



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

July 22, 2011

Ms. Cheryl Edwards
Kentucky Division of Water
200 Fair Oaks Lane
Frankfort, Kentucky 40601

**Re: MSD Metro Operations
McNeely Lake WQTC; KPDES No.: KY0029416
Discharge Monitoring Reports – June 2011.**

Dear Ms. Edwards:

Attached are the Discharge Monitoring Reports (DMRs) and the Monthly Operating Report (MOR) for the McNeely Lake WQTC, KPDES No.: KY0029416 for the month of June 2011.

Also included are the June overflow reports.

There were no exceedences for Mcneely lake WQTC for the month of June.

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

Sincerely,

John Kassel
Process Supervisor, West region

JMK/McNeely Lake 0611

Enclosures

cc: T. Singleton
R. Shaw
C. Roth



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

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

NAME MCNEELY LAKE WQTC MSD

ADDRESS C/O CEDAR CREEK WQTC

3405 CEDAR CREEK RD

LOUISVILLE

KY 40211

FACILITY MCNEELY LAKE WQTC MSD

LOCATION LOUISVILLE

KY 40000

ATTN: DENNIS THOMASSON, SR. METRO OPS

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

KY0027416

PERMIT NUMBER

0011

DISCHARGE NUMBER

MINOR

(SUBR LV)

T - FINAL

SANITARY WASTEWATER

EFFLUENT

*** NO DISCHARGE ***

JEFF

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY

FROM

TO

NOTE: Read Instructions before completing this form.

PARAMETER		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	*****	*****		7	*****	*****		0	11/30	GR
00300 1 0 0	PERMIT REQUIREMENT	*****	*****	****	INST MIN	*****	*****	MG/L			
EFFLUENT GROSS VALUE											
PH	SAMPLE MEASUREMENT	*****	*****		6.5	*****	7.2		0	11/30	GR
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	MINIMUM	*****	MAXIMUM	SU			
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	5	8	(25)		5	9		0	01/07	CP
00530 1 0 0	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L			
EFFLUENT GROSS VALUE											
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	0.7	JK 5 2	(25)		0.9	2		0	01/07	CP
00610 1 1 0	PERMIT REQUIREMENT	30DA AVG	DAILY MX	LBS/DY		30DA AVG	DAILY MX	MG/L			
EFFLUENT GROSS VALUE											
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT					3.4	4.3		0	01/07	CP
00665 1 0 0	PERMIT REQUIREMENT	*****	*****	****		30DA AVG	DAILY MX	MG/L		MONTH	
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.109	0.182	(0.01)					0	EN	EN
50050 1 0 0	PERMIT REQUIREMENT	30DA AVG	INST MAX	MGD				****		UGUE	
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT					0.013	0.010		0	11/30	CK
50060 1 0 0	PERMIT REQUIREMENT	*****	*****	****		30DA AVG	DAILY MX	MG/L			
EFFLUENT GROSS VALUE											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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		
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME MCNEELY LAKE WQTC MBD

ADDRESS C/O CEDAR CREEK WQTC

6405 CEDAR CREEK RD

LOUISVILLE

KY 40211

FACILITY MCNEELY LAKE WQTC MBD

LOCATION LOUISVILLE

KY 00000

ATTN: DENNIS THOMASSEN, SR METRO OPS

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

KY0029416

PERMIT NUMBER

001 1

DISCHARGE NUMBER

MINOR

(SUBR LV)

F - FINAL

SANITARY WASTEWATER

EFFLUENT

*** NO DISCHARGE 1 ***

NOTE: Read Instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COLIFORM, FECAL	SAMPLE MEASUREMENT	*****	*****		*****	52	98	13	0	1/07	CR
GENERAL	PERMIT REQUIREMENT	*****	*****	****	*****	300A GED	7 3A GED	100ML			
74035 1 0 0											
EFFLUENT GROSS VALUE											
BOD, CARBONACEOUS	SAMPLE MEASUREMENT	5	7	(.26)	*****	6	9	13	0	1/07	CP
05 DAY, 20C	PERMIT REQUIREMENT	25	51		*****	15	30				
B0082 1 0 0											
EFFLUENT GROSS VALUE		300A AVG	DAILY MX	LBS/DY		300A AVG	DAILY MX	MG/L			
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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

Exec Dir

H.J. Schuchman Jr.

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

502 546-6000

DATE

11 07 21

AREA CODE NUMBER YEAR MO DAY

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

McNeely Lake		Report for		Jun-01		Tot. Exc.=		0			
Tot. Flow=		3.273		Concentrations				Pounds			
Date	Flow	TSS	BOD	NH3	Fecal	TSS	BOD	NH3	Tot. Phos.		
6/1/01	0.109	9	6	0.84	27	8.182	5.454	0.764	3.42		
6/2/01	0.045										
6/3/01	0.143										
6/4/01	0.081										
6/5/01	0.104										
6/6/01	0.089										
6/7/01	0.09										
6/8/01	0.093	6	5	0.45	51	4.654	3.878	0.349	4.31		
6/9/01	0.085										
6/10/01	0.082										
6/11/01	0.093										
6/12/01	0.093										
6/13/01	0.08										
6/14/01	0.08										
6/15/01	0.085				56						
6/16/01	0.09	4	9	2		3.002	6.755	1.501	3.52		
6/17/01	0.086										
6/18/01	0.125										
6/19/01	0.137										
6/20/01	0.182										
6/21/01	0.142										
6/22/01	0.154	2	2	0.28	98	2.569	2.569	0.360	2.22		
6/23/01	0.18										
6/24/01	0.137										
6/25/01	0.124										
6/26/01	0.135										
6/27/01	0.117										
6/28/01	0.108										
6/29/01	0.105										
6/30/01	0.099										
Average	0.109	5.25	5.50	0.89	52.43	4.60	4.66	0.74	3.37		
Maximum	0.182	9.00	9.00	2.00	98.00	8.18	6.76	1.50	4.31		
Exceed.	0	0	0	0	0	0	0	0			

Report Selections: Excluding PPI, CSO, Excluding LAT and SSL, Prob Code: BYPAS, Result: WUS, Act Code: DISDW, DISREV

KPDES # KY0029416	Facility ID MSD0228	Water Quality Treatment Center MCNEELY LAKE	Receiving Stream of Treatment Center PENNSYLVANIA RUN	Region WEST
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Facility Type SPL Sewer Treatment Plant	Facility ID MSD0228	Facility Address 10300 ROD N REEL RD	If Pump Station, Name of Pump Station:	Receiving Stream PENNSYLVANIA RUN	Discharge to STREAM
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<u>Activity Code / Description</u>	<u>WO #</u>	<u>Initiated</u>	<u>Initiated By</u>	<u>Assigned To</u>	<u>Disch Status</u>	<u>Event Date</u>	<u>Problem</u>	<u>Result</u>	<u>Completed</u>	<u>Condition</u>
DISREV: RAIN EVENT DISCHARGE	1281379	06/19/11 10:00 AM	ELDER	HEACOCK	REPAIRED - ISSUE RESOLVED	06/19/11	BYPASS AT WQTC	UNAUTHORIZED DISCHARGE-WATER S	06/19/11 10:30 AM	

Spot Inspections:

Discharge Amount:	3,000 GAL
Cause:	LOSS OF LG&E POWER
Clean Up:	MSD CLEANED & SANITIZED THE AREA
Control Zone:	PLACED TEMPORARY SIGNS AROUND THE IMPACTED AREA
Impact:	SEWAGE/WATER DISCHARGING FROM WET WELL OF INF PS
Repair:	HOOKED UP MOBILE GENERATOR TO RESTORE POWER

Notifications:

	DISPUB	Temporary signs posted around affected area
06/19/11 01:00 AM	DISNOT	Email notification of unauthorized discharge sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov
06/19/11 01:00 AM	DISSNO	Supplemental Email notification of unauthorized discharge has been sent to ireland.sean@epa.gov, eppc.ert@ky.gov and LisaA.Jeffries@ky.gov