David J. Olen No. 14118 exp 06/30/06 tel. 219-473-5298 DATE : 11-13-04

--MEANS NOT TESTED THIS DATE

ENVIRONMENTAL ENGINEER : [signature]

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

PERMIT NO	IN0000108	OUTFALL 001	Oct-04	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	—	—	—	—	—	—			—	—
2	—	—	—	—	—	—			—	—
3	—	—	—	—	<0.01	<1.50			0.46	—
4	—	—	—	—	—	—			—	—
5	—	—	—	—	<0.01	<1.42			—	—
6	<0.005	<0.7	<0.01	<1.4	—	—			—	—
7	—	—	—	—	<0.01	<1.31			0.62	—
8	—	—	—	—	—	—			—	—
9	—	—	—	—	—	—			—	—
10	—	—	—	—	<0.01	<1.43			0.58	—
11	—	—	—	—	—	—			—	—
12	—	—	—	—	<0.01	<1.13			—	—
13	<0.005	<0.7	<0.01	<1.4	—	—			—	—
14	—	—	—	—	<0.01	<1.04			0.70	—
15	—	—	—	—	—	—			—	—
16	—	—	—	—	—	—			—	—
17	—	—	—	—	<0.01	<0.92			0.70	—
18	—	—	—	—	—	—			—	—
19	—	—	—	—	<0.01	<0.72			—	—
20	<0.005	<0.4	<0.01	<0.7	—	—			—	—
21	—	—	—	—	<0.01	<0.78			0.70	—
22	—	—	—	—	—	—			—	—
23	—	—	—	—	—	—			—	—
24	—	—	—	—	<0.01	<1.10			0.54	—
25	—	—	—	—	—	—			—	—
26	—	—	—	—	<0.01	<0.83			—	—
27	<0.005	<0.4	<0.01	<0.8	—	—			—	—
28	—	—	—	—	<0.01	<0.71			0.78	—
29	—	—	—	—	—	—			—	—
30	—	—	—	—	—	—			—	—
31	—	—	—	—	<0.01	<1.20			1.00	—
AVERAGE	<0.005	<0.6	<0.01	<1.1	<0.01	<1.08			0.66	0
HIGHEST VAL.	<0.005	<0.7	<0.01	<1.4	<0.01	<1.50			1.00	
LOWEST VAL.	<0.005	<0.4	<0.01	<0.7	<0.01	<0.71			0.46	
OVER LIMIT		0		0		0				0

CERTIFIED OPERATOR : David J. Olen No. 14118 exp.6/30/06 DATE : 11-13-04 AUTHORIZED AGENT : [illegible]

--MEANS NOT TESTED THIS DATE

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

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

PERMIT NO IN0000108 OUTFALL 002 Oct-04 OCT COOLING WATER EFFLUENT

PARAMETER	FLOW	IN-TEMP	OUT-TEMP	HEAT	pH	IN-OIL	OUT-OIL	DELTA OIL	IN-TOC	OUT-TOC	DELTA-TOC	RESID-CL
CODE	Q50050		C00010	C99003	C00400		C00550		C99680	C00680		
SAMPLE TYPE												
PERMIT	CONT	CONT	CONT	CONT	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB
ACTUAL	CONT	CONT	CONT	CONT	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB
FREQUENCY												
PERMIT	CONT	5/7	5/7	5/7	3/7	3/7	3/7	3/7	5/7	5/7	5/7	1/7
ACTUAL	CONT	CONT	CONT	CONT	3/7	3/7	3/7	5/7	5/7	5/7	5/7	1/7
LIMITS: AVG.				1.70								
MAX.				2.00	7-9			5			5	.05
DATE	MG/D	DEG C	DEG C	GBTU/HR	pH	mg/l	mg/l	mg/l	mg/l	mg/l	mg/l	mg/l
1	88.5	19	33	0.774	8.3	<0.3	<0.3	<0.3	2	2	0	———
2	90.7	19	33	0.793	———	———	———	———	———	———	———	———
3	88.6	19	33	0.775	———	———	———	———	———	———	———	———
4	88.9	19	33	0.778	8.3	<0.3	<0.3	<0.3	2	2	0	———
5	87.5	17	32	0.820	———	———	———	———	2	3	0	———
6	87.6	16	32	0.876	8.3	<0.3	<0.3	<0.3	2	2	0	<0.05
7	87.4	17	33	0.874	———	———	———	———	2	2	0	———
8	86.9	18	32	0.760	8.3	<0.3	<0.3	<0.3	2	2	0	———
9	86.7	17	32	0.812	———	———	———	———	———	———	———	———
10	85.2	18	32	0.745	———	———	———	———	———	———	———	———
11	89.0	18	33	0.834	8.4	<0.3	<0.3	<0.3	2	2	0	———
12	87.9	18	32	0.769	———	———	———	———	2	2	0	———
13	89.0	17	32	0.834	8.4	<0.3	<0.3	<0.3	2	2	0	<0.05
14	84.9	17	32	0.796	———	———	———	———	2	2	0	———
15	87.4	16	32	0.874	8.3	<0.3	<0.3	<0.3	2	2	0	———
16	85.8	16	31	0.804	———	———	———	———	———	———	———	———
17	87.9	15	31	0.879	———	———	———	———	———	———	———	———
18	86.7	15	30	0.812	8.3	<0.3	<0.3	<0.3	3	3	0	———
19	87.2	14	30	0.872	———	———	———	———	2	3	1	———
20	91.2	14	30	0.912	8.3	<0.3	<0.3	<0.0	2	3	0	<0.05
21	90.3	14	31	0.959	———	———	———	———	2	3	0	———
22	88.8	14	31	0.943	8.3	<0.3	<0.3	<0.3	2	3	0	———
23	88.5	15	31	0.885	———	———	———	———	———	———	———	———
24	90.2	15	31	0.902	———	———	———	———	———	———	———	———
25	90.8	15	30	0.851	8.3	<0.3	<0.3	<0.3	2	3	0	———
26	88.0	15	31	0.880	———	———	———	———	2	3	0	———
27	89.2	15	31	0.892	8.3	<0.3	<0.3	<0.3	2	3	1	<0.05
28	90.2	16	31	0.845	———	———	———	———	2	3	1	———
29	90.9	16	32	0.909	8.3	<0.3	<0.3	<0.3	2	3	1	———
30	90.0	16	31	0.843	———	———	———	———	———	———	———	———
31	88.6	16	31	0.830	———	———	———	———	———	———	———	———
AVERAGE	88.4	17	32	0.843	8.3	<0.3	<0.3	<0.3	2	2	0	<0.05
HIGHEST VAL.	91.2	19	33	0.959	8.4	<0.3	<0.3	<0.3	3	3	1	<0.05
LOWEST VAL.	84.9	14	30	0.745	8.3	<0.3	<0.3	<0.3	2	2	0	<0.05
OVER LIMIT	0			0	0			0			0	0
TOTAL	2740.5											

CERTIFIED OPERATOR : David J. Olen No. 14118 exp. 6/30/06 tel. 219-473-5298 DATE: 11-13-04 ENVIRONMENTAL ENGINEER : Richard A. Hamm

--MEANS NOT TESTED THIS DATE

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

PERMIT NO. IN0000108 Oct-04 OCT STORM WATER RUNOFF

- - - -OUTFALL 003- - - -

*** NOTE: TO BE SAMPLED AFTER EACH RAIN EVENT IF DISCHARGE OCCURS - ONCE PER WEEK

PARAMETER		pH	OIL	TOC	
CODE:		C00400	C00550	C00680	
LIMITS:	MAX.	6-9	15	110	
DATA			mg/l	mg/l	
	1	--------	--------	--------	closed
	2	--------	--------	--------	closed
	3	--------	--------	--------	closed
	4	--------	--------	--------	closed
	5	--------	--------	--------	closed
	6	--------	--------	--------	closed
	7	--------	--------	--------	closed
	8	--------	--------	--------	closed
	9	--------	--------	--------	closed
	10	--------	--------	--------	closed
	11	--------	--------	--------	closed
	12	--------	--------	--------	closed
	13	--------	--------	--------	closed
	14	--------	--------	--------	closed
	15	--------	--------	--------	closed
	16	--------	--------	--------	closed
	17	--------	--------	--------	closed
	18	--------	--------	--------	closed
	19	--------	--------	--------	closed
	20	--------	--------	--------	closed
	21	--------	--------	--------	closed
	22	--------	--------	--------	closed
	23	--------	--------	--------	closed
	24	--------	--------	--------	closed
	25	--------	--------	--------	closed
	26	--------	--------	--------	closed
	27	--------	--------	--------	closed
	28	--------	--------	--------	closed
	29	--------	--------	--------	closed
	30	--------	--------	--------	closed
	31	--------	--------	--------	closed
AVERAGE		0.0	0.0	0	
HIGHEST VAL.		0.0	0.0	0	
LOWEST VAL.		0.0	0.0	0	
OVER LIMIT		0	0	0	

CERTIFIED OPERATOR : David J. Olen No. 14118 exp. 06/30/06

DATE : 11-13-04 tel.219-473-5298 ENVIRONMENTAL ENGINEER : Robert A. Lewis

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

PERMIT NO. IN0000108 Oct-04 OCT STORM WATER RUNOFF

----OUTFALL 004----

*** NOTE: TO BE SAMPLED AFTER EACH RAIN EVENT IF DISCHARGE OCCURS - ONCE PER WEEK

PARAMETER		pH	OIL	TOC	
CODE:		C00400	C00550	C00680	
LIMITS:	MAX.	6-9	15	110	
DATA			mg/l	mg/l	
	1	-------	-------	-------	closed
	2	-------	-------	-------	closed
	3	-------	-------	-------	closed
	4	-------	-------	-------	closed
	5	-------	-------	-------	closed
	6	-------	-------	-------	closed
	7	-------	-------	-------	closed
	8	-------	-------	-------	closed
	9	-------	-------	-------	closed
	10	-------	-------	-------	closed
	11	-------	-------	-------	closed
	12	-------	-------	-------	closed
	13	-------	-------	-------	closed
	14	-------	-------	-------	closed
	15	-------	-------	-------	closed
	16	-------	-------	-------	closed
	17	-------	-------	-------	closed
	18	-------	-------	-------	closed
	19	-------	-------	-------	closed
	20	-------	-------	-------	closed
	21	-------	-------	-------	closed
	22	-------	-------	-------	closed
	23	-------	-------	-------	closed
	24	-------	-------	-------	closed
	25	-------	-------	-------	closed
	26	-------	-------	-------	closed
	27	-------	-------	-------	closed
	28	-------	-------	-------	closed
	29	-------	-------	-------	closed
	30	-------	-------	-------	closed
	31	-------	-------	-------	closed
AVERAGE		0.0	0.0	0	
HIGHEST VAL.		0.0	0.0	0	
LOWEST VAL.		0.0	0.0	0	
OVER LIMIT		0	0	0	

CERTIFIED OPERATOR : David J. Olen

No. 14118
exp. 06/30/06 tel. 219-473-5298

DATE : 11-13-04

ENVIRONMENTAL ENGINEER : Richard A. Harris

bp

Daniel J. Sajkowski
Business Unit Leader
Whiting Business Unit

BP Products North America Inc.
2815 Indianapolis Boulevard
Whiting, IN 46394-0710
USA

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
November 22, 2004

Indiana Department of Environmental Management
OWQ Data Management Section
100 North Senate Avenue
P.O. Box 6015
Indianapolis, IN 46206-6015

NPDES Permit No. 0000108, Serials 001, 002, 003, and 004

Direct 219 473 3179
Fax 219 473 3504
Mobile 219 545 5860
sajkowdj@bp.com

Effluent quality data and Discharge Monitoring Report forms from the BP Products North America Inc. - Whiting Business Unit for the month of October 2004, are attached. Effluent quality from the wastewater treatment plant for the month was excellent. 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 knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

If you have any questions or need any additional information, please contact R. A. Harris at (219) 473-3321.

Sincerely,

Daniel J. Sajkowski
Business Unit Leader

Attachments

'/004 0530 0000 2800 0947

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: DENNIS J. SEITH

DANIEL J. SAJKOWSKI
PLANT MANAGER

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	MO	DAY	YEAR		MO	DAY	YEAR
FROM	09	01	04	TO	09	30	04

I N 0 0 0 0 1 0 8 0 0 1 A 0 9 0 4

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	210	343	(26)	********	1.4	2.6	(19)	0	5 TIME /WEEK	COMP 24
	PERMIT REQUIREMENT	4161 MO AVG	8164 DAILY MX	LBS/DY		REPORT MO AVG	REPORT DAILY MX	MG/L		FIVE/WEEK	COMP24
OXYGEN DEMAND, CHEM. (LOW LEVEL) (COD) 00335 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	6557	9516	(26)	********	45	70	(19)	0	THREE /WEEK	COMP 24
	PERMIT REQUIREMENT	30323 MO AVG	58427 DAILY MX	LBS/DY		REPORT MO AVG	REPORT DAILY MX	MG/L		THREE/WEEK	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********		7.6	********	8.0	(12)	0	THREE /WEEK	GRAB
	PERMIT REQUIREMENT			********	6.5 MINIMUM		9 MAXIMUM	SU		THREE/WEEK	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2067	3403	(26)	********	14.2	24.0	(19)	0	5 TIMES /WEEK	COMP 24
	PERMIT REQUIREMENT	3646 MO AVG	5694 DAILY MX	LBS/DY		REPORT MO AVG	REPORT DAILY MX	MG/L		FIVE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH)TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	137	299	(26)	********	0.9	2.2	(19)	0	WEEK-DAYS	GRAB
	PERMIT REQUIREMENT	1368 MO AVG	2500 DAILY MX	LBS/DY		REPORT MO AVG	REPORT DAILY MX	MG/L		WEEK/DAYS	GRAB
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<44	357	(26)	********	<0.30	2.10	(19)	0	5 TIMES /WEEK	COMP 24
	PERMIT REQUIREMENT	1030 MO AVG	2080 DAILY MX	LBS/DY		REPORT MO AVG	REPORT DAILY MX	MG/L		FIVE/WEEK	COMP24
SULFIDE, TOTAL (AS S) 00745 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<1.8	4.2	(26)	********	<0.01	0.03	(19)	0	WEEKLY	COMP24
	PERMIT REQUIREMENT	204 MO AVG	514 DAILY MX	LBS/DY		REPORT MO AVG	REPORT DAILY MX	MG/L		WEEKLY	COMP24

NAME/TITLE PRINCIPAL EXECUTVE OFFICER OR AUTHORIZED AGENT

Authorized Agent
Daniel J. Sajkowski
Business Unit Leader

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	MO	DAY	YEAR
219	473-3179	10	21	04

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

INDUSTRIAL MAJOR
WHITING, LAKE COUNTY

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 PLANT MANAGER
ATTN: DENNIS J. SEITH DANIEL J. SAJKOWSKI

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	MO	DAY	YEAR		MO	DAY	YEAR
FROM	09	01	04	TO	09	30	04

IN0000108001A0904

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
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<0.7	<0.9	(26) LBS/DY	********	<0.005	<0.005	(19) MG/L	0	WEEKLY	COMP 24
	PERMIT REQUIREMENT	2.01 MO AVG	2.48 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			WEEKLY	COMP24
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<1.4	<1.7	(26) LBS/DY	********	<0.01	<0.01	(19) MG/L	0	WEEKLY	COMP 24
	PERMIT REQUIREMENT	2.39 MO AVG	68.56 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			WEEKLY	COMP24
SELENIUM, TOTAL (AS SE) 01147 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	4.2	(26) LBS/DY	********	********	30	(28) UG/L	0	SEMI ANNUAL	COMP 24
	PERMIT REQUIREMENT	******** MO AVG	REPORT DAILY MX		********	******** MO AVG	REPORT DAILY MX			SEMI ANNUAL	COMP24
PHENOLICS, TOTAL RECOVERABLE 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<1.57	2.79	(26) LBS/DY	********	<0.01	0.02	(19) MG/L	0	THREE/ /WEEK	COMP 24
	PERMIT REQUIREMENT	20.33 MO AVG	73.01 DAILY MX		********	REPORT MO AVG	REPORT DAILY MX			THREE/WEEK	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	17.6	20.7	(03) MGD	********	********	********	********	0	DAILY	CONT.
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX		********	********	********			DAILY	CONT.
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	******	******	(19) MG/L	0	*NA	*NA
	PERMIT REQUIREMENT	********	********		********	REPORT MO AVG	0.05 DAILY MX			5 TMS/WEEK	GRAB
COLIFORM, FECAL GENERAL 74055 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	********	********	********	********	******	******	(13) #/ 100ML	0	**NA	**NA
	PERMIT REQUIREMENT	********	********		********	200 MO AVG	400 DAILY MX			5 TMS/WEEK	GRAB

NAME/TITLE PRINCIPAL EXECUTVE OFFICER OR AUTHORIZED AGENT

Authorized Agent:
Daniel J. Sajkowski
Business Unit Leader

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	10	21	04
AREA CODE	NUMBER	MO	DAY	YEAR

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

* Chlorine testing required only when chlorinating this stream.
** Fecal coliform testing required only when refinery sanitary sewers are discharging to the BP WWTP.

INDUSTRIAL MAJOR
WHITING, LAKE COUNTY

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: DENNIS J. SEITH

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

PERMIT NUMBER	DISCHARGE NUMBER
IN0000108	001A

IN0000108001A0904

MONITORING PERIOD	MO	DAY	YEAR		MO	DAY	YEAR
FROM	09	01	04	TO	09	30	04

DANIEL J. SAJKOWSKI
PLANT MANAGER

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
FLOW, TOTAL	SAMPLE MEASUREMENT	********	527.1	(3R)	********	********	********		0	ONCE/ MONTH	RCOTOT
82220 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		REPORT MO TOTAL	MGAL				********		ONCE/ MONTH	RCOTOT
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
znone	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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 OR AUTHORIZED AGENT

Authorized Agent:
Daniel J. Sajkowski
Business Unit Leader

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.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
219	473-3179	10	21	04
AREA CODE	NUMBER	MO	DAY	YEAR

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

INDUSTRIAL MAJOR
WHITING, LAKE COUNTY

INDUSTRIAL MAJOR, LAKE COUNTY