

FORT LEWIS WWTP INVESTIGATION

ENCLOSURES AND EXHIBITS

Contains Exhibits 50-162

(2 of 2)

VOL II

Exhibit 50

EXHIBIT 50

ES ENGINEERING OPERATING LOG										Installation		FORT LEWIS		MONTH		June 2005		MONTHLY SUMMARY							
(Sewage - General)										Plant		Waste Water													
DATE	DAY OF WEEK	RAINFALL (INCHES)	TEMP. INFLUENT (C)	TEMP. EFFLUENT (C)	PH INFLUENT	PH EFFLUENT	TOTAL FLOW (MGD)	RAW SLUDGE PUMPED (GALLONS)	BED POUR (GALLONS)	RAW SLUDGE		BOD			SUSPENDED SOLIDS				CL ₂ USED (GL)	FECAL COLIFORM (COLONIES PER 100ML)	FUEL OIL USED (GALLONS)	DIGESTER GAS PRODUCED (FT ³)			
										TOTAL SOLIDS (%)	TOTAL VOLATILE (%)	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)					OVERALL % REMOVAL	RESIDUAL (mg/L)	
1	W		18	18	7.0	6.6	2.25	18800		3.98	83.8	125	85	15	88	242	89	25	80	0.21		2		55800	
2	Th		18	17	6.8	6.7	3.02	22500				234	138	17	93	231	87	21	91	0.17		23		53400	
3	F		17	17	6.7	6.8	2.69	28700				264	117	19	93	218	82	20	91	0.13		2		52600	
4	Sa		18	17	6.8	6.8	2.03	17100				261	103	21	92	230	83	15	93	0.17	300	2		59200	
5	S		17	17	6.8	6.8	3.18	18000				140	98	13	91	288	81	16	94	0.15		13		60800	
6	M		17	17	6.8	6.8	2.97	17100				136	86	13	91	247	57	12	95	0.11		4		56500	
7	T		18	17	6.8	6.8	3.05	16200				146	95	18	89	244	73	14	94	0.23		2		58700	
8	W		18	17	6.6	6.8	2.89	17100		3.28	83.6	221	110	15	93	277	64	15	95	0.15		2		56800	
9	Th		18	18	6.7	6.8	2.89	17100				242	141	19	92	267	59	13	94	0.16		23		55800	
10	F		19	18	6.7	6.7	3.05	17100				206	127	17	92	278	74	16	94	0.19		4		57000	
11	Sa		18	17	6.8	6.8	2.83	18000				210	126	21	90	322	73	15	95	0.15	275	8		56600	
12	S		18	17	6.7	6.8	2.86	17100				179	103	18	90	224	64	16	93	0.15		23		52500	
13	M		18	17	6.9	6.7	2.08	17100				191	111	20	90	232	60	18	92	0.13		8		53200	
14	T		19	18	6.9	6.7	3.31	17100				263	119	21	92	270	67	17	94	0.20		8		58200	
15	W		19	18	6.8	6.7	2.90	24300		3.26	83.5	289	134	19	94	335	62	16	95	0.24		2		63500	
16	Th		19	18	6.9	6.7	3.28	19400				204	117	18	92	227	62	14	94	0.20		4		72800	
17	F		18	19	6.8	6.9	3.37	17100				188	113	18	90	283	78	15	95	0.18		2		75400	
18	Sa		18	19	6.8	6.9	2.82	18000				148	90	19	87	199	67	19	90	0.10	325	4		57600	
19	S		18	19	6.8	6.9	2.94	17100				166	96	19	89	213	60	16	92	0.13		8		53600	
20	M		19	20	6.8	6.8	3.19	18800				175	120	20	88	260	77	18	94	0.15		30		54500	
21	T		19	19	6.6	6.8	3.20	17100				190	114	17	91	268	78	15	94	0.13		8		54500	
22	W		19	19	6.9	6.7	3.20	17100		3.26	83.9	178	123	16	91	214	78	12	94	0.05		90		53300	
23	Th		19	18	6.8	6.5	3.15	18000				240	137	17	93	281	78	16	94	0.14		8		50900	
24	F		18	19	6.9	6.7	3.13	19900				208	130	19	91	247	78	19	92	0.06		7		61600	
25	Sa		18	19	6.9	6.8	1.84	22500				181	105	17	89	222	78	16	93	0.09	425	17		58900	
26	S		18	18	6.8	6.8	2.89	18000				175	88	18	91	217	64	17	92	0.07		8		51600	
27	M		19	19	6.9	6.9	3.14	18000				187	137	20	89	262	86	28	90	0.08		11		43800	
28	T		18	19	7.0	7.1	3.58	18900				173	123	20	88	284	76	19	93	0.12		30		49700	
29	W		19	20	6.9	6.7	3.20	20700				188	119	18	90	308	78	25	92	0.11		17		52900	
30	Th		19	20	6.9	6.8	3.53	27900		3.57	81.9	285	167	20	93	249	97	22	91	0.13		8		65800	
Total							86.03	583400														1325			2508
Maximum			19	20	7.8	7.1	3.66	27600				299	167	21	94	336	97	26	95	0.24	425			75400	
Minimum			17	17	6.6	6.5	1.64	16200				125	88	13	87	199	57	12	90	0.05	275			43800	
Average			18	18			2.93	18780				200	116	18	91	254	73	17	93	0.14	331.3	2		58670	

PREPARED BY: <u> </u>	DATE: <u>7-7-05</u>	REVIEWING OFFICIAL: <u> </u>	DATE: <u> </u>	PW ENGINEER: <u> </u>	DATE: <u> </u>
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FEI

EXHIBIT 51

VOL II
Exhibit 51

F/		S ENGINEERING OPERATING LOG						Installation		FORT LEWIS		MONTH		July 2005		MONTHLY SUMMARY							
(Sewage - General)						Plant		Waste Water															
DATE	DAY OF WEEK	RAINFALL (INCHES)	TEMP. INFLUENT (C)	TEMP. EFFLUENT (C)	pH INFLUENT	pH EFFLUENT	TOTAL FLOW (MGD)	RAW SLUDGE PUMPED (GALLONS)	RAW SLUDGE		BOD			SUSPENDED SOLIDS							CL2 RESIDUAL (mg/L)	CL2 USED (GL)	DECHLOR (GL) USED
								TOTAL SOLIDS (%)	TOTAL VOLATILE (%)	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL						
1	F		19	19	7.0	6.7	2.63	20700		184	125	18	90	201	72	18	91	0.09			23		71400
2	Sa		19	19	7.0	6.7	2.88	14400		144	88	14	90	151	65	49	70	0.11	300		11		56400
3	S		19	20	6.9	6.8	2.85	14400		167	102	15	90	236	85	19	92	0.08			2		48200
4	M		19	20	6.9	6.5	2.60	12600		144	98	20	86	219	70	21	80	0.10			13		42500
5	T		19	20	6.9	6.5	3.29	16200		332	142	21	94	284	82	18	94	0.10			17		45100
6	W		20	20	7.0	6.7	3.33	13680	3.50	176	111	19	88	229	70	19	92	0.10			8		48800
7	Th		20	20	6.9	7.0	3.38	19080		218	115	18	92	277	85	22	92	0.10			13		57100
8	F		19	20	6.9	6.9	3.46	20670		189	127	17	91	250	92	25	90	0.09			6		47100
9	Sa		19	19	6.9	6.6	3.02	23130		176	99	20	86	258	94	20	92	0.11	325		17		62300
10	S		19	19	6.8	6.7	2.98	29070		153	88	21	86	202	78	18	91	0.09			4		56000
11	M		20	20	6.8	6.9	2.32	20880		170	113	19	89	266	102	14	95	0.16			23		51300
12	T		20	20	6.8	6.9	3.37	27000		174	149	20	89	198	78	25	87	0.16			23		56400
13	W		20	20	6.8	7.0	3.31	29700		176	133	18	90	254	85	22	91	0.16			50		58200
14	Th		20	21	6.9	6.9	3.13	22800	2.85	238	148	22	91	240	76	17	93	0.13			13		64500
15	F		19	21	6.8	7.0	2.89	22500		151	113	21	88	230	80	18	92	0.14			17		58500
16	Sa		20	21	6.9	7.0	3.37	25200		205	115	20	90	215	72	19	91	0.15	175		2		50700
17	S		20	21	6.9	6.9	3.01	24300		148	83	15	90	226	72	17	92	0.18			2		50700
18	M		20	20	6.9	6.9	2.61	20840		136	108	15	89	239	81	16	93	0.13			7		49400
19	T		20	19	6.8	7.0	3.36	22500		210	134	20	90	225	90	17	92	0.16			23		53200
20	W		20	20	6.7	6.8	2.80	19080		152	97	18	88	185	115	18	90	0.11			13		49800
21	Th		20	21	6.8	6.8	3.54	31780		246	138	15	94	273	85	19	93	0.18			13		46800
22	F		20	20	6.9	6.8	2.17	19710		182	147	17	91	248	80	16	94	0.09			90		49500
23	Sa		20	20	6.9	6.7	1.73	18450		169	106	21	87	222	82	18	92	0.11	350		18		51000
24	S		19	19	7.0	6.8	2.97	22890		132	79	17	87	187	68	18	91	0.09			23		48800
25	M		20	21	6.8	6.5	2.83	20160		152	133	16	89	202	65	12	94	0.21			13		47900
26	T		20	21	6.7	6.7	3.10	19710		215	119	19	91	269	70	16	94	0.20			13		54500
27	W		20	21	6.8	6.7	3.12	19440	3.44	224	111	18	92	232	62	13	94	0.19			4		53100
28	Th		20	20	6.9	6.6	3.14	22500		200	131	17	92	224	83	12	95	0.10			23		58100
29	F		19	20	6.7	6.5	2.88	19080		241	133	15	93	289	74	12	98	0.17			4		50000
30	Sa		19	20	6.8	6.7	2.54	19440		178	117	18	90	199	111	12	94	0.11	350		8		51000
31	S		19	20	6.7	6.8	2.50	19090		141	80	14	90	187	78	12	94	0.12			13		41300
Total							80.91	645690											1400				1587700
Maximum			20	21	7.0	7.0	3.54	31780		332	149	22	94	288	115	49	96	0.21	350				71400
Minimum			18	19	6.6	6.5	1.73	12600		132	88	14	88	161	62	12	70	0.08	175				41300
Average			20	20			2.93	20925		185	115	18	90	231	81	18	92	0.13	280		23		52925.33

Average Percent Removal		
Unit	BOD	Susp. Solids
Primary	39	66
Secondary	64	77
Overall	80	82
SLUDGE DRAWN TO BEDS		
Max pH		
Min pH		
Average Total Solids		4.52
Average Volatile Solids		66.48
DRIED SLUDGE REMOVED		
Tons Removed		
Beds Paired		
7		

REMARKS

(9)(d)	DATE	REVIEWING OFFICIAL	DATE	PW ENGINEER	DATE
	8/18/05				

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EXHIBIT 52

VOL II
Exhibit 52

ENGINEERING OPERATING LOG										Installation FORT LEWIS				MONTH August 2005				MONTHLY SUMMARY								
(Sewage - General)										Plant Waste Water																
DATE	DAY OF WEEK	RAINFALL (INCHES)	TEMP. INFLUENT (C)	TEMP. EFFLUENT (C)	pH INFLUENT	pH EFFLUENT	TOTAL FLOW (MGD)	RAW SLUDGE PUMPED (GALLONS)	RAW SLUDGE		BOD				SUSPENDED SOLIDS				CL2 RESIDUAL (mg/L)	CL2 USED (GL)	DECHLOR (GL) USED	FECAL COLIFORM (COLONIES PER 100ML)	FUEL OIL USED (GALLONS)	DIGESTER GAS PRODUCED (FT ³)		
									TOTAL SOLIDS (%)	TOTAL VOLATILE (%)	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL								
1	M		20	21	8.9	8.8	3.13	17820			155	100	19	88	245	78	17	98	0.17				4		41800	
2	T		21	21	8.9	8.6	3.03	17640			165	120	15	91	239	86	26	99	0.17				8		51400	
3	W		21	20	8.9	8.5	2.94	17190	3.25	86.3	149	87	14	91	223	68	11	95	0.08				13		42300	
4	Th		21	21	8.9	8.7	3.05	20700			247	124	15	94	260	83	23	95	0.18				4		47400	
5	F		20	21	8.9	8.6	3.00	21330			164	104	16	90	259	86	14	95	0.14				8		47300	
6	Sa		21	21	8.8	8.7	2.92	25230			272	114	20	93	283	85	12	96	0.16	338			4		51800	
7	S		20	20	8.9	8.8	3.04	28190			147	169	20	86	227	83	13	94	0.10				30		55200	
8	M		21	20	8.7	8.7	2.15	20610			144	178	18	88	131	82	15	88	0.16				8		49800	
9	T		21	21	8.9	8.8	3.49	25070			151	90	18	89	317	83	14	96	0.08				23		47900	
10	W		20	21	8.7	8.8	3.41	22230	3.00	82.6	149	90	13	91	256	70	13	95	0.10				23		50300	
11	Th		20	20	8.7	8.6	3.12	21150			257	111	14	95	236	67	12	95	0.09				30		56800	
12	F		19	20	8.8	8.8	3.18	22770			173	106	14	92	240	64	12	95	0.13				2		58300	
13	Sa		20	20	8.8	8.8	2.88	21150			166	87	13	92	184	82	12	93	0.11				23		47500	
14	S		20	20	8.9	8.8	3.01	20880			212	99	14	93	224	90	9	96	0.14				70		51300	
15	M		20	21	8.8	8.8	3.09	19260			232	109	15	94	281	58	11	96	0.12				4		52600	
16	T		20	21	8.7	8.8	3.04	19350			221	118	8	96	315	82	12	96	0.09				13		52600	
17	W		20	20	8.7	8.7	3.28	20700	3.40	83.7	205	114	16	92	259	76	14	95	0.09				6		59000	
18	Th		20	21	8.8	8.8	3.19	20700			188	116	12	93	287	89	11	96	0.19				2		56700	
19	F		20	21	8.9	8.7	2.40	19440			165	90	14	92	268	60	12	96	0.10				7		56000	
20	Sa		20	21	8.9	8.8	2.83	20340			184	98	12	93	201	80	11	95	0.11	350			2		46800	
21	S		20	21	8.8	8.8	2.77	19350			127	74	7	94	195	80	14	93	0.10				8		46900	
22	M		21	20	8.8	8.8	3.11	19440			139	93	12	91	282	59	12	96	0.28				2		47500	
23	T		20	20	8.8	8.9	3.59	23490			182	107	14	92	211	84	10	95	0.13				13		50300	
24	W		21	20	7.0	6.9	3.07	20340	2.63	88.6	165	95	15	91	218	45	10	95	0.20						58800	
25	Th		21	20	7.0	7.0	3.27	20610			272	128	16	94	262	70	12	95	0.11						54400	
26	F		20	21	8.7	8.9	3.10	18530			183	117	16	91	220	85	12	95	0.08						50800	
27	Sa		20	21	8.8	8.9	3.02	20430			183	102	15	92	184	58	10	95	0.14						52600	
28	S		20	21	8.8	8.9	3.17	20520			122	88	14	89	217	85	9	98	0.12						49100	
29	M		21	20	8.7	8.7	3.10	29430			141	78	13	91	257	58	12	95	0.12						39600	
30	T		21	21	8.7	8.8	3.27	19890			174	73	23	87	219	53	21	90	0.24						43700	
31	W		21	21	8.8	8.9	3.70	21510			138	97	11	92	232	72	10	96	0.10						53400	
Total							98.20	655250													688					1511800
Maximums			21	21	7.0	7.0	3.70	29430			272	178	23	96	317	88	26	96	0.28	350						58800
Minimums			19	20	6.8	6.5	2.16	17190			122	68	7	86	131	45	9	89	0.08	338						39800
Average			20	21			3.07	21137			179	105	15	92	240	68	13	95	0.13	344			4			50396.67

PREPARED BY	DATE	REVIEWING OFFICIAL	DATE	PW ENGINEER	DATE

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EXHIBIT 53

VOL II

Exhibit 53

FAK		ENGINEERING OPERATING LOG										Installation		MONTH																			
(Sewage - General)												Plant		Waste Water										September 2005									
DATE	DAY OF WEEK	RAINFALL (INCHES)	TEMP. INFLUENT		TEMP. EFFLUENT		PH INFLUENT	PH EFFLUENT	TOTAL FLOW (MGD)	RAW SLUDGE PUMPED (GALLONS)	RAW SLUDGE			BOD			SUSPENDED SOLIDS				CL2 RESIDUAL (MG/L)	CL2 USED (GL)	DECHLOR (GL) USED	FECAL COLIFORM (COLONIES PER 100ML)	FUEL OIL USED (GALLONS)	DIGESTER GAS PRODUCED (FT ³)							
			(F)	(C)	(F)	(C)					TOTAL SOLIDS (%)	TOTAL VOLATILE (%)	INFLUENT (MG/L)	PRIMARY EFFLUENT (MG/L)	FINAL EFFLUENT (MG/L)	OVERALL % REMOVAL	INFLUENT (MG/L)	PRIMARY EFFLUENT (MG/L)	FINAL EFFLUENT (MG/L)	OVERALL % REMOVAL													
1	Th		20	20	6.9	6.8	3.16	18900			1.33	88.4	189	101	16	92	288	77	12	96	0.18			8		55100							
2	F		21	20	6.8	6.9	2.85	20070					230	109	17	93	249	77	11	98	0.08			4		48100							
3	Sa		20	20	6.6	6.6	2.21	19880					188	102	15	92	203	75	13	94	0.07	360		17		45200							
4	S		21	21	6.7	6.8	2.84	20700					118	68	14	88	175	74	13	93	0.12			2		41400							
5	M		20	21	6.8	6.8	1.93	18900					181	83	14	89	189	78	10	95	0.11			23		35100							
6	T		21	19	6.8	6.8	3.30	20430					193	105	16	90	214	83	13	94	0.18			8		41200							
7	W		21	19	7.0	6.9	3.28	19860	2.79	88.1	152	98	15	90	294	102	16	95	0.14				2		45200								
8	Th		21	20	6.8	6.8	3.33	18890					288	140	16	94	266	83	14	95	0.16			23		49900							
9	F		20	21	6.8	6.9	3.34	20430					195	123	17	91	128	73	15	88	0.07			70		50700							
10	Sa		20	21	6.8	6.9	3.63	23480					188	107	16	91	210	82	22	90	0.13	275	5	2		55700							
11	S		20	21	6.9	6.9	2.67	21690					235	109	16	93	204	73	13	94	0.11			30		52800							
12	M		21	20	6.8	7.0	3.14	19260					199	127	18	91	258	78	17	93	0.12			220		48800							
13	T		22	21	6.7	6.7	3.50	19260					185	113	17	91	252	88	16	94	0.15			27		48400							
14	W		20	19	6.9	6.8	2.74	24680	2.55	88.1	184	120	16	91	280	90	16	94	0.04						30		45200						
15	Th		21	19	7.0	6.9	3.22	19280					192	124	19	90	228	100	13	94	0.10			11		61800							
16	F		20	19	7.1	6.8	3.80	12960					179	111	16	91	275	99	13	95	0.08			50		46400							
17	Sa		20	19	7.2	6.8	2.80	21600					148	92	17	89	296	80	13	88	0.07	365	15	14		51200							
18	S		20	19	7.0	6.8	2.82	22400					138	74	15	89	248	87	38	86	0.06			17		49700							
19	M		20	19	7.1	6.7	3.30	21600					222	105	17	92	289	72	13	96	0.08			4		51300							
20	T		20	18	7.8	6.9	3.21	19860					184	107	16	91	251	77	20	92	0.07			240		51300							
21	W		19	18	7.0	6.7	2.22	11520	3.28	85.6	174	105	19	89	259	80	17	83	0.10				2		43200								
22	Th		19	19	7.0	6.8	2.95	18360					190	109	13	93	308	79	15	95	0.17			8		48200							
23	F		19	20	7.0	6.9	3.90	30940					190	119	17	91	333	73	14	98	0.04			4		15100							
24	Sa		21	19	6.8	6.8	2.29	23780					184	103	16	91	228	71	13	94	0.04	200		8		59800							
25	S		20	19	7.1	6.8	2.69	19820					178	82	17	90	242	73	15	94	0.07			17		46300							
26	M		19	18	7.0	6.9	2.84	20816					182	112	18	91	279	85	17	94	0.18			13		48920							
27	T		19	18	6.8	6.6	3.28	21150					177	125	15	92	284	78	17	94	0.19			170		51000							
28	W		20	18	7.0	6.8	3.33	21300	3.28	81.8	198	101	15	92	285	73	16	94	0.04				38		52000								
29	Th		21	19	7.1	6.8	3.84	21180					188	107	16	91	280	63	16	94	0.05			23		52700							
30	F		20	19	7.0	6.8	3.53	20700					223	106	16	93	264	56	18	93	0.06			13		51000							
Total							92.08	603500														1140	20			1429100							
Maximum			22	21	7.2	7.0	3.90	24680					288	140	19	94	333	102	38	98	0.19	385	15			59000							
Minimum			19	18	6.7	6.6	1.93	11520					118	65	13	88	128	56	10	85	0.04	280	5			15100							
Average			20	20			3.07	20117					186	106	16	91	251	76	16	94	0.10	285	10	8		47838.67							

MONTHLY SUMMARY

Average Percent Removed		
Unit	BOD	Susp. Solids
Primary	43	69
Secondary	84	80
Overall	91	94
SLUDGE DRAWN TO BEDS		
Max pH	7	
Min pH	6.93	
Average Total Solids	4.38	
Average Volatile Solids	67.42	
DRIED SLUDGE REMOVED		
Tons Removed		
Beds Foured		
22		
4		

REMARKS

DATE: 10-06-05 REVIEWING OFFICIAL: [Signature] DATE: 10/6/05 PW ENGINEER: [Signature] DATE: 10/7/05

FE-4

EXHIBIT 54

VOL II

Exhibit 54

DATE	DAY OF WEEK	RAINFALL (INCHES)	TEMP. INFLUENT (C)	TEMP. EFFLUENT (C)	PH INFLUENT	PH EFFLUENT	TOTAL FLOW (MGD)	RAW SLUDGE PUMPED (GALLONS)	Waste Water				SOLIDS				CL2 USED (GL)	DECHLOR (GL) USED	FECAL COLIFORM (COLONIES PER 100ML)	FUEL OIL USED (GALLONS)	DIGESTER GAS PRODUCED (FT ³)				
									TOTAL SOLIDS (%)	TOTAL VOLATILE (%)	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL	INFLUENT (mg/L)	PRIMARY EFFLUENT (mg/L)						FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL		
1	Sa		19	18	7.0	6.7	3.36	18980			168	88	17	90	240	65	13	95	0.05	310		13	0.01	45800	
2	S		19	18	7.8	6.8	2.86	18000			143	86	15	91	225	52	13	94	0.06			13		45400	
3	M		20	19	7.2	6.9	2.88	20790			178	101	19	89	280	57	14	95	0.07			70		46800	
4	T		19	17	7.1	6.8	3.36	20680			147	96	15	90	244	63	16	93	0.09			13		40700	
5	W		19	18	6.9	6.8	2.71	21600	3.15	85.0	161	80	14	91	285	62	14	95	0.07			110		52400	
6	Th		19	19	7.0	6.8	3.41	20340			151	96	12	92	254	66	15	94	0.10			30		47900	
7	F		19	19	7.1	7.0	3.98	20180			155	89	16	90	254	63	13	95	0.10			17		48400	
8	Sa		19	18	7.0	6.9	2.79	24210			147	70	16	90	255	68	12	95	0.09	350		7		52200	
9	S		19	19	7.1	7.0	3.15	23570			179	98	12	93	298	74	16	95	0.09			27		54900	
10	M		19	17	6.9	6.6	3.07	18360			173	90	15	91	252	72	13	95	0.10			17		52200	
11	T		20	18	6.9	6.4	3.43	20070			182	104	20	89	261	74	16	94	0.17			23		44100	
12	W		20	18	6.9	6.8	4.17	20070	2.33	84.8	179	85	15	92	234	60	15	94	0.06			30		54800	
13	Th		20	18	6.9	6.7	3.36	20520			160	84	18	89	279	77	14	95	0.09			30		51000	
14	F		20	19	6.9	6.8	2.80	21150			203	137	18	91	293	79	17	94	0.10			23		50800	
15	Sa		19	20	6.9	6.9	3.70	21150			191	114	17	91	236	69	18	92	0.04	300		4	0.01	49600	
16	S		19	19	7.0	6.8	3.28	20700			140	78	18	89	187	60	17	91	0.07			50		48300	
17	M		19	19	7.0	6.8	3.47	21150			151	91	18	88	271	93	19	93	0.08			23		46100	
18	T		19	18	6.8	6.8	2.83	22410			149	89	17	89	286	73	20	93	0.12			4		47700	
19	W		19	19	6.9	6.8	3.48	21330	3.21	83.4	198	146	18	91	248	97	18	93	0.16			4		43900	
20	Th		20	18	6.9	6.8	3.33	20340			229	124	12	95	345	74	14	96	0.08			11		50100	
21	F		20	18	6.9	6.7	3.15	20790			194	128	20	90	320	84	16	95	0.08			50		54200	
22	Sa		19	19	7.0	6.8	2.79	19980			165	73	18	89	214	63	13	94	0.04	325		7	0	55100	
23	S		20	19	6.9	6.8	3.25	21780			170	157	14	92	225	104	15	93	0.08			240		49800	
24	M		20	17	6.9	6.8	3.55	20430			176	94	17	90	277	80	18	94	0.15			70		48200	
25	T		19	18	6.9	6.7	4.05	20790			191	128	16	92	259	80	18	93	0.16			2		51400	
26	W		19	17	7.1	6.6	3.42	21150	3.34	84.8	143	102	16	89	264	111	16	94	0.19			13		52800	
27	Th		19	17	7.0	6.8	3.42	19890			183	94	13	92	254	82	17	93	0.21			2		52300	
28	F		19	19	6.9	6.8	3.39	19820			244	120	19	92	270	63	17	94	0.09			30		50600	
29	Sa		19	18	6.9	6.7	3.31	20520			211	104	17	92	257	86	15	94	0.10	322		2	0	51400	
30	S		18	17	6.9	6.8	3.52	21060			183	91	17	89	188	69	16	91	0.09			11		49800	
31	M		17	20	6.8	7.0	4.20	19820			159	95	17	89	242	75	18	93	0.13			13		49600	
Total							103.43	840820												1807			0		1542900
Maximum			20	20	7.0	7.0	4.20	24210			244	157	20	95	345	111	20	96	0.21	350		0		55100	
Minimum			17	17	6.8	6.4	2.71	18000			140	70	12	88	187	52	12	91	0.04	300		0		43300	
Average			19	18			3.34	20665			172	102	16	91	258	73	16	94	0.10	321.4		23	0	49770.97	

MONTHLY SUMMARY

Average Percent Removal		
Unit	BOD	Susp. Solids
Primary	39	70
Secondary	85	79
Overall	91	94
SLUDGE DRAWN TO BEDS		
Max pH		7
Min pH		7
Average Total Solids		4.41
Average Volatile Solids		68.00
DRIED SLUDGE REMOVED		
Tons Removed		
Beds Poured		
		17

REMARKS

(9)(9)	DATE	REVIEWING OFFICIAL	DATE	PLANT ENGINEER	DATE
	11/2/05	(9)(9)	(9)(9)		

FE-5

1007/RT/190
 50:27
 2035064900
 FIVE 14/00

EXHIBIT 55

EXHIBIT 56

MINING OPERATING LOG

MONTH

December 2005

FORT LEWIS

Main data table with columns: DATE, DAY OF WEEK, RAINFALL (INCHES), TEMP. INFLUENT (C), TEMP. EFFLUENT (C), PH INFLUENT, PH EFFLUENT, TOTAL FLOW (MGD), RAW SLUDGE PUMPED (GALLONS), RAW SLUDGE (%), RAW SLUDGE (TOTAL VOLATILE), INFLUENT (MG/L), PRIMARY EFFLUENT (MG/L), FINAL EFFLUENT (MG/L), OVERALL % REMOVAL, SUSPENDED SOLIDS (MG/L), CL2 USED (GL), DECHLOR (GL USE), FECAI COLIFORM (COLONIES PER 100ML), FUEL OIL USED (GALLONS), DIGESTER GAS PRODUCED (FT3), AVERAGE PERCENT REMOVAL, UNIT, Primary, Secondary, Overall, SLUDGE DRAWN TO BEDS (Max pH, Min pH), Average Total Solids, Average Volatile Solids, DRIED SLUDGE REMOVED (Tons Removed, Sludge Poured), REMARKS.

Administrative header with fields: PREPARED BY, DATE (1-9-06), REVIEWING OFFICIAL, DATE, PW/ENGINEER, DATE.

1-9-06

FE-7

EXHIBIT 57

EXHIBIT 58

EXHIBIT 59

EXHIBIT 60

EXHIBIT 61

FACILITIES ENGINEERING OPERATING LOG

(Sewage - General)

Installation

Plant

Waste Water

FORT LEWIS

MONTH

May 2006

DATE	DAY OF WEEK	RAINFALL (INCHES)	TEMP. INFLENT (C)	TEMP. EFFLUENT (C)	PH INFLENT	PH EFFLUENT	TOTAL FLOW (MGD)	RAW SLUDGE PUMPED (GALLONS)	RAW SLUDGE		BOD		SUSPENDED SOLIDS				CL2 RESIDUAL (mg/L)	CL2 USED (GL)	DECHLOR (GL) USED	FECAL COLIFORM (COLONIES PER 100ML)	FUEL OIL USED (GALLONS)	DIGESTER GAS PRODUCED (FT3)	MONTHLY SUMMARY
									TOTAL SOLIDS (%)	TOTAL VOLATILE (%)	INFLENT (mg/L)	PRIMARY EFFLUENT (mg/L)	FINAL EFFLUENT (mg/L)	OVERALL % REMOVAL	INFLENT (mg/L)	PRIMARY EFFLUENT (mg/L)							
1	M	0.00	17	15	6.9	6.1	4.04	13410	146	90	15	80	283	67	16	94	0.11	23	23	0	48000	Average Percent Removal	
2	T	0.00	17	14	7.0	6.1	3.33	15390	141	85	13	91	246	78	20	92	0.13	13	13	0	53700	Unit	
3	W	0.00	17	16	6.7	6.1	3.40	17010	2.90	84.4	223	89	15	93	229	79	28	88	30	0	52500	BOD	
4	Th	0.00	17	15	6.9	6.1	2.59	16650	280	115	18	84	234	56	19	92	0.16	2	2	0	56700	Primary 71	
5	F	0.00	17	15	6.7	6.0	3.32	17730	180	134	22	88	278	73	20	93	0.14	23	23	0	55100	Secondary 75	
6	Sa	0.04	17	15	6.8	6.2	3.26	16740	146	100	13	91	210	87	16	92	0.15	4	4	0	59900	Overall 91	
7	S	0.15	15	15	6.7	6.0	3.60	17010	126	84	13	90	209	60	19	91	0.14	13	13	0	54700	SLUDGE DRAWN TO BEDS	
8	M	0.00	16	14	6.8	6.1	3.50	17550	144	101	15	90	235	65	19	92	0.16	13	13	0	54700	Max pH	
9	T	0.00	18	15	6.8	6.1	4.49	13880	188	123	16	91	214	75	19	91	0.13	23	23	0	54600	Min pH	
10	W	0.00	16	16	7.2	6.1	3.45	14310	185	131	18	91	310	87	19	94	0.09	80	80	0	56200	Average Total Solids	
11	Th	0.00	17	16	6.2	6.1	3.52	14850	238	132	17	93	228	85	19	92	0.10	4	4	0	56900	Average Volatile Solids	
12	F	0.00	17	16	6.8	6.1	2.97	17370	206	141	17	92	276	108	21	92	0.10	4	4	0	56000	DRIED SLUDGE REMOVED	
13	Sa	0.00	16	15	6.7	6.1	2.96	16650	146	108	15	90	231	67	19	92	0.12	25	25	0	59600	Tons Removed	
14	S	0.00	16	16	7.0	6.1	3.10	18360	136	86	14	90	210	63	17	92	0.11	130	130	0	54300	Beds Poured	
15	M	0.00	16	16	7.0	6.1	3.50	9000	159	144	16	89	239	79	21	91	0.11	70	70	0	46300	REMARKS	
16	T	0.00	17	15	6.8	6.0	3.46	18540	207	147	17	92	251	83	18	93	0.14	23	23	0	47400	Notes for PH Effluent offsite?	
17	W	0.00	16	16	6.7	5.9	3.46	18000	2.83	81.9	160	104	14	91	246	75	18	93	13	0	61200	by unknown source of oil	
18	Th	0.00	16	16	6.9	6.0	4.08	17730	209	130	19	91	267	86	17	94	0.11	23	23	0	57200	Relaminates leaving Lehigh	
19	F	0.06	18	17	6.8	5.4	3.58	16380	205	135	17	92	286	76	19	93	0.13	13	13	0	54200	Alphas failure - problem corrected? PH back on track.	
20	Sa	0.00	18	17	6.7	5.6	2.91	14130	177	113	19	89	245	71	19	92	0.14	250	250	0	52300		
21	S	0.05	18	18	6.7	5.9	2.96	14220	141	87	14	90	200	38	19	91	0.10	30	30	0	48000		
22	M	0.80	18	18	7.1	6.4	3.92	13410	97	109	16	84	295	74	19	94	0.12	13	13	0	45400		
23	T	0.34	18	17	7.2	6.3	3.81	14670	178	127	15	92	267	78	15	94	0.10	23	23	0	52300		
24	W	0.28	18	17	6.6	5.8	4.09	14490	150	104	12	92	351	66	15	96	0.08	80	80	0	56000		
25	Th	0.95	17	17	6.7	5.9	3.78	13410	145	105	12	92	229	70	13	94	0.07	13	13	0	54200		
26	F	0.16	17	17	7.1	6.1	3.20	15390	198	117	17	91	226	71	14	94	0.06	11	11	0	54600		
27	Sa	0.20	17	16	7.0	6.1	3.28	20520	244	113	15	93	273	88	16	94	0.08	275	275	0	64900		
28	S	0.00	17	16	6.8	6.2	2.89	22320	112	86	15	87	161	59	17	89	0.08	13	13	0	56700		
29	M	0.00	17	17	7.0	6.0	3.10	13230	143	94	14	90	216	59	19	91	0.06	4	4	0	48400		
30	T	0.00	19	17	7.0	6.1	3.32	14400	168	102	14	92	242	80	21	91	0.09	8	8	0	53000		
31	W	0.05	18	18	7.0	6.0	3.44	16200	2.99	86.6	140	103	230	71	17	93	0.13	4	4	0	54500		
	Total	3.08					106.31	492930														1691500	
	Maximum	0.95	19	18	7.2	6.4	4.49	22320	280	147	22	94	351	108	28	96	0.17	350	350	0	66000		
	Minimum	0.00	15	14	6.2	5.4	2.59	9000	97	84	12	84	161	38	13	88	0.06	250	250	0	45400		
	Average	0.10	17	16			3.43	15901	172	111	16	91	246	73	18	93	0.11	291.7	291.7	0	54564.52		

(b)(6)

DATE 6/7/06

(b)(6)

DATE 6/7/06

(b)(6)

DATE

EXHIBIT 62

EXHIBIT 63

EXHIBIT 64

EXHIBIT 65

EXHIBIT 66

EXHIBIT 67

EXHIBIT 68

EXHIBIT 69

ENGINEERING OPERATING LOG

Installation

FORT LEWIS

MONTH

(Sewage - General)

Plant

Waste Water

January 2007

Table with columns: DATE, DAY OF WEEK, RAINFALL (INCHES), TEMP. INFILUENT (C), TEMP. EFFLUENT (C), PH INFILUENT, PH EFFLUENT, TOTAL FLOW (MGD), RAW SLUDGE PUMPED (GALLONS), TOTAL SOLIDS (%), TOTAL VOLATILE (%), INFILUENT (mg/L), PRIMARY EFFLUENT (mg/L), FINAL EFFLUENT (mg/L), OVERALL % REMOVAL, INFILUENT (mg/L), PRIMARY EFFLUENT (mg/L), FINAL EFFLUENT (mg/L), OVERALL % REMOVAL, CL2 RESIDUAL (mg/L), CL2 USED (G), DECHLOR (G), FEGAL COLIFORM (COLONIES PER 100ML), FUEL OIL USED (GALLONS), DIGESTER GAS PRODUCED (FT 3)

MONTHLY SUMMARY

Summary table with columns: Average Percent Removal, Unit, BOD, Susp. Solids. Rows: Primary, Secondary, Overall. Also includes rows for SLUDGE DRAWN TO BEDS (Max pH, Min pH), Average Total Solids, Average Volatile Solids, DRIED SLUDGE REMOVED (Tons Removed, Beds Poured).

REMARKS

Days of High Flow due to Heavy Rain
Fairly High Intake Tables
...
Over all removal on BOD's
Personal Estimated loss to
potential processed biofall
and infiltration to overall
effluent.

Summary table with columns: DATE, (9) (0), DATE, (9) (0), DATE, (9) (0), DATE, (9) (0)

EXHIBIT 70

EXHIBIT 71

EXHIBIT 72

EXHIBIT 73

EXHIBIT 74

NATIONAL
OIL
DISCHARGE ELIMINATION SYSTEM (NPDES)
/E MONITORING REPORT (DMR)

ADDRESS
P.O. BOX 33500
FORT LEWIS
DEFENSE ARMY
LOCATION FORT LEWIS

PERMIT NUMBER
WA 00433-3500

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY

MAJOR (SUBR 03)
F - FINAL
WASTEWATER FACILITY SLOD POINT

*** NO DISCHARGE ***

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			
0001 5 DAY MEASUREMENT	4883		LBS/DY (20)						
0010 0 0 0 PERMIT REQUIREMENT									
0015 5 DAY MEASUREMENT	436	465	LBS/DY (20)		18	19			
0020 1 0 0 PERMIT REQUIREMENT									
0030 EFFLUENT GROSS VALUE PH				6.5		7.1			
0040 1 0 0 MEASUREMENT			***						
0050 EFFLUENT GROSS VALUE SOLIDS, TOTAL	6213		LBS/DY (20)		254				
0060 6 0 0 PERMIT REQUIREMENT									
0070 RAW SEW/INFLUENT SOLIDS, TOTAL	402.6	514	LBS/DY (20)		17	21			
0080 1 0 0 MEASUREMENT									
0090 EFFLUENT GROSS VALUE NITROGEN, AMMONIA			LBS/DY			3.52			
0100 TOTAL (AS N)									
0110 1 0 0 MEASUREMENT			***						
0120 EFFLUENT GROSS VALUE NITROGEN, NITRATE			***						
0130 TOTAL (AS N)			***						
0140 1 0 0 MEASUREMENT			***						
0150 EFFLUENT GROSS VALUE			***						

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: (b)(6)

OFFICER OR AUTHORIZED AGENT: (b)(6)

TELEPHONE: (b)(6) 766-1700

DATE: 05 07 07

TRIAL CODE: (b)(6)

YEAR: 05 MO: 07 DAY: 07

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (reference all attachments here):
 ND - Non Detect

FIRM NAME: DEFENSE, ARMY
 ADDRESS: P.O. BOX 339500
 PUBLIC WORKS, AFZH-PWU-R, N/S-17
 FORT LEWIS WA 98433-9500
 FACILITY: DEFENSE, ARMY
 LOCATION: FORT LEWIS WA 98433-9500
 ATTN: (C)

NATIONAL PERMIT DISCHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMRI)
 WADDZ1994 PERMIT NUMBER
 001 A DISCHARGE NUMBER
 MONITORING PERIOD
 FROM 05 06 01 TO 05 06 30

MAJOR (SURR 03)
 F - FINAL
 WASTEWATER FACILITY SOLO POINT
 *** NO DISCHARGE ***
 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			
NITROGEN, NITRATE TOTAL (AS N)	00620 1 0 0	*****	*****	***	*****	*****	1020	(19)	Q	
EFFLUENT GROSS VALUE				****			MG/L			
NITROGEN, NITRATE TOTAL (AS N)	00625 1 0 0	*****	*****	***	*****	*****	6.0	(19)	Q	
EFFLUENT GROSS VALUE				****			MG/L			
CHROMIUM, TOTAL (AS CR)	01034 1 0 0	*****	*****	***	*****	*****	ND	(19)	Q	
EFFLUENT GROSS VALUE				****			MG/L			
COPPER, TOTAL (AS CU)	01042 1 0 0	*****	*****	***	*****	*****	0.029	(19)	Q	
EFFLUENT GROSS VALUE				****			MG/L			
LEAD, TOTAL (AS PB)	01051 1 0 0	*****	*****	***	*****	*****	0.001	(19)	Q	
EFFLUENT GROSS VALUE				****			MG/L			
MOLYBDENUM, TOTAL (AS MO)	01062 1 0 0	*****	*****	***	*****	*****	0.007	(19)	Q	
EFFLUENT GROSS VALUE				****			MG/L			
NICKEL, TOTAL (AS NI)	01067 1 0 0	*****	*****	***	*****	*****	0.004	(19)	Q	
EFFLUENT GROSS VALUE				****			MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 (b)(6)

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.

OFFICER OR AUTHORIZED AGENT
 (b)(6)

TELEPHONE: 253-466-7600
 DATE: 05 07 07
 AREA CODE: NUMBER: YEAR: MO: DAY:

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 ND - Non Detect

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TIME, TOTAL (AS TR)									
EFFLUENT GROSS VALUE									
SELENIUM, TOTAL (AS SP)									
EFFLUENT GROSS VALUE									
FECAL COLIFORM, MPN									
EC MED, 44:50									
EFFLUENT GROSS VALUE									
FLOW, IN CONDUIT, DR									
THRU TREATMENT PLANT									
50050 1 0 0									
EFFLUENT GROSS VALUE									
CALORIME, TOTAL									
RESIDUAL									
50050 1 0 0									
EFFLUENT GROSS VALUE									
MERCURY, TOTAL									
(AS HG)									
71900 1 0 0									
EFFLUENT GROSS VALUE									
90P, 5 DAY PERCENT									
REMOVAL									
81010 1 0 0									
PERCENT REMOVAL									

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: (b)(6)
 TELEPHONE: (b)(6)
 DATE: 07 07
 AREA CODE: 253
 NUMBER: 916-1766

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 END - Non-Detect

EXHIBIT 75

FERR ADDRESS (Include Facility Name/Location if Different)
 NAME FT ABSE, ARMY
 ADDRESS P.O. BOX 373500
 PUBLIC WORKS, AFZH-PHU-0, MFS-17
 FORT LEWIS WA 98431-9500
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS WA 98433-9500 FROM
 STATE 06

NATIONAL POLLUTION DISCHARGE MONITORING REPORT (NDMR)
 PERMIT NUMBER 0018
 DISCHARGE NUMBER
 MONITORING PERIOD
 YEAR MO. DAY TO YEAR MO. DAY

MAJOR (SUOR 03)
 F - FINAL
 WASTEWATER FACILITY SOLO POINT
 *** NO DISCHARGE ***
 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			
0001 (20 DEC 0)	4535		LBS/D		185			
0010 RAW SEW EFFLUENT								
0002 (20 DEC 0)	443	489	LBS/D		18			
0010 EFFLUENT GROSS VALUE								
0040 (1 0 0)					6.5			
0040 EFFLUENT GROSS VALUE								
00100 (10TH)								
0030 (6 0 0)	5648				231			
0030 RAW SEW EFFLUENT								
00100 (10TH)								
0030 (1 0 0)	451	611	LBS/D		18			
0030 EFFLUENT GROSS VALUE								
00100 (10TH)								
0010 (1 0 0)								
0010 TOTAL (AS N)								
0010 EFFLUENT GROSS VALUE								
00100 (10TH)								
0010 (1 0 0)								
0010 TOTAL (AS N)								
0010 EFFLUENT GROSS VALUE								
00100 (10TH)								
0010 (1 0 0)								
0010 TOTAL (AS N)								
0010 EFFLUENT GROSS VALUE								

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: _____

TYPED OR PRINTED: _____

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 *** Reported on June 05 DMR next due Dec 05 ***

DATE: 2006 08 09

TELEPHONE: 253 766 1760

AREA CODE: _____ NUMBER: _____

YEAR: 2006 MO: 08 DAY: 09

NATIONAL DISCHARGE ELIMINATION SYSTEM (NDDES)
WASTE MONITORING REPORT (WMR)

WAB0021954
PERMIT NUMBER

001 A
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
00	00	00	00	00	00	00

ADDRESS: PUBLIC WORKS, AFZH-PHU-R, R/S-17
FORT LEONIS, ARMY
LOCATION: FORT LEONIS, AR
STATE: AR

WASTE WATER FACILITY SOLD POINT

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. OF EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
STRONGS, RESIDUAL									
TOTAL (AS OF)									
EFFLUENT GROSS VALUE									
STRONGS, REMOVAL									
TOTAL (AS OF)									
EFFLUENT GROSS VALUE									
PERAL SULPHUR, AIR									
EC MED, 44.5C									
31615									
EFFLUENT GROSS VALUE									
THRU TREATMENT PLAN									
50050									
EFFLUENT GROSS VALUE									
ENDURINE, TOTAL									
RESIDUAL									
50060									
EFFLUENT GROSS VALUE									
800, 5007, PERCENT									
REMOVAL									
91010									
PERCENT REMOVAL									
SOLIDS, SUSPENDED									
PERCENT REMOVAL									
91011									
PERCENT REMOVAL									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
(b)(6)

Signature of Principal Executive Officer or Authorized Agent

TELEPHONE
DATE
YEAR MO DAY
2005 08 09
AREA CODE NUMBER
753 966 1760

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference to attachments here)
* Reported on June 05 DMC next due Dec 05

EXHIBIT 76

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

DEFENSE ARMY

P.O. BOX 300500

PUBLIC WORKS, AFZH-PRO-P, RW 10-17

FORT LEWIS

WA 98433-3500

FACILITY DEFENSE ARMY

LOCATION FORT LEWIS

WA 98433-3500 FROM

ATTN

NATIONAL IN DISC.

WASTEWATER ELIMINATION SYSTEM (WVES) MONITORING REPORT (DMR)

oved, 1040-0004

NR0021954

PERMIT NUMBER

0016

DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
05	08	01		05	08	31

HAZOP

(BLGR 00)

F - FINAL

WASTEWATER FACILITY SOLO POINT

*** NO DISCHARGE ***

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			
WVES, 3-DAY (20 DEC 05) 00310 0 0 0 RAW SEW/INTLUENT	4580	*****	(26)	*****	179	*****	(19)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		LBS/DY				MG/L				
WVES, 3-DAY (20 DEC 05) 00310 1 0 0 EFFLUENT GROSS VALUE	377	435	(26)	*****	15	17	(19)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		LBS/DY				MG/L				
PH	*****	*****			6.5	*****	7.0				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		***				50				
SOLIDS, TOTAL SUSPENDED (20 DEC 05) 00520 0 0 0 RAW SEW/INTLUENT	6140	*****	(26)	*****	240	*****	(19)				
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT		LBS/DY				MG/L				
EFFLUENT GROSS VALUE	327	384	(26)	*****	13	15	(19)				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		LBS/DY				MG/L				
NITROGEN, AMMONIA TOTAL (AS N) (20 DEC 05) 00610 1 0 0 EFFLUENT GROSS VALUE				***		**					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		***				MG/L				
NITROGEN, NITRATE TOTAL (AS N) (20 DEC 05) 00615 1 0 0 EFFLUENT GROSS VALUE				***		**					
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		***				MG/L				

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 managed 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 fines and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

253 966 1760 2005 09 08

AREA CODE

NUMBER

YEAR

MO

DAY

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

** Reported on June 05 DMR next due Dec 05.

NATIONAL PC DISC. ADDRESS (Include Facility Name, Location & City) PERMIT NUMBER

88 98433-9500 FROM 88 98433-9500

MONITORING PERIOD YEAR MO. DAY TO YEAR MO. DAY

NOTE: Read instructions before completing this form.

Table with columns: PARAMETER, QUANTITY OR LOADING (Average, Maximum, Minimum, Units), QUALITY OR CONCENTRATION (Average, Maximum, Minimum, Units), NO. EX, FREQUENCY OF ANALYSIS, SAMPLE TYPE. Rows include parameters like EFFLUENT GROSS VALUE, EFFLUENT GROSS VALUE, EFFLUENT GROSS VALUE, etc.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER (b)(6) TELEPHONE DATE 253 946 1700 705 09 08

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) ** Reported on June 05 Done with Dan DeCos

PERMIT NAME: **ENGINE, ARMY**
 ADDRESS: **P.O. BOX 300500
 PUBLIC WORKS LATCH-PRO-B, MS-17
 FORT LEWIS WA 98400-9500**
 FACILITY: **DETENSE, ARMY**
 LOCATION: **FORT LEWIS WA 98400-9500**
 ATTN: **[Redacted]**

NATIONAL POL DISCH, **SCHWABE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (OMR)**

WA0021054
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

MAJOR: **(ENGR 031)
 F - FINAL
 WASTEWATER FACILITY SOLO POINT**

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
95	08	01		95	08	31

*** NO DISCHARGE ***
 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			
HYDROPHOBIC POTENTIAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	***	1.19			
00100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				NO. 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
 [Redacted Signature] (b)(6)

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 fines and imprisonment for knowing violations.

TELEPHONE: **253 966 1760**
 DATE: **2005 09 08**
 OFFICER OR AUTHORIZED AGENT: [Redacted] (b)(6)
 AREA CODE: [Redacted] NUMBER: [Redacted]

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 *** Reported on E/I report per NPDES permit

EXHIBIT 77

PERMIT NAME: **EXIST. ARMY**

NATIONAL PFI DISCI

DISCHARGE ELIMINATION SYSTEM (NPOES) MONITORING REPORT (DMR)

Revised, 2040-0004

ADDRESS: **F.O. BOX 199500
PUBLIC WORKS, AFTH-PWD-R, 15-17
FORT LEWIS WA 98430-9500**

WAG021904
PERMIT NUMBER

001 0
DISCHARGE NUMBER

FACILITY: **DETROIT AFWS**

MONITORING PERIOD
YEAR MO. DAY TO YEAR MO. DAY

LOCATION: **FORT LEWIS WA 98430-9500**

MAJOR USER 03
F - FINAL
MASTERED FACILITY SOLO POINT

*** NO DISCHARGE ***

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			
BOD, 5 DAY 120 BOD, D 00310 0 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	4755		(25)		186		(10)			
	PERMIT REQUIREMENT			LB5/DY				MG/L			
BOD, 5 DAY 120 BOD, D 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	414	435	(25)		16	17	(10)			
	PERMIT REQUIREMENT			LB5/DY				MG/L			
PH 00460 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***	6.6		7.0	(12)			
	PERMIT REQUIREMENT			***				SD			
SOLIDS, TOTAL SUSPENDED 00530 0 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	6433		(26)		251		(19)			
	PERMIT REQUIREMENT			LB5/DY				MG/L			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	399	486	(26)		16	19	(10)			
	PERMIT REQUIREMENT			LB5/DY				MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	166		***			**	(13)			
	PERMIT REQUIREMENT			***				MG/L			
NITROGEN, NITRATE TOTAL (AS N) 00615 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			***			**	(13)			
	PERMIT REQUIREMENT			***				MG/L			

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. 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: 253 966-1760
DATE: 2005 10 07

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

** Reported on June 05 DMR next due Dec 05

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

PERMIT NAME: ARMY
 ADDRESS: P.O. BOX 332500
 FORT LEWIS, ARMY
 LOCATION: FORT LEWIS

PERMIT NUMBER: WA0021934
 DISCHARGE NUMBER: 001 A

MONITORING PERIOD: YEAR 05, MO 05, DAY 30 TO YEAR 05, MO 05, DAY 30
 WA 38433-9500
 WA 38433-3500 FROM

MAJOR (SUBR. 03) F - FINAL
 WASTEWATER FACILITY GOLD POINT

*** NO DISCHARGE ***
 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			
NITROGEN, NITRATE TOTAL (AS N)	3.1	4.5	MG/L	1.5	3.3	MG/L	0		
EFFLUENT GROSS VALUE									
NITROGEN, NITRATE TOTAL (AS N)									
EFFLUENT GROSS VALUE									
FECHAL COLIFORM, MPN									
ED MED, 44-50									
31615									
EFFLUENT GROSS VALUE									
FLOW, IN CONDUIT OR THRU TREATMENT PLANT									
30050									
EFFLUENT GROSS VALUE									
CHLORINE, TOTALE RESIDUAL									
50050									
EFFLUENT GROSS VALUE									
SDD, 5-DAY PERCENT REMOVAL									
51010									
PERCENT REMOVAL									
SOLIDS, SUSPENDED PERCENT REMOVAL									
51011									
PERCENT REMOVAL									

STATE PRINCIPAL EXECUTIVE OFFICER: (b)(6)
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: (b)(6)
 TELEPHONE: 253 946 1760
 AREA CODE: 253
 NUMBER: 946 1760
 YEAR: 2005
 MONTH: 10
 DAY: 07

Comments and explanation of any violations (reference all attachments here):
 *** Reported on June 05 DMR next due Dec 05

PERM: ARMC/ADDRESS (Includes Facility Name) / (City) / (State) / (Zip)
 NAME: ARMY
 ADDRESS: P.O. BOX 302500
 PUBLIC WORKS, AFZHCWU-R, M/S-17
 FORT LEWIS
 WASHINGTON STATE
 FACILITY: ARMY
 LOCATION: FORT LEWIS

NATIONAL POLLUTION DISCHARGE MONITORING REPORT (NPDMS)

PERMIT NUMBER: WA 98439-3500 FROM WA 98433-3500

DISCHARGE NUMBER: 001 H

MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY

MAJOR (SUOR 03)
 F - FINAL
 WASTEWATER FACILITY SOLD POINT

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			UNITS	QUALITY OR CONCENTRATION			NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	MINIMUM		AVERAGE	MAXIMUM	UNITS			
HYDROCARBONS										
PETROLEUM										
B2100										
EFFLUENT GROSS VALUE										

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER

PHONE: (b)(6)

TELEPHONE: (b)(6)

AREA CODE: 253

NUMBER: 946-1760

YEAR: 2008

MO: 10

DAY: 07

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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

*** Repealed on I/I Report per NPDES Permit ***

39A Form 3020-1 (Rev. 3/98) Previous editions may be used. PAGE 3 OF 3

EXHIBIT 78

PERMIT ADDRESS (Include Facility Name/Location if Different)

NAME **ENSE, ARMY**
 ADDRESS **P.O. BOX 333500**
PUBLIC WORKS, AFZH-PWU-R, M/S-17
FORT LEWIS WA 98433-9500
 FACILITY **DEFENSE, ARMY**
 LOCATION **FORT LEWIS WA 98433-9500**
 ATTN **(b)(6)**

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

ed. 140-0004

WAD021954
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY GOLD POINT

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

*** NO DISCHARGE ***
 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			
BOD ₅ , 5-DAY (20 DEG. C) 00310 0 0 0 RAW SEW/INFLUENT		4787	*****	(.26)	*****	172	*****	(.19)			
				LBS/DY				MG/L			
BOD ₅ , 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE		450	473	(.26)	*****	16	17	(.19)			
				LBS/DY				MG/L			
PH 00400 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	6.4	*****	7.4	(.12)			
				***				SU			
SOLIDS, TOTAL SUSPENDED 00530 0 0 0 RAW SEW/INFLUENT		7179	*****	(.24)	*****	258	*****	(.19)			
				LBS/DY				MG/L			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE		434	501	(.26)	*****	16	18	(.19)			
				LBS/DY				MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	*****	*****	**	(.19)			
				***				MG/L			
NITROGEN, NITRATE TOTAL (AS N) 00615 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	*****	*****	**	(.19)			
				***				MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 (b)(6)
 TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direct supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. 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
 (b)(6)

TELEPHONE
 2537661760
 DATE
 2005 11 09
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here).
 ** Reported on June & December DMRs.

NAME/ADDRESS (Include Facility Name/Location if Different)
 DEFENSE, ARMY
 P.O. BOX 333500
 PUBLIC WORKS, AFZH-PWU-R, W/6-17
 FORT LEWIS WA 98433-3500
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS WA 98433-3500

NATIONAL DISCHARGE ELIMINATION SYSTEM (NPDES)
 WASTEWATER TREATMENT PLANT MONITORING REPORT (DMR)
 RW0021954
 PERMIT NUMBER
 001 H
 DISCHARGE NUMBER

MAJOR (SUBP 00)
 F - FINAL
 WASTEWATER FACILITY GOLD POINT

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

*** NO DISCHARGE ***
 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			
NITROGEN, NITRATE TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****		*****	*****	**	(13)	0		
00620 1 0 0	PERMIT REQUIREMENT			***				MG/L			
EFFLUENT GROSS VALUE				****							
NITROGEN, AMMONIAL TOTAL (AS N)	SAMPLE MEASUREMENT	*****	*****		*****	*****	**	(13)	0		
00625 1 0 0	PERMIT REQUIREMENT			***				MG/L			
EFFLUENT GROSS VALUE				****							
FECAL COLIFORM, MPN ED MED. 44.50	SAMPLE MEASUREMENT	*****	*****		*****	16	32	(13)	0		
31615 1 0 0	PERMIT REQUIREMENT			***				100NL			
EFFLUENT GROSS VALUE				****							
FLOW, IN CUMUL OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	33	*****	(03)	*****	*****	*****		0		
50050 1 0 0	PERMIT REQUIREMENT			MGD				****			
EFFLUENT GROSS VALUE				****							
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.21	(13)	0		
50060 1 0 0	PERMIT REQUIREMENT			***				MG/L			
EFFLUENT GROSS VALUE				****							
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		90	*****	*****	(20)	0		
B1010 K 0 0	PERMIT REQUIREMENT			***				PER-CENT			
PERCENT REMOVAL				****							
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*****		94	*****	*****	(23)	0		
B1011 K 0 0	PERMIT REQUIREMENT			***				PER-CENT			
PERCENT REMOVAL				****							

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 (b)(6)
 TYPE IN 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 ensure 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.

TELEPHONE 253 966-7760
 DATE 2005 11 09
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 ** Reported on June & December DMR's

NA 30433-9500

ADDRESS P.O. BOX 339500

FORT LEWIS

FACILITY DEFENSE, ARMY

LOCATION FORT LEWIS WA 98433-9500 FROM

NATIONAL DISCHARGE ELIMINATION SYSTEM (NDDES)

MONITORING REPORT (DMR)

PERMIT NUMBER WA0021954

DISCHARGE NUMBER 001 A

MONITORING PERIOD YEAR MO DAY TO YEAR MO DAY

MAJOR (SUBR 03) F - FINAL WASTEWATER FACILITY SOLD POINT

*** NO DISCHARGE ***

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			
HYDROCARBONS: PETROLEUM								
B2180						0		
EFFLUENT GROSS VALUE								
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								
SAMPLE MEASUREMENT								
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PERMIT REQUIREMENT								
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								
SAMPLE MEASUREMENT								
PERMIT REQUIREMENT								

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: (b)(6)

TELEPHONE: 253 966 1760

DATE: 2005 11 09

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: (b)(6)

AREA CODE: 253 NUMBER: 966 1760

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

Permit Reported with I/I Report

EXHIBIT 79

83308
CORP 03
F - FINAL
WASTEWATER FACILITY GOLD POINT

HA0021954
PERMIT NUMBER
0010
DISCHARGE NUMBER

ADDRESS: PUBLIC WORKS, ATTN: RW-2, N/S 17
FURT LEUGS
FACILITY NUMBER: 0644
FROM: 0500

MONITORING PERIOD
YEAR: MO: DAY: TP:
YEAR: MO: DAY: TP:

*** NO DISCHARGE ***
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			
00010 5 0 0 COPPER	5311		LBBS/DY		185		0		
00010 6 0 0 PBR SEMI INFLUENT		545	LBBS/DY		18	19	0		MG/L
00010 7 0 0 EFFLUENT GROSS VALUE	7116		LBBS/DY	6.3	248	6.9	0		MG/L
00010 8 0 0 EFFLUENT GROSS VALUE	524	573	LBBS/DY		18	20	0		MG/L
00010 9 0 0 EFFLUENT GROSS VALUE			LBBS/DY				0		MG/L
00010 10 0 0 EFFLUENT GROSS VALUE			LBBS/DY				0		MG/L
00010 11 0 0 EFFLUENT GROSS VALUE			LBBS/DY				0		MG/L

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER
 SIGNATURE: [Signature]
 OFFICER OR AUTHORIZED AGENT
 TELEPHONE: 953 416-1700
 AREA CODE: 953
 NUMBER: 416-1700
 DATE: 2005 12 7
 YEAR: MO: DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (reference all attachments here)
 ** Reported on June 5 December DMRS.
 EPA Form 3320-1 (Rev. 3/99) Previous editions may be used.
 PAGE 1 OF 1

ADDRESS (Include Facility Name, Location, ZIP Code)
 WBE ARMY
 5-11-80 330500
 FORT MONROE WITH-PAU-R A/S-17
 FORT LEWIS
 FACILITY OFFENSE SECTOR
 LOCATION FORT LEWIS

PERMIT NUMBER
 880021954
 DISCHARGE NUMBER
 001 A

MONITORING PERIOD
 YEAR MO DAY TO YEAR MO DAY
 00 00 01

REGOR (SUBP 05)
 F - FINAL
 WASTEWATER FACILITY SOLO POINT

NOTE: Read Instructions Before Completing this Form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. OF EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ATRIUMS, RETROTE TOTAL (00 H)										
EFFLUENT BOD5 VALUE										
TOTAL BOD5										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										
EFFLUENT BOD5 VALUE										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER _____

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT _____

TELEPHONE _____ DATE _____

AREA CODE _____ NUMBER _____ YEAR _____ MO _____ DAY _____

TYPED OR PRINTED _____

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

*** Reported to JUNE F. DeLoach, DMR ***

PERM. NO. ADDRESS (Include Facility Name/Location if Different)
 NA. HSE, ARMY

NATIONAL
 OIL

WASTE ELIMINATION SYSTEM (NPDES)
 MONITORING REPORT (OMR)

40-0004

ADDRESS P.O. BOX 030500
 PUBLIC WORKS, AFEN-PWD-R, W/S-17
 FORT LEVIN WA 98403-0500

WA0021354
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

WQ00R
 (0000 000)
 F - FINAL
 WASTEWATER FACILITY SLOD POINT

FACILITY REFERENCE NO. WA 98403-0500
 LOCATION FORT LEVIN WA 98403-0500

MONITORING PERIOD
 YEAR MO. DAY TO YEAR MO. DAY

*** NO DISCHARGE ***

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			
HYDROCARBONS, PETROLEUM		*****	*****		*****	*****					
32100 1 0 0				***							
EFFLUENT GROSS VALUE				****							
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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
 (b)(6)
 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 also certify that there are no significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

(b)(6)
 TELEPHONE NUMBER: 253 960 1760
 DATE: 2005 12 07
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 ** Per Permit Reported with I/I Report

EXHIBIT 80

NATIONAL FOR DISCHARGE MONITORING REPORT (DMR)

PERMIT NAME: ARMY
 ADDRESS: P.O. BOX 339500
 FORT LEWIS, ARMY
 LOCATION: FORT LEWIS

HA0021954
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

HA30R (500R 03)
 F - FINAL
 WASTEWATER FACILITY SOLD POINT

MONITORING PERIOD
 YEAR 99 MO 12 DAY 31
 TO YEAR 00 MO 12 DAY 31

NR 30433-3500 FROM
 (6) CR

*** NO DISCHARGE ***
 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			
BOD, 5-DAY (20 DEG. C)	4529		(26)		156		0		
RAN SEMI-INFLUENT			LBS/D				0		
BOD, 5-DAY (20 DEG. C)	528	609	(26)		18	21	0		
RAN SEMI-INFLUENT			LBS/D				0		
PH				6.0		6.8	0		
00400 1 0 0			***				0		
EFFLUENT GROSS VALUE			***				0		
SOLIDS, TSS	6594		(26)		227		0		
SUSPENDED			LBS/D				0		
00530 6 0 0			***				0		
RAN SEMI-INFLUENT			LBS/D				0		
SOLIDS, TOTAL	649	783	(26)		22	27	0		
SUSPENDED			LBS/D				0		
00530 1 0 0			***				0		
EFFLUENT GROSS VALUE			***				0		
NITROGEN, AMMONIA			LBS/D			2.59	0		
TOTAL (AS N)			***				0		
00610 1 0 0			***				0		
EFFLUENT GROSS VALUE			***				0		
NITROGEN, NITRATE			***				0		
TOTAL (AS N)			***				0		
00615 1 0 0			***				0		
EFFLUENT GROSS VALUE			***				0		

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER (b)(6)
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: (b)(6)
 TELEPHONE: 253 966-1700
 AREA CODE: 253
 NUMBER: 966-1700
 DATE: 1/1/99
 YEAR: 2000
 MO: 01
 DAY: 09

COMMENTS AND EXPLANATION OF ANY VIOLATIONS: (Reference all attachments here)
 FND - NON DEFECT

PERMIT NAME: DEFENSE, ARMY
 ADDRESS: P.O. BOX 339500
 PUBLIC WORKS, AFZH-PWU-R, N/S-17
 FORT LEWIS WA 98433-3500
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS WA 98433-3500

NATIONAL POC DISCH: HH0021954
 PERMIT NUMBER: HH0021954
 CHANGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR) DISCHARGE NUMBER: 001-A

MAJOR (SUBR 03) F - FINAL WASTEWATER FACILITY GOLD POINT

Revised 2040-0004

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY

*** NO DISCHARGE ***

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			
NITROGEN, NITRATE TOTAL (AS N)	00520 1 0 0						22.9			
EFFLUENT GROSS VALUE										
NITROGEN, NITROGEN TOTAL (AS N)	00625 1 0 0						6.6			
EFFLUENT GROSS VALUE										
CHROMIUM, TOTAL (AS CR)	01034 1 0 0						ND*			
EFFLUENT GROSS VALUE										
COPPER, TOTAL (AS CU)	01042 1 0 0						0.041			
EFFLUENT GROSS VALUE										
LEAD, TOTAL (AS PB)	01051 1 0 0						0.001			
EFFLUENT GROSS VALUE										
MOLYBDENUM, TOTAL (AS MO)	01062 1 0 0						0.004			
EFFLUENT GROSS VALUE										
NICKEL, TOTAL (AS NI)	01067 1 0 0						0.002			
EFFLUENT GROSS VALUE										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 (b)(6)

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.

(b)(6)
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 253-966-1760
 DATE: 2006 01 09
 AREA CODE NUMBER YEAR MO DAY

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

* ND - Non Detect

PERMIT NO. **WA0021954**
 FACILITY NAME **DEFENSE, ARMY**
 ADDRESS **P.O. BOX 339500**
PUBLIC WORKS, AFZH-PMU-R, M/S-17
FORT LENTIS WA 98433-9500
 FACILITY **DEFENSE, ARMY**
 LOCATION **FORT LENTIS WA 98433-9500**

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

Revised 2040-0004

MAJOR **(SUBR 03)**
F - FINAL
WASTEWATER FACILITY SOLE POINT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	12	31		00	12	31

*** NO DISCHARGE ***
 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			
ZINC, TOTAL (AS ZH) 01092 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0.092	(19)	0		
	PERMIT REQUIREMENT			***				MG/L			
SELENIUM, TOTAL (AS SE) 01147 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	ND	(19)	0		
	PERMIT REQUIREMENT			***				MG/L			
FECAL COLIFORM, APH EC MED, 44.50 31615 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	4	17	(13)	0	
	PERMIT REQUIREMENT			***				1900/L			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	3.5	(03)	0		
	PERMIT REQUIREMENT			***				MGD			
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	0.28	(19)	0		
	PERMIT REQUIREMENT			***				MG/L			
MERCURY, TOTAL (AS HG) 71900 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	ND	(19)	0		
	PERMIT REQUIREMENT			***				MG/L			
BOD, 5 DAY PERCENT REMOVAL 81010 1 0 0 PERCENT REMOVAL	*****	*****	*****	*****	*****	*****	88	(23)	0		
	PERMIT REQUIREMENT			***				PERCENT			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE	DATE				
253.966.1760	2006	01	09		
AREA CODE	NUMBER	YEAR	MO	DAY	

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

ND - NON DETECT

NATIONAL PL. DISC. # 840921954
 DISCHARGE ELIMINATION SYSTEMS (APDES) / MONITORING REPORT (DMR)
 PERMIT NUMBER: 001 A
 DISCHARGE NUMBER:
 MONITORING PERIOD: YEAR: MO: DAY: TO: YEAR: MO: DAY:

FIRM NAME: ARMY
 ADDRESS: P.O. BOX 333500
 PUBLIC WORKS, AFZM-TAU-R, M/S-17
 FORT LEWIS, WASH 98433-3500
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS WA 98433-3500 FROM

approved, o. 2040-0004
 MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLID POINT
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MINIMUM	MAXIMUM	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS SUSPENDED IN PERCENT REMOVAL				90			0		
PERCENT REMOVAL				***					
PERCENT REMOVAL				***					
HYDROCARBONS				***					
PETROLEUM				***					
BZ130				***					
EFFLUENT GROSS VALUE				***					

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 (b)(6)

TELEPHONE: 1760
 853 966 2200
 AREA CODE: 01
 NUMBER: 09
 DATE: YEAR: MO: DAY:

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER (b)(6)
 COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 * Reported with Ife Report per APDES Permit

EXHIBIT 81

NAME: DEFENSE, ARMY
 ADDRESS: BOX 339500
 PUBLIC WORKS, AFZH-PHU-R, M/S-17
 FORT LEWIS WA 98433-9500
 FACILITY: DEFENSE, ARMY
 LOCATION: FORT LEWIS WA 98433-9500 FROM

NATIONAL DIS

DISCHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)

WA054 PERMIT NUMBER

001 A DISCHARGE NUMBER

MAJOR (SUBR 03) F - FINAL WASTEWATER FACILITY SOLD POINT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	01	01		00	01	31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYP
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 6 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	4218	*****	(26)	*****	7477	*****	(19)	0		
	PERMIT REQUIREMENT			LBS/DY				MG/L			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	827	913	(26)	*****	14	16	(19)	0		
	PERMIT REQUIREMENT			LBS/DY				MG/L			
PH	SAMPLE MEASUREMENT	*****	*****		6.1	*****	7.1	(12)	0		
	PERMIT REQUIREMENT			***				SU			
SOLIDS, TOTAL SUSPENDED 00530 6 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	7542	*****	(26)	*****	132	*****	(19)	0		
	PERMIT REQUIREMENT			LBS/DY				MG/L			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1,108	1,313	(26)	*****	19	23	(19)	0		
	PERMIT REQUIREMENT			LBS/DY				MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	***	(19)	0		
	PERMIT REQUIREMENT			***				MG/L			
NITROGEN, NITRITE TOTAL (AS N) 00615 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	***	(19)	0		
	PERMIT REQUIREMENT			***				MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

TYPED OR PRINTED

AREA CODE

NUMBER

YEAR

MO

D.

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

** Repaired on June & Dec. DMR'S

Exhibit 81

ADDR

BOX 339500

WATER WORKS, AFZH-PMU-R, M/S-17

FORT LEWIS

WA 98433-9500

WAO
PL

4
NUMBER

001 A
DISCHARGE NUMBER

MAJOR

(SUBR-03)

F - FINAL

WASTEWATER FACILITY SOLD POINT

UNID NO. 209L

FACILITY DEFENSE, ARMY

LOCATION FORT LEWIS

WA 98433-9500 FROM

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
06	01	01		06	01	31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAM. TYP
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NITROGEN, NITRATE TOTAL (AS N) 00620 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	* *	(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	* *	(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
FECAL COLIFORM, MPN, EC MED, 44.5C 31615 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	6	13	(13)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				100ML			
FLOW, IN CONDUIT DR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	6.8	*****	(03)	*****	*****	*****				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD				****			
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.34	(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
BOD, 5-DAY PERCENT REMOVAL 01010 K 0 0	SAMPLE MEASUREMENT	*****	*****		75	70%	*****	(23)			
PERCENT REMOVAL	PERMIT REQUIREMENT			***				PER-CENT			
SOLIDS, SUSPENDED PERCENT REMOVAL 01011 K 0 0	SAMPLE MEASUREMENT	*****	*****		84		*****	(23)			
PERCENT REMOVAL	PERMIT REQUIREMENT			***				PER-CENT			

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		
AREA CODE	NUMBER	YEAR	MO	DAY

TYPED OR PRINTED

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

* Report June + Dec Dmr '5

NAME: DEFENSE, ARMY
 ADDRESS: BOX 333500

PUBLIC WORKS, AFZH-PWU-R, M/9-17
 FORT LEWIS WA 98433-9500

FACILITY DEFENSE, ARMY

LOCATION FORT LEWIS

NATIONAL WASTEWATER DISCHARGE ELIMINATION SYSTEM (NWDES) 3E MONITORING REPORT (DMR)

WA 154
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLO POINT

Form Approved
 OMB No. 204

WA 98433-9500 FROM

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	01	01		00	01	31

*** NO DISCHARGE ***

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			
HYDROCARBONS: PETROLEUM B2180 1 0 0 EFFLUENT GROSS VALUE		*****	*****		*****	*****	**	(19)			
	SAMPLE MEASUREMENT			***							
	PERMIT REQUIREMENT			****				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

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 DA

TYPED OR PRINTED

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

*** Per permit not reported with I/I Report

EXHIBIT 82

MA FENSE, ARMY
ADJ J. BOX 339500
PUBLIC WORKS, AFZH-PHU-R, M/S-17
FORT LEWIS WA 98433-9500
FACILITY DEFENSE, ARMY
LOCATION FORT LEWIS WA 98433-9500

WASTEWATER TREATMENT INFORMATION SYSTEM (WPTIS)
PERMIT MONITORING REPORT (DMR)

PERMIT NUMBER: **954**
DISCHARGE NUMBER: **001 A**

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
06 02 01 TO 06 02 28

MAJOR (SUBR 03)
P - FINAL
WASTEWATER FACILITY 500 PD
*** 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
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS		
BOD, 5-DAY (20 DEG. C) 00310 0 0 0 RAW SEW/INFLUENT	4022 ⁽¹⁾	*****	(26)	*****	676	*****	(19)	0	DAILY	
	PERMIT REQUIREMENT	NO AVG	LBS/DY	*****	NO AVG	*****	MG/L			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	615 ⁽¹⁾	902 ⁽¹⁾	(26)	*****	10 ⁽³⁾	15 ⁽¹⁾	(19)	0	DAILY	
	PERMIT REQUIREMENT	NO AVG	WEEKLY AVG	LBS/DY	NO AVG	WEEKLY AVG	MG/L			
PH 00400 1 0 0 EFFLUENT GROSS VALUE	*****	*****	***	6.5 ⁽²⁾	8.0	8.5	(12)	0	DAILY	
	PERMIT REQUIREMENT	*****	****	MINIMUM	*****	MAXIMUM	SU			
SOLIDS, TOTAL SUSPENDED 00530 0 0 0 RAW SEW/INFLUENT	6461 ⁽⁴⁾	*****	(26)	*****	107 ⁽¹⁰⁾	*****	(19)	0	DAILY	
	PERMIT REQUIREMENT	NO AVG	LBS/DY	*****	NO AVG	*****	MG/L			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	908 ⁽¹⁵⁾	1,143 ⁽¹⁰⁾	(26)	*****	15 ⁽¹⁰⁾	19 ⁽¹¹⁾	(19)	0	DAILY	
	PERMIT REQUIREMENT	NO AVG	WEEKLY AVG	LBS/DY	NO AVG	WEEKLY AVG	MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	*****	*****	***	*****	*****	*****	(19)	0	DAILY	
	PERMIT REQUIREMENT	*****	****	*****	*****	*****	MG/L		ANNUAL	
NITROGEN, NITRITE TOTAL (AS N) 00615 1 0 0 EFFLUENT GROSS VALUE	*****	*****	***	*****	*****	*****	(19)	0	SEMI-ANNUAL	
	PERMIT REQUIREMENT	*****	****	*****	*****	*****	MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: _____

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: _____

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

*** Rep. led on June & Dec DMR'S

Exhibit 82

NAME: WDC, ARMY
 ADDRESS: BOX 309500

IC WORKS, AFZH-PWU-R, M/S-17
 WA 98433-9500

FORT LEWIS
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS

WA 98433-9500 FROM

WASTEWATER MONITORING REPORT (WMMR)
 NAOT 4
 PER. JMBER
 001 A
 DISCHARGE NUMBER

MAJOR (SUCR 03)
 F - FINAL
 WASTEWATER FACILITY SOLD POINT

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY
00	02	01		00	02	20

*** NO DISCHARGE () ***
 NOTE: Read instructions before completing this form

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLING
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
NITROGEN, NITRATE TOTAL (AS N) 00620 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	*****	*****	***	(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT	MG/L		
NITROGEN, NITRATE TOTAL (AS N) 00625 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	*****	*****	***	(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT	MG/L		
FECAL COLIFORM, MPN EC MED, 44.50 31615 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	*****	400	400	MG GED / WKLY GED	100ML	
	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	MG GED / WKLY GED	100ML	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE		7.2 (17)	*****	(03)	*****	*****	*****	*****	*****	
	PERMIT REQUIREMENT	NO AVG	*****	MGD	*****	*****	*****	*****	*****	
CHLORINE, TOTAL RESIDUAL 50060 1 0 0 EFFLUENT GROSS VALUE		*****	*****	***	*****	*****	0.38	(19)		
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.5	DAILY MAX	MG/L	
BOD, 5-DAY PERCENT REMOVAL 01010 K 0 0 PERCENT REMOVAL		*****	*****	***	83.15	*****	*****	(23)		
	PERMIT REQUIREMENT	*****	*****	****	50	*****	*****	PERCENT		
SOLIDS, SUSPENDED PERCENT REMOVAL 01011 K 0 0 PERCENT REMOVAL		*****	*****	***	85.00	*****	*****	(23)		
	PERMIT REQUIREMENT	*****	*****	****	50	*****	*****	PERCENT		

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, 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.	TELEPHONE	DATE		
			AREA CODE	NUMBER	YEAR
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

*** Rep'd on June + Dec DMR's

ENSE, ARMY
 BOX 339500
 BLIC WORKS, AFZH-PWU-R, M/S-17
 FORT LEWIS WA 98433-3500
 CITY DEFENSE, ARMY
 CATION FORT LEWIS WA 98433-3500 FROM
 TTN

WASTE MONITORING REPORT (DMR)

UNIT NO. 20

WE	554	001 A				
NUMBER		DISCHARGE NUMBER				
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
05	02	01		05	02	28

MAJOR
 (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLO P01

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this fo

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	S
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL CARBONS, ETPOLCUM 2100 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	**	(19)			
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT	MG/L			
	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	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

REMARKS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 ** Re permit reported with F/E Reg 12

EXHIBIT 83

PERMITTEE NAME: **ESS (Include Facility Name/Location (if different))**

NAME: **DE, ARMY**

ADDRESS: **BOX 339500**

PUBLIC WORKS, AFZH-PNU-R, M/S-17

FORT LEWIS

WA 98433-9500

FACILITY: **DEFENSE, ARMY**

LOCATION: **FORT LEWIS**

WA 98433-9500

ATT: _____

NATIONAL POINT DIS

CHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)

Approved: 3 No. 2040-C

NA00 4

001 A

PERMIT NUMBER

DISCHARGE NUMBER

MAJOR

(SUBR 03)

F - FINAL

WASTEWATER FACILITY SOLD POINT

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY
98	05	01		98	05	01

*** NO DISCHARGE () ***

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 (20 DEG. C) 00310 6 0 0 RAW SEW/INFLUENT	4721 (C)	*****	(26)	LBS/DY	*****	122 (C)	*****	(19)			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	671 (C)	771 (C)	(26)	LBS/DY	*****	17 (C)	20 (C)	(19)			
TSS 00400 1 0 0 EFFLUENT GROSS VALUE	*****	*****	***	***	*****	6.3 (C)	6.9 (C)	(12)			
SOLIDS, TOTAL SUSPENDED 00330 6 0 0 RAW SEW/INFLUENT	654 (C)	*****	(26)	LBS/DY	*****	170 (C)	*****	(19)			
SOLIDS, TOTAL SUSPENDED 00330 1 0 0 EFFLUENT GROSS VALUE	743 (C)	848 (C)	(26)	LBS/DY	*****	19 (C)	22 (C)	(19)			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE	*****	*****	***	***	*****	*****	*****	(19)			
NITROGEN, NITRITE TOTAL (AS N) 00615 1 0 0 EFFLUENT GROSS VALUE	*****	*****	***	***	*****	*****	*****	(19)			

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)

* Report on June 8 Dec. DMRS

Exhibit 83

ADDR:

BOX 339500

LTC WORKS, AFZH-PWU-R, H/5-17

FT LEWIS

WA 98433-9500

FACILITY DEFENSE, ARMY

LOCATION FORT LEWIS

WA 98433-9500 FROM

WF

54

NUMBER

001 A

DISCHARGE NUMBER

MAJOR

(SUBR 03)

F - FINAL

WASTEWATER FACILITY SOLO PE

UNID INV. 1

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
06	03	01		06	03	31

*** NO DISCHARGE : : : ***

NOTE: Read Instructions before completing this form.

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYP
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NITROGEN, NITRATE TOTAL (AS N) 00620 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	**	(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
NITROGEN, KJELDAHL TOTAL (AS N) 00625 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	**	(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
FECAL COLIFORM, MPN, EC MED, 44.5C 31615 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	7 (15)	21 (16)	(15)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				100ML			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	46 (17)	*****	(03)	*****	*****	*****				
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD				***			
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.36 (18)	(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0	SAMPLE MEASUREMENT	*****	*****		85 (19)	*****	*****	(23)			
PERCENT REMOVAL	PERMIT REQUIREMENT			***				PER-CENT			
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0	SAMPLE MEASUREMENT	*****	*****		88 (20)	*****	*****	(23)			
PERCENT REMOVAL	PERMIT REQUIREMENT			***				PER-CENT			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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TYPED OR PRINTED

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)

** Repo on June & Dec. DMR's

NAME: E. HRPY
 ADDRESS: BOX 339500
 IC WORKS, AFZH-PWU-R, M/S-17
 FORT LEWIS WA 98433-9500
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS WA 98433-9500 FROM

DISCHARGING REPORT (DMR)
 RHO 4
 PEI JMBER
 001 A
 DISCHARGE NUMBER

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLD POINT

OMB No. 2040

G601

MONITORING PERIOD
 YEAR MO DAY TO YEAR MO DAY
 00 00 01 TO 00 00 01

*** NO DISCHARGE ***
 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			
HYDROCARBONS, PETROLEUM 82180 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	**	(19)			
	PERMIT REQUIREMENT			***				MG/L			
	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: _____
 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.

TYPED OR PRINTED: _____
 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)
 *** Permit not Reported with E/I Report

EXHIBIT 84

NAME D ARMY
 ADDRESS BOX 339500
 PUBLIC WORKS, AFZH-PNU-R, M/S-17
 FORT LEWIS WA 98433-9500
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS WA 98433-9500 FROM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)
 WA002 PERMIT NUMBER
 001 A DISCHARGE NUMBER

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLO POINT

m Approved B No. 2040-

G602

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
2006	04	07		06	04	30

*** NO DISCHARGE ***
 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			
BOD, 5-DAY (20 DEG. C) 00310 G 0 0 RAW SEW/INFLUENT		4363	*****	(26)	*****	140	*****	(19)			
		PERMIT REQUIREMENT		LBS/DY				MG/L			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE		465	530	(26)	*****	15	17	(19)			
		PERMIT REQUIREMENT		LBS/DY				MG/L			
PH		*****	*****		5.9	*****	6.9	(12)			
		PERMIT REQUIREMENT		***				5U			
TOTAL SUSPENDED SOLIDS, TOTAL 00530 G 0 0 RAW SEW/INFLUENT		6307	*****	(26)	*****	202	*****	(19)			
		PERMIT REQUIREMENT		LBS/DY				MG/L			
TOTAL SUSPENDED SOLIDS, TOTAL 00530 1 0 0 EFFLUENT GROSS VALUE		673	748	(26)	*****	22	24	(19)			
		PERMIT REQUIREMENT		LBS/DY				MG/L			
NITROGEN, AMMONIA TOTAL (AS N) 00610 1 0 0 EFFLUENT GROSS VALUE					*****		***	(19)			
		PERMIT REQUIREMENT		***				MG/L			
NITROGEN, NITRITE TOTAL (AS N) 00615 1 0 0 EFFLUENT GROSS VALUE					*****		***	(19)			
		PERMIT REQUIREMENT		***				MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 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 ensure 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

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

* Reported on June & Dec DMRS

Exhibit 84

NAME **L. I. ARMY**

ADDRESS **BDX 339500**

C WORKS, AFZH-PWU-R, M/S-17

FORT LEINIS

WA 98433-9500

FACILITY DEFENSE, ARMY

LOCATION FORT LEINIS

WA 98433-9500 FROM

NATIONAL POLL DISC

CHARGE ELIMINATION SYSTEM (NPDES) MONITORING REPORT (DMR)

m Approved. MB No. 2040-00

WA001 PERMIT NUMBER

001 A DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY
00	04	01		00	04	00

MAJOR (SUBR 03) F - FINAL WASTEWATER FACILITY SOLO POINT

***** NO DISCHARGE 1-1-1 *****

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			
NITROGEN, NITRATE TOTAL (AS N)		*****	*****		*****	*****		(19)			
00620 1 0 0				***							
EFFLUENT GROSS VALUE				****				MG/L			
NITROGEN, NITROGEN TOTAL (AS N)		*****	*****		*****	*****		(19)			
00625 1 0 0				***							
EFFLUENT GROSS VALUE				****				MG/L			
FECAL COLIFORM, MPN, EC MED, 44.5C		*****	*****		*****	*****		(13)			
31615 1 0 0				***		21	33				
EFFLUENT GROSS VALUE				****				100ML			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		*****	*****	(03)	*****	*****	*****				
30050 1 0 0				***				***			
EFFLUENT GROSS VALUE				****				MG/L			
CHLORINE, TOTAL RESIDUAL		*****	*****		*****	*****		(19)			
30060 1 0 0				***			0.22				
EFFLUENT GROSS VALUE				****				MG/L			
BOD, 5-DAY PERCENT REMOVAL		*****	*****		*****	*****		(23)			
31010 K 0 0				***		89					
PERCENT REMOVAL				****				PERCENT			
SOLIDS, SUSPENDED PERCENT REMOVAL		*****	*****		*****	*****		(23)			
31011 K 0 0				***		89					
PERCENT REMOVAL				****				PERCENT			

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

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

** Repair on June & Dec. DMR's*

NAME: HARRY
 ADDRESS: 333500
 WORKS, AFZH-PWU-R, M/S-17
 FOR: LEWIS WA 98433-9500
 FACILITY DEFENSE, ARMY
 LOCATION: FORT LEWIS WA 98433-9500

DISCHARGE MONITORING REPORT (DMR)

WA0021
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY GOLD POINT

6-2040-00

G604

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
06	04	01		06	04	30

*** NO DISCHARGE ***
 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			
HYDROCARBONS, PETROLEUM 2180 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	***)	(19)			
	PERMIT REQUIREMENT			***				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 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)
 * Per Permit Reported with I/I Rep

EXHIBIT 85

ADDRESS: BOX 333500
 PUBLIC WORKS, AFZH-PWU-R, M/G-17
 FORT LEWIS WA 98433-9300
 FACILITY: DEFENSE, ARMY
 LOCATION: FORT LEWIS WA 98433-9300

DMR MONITORING REPORT (DMR)
 REPORT NUMBER: 54
 DISCHARGE NUMBER: 001 A
 MONITORING PERIOD:
 YEAR MO DAY TO YEAR MO DAY
 2006 05 31 TO 2006 05 31

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLO PO:
 *** NO DISCHARGE ***
 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			
00010 0 0 0 RAW SEW/INFLUENT	4917	*****	(26)	LBS/DY	*****	172	*****	(19)	Ø		
00010 1 0 0 EFFLUENT GROSS VALUE	449	*****	(26)	LBS/DY	*****	16	*****	(19)	Ø		
00400 1 0 0 EFFLUENT GROSS VALUE	5.4	*****	(12)	MINIMUM	*****	6.0	*****	(12)	Ø		
00530 0 0 0 RAW SEW/INFLUENT	7027	*****	(26)	LBS/DY	*****	246	*****	(19)	Ø		
00530 1 0 0 EFFLUENT GROSS VALUE	526	*****	(26)	LBS/DY	*****	18	*****	(19)	Ø		
00610 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	(19)	Ø		
00610 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	*****	*****	(19)	Ø		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: _____
 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)
 *** Report June & Dec DMRS
 *** oil + chemicals detected in float effluent - effecting roughing filter padene
 Prombleam Co. - test + pH increased
 Exhibit 85

OF ARMY
 333500

WA0021004
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

PUBLIC WORKS, AFZH-PRU-R, M/S-17
 FORT LEWIS WA 98433-9500
 CITY DEFENSE, ARMY
 FORT LEWIS WA 98433-9500 FROM

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
06	05	01		06	05	31

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLD POINT

*** NO DISCHARGE ***
 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			
ROGEN, NITRATE AL (AS N)		*****	*****		*****	*****	**	(19)			
320 1 0 0 LUENT GROSS VALUE				***			REPOR	MG/L			
ROGEN, NITROGEN AL (AS N)		*****	*****		*****	*****	**	(19)			
25 1 0 0 LUENT GROSS VALUE				***			REPOR	MG/L			
AL COLIFORM, MPN MED, 44.50		*****	*****		*****	16	35	(13)			
15 1 0 0 LUENT GROSS VALUE				***	200	NO GEO	WRLS GEO	100NL			
W, IN CONDUIT OR U TREATMENT PLANT		3.4	*****	(03)	*****	*****	*****	***			
50 1 0 0 LUENT GROSS VALUE		MG-HVE		MGD	*****	*****	*****	***			
ORINE, TOTAL IDUAL		*****	*****		*****	*****	0.17	(19)			
60 1 0 0 LUENT GROSS VALUE				***	*****	*****	*****	MG/L			
5-DAY PERCENT OVAL		*****	*****		91	*****	*****	(23)			
10 K 0 0 CENT REMOVAL				***	30	MG-RMV		PER-CENT			
EDS, SUSPENDED CENT REMOVAL		*****	*****		92	*****	*****	(23)			
11 K 0 0 CENT REMOVAL				***	30	MG-RMV		PER-CENT			
11 K 0 0 CENT REMOVAL				***	30	MG-RMV		PER-CENT			

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.

TYPED OR PRINTED: _____

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: _____

TELEPHONE: _____ DATE: _____

AREA CODE: _____ NUMBER: _____ YEAR: _____ MO: _____ DAY: _____

REMARKS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here):
 Reports - June + Dec DMR's

G 606

ADDRESS
 P.O. BOX 339500
 FORT LEWIS
 CITY DEFENSE, ARMY
 FORT LEWIS

WA 98433-9500
 WA 98433-9500

NATIONAL POLLUTANT
 DISCHARGE
 WAD0213
 PERMIT NUMBER

ELIMINATION SYSTEM (NPDES)
 RING REPORT (DMR)
 001 A
 DISCHARGE NUMBER

MAJOR
 (SUBR 03)
 P - FINAL
 WASTEWATER FACILITY SOLID POINT

DVEC
 2040

G607

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	05	01	00	05	01

*** NO DISCHARGE 1 1 ***

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			
POLYAROMATICS, PETROLEUM		*****	*****		*****	*****		(19)			
180 1 C C				***							
FLUENT GROSS VALUE				***				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										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

TITLE PRINCIPAL EXECUTIVE OFFICER
 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 violators.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
 DATE
 AREA CODE NUMBER YEAR MO DAY

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

Permit Reported with I/I Report

EXHIBIT 86

DEFENSE ARMY
 SS P.O. 133500
 PUBLIC WORKS, AFZM-FWD-R, H/O-17
 FORT LENTIS WA 98405-9500
 Y DEFENSE, ARMY
 ONFORT LENTIS WA 98437-9500 FROM

NA002195
 PERMIT NUMBER

001 A
 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
2006	08	01		2006	08	30

RECOR (SUBR 03)
 P - FINAL
 WASTEWATER FACILITY SOLID POINT

*** NO DISCHARGE ***
 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			
5-DAY (20 DEG. C) SEW/INFLUENT		SAMPLE MEASUREMENT: 4743	*****	(26)	*****	171	*****	(19)			
		PERMIT REQUIREMENT: NO AVG	*****	LBS/DY	*****	REPORT NO AVG	*****	MG/L		DAILY	COMP 24
5-DAY (20 DEG. C) UMENT GROSS VALUE		SAMPLE MEASUREMENT: 562	638	(26)	*****	20	23	(19)			
		PERMIT REQUIREMENT: 1902 NO AVG	2052 WKLY AVG	LBS/DY	*****	30 NO AVG	45 WKLY AVG	MG/L		DAILY	COMP 24
5-DAY (20 DEG. C) UMENT GROSS VALUE		SAMPLE MEASUREMENT: 6.6	*****	*****	6.6	*****	7.1	(12)			
		PERMIT REQUIREMENT: *****	*****	*****	6.0 MINIMUM	*****	8.5 MAXIMUM	GU		DAILY	COMP 24
5-DAY (20 DEG. C) UMENT GROSS VALUE		SAMPLE MEASUREMENT: 6776	*****	(26)	*****	244	*****	(19)			
		PERMIT REQUIREMENT: REPORT NO AVG	*****	LBS/DY	*****	REPORT NO AVG	*****	MG/L		DAILY	COMP 24
5-DAY (20 DEG. C) UMENT GROSS VALUE		SAMPLE MEASUREMENT: 456	499	(26)	*****	16	18	(19)			
		PERMIT REQUIREMENT: 1902 NO AVG	2052 WKLY AVG	LBS/DY	*****	30 NO AVG	45 WKLY AVG	MG/L		DAILY	COMP 24
5-DAY (20 DEG. C) UMENT GROSS VALUE		SAMPLE MEASUREMENT: *****	*****	*****	*****	*****	*****	(19)			
		PERMIT REQUIREMENT: *****	*****	*****	*****	*****	*****	*****		*****	*****
5-DAY (20 DEG. C) UMENT GROSS VALUE		SAMPLE MEASUREMENT: *****	*****	*****	*****	*****	*****	(19)			
		PERMIT REQUIREMENT: *****	*****	*****	*****	*****	*****	*****		*****	*****

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.	TELEPHONE	DATE		
			AREA CODE	NUMBER	YEAR
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

all will be reported on next mon. DMR

Exhibit 86

G 608

NATIONAL POLLUTION DISCHARGE MONITORING REPORT (DMR)

WASTE ELIMINATION SYSTEM (NPDES)

MAJOR (USBR 03)

F - FINAL WASTEWATER FACILITY GOLD POZ

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PERMIT NUMBER: 0014

DISCHARGE NUMBER: 0014

MONITORING PERIOD: YEAR 00 MO 01 DAY 01 TO YEAR 00 MO 01 DAY 01

ADDRESS: 309500 FORT LEWIS, ARMY, WA 98433-9500

Table with columns: PARAMETER, QUANTITY OR LOADING (Average, Minimum, Maximum), QUALITY OR CONCENTRATION (Average, Minimum, Maximum), NO. EX, FREQUENCY OF ANALYSIS, SAMPLE TYPE. Rows include parameters like TSS, SS, and various flow measurements.

Signature and contact information section including Principal Executive Officer signature, name, telephone number, and date.

STATEMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
TYPED OR PRINTED
MCA selected

PLANT NAME/ADDRESS *(aka Facility Name/Location if different)*

DEFENSE ARMY
 P.O. BOX 539500
 PUBLIC WORKS, AFZ4-PWU-R, N/S-17
 FORT LEWIS WA 98433-9500
 DEFENSE ARMY
 FORT LEWIS WA 98433-9500

NATIONAL POLLUTANT DISCHARGE

WA0021954
 PERMIT NUMBER

ELIMINATION SYSTEM (NPDES) DRINKING REPORT (DMR)

001 A
 DISCHARGE NUMBER

MAJOR (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY GOLD POINT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
06	06	01		06	06	30

*** NO DISCHARGE ***
 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			
1. TOTAL (IN)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.062	(19)	0		
2. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT INST MAX	MG/L		SEMI-ANNUAL	SRM
3. WASTEWATER TOTAL (AS BE)	SAMPLE MEASUREMENT	*****	*****		*****	*****	ND*	(19)	0		
4. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT INST MAX	MG/L		SEMI-ANNUAL	SRM
5. WASTEWATER TSS, WPM, MED, 44.50	SAMPLE MEASUREMENT	*****	*****		*****	*****	22	55	0		
6. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	200	400		SEMI-ANNUAL	SRM
7. WASTEWATER TSS, WPM, MED, 44.50	SAMPLE MEASUREMENT	*****	*****	(03)	*****	*****	NO GEO	WKLY GEO		WEEKLY	SRM
8. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****				WEEKLY	SRM
9. WASTEWATER TSS, WPM, MED, 44.50	SAMPLE MEASUREMENT	3.3			*****	*****			0		
10. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	NO AVG			*****	*****				WEEKLY	SRM
11. WASTEWATER TSS, WPM, MED, 44.50	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.21	(19)	0		
12. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	DAILY MX	MG/L		DAILY	SRM
13. WASTEWATER TSS, WPM, MED, 44.50	SAMPLE MEASUREMENT	*****	*****		*****	*****	ND*	(19)	0		
14. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT INST MAX	MG/L		SEMI-ANNUAL	SRM
15. WASTEWATER TSS, WPM, MED, 44.50	SAMPLE MEASUREMENT	*****	*****		*****	*****	87	(23)	0		
16. WASTEWATER GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	80	PER-CENT		MONTHLY	SRM

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

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

- NON Detected

019D

EXHIBIT 87

NATIONAL POLLUTING DISCHARGE PERMIT NUMBER:
 DISCHARGE NUMBER:
 MONITORING PERIOD:
 YEAR: MO: DAY:
 TO: YEAR: MO: DAY:

ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 FAX:
 NAME:
 TITLE:
 POSITION:
 COMPANY:
 ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 FAX:
 NAME:
 TITLE:
 POSITION:
 COMPANY:
 ADDRESS:
 CITY:
 STATE:
 ZIP:
 PHONE:
 FAX:

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
30. 5-DAY (20 DEG. C) SEW/INFLUENT	4618	530	LBS/DY (26)	183	REPORT NO AVG	MG/L (19)	0	DAILY	COMPOSITE
310. 1 0 0 (20 DEG. C) FLUENT GROSS VALUE	447	2052	LBS/DY (26)	18	30	MG/L (19)	0	DAILY	COMPOSITE
400. 1 0 0 (20 DEG. C) FLUENT GROSS VALUE	5994	480	LBS/DY (26)	6.6	7.3	MG/L (19)	0	DAILY	COMPOSITE
500. 1 0 0 (20 DEG. C) FLUENT GROSS VALUE	395	480	LBS/DY (26)	2-37	19	MG/L (19)	0	DAILY	COMPOSITE
600. 1 0 0 (20 DEG. C) FLUENT GROSS VALUE	447	480	LBS/DY (26)	4.41	REPORT	MG/L (19)	0	SEMI-ANNUAL	COMPOSITE
700. 1 0 0 (20 DEG. C) FLUENT GROSS VALUE	447	480	LBS/DY (26)	REPORT	REPORT	MG/L (19)	0	SEMI-ANNUAL	COMPOSITE
800. 1 0 0 (20 DEG. C) FLUENT GROSS VALUE	447	480	LBS/DY (26)	REPORT	REPORT	MG/L (19)	0	SEMI-ANNUAL	COMPOSITE

TELEPHONE:
 DATE:
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER:
 SIGNATURE OF AUTHORIZED AGENT:
 AREA NUMBER:
 YEAR: MO: DAY:

REPORTED - June 1 Dec DNRS
 * Revised
 Omitted From June-DNR - noted in this case.
 FAX 87

PLANT NAME/

Facility Name/ Location (if different) RMY

NATIONAL POLLUTANT DISCHARGE

ELIMINATION SYSTEM (NPDES) DRING REPORT (DMR)

Revised 040-00

PLANT NO. 333000
PUBLIC WORKS AFZM-PWU-N, N/S-17
FORT LEWIS WA 96433-2500
TY DEFENSE, ARMY
ION FORT LEWIS WA 96433-2500

WA0021954
PERMIT NUMBER

001 R
DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO.	DAY	TO	YEAR	MO.	DAY
00	07	01		00	07	01

MAJOR (NUMBER 02)
F - FINAL
WASTEWATER FACILITY SLOD POINT

*** NO DISCHARGE 100% ***

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			
COBALT, NITRATE CL (AS M) 20 1 0 0 LUENT GROSS VALUE	*****	*****	***	*****	*****	*****	*****	1	19	PERM. REQUIREMENT
COBALT, NITRATE CL (AS M) 25 1 0 0 LUENT GROSS VALUE	*****	*****	***	*****	*****	*****	*****	1	19	PERM. REQUIREMENT
CHLORIDE, NH4 MG/L 5 1 0 0 LUENT GROSS VALUE	*****	*****	***	*****	17	35	17	1	19	PERM. REQUIREMENT
COPPER, IN CONDUIT OR TREATMENT PLANT 0 1 0 0 LUENT GROSS VALUE	3.0	*****	MGD	*****	*****	*****	*****	1	19	PERM. REQUIREMENT
COPPER, TOTAL MG/L 0 1 0 0 LUENT GROSS VALUE	*****	*****	***	*****	0.3	0.3	0.3	1	19	PERM. REQUIREMENT
5-DAY PERCENT VAL 0 1 0 0 LUENT REMOVAL	*****	*****	***	90	*****	*****	*****	1	20	PERM. REQUIREMENT
5-DAY PERCENT VAL 0 1 0 0 LUENT REMOVAL	*****	*****	***	93	*****	*****	*****	1	20	PERM. REQUIREMENT

TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

AREA CODE NUMBER YEAR MO DAY

TYPED OR PRINTED

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

Report on June & Dec DMR'S

0116

STATE NAME: MISSISSIPPI
 FACILITY NAME: FAY
 PERMIT NUMBER: 007300
 FACILITY ADDRESS: P.O. BOX 117
 CITY: FORT LEWIS
 STATE: ARIZONA
 ZIP CODE: 85405-3000

NATIONAL POLLUTANT DISCHARGE PERMIT NUMBER: W000021354

DISCHARGE NUMBER: 0018

MONITORING PERIOD: YEAR 06 MO 07 DAY 01 TO YEAR 06 MO 07 DAY 31

617G

HAZAR (SUBR 09)
 F - FINAL
 WASTEWATER FACILITY GOLD POINT

*** NO DISCHARGE ***
 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			
CROSSBOURD, MOLEUR	*****	*****	*****	*****	*****	(13)	10	MONTHLY	SURFACE
	*****	*****	*****	*****	*****	REPORT			
VENT CROSS VALVE	*****	*****	*****	*****	*****				
	*****	*****	*****	*****	*****				
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									
SAMPLE MEASUREMENT									
PERMIT REQUIREMENT									

TELEPHONE: _____
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: _____
 AREA CODE: _____ NUMBER: _____
 YEAR: _____ MONTH: _____ DAY: _____

TYPED ON PRINTED: _____
 AND EXPLANATION OF ANY VIOLATIONS (reference all attachments here):
 ok. Plant Reported with I/x Report

EXHIBIT 88

WASTE WATER FACILITY
 FACILITY NO. LE. ALMA
 LOCATION PERMIT LEHS

PERMIT NO. **8**
 DISCHARGE NUMBER
 MONITORING PERIOD
 FROM **2006 08 01** TO **2006 08 31**

FINAL WASTEWATER FACILITY
 *** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

C-610

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
00010 0 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	3887	*****	LBS/DY	*****	164	*****	MG/L	0	DAILY	GRID
	PERMIT REQUIREMENT	REPORT NO AVG	*****	LBS/DY	*****	REPORT NO AVG	*****	MG/L		DAILY	GRID
00010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	326	418	LBS/DY	*****	14	18	MG/L	0	DAILY	GRID
	PERMIT REQUIREMENT	1302	2832	LBS/DY	*****	30	42	MG/L		DAILY	GRID
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	6.3	7.0	*****	*****	0	DAILY	GRID
	PERMIT REQUIREMENT	*****	*****	*****	MINIMUM	MAXIMUM	*****	*****		DAILY	GRID
00500 0 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	5797	*****	LBS/DY	*****	250	*****	MG/L	0	DAILY	GRID
	PERMIT REQUIREMENT	REPORT NO AVG	*****	LBS/DY	*****	REPORT NO AVG	*****	MG/L		DAILY	GRID
00500 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	237	371	LBS/DY	*****	10	16	MG/L	0	DAILY	GRID
	PERMIT REQUIREMENT	1902	2832	LBS/DY	*****	30	42	MG/L		DAILY	GRID
00610 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0	MANUAL	GRID
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		MANUAL	GRID
00615 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****	0	MANUAL	GRID
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****		MANUAL	GRID

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.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: _____
 TYPED OR PRINTED: _____
 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)
** Report on June & Dec. DMRS*

ADDRESS: 5X 00550
 C WORKS, AFZR-PWR-R, M/3-17
 LEWIS
 FACILITY DEFENSE, ERWY
 LOCATION: LEWIS

MASS PER ABER
 DISCHARGE NUMBER

MONITORING PERIOD
 YEAR MO DAY TO YEAR MO DAY

WA 36433-9500 FROM

WA 36433-9500 FROM

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form.

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	MINIMUM	AVERAGE			
NITROGEN, NITRATE TOTAL (AS N)	***	***	***	***	0	***	(13)
EFFLUENT GROSS VALUE	***	***	***	***	0	***	MG/L
NITROGEN, AMMONIA TOTAL (AS N)	***	***	***	***	0	***	(13)
EFFLUENT GROSS VALUE	***	***	***	***	0	***	MG/L
PHOSPHORUS, TOTAL (AS P)	***	***	***	***	0	***	(13)
EFFLUENT GROSS VALUE	***	***	***	***	0	***	MG/L
THRU TREATMENT PLANT	***	***	***	***	0	***	WKLY GED
EFFLUENT GROSS VALUE	***	***	***	***	0	***	***
CHLORINE, TOTAL	***	***	***	***	0	***	(13)
RESIDUAL	***	***	***	***	0	***	***
EFFLUENT GROSS VALUE	***	***	***	***	0	***	DAILY MAX
REMOVAL	***	***	***	***	0	***	PERCENT
PERCENT REMOVAL	***	***	***	***	0	***	PERCENT
SOLIDS, SUSPENDED	***	***	***	***	0	***	PERCENT
PERCENT REMOVAL	***	***	***	***	0	***	PERCENT

NAME/TITLE: PRINCIPAL EXECUTIVE OFFICER

SIGNATURE: *Jan-Tane*

DATE: _____

TELEPHONE: _____

AREA CODE: _____ NUMBER: _____

YEAR: _____ MO: _____ DAY: _____

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

** Report on Jan-Tane*

PA Form 3320-1 (Rev. 3/89) Previous editions may be used.

ADDRESS
 BOX 307300
 WORKS, FEH-PW- R 15-17
 LEWIS
 FACILITY DEFENSE, ARMY
 LOCATION: FORT LEWIS

PERM NUMBER
 DISCHARGE NUMBER
 MONITORING PERIOD
 YEAR MO DAY TO YEAR MO DAY

WATER (CUBIC FT)
 F - FINAL
 WASTEWATER FACILITY SLO POINT
 NO DISECHARGE

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			
HYDROCARBONS, PETROLEUM EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT								
	PERMIT REQUIREMENT								
SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT								
SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT								
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
 TYPED OR PRINTED
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
 AREA CODE NUMBER
 TELEPHONE
 DATE
 YEAR MO DAY
 COMMENTS AND EXPLANATION OF ANY VIOLATIONS (reference all attachments here)
 * Analysis of NUTPHD for Aug. 2006 TC monitor - Effluent Discharge. Discharge because of pipe problems / 4th. Discharge P. 6
 * P. 1 - Permit Reported with I/F Report
 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 ensure 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 fines and imprisonment for knowing violations.

EXHIBIT 89

REPORT NUMBER
 (SUDDR 037)
 F - FINAL
 WASTEWATER FACILITY SOLD PO

*** NO DISCHARGE ***
 NOTE: Read instructions before completing this form

WAGO
 PT
 DISCHARGE NUMBER
 001 A

MONITORING PERIOD
 YEAR MO DAY
 2006 09 07 TO 2006 09 30

C WORKS, AF2H-PWU-5, H/5-17
 LEWIS AR 28433-3500
 WASTE WATER FACILITY SOLD PO
 LOCATION FORT LEWIS

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMP TYP.
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
0001 SURF (20 DEG. C) MEASUREMENT	3460		(26)		151				
0010 5 0 0 PERMIT REQUIREMENT			LBS/DY		REPORT				
0020 RAW SEW/INFLUENT MEASUREMENT	339	390	(26)		15				
0020 1 0 0 PERMIT REQUIREMENT			LBS/DY		NO AVG				
0030 EFFLUENT GROSS VALUE MEASUREMENT				6.3	7.1				
0030 1 0 0 PERMIT REQUIREMENT				MINIMUM	MAXIMUM				
0040 SUSPENDED SOLIDS; TOTAL MEASUREMENT	5066		(26)		221				
0040 0 0 0 PERMIT REQUIREMENT			LBS/DY		REPORT				
0050 RAW SEW/INFLUENT MEASUREMENT	255	298	(26)		11				
0050 1 0 0 PERMIT REQUIREMENT			LBS/DY		NO AVG				
0060 EFFLUENT GROSS VALUE MEASUREMENT									
0060 1 0 0 PERMIT REQUIREMENT									
0070 TOTAL (AS N) MEASUREMENT									
0070 1 0 0 PERMIT REQUIREMENT									
0080 EFFLUENT GROSS VALUE MEASUREMENT									
0080 1 0 0 PERMIT REQUIREMENT									
0090 TOTAL (AS N) MEASUREMENT									
0090 1 0 0 PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER _____ TELEPHONE _____ DATE _____

BIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT _____

AREA CODE _____ NUMBER _____ YEAR _____ MO _____ DAY _____

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

Report on Time & Day DMS

FORM 3320-1 (REV. 9-1-83) Previous editions may be used.

NAME ASL, ARMY
 ADDR . BOX 339500
 LIC WORKS, AFZH-PWU-R, M/S-17
 FORT LEWIS WA 98433-9500
 FACILITY DEFENSE, ARMY
 LOCATION FORT LEWIS WA 98433-3300

GE MONITORING REPORT (DMR)
 WT 554
 NUMBER
 COL A
 DISCHARGE NUMBER
 MONITORING PERIOD
 YEAR MO DAY TO YEAR MO DAY
 00 00 01 TO 00 00 00

MAJOR (SUBR 00)
 F - FINAL
 WASTEWATER FACILITY SOLD PO
 *** NO DISCHARGE ***
 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			
NITROGEN, NITRATE TOTAL (AS N)	00620 1 0 0	*****	*****	***	*****	*****	*****	MG/L	0	MONTHLY	WATER
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT	MG/L	0	MONTHLY	WATER
NITROGEN, NITRATE TOTAL (AS N)	00625 1 0 0	*****	*****	***	*****	*****	*****	MG/L	0	MONTHLY	WATER
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT	MG/L	0	MONTHLY	WATER
FECAL COLIFORM, MPN, 100 ML	31615 1 0 0	*****	*****	***	*****	10	19	MG GEO	0	WEEKLY	WATER
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	200	400	MG GEO	0	WEEKLY	WATER
FLOW, THROUGH TREATMENT PLANT	50050 1 0 0	2.7	*****	MGD	*****	*****	*****	MGD	0	MONTHLY	WATER
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	NO AVG	*****	MGD	*****	*****	*****	MGD	0	MONTHLY	WATER
CHLORINE, TOTAL RESIDUAL	50060 1 0 0	*****	*****	***	*****	0.21	*****	MG/L	0	DAILY	WATER
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	0.5	*****	MG/L	0	DAILY	WATER
SO2, 5-DAY PERCENT REMOVAL	51010 K 0 0	*****	*****	***	90	*****	*****	PER-CENT	0	MONTHLY	WATER
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	MIN X RMV	*****	*****	PER-CENT	0	MONTHLY	WATER
SOLIDS, SUSPENDED PERCENT REMOVAL	51011 K 0 0	*****	*****	***	95	*****	*****	PER-CENT	0	MONTHLY	WATER
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	MIN X RMV	*****	*****	PER-CENT	0	MONTHLY	WATER

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
 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 ensure 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 DA
 COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
 *** Repe Don Jones & Dec DMS

B DEFE ARMY
 ADDRESS P.O. 339500
 PUBL. WORKS, AFEN PHU-R, N/S-17
 FORT LEWIS WA 98433-9500
 DEFENSE, ARMY
 DONALD LEWIS WA 98433-9500 FROM

DISCHARGE DRAINAGE REPORT (DMR)

WA002191
 PERMIT NO.

001 0
 DISCHARGE NUMBER

MAJOR
 (SUBR 03)
 F - FINAL
 WASTEWATER FACILITY SOLO POINT

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
06	09	01		06	09	30

*** NO DISCHARGE ***
 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			
CARBONS, PETROLEUM (BO 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	***	(19)			
	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT	MG/L		BI-MONTHLY	ANNUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

TITLE PRINCIPAL EXECUTIVE OFFICER 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.	TELEPHONE		DATE		
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
Analysis of effluent for Sept 2006 to monitor - Influent (Diesel ND) per permit report with I-I report - (Lube oil 2.20) Discharge (Lube oil ND) because of prior problem 7A-PC