



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

June 9, 2010

Ms. Carolena Bentley
DMR Coordinator
200 Fair Oaks Lane
Frankfort, Kentucky 40601

Re: **MSD Metro Operations**
Ken Carla WQTC; KPDES No.: KY0022497
Discharge Monitoring Reports –May 2010

Dear Ms. Bentley

Attached is the Discharge Monitoring Reports (DMRs) and the Monthly Operator Report (MOR) for the Ken Carla WQTC; KPDES No.: KY0022497 for the month of May 2010.

There are no exceedences, overflow reports or bypass reports for this month.

If you have any questions concerning the attached DMRs, please contact me at (502)587-5856.

Sincerely,

D.J.Rheinlaender
Process Supervisor, East Region

DJR/Ken Carla 0510

Enclosures

cc. C. Roth (DOW Louisville)
T. Singleton
R. Shaw



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

NAME KEN CARLA WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY KEN CARLA WQTC MSD
LOCATION LOUISVILLE KY
ATTN: DENNIS THOMASSEN, SR METRO OPS

KY0022497
PERMIT NUMBER

001 1
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL
SANITARY WASTEWATER
EFFLUENT
*** NO DISCHARGE 1-1-1 ***
JEFFE

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
10	03	01	10	03	31

FROM

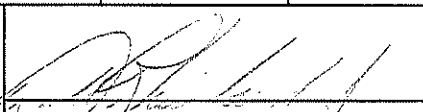
TO

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			
OXYGEN, DISSOLVED (DO)		*****	*****		8	*****	*****	(19)		01/07	GR
00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	2	*****	*****	MG/L		ONCE / MONTH	GRAB
BOD, 5-DAY (20 DEG. C)		0.23	0.37	(26)	*****	14	22	(19)		02/31	CP
00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.50	5.00		*****	30	50	MG/L		ONCE / MONTH	COMPOS
	PERMIT REQUIREMENT	GODA AVG	DAILY MX	LBS/DY		GODA AVG	DAILY MX				
PH		*****	*****		6.7	*****	7.6	(12)		01/17	GR
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	6.0	*****	7.0	SU		ONCE / MONTH	GRAB
	PERMIT REQUIREMENT			****	MINIMUM		MAXIMUM				
SOLIDS, TOTAL SUSPENDED		0.23	0.23	(26)	*****	14	14	(19)		01/31	CP
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.50	5.00		*****	30	50	MG/L		ONCE / MONTH	COMPOS
	PERMIT REQUIREMENT	GODA AVG	DAILY MX	LBS/DY		GODA AVG	DAILY MX				
NITROGEN, AMMONIA TOTAL (AS N)		0.005	0.005	(26)	*****	0.3	0.3	(19)		01/31	CP
00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.67	3.34		*****	20	40	MG/L		ONCE / MONTH	COMPOS
	PERMIT REQUIREMENT	GODA AVG	DAILY MX	LBS/DY		GODA AVG	DAILY MX				
PHOSPHORUS, TOTAL (AS P)		*****	*****		*****	0.29	0.29	(19)		01/31	CP
00665 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	REPORT	REPORT	MG/L		ONCE / MONTH	COMPOS
	PERMIT REQUIREMENT			****		GODA AVG	DAILY MX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.003	0.012	(08)	*****	*****	*****			CN	CN
00050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	REPORT	REPORT		*****	*****	*****	****		WEEK-DAYS	INSTAN
	PERMIT REQUIREMENT	GODA AVG	INST MAX	MGD							

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Ex. Dir
H. J. Schindler
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 person or 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.


SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
DATE
AREA CODE NUMBER YEAR MO DAY

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

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME KEN CARLA WQTC MSD
ADDRESS C/O CEDAR CREEK WQTC
8405 CEDAR CREEK RD
LOUISVILLE KY 40211
FACILITY KEN CARLA WQTC MSD
LOCATION LOUISVILLE KY
ATTN: DENNIS THOMASSEN, SR METRO OPS

KY0022497
PERMIT NUMBER

001 1
DISCHARGE NUMBER

MINOR
(SUBR LV)
F - FINAL JEFFE
SANITARY WASTEWATER
EFFLUENT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
10	05	01		10	05	31

*** NO DISCHARGE 1-1 ***

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			
COLIFORM, FECAL GENERAL		*****	*****		*****			(13)		01/31	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	*/		ONCE/MONTH	GRAB
	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
TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
DATE
AREA CODE NUMBER YEAR MO DAY

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

Ken Carla		Report for	May-10		Tot. Exc.=		0			
Tot. Flow=	0.097	Concentrations				Pounds				
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.	
5/1/10	0.006									
5/2/10	0.012									
5/3/10	0.006									
5/4/10	0.003									
5/5/10	0.004									
5/6/10	0.004									
5/7/10	0.003									
5/8/10	0.002									
5/9/10	0.002									
5/10/10	0.003									
5/11/10	0.003									
5/12/10	0.004									
5/13/10	0.002	14	22	0.28	21	0.234	0.367	0.005	0.289	
5/14/10	0.002									
5/15/10	0.003									
5/16/10	0.003									
5/17/10	0.003									
5/18/10	0.003									
5/19/10	0.003									
5/20/10	0.001									
5/21/10	0.002									
5/22/10	0.002									
5/23/10	0.002									
5/24/10	0.002		6				0.100			
5/25/10	0.002									
5/26/10	0.003									
5/27/10	0.003									
5/28/10	0.002									
5/29/10	0.002									
5/30/10	0.002									
5/31/10	0.003									
Average	0.003	14.00	14.00	0.28	21.00	0.23	0.23	0.00	0.29	
Maximum	0.012	14.00	22.00	0.28	21.00	0.23	0.37	0.00	0.29	
Exceed.	1	0	0	0	0	0	0	0		

KEN CARLA STP MSI
C/O ERIC G. BRADY
4522 ALGONQUIN PA
LOUISVILLE KY
KEN CARLA STP MSI
LOUISVILLE KY
ATTN: H. J. SCHARDI

OXYGEN, DISSOLVEI
(DO)
00300 1 0 0
EFFLUENT GROSS V
BOD, 5-DAY
(20 DEG. C)
00310 1 0 0
EFFLUENT GROSS V
PH

00400 1 0 0
EFFLUENT GROSS V
SOLIDS, TOTAL
SUSPENDED
00530 1 0 0
EFFLUENT GROSS V
NITROGEN, AMMONI.
TOTAL (AS N)
00610 1 0 0
EFFLUENT GROSS V
PHOSPHORUS, TOT/
(AS P)
00665 1 0 0
EFFLUENT GROSS V
FLOW, IN CONDUIT C
THRU TREATMENT P
50050 1 0 0
EFFLUENT GROSS V
COLIFORM, FECAL