



*Louisville and Jefferson County Metropolitan Sewer District
700 West Liberty Street
Louisville Kentucky 40203-1911
502-540-6000
www.msdlouky.org*

December 15, 2010

Ms. Carolena Bentley
Kentucky Division of Water
200 Fair Oaks Lane
Frankfort, Kentucky 40601

RE: Derek Guthrie WQTC, KPDES No: KY0078956
Discharge Monitoring Report
November 2010

Dear Ms. Bentley:

Attached are the Discharge Monitoring Report (DMR) and the Monthly Operating Report (MOR) for the Derek Guthrie WQTC, for the month of November 2010.

There were no exceedances, bypasses, or overflow reports for DRG WQTC for the month of November.

If you have any questions concerning the attached DMR's, please contact me at (502)540-6031.

Sincerely,

A handwritten signature in black ink, appearing to be "John Kessel", written over the word "Sincerely,".

John Kessel
Process Supervisor, West Region

JMK/West County 1110

Enclosures

cc: C. Roth
T. Singleton
R. Shaw



Beneficial Use of Louisville's Biosolids
www.louisvillegreen.com

NAME DEREK R. GUTHRIE WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
 4522 ALGONQUIN PKWY
 LOUISVILLE KY 40211
FACILITY DEREK R. GUTHRIE WQTC

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM (KPDES)
 DISCHARGE MONITORING REPORT (DMR)

KY0078956
 PERMIT NUMBER


001 2
 DISCHARGE NUMBER

MAJOR (SUBR LV)
 F - FINAL JEFFE
 MUNICIPAL WASTEWATER
 EFFLUENT
 [] No Discharge

LOCATION LOUISVILLE KY 40272
ATTN: DENNIS THOMASSON SR. METRO OPS

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
10	11	01		10	11	30

NOTE: Read instructions before completing this form

PARAMETER	MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT			***	5			(19) MG/L	0	01/01	GR	
00300 1 0 0	PERMIT MEASUREMENT	*****	*****	***	2	*****	*****	(19) MG/L		DAILY	GRAB	
EFFLUENT GROSS VALUE				***	INST MIN							
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	39249	41972	(26) LBS/DY		244	320	(19) MG/L	0	01/01	CP	
00310 G 0 0	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AV	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		DAILY	COMPOS	
RAW SEW/INFLUENT												
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	1963	2809	(26) LBS/DY		11	13	(19) MG/L	0	01/01	CP	
00310 1 0 1	PERMIT MEASUREMENT	7506 MO AVG	11259 MX WK AV	(26) LBS/DY	*****	30 MO AVG	45 MX WK AV	(19) MG/L		DAILY	COMPOS	
EFFLUENT GROSS VALUE												
PH	SAMPLE MEASUREMENT			***	6.9		8.1	(12) SU	0	01/01	GR	
00400 1 0 0	PERMIT MEASUREMENT	*****	*****	***	6.0 MINIMUM	*****	9.0 MAXIMUM	(12) SU		DAILY	GRAB	
EFFLUENT GROSS VALUE												
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	47236	52101	(26) LBS/DY		284	340	(19) MG/L	0	01/01	CP	
00530 G 0 0	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AV	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		DAILY	COMPOS	
RAW SEW/INFLUENT												
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	1547	1991	(26) LBS/DY		9	11	(19) MG/L	0	01/01	CP	
00530 1 0 1	PERMIT MEASUREMENT	7506 MO AVG	11259 MX WK AV	(26) LBS/DY	*****	30 MO AVG	45 MX WK AV	(19) MG/L		DAILY	COMPOS	
EFFLUENT GROSS VALUE												
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	3310	3539	(26) LBS/DY		21	25	(19) MG/L	0	01/01	CP	
00610 G 0 0	PERMIT MEASUREMENT	REPORT MO AVG	REPORT MX WK AV	(26) LBS/DY	*****	REPORT MO AVG	REPORT MX WK AV	(19) MG/L		DAILY	COMPOS	
RAW SEW/INFLUENT												
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. 1001 AND 33 U.S.C. 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.							TELEPHONE		DATE		
H J SCHARDEIN EXECUTIVE DIRECTOR	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							502	540-6000	10	12	21
TYPED OR PRINTED								AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

NAME DEREK R. GUTHRIE WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
4522 ALGONQUIN PKWY
LOUISVILLE KY 40211
FACILITY DEREK R. GUTHRIE WQTC

KY0078956
PERMIT NUMBER

0012
DISCHARGE NUMBER

MAJOR (SUBR LV)
F - FINAL JEFFE
MUNICIPAL WASTEWATER
EFFLUENT
[] No Discharge

LOCATION LOUISVILLE KY 40272
ATTN: DENNIS THOMASSON SR. METRO OPS

MONITORING PERIOD
FROM 10 11 01 TO 10 11 30

NOTE: Read instructions before completing this form

Main data table with columns: PARAMETER, QUANTITY OR LOADING (AVERAGE, MAXIMUM, UNITS), QUALITY OR CONCENTRATION (MINIMUM, AVERAGE, MAXIMUM, UNITS), NO EX, FREQUENCY OF ANALYSIS, SAMPLE TYPE. Includes rows for Nitrogen, Ammonia, Nitrogen, Kjeldahl, Phosphorus, Flow, Chlorine, and Coliform.

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

NAME DEREK R. GUTHRIE WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
4522 ALGONQUIN PKWY
LOUISVILLE KY 40211
 FACILITY DEREK R. GUTHRIE WQTC

KY0078956
 PERMIT NUMBER

001 2
 DISCHARGE NUMBER

MAJOR (SUBR LV)
 F - FINAL JEFFE
 MUNICIPAL WASTEWATER
 EFFLUENT
 No Discharge

LOCATION LOUISVILLE KY 40272
 ATTN: DENNIS THOMASSON SR. METRO OPS

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
FROM 10	11	01		10	11	30

NOTE: Read instructions before completing this form

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0 PERCENTREMOVAL	SAMPLE MEASUREMENT			***	95			(23) CENT	0	30 MONTH	CAL	
	PERMIT MEASUREMENT	*****	*****	***	85 MO AVG	*****	*****	(23) CENT		ONCE/MONTH	CALCTD	
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0 PERCENTREMOVAL	SAMPLE MEASUREMENT			***	97			(23) CENT	0	30 MONTH	CAL	
	PERMIT MEASUREMENT	*****	*****	***	85 MO MIN	*****	*****	(23) CENT		ONCE/MONTH	CALCTD	
	SAMPLE MEASUREMENT											
	PERMIT MEASUREMENT											
	SAMPLE MEASUREMENT											
	PERMIT MEASUREMENT											
	SAMPLE MEASUREMENT											
	PERMIT MEASUREMENT											
	SAMPLE MEASUREMENT											
	PERMIT MEASUREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C 1001 AND 33 U.S.C 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.							TELEPHONE		DATE		
H J SCHARDEIN EXECUTIVE DIRECTOR								502	540-6000	10	12	21
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 USE MO AVG FOR BOD/TSS REMV; REPT IN MINIMUM COLUMN.

Facility Name/Location if different)

NAME DEREK R. GUTHRIE WQTC MSD
 ADDRESS C/O CEDAR CREEK WQTC
 4522 ALGONQUIN PKWY
 LOUISVILLE KY 40211
 FACILITY DEREK R. GUTHRIE WQTC

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM (KPDES)
 DISCHARGE MONITORING REPORT (DMR)

KY0078956
 PERMIT NUMBER

001 R
 DISCHARGE NUMBER

MAJOR (SUBR LV)
 F - FINAL JEFFE
 REASONABLE POTENTIAL EFFLUENT
 [] No Discharge

LOCATION LOUISVILLE KY 40272
 ATTN: DENNIS THOMASSON SR. METRO OPS

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
10	11	01		10	11	30

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***		< 0.01	< 0.01	(19) MG/L	0	ONCE/MONTH	CP
	PERMIT MEASUREMENT	*****	*****	***	*****	REPORT MO AVG	REPORT DAILY/MX	(19) MG/L		ONCE/MONTH	COMPOS
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										
	SAMPLE MEASUREMENT										
	PERMIT MEASUREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 H J SCHARDEIN
 EXECUTIVE DIRECTOR
 TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C 1001 AND 33 U.S.C 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 502 540-6000
 AREA NUMBER

DATE
 10 12 21
 YEAR MO DAY

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

Name of Sewage Treatment Plant:

West County WTP

Jefferson

Month of:

November

2010

KPDES Permit Number:

KY0078956

Plant Capacity:

30 MGD

Receiving Stream:

Ohio River

Date	Total Flow (MG)	Raw Sewage		pH		Settleable Solids (mg/L)			Dissolved Oxygen (mg/L)			Suspended Solids (mg/L)			Total Solids (mg/L)			5-day BOD (mg/L)			Activated Sludge		Aeration Basin						Dig Sludge		Final									
		Grit Removed (cu ft)	Screenings (cu ft)	Raw	Final	Raw	Primary (or Sec)	Final	Stream Above	Stream Below	Raw	Primary (or Sec)	Final	Raw	Primary (or Sec)	Final	Raw	Primary (or Sec)	Final	Million Gal/Day	MLSS mg/L X 1000	WAS	Gal/Day X 1000	Oxygen (mg/L) #1	Oxygen (mg/L) #2	MLSS (mg/L) X 1000 #1	MLVSS (mg/L) X 1000 #1	30 min. Settle.	SVI	% Solids	Phosphorus (mg/L)	TKN (mg/L)	Chlorine Residual (mg/L)	NH3-N (mg/L)	Fecal Coliform Col/100ml	Hexavalent Chromium	Hardness			
1	16.08			7.3	7.1					236	8				218		10		1990						1070	900	90.0	0.08												
2	15.95			7.6	7.3					558	9				1970		8		1970						1200	1020	90.0	0.08		2.47			0.01	6.50	2					
3	16.07			8.6	7.2					310	10				335		12		2110						1170	950	90.0	0.08					0.01	6.50	2					
4	16.16			9.2	7.3					350	11				315		17		1900						1160	920	90.0	0.08					0.01	6.10	4					
5	16.12			9.3	7.5					284	7				233		8		2020						1140	850	90.0	0.08					0.01	6.20	5					
6	15.73			7.5	7.3					318	7				362		9		2900						1080	930	90.0	0.08					0.01	6.70	1					
7	15.95			7.6	7.6					276	7				315		7		2000						1080	930	90.0	0.08					0.01	6.70	1					
8	15.48			7.5	7.3					358	6				315		6		2010						1160	990	100.0	0.09			8.40		0.01	7.30	2					
9	15.63			7.4	7.3					364	6				425		8		2180						1290	1040	100.0	0.08					0.01	6.00	1					
10	15.45			7.5	7.5					386	6				348		10		2220						1250	1010	100.0	0.08		2.51			0.01	6.90	1	0.01	244			
11	15.70			7.0	7.3					288	7				318		14		2030						1220	980	100.0	0.08					0.01	6.50	1					
12	15.46			7.2	7.3					358	8				307		10		1920						1240	980	80.0	0.06					0.01	7.20	1					
13	15.40			7.5	7.5					302	13				221		11		2060						1100	880	90.0	0.08					0.01	8.20	3					
14	16.17			7.1	7.2					326	13				304		13		1970						1510	1180	80.0	0.05					0.01	8.30	1					
15	16.29			7.4	7.2					250	9				209		11		2000						1200	910	90.0	0.08			10.00		0.01	8.50	6					
16	19.37			7.3	7.4					328	18				215		19		2230						1150	930	90.0	0.08					0.01	7.90	18					
17	25.45			7.4	7.7					276	12				176		11		2220						1100	900	80.0	0.07		2.72			0.01	8.10	2					
18	19.72			7.4	8.1					385	9				222		11		2560						1110	850	70.0	0.06					0.01	5.30	2					
19	18.29			7.4	7.1					332	10				212		13		2320						1250	920	80.0	0.05					0.01	6.40	8					
20	18.14			7.4	7.3					338	11				216		17		2280						1440	1170	90.0	0.06					0.01	7.70	2					
21	18.25			7.4	7.1					182	11				216		17		2430						1310	930	90.0	0.07					0.01	7.70	2					
22	17.67			7.3	7.2					146	8				216		12		2270						1260	910	80.0	0.08					0.01	7.90	22					
23	23.77			7.3	7.5					324	16				222		14		2210						1310	1090	100.0	0.08					0.01	9.40	5					
24	26.52			7.4	7.4					170	9				78		12		2620						1230	960	90.0	0.07		2.07			0.01	8.10	9					
25	38.19			7.1	7.0					192	4				129		8		2480						1140	930	90.0	0.08					0.01	4.90	1					
26	60.22			7.1	6.9					156	6				166		10		2770						1130	920	100.0	0.09					0.01	5.00	1					
27	31.17			7.3	7.1					176	5				187		8		3580						1130	960	70.0	0.06					0.01	3.70	3					
28	25.22			7.3	7.5					220	6				153		7		2840						1540	1090	110.0	0.07					0.01	4.70	1					
29	23.26			7.5	7.4					100	6				71		8		2890						1710	1190	110.0	0.06		6.80			0.01	5.60	2					
30	54.10			7.3	7.4						6						6		2830						1460	1130	110.0	0.08					0.01	6.10	1					
Total		0	0																																					
Avg.	21.90			7.5	7.3					6.5	284	9			244		11		2343.3						1233.33	973.33	90.67	0.07		2.22		0.76	0.01	6.70	2	0.01	244			

Total Number of Sewer Connections: _____
 Residential Connections: _____
 Commercial Connections: _____
 Industrial Connections: _____
 Sewer Connections X 4 = _____

Industrial Waste Population Equivalent

 209568
 Flow

 262647
 BOD

 247408
 TSS

Operator _____ Kevin Thompson
 Cert. # _____ #20583
 Phone # _____ 540-5042