Mississippi Department of Environmental Quality
Office of Pollution Control

I-sys 2000 Master Site Detail Report

Site Name: Hercules Inc

PHYSICAL ADDRESS

LINE 1:	613 West 7th Street
LINE 2:	
LINE 3:	
MUNICIPALITY:	Hattiesburg
STATE CODE:	MS
ZIP CODE:	39401-

MAILING ADDRESS

LINE 1:	PO Box 1937
LINE 2:	
LINE 3:	
MUNICIPALITY:	Hattiesburg
STATE CODE:	MS
ZIP CODE:	39401-

OTHER INFORMATION

MASTER ID:	002022
COUNTY:	Forrest
REGION	SRO
SIC 1:	2822
AIR TYPE:	TITLE V
HW TYPE:	LARGE QUANTITY
SOLID TYPE:	
WATER TYPE:	INDUSTRIAL
BRANCH:	Chemical

ECED CONTACT:
Yassin, Mohammad

BASIN:

AIR PROGRAMS ☑ SIP ☐ PSD ☐ NSPS ☐ NESHAPS ☑ MACT

Mississippi Department of Environmental Quality
Office of Pollution Control

Pemits

PROGRAM	PERMIT TYPE	PERMIT #	MDEQ PERMIT CONTACT	ACTIVE
HAZ. WASTE	EPA ID	MSD008182081		YES
AIR	TITLE V	080000001	Ketchum, Brian	YES
AIR	SOP	080000001	Ketchum, Brian	YES
WATER	NPDES	MS0001830	Cook, Charles	NO
WATER	NPDES	MS0001830	Cook, Charles	NO
WATER	NPDES	MS0001830	Beasley, Jerry	YES
WATER	PRE-TREATMENT	MSP091286	Tomkins, Tracy	YES
GENERAL	SARA TITLE III	MSR110153	Lavallee, Louis	YES

Compliance Actions

MEDIA	ACTIVITY TYPE	SCHEDULED	COMPLETED	INSPECTED BY
WATER	CEI - NA	3/17/99	3/17/99	Yassin, Mohammad
WATER	CMI - PRETREATMENT	11/1/99		Sharp, Loyd
WATER	CMI - NPDES	4/1/00		Sharp, Loyd
WATER	CMI - NPDES	11/1/99		Sharp, Loyd
WATER	CEI - NA	9/30/00		Yassin, Mohammad
HAZ WASTE	Compliance Evaluation Inspect	9/30/00		Yassin, Mohammad
AIR	State Compliance Inspection	9/30/00		Yassin, Mohammad
HAZ WASTE	Compliance Evaluation Inspect	6/30/99	6/30/99	Yassin, Mohammad
AIR	State Compliance Inspection	6/29/99	6/29/99	Yassin, Mohammad
WATER	CEI - NA	6/30/99	6/30/99	Yassin, Mohammad

FILE COPY

INTAKE SHEET FOR REQUEST FOR ACCESS TO PUBLIC RECORDS

DATE: October 17, 1996

NAME: John A. Crawford TELEPHONE #: 949-4534

COMPANY: Butler Snow O'Mara Stevens & Cannada

ADDRESS: P O Box 22567
Jackson MS 39225-2567

FILES BEING REVIEWED

1. FACILITY: Hercules, Inc.

   COUNTY: Forrest DIVISION: Water - (MS0001830)

2. FACILITY:

   COUNTY: DIVISION:

3. FACILITY:

   COUNTY: DIVISION:

4. FACILITY:

   COUNTY: DIVISION:

5. FACILITY:

   COUNTY: DIVISION:

APPOINTMENT DATE AND TIME: October 18, 1996 @ 1:30 p.m.

Kathy Bates for John Crawford

THIS IS NOT A BILL, INVOICE WILL FOLLOW WITHIN 10 DAYS

BILLING INFORMATION

NO. OF COPIES MADE: @ $.25 = 278 pages

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DISKETTE:

TOTAL AMOUNT DUE: $ 69.50

COMMENTS:

PUBLIC RECORDS ADMINISTRATOR:
BETTY SMITH

Betty Smith

BILL ORGANIZATION:
PERSON REVIEWING FILES:

Kathy Bates

FATHEAD MINNOW ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 02/23/96 TIME STARTED: 9:15 P.M. ANALYST: RMS

NUMBER DEAD

REP #	A				B			
HOURS	24	48	72	96	24	48	72	96
0%	0	0			0	0		
6.25%	0	0			0	0		
12.5%	0	0			0	0		
25%	0	0			0	2		
50%	10	10			7	10		
100%	10	10			10	10		

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Pimephales promelas* (fathead minnow)
Age: <24hr-old
No. Replicates: 2
No. Organisms/Rep: 10
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 2/23/96

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 2
50% - 20
100% - 20

LC_{50} = 32.99% (TRIMMED SPEARMAN-KARBER METHOD).

RAW DATA CERTIFIED BY: Rick M. Howard DATE: 3/22/96

Ceriodaphnia dubia ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 02/29/96 TIME STARTED: 9:30 P.M. ANALYST: RMS

NUMBER DEAD

REP #	A		B		C		D	
HOURS	24	48	24	48	24	48	24	48
0%	0	0	0	0	0	0	0	0
6.25%	0	0	0	0	0	0	0	0
12.5%	0	0	0	0	0	0	0	0
25%	0	0	0	0	0	0	0	0
50%	0	0	0	0	0	0	0	0
100%	0	0	0	0	0	0	0	0

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Ceriodaphnia dubia* (water flea)
Age: <24hr-old
No. Replicates: 4
No. Organisms/Rep: 5
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 2/29/96

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 0
50% - 0
100% - 0

LC_{50} > 100% (NO STATISTICS APPLIED).

RAW DATA CERTIFIED BY: Rita M. Shumard DATE: 3/22/96

NPDES PERMIT ADMINISTRATIVE RECORD CHECK LIST

FACILITY HERCULES, INC.

TYPE OF PERMIT: NPDES: X STATE: ☐ NPDES NO. MS0001830

DETERMINED TO BE: EXISTING SOURCE: X NEW SOURCE: ☐ MAJOR: ☐ MINOR: ☐

These documents must be present in the Administrative Record:

DOCUMENT	YES	DATE	INITIALS
1. Application and Supporting Documents	✓	04-01-91	jfd
2. Draft Permit	✓	07-19-91	jfd
3. Fact Sheet or Statement of Basis and related documents	✓	07-01-91	jfd
4. Public Notice	✓	07-01-91	jfd
5. Proof of Publication	✓		

These documents, if applicable, must be present in the Administrative Record:

DOCUMENT	YES	N/A	DATE
6. Other Documents (correspondence between State, EPA, & Applicant, telephone & meeting memoranda, compliance reports, etc.)	☐	☐	

LIST: _____

_____

_____

7. New Source Determination & Comments	☐	☐	
8. Public Comments Received & State Response	☐	☐	

These Documents, if applicable, need not be physically present in the Administrative Record if specifically referenced and available in the Jackson Office:

DOCUMENT	YES	N/A	AVAILABLE ELSEWHERE	WHERE?
9. Environmental Assessment EIS and/or related documents	☐	☐	☐	
10. Public Hearings - P. N. of Hearing Statements, Tape or Transcript	☐	☐	☐	

These remaining documents must be present in the Administrative Record:

DOCUMENT	YES	DATE	INITIALS
11. Proof of Final Permit Board Action	✓	10-22-91	jfd
12. Final Permit and Transmittal Letter.	✓	10-24-91	jfd
13. Certified Mail-Return Receipt.	☐		
14. PCS computer entry forms	✓	10-17-91	jfd

CERTIFICATION: I have examined the referenced Administrative File and find the documents checked "yes" above are present in the file. Based on this examination, I certify that this file meets the Administrative Record Requirements of the current NPDES Regulations.

11/15/91
DATE

TAHER DIAB
PERMIT WRITER (RECORD CLERK)

In the case of a MAJOR DISCHARGER, the first line supervisor shall concur with the certification.

_____
DATE

_____
SUPERVISOR

FATHEAD MINNOW ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 08/22/95 TIME STARTED: 7:30 P.M. ANALYST: RMS

NUMBER DEAD

REP #	A				B			
HOURS	24	48	72	96	24	48	72	96
0%	0	0			0	0		
6.25%	0	0			0	0		
12.5%	0	0			0	0		
25%	1	1			0	0		
50%	0	0			0	0		
100%	0	0			0	0		

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Pimephales promelas* (fathead minnow)
Age: <24hr-old
No. Replicates: 2
No. Organisms/Rep: 10
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 8/22/95

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 1
50% - 0
100% - 0

LC_{50} > 100% (NO STATISTICS APPLIED)

RAW DATA CERTIFIED BY: Rita M. Sherrard DATE: 8/31/95

Ceriodaphnia dubia ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 08/22/95 TIME STARTED: 3:45 P.M. ANALYST: RMS

NUMBER DEAD

REP #	A		B		C		D	
HOURS	24	48	24	48	24	48	24	48
0%	0	0	0	0	0	0	0	0
6.25%	0	0	0	0	0	0	0	0
12.5%	0	0	0	0	0	0	0	0
25%	0	0	0	0	0	0	0	0
50%	0	0	0	0	0	0	0	0
100%	0	0	0	0	0	0	0	0

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Ceriodaphnia dubia* (water flea)
Age: <24hr-old
No. Replicates: 4
No. Organisms/Rep: 5
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 8/22/95

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 0
50% - 0
100% - 0

LC_{50} > 100% (NO STATISTICS APPLIED)

RAW DATA CERTIFIED BY: Dick M. Sherrard DATE: 8/31/95

FATHEAD MINNOW ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 02/12/95 TIME STARTED: 2:00 P.M.

NUMBER DEAD

REP #	A				B			
HOURS	24	48	72	96	24	48	72	96
0%	0	0			0	0		
6.25%	0	0			0	0		
12.5%	0	0			0	0		
25%	0	0			0	0		
50%	0	0			0	0		
100%	0	0			0	0		

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Pimephales promelas* (fathead minnow)
Age: <24hr-old
No. Replicates: 2
No. Organisms/Rep: 10
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 2/12/95

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 0
50% - 0
100% - 0

LC_{50} > 100% (NO STATISTICS APPLIED)

RAW DATA CERTIFIED BY: Rick M. Desmond DATE: 2/20/95

Ceriodaphnia dubia ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 02/12/95 TIME STARTED: 2:30 P.M.

NUMBER DEAD

REP #	A		B		C		D	
HOURS	24	48	24	48	24	48	24	48
0%	0	0	0	0	0	0	0	0
6.25%	0	0	0	0	0	0	0	0
12.5%	0	0	0	0	0	0	0	0
25%	0	0	0	0	0	0	0	0
50%	0	0	0	0	0	0	0	0
100%	0	0	0	0	0	0	0	0

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Ceriodaphnia dubia* (water flea)
Age: <24hr-old
No. Replicates: 4
No. Organisms/Rep: 5
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 2/12/95

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 0
50% - 0
100% - 0

LC_{50} > 100% (NO STATISTICS APPLIED)

RAW DATA CERTIFIED BY: Rick M. Sherrard DATE: 2/20/95

PERMITTEE: MS0001830 HERCULES INCORPORATED SPLIT: NO

	V A	Reported Value	True Value*	Acceptance Limits	Warning Limits	Performance Evaluation
MISCELLANEOUS ANALYTES:						
016-PH-UNITS		8.7	8.40	8.1- 8.71	8.18- 8.63	Ck. for Err.
017-TOTAL SUSPENDED SOLIDS(IN MG/L)		23.9	26.0	20- 27.9	21- 26.9	Accept.
018-OIL AND GREASE(IN MG/L)		15.2	18.2	11.6- 22.7	13- 21.3	Accept.
DEMANDS IN MILLIGRAMS PER LITER:						
025-TOC		9.6	9.60	7.97- 11.5	8.43- 11	Accept.
026-5-DAY BOD		10.0	15.2	8.06- 22.3	9.84- 20.5	Accept.
ADDITIONAL MISCELLANEOUS ANALYTES:						
028-TOTAL PHENOLICS(IN MG/L)		.062	0.177	0.0944- 0.26	0.116-0.239	Not Accept.
FATHEAD MINNOW ACUTE DATA AS % OF SAMPLE:						
054-LC50 - MHSF, 25 DEG.		42.0	49.3	24.4- 74.2	NA	Accept.
CERIODAPHNIA ACUTE DATA AS % OF SAMPLE:						
064-LC50 - MHSF, 25 DEG.		50.0	44.2	20.7- 67.8	NA	Accept.

********** END OF DATA FOR MS0001830 **********
NOTE: FOR LIMITS AND TRUE VALUES, ASSUME THREE SIGNIFICANT DIGITS.
********** END OF REPORT FOR MS0001830 **********

* Based on gravimetric calculations, or a reference value when necessary.
D.L. Means detection limit.

Ceriodaphnia dubia ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 08/31/94 TIME STARTED: 4:00 P.M.

NUMBER DEAD

REP #	A		B		C		D	
HOURS	24	48	24	48	24	48	24	48
0%	0	0	0	0	0	0	0	0
6.25%	2	2	2	2	1	2	2	2
12.5%	3	5	3	5	3	5	2	4
25%	5	5	3	5	3	5	3	5
50%	4	5	5	5	3	5	5	5
100%	5	5	5	5	5	5	5	5

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Ceriodaphnia dubia* (water flea)
Age: <24hr-old
No. Replicates: 4
No. Organisms/Rep: 5
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 8/31/94

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 8
12.5% - 19
25% - 20
50% - 20
100% - 20

LC_{50} = 0.35% (Trimmed Spearman-Karber Method)

RAW DATA CERTIFIED BY: Rita M. Sherrard DATE: 9/14/94

FATHEAD MINNOW ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 08/31/94 TIME STARTED: 4:30 P.M.

NUMBER DEAD

REP #	A				B			
HOURS	24	48	72	96	24	48	72	96
0%	0	0			0	0		
6.25%	10	10			10	10		
12.5%	10	10			10	10		
25%	10	10			10	10		
50%	10	10			10	10		
100%	10	10			10	10		

LABORATORY NOTES: *9/1. Prior to death, fish exposed to effluent were observed to be covered with black particulate matter. RS.*

Test Method: 48-hr acute definitive bioassay
Species: *Pimephales promelas* (fathead minnow)
Age: <24hr-old
No. Replicates: 2
No. Organisms/Rep: 10
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 8/31/94

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 20
12.5% - 20
25% - 20
50% - 20
100% - 20

LC_{50} = 2.50% (GRAPHICAL METHOD)

RAW DATA CERTIFIED BY: Rita M. Sherrard DATE: 9/14/94

FATHEAD MINNOW ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 09/30/94 TIME STARTED: 4:30 P.M.

NUMBER DEAD

REP #	A				B			
HOURS	24	48	72	96	24	48	72	96
0%	0	0			0	0		
6.25%	0	0			0	0		
12.5%	8	10			9	10		
25%	10	10			6	8		
50%	5	7			6	9		
100%	10	10			10	10		

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Pimephales promelas* (fathead minnow)
Age: <24hr-old
No. Replicates: 2
No. Organisms/Rep: 10
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 9/30/94

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 20
25% - 18
50% - 16
100% - 20

LC_{50} = 10.9% (TRIMMED SPEARMAN-KARBER METHOD)

RAW DATA CERTIFIED BY: Rick M. Sherwood DATE: 10-5-94

BONNER ANALYTICAL TESTING COMPANY

QUANTITATIVE RESULTS AND QUALITY ASSURANCE DATA
BASE/NEUTRALS/ACIDS - GC/MS ANALYSIS DATA

Chain of Custody Data Required for BATCO Data Management Summary Reports
Extraction Method - EPA Method 3510 Analysis Method - SW-846 Method 8270

BT27717 — BATCO File #
Hercules — COMPANY
Water — SAMPLE TYPE
001 Effluent — SAMPLE POINT
Collected: 082195 @ 1215
Analyzed: 090595 @ 1808
DATE TIME

I. Pollutant and CAS Number (if available)	MDL ug/L (ppb)	SAMPLE Detected Concen. ug/L (ppb)	SAMPLE Spike Amt. ng	SAMPLE Spike % Recov	BLANK Detected Concen. ug/L (ppb)	BLANK Spike Amt. ng	BLANK Spike % Recov	MATRIX (PTE Effluent) Detected Concen. ng/ul	MATRIX (PTE Effluent) Spike Amt. ng	MATRIX (PTE Effluent) Spike % Recov	MATRIX DUP (PTE Eff) Detected Concen. ng/ul	MATRIX DUP (PTE Eff) Spike Amt. ng	MATRIX DUP (PTE Eff) Spike % Recov
ACID COMPOUNDS:													
1A. 2-Chlorophenol 95-57-8	20	ND			ND			117.2	150	78.1	137.7	150	91.8
2A. 2,4-Dichlorophenol 120-83-2	20	ND			ND			ND			ND		
3A. 2,4-Dimethylphenol 105-67-9	20	ND			ND			ND			ND		
4A. 4,6-Dinitro-O-Cresol 534-52-1	100	ND			ND			ND			ND		
5A. 2,4-Dinitrophenol 51-28-5	100	ND			ND			ND			ND		
6A. 2-Nitrophenol 88-75-5	20	ND			ND			ND			ND		
7A. 4-Nitrophenol 100-02-7	100	ND			ND			101.9	150	67.9	68.4	150	45.6
8A. P-Chloro-M-Cresol 59-50-7	20	ND			ND			124.7	150	83.1	129.7	150	86.5
9A. Pentachlorophenol 87-86-5	100	ND			ND			139.2	150	92.8	141.2	150	94.1
10A. Phenol 108-95-2	20	ND			ND			99.6	150	66.4	112.8	150	75.2
11A. 2,4,6-Trichlorophenol 88-06-2	20	ND			ND			5.4 J			ND		
BASE/NEUTRAL COMPOUNDS:													
1B. Acenaphthene 83-32-9	20	ND			ND			90.5	100	90.5	88.9	100	88.9
2B. Acenaphtylene 208-96-8	20	ND			ND			ND			ND		
3B. Anthracene 120-12-7	20	ND			ND			ND			ND		
4B. Benzidine 92-87-5	20	ND			ND			ND			ND		
5B. Benzo(a)Anthracene 56-55-3	20	ND			ND			ND			ND		
6B. Benzo(a)Pyrene 50-32-8	20	ND			ND			ND			ND		
7B. 3,4-Benzofluoranthene 205-99-2	20	ND			ND			ND			ND		
8B. Benzo(ghi)Perylene 191-24-2	20	ND			ND			ND			ND		
9B. Benzo(k)Fluoranthene 207-08-9	20	ND			ND			ND			ND		
10B. Bis(2-Chloroethoxy)Methane 111-91-1	20	ND			ND			ND			ND		
11B. Bis(2-Chloroethyl)Ether 111-44-4	20	ND			ND			ND			ND		
12B. Bis(2-Chloroisopropyl)Ether 102-60-1	20	ND			ND			ND			ND		
13B. Bis(2-Ethylhexyl)Phthalate 117-81-7	20	16.6 J			2.6 J			4.5 J			3.3 J		
14B. 4-Bromophenyl Phenyl Ether 101-55-3	20	ND			ND			ND			ND		
15B. Butyl Benzyl Phthalate 85-68-7	20	35.9			ND			34.8			25.7		
16B. 2-Chloronapthalene 91-58-7	20	ND			ND			ND			ND		
17B. 4-Chlorophenyl Phenyl Ether 7005-72-3	20	ND			ND			ND			ND		
18B. Chrysene 218-01-9	20	ND			ND			ND			ND		
19B. Dibenzo(a,h)Anthracene 53-70-3	20	ND			ND			ND			ND		
20B. 1,2-Dichlorobenzene 95-50-1	20	ND			ND			ND			ND		
21B. 1,3-Dichlorobenzene 541-73-1	20	ND			ND			ND			ND		
22B. 1,4-Dichlorobenzene 106-46-7	20	ND			ND			88.3	100	88.3	84.7	100	84.7
23B. 3,3'Dichlorobenzidine 91-94-1	40	ND			ND			ND			ND		
24B. Diethyl Phthalate 84-66-2	20	ND			ND			ND			ND		
25B. Dimethyl Phthalate 131-11-3	20	ND			ND			ND			ND		
26B. Di-N-Butyl Phthalate 84-74-2	20	ND			5.2 J			4.6 J			3.6 J		
27B. 2,4-Dinitrotoluene 121-14-2	20	ND			ND			76.0	100	76.0	96.7	100	96.7
28B. 2,6-Dinitrotoluene 606-20-2	20	ND			ND			ND			ND		
29B. Di-N-Octyl Phthalate 117-84-0	20	ND			ND			ND			ND		
30B. 1,2-Diphenylhydrazine 122-66-7	20	ND			ND			ND			ND		

BONNER ANALYTICAL TESTING COMPANY

QUANTITATIVE RESULTS AND QUALITY ASSURANCE DATA
BASE/NEUTRALS/ACIDS - GC/MS ANALYSIS DATA

Chain of Custody Data Required for BATCO Data Management Summary Reports
Extraction Method - EPA Method 3510 Analysis Method - SW-846 Method 8270

BT27717 — BATCO File #
Hercules — COMPANY
Water — SAMPLE TYPE
001 Effluent — SAMPLE POINT
Collected: 083195 @ 1215
Analyzed: 090895 @ 1808
DATE TIME

I. Pollutant and CAS Number (if available)	MDL ug/L (ppb)	SAMPLE			BLANK			MATRIX			DUPLICATE MATRIX		
		Detected Concen. ug/L (ppb)	Spike Amt. ng	Spike % Recov	Detected Concen. ug/L (ppb)	Spike Amt. ng	Spike % Recov	Detected Concen. ng/ul	Spike Amt. ng	Spike % Recov	Detected Concen. ng/ul	Spike Amt. ng	Spike % Recov
BASE/NEUTRALS COMPOUNDS (cont'd)													
31B. Fluoranthene 206-44-0	20	ND			ND			ND			ND		
32B. Fluorene 86-73-7	20	ND			ND			ND			ND		
33B. Hexachlorobenzene 118-74-1	20	ND			ND			5.9 J			ND		
34B. Hexachlorobutadiene 87-68-3	20	ND			ND			3.6 J			ND		
35B. Hexachlorocyclopentadiene 77-47-4	20	ND			ND			ND			ND		
36B. Hexachloroethane 67-72-1	20	ND			ND			3.3 J			ND		
37B. Indeno(1,2,3-cd)Pyrene 193-39-5	20	ND			ND			ND			ND		
38B. Isophorone 78-59-1	20	ND			ND			ND			ND		
39B. Naphthalene 91-20-3	20	ND			ND			ND			ND		
40B. Nitrobenzene 98-95-3	20	ND			ND			ND			ND		
41B. N Nitrosodimethylamine 62-75-9	20	ND			ND			ND			ND		
42B. N-Nitrosodi-N-Propylamine 621-64-7	20	ND			ND			78.1	100	78.1	91.9	100	91.9
43B. N-Nitrosodiphenylamine 86-30-6	20	ND			ND			ND			ND		
44B. Phenanthrene 85-01-8	20	ND			ND			ND			ND		
45B. Pyrene 129-00-0	20	ND			ND			82.1	100	82.1	90.7	100	90.7
46B. 1,2,4-Trichlorobenzene 120-82-1	20	ND			ND			83.8	100	83.8	91.1	100	91.1
SURROGATES:													
Fluorophenol		131.9	150	88.0	105.8	150	70.5	91.3	150	60.9	96.7	150	64.5
Phenol-d6		92.1	150	61.4	69.9	150	46.6	83.9	150	55.9	85.7	150	57.1
2-Chlorophenol-d4		108.8	150	72.6	132.7	150	88.5	112.5	150	75.0	139.0	150	92.7
1,2-Dichlorobenzene-d4		82.6	100	82.6	88.0	100	88.0	82.8	100	82.8	91.3	100	91.3
Nitrobenzene-d5		81.3	100	81.3	76.1	100	76.1	89.9	100	89.9	89.3	100	89.3
Fluorobiphenyl		87.5	100	87.5	78.2	100	78.2	91.1	100	91.1	88.8	100	88.8
2,4,6-Tribromophenol		117.6	150	78.4	143.3	150	95.5	119.9	150	79.9	135.2	150	90.1
Terphenyl-d-14		80.9	100	80.9	78.5	100	78.5	97.2	100	97.2	97.7	100	97.7

Certified by:

MICHAEL S. BONNER, Ph. D.
BONNER ANALYTICAL TESTING COMPANY

BONNER ANALYTICAL TESTING COMPANY

QUANTITATIVE RESULTS AND QUALITY ASSURANCE DATA
VOLATILES - PRIORITY POLLUTANTS - GC/MS ANALYSIS DATA

Chain of Custody Data Required for BATCO Data Management Summary Reports
Analysis Method - SW-846 (8260)

BT27717 — BATCO File #
HERCULES COMPANY
WATER — SAMPLE TYPE
001 EFFLUENT — SAMPLE POINT
Collected: 08/21/95 @ 1215
Analyzed: 08/23/95 @ 2116 — DATE TIME

I. Pollutant and CAS Number (if available)	MDL ug/L (ppb)	SAMPLE Detected Concen. ug/L (ppb)	SAMPLE Spike Amt. ng	SAMPLE Spike % Recov	BLANK Detected Concen. ug/L (ppb)	BLANK Spike Amt. ng	BLANK Spike % Recov	MATRIX (DI H2O) Detected Concen. ng/ml	MATRIX (DI H2O) Spike Amt. ng	MATRIX (DI H2O) Spike % Recov	DUPLICATE MATRIX (DI H2O) Detected Concen. ng/ml	DUPLICATE MATRIX (DI H2O) Spike Amt. ng	DUPLICATE MATRIX (DI H2O) Spike % Recov
1V. Acrolein 107-02-8	5	ND			ND			ND			ND		
2V. Acrylonitrile 107-13-1	5	ND			ND			ND			ND		
3V. Benzene 71-43-2	5	ND			ND			49.1	250	98.2	47.2	250	94.2
4V. Bis(Chloromethyl)Ether 542-88-1	5	ND			ND			ND			ND		
5V. Bromoform 75-25-2	5	ND			ND			ND			ND		
6V. Carbon Tetrachloride 56-23-5	5	ND			ND			ND			ND		
7V. Chlorobenzene 108-90-7	5	ND			ND			49.1	250	98.2	49.5	250	99.0
8V. Chlorodibromomethane 124-48-1	5	ND			ND			ND			ND		
9V. Chloroethane 75-00-3	10	ND			ND			ND			ND		
10V. 2-Chloroethylvinyl Ether 110-75-8	5	ND			ND			ND			ND		
11V. Chloroform 67-66-3	5	ND			ND			ND			ND		
12V. Dichlorobromomethane 75-27-4	5	ND			ND			ND			ND		
13V. Dichlorodifluoromethane 75-71-8	5	ND			ND			ND			ND		
14V. 1,1-Dichloroethane 75-34-3	5	ND			ND			ND			ND		
15V. 1,2-Dichloroethane 107-06-2	5	ND			ND			ND			ND		
16V. 1,1-Dichloroethylene 75-35-4	5	ND			ND			33.5	250	67.0	31.9	250	63.8
17V. 1,2-Dichloropropane 78-87-5	5	1.41 J			ND			ND			ND		
18V. 1,3-Dichloropropylene 542-75-6	5	ND			ND			ND			ND		
19V. Ethylbenzene 100-41-4	5	ND			ND			ND			ND		
20V. Methyl Bromide 74-83-9	5	ND			ND			ND			ND		
21V. Methyl Chloride 74-87-3	5	ND			ND			ND			ND		
22V. Methylene Chloride 75-09-2	5	ND			ND			ND			ND		
23V. 1,1,2,2-Tetrachloroethane 79-34-5	5	ND			ND			ND			ND		
24V. Tetrachloroethylene 127-18-4	5	ND			ND			ND			ND		
25V. Toluene 108-88-3	5	235			ND			55.6	250	111.2	52.9	250	105.8
26V. 1,2-Trans-Dichloroethylene 156-60-5	5	ND			ND			ND			ND		
27V. 1,1,1-Trichloroethane 71-55-6	5	ND			ND			ND			ND		
28V. 1,1,2-Trichloroethane 79-00-5	5	ND			ND			ND			ND		
29V. Trichloroethylene 79-01-6	5	ND			ND			39.7	250	79.4	38.7	250	77.4
30V. Trichlorofluoromethane 75-69-4	5	ND			ND			ND			ND		
31V. Vinyl Chloride 75-01-4	10	ND			ND			ND			ND		
Surrogates:													
Dibromofluoromethane		56.6	250	113.2	45.4	250	90.8	52.2	250	104.4	47.3	250	94.6
Toluene-d8		49.3	250	98.6	49.1	250	98.2	50.6	250	101.2	48.6	250	97.2
4-Bromofluorobenzene		43.4	250	86.8	47.4	250	94.8	48.3	250	96.6	45.5	250	91.0

Certified by:

MICHAEL S. BONNER, Ph. D.
BONNER ANALYTICAL TESTING COMPANY

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No.: 96-01231
Cost Code: 3200

I. GENERAL INFORMATION:

Facility Name: Hercules
County Code: 0800 Forrest
NPDES Permit No.: 01830
Discharge No: 002
Date Requested:
Sample Point Identification: Total facility discharge
Requested By: Compliance Monitoring **Data To: Becky Ornelas**
Type of Sample: Grab: X Composite: Flow: Time: Other:

II. SAMPLE IDENTIFICATION:

Environment Condition: Overcast **CollectedBy:E.White/T.Cole/J.Bonck**
Where Taken: Walkway over 002 outfall ditch

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD,SS	Cool	10/22/96	1215
2.	Composite	TOC	5ml H_2SO_4	10/22/96	1215
3.	Grab	O&G	5ml H_2SO_4	10/22/96	1215
4.	Grab	Phenol	5ml H_2SO_4	10/22/96	1215
5.					

III. FIELD:

Analysis	Computer Code	Req	Results	Analyst	Date
pH	000400	X	6.6/6.7	ES/JB	10/21-22/96
D.O.	000300				
Temperature	000010	X	26°C/27°C	ES./JB	10/21-22/96
ResidualChlorine	050060				
Flow	074060	X	1.7912	EW	10/22/96

IV. TRANSPORTATION OF SAMPLE:

Bus: X **RO Vehicle:** **Other:**

V. LABORATORY:

Received by: Kathy Farris **Date: 10/23/96** **Time:1000**
Recorded by: Dot Lewis **Date Sent to State Office:** 11/18/96

VI. Remarks: NO SAMPLE

TARGET COMPOUND LIST
WET CHEMISTRY PARAMETERS

Lab Bench No.:96-01231

Analysis	Computer Req Code		Result		Analyst	Date Measured or Date Test Initiated
BOD	000310	X	30.0	mg/l	KF	10/24/96
COD	000340			mg/l		
TOC	000680	X	<1.0	mg/l	KF	11/1/96
Suspended Solids	099000	X	20.0	mg/l	KF	10/25/96
TKN	000625			mg/l		
Ammonia-N	000610			mg/l		
Fecal Coliform	074055			colonies/100ml		
Total Phosphorous	000665			mg/l		
Oil & Grease	000550	X	<5.0	mg/l	KF	10/24/96
Chlorides	099016			mg/l		
Phenol	032730	X	0.13	mg/l	KG	10/24/96
Cyanide	000722			mg/l		
Nitrate-Nitrite	000630			mg/l		
Alkalinity	000410			mg/l		
Hardness	000900			mg/l		

Remarks: _____

_____

REAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

L[illegible] Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested _____
Sample Point Identification TOTAL FACILITY DISCHARGE
Requested By COMPLIANCE MONITORING Data To BECKY ORNELAS
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( ) _____

II. SAMPLE IDENTIFICATION:
Environment Condition OVERCAST Collected By Eppoc White / Terry Cole / Jeff Bonck
Where Taken walkway over 002 outfall ditch

	Type	Parameters	Preservative	Date	Time
1.	COMPOSITE	BOD-SS	COOL	10-22-96	12:15
2.	COMPOSITE	TOC	5 ml H_2SO_4	10-22-96	12:15
3.	GRAB	O&G	5 ml H_2SO_4	10-22-96	12:15
4.	GRAB	PHENOL	5 ml H_2SO_4	10-22-96	12:15
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	ES ~~7.2~~ 6.6/6.7	ES JB	10/21/96
D.O.	(000300)	( )			
Temperature	(000010)	(X)	26 °C / 27 °C	ES JB	10/21/96
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	1.7912	Ew	10/22/96

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( ) _____

V. LABORATORY: Received By Kathy Farris Date 10-23-96 Time 1000
Recorded By [signature] Date Sent to State Office _____

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	(X)	30.0 mg/1	KF	*10-24-96
COD	(000340)	( )	mg/1		
TOC	(000680)	(X)	<1.0 mg/1	KF	11-1-96
Suspended Solids	(099000)	(X)	20.0 mg/1	KF	10-25-96
TKN	(000625)	( )	mg/1		
Ammonia-N	(000610)	( )	mg/1		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/1		
Oil and Grease(1)	(000550)	(X)	<5.0 mg/1	KF	10-24-96
Oil and Grease(2)	(000550)	( )	mg/1		
Chlorides	(099016)	( )	mg/1		
Phenol	(032730)	(X)	0.13 mg/1	KF	10-24-96
Total Chromium	(001034)	( )	mg/1		
Hex. Chromium	(001032)	( )	mg/1		
Zinc	(001092)	( )	mg/1		
Copper	(001042)	( )	mg/1		
Lead	(017501)	( )	mg/1		
Cyanide	(000722)	( )	mg/1		
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation
7200

1231

Ceriodaphnia dubia ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 08/22/96 TIME STARTED: 9:00 P.M. ANALYST: RMS

NUMBER DEAD

REP #	A		B		C		D	
HOURS	24	48	24	48	24	48	24	48
0%	0	0	0	0	0	0	0	0
6.25%	0	0	0	0	0	0	0	0
12.5%	0	0	0	0	0	0	0	0
25%	0	0	0	0	0	0	0	0
50%	0	0	0	0	0	0	0	0
100%	4	4	0	1	5	5	4	4

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Ceriodaphnia dubia* (water flea)
Age: <24hr-old
No. Replicates: 4
No. Organisms/Rep: 5
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 8/22/96

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 0
50% - 0
100% - 14

LC_{50} = 82.03% (TRIMMED SPEARMAN-KARBER METHOD).

RAW DATA CERTIFIED BY: Rita M. Howard DATE: 9-25-96

FATHEAD MINNOW ACUTE BIOASSAY

CLIENT: HERCULES, INC. DATE STARTED: 08/22/96 TIME STARTED: 10:15 P.M. ANALYST: RMS

NUMBER DEAD

REP #	A				B			
HOURS	24	48	72	96	24	48	72	96
0%	0	0			0	0		
6.25%	0	0			0	0		
12.5%	0	0			0	0		
25%	0	0			0	0		
50%	0	0			0	0		
100%	0	0			0	0		

LABORATORY NOTES:

Test Method: 48-hr acute definitive bioassay
Species: *Pimephales promelas* (fathead minnow)
Age: <24hr-old
No. Replicates: 2
No. Organisms/Rep: 10
No. Dilutions: 5 + control
Sample I.D.: Final Ditch
Date Initiated: 8/22/96

TOTAL DEAD (FOR LC_{50} DETERMINATION):

0% - 0
6.25% - 0
12.5% - 0
25% - 0
50% - 0
100% - 0

LC_{50} = > 100%

RAW DATA CERTIFIED BY: Rick M. Renaud DATE: 8-25-96

BONNER ANALYTICAL TESTING COMPANY
2703 OAK GROVE ROAD
HATTIESBURG, MS 39402
PH. (601) 264-2854

Client: HERCULES, INC.

File Number: BT31361
Collected By: Client

Sample Date/Time: 04-08-96
Date/Time Rec'd: 04-09-96 @ 1100

---

24 HOUR COMPOSITE

MO 4/8/96 OUTFALL 002

Analyte/Method #	Outfall 002	MDL	Date/Time/Analyst
Ammonia/350.2	3.8	0.1	04-10-96/1000/KAW
COD/410.4	469	10	04-09-96/1430/RWC

Data reported in mg/L, unless otherwise noted. All analyses performed in accordance with 40 CFR 136 and amendments.

MDL = Method Detection Limit.

Certified by: _____
Michael S. Bonner, Ph.D.
BONNER ANALYTICAL TESTING COMPANY

lr

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
MSD008182081	001

TINUED FROM PAGE V-6

POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	2. MARK 'X' b. BELIEVED PRESENT	2. MARK 'X' c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
S FRACTION — BASE/NEUTRAL COMPOUNDS (continued)															
1,4-Dichloro- ne (106-46-7)			X					ND		1					
3,3'-Dichloro- dine 4-1)			X					ND		1					
Diethyl late 6-2)			X					ND		1					
Dimethyl late 11-3)			X					ND		1					
DI-N-Butyl late 4-2)			X					ND		1					
2,4-Dinitro- ne (121-14-2)			X					ND		1					
2,6-Dinitro- ne (606-20-2)			X					ND		1					
DI-N-Octyl late 84-0)			X					ND		1					
1,2-Diphenyl- zine (as Azo- ne) (122-66-7)			X					ND		1					
Fluoranthene 44-0)			X					ND		1					
Fluorene 73-7)			X					ND		1					
exachlorobenzene 4-1)			X					ND		1					
Hexa- robutadiene 68-3)			X					ND		1					
Hexachloro- opentadiene 47-4)			X					ND		1					
Hexachloro- ne (67-72-1)			X					ND		1					
Indeno 3-cd) Pyrene 39-5)			X					ND		1					
Isophorone 59-1)			X					ND		1					
Naphthalene 20-3)			X					ND		1					
Nitrobenzene 95-3)			X					ND		1					
N-Nitro- methylamine 75-9)			X					ND		1					
N-Nitrosodi- opylamine 1-64-7)			X					ND		1					

'INUED FROM PAGE V-8

EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
MJD008182081	001

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

OLLUTANT ND CAS IUMBER f available)	2. MARK 'X'			3. EFFLUENT						4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
IS FRACTION – PESTICIDES (continued)															
Heptachlor ide 4-57-3)			X					ND		1					
PCB-1242 39-21-9)			X					ND		1					
PCB-1254 97-69-1)			X					ND		1					
PCB-1221 04-28-2)			X					ND		1					
PCB-1232 11-16-5)			X					ND		1					
PCB-1248 72-29-6)			X					ND		1					
PCB-1260 96-82-5)			X					ND		1					
PCB-1016 74-11-2)			X					ND		1					
Toxaphene 1-35-2)			X					ND		1					

PAGE V-9

* See attached Analyses

BONNER ANALYTICAL TESTING COMPANY
2703 Oak Grove Road
Hattiesburg, MS 39402
(601) 264-2854

Client: HERCULES

File Number: BT27717
Collected By: CMC

Sample Date/Time: 08-21/22-95 @ 1000
Date/Time Rec'd: 08-22-95 @ 1100

PERMIT APPLICATION
FORM 3510 - 2C

Analyte/Method #	001 Outfall	MDL	Date/Time/Analyst
PART A:			
a. BOD/405.1	258	1	08-23-95/1430/RML
b. COD/410.4	640	10	08-23-95/1100/RML
c. TOC/415.1	355	0.1	09-05-95/1030/RML
d. TSS/160.2	18	1	08-29-95/1620/JMD
e. Ammonia/350.2	9.1	0.1	08-25-95/1305/KAW
i. pH/150.1	7.41	±0.01	08-21-95/1215/CMC
PART B:			
a. Bromide/320.1	7.1	0.5	08-28-95/1400/JMD
b. Chlorine, Total Residual/330.5	ND	0.02	08-21-95/1215/CMC
c. Color/110.1	15	5	08-23-95/1400/RWC
d. Fecal Coliform/9221E	ND	10	08-21-95/1605/KAW
e. Fluoride/340.2	0.15	0.1	08-25-95/1100/JMD
f. Nitrate-Nitrite/353.3	1.00	0.005	08-22-95/1515/JMD
g. Nitrogen, Total Organic/351.3	8.9	0.3	08-25-95/1340/KAW
h. Oil & Grease/413.1	11	1.0	09-06-95/1030/JMD
i. Phosphorus/365.2	0.17	0.01	08-30-95/1450/RML
k. Sulfate/375.4	480	1	08-24-95/1105/JMD
l. Sulfide/376.1	3.0	0.5	08-23-95/1045/RML
m. Sulfite/377.1	3.8	0.8	08-23-95/1335/RML
n. Surfactants/425.1	0.17	0.01	08-28-95/1430/KAW

Data reported in mg/L, unless otherwise noted. All analyses performed in accordance with 40 CFR 136 and amendments.

MDL = Method Detection Limit.

Certified by: _____
Michael S. Bonner, Ph.D.
BONNER ANALYTICAL TESTING COMPANY

sr

BONNER ANALYTICAL TESTING COMPANY
2703 Oak Grove Road
Hattiesburg, MS 39402
(601) 264-2854

Client: HERCULES

File Number: BT27717
Collected By: CMC

Sample Date/Time: 08-21/22-95 @ 1000
Date/Time Rec'd: 08-22-95 @ 1100

PERMIT APPLICATION
FORM 3510-2C

Analyte/Method #	001 Outfall	MDL	Date/Time/Analyst
PART B (cont'd):			
o. Aluminum/200.7	0.22	0.05	09-12-95/0945/DH
p. Barium/200.7	ND	0.002	09-12-95/0945/DH
q. Boron/200.7	0.22	0.03	09-18-95/1330/DH
r. Cobalt/200.7	ND	0.05	09-12-95/0945/DH
s. Iron/236.1	0.22	0.05	09-06-95/0830/DH
t. Magnesium/242.1	2.80	0.04	09-18-95/1000/DH
u. Molybdenum/200.7	0.009	0.003	09-12-95/1300/DH
v. Manganese/243.1	0.07	0.02	09-19-95/0845/DH
w. Tin/200.7	ND	0.01	09-12-95/1300/DH
x. Titanium/200.7	ND	0.01	09-12-95/1300/DH

Data reported in mg/L, unless otherwise noted. All analyses performed in accordance with 40 CFR 136 and amendments.

MDL = Method Detection Limit.

Certified by: _____
Michael S. Bonner, Ph.D.
BONNER ANALYTICAL TESTING COMPANY

sr

BONNER ANALYTICAL TESTING COMPANY
2703 Oak Grove Road
Hattiesburg, MS 39402
(601) 264-2854

Client: HERCULES

File Number: BT27717 Sample Date/Time: 08-21/22-95 @ 1000
Collected By: CMC Date/Time Rec'd: 08-22-95 @ 1100

PERMIT APPLICATION
FORM 3510-2C

Analyte/Method #	001 Outfall	MDL	Date/Time/Analyst
PART C:			
1M. Antimony/200.7	ND	0.02	09-12-95/0945/DH
2M. Arsenic/200.15	ND	0.002	09-14-95/0930/DH
3M. Beryllium/200.7	ND	0.001	09-12-95/0945/DH
4M. Cadmium/213.1	ND	0.02	09-07-95/0940/DH
5M. Chromium/218.1	ND	0.04	09-01-95/1520/DH
6M. Copper/220.1	ND	0.04	09-01-95/1535/DH
7M. Lead/239.1	ND	0.15	09-07-95/0955/DH
8M. Mercury/245.2	ND	0.001	08-23-95/1336/DH
9M. Nickel/200.7	ND	0.01	09-12-95/0945/DH
10M. Selenium/200.15	0.009	0.002	09-14-95/0930/DH
11M. Silver/276.1	ND	0.05	09-05-95/1600/DH
12M. Thallium/200.15	0.018	0.001	09-14-95/0930/DH
13M. Zinc/289.1	0.04	0.02	09-15-95/1625/DH
14M. Cyanide/335.2	ND	0.01	09-01-95/0845/JMD
15M. Phenols/420.1	0.03	0.01	08-23-95/1030/KAW

Data reported in mg/L, unless otherwise noted. All analyses performed in accordance with 40 CFR 136 and amendments.

MDL = Method Detection Limit.

Certified by: _____
Michael S. Bonner, Ph.D.
BONNER ANALYTICAL TESTING COMPANY

sr

BONNER ANALYTICAL TESTING COMPANY

Phone: (601) 264-2854 | 2703 Oak Grove Road Hattiesburg, MS 39402 | Fax: (601) 268-7084

"Testing Your World for a Safer Tomorrow"

1

YOUR COMPANY NAME: Hercules

YOUR COMPANY ADDRESS:

NAME OF PERSON TO CONTACT:

CONTACT PERSON'S PHONE:

2

YOUR PROJECT NO.:	YOUR P.O.#	YOUR PROJECT NAME:
		FOR PERMIT APPLICATIONS

3

YOUR SAMPLE DESCRIPTION:	DATE	TIME	MATRIX
Sump Comp. (Reject)	9/20/95	2:45PM	W
001 Eff Comp (Reject)	"	2:35PM	W

4 PARAMETERS FOR ANALYSIS

Part 136							NUMBER OF CONTAINERS	PRESERVATIONS
X	BT28228	North					1	—
X	BT28229	Dam					1	—

5 REMARKS

Turnaround Time

Detection Limits
Special Limits Required
Yes No
Please circle one, if Yes, please describe below or include separate sheet detailing requirements.

6

RELINQUISHED BY: (Signature)	DATE	TIME	RECEIVED BY: (Signature)	RELINQUISHED BY: (Signature)	DATE	TIME	RECEIVED BY: (Signature)
[signature]	9/20/95	3:00PM					

METHOD OF SHIPMENT	SHIPPED BY: (Signature)	COURIER (Signature)	RECEIVED FOR BATCO BY: (Signature)	DATE/TIME

7

SAMPLE REMAINDER DISPOSAL

☐ RETURN SAMPLE REMAINDER TO CLIENT VIA _____
(SOME SHIPPING CHARGES MAY BE INCURRED)

☐ I REQUEST BATCO TO DISPOSE OF ALL SAMPLE REMAINDERS

_____ (Signature) _____ (Date)

IF SAMPLE REMAINDER IS DETERMINED TO BE HAZARDOUS, A MINIMUM ADDITIONAL CHARGE OF $25.00 PER SAMPLE WILL BE ASSESSED FOR DISPOSAL.

REVISION DATE: 2/94

BONNER ANALYTICAL TESTING COMPANY

Phone: (601) 264-2854 | 2703 Oak Grove Road, Hattiesburg, MS 39402 | Fax: (601) 268-7084

" Testing Your World for a Safer Tomorrow "

BATCO

1

YOUR COMPANY NAME: Hercules

YOUR COMPANY ADDRESS:

NAME OF PERSON TO CONTACT: Charlie Jordan

CONTACT PERSON'S PHONE:

2

YOUR PROJECT NO.:	YOUR P.O.#	YOUR PROJECT NAME:

3

YOUR SAMPLE DESCRIPTION:	DATE	TIME	MATRIX	BNA & Pest/PCB	2-C parameters	See Attached	Cn	Oil & Grease	Phenol	Volatiles	NUMBER OF CONTAINERS	PRESERVATIONS	5 REMARKS
PTE Eff Comp	8/21/22/95	10:00Am	W	X	✓						8		Turnaround Time
PTE Eff Grabs	8/21/95	18:00N	W	X	✓		✓	✓	✓	✓	5	✓	Detection Limits Special Limits Require Yes No Please circle one. If Ye please describ or include se sheet detai requireme
													BT27716
001 Eff Comp	8/21/22/95	10:00Am	W	X	✓						8		
001 Eff Grabs	8/21/95	12:15Am	W	X	✓		✓	✓	✓	✓	5	✓	BT27717

(BNA's + Pest/PCB on the COMPOSITES SAMPLES COLLECTED for M/S + MSD)

4 PARAMETERS FOR ANALYSIS

6

RELINQUISHED BY: (Signature)	DATE	TIME	RECEIVED BY: (Signature)	RELINQUISHED BY: (Signature)	DATE	TIME	RECEIVED BY: (Signature)
Mike Chandler	8/22/95	11:00Am	RW Culpepper				

METHOD OF SHIPMENT	SHIPPED BY: (Signature)	COURIER (Signature)	RECEIVED FOR BATCO BY: (Signature)	DATE/TIME

SAMPLE REMAINDER DISPOSAL

☐ RETURN SAMPLE REMAINDER TO CLIENT VIA _____
(SOME SHIPPING CHARGES MAY BE INCURRED)

☐ I REQUEST BATCO TO DISPOSE OF ALL SAMPLE REMAINDERS
_____ (Signature) _____ (Date)
IF SAMPLE REMAINDER IS DETERMINED TO BE HAZARDOUS, A MINIMUM ADDITIONAL CHARGE OF $25.00 PER SAMPLE WILL BE ASSESSED FOR DISPOSAL.

REVISION DATE 2/94

BONNER ANALYTICAL TESTING COMPANY

QUANTITATIVE RESULTS AND QUALITY ASSURANCE DATA
PESTICIDE/POLYCHLORINATED BIPHENYLS - ECD ANALYSIS DATA

Chain of Custody Data Required for BATCO Data Management Summary Reports
Analysis Method - SW-846;8080

BT28229 — BATCO File #
Hercules — COMPANY
Water — SAMPLE TYPE
001 Eff. Comp. — SAMPLE POINT
Collected: 09/20/95 1435
Analyzed: 10/02/95 0743
DATE TIME

Compound		MDL ug/L (ppb)	SAMPLE			BLANK			MATRIX			DUPLICATE MATRIX		
			Detected Concen. ug/L (ppb)	Spike Amt. ug	Spike % Recov	Detected Concen. ug/L (ppb)	Spike Amt. ug	Spike % Recov	Detected Concen. ug/L (ppb)	Spike Amt. ug	Spike % Recov	Detected Concen. ug/L (ppb)	Spike Amt. ug	Spike % Recov
Aldrin	1P.	0.05	ND			ND								
Alpha-BHC	2P.	0.05	ND			ND								
Beta-BHC	3P.	0.05	ND			ND								
* Gamma-BHC	4P.	0.05	ND			ND			55.05	50.0	110.0	41.35	50.0	82.7
Delta-BHC	5P.	0.05	ND			ND								
Chlordane	6P.	0.50	ND			ND								
4,4-DDT	7P.	0.10	ND			ND								
4,4-DDE	8P.	0.10	ND			ND								
4,4-DDD	9P.	0.10	ND			ND								
Dieldrin	10P.	0.10	ND			ND								
Endosulfan I	11P.	0.05	ND			ND								
Endosulfan II	12P.	0.10	ND			ND								
Endosulfan sulfate	13P.	0.10	ND			ND								
* Endrin	14P.	0.10	ND			ND			79.69	50.0	159.4	80.60	50.0	161.2
Endrin Aldehyde	15P.	0.10	ND			ND								
* Heptachlor	16P.	0.05	ND			ND			34.15	50.0	68.3	29.97	50.0	59.9
* Heptachlor epoxide	17P.	0.05	ND			ND			42.30	50.0	84.6	42.31	50.0	84.6
Aroclor-1242	18P.	0.50	ND			ND								
Aroclor-1254	19P.	1.00	ND			ND								
Aroclor-1221	20P.	0.50	ND			ND								
Aroclor-1232	21P.	0.50	ND			ND								
Aroclor-1248	22P.	1.00	ND			ND								
Aroclor-1260	23P.	1.00	ND			ND								
Aroclor-1016	24P.	0.50	ND			ND								
Toxaphene	25P.	1.00	ND			ND								
Surrogate:														
Tetrachloro-m-xylene			0.176	0.20	87.9	0.109	0.20	54.5	0.215	0.20	107.4	0.154	0.20	76.9
Decachlorobiphenyl			0.211	0.20	105.3	0.156	0.20	78.0	0.170	0.20	85.0	0.155	0.20	77.4

*Matrix Spiking Compounds

Certified by:
MICHAEL S. BONNER, Ph. D
BONNER ANALYTICAL TESTING COMPANY

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 1747

I. GENERAL INFORMATION: Facility Name Hercules
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested
Sample Point Identification total facility discharge
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Clear Collected By E. White
Where Taken 002 parshall flume

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	Cool	11/15/94	1100
2.	Composite	TOC	5 ml H_2SO_4	11/15/94	1100
3.	Grab	*O&G,Phenol	5 ml H_2SO_4	11/15/94	1100
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.7	EW	11/14/94
D.O.	(000300)	( )			
Temperature	(000010)	(X)	29°C	EW	11/14/94
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.78 MGD	EW	11/15/94

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Kathy Farris Date 11/16/94 Time 945
Recorded By Dot Lewis Date Sent to State Office 12-14-94

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	23.0	mg/l	DS	*11/16/94
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	16.0	mg/l	KF	12/9/94
Suspended Solids	(099000)	(X)	1.0	mg/l	KF	11/18/94
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	( )		mg/l		
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.05	mg/l	DS	11/17/94
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				

Remarks *Only one container submitted instead of two.

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested _____
Sample Point Identification TOTAL FACILITY DISCHARGE
Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition CLEAR Collected By ERROL WHITE
Where Taken 002 PARSHALL FLUME

	Type		Parameters	Preservative	Date	Time
1.	COMPOSITE		BOD-SS	COOL	11-15-94	11:00
2.	COMPOSITE		TOC	5 ml H_2SO_4	11-15-94	11:00
3.	GRAB	*	O&G-PHENOL	5 ml H_2SO_4	11-15-94	11:00
4.						
5.						

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.7	EW	11/14/94
D.O.	(000300)	( )			
Temperature	(000010)	(X)	29°C	EW	11/94/94
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.78 MGD	EW	11/15/94

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Kathy Farris Date 11-16-94 Time 945
Recorded By _____ Date Sent to State Office 12-17-94

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	23.0	mg/l	DS	* 11-16-94
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	16.6	mg/l	KF	12-9-94
Suspended Solids	(099000)	(X)	1.0	mg/l	KF	11-18-94
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	( )		mg/l		
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.05	mg/l	DS	11-17-94
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				

Remarks * ONLY ONE CONTAINER SUBMITTED INSTEAD OF TWO
Phenol only.
*Date of Test Initiation

7200

1747

FORM 23

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 94-00365

I. GENERAL INFORMATION: Facility Name Hercules
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested
Sample Point Identification Total facility discharge
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition clear Collected By Errol White
Where Taken effluent ditch prior to discharge

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	3/15/94	1115
2.	Composite	TOC	5 ml H_2SO_4	3/15/94	1115
3.	Grab	O&G/Phenol	5 ml H_2SO_4	3/15/94	1115
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.3/7.3	EW	3/14-15/94
D.O.	(000300)	( )			
Temperature	(000010)	(X)	26°C	EW	3/15/94
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	.73 MGD	EW	3/15/94

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Kathy Farris Date 3/16/94 Time 0810
Recorded By Sandy Hammons Date Sent to State Office 4/21/94

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	33	mg/l	DS	*3/16/94
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	19	mg/l	KF	4/8/94
Suspended Solids	(099000)	(X)	12	mg/l	DS	3/18/94
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	<5	mg/l	KF	3/23/94
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.07	mg/l	DS	3/16/94
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				

Remarks

*Date of Test Initiation

1200

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested _____
Sample Point Identification TOTAL FACILITY DISCHARGE
Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( ) _____

II. SAMPLE IDENTIFICATION:
Environment Condition CLEAR Collected By ERROL WHITE
Where Taken Effluent Ditch prior to discharge

	Type	Parameters	Preservative	Date	Time
1.	COMPOSITE	BOD-SS	COOL	3/15/94	11:15
2.	COMPOSITE	TOC	5 ml H_2SO_4	3/15/94	11:15
3.	GRAB	O&G/PHENOL	5 ml H_2SO_4	3/15/94	11:15
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.3 7.3	EWS EWS	3/14/94 3/15/
D.O.	(000300)	( )			
Temperature	(000010)	(X)	26° C	EWS	3/15/9
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	.73 MGD	EWS	3/15/94

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )
V. LABORATORY: Received By Kathy Farris Date 3-16-94 Time 810
Recorded By _____ Date Sent to State Office 4/21/94

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	33	mg/l	DS	*3/16/94
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	19	mg/l	ICF	4/8/94
Suspended Solids	(099000)	(X)	12	mg/l	DS	3/18/9
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	<5	mg/l	ICF	3/23/9
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.07	mg/l	DS	3/16/94
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				

Remarks _____

*Date of Test Initiation

Division Code 1200

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 1503

FURREST

I. GENERAL INFORMATION: Facility Name Hercules
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested
Sample Point Identification total facility discharge
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition clear, sunny Collected By E. White / R. McCrory
Where Taken beneath catwalk at 002 outfall

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	10/26/93	11/5/93
2.	Composite	TOC	5 ml H_2SO_4	10/26/93	11/5/93
3.	Grab	O&G, Phenol	5 ml H_2SO_4	10/26/93	11/5/93
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.0	RM	10/26/93
D.O.	(000300)	( )			
Temperature	(000010)	(X)	29.0	RM	10/26/93
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.65 MGD	RM	10/26/93

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Kathy Farris Date 10/27/93 Time 1105
Recorded By Sandy Hammons Date Sent to State Office 12/3/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	25.0	mg/l	KF	*10/27/9
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	18.0	mg/l	KF	11/1/93
Suspended Solids	(099000)	(X)	12.0	mg/l	KF	10/29/9
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	Void*	mg/l		
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.08	mg/l	KF	11/18/93
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				

Remarks *Void-no sample was collected for Oil & Grease.

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested _____
Sample Point Identification TOTAL FACILITY DISCHARGE
Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( ) _____

II. SAMPLE IDENTIFICATION:
Environment Condition clear, 5-day Collected By E. WHITE / R. McCrory
Where Taken beneath outfall at one entrance

	Type	Parameters	Preservative	Date	Time
1.	COMPOSITE	BOD-SS	COOL	10/24/93	1115
2.	COMPOSITE	TOC	5 ml H_2SO_4	10/24/93	1115
3.	GRAB	O&G-PHENOL	5 ml H_2SO_4	10/24/93	1115
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.0	RM	10/26/93
D.O.	(000300)	( )			
Temperature	(000010)	(X)	29.0	RM	10/26/93
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.65 MGD	RM	10/26/93

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Kathy Farris Date 10-27-93 Time 1105
Recorded By Sandy Summers Date Sent to State Office 12/3/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	25.0	mg/l	KF	*10/27/93
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	18.0	mg/l	KF	11/1/93
Suspended Solids	(099000)	(X)	12.0	mg/l	KF	10/29/93
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	~~XXXXX~~ VOID*	mg/l	ICF	~~XXXXXX~~
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.08	mg/l	KF	11/18/93
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				
		( )				

Remarks * Void - no sample was collected for oil & Grease

*Date of Test Initiation

1503

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 1331

GENERAL INFORMATION: Facility Name Hercules FORE

County Code 0800 NPDES Permit No. 01830

Discharge No. 002 Date Requested

Sample Point Identification total facility discharge

Requested By Compliance Monitoring Data To John Taylor

Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:

Environment Condition good Collected By Mike Egan

Where Taken plant outfall near flume

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	Cool	9/21/93	1100
2.	Composite	TOC	5 ml H_2SO_4	9/21/93	1100
3.	Grab	O&G, Phenol	5 ml H_2SO_4	9/21/93	1100
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.6/7.4	ME	9/20-21/93
D.O.	(000300)	( )			
Temperature	(000010)	(X)	33/36	ME	9/20-21/93
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.80 MGD	ME	9/21/93

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Kathy Farris Date 9/22/93 Time 0950

Recorded By Sandy Hammons Date Sent to State Office 10/7/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	59.0	mg/l	KF	*9/22/93
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	33.0	mg/l	KF	10/1/93
Suspended Solids	(099000)	(X)	12.0	mg/l	KF	9/24/93
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	6.0	mg/l	KF	10/5/93
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.22	mg/l	KF	9/27/93
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
		( )				
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		( )				
		( )				

Remarks

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested _____
Sample Point Identification TOTAL FACILITY DISCHARGE
Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR
Type of Sample: Grab (X) Composite (Flow) (TimeX) Other ( ) _____

II. SAMPLE IDENTIFICATION:
Environment Condition Good Collected By Mike Egan
Where Taken Plant outfall near flume

	Type	Parameters	Preservative	Date	Time
1.	COMPOSITE	BOD-SS	COOL	9/21/93	11 00
2.	COMPOSITE	TOC	5 ml H_2SO_4	9/21/93	11 00
3.	GRAB	O&G/PHENOL	5 ml H_2SO_4	9/21/93	11 00
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.6 7.4	M Egan	9/20-21/93
D.O.	(000300)	( )			
Temperature	(000010)	(X)	33 36	M Egan	9/20-21/93
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.80 MGD	M Egan	9/21/93

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Kathy Farris Date 9-22-93 Time 950
Recorded By Sandy Hammons Date Sent to State Office 10/7/93

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	(X)	59.0 mg/1	ICF	*9/22/93
COD	(000340)	( )	mg/1		
TOC	(000680)	(X)	33.0 mg/1	ICF	10/1/93
Suspended Solids	(099000)	(X)	12.0 mg/1	KF	9/24/93
TKN	(000625)	( )	mg/1		
Ammonia-N	(000610)	( )	mg/1		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/1		
Oil and Grease(1)	(000550)	(X)	6.0 mg/1	ICF	10/5/93
Oil and Grease(2)	(000550)	( )	mg/1		
Chlorides	(099016)	( )	mg/1		
Phenol	(032730)	(X)	0.22 mg/1	ICF	9/27/93
Total Chromium	(001034)	( )	mg/1		
Hex. Chromium	(001032)	( )	mg/1		
Zinc	(001092)	( )	mg/1		
Copper	(001042)	( )	mg/1		
Lead	(017501)	( )	mg/1		
Cyanide	(000722)	( )	mg/1		
		( )			
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		( )			
		( )			

Remarks _____

*Date of Test Initiation

1331

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 873

I. GENERAL INFORMATION: Facility Name Hercules-Forrest County
County Code 001 NPDES Permit No. 01830
Discharge No. 001 Date Requested
Sample Point Identification total treated process water
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition sunny and hot Collected By Jimmy Thompson
Where Taken parshall flume

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	7/7/93	1220
2.	Composite	TOC	5 ml H_2SO_4	7/7/93	1220
3.	Grab	Oil & Grease/Phenol	5 ml H_2SO_4	7/7/93	1224
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.8/7.3	JT	7/6-7/93
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	.04 MGD	JT	7/7/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Otis Clark Date 7/8/93 Time 0830
Recorded By Sandy Hammons Date Sent to State Office 7/27/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	<10.0	mg/l	KF	7/9/93
COD	(000340)	(X)	<10.0	mg/l	KF	7/15/93
TOC	(000680)	(X)	12.0	mg/l	KF	7/26/93
Suspended Solids	(099000)	(X)	10.0	mg/l	KF	7/9/93
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	63.0	mg/l	DE	7/13/93
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	< .05	mg/l	KF	7/12/93
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
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		( )				
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		( )				
		( )				
		( )				

Remarks

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 873

I. GENERAL INFORMATION: Facility Name Hercules-Forrest County
County Code 001 NPDES Permit No. 01830
Discharge No. 001 Date Requested
Sample Point Identification total treated process water
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition sunny and hot Collected By Jimmy Thompson
Where Taken parshall flume

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	7/7/93	1220
2.	Composite	TOC	5 ml H_2SO_4	7/7/93	1220
3.	Grab	Oil & Grease/Phenol	5 ml H_2SO_4	7/7/93	1224
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.8/7.3	JT	7/6-7/93
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	.04 MGD	JT	7/7/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Otis Clark Date 7/8/93 Time 0830
Recorded By Sandy Hammons Date Sent to State Office 7/29/93

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	(X)	< 10.0 mg/l	KF	*7/9/93
COD	(000340)	(X)	< 10.0 mg/l	KF	7/15/93
TOC	(000680)	(X)	12.0 mg/l	KF	7/26/93
Suspended Solids	(099000)	(X)	10.0 mg/l	KF	7/9/93
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	(X)	63.0 mg/l	DE	7/13/93
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	(X)	< .05 mg/l	KF	7/12/93
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
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		( )			
		( )			
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		( )			
		( )			
		( )			

Remarks

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES - FORREST COUNTY
County Code 001 NPDES Permit No. 01830
Discharge No. 001 Date Requested _____
Sample Point Identification TOTAL TREATED PROCESS WATER
Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition SUNNY AND HOT Collected By JIMMY Thompson
Where Taken Parshall Flume

	Type	Parameters	Preservative	Date	Time
1.	COMPOSITE	BOD-SS	COOL	7-7-93	12:20
2.	COMPOSITE	TOC	5 ml H_2SO_4	7-7-93	12:20
3.	GRAB	OIL & GREASE/PHENOL	5 ml H_2SO_4	7-7-93	12:24
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	7.8 7.3	JThompson	7-6-7-93
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	.04 MGD	JThompson	7-7-93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )
V. LABORATORY: Received By (7-08-93) Otis Clark Date 7-08-93 Time 0830
Recorded By Sandy Hammon Date Sent to State Office 7/29/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	<10.0	mg/l	KF	*7/9/9
COD	(000340)	(X)	<10.0	mg/l	KF	7/15/9
TOC	(000680)	(X)	12.0	mg/l	KF	7/26/9
Suspended Solids	(099000)	(X)	10.0	mg/l	KF	7/9/9
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	63.0	mg/l	DE	7/13/93
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	<.05	mg/l	KF	7/12/9
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
		( )				
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		( )				
		( )				
		( )				
		( )				

Remarks _____

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 428

I. GENERAL INFORMATION: Facility Name Hercules-Forrest County
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested
Sample Point Identification Total Facility Discharge
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition intermittant rain Collected By Mike Egan
Where Taken effluent ditch downstream from 001 discharge

	Type	Parameters	Preservative	Date	Time
1.	Grab	Zn, Al	5 ml HNO_2	3/23/93	1200
2.	Grab	Delnav	Pest. Bottle	3/23/93	1200
3.					
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.6	ME	3/23/93
D.O.	(000300)	( )			
Temperature	(000010)	(X)	25	ME	3/23/93
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	1.59 MGD	ME	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By David Singleton Date 3/24/93 Time 0830
Recorded By Sandy Hammons Date Sent to State Office 6/18/93

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	(X)	51.9 ug/l	EP	4/5/93
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
Aluminum		(X)	791.0 ug/l	GB	4/5/93
Delnav		(X)	None Detected	JS/JK	5/25/93
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 428

I. GENERAL INFORMATION: Facility Name Hercules-Forrest County
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested
Sample Point Identification Total Facility Discharge
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition intermittant rain Collected By Mike Egan
Where Taken effluent ditch downstream from 001 discharge

	Type	Parameters	Preservative	Date	Time
1.	Grab	Zn, Al	5 ml HNO_3	3/23/93	1200
2.	Grab	Delnav	Pest. Bottle	3/23/93	1200
3.					
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.6	ME	3/23/93
D.O.	(000300)	( )			
Temperature	(000010)	(X)	25	ME	3/23/93
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	1.59 MGD	ME	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus (X) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By David Singleton Date 3/24/93 Time 0830
Recorded By Sandy Hammons Date Sent to State Office 4/8/93

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/1		*
COD	(000340)	( )	mg/1		
TOC	(000680)	( )	mg/1		
Suspended Solids	(099000)	( )	mg/1		
TKN	(000625)	( )	mg/1		
Ammonia-N	(000610)	( )	mg/1		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/1		
Oil and Grease(1)	(000550)	( )	mg/1		
Oil and Grease(2)	(000550)	( )	mg/1		
Chlorides	(099016)	( )	mg/1		
Phenol	(032730)	( )	mg/1		
Total Chromium	(001034)	( )	mg/1		
Hex. Chromium	(001032)	( )	mg/1		
Zinc	(001092)	(X)	51.9 ug/l	EP	4/5/93
Copper	(001042)	( )	mg/1		
Lead	(017501)	( )	mg/1		
Cyanide	(000722)	( )	mg/1		
Aluminum		(X)	791.0 ug/l	GB	4/5/93
Delnav		(X)	None Detected	JS/JK	5/25/93
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES - FORREST COUNTY
County Code 0800 NPDES Permit No. 01830
Discharge No. 002 Date Requested _____
Sample Point Identification TOTAL FACILITY DISCHARGE
Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR
Type of Sample: Grab (X) Composite (Flow) (Time) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Intermittent rain Collected By Mike Egan
Where Taken Effluent ditch downstream from 001 discharge

	Type	Parameters	Preservative	Date	Time
1.	GRAB	ZN-AL	5 ml HNO_3	3/23/93	12:00
2.	GRAB	DELNAV	PEST. BOTTLE	3/23/93	12:00
3.					
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.6	M Egan	3/23/93
D.O.	(000300)	( )			
Temperature	(000010)	(X)	25	M Egan	3/23/93
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	1.59 MGD	M Egan	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus (✓) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Dave Smith Date 3-24-93 Time 0830
Recorded By Sandy Hammond Date Sent to State Office 6/8/93

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	( )	mg/l		*
COD	(000340)	( )	mg/l		
TOC	(000680)	( )	mg/l		
Suspended Solids	(099000)	( )	mg/l		
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	(✓)	51.9 ug/l ~~mg/l~~	EP	4-5-93
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
Aluminum		(X)	191.0 ug/l	GB	4/5/93
DELNAV		(X)	None detected	JS/JK	5/25/93
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks _____

*Date of Test Initiation

Hercules, Inc.

Toxicity Test Results
March 28,1994

Mississippi Office of Pollution Control
Toxicity Testing Laboratory

MATERIALS AND METHODS

On 16 March 1994, an acute toxicity test, consisting of five dilutions and a control was conducted by the Office of Pollution Control Toxicity Testing Laboratory using effluent from Hercules, Inc., Hattiesburg, MS. The acute toxicity test was performed with Ceriodaphnia dubia as the test organism with all six treatments being replicated four times. Except where noted, the test was conducted according to guidelines set forth in EPA/600/4-90/027, "Short-Term Methods for Estimating the Chronic Toxicity of Effluents and Receiving Waters to Freshwater Organisms" (Appendix A).

The Ceriodaphnia dubia used in the toxicity test were reared at the MSOPC Toxicity Testing Laboratory from cultures obtained from the EPA Environmental Services Division, Ecological Support Branch, in Athens, Georgia. The individuals used in the test were newly hatched neonates, all less than 24 hour old and all born within an 8 hour period.

The dilution water used for the Ceriodaphnia dubia toxicity test consisted of NanoPure water to which Perrier was added to have a final concentration of 20% Perrier. After addition of the mineral water, the dilution water was aerated for at least 24 hours prior to its use.

To make test solutions for the acute toxicity test, a 1 liter (L) aliquot of effluent sample was slowly warmed to 25°C. Effluent test concentrations of 100.0%, 50.0%, 25.0%, 12.5%. and 6.25% were made by adding the appropriate volume of effluent to each graduated plastic beaker, and then diluting to the 400 mL mark with dilution water. A dilution water control was also made by simply adding 400 mLs to a plastic beaker.

Each of the six treatments were then stirred with a different new sterile disposable glass pipette, and the six solutions were poured in turn into the 30 mL test beakers. Fifteen mLs were used per test beaker. When loading chambers with neonates, care was taken to add a minimum volume of dilution water with each test organism transferred.

Dissolved oxygen, temperature, pH, and conductivity were determined using excess amounts of the test and the control solutions, after setting up the five different effluent treatments and control at the start of the test (Appendix B). Temperature and dissolved oxygen were measured with a YSI (Yellow Springs Instruments) Model 54 dissolved oxygen meter. Conductivity was measured with a Curtin Matheson digital automatic temperature compensated conductivity meter. An Orion Model SA250 digital automatic temperature compensated pH meter was used to measure pH. The alkalinity and hardness of 100% effluent was measured with Chemetrics Titrets. All instrumentation was calibrated according to MOPC Toxicity Testing Labortory Standard Operating Procedures.

The Ceriodaphnia dubia acute toxicity response was tested by initiating a sodium chloride standard reference acute toxicity test. The 48 hour LC50 was found to be 1.9 g/L, which was within the range of concentrations obtained in previous acute reference toxicant tests.

Results

The definitve acute toxicity test survival results are tabulated for the controls and treatments in Appendix C. None of the control organisms experienced mortality during the 48 hour exposure period, only partial mortality in the 100% treatment group occured. The Trimmed Spearman - Karber Method was used to calcute the 48 hour LC50 of 100% (Appendix D).

Conclusions

Since the 48 hour LC50 was found to be 100%, it is not expected that organisms as sensitive as Ceriodaphnia dubia would be adversely affected instream by the discharge of effluent from outfall 001 at Hercules, Inc.

ACUTE TEST OVERVIEW

The Mississippi Office of Pollution Control (MOPC) Toxicity Testing Laboratory, on 28 March 1994, conducted an acute toxicity test using Ceriodaphnia dubia as the test organism on effluent from Hercules, Inc. This test was performed in order to evaluate the effluent from Hercules, Inc. for toxicity so that the Bowie River may be adequately protected.

Discharger:	Hercules, Inc.
Location:	West 7th Street, Hattiesburg, MS
Phone Number:	545-3450
NPDES Permit #:	MS0001830
Receiving Stream:	Bowie River
Intream Waste Concentration:	3.56%
Testing Location:	Miss. Department of Environmental Quality Office of Pollution Control Biological Services Section 1542 Old Whitfield Road Pearl, MS 39208
Test Method:	Acute Static Non-renewal.
Test Started:	03-16-94 @ 13:54
Test Ended:	03-18-94 @ 13:54
Sample Point Identification:	Effluent ditch prior to discharge.
Sample Type:	24-hour Composite.
Sample Collection Date:	03-15-94 @ 11:15
Sampling Deviations:	None.
Chain of Custody:	All chain of custody documents are on file at the MOPC Toxicity Test Laboratory.
Results:	48-Hour LC50: 100.00%

APPENDIX A. SUMMARY OF TEST CONDITIONS AND TEST ACCEPTABILITY CRITERIA FOR CERIODAPHNIA DUBIA ACUTE TOXICITY TESTS.

1. Test Type:	Static non-renewal.
2. Test Duration:	48 hours (h).
3. Temperature:	25° ± 1° C.
4. Light Quality:	Flourescent incubator illumination.
5. Light Intensity:	50-100 ft-c.
6. Photoperiod:	16-h light, 8-h dark.
7. Test Chamber Size:	30 mL.
8. Test Solution Volume:	15 mL.
9. Age of Test Organism:	<24-h.
10. # of Org. per Test Chamber:	5.
11. # of Rep. Chambers per Test Chamber:	4.
12. # of Org. per Concentration:	20.
13. Feeding:	Fed 0.1 mL YCT and **Selenastrum** prior use in test. No feeding during test.
14. Dilution Water:	Moderately hard DMW.
15. Test Concentrations:	Control and five effluent concentrations.
16. Dilution Series:	≥ 0.5 dilution series.
17. Endpoint:	Mortality.
18. Sampling and Sample Holding Requirements:	24-h composite sample or grab used within 36-h of completion of sampling period.
19. Sample Volume Required:	1 L.
20. Test Acceptability Criterion:	90% or > survival in controls.

Appendix B. Physical - Chemical Metrics and Mortality Data.

PHYSICAL-CHEMICAL DAILY DATA

Facility: Hercules, Inc.

Date: 03-16-94 to 03-18-94 Time: 13:54 Sample #: 363

Conc. %	D.O. before	D.O. after	pH before	pH after	Cond. before	Cond. after	Temp. before	Temp. after	Alk.	Hard.
Cntrl	8.0	8.2	8.0	8.1	170	176	25.6	26.0		
6.25	7.9	8.2	7.9	8.0	401	420	25.6	26.0		
12.5	7.9	8.0	7.8	8.0	545	573	25.6	26.0		
25.0	7.9	8.2	7.6	7.9	862	923	25.6	26.0		
50.0	7.5	7.4	7.5	7.9	1531	1633	25.6	26.0		
100.	7.0	8.9	7.3	7.8	2800	2960	25.6	26.0	60	50

Appendix C. Mortality Data.

MORTALITY DATA

Concentration	24-hours	48-hours
Control	0	0
6.25%	0	0
12.5%	0	0
25.0%	0	0
50.0%	0	0
100.0%	0	10

Appendix D. Spearman-Karber Method for 48 hour LC50 Determination.

FOR REFERENCE, CITE:
HAMILTON, M.A., R.C. RUSSO, AND R.V. THURSTON, 1977.
TRIMMED SPEARMAN-KARBER METHOD FOR ESTIMATING MEDIAN
LETHAL CONCENTRATIONS IN TOXICITY BIOASSAYS.
ENVIRON. SCI. TECHNOL. 11(7): 714-719;
CORRECTION 12(4):417 (1978).

Date: 03-22-94
Facility: Hercules, Inc

Sample Number: 363
Test Organism: C. dubia

Raw Data:

CONCENTRATION(%)	6.25	12.50	25.00	50.00	100.00
NUMBER EXPOSED:	20	20	20	20	20

DURATION (Hours)	LC50	LOWER 95% LIMIT	UPPER 95% LIMIT	PERCENT TRIM
48	100.00			50.00

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 427

I. GENERAL INFORMATION: Facility Name Hercules - Forrest County
County Code 001 NPDES Permit No. 01830
Discharge No. 001 Date Requested
Sample Point Identification Total treated process water
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition intermittant light rain Collected By Mike Egan
Where Taken effluent canal at flume

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	3/23/93	1155
2.	Composite	TOC	5 ml H_2SO_4	3/23/93	1155
3.	Grab	Oil & Grease/Phenol	5 ml H_2SO_4	3/23/93	1155
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.8/6.5	ME	3/22-23/
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.58 MGD	ME	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By David Singleton Date 3/24/93 Time 0830
Recorded By Sandy Hammons Date Sent to State Office 4/28/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	46.0	mg/l	DS	*3/24/93
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	29.6	mg/l	KF	4/19/93
Suspended Solids	(099000)	(X)	16.0	mg/l	DS	3/29/93
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	< 5.0	mg/l	GT	4/2/93
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.19	mg/l	KF	4/20/93
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
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		( )				

Remarks

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL

SAMPLE REQUEST FORM Lab Bench No. 429

I. GENERAL INFORMATION: Facility Name Hercules-Forrest County
County Code 0800 NPDES Permit No. 01830
Discharge No. None Date Requested
Sample Point Identification influent from river
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab ( ) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition intermittant rain Collected By Mike Egan
Where Taken river water basin near influent point

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	3/23/93	1122
2.	Composite	TOC	5 ml H_2SO_4	3/23/93	1122
3.					
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.5/6.4	ME	3/22-23/9
D.O.	(000300)	( )			
Temperature	(000010)	(X)	25/26	ME	3/22-23/9
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	None	ME	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By David Singleton Date 3/24/93 Time 0830
Recorded By Sandy Hammons Date Sent to State Office 4/28/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	5.0	mg/l	DS	3/24/93
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	1.4	mg/l	KF	4/19/93
Suspended Solids	(099000)	(X)	9.0	mg/l	DS	3/29/93
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	( )		mg/l		
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	( )		mg/l		
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
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		( )				
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		( )				
		( )				
		( )				
		( )				

Remarks Influent pumps not operated during 24 hr. sampling period-composite represents recirculated river water.

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. 427

I. GENERAL INFORMATION: Facility Name Hercules - Forrest County
County Code 001 NPDES Permit No. 01830
Discharge No. 001 Date Requested
Sample Point Identification Total treated process water
Requested By Compliance Monitoring Data To John Taylor
Type of Sample: Grab (X) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition intermittant light rain Collected By Mike Egan
Where Taken effluent canal at flume

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	3/23/93	1155
2.	Composite	TOC	5 ml H_2SO_4	3/23/93	1155
3.	Grab	Oil & Grease/Phenol	5 ml H_2SO_4	3/23/93	1155
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.8/6.5	ME	3/22-23/9
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.58 MGD	ME	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By David Singleton Date 3/24/93 Time 0830
Recorded By Sandy Hammons Date Sent to State Office 4/28/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	46.0	mg/l	DS	*3/24/93
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	29.6	mg/l	KF	4/19/93
Suspended Solids	(099000)	(X)	16.0	mg/l	DS	3/29/93
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	<5.0	mg/l	GT	4/2/93
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.19	mg/l	KF	4/20/93
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
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		( )				
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		( )				
		( )				
		( )				

Remarks

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL

SAMPLE REQUEST FORM

Lab Bench No.: _____

I. GENERAL INFORMATION: Facility Name HERCULES - FORREST COUNTY

County Code 001 NPDES Permit No. 01830

Discharge No. 001 Date Requested _____

Sample Point Identification TOTAL TREATED PROCESS WATER

Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR

Type of Sample: Grab (X) Composite (Flow) (TimeX) Other ( )

II. SAMPLE IDENTIFICATION:

Environment Condition Intermittent light rain Collected By Mike Egen

Where Taken Effluent canal at flume

	Type	Parameters	Preservative	Date	Time
1.	COMPOSITE	BOD-SS	COOL	3/23/93	11:55
2.	COMPOSITE	TOC	5 ml H_2SO_4	3/23/93	11:55
3.	GRAB	OIL & GREASE/PHENOL	5 ml H_2SO_4	3/23/93	11:55
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	( )	6.8 6.2	M Egen	3/22-23/93
D.O.	(000300)	( )			
Temperature	(000010)	( )			
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	0.59 MGD	M Egen	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By Daisy Sparks Date 3-24-93 Time 0830

Recorded By Shirley Hammons Date Sent to State Office 4/28/93

Analysis	Computer Code	Request	Result		Analyst	Date Measured
BOD_5	(000310)	(X)	46.0	mg/l	DS	*3-24-9
COD	(000340)	( )		mg/l		
TOC	(000680)	(X)	29.6	mg/l	KF	4-19-93
Suspended Solids	(099000)	(X)	16.0	mg/l	DS	3-29-9
TKN	(000625)	( )		mg/l		
Ammonia-N	(000610)	( )		mg/l		
Fecal Coliform(1)	(074055)	( )		colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )		colonies/100 ml		*
Total Phosphorus	(000665)	( )		mg/l		
Oil and Grease(1)	(000550)	(X)	<5.0	mg/l	GT	4-2-93
Oil and Grease(2)	(000550)	( )		mg/l		
Chlorides	(099016)	( )		mg/l		
Phenol	(032730)	(X)	0.19	mg/l	KF	4-20-93
Total Chromium	(001034)	( )		mg/l		
Hex. Chromium	(001032)	( )		mg/l		
Zinc	(001092)	( )		mg/l		
Copper	(001042)	( )		mg/l		
Lead	(017501)	( )		mg/l		
Cyanide	(000722)	( )		mg/l		
		( )				
		( )				
		( )				
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		( )				
		( )				
		( )				
		( )				

Remarks _____

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL

SAMPLE REQUEST FORM

Lab Bench No. 429

I. GENERAL INFORMATION: Facility Name Hercules-Forrest County

County Code 0800 NPDES Permit No. 01830

Discharge No. None Date Requested

Sample Point Identification influent from river

Requested By Compliance Monitoring Data To John Taylor

Type of Sample: Grab ( ) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:

Environment Condition intermittant rain Collected By Mike Egan

Where Taken river water basin near influent point

	Type	Parameters	Preservative	Date	Time
1.	Composite	BOD, SS	cool	3/23/93	1122
2.	Composite	TOC	5 ml H_2SO_4	3/23/93	1122
3.					
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.5/6.4	ME	3/22-23/9
D.O.	(000300)	( )			
Temperature	(000010)	(X)	25/26	ME	3/22-23/9
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	None	ME	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RO Vehicle ( ) Other ( )

V. LABORATORY: Received By David Singleton Date 3/24/93 Time 0830

Recorded By Sandy Hammons Date Sent to State Office 4/28/93

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	(X)	5.0 mg/l	DS	*3/24/93
COD	(000340)	( )	mg/l		
TOC	(000680)	(X)	1.4 mg/l	KF	4/19/93
Suspended Solids	(099000)	(X)	9.0 mg/l	DS	3/29/93
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
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Remarks Influent pumps not operated during 24 hr. sampling period-composite represents recirculated river water.

*Date of Test Initiation

BUREAU OF POLLUTION CONTROL
SAMPLE REQUEST FORM

Lab Bench No. _____

I. GENERAL INFORMATION: Facility Name HERCULES - FORREST COUNTY
County Code 0800 NPDES Permit No. 01830
Discharge No. NONE Date Requested _____
Sample Point Identification INFLUENT FROM RIVER
Requested By COMPLIANCE MONITORING Data To JOHN TAYLOR
Type of Sample: Grab ( ) Composite (Flow) (Time X) Other ( )

II. SAMPLE IDENTIFICATION:
Environment Condition Intermittent rain Collected By Mike Egan
Where Taken River water basin near influent point

	Type	Parameters	Preservative	Date	Time
1.	COMPOSITE	BOD-SS	COOL	3/23/93	11:22
2.	COMPOSITE	TOC	5 ml H_2SO_4	3/23/93	11:22
3.					
4.					
5.					

III. FIELD:

Analysis	Computer Code	Request	Results	Analyst	Date
pH	(000400)	(X)	6.5 6.4	M Egan	3/22-23/9
D.O.	(000300)	( )			
Temperature	(000010)	(X)	25 26	M Egan	3/22-23/9
Residual Chlorine	(050060)	( )			
Flow	(074060)	(X)	none	M Egan	3/23/93

IV. TRANSPORTATION OF SAMPLE: Bus ( ) RQ Vehicle ( ) Other ( )

V. LABORATORY: Received By Dan Smith Date 3-24-93 Time 0830
Recorded By Judy Hammons Date Sent to State Office 4/28/93

Analysis	Computer Code	Request	Result	Analyst	Date Measured
BOD_5	(000310)	(X)	5.0 mg/l	DS	*3-24-93
COD	(000340)	( )	mg/l		
TOC	(000680)	(X)	1.4 mg/l	KF	4/9-93
Suspended Solids	(099000)	(X)	9.0 mg/l	DS	3-29-93
TKN	(000625)	( )	mg/l		
Ammonia-N	(000610)	( )	mg/l		
Fecal Coliform(1)	(074055)	( )	colonies/100 ml		*
Fecal Coliform(2)	(074055)	( )	colonies/100 ml		*
Total Phosphorus	(000665)	( )	mg/l		
Oil and Grease(1)	(000550)	( )	mg/l		
Oil and Grease(2)	(000550)	( )	mg/l		
Chlorides	(099016)	( )	mg/l		
Phenol	(032730)	( )	mg/l		
Total Chromium	(001034)	( )	mg/l		
Hex. Chromium	(001032)	( )	mg/l		
Zinc	(001092)	( )	mg/l		
Copper	(001042)	( )	mg/l		
Lead	(017501)	( )	mg/l		
Cyanide	(000722)	( )	mg/l		
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			
		( )			

Remarks Influent pumps not operated during 24 hr sampling period - Composite represents recirculated river water
*Date of Test Initiation

United States Environmental Protection Agency
Washington, D. C. 20460

EPA NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Math In

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Sched
1 N 2 5	3 MS0001830 11	12 96 10 23 17	18 5 M	19 5	20 2	N 0 4

Remarks

21

Reserved	Facility Evaluation Rating	BI	QA	Reserved
67 69	70	71 N	72 N	73 74 75 80

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time / Exit Time/Date	Permit Effective Date / Permit Expiration Date
Hercules, Inc. Hattiesburg MS 39401 Forest County	Entry Time ☐ AM ☒ PM 12:15 Exit Time/Date 10-23-96	10-22-91 10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Mr. Charles Jordan	Environmental Coordinator	(601) 545-3450

Name, Address of Responsible Official	Title	Phone No.	Contacted
Mr. Gerald Burch Hercules, Inc. P. O. Box 1937 Hattiesburg MS 39401-1937	Plant Manager	(601) 545-3450	☐ Yes ☒ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

N	Permit	N	Flow Measurement	N	Pretreatment	S	Operations & Maintenance
N	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
S	Facility Site Review	S	Effluent/Receiving Waters	N	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

Parameter	Permit Limit (daily max.) mg/L	Permit Limit (daily max.) lbs/day	Sampling Results (daily max.) mg/L	Sampling Results (daily max.) lbs/day
outfall 002				
Temp	41°C		26-27°C	
pH	6.0 min - 9.0 max.		6.7 5.0.	
flow	report		1.7912 mgD	

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
Errol White	OPC /SRO	11-18-96

Signature of Reviewer	Agency/Office	Date
Becky Prueler	OPC 961-5580	2-4-97

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☒ Compliance

EPA Form 3560-3 (Rev. 3-85) Previous editions are obsolete.

United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Form Approved.
OMB No. 2040-0057
Approval expires 8-31-98

Section A: National Data System Coding (i.e., PCS)

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type
1 [ ] 2 [5]	3 [M][S][0][0][0][1][8][3][0] 11	12 [9][6][0][3][0][5] 17	18 [C]	19 [R]	20 [2]

Remarks
21 [ ] 66

Inspection Work Days	Facility Self-Monitoring Evaluation Rating	B1	QA	Reserved
67 [ ] 69	70 [ ]	71 [ ]	72 [ ]	73 [ ] 74 75 [ ] 80

Section B: Facility Data

Name and Location of Facility Inspected *(For industrial users discharging to POTW, also include POTW name and NPDES permit number)*

Hercules Incorporated
W. 7th Street
Hattiesburg, MS 39401

Entry Time/Date	Permit Effective Date
8:30 am	10/22/91
Exit Time/Date	**Permit Expiration Date**
11:30 am	10/21/96

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)

Mr. Charles Jordon
Environmental Coordinator
(601) 545-3450

Other Facility Data

Name, Address of Responsible Official/Title/Phone and Fax Number

Mr. Gerald D. Burch, Plant Manager

Contacted ☐ Yes ☒ No

Section C: Areas Evaluated During Inspection *(Check only those areas evaluated)*

S	Permit	S	Flow Measurement	S	Operations & Maintenance	N	CSO/SSO (Sewer Overflow)
S	Records/Reports	S	Self-Monitoring Program	S	Sludge Handling/Disposal	N	Pollution Prevention
S	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
S	Effluent/Receiving Waters	S	Laboratory	N	Storm Water	N	Other:

Section D: Summary of Findings/Comments *(Attach additional sheets of narrative and checklists as necessary)*

See attached Inspection Report.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Phone and Fax Numbers	Date
Jane Stone Spann		3/20/96
Jane Stone Spann	EPA/Region IV (404) 347-4793 x4251	
Signature of Management Q A Reviewer	**Agency/Office/Phone and Fax Numbers**	**Date**
David Allen	same as above	3/26/96

EPA Form 3560-3 (Rev 9-94) Previous editions are obsolete.

Hercules Incorporated
Hattiesburg, Mississippi
NPDES Permit No. MS0001830
Compliance Evaluation Inspection
March 5, 1996

On March 5, 1996, Ms. Jane Spann of the United States Environmental Protection Agency, Region 4 conducted a compliance evaluation inspection at the Hercules Incorporated, Hattiesburg, Mississippi, wastewater treatment facility (the facility). Mr. Charles Jordon, Environmental Coordinator was present during the inspection.

The Hercules plant manufactures naval stores products, modified resins and resin solutions and manufactures paper chemicals, polyamides, ketene dimer emulsions, rosin emulsions, wax emulsions and defoamers. The plant used to manufacture rosin along with gum and wood chemicals. They currently import rosin. Paper chemicals manufacturing is currently their primary business.

FACILITY SITE REVIEW

The facility consists of pH adjustment, which is done in the impounding basin, oil skimming, dissolved air flotation, neutralization in an in-line mixer, kinematic, a 5 million gallon equalization holding tank and three (3) twelve (12) foot diameter carbon absorption towers. Their process wastewater goes out outfall 001 where flow, BOD, TSS, TOC, Oil and Grease and Phenol are measured. Then the flow mixes with non-contact cooling water and goes to outfall 002 where flow, temperature and pH are measured. The bottoms from the dissolved air flotation units go back into the impounding basin. Sludge is removed and stored onsite. A facility representative stated that the sludge consists of approximately 20% solids 1/2 of which is dirt and grit, the other 1/2 of which is rosin, wax, and organics. The carbon from the carbon adsorption towers is regenerated, as necessary.

United States Environmental Protection Agency
Washington, D. C. 20460

EPA NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Math Insp Sched'd
1 N 2 5	3 MS0000830 11	12 95 06 22 17	18 C	19 S	20 2	MAY

Remarks: 21 ____ 66

Reserved	Facility Evaluation Rating	BI	QA	Reserved	
67 ___ 69	70 B	71 M	72 M	73 ___ 74	75 ___ 80

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time ☐ AM ☒ PM	Permit Effective Date
Hercules Inc. Hattiesburg, MS	1:00	10-22-91
	Exit Time/Date	**Permit Expiration Date**
	3:00 p.m.	10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Charles Jordan	Environmental Supervisor	545-3450

Name, Address of Responsible Official	Title	
P. W. Kirkendall Hercules Inc. P.O. Box 1937 Hattiesburg, MS 39401-1937	Plant Manager	
	Phone No. 545-3450	Contacted ☐ Yes ☒ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

S	Permit	S	Flow Measurement	N	Pretreatment	S	Operations & Maintenance
M	Records/Reports	M	Laboratory	N	Compliance Schedules	N	Sludge Disposal
S	Facility Site Review	N	Effluent/Receiving Waters	S	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments *(Attach additional sheets if necessary)*

The only deficiency noted during my inspection was that thermometers for monitoring the temperatures of the effluent, composite samplers, and sample holding refrigerators were not be calibrated regularly. An ASTM standard thermometer should be used for these calibrations. For further details, see attached report.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
Jerry Beasley	MSDEQ/OPC/961-5087	6-22-95
Signature of Reviewer	**Agency/Office**	**Date**
Jerry Beasley	"	6-30-95

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☐ Compliance

EPA Form 3560-3 (Rev. 3-85) Previous editions are obsolete.

June 22, 1995

NPDES COMPLIANCE INSPECTION REPORT

NPDES Permit No. MS0001830

Inspector: Jerry Beasley

PERMITTEE:

Hercules Inc.

MAILING ADDRESS:

P.O. Box 1937

Hattiesburg, MS 39401-1937

BRIEF FACILITY DESCRIPTION:

manufacture of modified resins, rosin solutions, and paper chemicals

Contact: Charles Jordan

I. PERMIT CHECKLIST

(YES) NO N/A	1. Correct name and mailing address of permittee.
(YES) NO N/A	2. Facility is as described in permit.
YES NO (N/A)	3. Notification has been given to EPA/State of new, different, increased discharges.
YES NO (N/A)	4. Accurate records of influent volume are maintained, when appropriate.
(YES) NO N/A	5. Number and location of discharge points are as described in the permit.
(YES) NO N/A	6. Name and location of receiving waters are correct.
(YES) NO N/A	7. All discharges are permitted.

II. RECORDKEEPING/REPORTING CHECKLIST

YES NO N/A 1. All required information is available, complete, and current.

YES NO N/A 2. Information is maintained for required period.

YES NO N/A 3. Analytical results are consistent with the data reported on the DMR's.

4. Sampling and Analysis Data are adequate and include:

YES NO N/A a. Dates, times, location of sampling
YES NO N/A b. Name of individual performing sampling
YES NO N/A c. Analytical methods and techniques
YES NO N/A d. Results of analysis
YES NO N/A e. Dates of analysis
YES NO N/A f. Name of person performing analysis
YES NO N/A g. Instantaneous flow at grab sample stations

5. Monitoring records are adequate and include:

YES NO N/A a. Flow, pH, D.O., etc. as required by permit
YES NO N/A b. Monitoring charts

YES NO N/A 6. Laboratory equipment calibration and maintenance records are adequate.

7. Plant Records are adequate and include:

YES NO N/A a. O&M Manual
YES NO N/A b. "As-built" engineering drawings
YES NO N/A c. Schedules and dates of equipment maintenance and repairs including cost.
YES NO N/A d. Equipment supplies manual
YES NO N/A e. Equipment data cards

III. FACILITY SITE REVIEW CHECKLIST

YES NO N/A 1. Standby power or other equivalent provision is provided.

YES NO N/A 2. Adequate alarm system for power or equipment failures is available.

YES NO N/A 3. All treatment units, other than back-up units, are in service.

YES NO N/A 4. Procedures for facility operation and maintenance exist.

YES NO N/A 5. Organization plan (chart) for operation and maintenance is provided.

YES NO N/A 6. Operating schedules are established.

YES NO N/A 7. Emergency plan for treatment control is established.

8. Operating management control documents are current and include:

YES NO N/A a. Operating report
YES NO N/A b. Work schedule
YES NO N/A c. Activity report (time cards)

YES NO N/A 9. Adequate number of qualified operators are on-hand.

YES NO N/A 10. Established procedures are available for training new operators.

YES NO N/A 11. Adequate spare parts and supplies inventory and major equipment specifications are maintained.

YES NO N/A 12. Instruction files are kept for operation and maintenance of each item of major equipment.

YES NO N/A 13. Regulatory agency was notified of by-passing. (Dates_____)

YES NO N/A 14. Hydraulic and/or organic overloads are experienced. Reasons for overloads _____

_____

_____

_____

YES NO N/A 15. Dated tags show out of service equipment.

YES NO N/A 16. Routine and preventive maintenance are scheduled/performed on time.

IV. FLOW MEASUREMENT CHECKLIST

A. General

YES NO N/A 1. Primary flow measuring device is properly installed and maintained.

YES NO N/A 2. Flow records are properly kept.

YES NO N/A 3. Sharp drops or increases in flow values are accounted for.

YES NO N/A 4. Actual flow discharged is measured.

YES NO N/A 5. Influent flow is measured before all return lines.

YES NO N/A 6. Effluent flow is measured after all return lines.

YES NO N/A 7. Secondary instruments (totalizers, recorders, etc.) are properly operated and maintained.

YES NO N/A 8. Spare parts are stocked.

B. Flumes

YES NO N/A 1. Flow entering flume appears reasonable well distributed across the channel and free of turbulence, boils, or other distortions.

YES NO N/A 2. Cross-sectional velocities at entrance are relatively uniform.

YES NO N/A 3. Flume is clean and free of debris or deposits.

YES NO N/A 4. All dimensions of flume are accurate.

YES NO N/A 5. Side walls of flume are vertical and smooth.

YES NO N/A 6. Sides of flume throat are vertical and parallel.

YES NO N/A 7. Flume head is being measured at proper location.

YES NO N/A 8. Measurement of flume head is zeroed to flume crest.

YES NO N/A 9. Flume is of proper size to measure range of existing flow.

YES NO N/A 10. Flume is operating under free-flow conditions over existing range of flows.

C. Wiers N/A

1. Type of weir used: _____

YES NO N/A 2. The weir is exactly level.

YES NO N/A 3. The weir plate is plumb and its top edges are sharp and clean.

YES NO N/A 4. There is free access for air below the nappe of the weir.

YES NO N/A 5. Upstream channel of weir is straight for at least four times the depth of water level, and free from disturbing influences.

YES NO N/A 6. The stilling basin of the weir is of sufficient size and clear of debris.

YES NO N/A 7. Head measurements are properly made by facility personnel.

YES NO N/A 8. Proper flow tables are used by facility personnel.

D. Flowmeter

1. Type of flowmeter used: _____

2. The most common problems experienced with the flowmeter: _____

3. Measured Wastewater flow: _____ mgd; Recorded flow: _____ mgd; Error _____ %

4. Design flow: _____ mgd.

(YES) NO N/A 5. Flow totalizer is properly calibrated.

6. Frequency of routine inspection by proper operator: _____ /day.

7. Frequency of maintenance inspections by plant personnel: _____ /year.

8. Frequency of flowmeter calibration: _____ /month.

(YES) NO N/A 9. Flowmeter adequate to handle expected ranges of flow rates.

YES NO (N/A) 10. Venturi meter is properly installed and calibrated.

YES NO (N/A) 11. Electromagnetic flowmeter is properly calibrated.

V. LABORATORY CHECKLIST

A. General

YES NO N/A 1. Written laboratory quality assurance manual is available.

B. Laboratory Procedures

YES NO N/A 1. EPA approved analytical testing procedures are used.

YES NO N/A 2. If alternate analytical procedures are used, proper approval has been obtained.

YES NO N/A 3. Calibration and maintenance of instruments and equipment is satisfactory.

YES NO N/A 4. Quality control procedures are used.

YES NO N/A 5. Quality control procedures are adequate.

6. Duplicate samples are analyzed once/month % of time.

7. Spiked samples are used 4 times/month % of time.

YES NO N/A 8. Commercial laboratory is used

Name Culpepper Testing Labs

Address Hattiesburg, MS

Contact _____

Phone _____

C. Laboratory Facilities and Equipment

YES NO N/A 1. Proper grade distilled water is available for specific analysis.

YES NO N/A 2. Dry, uncontaminated compressed air is available.

YES NO N/A 3. Fume hood has enough ventilation capacity.

YES NO N/A 4. The laboratory has sufficient lighting.

YES NO N/A 5. Adequate electrical sources are available.

YES NO N/A 6. Instruments/equipment are in good condition.

YES NO N/A 7. Written requirements for daily operation of instruments are available.

YES NO N/A 8. Standards are available to perform daily check procedure.

YES NO N/A 9. Written trouble-shooting procedures for instruments are available.

YES NO N/A 10. Schedule for required maintenance exists.

YES NO N/A 11. Proper volumetric glassware is used.

YES NO N/A 12. Glassware is properly cleaned.

YES NO N/A 13. Standard reagents and solvents are properly stored.

YES NO N/A 14. Working standards are frequently checked.

YES NO N/A 15. Standards are discarded after recommended shelf life has expired.

YES NO N/A 16. Background reagents and solvents run with every series of samples.

YES NO N/A 17. Written procedures exist for cleanup, hazard response methods, and applications of correction methods for reagents and solvents.

YES NO N/A 18. Gas cylinders are replaced at 100-200 psi.

VI. EFFLUENT/RECEIVING WATER CHECKLIST

(See Operation and Maintenance Checklist, page 12)

VII. COMPLIANCE SCHEDULE STATUS REVIEW N/A

YES NO N/A 1. The permittee has obtained necessary approvals to begin construction.

YES NO N/A 2. Financing arrangements are complete.

YES NO N/A 3. Contracts for engineering services have been executed.

YES NO N/A 4. Design plans and specifications have been completed.

YES NO N/A 5. Construction has begun.

YES NO N/A 6. Construction is on schedule.

YES NO N/A 7. Equipment acquisition is on schedule.

YES NO N/A 8. Construction has been completed.

YES NO N/A 9. Start-up has begun.

YES NO N/A 10. The permittee has requested an extension of time.

YES NO N/A 11. The permittee has met compliance schedule.

VIII. SELF-MONITORING PROGRAM

A. General

YES NO N/A 1. Samples are taken at sites specified in permit.

YES NO N/A 2. Locations are adequate for representative samples.

YES NO N/A 3. Flow proportioned samples are obtained where required by permit.

YES NO N/A 4. Sampling and analysis completed on parameters specified by permit.

YES NO N/A 5. Sampling and analysis done in frequency specified by permit.

YES NO N/A 6. Permittee is using method of sample collection required by permit.

7. Sample collection procedures are adequate:

YES NO N/A a. Samples refrigerated during compositing

YES NO N/A b. Proper preservation techniques used

YES NO N/A c. Containers and sample holding times before analyses conform with 40 CFR 136.3

YES NO N/A 8. Monitoring and analyses are performed more often then required by permit. If so, results reported in permittee's self-monitoring report.

B. BOD_5 Test Evaluation

1. D.O. method used;
   a. Winkler Titration _____
   b. D.O. Probe ✓
   c. Other _____

2. If probe list calibration method; ✓
   a. Air _____
   b. Saturated Water _____
   c. Winkler _____

YES NO N/A 3. Holding time; < 48 hrs

YES NO N/A 4. Preservation; 4 degree C

YES NO N/A 5. Incubation; 20 degree C

YES NO N/A 6. Sample D.O. depletions; between 2 mg/l and 6 mg/l

YES NO N/A 7. Blank D.O. variation; < 0.2 mg/l

8. If effluent is chlorinated:

YES NO N/A a. Sample dechlorinated. How? _____

YES NO N/A b. Sample seeded.

C. Total Suspended Solids Test Evaluation

YES NO N/A 1. Holding time; < 7 days

YES NO N/A 2. Oven temperature; 103 degree - 105 degree C

YES NO N/A 3. Balance Calibrated. Frequency? Monthly

YES NO N/A 4. Balance Serviced at least yearly.

D. Ammonia Nitrogen Test Evaluation N/A

1. Method used; _____

YES NO N/A 2. Holding time; < 28 days

YES NO N/A 3. Preservative; 4 degree C, H_2SO_4 to pH < 2

E. Fecal Coliform Test Evaluation N/A

1. Method used;
   a. MPN _____
   b. MF _____
   c. Other _____

YES NO N/A 2. Holding time; < 6 hrs

YES NO N/A 3. Preservative; Sterile container, 4 degree C

YES NO N/A 4. 0.008% $Na_2S_2O_3$[5] added if sample chlorinated.

YES NO N/A 5. Water bath temperature; 44.5 degree C

F. Dissolved Oxygen Test Evaluation

1. Method used;
   a. Winkler Titration _____
   b. D.O Probe ✓
   c. Other _____

2. Calibration (See B. BOD_5 Test Evaluation #2)

G. pH Test Evaluation

(YES) NO N/A 1. EPA approved method used.
If not, method used: _____

(YES) NO N/A 2. Holding time; analyzed immediately

H. Aeration Tank Settleability Test Evaluation N/A

YES NO N/A 1. 1000 ml graduated cylinders used

YES NO N/A 2. Time of test; 30 minutes

I. Residual Chlorine Test Evaluation N/A

YES NO N/A 1. EPA approved method used.
If not, method used: _____

YES NO N/A 2. Holding time; analyzed immediately

IX. OPERATION AND MAINTENANCE INSPECTION CHECKLIST N/A

(Attach Reconnaisance Inspection)

X. SLUDGE DISPOSAL N/A

1. Amount of sludge wasted daily from clarifier:
   a. _____ gallons/day
   b. _____ lbs/day (dry weight)

2. Check the method(s) utilizing for sludge handling:
   a. aerobic digestion ( )
   b. anaerobid digestion ( )
   c. filter press ( )
   d. drying bed ( )
   e. sludge lagoon ( )
   f. other _____ ( )

3. If sludge is hauled offsite for ultimate disposal, what is the quantity and freguency of hauling?
   a. Quantity: _____ tons
   b. Frequency: ( ) daily ( ) monthly
      ( ) weekly ( ) annually
   c. Ultimate Disposal Site:
      Name _____

      Location _____

YES NO N/A

4. If sludge is stored in an on-site lagoon or holding pond, has it ever been dredged or otherwise cleaned out? If so, when and where was the sludge disposed?
   When: _____

   Where: _____

United States Environmental Protection Agency
Washington, D. C. 20460

EPA NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Mnth Insp Sched'd
1 N 2 5	3 MS 0 0 0 1 8 3 0 11	12 9 4 / / / 4 17	18 S M	19 S	20 2	N O V

Remarks

21 ... 66

Reserved	Facility Evaluation Rating	BI	QA	Reserved	
67 ... 69	70 4	71 N	72 N	73 ... 74	75 ... 80

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time ☐ AM ☐ PM	Permit Effective Date
Hercules Inc Hattiesburg, MS	Exit Time/Date	10-22-91 Permit Expiration Date 10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Charles Jordan	Environmental Supervisor	545-3450

Name, Address of Responsible Official	Title	
Mr. P.W. Kirkendall Hercules Inc. P.O. Box 1937 Hattiesburg, MS 39401-1937	Plant Manager Phone No. 545-3450	Contacted ☐ Yes ☒ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

N	Permit	N	Flow Measurement	N	Pretreatment	N	Operations & Maintenance
N	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
N	Facility Site Review	S	Effluent/Receiving Waters	N	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments *(Attach additional sheets if necessary)*

During our sampling, the permittee was in compliance with its effluent limitations

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
Errol White	MSDEQ/OPC-SRO/875-2893	11-15-94
Signature of Reviewer Gary Beatty	Agency/Office MSDEQ/OPC	Date 6-30-9

Regulatory Office Use Only

Action Taken	Date	Compliance Sta
		☐ Noncor ☐ Com

EPA Form 3560-3 (Rev. 3-85) Previous editions are obsolete.

EPA NPDES Compliance Inspection Report

United States Environmental Protection Agency
Washington, D. C. 20460

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-95

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Mnth Insp Sched'd
1 N	2 5 3 MS0000138 11	12 940623 17	18 C	19 S	20 2	D E K

Remarks

21

Reserved	Facility Evaluation Rating	BI	QA	Reserved	
67 69	70 4	71 M	72 N	73 74	75 80

66

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time ☐ AM ☒ PM	Permit Effective Date
Hercules Inc. West 7th Street Hattiesburg, MS	1:00	10-22-91
	Exit Time/Date: 2:30 p.m.	Permit Expiration Date: 10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Charles Jordan	Environmental Supervisor	545-3450

Name, Address of Responsible Official	Title	Contacted
P.W. Kirkendall Hercules, Inc P.O. Box 1937 Hattiesburg, MS 39401-1937	Plant Manager	☐ Yes ☒ No
	Phone No. 545-3450	

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

S	Permit	S	Flow Measurement	N	Pretreatment	S	Operations & Maintenance
S	Records/Reports	S	Laboratory	N	Compliance Schedules	N	Sludge Disposal
S	Facility Site Review	N	Effluent/Receiving Waters	S	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

No deficiencies were noted during the inspection.

For further details, see enclosed report.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
Jerry Beasley	MDEQ/OPC/961-5087	6-23-94

Signature of Reviewer	Agency/Office	Date
Jerry Beasley	"	7-13-94

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☐ Compliance

June 23, 1994

NPDES COMPLIANCE INSPECTION REPORT

NPDES Permit No MSCC0380

Inspector: Jerry Beasley

PERMITTEE:

Hercules, Inc.

MAILING ADDRESS:

P.O. Box 1937

Hattiesburg, MS 39401-1937

BRIEF FACILITY DESCRIPTION:

manufacture of modified resins, resin solutions, and paper chemicals

Contact: Charles Jordan

I. PERMIT CHECKLIST

(YES)	NO	N/A	1. Correct name and mailing address of permittee.
(YES)	NO	N/A	2. Facility is as described in permit.
YES	NO	(N/A)	3. Notification has been given to EPA/State of new, different, increased discharges.
YES	NO	(N/A)	4. Accurate records of influent volume are maintained, when appropriate.
(YES)	NO	N/A	5. Number and location of discharge points are as described in the permit.
(YES)	NO	N/A	6. Name and location of receiving waters are correct.
(YES)	NO	N/A	7. All discharges are permitted.

YES NO N/A 4. Procedures for facility operation and maintenance exist.

YES NO N/A 5. Organization plan (chart) for operation and maintenance is provided.

YES NO N/A 6. Operating schedules are established.

YES NO N/A 7. Emergency plan for treatment control is established.

8. Operating management control documents are current and include:

YES NO N/A a. Operating report
YES NO N/A b. Work schedule
YES NO N/A c. Activity report (time cards)

YES NO N/A 9. Adequate number of qualified operators are on-hand.

YES NO N/A 10. Established procedures are available for training new operators.

YES NO N/A 11. Adequate spare parts and supplies inventory and major equipment specifications are maintained.

YES NO N/A 12. Instruction files are kept for operation and maintenance of each item of major equipment.

YES NO N/A 13. Regulatory agency was notified of by-passing. (Dates_____)

YES NO N/A 14. Hydraulic and/or organic overloads are experienced. Reasons for overloads _____

_____

_____

_____

YES NO N/A 15. Dated tags show out of service equipment.

YES NO N/A 16. Routine and preventive maintenance are scheduled/performed on time.

C. Wiers N/A

1. Type of weir used: _____

YES NO N/A 2. The weir is exactly level.

YES NO N/A 3. The weir plate is plumb and its top edges are sharp and clean.

YES NO N/A 4. There is free access for air below the nappe of the weir.

YES NO N/A 5. Upstream channel of weir is straight for at least four times the depth of water level, and free from disturbing influences.

YES NO N/A 6. The stilling basin of the weir is of sufficient size and clear of debris.

YES NO N/A 7. Head measurements are properly made by facility personnel.

YES NO N/A 8. Proper flow tables are used by facility personnel.

D. Flowmeter

1. Type of flowmeter used: _____

2. The most common problems experienced with the flowmeter: _____

3. Measured Wastewater flow: _____ mgd; Recorded flow: _____ mgd; Error _____ %

4. Design flow: _____ mgd.

(YES) NO N/A 5. Flow totalizer is properly calibrated.

6. Frequency of routine inspection by proper operator: _____ /day.

7. Frequency of maintenance inspections by plant personnel: _____ /year.

8. Frequency of flowmeter calibration: _____ /month.

(YES) NO N/A 9. Flowmeter adequate to handle expected ranges of flow rates.

YES NO (N/A) 10. Venturi meter is properly installed and calibrated.

YES NO (N/A) 11. Electromagnetic flowmeter is properly calibrated.

YES NO N/A 6. Instruments/equipment are in good condition.

YES NO N/A 7. Written requirements for daily operation of instruments are available.

YES NO N/A 8. Standards are available to perform daily check procedure.

YES NO N/A 9. Written trouble-shooting procedures for instruments are available.

YES NO N/A 10. Schedule for required maintenance exists.

YES NO N/A 11. Proper volumetric glassware is used.

YES NO N/A 12. Glassware is properly cleaned.

YES NO N/A 13. Standard reagents and solvents are properly stored.

YES NO N/A 14. Working standards are frequently checked.

YES NO N/A 15. Standards are discarded after recommended shelf life has expired.

YES NO N/A 16. Background reagents and solvents run with every series of samples.

YES NO N/A 17. Written procedures exist for cleanup, hazard response methods, and applications of correction methods for reagents and solvents.

YES NO N/A 18. Gas cylinders are replaced at 100-200 psi.

VI. EFFLUENT/RECEIVING WATER CHECKLIST

(See Operation and Maintenance Checklist, page 12)

VII. COMPLIANCE SCHEDULE STATUS REVIEW N/A

YES NO N/A 1. The permittee has obtained necessary approvals to begin construction.

YES NO N/A 2. Financing arrangements are complete.

YES NO N/A 3. Contracts for engineering services have been executed.

B. BOD_5 Test Evaluation

1. D.O. method used;
   a. Winkler Titration _____
   b. D.O. Probe ✓
   c. Other _____

2. If probe list calibration method;
   a. Air ✓
   b. Saturated Water _____
   c. Winkler _____

(YES) NO N/A 3. Holding time; < 48 hrs

(YES) NO N/A 4. Preservation; 4 degree C

(YES) NO N/A 5. Incubation; 20 degree C

(YES) NO N/A 6. Sample D.O. depletions; between 2 mg/l and 6 mg/l

(YES) NO N/A 7. Blank D.O. variation; < 0.2 mg/l

8. If effluent is chlorinated:
   YES NO N/A a. Sample dechlorinated. How? _____
   YES NO N/A b. Sample seeded.

C. Total Suspended Solids Test Evaluation

(YES) NO N/A 1. Holding time; < 7 days

(YES) NO N/A 2. Oven temperature; 103 degree - 105 degree C

(YES) NO N/A 3. Balance Calibrated. Frequency? Monthly

(YES) NO N/A 4. Balance Serviced at least yearly.

D. Ammonia Nitrogen Test Evaluation N/A

1. Method used; _____

YES NO N/A 2. Holding time; < 28 days

YES NO N/A 3. Preservative; 4 degree C, H_2SO_4 to pH < 2

E. Fecal Coliform Test Evaluation N/A

1. Method used;
   a. MPN _____
   b. MF _____
   c. Other _____

IX. OPERATION AND MAINTENANCE INSPECTION CHECKLIST N/A

(Attach Reconnaisance Inspection)

EPA

United States Environmental Protection Agency
Washington, D.C. 20460

NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A. National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Sched'd
N	MS0001830	940315	BA	S	2	MAR

Remarks

Reserved	Facility Evaluation Rating	BI	QA	Reserved	
	N	D	N		

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time / Exit Time/Date	Permit Effective Date / Permit Expiration Date
HERCULES, INC. WEST 7TH STREET HATTIESBURG, MISSISSIPPI (FORREST COUNTY)	Entry Time: ☒ AM ☐ PM ~10:45 Exit Time/Date: ~11:30 A.M. / 03-15-94	Permit Effective Date: 08-22-91 Permit Expiration Date: 08-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
CHARLES JORDAN	ENVIRONMENTAL SUPERVISOR	601-545-3450

Name, Address of Responsible Official	Title / Phone No.	Contacted
P.W. KIRKENDALL P.O. Box 1937 HATTIESBURG, MS 39401-1937	Title: PLANT MANAGER Phone No.: 601-545-3450	☐ Yes ☐ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

N	Permit	N	Flow Measurement	N	Pretreatment	N	Operations & Maintenance
N	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
N	Facility Site Review	S	Effluent/Receiving Waters	N	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

RESULTS OF THE ACUTE TOXICITY TEST PERFORMED OF SAMPLES COLLECTED FROM THE FINAL EFFLUENT FOUND THE 48 HOUR LC50 WAS 100% AND CONCLUDED THAT IT IS NOT EXPECTED THAT ORGANISMS AS SENSITIVE AS CERIODAPHNIA DUBIA WOULD BE ADVERSELY AFFECTED INSTREAM BY THE DISCHARGE OF EFFLUENT FROM OUTFALL 001 AT HERCULES, INC.

SEE ATTACHED TOXICITY TEST REPORT AND LABORATORY CHEMICAL SPECIFIC ANALYTICAL RESULTS FOR FURTHER REVIEW.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
ERROL WHITE	MDPC/SRO-OCEAN SPRINGS, MS/601-875-2893	03-14,15-94

Signature of Reviewer	Agency/Office	Date
C. Larry Hamil	MS DEQ/OPC-SWD-NPDES SECTION, JACKSON	05-02-94

Regulatory Office Use Only

Action Taken	Date	Compliance Status
REPORT TRANSMITTED TO PERMITTEE.	05-02-94	☐ Noncompliance ☐ Compliance

A

United States Environmental Protection Agency
Washington, D. C. 20460

EPA NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-88

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Insp Sched'd
1 N	2 5 3 MS0001830 11	12 93 10 26 17	18 S N	19 S	20 2	21 0 C T

Remarks

Reserved	Facility Evaluation Rating	BI	OA	Reserved
67 69	70	71 N	72 N	73 74 75 80

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time ☐ AM ☐ PM	Permit Effective Date
Hercules, Inc. Hattiesburg, Ms	10-26-93	10-22-91
	Exit Time/Date	**Permit Expiration Date**
	10-27-93	10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Charles Jordan	Environmental Supervisor	545 3450

Name, Address of Responsible Official	Title	Contacted
P. W. Kirkendall P.O. Box 1937 Hattiesburg, Ms 39401	Plant Manager Phone No. 545-3450	☐ Yes ☐ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

N	Permit	S	Flow Measurement	N	Pretreatment	N	Operations & Maintenance
N	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
N	Facility Site Review	S	Effluent/Receiving Waters	N	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

All Sample Results were within the Permit Limits

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
Errol White Robert McCrory	MS DEQ/SRO-Pollution Control	12-14-93
Signature of Reviewer	**Agency/Office**	**Date**
John C. Taylor	MS DEQ/Pollution Control	12-14-93

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☑ Compliance

EPA Form 3560-3 (Rev. 3-85) Previous editions are obsolete.

EPA NPDES Compliance Inspection Report

Environmental Protection Agency
Washington, D. C. 20460

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Sched'd
1 N	2 5 3 MS0001830 11	12 93 09 21 17	18 S	19 S	20 2	S 21 93

Remarks

Reserved	Facility Evaluation Rating	BI	QA	Reserved
67 69	70	71 N	72 N	73 74 75 80

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time ☐ AM ☐ PM	Permit Effective Date
Hercules, Inc. Hattiesburg, Ms	9-21-93	10-22-91
	Exit Time/Date: 9-22-93	Permit Expiration Date: 10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Charles Jordan	Environmental Supervisor	545-3450

Name, Address of Responsible Official	Title	Phone No.	Contacted
Preston Kirkendall P. O. Box 1937 Hattiesburg, Ms 39401	Plant Manager	545-3450	☐ Yes ☐ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

S	Permit	S	Flow Measurement	N	Pretreatment	S	Operations & Maintenance
S	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
S	Facility Site Review	S	Effluent/Receiving Waters	S	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments *(Attach additional sheets if necessary)*

(1) All pertinent records were available for review and were found to be in good order.

(2) The compliance sampling results indicated that the effluent was in compliance with the permit limitations. Flow was about 0.8 mgd.

(3) The facility site review indicated that the berm around the Lift Station for the wastewater was built up to hold more water during storm events.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
Mike Egan	MsDEQ-SRO/Pollution Control	10/12/93

Signature of Reviewer	Agency/Office	Date
John C. Taylor	MsDEQ/Pollution Control	10/12/93

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☑ Compliance

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EPA NPDES Compliance Inspection Report

United States Environmental Protection Agency
Washington, D. C. 20460

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Ninth Insp Sched'd
N	MS0001830	930707	S	S	2	

Remarks

Reserved	Facility Evaluation Rating	BI	QA	Reserved
		N	N	

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time ☐ AM ☐ PM	Permit Effective Date
Hercules, Inc. Hattiesburg, MS 39401	7-7-93	10-22-91
	Exit Time/Date	**Permit Expiration Date**
	7-7-93	10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Charles Jordan	Environmental Supervisor	545 3450

Name, Address of Responsible Official	Title	
P.W. Kirkendall P.O. Box 1937 Hattiesburg, MS 39401	Plant Manager	
	Phone No. 545 3450	Contacted ☐ Yes ☐ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

N	Permit	S	Flow Measurement	N	Pretreatment	N	Operations & Maintenance
N	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
N	Facility Site Review	S	Effluent/Receiving Waters	N	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

001/ Flow = 0.04 mgd

All sample results were within the permit limits.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
Jimmy Thompson	MS DEQ - SRO/Pollution Control/875-2893	9/20/93
Signature of Reviewer	**Agency/Office**	**Date**
John C. Taylor	MS DEQ/Pollution Control	9/20/93

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☑ Compliance

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United States Environmental Protection Agency
Washington, D.C. 20460

EPA NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

| Transaction Code | NPDES | yr/mo/day | Inspection Type | Inspector | Fac Type | Remarks | Reserved | Facility Evaluation Rating | BI | QA | Reserved | Reserved | Reserved

NPDES Compliance Inspection Report

States Environmental Protection Agency
Washington, D. C. 20460

EPA

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Math Insp Sched'd

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type
1 N	2 5 3 MS0001830 11	12 9 3 0 3 2 3 17	18 S M	19 S	20 2

Remarks

21 66

Reserved	Facility Evaluation Rating	BI	QA	Reserved
67 69	70	71 N	72 N	73 74 75 80

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time / Date	Permit Effective Date
Hercules, Inc. Hattiesburg, MS	3-23-93 AM ☐ PM ☐	10-22-91
	Exit Time/Date: 3-23-93	Permit Expiration Date: 10-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)

Name, Address of Responsible Official	Title	Phone No.	Contacted
P. W. Kirkendall P. O. Box 1937 Hattiesburg, MS 39401	Plant Manager	545-3450	☐ Yes ☐ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

N	Permit	S	Flow Measurement	N	Pretreatment	N	Operations & Maintenance
N	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
N	Facility Site Review	S	Effluent/Receiving Waters	N	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

Outfall 002 Flow = 1.59 mgd

Zinc was detected at 51.9 ug/l and aluminum was detected at 791 ug/l. The current permit requires that no chemicals shall be added to the cooling water without MDPC permission.

These metals are not addressed in the current permit but were analyzed for informational purposes.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date

Signature of Reviewer	Agency/Office	Date
John C. Taylor	MSDEQ/Pollution Control/9615235	6/16/93

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☑ Compliance

EPA Form 3560-3 (Rev. 3-85) Previous editions are obsolete.

States Environmental Protection Agency
Washington, D. C. 20460

EPA NPDES Compliance Inspection Report

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

Section A: National Data System Coding

Math Insp

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type	Sched'd
1 N	2 5 3 MS0001830 11	12 9 3 0 3 2 3 17	18 S M	19 S	20 2	

Remarks

21 66

Reserved	Facility Evaluation Rating	BI	QA	Reserved	
67 69	70	71 N	72 N	73 74	75 80

Section B: Facility Data

Name and Location of Facility Inspected	Entry Time / Date	Permit Effective Date
Hercules, Inc. Hattiesburg, Ms	☐ AM ☐ PM 3-23-93	8-22-91
	Exit Time/Date 3-23-93	Permit Expiration Date 8-21-96

Name(s) of On-Site Representative(s)	Title(s)	Phone No(s)
Charles Jordan	Environmental Supervisor	545-3450

Name, Address of Responsible Official	Title	Phone No.	Contacted
Charles Jordan P.O. Box 1937 Hattiesburg, Ms 39401-1937	Environmental Supervisor	545-3450	☐ Yes ☐ No

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

N	Permit	S	Flow Measurement	N	Pretreatment	N	Operations & Maintenance
N	Records/Reports	N	Laboratory	N	Compliance Schedules	N	Sludge Disposal
N	Facility Site Review	S	Effluent/Receiving Waters	N	Self-Monitoring Program	N	Other:

Section D: Summary of Findings/Comments *(Attach additional sheets if necessary)*

All sample results were within permit limits.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone	Date
John C. Taylor	Ms DEQ/Pollution Control/9615235	5/19/93
Signature of Reviewer	**Agency/Office**	**Date**
John C. Taylor	Ms DEQ/Pollution Control/9615235	5/19/93

Regulatory Office Use Only

Action Taken	Date	Compliance Status
		☐ Noncompliance ☑ Compliance

EPA Form 3560-3 (Rev. 3-85) Previous editions are obsolete.

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

(2-16)	(17-19)
MS0001330	002 N
PERMIT NUMBER	DISCHARGE NUMBER

TOTAL FACILITY D...
SUBR SD
F - FINAL
MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	12	01	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	82	15	0	As Noted	
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/GRAB WEEK	
[illegible] 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.6	******	7.6	12	0	As Not	
	PERMIT REQUIREMENT	******	******	**** ****	5.0	******	9.0 DAILY MX	SU		DAILY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.89	2.32	03	******	******	******		0*	As Noted	
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINR UOUS	CORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature]	601	545-3450	97	01	21
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

*Flowrate adjustments were made on 12/10, 21 due to equipment malfunction.

EPA Form 3320-1 (08-95) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.) 00129/960207-1024

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) MS0001538 — PERMIT NUMBER
(17-19) 001 N — DISCHARGE NUMBER

PROCESS WW & STORMWATER
SUBD 50
F - FINAL
MAJOR

Form Approved.
OMB No. 2040-0004
Approval expires 12-31-97

FACILITY
LOCATION
ATTN CHARLES JORDAN

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	12	01	TO	96	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
BOD, 5-DAY 20 DEG. C	SAMPLE MEASUREMENT	782	1587	26	******	******	******		0	As Noted	
00310 1 0 0	PERMIT REQUIREMENT	1634 30DA QUAN	2851	LBS/DY	******	******	******	******		THREE/WEEK	COMP24
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	276	681	26	******	******	******		0	As Noted	
00530 1 0 0	PERMIT REQUIREMENT	679 30DA QUAN	1649	LBS/DY	******	******	******	******		THREE/WEEK	COMP24
EFFLUENT GROSS VALUE											
OIL & GREASE FREON EXTR.-IR METH TOT, RC	SAMPLE MEASUREMENT	48	131	26	******	******	******		0	As Noted	
00560 1 0 0	PERMIT REQUIREMENT	960 30DA QUAN	990	LBS/DY	******	******	******	******		THREE/WEEK	GRAB
EFFLUENT GROSS VALUE											
CARBON, TOT ORGANIC TOC	SAMPLE MEASUREMENT	943	1254	26	******	******	******		0	As Noted	
00680 1 0 0	PERMIT REQUIREMENT	2500 30DA QUAN	3800	LBS/DY	******	******	******	******		THREE/WEEK	COMP24
EFFLUENT GROSS VALUE											
PHENOLS	SAMPLE MEASUREMENT	0.7	1.6	26	******	******	******		0	As Noted	
34000 1 0 0	PERMIT REQUIREMENT	3.3 30DA QUAN	7.9	LBS/DY	******	******	******	******		THREE/WEEK	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.74	1.16	03	******	******	******		0*	As Noted	
50050 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	******		CONTINUOUS	RECORDR
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601 545-3450	97	01	21
TYPED OR PRINTED		AREA CODE / NUMBER	YEAR	MO	DAY
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

*Flowrate adjustments were made on 12/10 due to equipment malfunction.

NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY
LOCATION
ATTN CHARLES JORDAN

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	11	01	TO	96	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PROCESS WW & STORMWATER
SUBR SO 12345
F - FINAL
MAJOR

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	646	942	26	******	******	******		0	As Noted X	
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	392	1,111	26	******	******	******		0	As Noted X	
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTR.-IR METH TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	66	158	26	******	******	******		0	As Noted X	
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	697	1,001	26	******	******	******		0	As Noted X	
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.9	5.5	26	******	******	******		1	As Noted X	
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.69	1.27	03	******	******	******		0	As Noted X	
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	96	12	13
AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION
ATTN CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

MS0001490 — PERMIT NUMBER

002 N — DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SUBR SO
F - FINAL
MAJOR

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	11	01	TO	96	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	82	15	0	As Noted	
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.5	******	7.6	12	0	As Noted X	
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.70	3.46	03	******	******	******		*	As Noted X	
	PERMIT REQUIREMENT	REPORT	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 6 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	601	545-3450	96	12	13
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

*Flowrate adjustments were made on 11/6, 7, 8, 9, 10, 13, 14, 15, 16, 17 due to equipment malfunctions.

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES JORDAN

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

(2-16)	(17-19)
MS0001830	001 N
PERMIT NUMBER	DISCHARGE NUMBER

PROCESS WW & STORMWATER
SUBR SO
F - FINAL
MAJOR

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

12345

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	11	01	TO	96	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY 20 DEG. C	SAMPLE MEASUREMENT	646	942	26	******	******	******		0	As Noted X	
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	392	1,111	26	******	******	******		0	As Noted X	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTR.-IR METH TOT,RC	SAMPLE MEASUREMENT	66	158	26	******	******	******		0	As Noted X	
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC	SAMPLE MEASUREMENT	697	1,001	26	******	******	******		0	As Noted X	
00680 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS	SAMPLE MEASUREMENT	2.9	4.3	26	******	******	******		0	As Noted X	
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.69	1.27	03	******	******	******		0	As Noted X	
00050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	CORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature]	601	545-3450	96	12	13
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES [illegible]

Forrest

NOV 1996 Received OPC

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

(2-16)	(17-19)
MS0001830	002 N
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	10	01	TO	96	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

TOTAL FACILITY DISCHARGE
SUBR SO 12345
F - FINAL
MAJOR

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	88	15	0	As noted.	
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/GRAB WEEK	
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.7	******	7.7	12	0	As noted.	
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.88	3.07	03	******	******	******		0	As noted.	
	PERMIT REQUIREMENT	REPORT 300A [illegible]	REPORT	[illegible]	******	******	******	**** ****		CONTINR UOUS	CORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
Gerald D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature]	601	545-3450	11	06	96
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES JORDAN

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

(2-16)	(17-19)
M50001830	001 N
PERMIT NUMBER	DISCHARGE NUMBER

PROCESS RW & STORMWATER
SUBR 50
F - FINAL
MAJOR

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

12345

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	10	01	TO	96	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	366	507	26	******	******	******		0	As noted.	
	PERMIT REQUIREMENT	1634 300A GEO	3051	LBS/DY	******	******	******	**** ****		THREE/COMP24 WEEK	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	172	682	26	******	******	******		0	As noted.	
	PERMIT REQUIREMENT	579 300A GEO	1640	LBS/DY	******	******	******	**** ****		THREE/COMP24 WEEK	
OIL & GREASE FREON EXTR.-IR METH TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	33	69	26	******	******	******		0	As noted.	
	PERMIT REQUIREMENT	660 300A GEO	990	LBS/DY	******	******	******	**** ****		THREE/GRAB WEEK	
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	320	506	26	******	******	******		0	As noted.	
	PERMIT REQUIREMENT	2500 300A GEO	3600	LBS/DY	******	******	******	**** ****		THREE/COMP24 WEEK	
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.8	2.2	26	******	******	******		0	As noted.	
	PERMIT REQUIREMENT	3.3 300A GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/GRAB WEEK	
[illegible], IN CONDUIT OR [illegible] TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.82	1.71	03	******	******	******		0	As noted.	
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINR CORDR UOUS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Gerald D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature]	601	545-3450	11	06	96
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

OMB No. 2040-0004
Approval expires 05-31-98

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

MITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)
E MERCULES INCORPORATED
RESS P O BOX 1937
HATTIESBURG MS 39401-1937

Forest

ILITY
ATION
TN CHARLES JORDAN

(2-16)	(17-19)
MS0001830	002 S
PERMIT NUMBER	DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE 12545
SUBR SO
F - FINAL
MAJOR

*** NO DISCHARGE ***

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	04	01	TO	96	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	MAXIMUM (54-61)	UNITS	QUANTITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
50 STAT 48HR ACU C	SAMPLE MEASUREMENT	******	******		82.0	******	******	23	0		
RIODAPHNIA	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
AA6C 1 0 0	SAMPLE MEASUREMENT	******	******		100.0	******	******	23	0		
FFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
50 STAT 48HR ACU P	SAMPLE MEASUREMENT										
EPHALES	PERMIT REQUIREMENT										
AA6C 1 0 0	SAMPLE MEASUREMENT										
FFLUENT GROSS VALUE	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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
G. D. Burch, Plant Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601	545-3450	96	10	03
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.) 00131/960207-1024

Previous editions may be used.

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY
LOCATION Forrest
ATTN CHARLES JORDAN

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

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
MS0001830	001 N

PROCESS WW & S.
SUBR SD
E - FINAL
MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	09	01	TO	96	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	462	1029	26 LBS/DY	******	******	******	**** ****	0		
	PERMIT REQUIREMENT	1634 30DA GEO	3061		******	******	******			THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	201	690	26 LBS/DY	******	******	******	**** ****	0		
	PERMIT REQUIREMENT	579 30DA GEO	1641		******	******	******			THREE/WEEK	COMP24
OIL & GREASE FREON EXT.-IR METH TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	19	30	26 LBS/DY	******	******	******	**** ****	0		
	PERMIT REQUIREMENT	660 30DA GEO	990		******	******	******			THREE/GRAB WEEK	
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	610	1175	26 LBS/DY	******	******	******	**** ****	0		
	PERMIT REQUIREMENT	2500 30DA GEO	4800		******	******	******			THREE/WEEK	COMP24
PHENOLS 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.4	1.1	26 LBS/DY	******	******	******	**** ****	0		
	PERMIT REQUIREMENT	1.0 30DA GEO	2.0		******	******	******			THREE/GRAB WEEK	
[illegible], IN CONDUIT OR TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.79	1.18	03	******	******	******	**** ****	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******			CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch, Plt. Mgr.
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	545-3450	96	10	08

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

EPA Form 3320-1 (08-95) ...itions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE ...)

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES JORDAN

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

(2-16)	(17-19)
MS0001830	002 N
PERMIT NUMBER	DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SUBR SO
F - FINAL
MAJOR

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

12345

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	09	01	TO	96	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	90	15	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
P[illegible] 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.9	******	7.7	12	0		
	PERMIT REQUIREMENT	******	******	**** ****	5.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.70	2.36	03	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 300A GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
G. D. Burch, Plt. Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature]	601545-3450	96	10	08
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MS0001030	001 N
PERMIT NUMBER	DISCHARGE NUMBER

PROCESS WW & STORMWATER SUBR SD

F - FINAL

MAJOR

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

12545

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	08	01	TO	96	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	758	1211	26	******	******	******		0		
	PERMIT REQUIREMENT	1634 300A GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
S[illegible]S, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	84	226	26	******	******	******		0		
	PERMIT REQUIREMENT	579 300A GEO	154	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTR.-IR METH TOT,EC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	10	40	26	******	******	******		0		
	PERMIT REQUIREMENT	560 300A GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	685	1106	26	******	******	******		0		
	PERMIT REQUIREMENT	2500 300A GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46600 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.5	1.3	26	******	******	******		0		
	PERMIT REQUIREMENT	3.3 300A GEO	4.0	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
[illegible], IN CONDUIT OR [illegible] TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.74	0.93	03	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch, Plt. Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	96	10	08
AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SUBP SD
F - FINAL
MAJOR

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	09	01	TO	96	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	93	15	0		
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		6.8	*****	7.8	12	0		
	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.61	1.79	03	*****	*****	*****		0		
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	*****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
G. D. Burch, Plt. Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601 5453450	96	10	08
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

Forrest

FACILITY

LOCATION

ATTN CHARLES JORDAN

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

(2-16)	(17-19)
MS0001830	001 N
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	07	01	TO	96	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PROCESS WW & STORMWATER
SUBR SO 12345
F - FINAL
MAJOR

Forrest

*** NO DISCHARGE ***

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

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	474	1055	26	******	******	******		0		
	PERMIT REQUIREMENT	1634 300A GEO	2051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	74	250	26	******	******	******		0		
	PERMIT REQUIREMENT	579 300A GEO	1642	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTR.-IR METH TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	17	33	26	******	******	******		0		
	PERMIT REQUIREMENT	660 300A GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	556	1328	26	******	******	******		0		
	PERMIT REQUIREMENT	2500 300A GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.0	2.1	26	******	******	******		0		
	PERMIT REQUIREMENT	3.3 300A GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00650 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.79	1.05	03	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
G. D. Burch, Plant Mgr.			601-545-3450	0 96 08 09
TYPED OR PRINTED			AREA CODE NUMBER	YEAR MO DAY

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1257
HATTIESBURG MS 39401-1337

FACILITY
LOCATION
ATTN CHARLES JORDAN

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

(2-16) PERMIT NUMBER	*(17-19)* DISCHARGE NUMBER
MS0001430	002 1

TOTAL FACILITY DISCHARGE
SUBR SO
F - FINAL
MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	07	01	TO	95	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

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

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	95	15	0		
	PERMIT REQUIREMENT	******	******	**** ****	*******	*******	105	DEG.F		1/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.9	******	7.6	12	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	*******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	1.60	2.12	03	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE		
G. D. Burch, Plant Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601-545-3450	96	08	09
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location If Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY
LOCATION
ATTN CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16)

MS0001830
PERMIT NUMBER

001 M
DISCHARGE NUMBER *(17-19)*

PROCESS WW & STORMWATER
SUBR 50
F - FINAL
MAJOR

Forrest

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	06	01	TO	96	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

PARAMETER *(32-37)*		(3 Card Only) QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	264	387	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	1634 30DA AVG	1951	LBS/DY	*****	*****	*****	*****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	361	1378	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	572 30DA AVG	1144	LBS/DY	*****	*****	*****	*****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTN.-IR METH FOR HEM 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	62	228	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	300 30DA AVG	600	LBS/DY	*****	*****	*****	*****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	386	1389	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	2500 30DA AVG	5000	LBS/DY	*****	*****	*****	*****		THREE/WEEK	COMP24
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.9	3.3	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	2.3 30DA AVG	4.7	LBS/DY	*****	*****	*****	*****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.74	1.44	03	*****	*****	*****		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	*****	*****	*****	*****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	SDB	601 545-3450	96	07	12
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

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

NAME/ADDRESS (Include Facility Name/ Location if Different)
HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) MS0001430 PERMIT NUMBER
(17-19) 002 N DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SUBR SD
F - FINAL
MAJOR

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

12545

Forrest

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	06	01	TO	96	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Received AUG 1996 OPC

CHARLES JORDAN

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER FAHRENHEIT 1 0 0	SAMPLE MEASUREMENT	******	******	-	*******	******	95	15	0		
	PERMIT REQUIREMENT	*******	******	**** ****	*******	*******	105	DEG.F		THREE/WEEK	GRAB
PH 1 0 0	SAMPLE MEASUREMENT	******	******		6.8	******	8.2	12	0		
	PERMIT REQUIREMENT	*******	*******	**** ****	6.0	*******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 1 0 0	SAMPLE MEASUREMENT	1.58	2.21	03	******	******	******		0*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	*******	*******	*******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

TITLE PRINCIPAL EXECUTIVE OFFICER

. Burch, Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	545-3450	96	07	12

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

vrate adjustments were made on 6/20, 21 due to equipment malfunction.

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

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

(2-16)	(17-19)
MS0001830	002 1
PERMIT NUMBER	DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SUBPASS
1 - FINAL
MAJOR

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

FACILITY
LOCATION
ATTN CHARLES JORDAN

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	06	01	TO	96	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	95	15	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	8.2	12	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			03	******	******	******		0*		
	PERMIT REQUIREMENT	REPORT 30DA GEM	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	601	545-3450	96	07	12
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MO	DAY

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

*Flowrate adjustments were made on 6/20, 21 due to equipment malfunction.

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

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

(2-16)	(17-19)
MS0001890	001 N
PERMIT NUMBER	DISCHARGE NUMBER

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

PROCESS WW & STORMWATER
SUBR SO 12545
F - FINAL
MAJOR

Forced

FACILITY

LOCATION

ATTN CHARLES JORDAN

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	05	01	TO	96	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY 20 DEG. C	SAMPLE MEASUREMENT	470	897	26	******	******	******		0		
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1634 300A GEO	2961	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	116	378	26	******	******	******		0		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	578 300A GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTR.-IR METH TOT,RC	SAMPLE MEASUREMENT	24	63	26	******	******	******		0		
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	660 300A GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC	SAMPLE MEASUREMENT	334	574	26	******	******	******		0		
00680 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2500 300A GEO	2800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS	SAMPLE MEASUREMENT	0.4	1.0	26	******	******	******		0		
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.3 300A GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.76	1.10	03	******	******	******		0		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	CORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		TELEPHONE		DATE		
G. D. Burch, Plant Mgr.		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	601	545-3450	96	06	06
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME [illegible]
ADDRESS P O BOX 1257
HATTIESBURG MS 39401-1937

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

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MS0001430	002 M

TOTAL FACILITY DISCHARGE
SUBR SD
F - FINAL
MAJOR

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

FACILITY
LOCATION
ATTN CHARLES JORDAN

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	05	01	TO	96	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	91	15	0		
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7.0	*****	7.8	12	0		
	PERMIT REQUIREMENT	*****	*****	*****	6.0	*****	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.58	1.89	03	*****	*****	*****		0		
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	**** ****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE		
G. D. Burch, Plant Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	601 545-3450	96	06	06
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY
LOCATION
ATTN CHARLES JORDAN

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

(2-16) PERMIT NUMBER	*(17-19)* DISCHARGE NUMBER
MS0001830	002 M

TOTAL FACILITY DISCHARGE
SUBR SD 1234
F - FINAL
MAJOR Forrest

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	04	01	TO	96	04	30
	(20-21)	*(22-23)*	*(24-25)*		*(26-27)*	*(28-29)*	*(30-31)*

*** NO DISCHARGE ***

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

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	86	15	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/GRAB WEEK	
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.4	******	7.6	12	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.62	2.61	MG	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS RECORDR	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
G. D. Burch, Plt. Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601 545-3450	96	05	10
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) MS0001350 — PERMIT NUMBER
(17-19) 001 M — DISCHARGE NUMBER

PROCESS WW & STORM WTR SUBR SD
F - FINAL
MAJOR

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

FACILITY
LOCATION
ATTN CHARLES JORDAN

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	04	01	TO	96	04	30
(20-21)	*(22-23)*	*(24-25)*			*(26-27)*	*(28-29)*	*(30-31)*

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	930	2158	26 L BS/DY	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA AVG	3051		*****	******	******	*****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	334	1254	26 L BS/DY	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA AVG	1662		******	******	******	*****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTR.-IR METH 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	85	262	26 L BS/DY	******	******	******		0		
	PERMIT REQUIREMENT	550 30DA AVG	990		******	******	******	*****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1016	2091	26 L BS/DY	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA AVG	4800		******	******	******	*****		THREE/WEEK	COMP24
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.7	8.5	26 L BS/DY	******	******	******		3		
	PERMIT REQUIREMENT	5.0 30DA AVG	9.0		******	******	******	*****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.92	1.54	02 MGD	******	******	******		0*		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	*****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601 545-3450	96	05	10
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

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

Flowrate adjustment was made on 4/3 due to equipment malfunction.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY
LOCATION
ATTN CHARLES JORDAN

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

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

PERMIT NUMBER *(2-16)*	DISCHARGE NUMBER *(17-19)*
MS0001830	002 S

TOTAL FACILITY DISCHARGE
SUBR SR 12345
F - FINAL
MAJOR Forest

MONITORING PERIOD

	YEAR *(20-21)*	MO *(22-23)*	DAY *(24-25)*		YEAR *(26-27)*	MO *(28-29)*	DAY *(30-31)*
FROM	95	10	01	TO	95	03	31

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
LC50 STAT 4HR ACU C. DUBIA	SAMPLE MEASUREMENT	******	******		100.0	******	******	23	0		
TAA6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUA	GRAB
LC50 STAT 4HR ACU P. PHALES	SAMPLE MEASUREMENT	******	******		33.0	******	******	23	0		
TAA6C 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUA	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G. D. Burch, Plant Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601 545-3450		96	04	12
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN CHARLES JORDAN

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

(2-16)	(17-19)
MS0001830	002 N
PERMIT NUMBER	DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SUBR SU 12345
F - FINAL
MAJOR Forest

*** NO DISCHARGE ***

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

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	03	01	TO	96	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	79	15	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.3	******	8.6	12	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.63	2.29	03	******	******	******		0*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	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 I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		TELEPHONE		DATE		
G. D. Burch, Plant Mgr.		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	601	5453450	96	04	12
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

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

Flowrate adjustments were made on 3/4, 19, 20 due to Equipment malfunction.

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
KATTIESBURG MS 39401-1937

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) MS0001350 — PERMIT NUMBER
(17-19) 001 — DISCHARGE NUMBER

PROCESS WW & STORMWATER
SURF SD
F - FINAL
MAJOR

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

FACILITY
LOCATION
ATTN CHARLES JORDAN

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
96	03	01	96	03	31
(20-21)	*(22-23)*	*(24-25)*	*(26-27)*	*(28-29)*	*(30-31)*

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	873	1561	26 LBS/DY	*****	*****	*****		0		
	PERMIT REQUIREMENT	1634 30DA GRE	2861		*****	*****	*****	**** ****		THREE/ WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	207	594	26 LBS/DY	*****	*****	*****		0		
	PERMIT REQUIREMENT	672 30DA GRE	1664		*****	*****	*****	**** ****		THREE/ WEEK	COMP24
OIL & GREASE FREON EXTR.-IR METH TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	28	97	26 LBS/DY	*****	*****	*****		0		
	PERMIT REQUIREMENT	560 30DA GRE	1400		*****	*****	*****	**** ****		THREE/ WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	901	1568	26 LBS/DY	*****	*****	*****		0		
	PERMIT REQUIREMENT	2500 30DA GRE	5800		*****	*****	*****	**** ****		THREE/ WEEK	COMP24
PHENOLS 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.3	3.0	25 LBS/DY	*****	*****	*****		0		
	PERMIT REQUIREMENT	2.3 30DA GRE	4.0		*****	*****	*****	**** ****		THREE/ WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 3 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.88	1.97	03 MGD	*****	*****	*****		0*		
	PERMIT REQUIREMENT	REQUIRMNT DAILY AV	REQUIRMNT DAILY MX		*****	*****	*****	**** ****		CONTIN UOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
G. D. Burch, Plant Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 6 years.)*	601 5453450	96	04	12
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

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

Flowrate adjustments were made on 4/13, 14, 19, 20, 21, 23, 24, 25 due to equipment malfunction.

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY
LOCATION
ATTN CHARLES JORDAN

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

(2-16) PERMIT NUMBER	*(17-19)* DISCHARGE NUMBER
MS0001350	001 H

PROCESS WW & STORMWATER
SUBR 53
F - FINAL
MAJOR

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

1254

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	02	01	TO	96	02	29
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	399	761	26 LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	1334 30DA AVG	2001		******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	278	525	26 LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA AVG	1640		******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE, FREON EXTR.-IR METH TOT, DC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	33	87	26 LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	663 30DA AVG	2002		******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	589	921	26 LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA AVG	5000		******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.3	26 LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	0.3 30DA AVG	0.9		******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.69	1.16	03 MGD	******	******	******		0	*	
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Gerald D. Burch, Plant Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		601 545-3450	96	03	07
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR	MO	DAY

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

*Flowrate adjustments were made on 2/1,2,3,4,5,6,7,8,9 due to equipment malfunctions.

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1237
HATTIESBURG MS 39401-1937

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) MS0001430 — PERMIT NUMBER
(17-19) 002 — DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SOUR SO 1294
F - FINAL
MAJOR Formed CEC

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

FACILITY
LOCATION
ATTN CHARLES JORDAN

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	02	01	TO	96	02	29
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		(3 Card Only) QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	79	15	0		
	PERMIT REQUIREMENT	******	******	*****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.5	******	7.4	12	0		
	PERMIT REQUIREMENT	******	******	*****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.45	3.02	03	******	******	******		0	*	
	PERMIT REQUIREMENT	REPORT	REPORT	MGD	******	******	******	****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Gerald D. Burch, Plant Mgr.
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	96	03	07
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
*Flowrate adjustments were made on 2/1,2,3,4 due to equipment malfunctions.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY
LOCATION
ATTN CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) MS0001350 — PERMIT NUMBER
(17-19) 001 U — DISCHARGE NUMBER

PROCESS WW & STORMWATER
SURR SO
F - FINAL
MAJOR

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

1234

Forrest

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	96	01	01	TO	96	01	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE ***

NOTE: Read Instructions before completing this form.

PARAMETER *(32-37)*		(3 Card Only) QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	(4 Card Only) QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
BOD, 5-DAY 20 DEG. C 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	634	1352	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	1634	3051	LBS/DY	*****	*****	*****	*****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	288	640	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	572	1069	LBS/DY	*****	*****	*****	*****		THREE/WEEK	COMP24
OIL & GREASE FREON EXTR.-IR, METH PET, RO 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	52	117	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	500	990	LBS/DY	*****	*****	*****	*****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC TOC 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	917	2574	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	2500	2800	LBS/DY	*****	*****	*****	*****		THREE/WEEK	COMP24
PHENOLS 65000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.8	2.6	26	*****	*****	*****		0		
	PERMIT REQUIREMENT	0.3	0.7	LBS/DY	*****	*****	*****	*****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.92	1.33	03	*****	*****	*****		0	*	
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	*****	*****	*****	*****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE		
G.D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	601 545-3450	02	21	96
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE / NUMBER	YEAR	MO	DAY

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

*Flowrate adjustments were made on 1/29, 30, 31 due to equipment malfunctions.

PERMITTEE NAME/ADDRESS *(Include Facility Name/ Location if Different)*
NAME HERCULES ENGINEERING
ADDRESS P O BOX 1237
HATTIESBURG MS 39401-1937

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*
DISCHARGE MONITORING REPORT *(DMR)*
(2-16) MS0001830 — PERMIT NUMBER
(17-19) 002 — DISCHARGE NUMBER

TOTAL FACILITY DISCHARGE
SUGR SD
F - FINAL
MAJOR

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

FACILITY
LOCATION
ATTN CHARLES JORDAN

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	01	01	TO	96	01	31
	(20-21)	*(22-23)*	*(24-25)*		*(26-27)*	*(28-29)*	*(30-31)*

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER *(32-37)*		*(3 Card Only)* QUANTITY OR LOADING *(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	*(4 Card Only)* QUANTITY OR CONCENTRATION *(38-45)* MINIMUM	*(46-53)* AVERAGE	*(54-61)* MAXIMUM	UNITS	NO. EX *(62-63)*	FREQUENCY OF ANALYSIS *(64-68)*	SAMPLE TYPE *(69-70)*
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	82	15	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	7.6	12	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.61	2.79	03	******	******	******	****	0	*	
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	******	******	******	****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. D. Burch, Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
AREA CODE: 601 — NUMBER: 545-3450

DATE
YEAR: 02 — MO: 21 — DAY: 96

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

*Flowrate adjustments were made on 1/28, 29, 30, 31 due to equipment malfunctions.

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 N

torrest

MAJOR (SUBR SO)

F - FINAL

PROCESS WW

*** NO DISCHARGE ***

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JAN 2000
Received

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	12	01	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	379	1027	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	125	292	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	22	89	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	418	892	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.6	2.5	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.96	1.94	(03)	******	******	******		0	*	
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	96	01	09
AREA CODE	NUMBER	YEAR	MO	DAY

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

*Flowrate adjustments were made on 12/16, 17, 18 due to equipment malfunction.

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00191/950213-1720

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME [illegible]
ADDRESS [illegible]
[illegible] HATTIESBURG MS 39401-1237
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001830
(17-19) DISCHARGE NUMBER: 002 R

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires: 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	12	01	TO	95	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						84	(15)	0		
	PERMIT REQUIREMENT						105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.8		7.7	(12)	0		
	PERMIT REQUIREMENT				6.0		9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.56	2.66	(03)					0	*	
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD						CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 96 | MO 01 | DAY 09

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

*Flowrate adjustments were made on 12/22, 23, 24 due to equipment malfunction.

NAME (Name/Location if different) HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR (SUBR SO) F - FINAL PROCESS WW

Forest Co

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
95	11	01	95	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMP TYP (69-7
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	223	338	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/COMP WEEK	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	156	379	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/COMP2 WEEK	
OIL & GREASE (FREON EXTR.-IR METH) TOT, RO 00560 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	42	161	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/GRAB WEEK	
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	297	519	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/COMP2 WEEK	
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.3	0.8	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.70	1.09	(03)	******	******	******		0	*	
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINRCORDR UOUS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gerald D. Burch/Plt. Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	545-3450	95	12	15

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

*Flowrate adjustment was made on 12/15 due to equipment malfunction.

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.*

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)

DISCHARGE MONITORING REPORT (*DMR*)

(2-16)	(17-19)
MS0001630	002 N
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	12	01	TO	95	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	81	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
[illegible] 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.5	******	7.0	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.39	2.62	(03)	******	******	******		0	*	
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gerald D. Burch/Plt. Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	95	12	15
AREA CODE	NUMBER	YEAR	MO	DAY

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

*Flowrate adjustments were made on 12/13/95 and 12/14/95 due to equipment malfunction.

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MS0001830	001 4
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR SO)
F - FINAL
PROCESS WW 3 ENTRATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
95	10	01	95	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	355	1046	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	154	427	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	36	65	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	507	1352	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.7	1.2	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 00050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.63	1.09	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G.D. Burch, Plant Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	95	11	13
AREA CODE	NUMBER	YEAR	MO	DAY

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

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00189/950213-1720

Facility Name/Location if different)
NAME [illegible] INCORPORATED
ADDRESS P O BOX 1937
[illegible] MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001830
(17-19) DISCHARGE NUMBER: 002 A

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
95	10	01	95	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						90	(15)	0		
	PERMIT REQUIREMENT						105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.5		7.5	(12)	0		
	PERMIT REQUIREMENT				6.0		9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.37	2.07	(03)					0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD						CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch, Plant Mgr

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 11 DAY 13

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

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

NAME [illegible] INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MS0001330	002 S
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	04	01	TO	95	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STAT 48HR ACU C ERIODAPHNIA TAA3B 1 6 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	******	******		>100.0	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
LC50 STAT 48HR ACU C IMEPHALES TAACC 1 6 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	******	******		>100.0	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch/Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	95	09	06
AREA CODE	NUMBER	YEAR	MO	DAY

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

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00205/950213-1720

PAGE 1 OF

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

NAME WERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MS0001830	001 N
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR (SUBR SO) F - FINAL PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	09	01	TO	95	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	568	821	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
[illegible]IDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	91	202	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	13	26	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	619	931	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.4	0.8	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
[illegible]W, IN CONDUIT ON [illegible]RU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.61	0.84	(03)	******	******	******		*		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	95	10	10
AREA CODE	NUMBER	YEAR	MO	DAY

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

*Flow estimated on 9/15 due to Equipment malfunction the result of being struck by lightning.

hdp

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00188/950213-1720

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

BATTLESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)

DISCHARGE MONITORING REPORT (*DMR*)

(2-16)	(17-19)
MS0001830	002 H
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	09	01	TO	95	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	91	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.2	******	8.0	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.56	2.22	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G. D. Burch, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (*Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.*)	[signature]	601	545-3450	95	10	10
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME [illegible] INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATT: CHARLES JORDAN

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

(2-16) MS0041030 — PERMIT NUMBER
(17-19) 001 A — DISCHARGE NUMBER

(30DA SO) Form Approved.
F - FINAL OMB No. 2040-0004
PROCESS WW Approval expires 10-31-94

JCB

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	08	01	TO	95	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	586	1048	(26)					0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY						THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	99	292	(26)					0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY						THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RE 00560 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	14	45	(26)					0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY						THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	503	821	(26)					0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY						THREE/WEEK	COMP24
PHENOLS 34694 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.3	0.4	(26)					0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY						THREE/WEEK	GRAB
[illegible], IN CONDUIT OR [illegible] TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.65	1.42	(13)					0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD						CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE			DATE		
G. D. Burch/Plant Manager	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER		YEAR	MO	DAY
TYPED OR PRINTED		601	545-3450		95	09	06

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

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

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001350
(17-19) DISCHARGE NUMBER: 002 M

MAJOR
(SUBP SC)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

*** NO DISCHARGE | | ***

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	95	08	01	TO	95	08	31

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						95	(15)	0		
	PERMIT REQUIREMENT	******	******		******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.7		8.0	(12)	0		
	PERMIT REQUIREMENT	******	******		6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.67	2.71	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. D. Burch/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 95 | MO 09 | DAY 06

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

ndf

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (*NPDES*)

DISCHARGE MONITORING REPORT (*DMR*)

(2-16)	(17-19)
MS0001830	002 H
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	07	01	TO	5	7	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	93	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.4	******	7.9	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.49	2.03	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G. D. Burch/Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (*Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.*)	[signature]	601	545-3450	95	08	11
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME [illegible] INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: [illegible]
(17-19) DISCHARGE NUMBER: 001 A

MAJOR
(SUBR 30)
F - FINAL
PROCESS WATER DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	07	01	TO	95	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	258	364	(26) LBS/DY					0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051							THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	89	172	(26) LBS/DY					0		
	PERMIT REQUIREMENT	579 30DA GEO	1648							THREE/WEEK	COMP24
OIL & GREASE (FREON EXT.-IR METH) TOT. 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	11	25	(26) LBS/DY					0		
	PERMIT REQUIREMENT	660 30DA GEO	990							THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	184	338	(26) LBS/DY					0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800							THREE/WEEK	COMP24
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	0.8	(26) LBS/DY					0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9							THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.60	0.81	(03) MGD					0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX							CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. D. Burch/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450
DATE: YEAR 95 MO 08 DAY 11

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

NDP

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

TEE NAME/ADDRESS (Include Name/Location if different)
[redacted]
SS P O BOX 1937
HATTIESBURG MS 39403-1937

ACILITY

LOCATION

ATT: CHARLES JORDAN

(2-16) PERMIT NUMBER: MS0001368

(17-19) DISCHARGE NUMBER: 002 W

MAJOR
(SUBR SU)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	06	01	TO	95	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						91	(15) DEG.F	0		
	PERMIT REQUIREMENT						105			THREE/WEEK	GRAB
	SAMPLE MEASUREMENT				6.1		7.6	(12) SU	0		
	PERMIT REQUIREMENT				6.0		9.0 DAILY MX			DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.40	2.62	(03) MGD					*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT							CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G. D. Burch/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 95 | MO 07 | DAY 10

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

*Several Flowrate adjustments were made to Outfall 002 due to equipment malfunction. The flowrate instrument was replaced on 6/5/95, calibrated, and fully operational on 6/9/95.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME [illegible]
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001830
(17-19) DISCHARGE NUMBER: 001 A

MAJOR
(SUBSO)
P - FINAL
PROCESS WW DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	06	01	TO	95	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	304	531	(26) LBS/DY	*******	*******	*******	****	0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051		*******	*******	*******	****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	89	138	(26) LBS/DY	*******	*******	*******	****	0		
	PERMIT REQUIREMENT	579 30DA GEO	1648		*******	*******	*******	****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	12	35	(26) LBS/DY	*******	*******	*******	****	0		
	PERMIT REQUIREMENT	660 30DA GEO	990		*******	*******	*******	****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	292	708	(26) LBS/DY	*******	*******	*******	****	0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800		*******	*******	*******	****		THREE/WEEK	COMP24
PHENOLS 32730 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.4	1.1	(26) LBS/DY	*******	*******	*******	****	0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9		*******	*******	*******	****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.58	.75	(03) MGD	*******	*******	*******	****	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		*******	*******	*******	****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. D. Burch/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 07 DAY 10

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

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME ALCOA, INCORPORATED
ADDRESS P O BOX 1937
GADSDEN AL 35901-1937
FACILITY
LOCATION
ATT: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: AL0001350

(17-19) DISCHARGE NUMBER: 001 A

MAJOR (SUBR SC) F - FINAL PROCESS WASTEWATER

Form Approved. OMB No. 2040-0004 Approval expires 10-31-94 JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	05	01	TO	95	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	422	1326	(26) LBS/DY					0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051							THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	135	504	(26) LBS/DY					0		
	PERMIT REQUIREMENT	579 30DA GEO	1648							THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	17	41	(26) LBS/DY					0		
	PERMIT REQUIREMENT	660 30DA GEO	990							THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	476	1347	(26) LBS/DY					0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800							THREE/WEEK	COMP24
PHENOLS 34694 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.8	3.0	(26) LBS/DY					0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9							THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.61	.77	(03) MGD					0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX							CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. D. Burch/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 06 DAY 07

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME [illegible] INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001406
(17-19) DISCHARGE NUMBER: 002 N

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	05	01	TO	95	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | __ | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						90	(15)	0		
	PERMIT REQUIREMENT	******	******		******	******	105	DEG.F		THREE/WEEK	GRAB
[redacted] 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.7		8.3	(12)	0		
	PERMIT REQUIREMENT	******	******		6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.40	2.82	(03)					*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
[redacted]	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G. D. Burch/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 06 DAY 07

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
Several Flowrate adjustments were made to Outfall 002 due to equipment malfunction. This flowrate instrument was replaced on 6-5-95.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME [illegible] INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001350

(17-19) DISCHARGE NUMBER: 001 M

MAJOR (SUBR SC) F - FINAL PROCESS WW

Form Approved. OMB No. 2040-0004 Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	04	01	TO	95	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NO DISCHARGE [ ]

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	871	1747	(26) LBS/DY					0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051							THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	114	190	(26) LBS/DY					0		
	PERMIT REQUIREMENT	579 30DA GEO	1648							THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, PO 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	22	53	(26) LBS/DY					0		
	PERMIT REQUIREMENT	660 30DA GEO	990							THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	742	1086	(26) LBS/DY					0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800							THREE/WEEK	COMP24
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.6	0.9	(26) LBS/DY					0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9							THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.69	1.05	(03) MGD					0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX							CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G.D. Burch/Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 05 DAY 05

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

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATT: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER
(17-19) 002 R DISCHARGE NUMBER

MAJOR
(SUBR SD)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	04	01	TO	95	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						86	(15)	0		
	PERMIT REQUIREMENT						105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.7		8.0	(12)	0		
	PERMIT REQUIREMENT				6.0		9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.01	1.51	(03)					*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD						CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
G.D. Burch/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 05 DAY 05

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

Flowrate adjustments were made on 4-3-95 due to equipment malfunction.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 002 S

MAJOR
(SUBR SOI) JCB
F - FINAL
TOTAL FACILITY DISCHARGE JCB

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	94	04	01	TO	94	09	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STAT 48HR ACU C ERIODAPHNIA TAA3B 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		0.4	******	******	(23)	1		
	PERMIT REQUIREMENT	******	******	**** *****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
LC50 STAT 48HR ACU P IMEPHALES TAA6C 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		2.5	******	******	(23)	1		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plant Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 09 | DAY 14

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

ADDITIONAL STUDIES ARE IN PROGRESS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

Received OPC APR 1995

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SO) GCT
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	08	01	TO	94	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	436	841	(26)	******	******	******		0		
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	206	472	(26)	******	******	******		0		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC	SAMPLE MEASUREMENT	17	30	(26)	******	******	******		0		
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	438	807	(26)	******	******	******		0		
00680 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS	SAMPLE MEASUREMENT	0.3	0.5	(26)	******	******	******		0		
46000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.75	0.89	(03)	******	******	******		*		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	94	09	08
AREA CODE	NUMBER	YEAR	MO	DAY

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

*Several flowrate comparisons (outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

NCP

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001830
(17-19) DISCHARGE NUMBER: 002 N

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	08	01	TO	94	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	91	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	7.3	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.81	1.35	03	******	******	******		*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall/Plt. Mgr.
TYPED OR PRINTED

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

Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 09 DAY 08

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

*Several flowrate comparisons (outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. REPLACES EPA FORM T-40 WHICH MAY NOT BE USED

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER
(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SC) SCT
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	08	01	TO	94	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	436	841	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	206	472	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	17	30	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	438	807	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	0.5	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.75	0.89	(03)	******	******	******		*		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall/Plt. Mgr.
TYPED OR PRINTED

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

Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450
DATE: YEAR 94 | MO 09 | DAY 08

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

*Several flowrate comparisons (outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER
(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	08	01	TO	94	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	91	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	7.3	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.81	1.35	(03)	******	******	******		*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall/Plt. Mgr.
TYPED OR PRINTED

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

Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450
DATE: YEAR 94 MO 09 DAY 08

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

*Several flowrate comparisons (outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 N

MAJOR
(SUBR SYS) JCP
F - FINAL
PROCESS WW & STORMWATER JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	07	01	TO	94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	354	618	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051		******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	209	514	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648		******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	15	43	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990		******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	489	941	(26) LBS/DY	***** 2##	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800		******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	0.5	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9		******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.82	2.04	(03) MGD	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt.Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 08 DAY 02

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

WB

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 002 N

MAJOR
(SUBR SD) JCT
F - FINAL
TOTAL FACILITY DISCHARGE JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	07	01	TO	94	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	91	(15)	0		
	PERMIT REQUIREMENT	******	******	******	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.7	******	7.6	(12)	0		
	PERMIT REQUIREMENT	******	******	******	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.04	2.22	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	******		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W.Kirkendall/Plant Mgr.

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 08 | DAY 02

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	06	01	TO	94	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0	SAMPLE MEASUREMENT	298	481	(26)	******	******	******		0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0	SAMPLE MEASUREMENT	89	158	(26)	******	******	******		0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0	SAMPLE MEASUREMENT	13	31	(26)	******	******	******		0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0	SAMPLE MEASUREMENT	291	475	(26)	******	******	******		0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0	SAMPLE MEASUREMENT	0.1	0.2	(26)	******	******	******		0		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	0.70	0.96	(03)	******	******	******		0*		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P. W. Kirkendall/Plant Manager
TYPED OR PRINTED

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

P W Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
601 545-3450
AREA CODE NUMBER

DATE
94 07 07
YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*
*Several flowrate comparisons (Outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

JWM 4/20/95

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

PAGE OF

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	06	01	TO	94	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	93	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		8.2	Reverse ******	6.9	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.74	1.05	(03)	******	******	******		0*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDI
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P. W. Kirkendall/Plant Manager

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 07 DAY 07

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

*Several flowrate comparisons (Outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION

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

(2-16) MS0001830 PERMIT NUMBER
(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB
JCB

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	06	01	94	06	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

ATTN: CHARLES JORDAN

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	298	481	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051		******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	89	158	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648		******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	13	31	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990		******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	291	475	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800		******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.2	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9		******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.70	0.96	(03) MGD	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P. W. Kirkendall/Plant Manager
TYPED OR PRINTED

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

P W Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 07 DAY 07

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

ndp

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if different*)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER
(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

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

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94 (20-21)	05 (22-23)	31 (24-25)	TO	94 (26-27)	06 (28-29)	30 (30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	93	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		8.2 (Reverse)	******	6.9	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.74	1.05	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P. W. Kirkendall/Plant Manager
TYPED OR PRINTED

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

P W Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

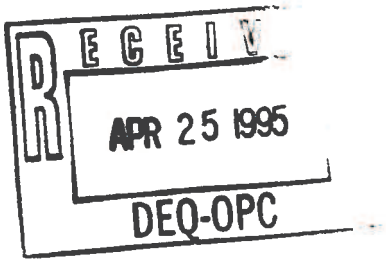
DATE: YEAR 94 | MO 07 | DAY 07

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

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

April 20, 1995



Certified Mail - Return Receipt Requested
No. Z 079 760 273

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

During a recent review of our monthly EPA Discharge Monitoring Report (DMR), the following determination was made, and we are submitting the following revised DMR's.

During August, 1994, (DMR attached) we reported in the comment section some inconsistent flowrate measurements. We have since determined that although the flowrate recorder indicator reading and the flowrate flume measurement comparisons were acceptable, there was a mechanical problem with the flow totalizer recorder which has been corrected. The flowrate which was inconsistent (slightly under-reported on occasions) was determined to the Outfall 002. Outfall 001 is the flowrate used in all mass calculations in our permit and Outfall 002 is a reported value. Outfall 002 consists of Outfall 001 plus some possible non-contact cooling water plus some possible storm water.

Our final conclusions were as follows: Outfall 001 was not over-reported. Outfall 001 which is used in all mass calculations was indeed correct. Outfall 002 was actually under-reported.

Further review of DMR records indicate that this same sporadic totalizer malfunction also occurred on occasions in April, May and June of 1994, and was not documented in the comment section.

Please find the following revised DMR's for April, May and June, 1994, in which all mass calculations remain the same (see previous comments). The same statement that appears in the August, 1994 DMR comment section has been added to these revised reports.

In order to prevent a reoccurrence of this situation, additional procedures have been put in place to detect obvious totalizer malfunctions as compared to instantaneous flowrate indicator readings and flume measurements.

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:ml

cc: Gerald Burch, Plant Manager

RMITTEE NAME/ADDRESS (Include cility Name/Location if different)
AME
DDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
CILITY
CATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 N

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	05	01	TO	94	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR
(SUBR SO) JCT
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

*** NO DISCHARGE 1 1 ***
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	1278	2230	(26)	******	******	******		0		
0 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	215	391	(26)	******	******	******		0		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC	SAMPLE MEASUREMENT	27	65	(26)	******	******	******		0		
00560 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC)	SAMPLE MEASUREMENT	820	1350	(26)	******	******	******		0		
00680 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS	SAMPLE MEASUREMENT	0.5	0.9	(26)	******	******	******		0		
34000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.71	0.96	(03)	******	******	******		0*		
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W.Kirkendall/Plant Mgr.

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 05 | DAY 10

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

*Several flowrate comparisons (Outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

6/20/95

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	05	01	TO	94	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	95	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	8.0	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.68	0.91	(03)	******	******	******		0*		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W.Kirkendall/Plant Mgr.
TYPED OR PRINTED

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Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 05 DAY 10

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

*Several flowrate comparisons (Outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

(Rev. 9-88) Previous editions may be used

Facility Name/Location if different)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION

ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001930
(17-19) DISCHARGE NUMBER: 001 V

MAJOR
(SUBR SO
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approved expires 10-31-94

JCB JCB

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	05	01	94	05	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1278	2230	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051		******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	215	391	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648		******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	27	65	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990		******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	820	1350	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800		******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.5	0.9	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9		******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.71	0.96	(03) MGD	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W.Kirkendall/Plant Mgr.
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 05 | DAY 10

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

Facility Name/Location if different)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1737
HATTIESBURG MS 39401-1937
FACILITY
LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	05	01		94	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	95	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	8.0	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.68	0.91	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W.Kirkendall/Plant Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 05 DAY 10

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

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

April 20, 1995



Certified Mail - Return Receipt Requested
No. Z 079 760 273

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

During a recent review of our monthly EPA Discharge Monitoring Report (DMR), the following determination was made, and we are submitting the following revised DMR's.

During August, 1994, (DMR attached) we reported in the comment section some inconsistent flowrate measurements. We have since determined that although the flowrate recorder indicator reading and the flowrate flume measurement comparisons were acceptable, there was a mechanical problem with the flow totalizer recorder which has been corrected. The flowrate which was inconsistent (slightly under-reported on occasions) was determined to the Outfall 002. Outfall 001 is the flowrate used in all mass calculations in our permit and Outfall 002 is a reported value. Outfall 002 consists of Outfall 001 plus some possible non-contact cooling water plus some possible storm water.

Our final conclusions were as follows: Outfall 001 was not over-reported. Outfall 001 which is used in all mass calculations was indeed correct. Outfall 002 was actually under-reported.

Further review of DMR records indicate that this same sporadic totalizer malfunction also occurred on occasions in April, May and June of 1994, and was not documented in the comment section.

Please find the following revised DMR's for April, May and June, 1994, in which all mass calculations remain the same (see previous comments). The same statement that appears in the August, 1994 DMR comment section has been added to these revised reports.

In order to prevent a reoccurrence of this situation, additional procedures have been put in place to detect obvious totalizer malfunctions as compared to instantaneous flowrate indicator readings and flume measurements.

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:ml

cc: Gerald Burch, Plant Manager

MITTEE NAME/ADDRESS (Include
ity Name/Location if different)
E HERCULES INCORPORATED
RESS P O BOX 1937
HATTIESBURG MS 39401-1937
ITY
TION
FN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	04	01	TO	94	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR
(SUBR SO) JCT
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
D, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	1263	2166	(26)	******	******	******		0		
310 1 0 0	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
LIDS, TOTAL SPENDED	SAMPLE MEASUREMENT	182	580	(26)	******	******	******		0		
530 1 0 0	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
& GREASE (FREON TR.-IR METH) TOT,RC	SAMPLE MEASUREMENT	30	62	(26)	******	******	******		0		
560 1 0 0	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
RBON, TOT ORGANIC DC)	SAMPLE MEASUREMENT	861	1260	(26)	******	******	******		0		
680 1 0 0	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
ENOLS	SAMPLE MEASUREMENT	0.4	1.0	(26)	******	******	******		0		
000 1 0 0	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
IN CONDUIT OR TU TREATMENT PLANT	SAMPLE MEASUREMENT	0.76	0.99	(03)	******	******	******		0*		
050 1 0 0	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
FLUENT GROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

TITLE PRINCIPAL EXECUTIVE OFFICER

.Kirkendall/Plt.Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	545-3450	94	05	06

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

*Several flowrate comparisons (Outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

MH 5/20/05

MITTEE NAME/ADDRESS (*Include ity Name/Location if different*)
E HERCULES INCORPORATED
RESS P O BOX 1937
HATTIESBURG MS 39401-1937
LITY
ATION
TN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	04	01	TO	94	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
MPERATURE, WATER G. FAHRENHEIT 0 0 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	88	(15) DEG.F	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105			THREE/WEEK	GRAB
400 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.9	******	7.9	(12) SU	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX			DAILY	GRAB
OW, IN CONDUIT OR RU TREATMENT PLANT 050 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.91	3.00	(03) MGD	******	******	******	**** ****	0 *		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT		******	******	******			CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

/TITLE PRINCIPAL EXECUTIVE OFFICER

V. Kirkendall/Plt.Mgr.
TYPED OR PRINTED

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

Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	545-3450	94	05	06

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

*Several flowrate comparisons (Outfall 001 and 002) resulted in inconsistant measurements, which could have resulted in over-reporting actual flowrates.

4/20/95

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR (SUBR SO) JCT F - FINAL PROCESS WW & STORMWATER

Form Approved. OMB No. 2040-0004 Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
94	04	01	94	04	30

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) AVERAGE (46-53)	QUANTITY OR LOADING MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) MINIMUM (38-45)	QUALITY OR CONCENTRATION AVERAGE (46-53)	QUALITY OR CONCENTRATION MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1263	2166	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	182	580	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	30	62	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	861	1260	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.4	1.0	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.76	0.99	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
P.W.Kirkendall/Plt.Mgr.	Preston Kirkendall	601	545-3450	94	05	06
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

Facility Name/Location if different)

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR (SUB SO) F - FINAL TOTAL FACILITY DISCHARGE

CLH JCT

Form Approved. OMB No. 2040-0004 Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	04	01	TO	94	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	88	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.9	******	7.9	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.91	3.00	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt.Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 05 DAY 06

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

ndf

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

NAME [illegible]

ADDRESS P O BOX 1937

[illegible] BATTLESBURG [illegible] SC 29631-1937

FACILITY [illegible]

LOCATION [illegible]

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: [illegible]

(17-19) DISCHARGE NUMBER: 001 M

MAJOR
(SUBR SC) Form Approved.
F - FINAL OMB No. 2040-0004
PROCESS WW Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	03	01	TO	95	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	654	1317	(26)					0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY						THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	120	251	(26)					0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY						THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	10	21	(26)					0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY						THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	593	1234	(26)					0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY						THREE/WEEK	COMP24
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.7	4.7	(26)					0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY						THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.68	1.10	(03)					0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD						CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G.D. Burch, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 95 | MO 04 | DAY 06

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

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

NAME: PERDUE INCORPORATED

ADDRESS: P O BOX 1537

SALISBURY MD 21801-1537

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MD0001830

(17-19) DISCHARGE NUMBER: 002 A

MAJOR

(SUBR SO) Form Approved.

F - FINAL OMB No. 2040-0004

TOTAL FACILITY DISCHARG Approval expires 10-31-94

JCB

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
95	03	01	95	03	31

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						79	(15)	0		
	PERMIT REQUIREMENT	******	******		******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.7		7.2	(12)	0		
	PERMIT REQUIREMENT	******	******		6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 2 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.08	1.64	(03)					0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	*****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G.D. Burch, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 04 DAY 06

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

Flow adjustments were made to outfall 002 on 3/19 and 3/30 due to mechanical/totalizer malfunctions.

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

NAME

ADDRESS

S 394-1237

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
[illegible]	[illegible]
PERMIT NUMBER	DISCHARGE NUMBER

(SUBR 50) F - FINAL PROCESS WW

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

NO DISCHARGE

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	[illegible]	01	TO	95	02	26
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
[illegible], 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	272	398	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/ WEEK	COMP24
[illegible]LIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	171	397	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/ WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, R 00560 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	20	68	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/ WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	332	1126	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/ WEEK	COMP24
PHENOLS 45000 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.7	2.4	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/ WEEK	GRAB
[illegible]OW, IN CONDUIT OR [illegible]RU TREATMENT PLAN 50050 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	0.87	1.48	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTIN UOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
G.D. Burch/Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	[signature]	601	545-3450	95	03	07
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME [illegible] INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001430 — PERMIT NUMBER

(17-19) 002 A — DISCHARGE NUMBER

MAJOR

(SUBR SO)

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	95	02	01	TO	95	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT						77	(15)	0		
	PERMIT REQUIREMENT	******	******	****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.7		7.3	(12)	0		
	PERMIT REQUIREMENT	******	******	****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 C 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.08	1.59	(03)					0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

G.D. Burch/Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 95 | MO 03 | DAY 07

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

Facility Name/Location if different)
NAME [illegible] INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 002 S

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
94	10	01	95	03	31

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TOXC STAT 48HR ACU C. DAPHNIA TAA3B 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		100.0	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
TOXC STAT 48HR ACU C. PAALS TAA6C 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		100.0	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W.Kirkendall/Plt. Manager

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 02 DAY 24

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

Received OPC FEB 1995

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

(2-16) MS0001830 PERMIT NUMBER
(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
95	01	01	95	01	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	451	1161	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	172	542	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	12	45	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	410	970	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.5	1.4	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.71	1.4	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall, Plant Manager
TYPED OR PRINTED

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

Preston Kirkendall
Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 02 DAY 07

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001830
(17-19) DISCHARGE NUMBER: 002 N

MONITORING PERIOD
FROM YEAR (20-21) 95 MO (22-23) 01 DAY (24-25) 01 TO YEAR (26-27) 95 MO (28-29) 01 DAY (30-31) 31

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	77	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.7	******	7.3	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.98	2.39	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall, Plant Manager
TYPED OR PRINTED

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

Preston Kirkendall
Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

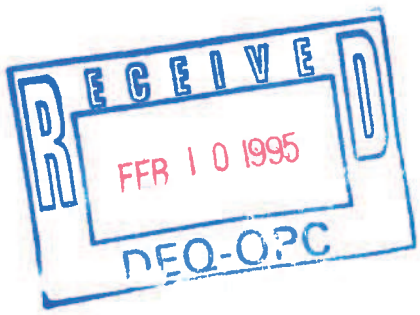
DATE: YEAR 95 MO 02 DAY 07

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

(REPLACES EPA FORM T-40 WHICH MAY NOT BE USED)

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450



February 7, 1995

No. Z 060 871 916
Certified Mail - Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for January, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

Facility Name/Location if different)

NAME HERCULES INCORPRORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 N

MAJOR

(SUBR SO[illegible] JCT

F - FINAL

PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval Expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	12	01	TO	94	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

ATTN: CHARLES JORDAN

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
800, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	630	1029	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 300A GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	197	366	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 300A GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	18	59	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 300A GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	597	873	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 300A GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	0.8	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 300A GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.65	1.06	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
P.W. Kirkendall, Plant Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Preston Kirkendall	601 AREA CODE	545-3450 NUMBER	95 YEAR	01 MO	04 DAY
TYPED OR PRINTED							

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

NDP

Facility Name/Location if different)

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR

(SUBR SO) JCT

F - FINAL

TOTAL FACILITY DISCHARGE JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
94	12	01	94	12	31

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	(4 Card Only) QUALITY OR CONCENTRATION MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		*******	*******	77	(15)	0		
	PERMIT REQUIREMENT	*******	*******	********	*******	*******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		6.9	*******	7.5	(12)	0		
	PERMIT REQUIREMENT	*******	*******	********	6.0	*******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.03	2.80	(03)	*******	*******	*******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	*******	*******	*******	********		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 95 MO 01 DAY 04

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

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

January 4, 1995



No. Z 060 871 912
Certified Mail - Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for December, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

Facility Name/Location if different)

NAME

ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
PROCESS WW & STORMWATER JCR

Form Approved.
OMB No. 2040-0004
Approved expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	11	01	94	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	549	1168	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051		******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	222	790	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648		******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	10	44	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990		******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	477	1145	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800		******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.2	(26) LBS/DY	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9		******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.67	0.78	(03) MGD	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plant Mgr

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 12 | DAY 07

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

NR

Facility Name/Location if different)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	11	01	94	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		******	******	84	(15)	0		
	PERMIT REQUIREMENT	******	******	******	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*******	*******		6.6	******	7.6	(12)	0		
	PERMIT REQUIREMENT	******	******	******	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.18	2.58	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	******		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plant Manager
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 12 | DAY 07

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

Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCP
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	94	10	01		94	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	228	460	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 300A GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	379	974	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 300A GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	33	210	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 300A GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	617	1584	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 300A GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	0.6	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 300A GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.73	1.49	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	CONTINUOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Manager

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	94	11	09
AREA CODE	NUMBER	YEAR	MO	DAY

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

From 10/9 thru 10/14 flowrates for outfalls 001 and 002 were adjusted to compensate for foam accumulation in the throat of the Parshall flumes.

Facility Name/Location if different)
NAME HERCULES INCORPORATED
ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830
(17-19) DISCHARGE NUMBER: 002 N

MAJOR
(SUBSO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE JCB

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	10	01	94	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	84	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	7.5	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.35	3.52	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W.Kirkendall,Plt. Manag
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 11 DAY 09

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

From 10/9 thru 10/14 flowrates for outfalls 001 and 002 were adjusted to compensate for foam accumulation in the throat of the Parshall flumes.

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

NAME

ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	09	01	TO	94	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR
(SUBR SC) JC
F - FINAL
PROCESS WW & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) AVERAGE (46-53)	QUANTITY OR LOADING MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) MINIMUM (38-45)	QUALITY OR CONCENTRATION AVERAGE (46-53)	QUALITY OR CONCENTRATION MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	138	385	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	138	523	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	11	21	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	169	294	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.2	0.6	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.65	0.88	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 10 DAY 05

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

Facility Name/Location if different)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION
ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

JCB

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94 (20-21)	09 (22-23)	01 (24-25)	TO	94 (26-27)	09 (28-29)	30 (30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	88	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		7.0	******	7.4	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.00	1.90	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plant Manager

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 10 DAY 05

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

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

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 A DISCHARGE NUMBER

MAJOR
(SUBR SO JCT
F - FINA
PROCESS WA & STORMWATER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

forest

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	03	01	94	03	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	202	662	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	******		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	66	158	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	******		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	11	35	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	******		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	141	361	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	******		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.2	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	******		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR U TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.29	0.71	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	******		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W.KIRKENDALL/PLT. MANAGER

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 04 | DAY 06

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

Facility Name/Location if different)

NAME

ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	03	01	94	03	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	82	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.8	******	7.8	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.83	1.35	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W.KIRKENDALL/PLT.MANAGER

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 04 | DAY 06

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

Facility Name/Location if different)

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

Forest Cert

FACILITY

LOCATION

ATTN: CHARLES JORDAN

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 N

MAJOR (SUBR SOM JCT F - FINAL PROCESS & STORMWATER

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
94	02	01	94	02	28

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) AVERAGE (46-53)	QUANTITY OR LOADING MAXIMUM (54-61)	UNITS	QUALITY OR CONCENTRATION (4 Card Only) MINIMUM (38-45)	QUALITY OR CONCENTRATION AVERAGE (46-53)	QUALITY OR CONCENTRATION MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
800, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	188	608	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP 24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	108	349	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP 24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	16	43	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	141	389	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP 24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.4	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.37	0.79	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr.

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 03 | DAY 08

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

Facility Name/Location if different)

NAME

ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	01	01	TO	94	01	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MAJOR
(SUBR SO) JC1
F - FINAL
PROCESS WW & STORMWATER

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	718	1236	(26)	******	******	******		0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	207	520	(26)	******	******	******		0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	32	94	(26)	******	******	******		0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	356	796	(26)	******	******	******		0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.4	1.1	(26)	******	******	******		0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR [illegible] TREATMENT PLANT [illegible]050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.55	1.24	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
P.W. Kirkendall/Plt.Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*	Preston Kirkendall	601	545-3450	94	02	10
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

Facility Name, Location if different)

NAME HERCULES INCORPORATED

ADDRESS P O BOX 1937

HATTIESBURG MS 39401-1937

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR

(SUBR SO) JCT

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	94	02	01	TO	94	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	QUALITY OR CONCENTRATION (54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	82	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.7	******	7.5	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.79	1.58	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr.

TYPED OR PRINTED

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

Pat Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 94 MO 03 DAY 08

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

Facility Name/Location if different)
NAME

ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937

FACILITY

LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
94	01	01	94	01	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE 1 1 ***

NOTE: Read instructions before completing this form.

ATTN: CHARLES JORDAN

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	73	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		6.7	******	7.3	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.85	3.43	(03)	******	******	******		0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt.Mgr.

TYPED OR PRINTED

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

Paul W. Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 02 | DAY 10

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

Facility Name/Location if different)
NAME
ADDRESS HERCULES INCORPORATED
P O BOX 1937
HATTIESBURG MS 39401-1937
FACILITY
LOCATION

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 S DISCHARGE NUMBER

MAJOR
(SUBR SO) JCT
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
93	10	01	94	03	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

ATTN: CHARLES JORDAN

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STAT 48HR ACU C ERIODAPHNIA TAA3B 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		100.0	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	******	10.7	******	******	PER-CENT		SEMI- ANNUAL	GRAB
LC50 STAT 48HR ACU P IMEPHALES TAA6C 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		100.0	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	******	10.7	******	******	PER-CENT		SEMI- ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt.Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 94 | MO 02 | DAY 22

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

YEA

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR

(SUBR SO JCT

F - FINAL

PROCESS WW & STORMWATER

Form Approved OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	12	01	TO	93	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	256	493	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	120	307	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 30DA GEO	1649	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	13	32	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	187	385	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	1.1	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.31	0.53	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 01 DAY 05

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

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

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001330 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR (SUBR SO) JCT

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	12	01		93	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	79	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.8	******	7.4	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.70	1.16	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 01 DAY 05

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

Flowrate Adjustments were made on 12/23 and 12/26
due to Recorder Totalizer Malfunction.

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

NAME PEARL RIVER WOOD PRESERVING

ADDRESS P O BOX N

PICAYUNE MS 39466

FACILITY

LOCATION

ATTN: MR. SONNY MOORE

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MSP090006 PERMIT NUMBER

(17-19) 001 A DISCHARGE NUMBER

MINOR
(SUBR SO)
F - FINAL
BOILER BLOWDOWN DISC. ONLY

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	12	01		93	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	7.0	******	8.5	(12)		1/31	Grab
	PERMIT REQUIREMENT	******	******	**** ****	6.0 MINIMUM	******	8.5 MAXIMUM	SU		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******		(03)	******	******	******	( )		31/31	Contin.
	PERMIT REQUIREMENT	******	0.006 DAILY MX	MGD	******	******	******	**** ****		DAILY	CONTIN
	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

H.A. Moore
President

TYPED OR PRINTED

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

H. G. Moore

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 798-8603

DATE: YEAR 94 | MO 1 | DAY 6

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

Complete Sign Date & Mail by 28th of the Following Month To: MS. DEPT. of Natural Resources
Bureau of Pollution Control
P.O. Bx 10355 Jackson, Ms 39209

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00037/930120-1134

Facility Name/Location if different)
NAME HERCULES INC
ADDRESS WEST 7TH STREET
HATTIESBURG MS 39401
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) PERMIT NUMBER: MS0001830
(17-19) DISCHARGE NUMBER: 001 N

MAJOR
(SUBR SO) JCW
F - FINAL
PROCESS WW & STORMWATER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
93	10	01	93	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	244	462	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA GEO	3061	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	164	602	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	379 30DA GEO	1643	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	22	98	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	150	456	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.3	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	0.84	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
P.W. Kirkendall/Plt. Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 USC § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*	Preston Kirkendall	601	545-3450	93	12	07
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

NDP

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

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR

(SUBR SO) JCT

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
93	11	01	93	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	82	(15) DEG.F	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105			THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.5	******	7.2	(12) SU	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX			DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.79	1.71	(03) MG	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 3MDA	REPORT		******	******	****** **** ****			CONTINUOUS	RECORDER
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Manager

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE 601 NUMBER 545-3450

DATE

YEAR 93 MO 12 DAY 07

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

Facility Name/Location if different)
NAME HERCULES INC
ADDRESS WEST 7TH STREET
HATTIESBURG MS 39401
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

Form Approved
OMB No. 2040-0004

(2-16) MS0001830 PERMIT NUMBER
(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SO)
F - FINAL
PROCESS WW & STORMWATER

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
93	11	01	93	11	30
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	246	588	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	48	245	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 30DA GEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT.RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	19	76	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	171	408	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2560 30DA GEO	3000	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.4	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.32	1.32	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall/Plt.Mgr.
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 93 | MO 11 | DAY 04

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

WDF

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) C02 N DISCHARGE NUMBER

MAJOR (SUBR SO) JCT

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
93	10	01	93	10	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	86	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.9	******	7.8	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.87	3.11	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt.Mgr.

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DAY
601	545-3450	93	11	04

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

Flowrate adjustments were made on 10-20/21 due to equipment malfunction

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 M DISCHARGE NUMBER

MAJOR (SUB ST) TF

F - FINAL

PROCESS WW & STORMWATER

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	08	01		92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
OD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	501	1430	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA GEO	3031	LBS/DY	******	******	******	*** ****		MSCL/COMP24 WEEK	
LIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	111	618	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	379 30DA GEO	1640	LBS/DY	******	******	******	*** ****		THREE/COMP24 WEEK	
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	19	64	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	660 30DA GEO	990	LBS/DY	******	******	******	*** ****		THREE/GRAB WEEK	
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	290	704	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2200 30DA GEO	5300	LBS/DY	******	******	******	*** ****		THREE/COMP24 WEEK	
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	1.0	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA GEO	8.5	LBS/DY	******	******	******	*** ****		THREE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.40	1.12	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	*** ****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
P.W. Kirkendall/Plt. Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)*	Preston Kirkendall	601 AREA CODE	545-3450 NUMBER	92 YEAR	10 MO	06 DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

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

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MS0001830	002 N
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR SO) TF
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved
OMB No. 2040-0004

MONITORING PERIOD						
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	09	01		92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	88	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		TUREF/GRAB WEEK	
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.2	******	7.6	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	5.0	******	9.0 DAILY MX	SU		DAILY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.20	2.96	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT BODA GEO	REPORT	NGD	******	******	******	**** ****		CONTINR UOUS	CORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
P.W. Kirkendall/Plt. Mgr.	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	Preston Kirkendall	601	545-3450	92	10	06
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES, INC

ADDRESS EST /TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR (SUBR SO) F - FINAL PROCESS WW & STORMWATER

Form Approved OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	10	01	TO	92	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	323	679	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA CSO	3851	LBS/DY	******	******	******	*** ****		1/WEEK	24 HR-C/COMP
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	80	200	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	379 30DA CSO	1048	LBS/DY	******	******	******	*** ****		1/WEEK	24 HR-C/COMP
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	12	26	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	560 30DA CSO	994	LBS/DY	******	******	******	*** ****		1/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	213	504	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2060 30DA CSO	3300	LBS/DY	******	******	******	*** ****		1/WEEK	24 HR-C/COMP
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.2	0.4	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA CSO	6.9	LBS/DY	******	******	******	*** ****		1/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.37	0.67	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	*** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Manager

TYPED OR PRINTED

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

P.W. Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 92 MO 11 DAY 05

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

hdf

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

01132/920122-1340

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

NAME HERCULES, INC.

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR (SUBR SB) T F - FINAL TOTAL FACILITY DISCHARGE

Form Approved OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	10	01	TO	92	10	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	82	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	90	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.8	******	7.4	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	5.0	******	9.0 MINIMUM	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.95	3.00	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA GRO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDING
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt Manager

TYPED OR PRINTED

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

P.W. Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 92 | MO 11 | DAY 05

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

Forrest

PAGE 003

MITTEE NAME/ADDRESS (Include ity Name/Location if different)
15 HERCULES INC
REET WEST 7TH STREET
HATTIESBURG MS 39401
ILITY
ATION
TN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER
(17-19) 001 N DISCHARGE NUMBER

MAJOR
(SUBR SD) TF
F - FINAL
PROCESS WW & STORMWATER

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
D, 5-DAY (20 DEG. C) 310 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	501	1430	(26) LBS/DY	******	******	******	( ) *** ****	0		
LIDS, TOTAL SPENDED 530 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	111	618	(26) LBS/DY	******	******	******	( ) *** ****	0		
& GREASE (FREON TR.-IR METH) TOT, RC 560 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	19	64	(26) LBS/DY	******	******	******	( ) *** ****	0		
RBON, TOT ORGANIC OC) 680 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	290	704	(26) LBS/DY	******	******	******	( ) *** ****	0		
ENOLS 000 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	1.0	(26) LBS/DY	******	******	******	( ) *** ****	0		
OW, IN CONDUIT OR RU TREATMENT PLANT 050 1 0 0 FLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.40	1.12	(03) MGD	******	******	******	( ) *** ****	0		
	SAMPLE MEASUREMENT										

ME/TITLE PRINCIPAL EXECUTIVE OFFICER
W. Kirkendall/Plt. Mgr.
TYPED OR PRINTED

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

Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 92 | MO 10 | DAY 06

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

Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.) PAGE OF

FROM HERCULES INC 9 '93 10:52 FEB

** TOTAL PAGE 003 **

Forrest

PAGE 002

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INC
ADDRESS WEST 7TH STREET
HATTIESBURG MS 39401
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBSO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	09	01	TO	92	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
EMPERATURE, WATER EG. FAHRENHEIT 0011 1 0 0 FFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( ) *** ****	******	******	88	(15) DEG.F	0		
0400 1 0 0 FFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( ) *** ****	6.2	******	7.6	(12) SU	0		
LOW, IN CONDUIT OR HRU TREATMENT PLANT 0050 1 0 0 FFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.20	2.96	(03) MGD	******	******	******	( ) *** ****	0		
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										
	SAMPLE MEASUREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall/Plt. Mgr.
TYPED OR PRINTED

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

Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601, NUMBER 545-3450

DATE: YEAR 92, MO 10, DAY 06

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

FEB 9 '93 10:49 FROM HERCULES INC

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-48 WHICH MAY NOT BE USED.)

01194/920122-1840

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

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

DEC 1992

RECEIVED

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 2040-0004

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR (SUPR SD) T

F - FINAL

PROCESS WW & STORMWATER

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
92	11	01	92	11	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00310 1 0 0 BOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	477	938	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1624 30DA GRO	3051	LBS/DY	******	******	******	*** ****		THREE/WEEK	24 HR COMP
00530 1 0 0 SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	199	608	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	679 30DA GRO	1548	LBS/DY	******	******	******	*** ****		THREE/WEEK	24 HR COMP
00560 1 0 0 OIL & GREASE (FREON EXTR.-IR METH) TOT. RC EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	36	60	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	560 30DA GRO	990	LBS/DY	******	******	******	*** ****		THREE/WEEK	GRAB
00680 1 0 0 CARBON, TOT ORGANIC (TOC) EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	282	493	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2900 30DA GRO	5800	LBS/DY	******	******	******	*** ****		THREE/WEEK	24 HR COMP
32730 1 0 0 PHENOLS EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.6	1.4	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2.5 30DA GRO	4.9	LBS/DY	******	******	******	*** ****		THREE/WEEK	GRAB
50050 1 0 0 FLOW, IN CONDUIT OR THRU TREATMENT PLANT EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.54	1.18	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	*** ****		CONTINUOUS	RECORDER
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plant Mgr

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 92 MO 12 DAY 10

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INC.
ADDRESS 1ST 7TH STREET
HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR (SUBR SU) TYPE F - FINAL TOTAL FACILITY DISCHARGE

Form Approved OMB No. 2040-0004

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	11	01	TO	92	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	82	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	93	DEG.F		THREE/DAY	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.2	******	7.6	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.21	3.24	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT MGD AVG	REPORT MGD		******	******	****** ****	****		CONTINUOUS	RECORD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plant Mgr

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 92 MO 12 DAY 10

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

Facility Name/Location if different) FORREST

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JURDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR (SUBR SO) F - FINAL PROCESS WW & STORMWATER

Form Approved OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
93	03	01	93	03	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	453	1843	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA CEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	268	1550	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 30DA CEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT.RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	30	77	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	660 30DA CEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	214	965	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 30DA CEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.6	1.3	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA CEO	4.7	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.63	1.63	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINRECORDR	UOUS
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt.Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 04 DAY 12

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

hdf

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR (SUBR SO) Form Approved

F - FINAL OMB No. 2040-0004

TOTAL FACILITY DISCHARGE

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
93	03	01	93	03	31

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	77	(15)	0		
	PERMIT REQUIREMENT	******	******	****** ******	******	******	105	DEG.F		ONCE/2 WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.6	******	7.7	(12)	0		
	PERMIT REQUIREMENT	******	******	****** ******	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.81	3.21	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT	MGD	******	******	******	****** ******		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 93 | MO 04 | DAY 12

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

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 002 S

MAJOR

(SUBR SC) JGV

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	10	01		93	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STAT 48HR ACU C ERIODAPHNIA TAA3B 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	27.6	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
LC50 STAT 48HR ACU P IMEPHALES TAA6C 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	19.3	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 02 DAY 17

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

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00153/930127-1601

Facility Name/Location if different)

NAME HERCULES INC.

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 S

MAJOR

(SUBR SC) JOW

F - FINAL

PROCESS WW & STORMWATER

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
92	10	01	93	03	31

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STAT 48HR ACU C ERIODAPHNIA TAA3B 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	*	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	***** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
LC50 STAT 48HR ACU P IMEPHALES TAA6C 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	*	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	***** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 | NUMBER 545-3450

DATE: YEAR 93 | MO 02 | DAY 17

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

*Outfall 001 is contained in Outfall 002. No sample taken

Facility Name/Location if different) Forrest

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR (SUBSO) F - FINAL PROCESS WW & STORMWATER

Form Approved OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21) 93 MO (22-23) 02 DAY (24-25) 01 TO YEAR (26-27) 93 MO (28-29) 02 DAY (30-31) 28

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	576	1162	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA CEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	168	416	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 30DA CEO	1648	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	49	132	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	660 30DA CEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	283	692	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2509 30DA CEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.7	1.5	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA CEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.48	0.75	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE 601 NUMBER 545-3450

DATE YEAR 93 MO 03 DAY 04

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

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001350

(17-19) DISCHARGE NUMBER: 002 N

MAJOR

(SUBR SO)

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
93	02	01	93	02	28

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	77	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/DAY	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.8	******	7.5	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.58	2.00	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONT RECORDER HOURS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Manager

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 03 DAY 04

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

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIM[illegible] REPORT (D[illegible])

DISCHARGE MONITORING R[illegible] (17-19) (17-19)

MAJOR

(SUBR SO[illegible])

F - FINAL

PROCESS W & STORMWATER

Form Approved

OMB No. 2040-0004

(2-16)

MS0001830	001 N
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	01	01	TO	93	01	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	545	1887	(26) LBS/DY	******	******	******	( ) **** ****	0	THREE/WEEK	COMP24
	PERMIT REQUIREMENT	1634 30DA AVG	3051		******	******	******				
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	266	861	(26) LBS/DY	******	******	******	( ) **** ****	0	THREE/WEEK	COMP24
	PERMIT REQUIREMENT	579 30DA AVG	1648		******	******	******				
OIL & GREASE (FREON EXTR.-IR METH) TOT, RG 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	39	102	(26) LBS/DY	******	******	******	( ) **** ****	0	THREE/WEEK	GRAB
	PERMIT REQUIREMENT	660 30DA AVG	990		******	******	******				
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	357	1095	(26) LBS/DY	******	******	******	( ) **** ****	0	THREE/WEEK	COMP24
	PERMIT REQUIREMENT	2500 30DA AVG	4300		******	******	******				
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.7	2.7	(26) LBS/DY	******	******	******	( ) **** ****	0	THREE/WEEK	GRAB
	PERMIT REQUIREMENT	3.3 30DA AVG	4.9		******	******	******				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.55	1.75	(03) MGD	******	******	******	( ) **** ****	0	CONTINUOUS	CONDR
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		******	******	******				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Manager

TYPED OR PRINTED

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

P.W. Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	93	02	03
AREA CODE	NUMBER	YEAR	MO	DAY

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

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

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 002 N

MAJOR (SUBR SO) F - FINAL TOTAL FACILITY DISCHARGE

Form Approved OMB No. 2040-0004

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
93	01	01	93	01	31

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	77	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.6	******	7.3	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	2.29	8.31	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 3mDA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Manager

TYPED OR PRINTED

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

P.W. Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 02 DAY 03

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

Facility Name/Location if different) Forrest

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 N

MAJOR (SUBR SO) TF

F - FINAL

PROCESS WW & STORMWATER

Form Approved OMB No. 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	92	12	01		92	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	260	889	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA SPEC	2051	LBS/DY	******	******	******	*** ****		THREE/COMP24 WEEK	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	267	753	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	679 30DA SPEC	1649	LBS/DY	******	******	******	*** ****		THREE/COMP24 WEEK	
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	32	153	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	560 30DA SPEC	956	LBS/DY	******	******	******	*** ****		THREE/GRAB WEEK	
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	193	430	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 30DA SPEC	5800	LBS/DY	******	******	******	*** ****		THREE/COMP24 WEEK	
PHENOLS 34000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.3	1.0	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.2 30DA SPEC	12.9	LBS/DY	******	******	******	*** ****		THREE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.49	0.86	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	*** ****		CONTINUOUS RECORD HOURS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 01 DAY 07

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

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

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

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MS0001830	002 N
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR SD) TF
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved
OMB No. 2040-0004

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	92	12	01	TO	92	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	79	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/GRAB WEEK	
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.6	******	7.6	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.90	2.90	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	CORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Mgr.

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	93	01	07
AREA CODE	NUMBER	YEAR	MO	DAY

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

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

01197/920122-1840

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 001 N

MAJOR

(SUBR SO) F - FINAL

PROCESS WW & STORMWATER

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

FROM YEAR (20-21)	MO (22-23)	DAY (24-25)	TO YEAR (26-27)	MO (28-29)	DAY (30-31)
93	04	01	93	04	30

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	188	348	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA CSD	3051	LBS/DY	******	******	******	**** ****		THREE/COMP24 HOUR	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	126	525	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 30DA CSD	1648	LBS/DY	******	******	******	**** ****		THREE/COMP24 HOUR	
OIL & GREASE (FREON EXTR.-IR METH) TOT.RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	21	76	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	560 30DA CSD	996	LBS/DY	******	******	******	**** ****		THREE/GRAB HOUR	
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	225	954	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 30DA CSD	3800	LBS/DY	******	******	******	**** ****		THREE/COMP24 HOUR	
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.2	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA CSD	4.9	LBS/DY	******	******	******	**** ****		THREE/GRAB HOUR	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.37	0.86	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONT INCORDR HOURS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 05 DAY 05

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

wdp

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR

(SUBR SO)

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved

JOMB No. 2040-0004

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	04	01	TO	93	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	82	(15)	0		
	PERMIT REQUIREMENT	******	******	****** ******	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.7	******	7.6	(12)	0		
	PERMIT REQUIREMENT	******	******	****** ******	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.24	2.11	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 400A C*D	REPORT	MGD	******	******	******	******		CONTINUOUS	RECORDER
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Mgr.

TYPED OR PRINTED

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

Preston Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 05 DAY 05

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

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

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
MS0001330	001 N
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	09	01	TO	93	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR
(SUBR SO) JOY
F - FINAL
PROCESS WW & STORMWATER

Form Approved
OMB No. 2040-0004

*** NO DISCHARGE |__| ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 10 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	209	460	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 300A GEO	3051	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	57	163	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 300A GEO	1649	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT,RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	12	45	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	660 300A GEO	990	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	202	454	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 300A GEO	3800	LBS/DY	******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.1	0.6	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 300A GEO	4.9	LBS/DY	******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.28	0.44	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Manager

TYPED OR PRINTED

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

PW Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
601	545-3450	93	10	08
AREA CODE	NUMBER	YEAR	MO	DAY

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

hdp

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

PAGE 1 OF

00135/930127-1601

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME HERCULES INC
ADDRESS WEST 7TH STREET
HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SD)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved
JOMB No. 2040-0004

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	09	01	TO	93	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	91	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.7	******	7.7	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.93	1.59	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDER
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Manager

TYPED OR PRINTED

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

P W Kirkendall.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 10 DAY 08

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

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR

(SUBR 500)

F - FINAL

PROCESS WW & STORMWATER

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	08	01	TO	93	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	172	271	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	1634 30DA GEO	3051		******	******	******			THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	77	165	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	579 30DA GEO	1640		******	******	******			THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT. RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	7	13	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	550 30DA GEO	990		******	******	******			THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	160	278	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	2500 30DA GEO	3800		******	******	******			THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.6	2.9	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	3.3 30DA GEO	4.9		******	******	******			THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	.43	.99	(03) MGD	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		******	******	******			CONTINUOUS	RECORDER
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Manager

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	545-3450	93	09	08

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

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00134/930127-1601

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

(2-16) PERMIT NUMBER: MS0001830

(17-19) DISCHARGE NUMBER: 002 N

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	93	08	01	TO	93	08	31

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	93	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THRICE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.8	******	7.6	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.33	4.75	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA CSU	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 09 DAY 08

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

Flowrate adjustments were made on 8/1 thru 10, 8/15, 821 due to equipment malfunction which has been corrected (new sensor)

EPA Form 3320-1 (Rev. 9-88) Previous editions may be used. (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR

(SUBR SOU

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved

JOMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	07	01	TO	93	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE | | ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	95	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.7	******	7.4	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.57	2.31	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA GEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr

TYPED OR PRINTED

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

P.W. Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE	NUMBER
601	545-3450

DATE

YEAR	MO	DAY
93	08	05

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

Flowrate adjustments due to equipment malfunction on 7/27-7/31

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR

(SUBR SO)

F - FINAL

PROCESS WW & STORMWATER

Form Approved

OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	07	01	TO	93	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	250	753	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA GEQ	3051	LBS/DY	******	******	******	**** ****		THREE/COMP24 WEEK	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	66	139	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 30DA GEQ	1646	LBS/DY	******	******	******	**** ****		THREE/COMP24 WEEK	
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	16	51	(26)	******	******	0******	( )	0		
	PERMIT REQUIREMENT	560 30DA GEQ	930	LBS/DY	******	******	******	**** ****		THREE/GRAB WEEK	
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	178	571	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 30DA GEQ	3800	LBS/DY	******	******	******	**** ****		THREE/COMP24 WEEK	
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.2	0.5	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA GEQ	4.9	LBS/DY	******	******	******	**** ****		THREE/GRAB WEEK	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.57	1.18	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	**** ****		CONTINUOUS	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt.Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

AREA CODE 601 NUMBER 545-3450

DATE

YEAR 93 MO 08 DAY 05

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

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 S DISCHARGE NUMBER

MAJOR

(SUBR SO) JOI

F - FINAL

TOTAL FACILITY DISCHARGE

Form Approved

OMB No 2040-0004

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	93	04	01		93	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STAT 48HR ACU C ERIODAPHNIA TAA3B 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	******	******	( )	100.0	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
50 STAT 48HR ACU P IMEPHALES TAA6C 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	******	******	( )	27.5	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr.

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 08 DAY 02

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

EPA Form 3320-1 (Rev. 9-88) *Previous editions may be used.* (REPLACES EPA FORM T-40 WHICH MAY NOT BE USED.)

00154/930127-1601

Facility Name/Location if different)

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
MS0001830	001 S

MAJOR
(SUBR SO)
F - FINAL
PROCESS WW & STORMWATER

Form Approved
JOMB No. 2040-0004

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR (20-21)	MO (22-23)	DAY (24-25)		YEAR (26-27)	MO (28-29)	DAY (30-31)
FROM	93	04	01	TO	93	09	30

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
LC50 STAT 48HR ACU C ERIODAPHNIa TAA3B 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	*	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
LC50 STAT 48HR ACU P IMEPHALES TAA6C 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	*	******	******	(23)	0		
	PERMIT REQUIREMENT	******	******	**** ****	10.7	******	******	PER-CENT		SEMI-ANNUAL	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall, Plt. Mgr.

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
AREA CODE	NUMBER	YEAR	MO	DAY
601	545-3450	93	08	02

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

*001 is contained in Outfall 002. No sample taken.

Facility Name/Location if different) Forrest

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR

(SUBR SO)

F - FINAL

PROCESS WW & STORMWATER

Form Approved

JOMB No. 2040-0004

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	06	01	TO	93	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	195	1165	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	1634 30DA SEO	3051		******	******	******	**** ****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	48	142	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	579 30DA SEO	1648		******	******	******	**** ****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT, RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	7	42	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	660 30DA SEO	990		******	******	******	**** ****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	129	407	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	2500 30DA SEO	3800		******	******	******	**** ****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.4	3.6	(26) LBS/DY	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	3.3 30DA SEO	4.9		******	******	******	**** ****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.35	1.27	(03) MGD	******	******	******	( ) **** ****	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX		******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Mgr.

TYPED OR PRINTED

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

P W Kirkendall

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 07 DAY 07

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

Facility Name/Location if different)
NAME HERCULES INC
ADDRESS WEST 7TH STREET
HATTIESBURG MS 39401
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001830 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SD)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved
OMB No. 2040-0004

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	06	01	TO	93	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	91	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	100	DEG.F		THREE/WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	7.0	******	7.7	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.41	2.41	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30DA CEO	REPORT	MGD	******	******	******	**** ****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
P.W. Kirkendall/Plt. Mgr.
TYPED OR PRINTED

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

P W Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 07 DAY 07

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

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

Forrest

NAME HERCULES INC

ADDRESS WEST 7TH STREET

HATTIESBURG MS 39401

FACILITY

LOCATION

ATTN: CHARLES JORDAN

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) MS0001830 PERMIT NUMBER

(17-19) 001 N DISCHARGE NUMBER

MAJOR (SUBR SD) JOB

Form Approved

OMB No. 2040-0004

F - FINAL

PROCESS WW & STORMWATER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	93	05	01	TO	93	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

*** NO DISCHARGE [ ] ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
800, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	536	819	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	1634 30DA CEO	3051	LBS/DY	******	******	******	*****		THREE/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	135	299	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	579 30DA CEO	1648	LBS/DY	******	******	******	*****		THREE/WEEK	COMP24
OIL & GREASE (FREON EXTR.-IR METH) TOT. RC 00560 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	16	41	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	630 30DA CEO	990	LBS/DY	******	******	******	*****		THREE/WEEK	GRAB
CARBON, TOT ORGANIC (TOC) 00680 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	617	949	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	2500 30DA CEO	3800	LBS/DY	******	******	******	*****		THREE/WEEK	COMP24
PHENOLS 46000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.5	2.3	(26)	******	******	******	( )	0		
	PERMIT REQUIREMENT	3.3 30DA CEO	4.5	LBS/DY	******	******	******	*****		THREE/WEEK	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.43	0.75	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	******	******	******	*****		CONTINUOUS	RECORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE		DATE		
P. W. Kirkendall/Plt. Manager	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319 (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)	Preston Kirkendall	601	545-3450	93	06	09
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

hdf

Facility Name/Location if different)
NAME HERCULES INC
ADDRESS WEST 7TH STREET
HATTIESBURG MS 39401
FACILITY
LOCATION
ATTN: CHARLES JORDAN

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

(2-16) MS0001?30 PERMIT NUMBER

(17-19) 002 N DISCHARGE NUMBER

MAJOR
(SUBR SO)
F - FINAL
TOTAL FACILITY DISCHARGE

Form Approved
JOMB No. 2040-0004

MONITORING PERIOD

FROM YEAR	MO	DAY	TO YEAR	MO	DAY
93	05	01	93	05	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

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

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TEMPERATURE, WATER DEG. FAHRENHEIT 00011 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	******	******	91	(15)	0		
	PERMIT REQUIREMENT	******	******	**** ****	******	******	105	DEG.F		THREE/DAY	GRAB
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******	( )	6.8	******	7.4	(12)	0		
	PERMIT REQUIREMENT	******	******	**** ****	6.0	******	9.0 DAILY MX	SU		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.30	1.91	(03)	******	******	******	( )	0		
	PERMIT REQUIREMENT	REPORT 30 DA AVG	REPORT	MGD	******	******	****** **** ****			CONTINUOUS	RECORDER
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

P.W. Kirkendall/Plt. Manager

TYPED OR PRINTED

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

Preston Kirkendall
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 601 NUMBER 545-3450

DATE: YEAR 93 MO 06 DAY 09

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

FLOWRATE ADJUSTMENT ON 5/9 AND 5/11 DUE TO EQUIPMENT MALFUNCTION

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

RECEIVED
DEC 16 1996
Dept. of Environmental Quality
Office of Pollution Control

December 13, 1996

Forrest

CERTIFIED MAIL - RETURN RECEIPT REQUESTED
No. Z 079 760 405

Mr. Charles Cook
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Mr. Cook:

Attached is our EPA Discharge Monitoring Report for November 1996.

Very truly yours,

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

November 19, 1996

RECEIVED
NOV 25 1996
Dept. of Environmental Quality
Office of Pollution Control

Becky Ornelas
Industrial NPDES Section
Department of Environmental Quality
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

RE: October 1996 DMR
NPDES Permit No. MS0001830

Dear Ms. Ornelas:

In reference to your 11/14/96 letter, please find enclosed the amended DMR report for October.

If I can answer any questions, please call me.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Coordinator

CSJ/vrf

Enclosure:

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

November 20, 1996

Forest

RECEIVED
NOV 27 1996
Miss. Dept. of Environmental Quality
Office of Pollution Control

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
Z 079 760 404

Mr. Charles Cook
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Cook:

The purpose of this letter is to document our 11/15/96 phone conversation addressing Phenol compliance monitoring on 11/13/96. As we discussed, because of our decreasing activities associated with Phenol and our historical Phenol compliance monitoring data, we were unresolved as to the cause of this excursion. The last Phenolic resin that we produced was on 9/25/96. We are aware that our effluent turbidity does interfere with the analysis on occassions.

If I can answer any questions, please call me at 601-545-3450, ext. 360.

Date	Phenol (lbs/day)	Permit Limit (lbs/day)
11/13/96	5.5	4.9

Yours very truly,

HERCULES INCORPORATED

Charles Jordan

Charles Jordan
Environmental Coordinator

CJ/nb

cc: Gerald Burch

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

November 20, 1996

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
Z 079 760 404

Mr. Charles Cook
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Cook:

The purpose of this letter is to document our 11/15/96 phone conversation addressing Phenol compliance monitoring on 11/13/96. As we discussed, because of our decreasing activities associated with Phenol and our historical Phenol compliance monitoring data, we were unresolved as to the cause of this excursion. The last Phenolic resin that we produced was on 9/25/96. We are aware that our effluent turbidity does interfere with the analysis on occassions.

If I can answer any questions, please call me at 601-545-3450, ext. 360.

Date	Phenol (lbs/day)	Permit Limit (lbs/day)
11/13/96	5.5	4.9

Yours very truly,

HERCULES INCORP0RATED

Charles Jordan
Environmental Coordinator

CJ/nb

cc: Gerald Burch

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

November 14, 1996

Mr. Gerald D. Burch
Plant Manager
Hercules Incorporated
P.O. Box 1937
Hattiesburg, MS 39401

Dear Mr. Burch:

Re: Hercules Incorporated
Forrest County-Hattiesburg
October 1996 DMR
NPDES Permit No. MS0001830

After reviewing your Discharge Monitoring Reports for the month of October, the following was noted:

1. The frequency of analysis, sample type, and the units were not reported. The minimum pH was not reported. Also, for temperature and pH the number of excursions was not reported.

We request that you resubmit the discharge monitoring report with all parts filled out correctly and completely on or before November 26, 1996. If you have any questions concerning this matter, please advise.

Very truly yours,

Becky Ornelas

Becky Ornelas
Industrial NPDES Section

Enclosures

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

November 14, 1996

Mr. Gerald D. Burch
Plant Manager
Hercules Incorporated
P.O. Box 1937
Hattiesburg, MS 39401

FILE COPY

Dear Mr. Burch:

Re: Hercules Incorporated
Forrest County-Hattiesburg
October 1996 DMR
NPDES Permit No. MS0001830

After reviewing your Discharge Monitoring Reports for the month of October, the following was noted:

1. The frequency of analysis, sample type, and the units were not reported. The minimum pH was not reported. Also, for temperature and pH the number of excursions was not reported.

We request that you resubmit the discharge monitoring report with all parts filled out correctly and completely on or before November 26, 1996. If you have any questions concerning this matter, please advise.

Very truly yours,

Becky Ornelas

Becky Ornelas
Industrial NPDES Section

Enclosures

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

November 5, 1996

Certified Mail - Return Receipt Requested
Z 079 760 357

Mrs. Willie M. Ashford
129 West 8th Street
Hattiesburg, MS 39401

Dear Mrs. Ashford

On Wednesday, October 30, 1996, you called Hercules indicating that you were unable to occupy your house due to the alleged presence of contaminants which were causing you health problems. Robert Jones and I responded to your allegations by visiting your home with you that afternoon. We walked through and around your home and found no evidence of any contaminants or odors related to our plant operations.

You showed us a letter from Dr. Dorothy Gillespie alleging that your condition was "due to the chemical fumes caused by the nearby plant." However, you also indicated that Dr. Gillespie had neither visited your home nor provided any viable evidence linking your condition with any fumes from our site.

You asked that Hercules pay to clean your home and provide you with an air purifying machine. At that time, I told you that we would not accept your allegations without further investigation. Upon further review of your allegations, we find no evidence that Hercules has caused your health problems and on behalf of Hercules, I must deny your request to have your home cleaned and provide an air purification machine.

It remains our desire to be a responsible and responsive neighbor and we regret any misperception or misunderstanding you may have regarding the cause of your health problems.

Sincerely,

HERCULES INCORPORATED

Gerald D. Burch
Plant Manager

BU

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

November 5, 1996

RECEIVED
NOV - 8 1996
Bureau of Environmental Quality
Bureau of Pollution Control

Certified Mail - Return Receipt Requested
Z 079 760 356

Mr. Charles Cook
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Mr. Cook:

Attached is our EPA Discharge Monitoring Report for October, 1996.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/vrf

Attachment:

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

October 31, 1996

CERTIFIED MAIL - RETURN RECEIPT REQUESTED
No. Z 079 760 433

RECEIVED
NOV - 4 1996
Dept. of Environmental Quality
Office of Pollution Control

Mr. Charles Cook
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Forrest

Dear Mr. Cook:

The purpose of this letter is to document our 10/28/96 phone conversation.

On 10/25/96 we experienced approximately 5 inches of rainfall. As a result of this excessive amount of rainfall over a short time period, coupled with the cleaning of our equalization tank, we estimate the following amount of primary wastewater bypassing secondary treatment in order to prevent basin overflow.

		TOC		
ITEM	MGD	mg/l	lbs/day	Permit Limit
10/25/96 (1,080 gpm x 90 minutes)				
Bypass	0.10	70	58	
Outfall 001	1.31	42	459	
Total	1.41		517	3,800

If I can answer any additional questions, please call me at 601-545-3450, Ext. 360.

Very truly yours,

Charles Jordan

Charles Jordan
Environmental Coordinator

cc: G. D. Burch, Plant Manager

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

October 16,1996

Mr.Rickey Haganson
1051 Purvis oloh Rd.
Purvis, Ms.39475

RE: Odor and color problem on the Bowie River 9/7/96

Dear Mr. Haganson,

Our regional office investigated the area of the Bowie River that you are concerned about. Recent photographs from the near-by industrial discharge confirmed a milky blue color that you mentioned in your complaint.

We are aware of the problem, and will address it in the reissuance of the permit of the industrial source. We anticipate that the revised permit will have stricter limits which will be more protective of the receiving stream and prevent the problem you reported.

Thank you for your help in this matter. If you have any questions, please feel free to contact me, (601) 961-5087.

Sincerely,

Charles E Cook

Charles E.Cook,P.E.

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

October 8, 1996

Certified Mail - Return Receipt Requested
Z 079 760 432

Mr. Charles Cook
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Mr. Cook:

Attached is our EPA Discharge Monitoring Report for August 1996.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

HERCULES

RECEIVED
OCT - 9 1996
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

October 8, 1996

Certified Mail - Return Receipt Requested
Z 079 760 432

Mr. Charles Cook
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Mr. Cook:

Attached is our EPA Discharge Monitoring Report for September 1996.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

October 7, 1996

CERTIFIED MAIL - RETURN RECEIPT REQUESTED
No. Z 079 760 431

Forwarded

Mr. Charles Cook
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

RECEIVED
OCT - 9 1996
Dept. of Environmental Quality
Office of Pollution Control

Dear Mr. Cook:

The purpose of this letter is to document our 9/30/96 phone conversation and also reference our previous conversation addressing the cleaning of our equalization tank.

On 9/21/96 we experienced approximately 2 inches of rainfall and on 9/27/96 we experienced approximately 3 inches of rainfall. As a result of this excessive amount of rainfall over a short time period, coupled with the cleaning of our equalization tank, we estimate the following amount of primary wastewater bypassing secondary treatment in order to prevent basin overflow.

		TOC		
ITEM	MGD	mg/l	lbs/day	Permit Limit
9/21/96 (1,080 gpm x 120 minutes)				
Bypass	0.13	134	145	
Outfall 001	0.94	30	235	
Total	1.07		380	3,800
9/27/96 (1,080 gpm x 60 minutes)				
Bypass	0.07	45	26	
Outfall 001	0.96	14	112	
Total	1.03		138	3,800

If I can answer any additional questions, please call me at 601-545-3450, Ext. 360.

Very truly yours,

Charles Jordan

Charles Jordan
Environmental Coordinator

cc: G. D. Burch, Plant Manager

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

October 4, 1996

RECEIVED
OCT - 9 1996
Dept. of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. Z 079 760 429

Mr. Charles Cook
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209-0385

Dear Mr. Cook:

Attached is our Semi-Annual Bioassay report for 96/04/01 to 96/09/30.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

BU

file: Hercules, Forrest Co.

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

M E M O R A N D U M

TO: STEVE SPENGLER

FROM: ERROL WHITE

SUBJECT: HERCULES DISCHARGE COMPLAINT - FORREST COUNTY

DATE: SEPTEMBER 11, 1996

After reading the attached complaint I suspected that complainant was referring to Hercules' discharge.

While in Hattiesburg on the above date I visited the discharge site to re-enforce my mental image of the effluent stream.

Photo 1 - Hercules' discharge as it crosses Highway 42.

Photo 2 - Discharge stream 50 feet prior to entering the Bowie River.

Photo 3 - Plume of discoloration left after mixing the effluent with the river's water.

Good luck with trying to change permit requirements.

If you have any questions or comments, please call.

ERROL WHITE

HERCULES DISCHARGE COMPLAINT - FORREST COUNTY
SEPTEMBER 11, 1996



PHOTO #1 - Hercules discharge, Highway 42



PHOTO #2 - Hercules discharge prior to Bowie River

HERCULES DISCHARGE COMPLAINT - FORREST COUNTY
SEPTEMBER 11, 1996



PHOTO #3 - Hercules discharge into Bowie River

- 875-1583

Form 101

State of Mississippi
Department of Natural Resources
BUREAU OF POLLUTION CONTROL
P.O. Box 10385
Jackson, Mississippi 39209

COMPLAINT FORM

Sept 10 (Date) 2:30 PM (Time) ☐ Air ☑ Water

Person Reporting: ☑ Mr. ☐ Mrs. Rickey Hagenson

Address: 1051 Purvis Oloh Road (Street or P.O. Box) Purvis (City) Ms. 39475 (County) Phone -795-2286(W) 794-2843(H

Complaint Site: Gravel pit that Bowie River Goes through

Text of Complaint: Very strong ammonia smell, made the water green. Temp of water 4-5 degrees higher than upriver, Mr. Hagenson was on a fishing trip. Saturday night Sept 7th 5:00 PM - 3:00 AM. Green solution coming out of creek.

875-1583

Complaint Taken By: Charles Cook
Name

☐ North Regional Office
☐ Central Regional Office
☑ South Regional Office

Other Vernon Hartley

Referred By: ☑ Phone ☐ Mail ☐ Courier

Routed To R.O. By: C Cook Date 9-10-96

Resolution: - Referred to SRO

875-1583

HERCULES

RECEIVED
AUG 12 1996
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

August 9, 1996

CERTIFIED MAIL - RETURN RECEIPT REQUESTED
No. Z 060 871 932

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for July 1996.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

HERCULES

RECEIVED
AUG - 5 1996
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

August 2, 1996

CERTIFIED MAIL - RETURN RECEIPT REQUESTED
No. Z 079 760 377

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Mr. Beasley:

Attached is a copy of our June 1996 DMR for outfall 002. The flowrate data was inadvertently omitted on the original report. Please excuse this inconvenience. If I can answer any questions, please call me at 601-545-3450, Ext. 360.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan

Charles Jordan
Environmental Coordinator

CSJ/nb

Enclosure

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

July 12, 1996

RECEIVED
JUL 15 1996
Dept. of Environmental Quality
Office of Pollution Control

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
Z 060 871 925

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley,

Attached is our EPA Discharge Monitoring Report for June 1996.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CJ/nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

June 6, 1996

RECEIVED
JUN 10 1996
Dept. of Environmental Quality
Office of Pollution Control

Z 079 760 384
Certified Mail
Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley,

Attached is our EPA Discharge Monitoring Report for May 1996.

Very truly yours,

HERCULES INCORPORATED

CHARLES JORDAN
Environmental Coordinator

CSJ:nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

May 10, 1996

RECEIVED
MAY 13 1996
Dept. of Environmental Quality
Office of Pollution Control

Z 079 760 380
Certified Mail
Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley,

Attached is our EPA Discharge Monitoring Report for April 1996.

Very truly yours,

HERCULES INCORPORATED

CHARLES JORDAN
Environmental Coordinator

CSJ:nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

May 10, 1996

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
Z 079 760 379

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

RECEIVED
MAY 14 1996
Dept. of Environmental Quality
Office of Pollution Control

Dear Mr. Beasley,

The purpose of this letter is to inform you that on 4/5/96 we experienced approximately 3 inches of rainfall over a short time period. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (1,080 gpm x 190 min.) bypassing secondary treatment in order to prevent basin overflow.

Item	MGD	TOC mg/l	TOC lbs/day	Permit Limit
Bypass	0.20	52	87	
Outfall 001	0.81	149 (est)	1,007	3,800
Total	1.01		1,094	

If I can answer any additional questions, please let me know.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CJ/nb

cc: Gerald Burch, Plant Manager

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

April 29, 1996

RECEIVED
MAY - 2 1996
Dept. of Environmental Quality
Office of Pollution Control

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
Z 079 760 376

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley,

The purpose of this letter is to document our 4/23/96 phone conversation addressing Phenol compliance monitoring. As we discussed, some additional investigations were conducted before mailing this response. Please note that subsequent NPDES permit compliance monitoring results for Phenol have been within our permit limit.

Because of our decreasing activities associated with Phenol and our historical Phenol compliance monitoring data, we were unresolved as to the cause of this excursion. Our initial investigation did not resolve the issue. We do have some additional investigative gas chromatography/mass spectrometry studies underway which have not been completed.

If I can answser any questions please call me at 601-545-3450, ext. 360.

Date	Phenol (lbs/day)	Permit Limit (lbs/day)
4/15/96	8.5	4.9
4/16/96	5.8	
4/17/96	6.2	

Yours very truly,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CJ/nb
cc: Gerald Burch

FORREST

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

April 24, 1996

Mr. Charles Jordan, Environmental Coordinator
Hercules Incorporated
P. O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Jordan:

Re: Permit Application No. MS0001830
Date Received - April 18, 1996

Pursuant to State Law, this is to acknowledge receipt of your permit application.

Sincerely,

Harriette Payne, Secretary
Industrial Wastewater Control Branch

HP
cc: Nona Yates, DEQ/OPC
Jerry Beasley, DEQ/OPC ← THIS COPY FOR

HERCULES

RECEIVED
APR 18 1996
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

April 17, 1996

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
Z 079 760 369

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

RE: Reissuance of NPDES Permit No. MS0001830;
SNOI and SWPPP for Stormwater general permit application; and
POTW permit application;
Hercules Incorporated.

Dear Mr. Beasley,

With reference to your October 18,1995 letter, please find the enclosed duplicate application(s) for 1.) The reissuance of NPDES Permit No. MS0001830, 2.) SARA notice of intent and stormwater pollution prevention plan for Stormwater general permit application, and 3.) POTW permit application.

I. Reissuance of NPDES Permit No. MS0001830

We have submitted the application in a format consistent with past agreed upon submittals, and consistent with data generated from our current NPDES permit monitoring requirements. For example, current permit monitoring requirement data on a net basis are used to complete the application.

Because of the complexity of the many diversified operations, producing over 100 distinct products, we have considered submitting "form 2C-III production" three different ways. Some of the products are somewhat seasonal while others are not. In general all products produced are based entirely on supply and demand.

The form 2C-III production submitted for average daily production would be simply the annual productions divided by 365 days and is not representative of actual daily production rates (ie, 894,853 lbs/day).

Another past submittal of form 2C-III production was actual production for different products based on an actual maximum monthly production divided by 30 days. Again these rates were biased low because very few operations are continuously operating at capacity over the extended period of an entire month (ie, 1,182,343 lbs/day).

The attached form 2C-III production is the maximum production capability (capacity). With few exceptions, these maximum production capacities have both been demonstrated and produced on a daily basis. This is the rational basis for our past permit submittals (ie, 3,078,720 lbs/day capacity).

Based on the above support data and with reference to 40 CFR 122.45 (b) (2) (ii)(A)(1), we respectfully request the more representative data shown in form 2C-III be used for actual production. We are certainly willing to discuss these various alternatives in more detail at your convenience.

We also respectfully request that the "net basis" for effluent monitoring be discontinued for the following reasons. Historical data clearly indicates the influent contribution to our effluent discharge is very minimal and probably averages around one percent. Therefore, we are requesting to drop the "net basis" calculation and eliminate analytical costs associated with these analyses.

II. SNOI and SWPPP for Stormwater general permit application

We have submitted the SARA notice of intent and Stormwater pollution prevention plan for Stormwater general permit application. We contracted the services of Eco-systems, Inc., Jackson, MS for the Stormwater SARA Title III, Section 313 General Permit.

III. POTW permit application

We have submitted the application for POTW permit to discharge our primary treated effluent (PTE) to the city POTW. Discharge to the city POTW would be in lieu of secondary treatment (activated carbon adsorption) and direct discharge covered by our NPDES permit.

We are anxious to discuss these various options with you at your earliest convenience. Please call me at 601-584-3360 if you have any questions.

Yours very truly,

HERCULES INCORPORATED

Charles Jordan

Charles Jordan
Environmental Coordinator

CJ/nb

cc: Earl Mahaffey
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

April 12, 1996

RECEIVED
APR 18 1996
Dept. of Environmental Quality
Office of Pollution Control

Z 079 760 371
Certified Mail
Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley,

Attached is our EPA Discharge Monitoring Report Bioassay results for the period 95/10/01 to 96/03/31.

Veru truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

April 12, 1996

RECEIVED
APR 18 1996
Dept. of Environmental Quality
Office of Pollution Control

Z 079 760 370
Certified Mail
Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley,

Attached is our EPA Discharge Monitoring Report for March 1996.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 4
345 COURTLAND STREET, N.E.
ATLANTA, GEORGIA 30365

MAR 27 1996

CERTIFIED MAIL - P 535-999-163
RETURN RECEIPT REQUESTED

REF: 4WM-WPEB

Mr. Gerald D. Burch
Plant Manager
Hercules Incorporated
W. 7th Street
Hattiesburg, MS 39401

SUBJ: Compliance Evaluation Inspection
NPDES Permit No. MS0001830

Dear Mr. Burch:

This office would like to thank your staff for assistance during the Compliance Evaluation Inspection of the Hercules Incorporated wastewater treatment facility on March 5, 1996. The inspection results have been summarized for the facility in the enclosed National Pollutant Discharge Elimination System (NPDES) Compliance Inspection Report.

If you have any questions as to the requirements of the permits, or the inspection results, please contact Ms. Jane Spann at (404) 347-4793, extension 4251.

Sincerely,

David E Olson

David Olson, Chief
AL/MS/GA Unit
Enforcement Section
Water Permits and Enforcement Branch
Water Management Division

Enclosures

cc: Mississippi Department of Environmental Quality

HERCULES

RECEIVED
MAR 20 1996
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

March 18, 1996

Z 079 760 364
Certified Mail
Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

The purpose of this letter is to document our 3/15/96 phone conversation. On 3/14/96 at approximately 9 p.m. we developed a leak in a caustic line which is actually used to adjust pH in our wastewater treatment area. As a result of this upset/equipment malfunction, some caustic was inadvertently introduced into our treatment system "after pH adjustment".

During the time required to determine the upset and to correct it, our discharge pH ranged from 9.0 to 9.4 from 9 p.m. to 10:20 p.m. During this time our discharge rate was approximately 400 gpm.

If I can answer any additional questions please call me at 601-584-3360.

Very truly yours,

Charles Jordan
Environmental Coordinator

CSJ/nb

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

March 7, 1996

No. Z 079 760 343
Certified Mail - Return Receipt Requested

RECEIVED
MAR 12 1996
Dept. of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for February, 1996.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ/vrf

Attachment:

SCB

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

March 5, 1996

Certified Mail - Return Receipt Requested
No. Z 079 760 352

RECEIVED
MAR - 8 1996
MDL of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

The purpose of this letter is to inform you that on 2/27/95 we experienced over 3-1/2 inches of rainfall over a short time period. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (2,610 gpm x 115 min.) bypassing secondary treatment in order to prevent basin overflow.

		TOC		
Item	MGD	mg/l	lbs/day	Permit Limit
Bypass	0.30	125	312	
Outfall 001 (net)	0.67	109	609	3,800
Total	0.97		921	

As a result of this same rainfall event, we collected approximately 70,000 gallons of process wastewater and mostly excess rainfall overflow into additional sump containment in the Neuphor process area. With the sump capacity being 100% utilized, and coupled with storm water runoff from prior solids removal in the area, we estimate the loading in the runoff/overflow from this area, as a result of this rainfall event, as 6,000 gal. x 8.34 x 21 mg/l = 1 lb. of T.O.C.

If I can answer any additional questions, please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ/nb

cc: G. D. Burch, Plant Manager

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

February 21, 1996

Z 079 760 347
Certified Mail
Return Receipt Requested

RECEIVED
FEB 26 1996
Dept. of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for January 1996.

Very truly yours,

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

January 5, 1996

Z 079 760 335
Certified Mail
Return Receipt Requested

RECEIVED
JAN 10 1996
Dept. of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley,

Attached is our EPA Discharge Monitoring Report for December 1995.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Coordinator

CSJ/nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

December 18, 1995

No. Z 079 760 396
Certified Mail - Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

RECEIVED
DEC 19 1995
Dept. of Environmental Quality
Office of Pollution Control

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for November, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ/vrf

Attachment:

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

November 8, 1995

No. Z 079 760 391
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

RECEIVED
NOV - 9 1995
Dept. of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

The purpose of this letter, as discussed in our November 2, 1995 phone conversation, is to inform you that on November 2, 1995, we experienced approximately 2-3/4 inches of rainfall over a short time period. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (2,610 gpm x 75 mm) bypassing secondary treatment in order to prevent basin overflow.

		TOC		
ITEM	MGD	Mg/L	lbs/day	Permit Limit
Bypass	0.19	41	67	
Outfall 001 (net)	1.09	35 (est.)	318	3,800 lbs/day
Total			385	

As a result of this same event, back pressure on a full underground industrial sewer line connection resulted in some leakage for approximately 30 minutes. The line is being inspected for any restrictions and the connection is being properly sealed.

If I can answer any questions, please call me at (601) 545-3450

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ/vrf
Attachment:

cc: G. D. Burch, Plant Manager

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

OCTOBER 13, 1995

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

RECEIVED
NOV 2 1 1995
Dept. of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for October 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:nb

Attachment

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

October 18, 1995

Mr. Charles Jordan
Hercules, Incorporated
P. O. Box 1937
Hattiesburg, Mississippi 39403-1937

Dear Mr. Jordan:

Re: NPDES Permit No. MS0001830

As you are aware, the referenced permit issued to Hercules, Incorporated expires on October 21, 1996. Part II.B.12 of the permit requires the permittee to submit the enclosed application forms 180 days prior to the current permit expiration date, if you wish to continue to discharge wastewater into waters of the state.

Form 1, 2C and 2F should be completed in duplicate and returned to our office by April 21, 1996. Both forms require signature by a corporate office of at least the level of vice-president. If the facility, for which application is being made, employs more than 250 personnel or has gross annual sales or expenditures exceeding $25 million, the manager of that facility may sign the application on behalf of the corporation.

If you have any questions, please advise.

Respectfully,

J. B.

Jerry Beasley
Industrial NPDES Section

JB:je
Encl.

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

October 10, 1995

RECEIVED
OCT 12 1995
Dept. of Environmental Quality
Office of Pollution Control

No. Z 079 760 323
Certified Mail - Return Receipt Requessted

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for September 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:nb

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

September 6, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 320

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for August, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

September 6, 1995

RECEIVED
SEP 11 1995
Dept. of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. Z 079 760 319

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our Semi-Annual Bioassay report for 95/04/01 to 95/09/30.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

August 15, 1995

RECEIVED
AUG 18 1995
Dept. of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. Z 079 760 318

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

The purpose of this letter is to comply with your July 28, 1995 request addressing our June 22, 1995 NPDES compliance inspection report.

The referenced thermometers will be calibrated and records maintained for a minimum of three years. If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

RECEIVED
AUG 17 1995
Dept. of Environmental Quality
Office of Pollution Control

August 11, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 294

Mr. Jerry Beasley
Bureau of Pollution Control
P. O.Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for July, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachments

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

August 9, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 293

RECEIVED
AUG 10 1995
Dept. of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

The purpose of this letter is to inform you that on 8/4/95 we experienced approximately 3-1/2 inches of rainfall over a very short time period. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (2,610 gpm x 150 min.) bypassing secondary treatment in order to prevent basin overflow.

Item	MGD	TOC mg/l	TOC lbs/Day	Permit Limit
Bypass	0.39	91	296	
Outfall 001 (net)	0.48	85 est.	340	3,800
Total	0.87		636	

As a result of this same event we collected approximately 70,000 gallons of excess process wastewater and rainfall overflow into additional sump containment. On 8/7/95, as reported by phone, while pumping this excess back into our industrial wastewater system approximately 6,500 gallons was inadvertently pumped into the storm sewer. This was promptly corrected and the remainder pumped into our wastewater system. We estimate the loading to be 6,500 gal. x 8.34 x 21 mg/l = 1 lb. of T.O.C.

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
cc: G. D. Burch, Plant Manager

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

August 1, 1995

Mr. P. W. Kirkendall
Hercules, Inc.
P. O. Box 1937
Hattiesburg, Mississippi 39401-1937

Dear Mr. Kirkendall:

Re: NPDES Permit No. MS0001830

Enclosed is a copy of the NPDES Compliance Monitoring Inspection Report that was performed at Hercules, Inc. on November 14, 1994. The results of this inspection should be used by you as a guide for complying with requirements found in your NPDES permit.

If you have any questions concerning this matter, please contact us at 961-5171.

Sincerely,

J. B.

Jerry Beasley
Industrial NPDES Section

JB:ap
Enclosure
cc: SRO
Mr. Paul Zetterholm (w/enclosure)
Ms. Yvonne Martin, EPA (w/enclosure)

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

FILE COPY

July 28, 1995

Mr. P. W. Kirkendall
Hercules, Inc.
P. O. Box 1937
Hattiesburg, Mississippi 39401-1937

Dear Mr. Kirkendall:

Re: NPDES Permit No. MS0001830

Enclosed is a copy of the NPDES Compliance Evaluation Inspection Report that was performed at Hercules, Inc. on June 22, 1995. The results of this inspection should be used by you as a guide for complying with requirements found in your NPDES permit.

Please review the enclosed report and notify us by August 15, 1995, of what actions will be taken to correct the deficiency noted.

If you have any questions concerning this matter, please contact us at 961-5171.

Sincerely,

J. B.

Jerry Beasley
Industrial NPDES Section

JB:ap
Enclosure
cc: SRO
Mr. Paul Zetterholm (w/enclosure)
Ms. Yvonne Martin, EPA (w/enclosure)

HERCULES

RECEIVED
AUG - 1 1995
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

July 13, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 287

Mr. Jerry Beasley
Bureau of Pollution Control
P O Box 10385
Jackson MS 39209

Dear Mr. Beasley:

The purpose of this letter is to inform you that on 7/26/95 we experienced approximately 2 inches of rainfall in less than one hour. As a result of this amount of rainfall coupled with an electrical storm/power failure, we estimate the following amount of primary wastewater (2610 G.P.M. x 30 min.) Bypassing secondary treatment in order to prevent basin overflow.

		TOC		Permit
Item	MGD	mg/l	lbs/Day	Limit
Bypass	0.08	74	49	
Outfall 001(net)	0.38	30	89	3,800
Total	0.46		138	

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

cc: G. D. Burch, Plant Manager

HERCULES
CHEMICAL SPECIALTIES

INTEROFFICE MEMO

RECEIVED
JUL 13 1995
Dept. of Environmental Quality
Office of Pollution Control

July 10, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 285

Mr. Jerry Beasley
Bureau of Pollution Control
P. O.Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for June, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachments

RECEIVED
JUN 12 1995
Dept. of Environmental Quality
Office of Pollution Control

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

June 7, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 282

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for May, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

May 5, 1995



Certified Mail - Return Receipt Requested
NO. Z 079 760 274

Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for April, 1995.

Very truly yours,

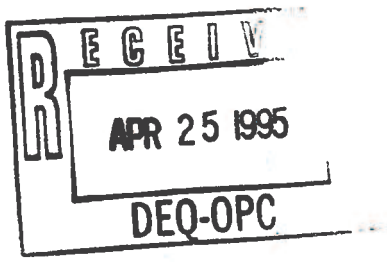
Charles S. Jordan
Environmental Supervisor

CSJ:mcl

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

April 20, 1995



Certified Mail - Return Receipt Requested
No. Z 079 760 273

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

During a recent review of our monthly EPA Discharge Monitoring Report (DMR), the following determination was made, and we are submitting the following revised DMR's.

During August, 1994, (DMR attached) we reported in the comment section some inconsistent flowrate measurements. We have since determined that although the flowrate recorder indicator reading and the flowrate flume measurement comparisons were acceptable, there was a mechanical problem with the flow totalizer recorder which has been corrected. The flowrate which was inconsistent (slightly under-reported on occasions) was determined to the Outfall 002. Outfall 001 is the flowrate used in all mass calculations in our permit and Outfall 002 is a reported value. Outfall 002 consists of Outfall 001 plus some possible non-contact cooling water plus some possible storm water.

Our final conclusions were as follows: Outfall 001 was not over-reported. Outfall 001 which is used in all mass calculations was indeed correct. Outfall 002 was actually under-reported.

Further review of DMR records indicate that this same sporadic totalizer malfunction also occurred on occasions in April, May and June of 1994, and was not documented in the comment section.

Please find the following revised DMR's for April, May and June, 1994, in which all mass calculations remain the same (see previous comments). The same statement that appears in the August, 1994 DMR comment section has been added to these revised reports.

In order to prevent a reoccurrence of this situation, additional procedures have been put in place to detect obvious totalizer malfunctions as compared to instantaneous flowrate indicator readings and flume measurements.

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:ml

cc: Gerald Burch, Plant Manager

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

April 20, 1995



Certified Mail - Return Receipt Requested
No. Z 079 760 273

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

During a recent review of our monthly EPA Discharge Monitoring Report (DMR), the following determination was made, and we are submitting the following revised DMR's.

During August, 1994, (DMR attached) we reported in the comment section some inconsistent flowrate measurements. We have since determined that although the flowrate recorder indicator reading and the flowrate flume measurement comparisons were acceptable, there was a mechanical problem with the flow totalizer recorder which has been corrected. The flowrate which was inconsistent (slightly under-reported on occasions) was determined to the Outfall 002. Outfall 001 is the flowrate used in all mass calculations in our permit and Outfall 002 is a reported value. Outfall 002 consists of Outfall 001 plus some possible non-contact cooling water plus some possible storm water.

Our final conclusions were as follows: Outfall 001 was not over-reported. Outfall 001 which is used in all mass calculations was indeed correct. Outfall 002 was actually under-reported.

Further review of DMR records indicate that this same sporadic totalizer malfunction also occurred on occasions in April, May and June of 1994, and was not documented in the comment section.

Please find the following revised DMR's for April, May and June, 1994, in which all mass calculations remain the same (see previous comments). The same statement that appears in the August, 1994 DMR comment section has been added to these revised reports.

In order to prevent a reoccurrence of this situation, additional procedures have been put in place to detect obvious totalizer malfunctions as compared to instantaneous flowrate indicator readings and flume measurements.

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:ml

cc: Gerald Burch, Plant Manager

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

April 18, 1995

RECEIVED
APR 19 1995
Dept. of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. Z 079 760 272

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Please find the following documentation of our 4/12/95 phone conversation. During the unplugging of an industrial wastewater line on 4/11/95, an estimated 300 to 400 gallons of wastewater was inadvertently discharged onto the roadway. A portion of this eventually made its way to the storm sewer.

Based on typical values the following estimate can be calculated.

	Flow	loading		Permit Limit
Source	MGD	mg/l	lbs/day	lbs/day
Outfall 001	1.01	105	884	
line	0.0004	800 (est)	3 (est)	
Total	1.0104	-	887	3,800

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

cc: G. Burch

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

April 13, 1995

RECEIVED
APR 14 1995
Dept. of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. Z 079 760 268

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Following our 4/12/95 phone conversation please find the following request.

During September, 1994, we did not meet our bioassay permit conditions. Our bioassay past history is one of favorable results. On January 26, 1995, you requested we implement a toxicity reduction evaluation plan (TRE) to reduce the toxicity to safe levels. On March 1, 1995, we reported what we believe may have caused this problem and also reported a subsequent permit requirement for bioassay testing which resulted in 100% survival.

Based on past history, our investigations, and the subsequent 100% survival test, a TRE would not be applicable in this case.

We are respectfully requesting that we do not have to conduct a TRE at this time. Please let me know your determination.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

cc: Gerald Burch

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

RECEIVE
APR -7 1995
DEQ-OPC

April 6, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 271

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for March, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

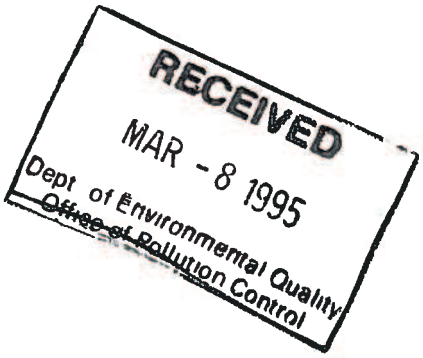
CSJ:mcl

Attachment

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

March 7, 1995



Certified Mail - Return Receipt Requested
No. Z 079 760 270

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for February, 1995.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

March 1, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 264

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report Bioassay results for the period 10/1/94 to 3/31/95.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

March 1, 1995

Certified Mail - Return Receipt Requested
No. Z 079 760 269



Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Please find the following response to your 1-26-95 letter addressing our September, 1994, bioassay.

Attached under separate cover are our subsequent NPDES permit bioassay results for February, 1995. No mortality was observed during the tests.

Investigations following the September, 1994, bioassay indicate those results were apparently due to a recent change in the carbon supply for our carbon adsorption wastewater treatment system. This carbon supply is no longer being used. As evidenced by the subsequent February, 1995, bioassay, the problem has been corrected.

If I can answer any additional question please call me at 601-545-3450.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
Attachments

HERCULES

Hercules Incorporated
613 West 7th Street
P.O. Box 1937
Hattiesburg, MS 39403-1937
(601) 545-3450
Fax: (601) 584-3226

February 16, 1995



Certified Mail - Return Receipt Requested
NO. Z 079 760 263

Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

On February 14, 1995, a leaking process cooler resulted in the contamination of our 700,000 gallon service water system with approximately 110 lbs. of a water soluble product - Paracol 815N. Upon pump out of our service water system into our industrial wastewater treatment system we estimate a maximum 22 lbs. of TOC overflow into our plant discharge.

	MGD	Lbs. TOC	Permit Limit
Outfall 001	0.70	193	3800
Overflow (max.)	0.14	22	
TOTAL	0.84	215	

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

HERCULES
CHEMICAL SPECIALTIES

Hercules Incorporated
Hattiesburg, MS 39403-1397
(601) 545-3450

RECEIVED
FEB 13 1995
Dept of Environmental Quality
Office of Pollution Control

February 9, 1995

No. Z 079 760 262
Certified Mail - Return Receipt Requested

Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39289-0385

Dear Mr. Beasley:

Re your 1/13/95 letter addressing DMR QA program study No. 14, please find the following response. Hercules does not run total phenolics. We contract T. J. Culpepper Testing Lab for this analysis. The results along with your letter were sent to Culpepper on 1/19/95. We have been unable to obtain a response.

Starting March 1, 1995, Hercules will no longer use this service. Effective March 1, 1995, we will contract total phenolics analysis with Bonner Analytical Testing Company.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

FILE COPY

January 26, 1995

CERTIFIED MAIL NO. Z 200 269 528

Mr. Charles Jordan
Hercules Incorporated
P. O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Jordan:

Re: NPDES Permit No. MS0001830

Review of your bioassay results submitted in September, 1994, revealed that your facility was out of compliance with its permit limitations. The following violations were noted:

Parameter	Permit Conditions	Reported Value	Deviation
Ceriodaphnia dubia Acute 48 hr. LC50	10.7%	0.4%	10.3%
Pimephales promelas Acute 48 hr. LC50	10.7%	2.5%	8.2%

Part III.D.4. of the referenced permit states that if the results of any 48-hour definitive toxicity test reveals that the LC50 is less than 10.7%, then implementation of a Toxicity Reduction Evaluation Plan to reduce the toxicity to safe levels. Therefore, we are requiring that this plan be submitted to our office by March 31, 1995. If you have any questions, please advise.

Respectfully,

J. B.

Jerry Beasley
Industrial Wastewater Control Branch

JB:ap
cc: Mr. Paul Zetterholm, MSDEQ/OPC

FILE COPY

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

January 13, 1995

Mr. Charles Jordan
Hercules Incorporated
P. O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Jordan:

Re: 1994 DMR QA Program
Study No. 014

Early in 1994 Hercules Incorporated was sent a set of NPDES laboratory performance samples and directed to complete the analysis for those parameters requiring monitoring under the terms and conditions of your NPDES permit. The results of the analyses were sent to the Bionetics Corporation, Cincinnati, Ohio. Bionetics has informed us that the following results were outside the range of acceptability:

Parameter	Reported Value	True Value	Acceptance Limits
Total Phenolics	0.062 mg/L	0.177 mg/L	0.0944-0.26 mg/L

This program is intended to help both Hercules Incorporated and the regulatory authorities determine where the facility may be having analytical problems. The above results in no way represent a violation of your permit limitations. However, we request that you review your analytical procedures for these parameters and determine the reasons for the unacceptable results and notify us in writing of your findings not later than February 3, 1995. Additionally, please include a description of the improvements or modifications which may be needed with a schedule of implementation. If you have any questions, please contact Mr. Phillip Bass, DMR QA State Coordinator, Mississippi Office of Pollution Control at 601-961-5143.

Sincerely,

J. KB

Jerry Beasley
Industrial Wastewater Control Branch

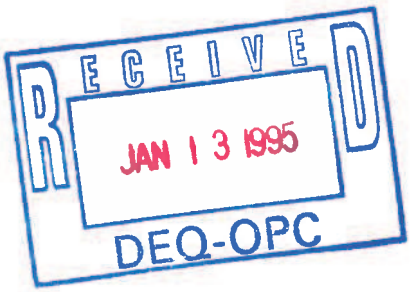
JB:ap
Enclosure
cc: Ms. Yvonne Martin, EPA
Mr. Phillip Bass
DMR/QA File

JCB

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

January 10, 1995

Certified Mail - Return Receipt Requested
No. Z 060 871 913



Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

Re your request please find the support data for our 8/30/94 bioassay. Also attached are data from a 9/30/94 bioassay.

If I can answer any additional questions please call me at 601-545-3450

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

December 7, 1994

RECEIVED
DEC - 8 1994
Dept. of Environmental Quality
Office of Pollution Control

No. Z 060 871 910
Certified Mail - Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for November, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

November 10, 1994

RECEIVED
NOV 18 1994
Dept of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. Z 060 871 907

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

Please find the attached carbon regeneration furnace letter.

Very truly yours,

Charles S. Jordan

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

November 10, 1994

Mississippi Department of
Environmental Quality
Office of Pollution Control
P. O. Box 10385
Jackson, MS 39289-0385

Dear Sirs:

On Oct. 7, 1994, the fluidized bed carbon furnace began cool-down after a 39 day run. Cool-down was completed the evening of Oct. 9, with repair work to return the furnace to operation beginning the morning of Oct. 10. The repair work was completed on the evening of Oct. 21, with an unsuccessful attempt to light the furnace on Oct. 22. The instrumentation malfunction was corrected the evening of Oct. 24, with the furnace successfully lit at that time. During the day of Oct. 25, carbon was induced into the furnace without complete fluidization and the bed was burned off again the evening of Oct. 26, with cool-down completed the evening of Oct. 27. The bottom plate was removed, cleaned and replaced with work completed and start-up begun again on Nov. 3, during the day shift. The bed fluidized properly and the furnace is presently running well.

The instrumentation malfunction and the failure of the bed to fluidize delayed the furnace start-up and prevented us from maintaining our normal furnace regeneration schedule. Therefore, I am notifying you of this variance from our normal operating schedule.

Sincerely,

HERCULES INCORPORATED

H. Haden Jones
Plant Engineer

HHJ/vrf

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

November 9, 1994

RECEIVED
NOV 14 1994
DEQ-OPC

Certified Mail - Return Receipt Requested
No. Z 060 871 906

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for October, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

October 5, 1994

Certified Mail - Return Receipt Requested
No. Z 060 871 904

RECEIVED
OCT 7 1994
Dept of Environmental Quality
Office of Pollution Control

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for September, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

September 14, 1994

RECEIVED
SEP 15 1994
Dept. of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. Z 060 871 881

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

Attached are verbal results for our 8/30/94 Bioassay Discharge Monitoring Report for 4/1/94 to 9/30/94.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

September 8, 1994

RECEIVED
SEP 14 1994
DEQ-OPC

No. Z 060 871 880
Certified Mail - Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for August, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

HERCULES

RECEIVED
AUG - 8 1994
DEQ-OPC

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

August 2, 1994

No. P 664 277 488
Certified Mail - Return Receipt Requested

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for July, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

July 13, 1994

Mr. Charles Jordan
Hercules Incorporated
P. O. Box 1937
Hattiesburg, Mississippi 39401-1937

Dear Mr. Jordan:

Re: NPDES Permit No. MS0001380

Enclosed is a copy of the NPDES Compliance Evaluation Inspection Report that was performed at Hercules Incorporated on June 23, 1994. The results of this inspection should be used by you as a guide for complying with requirements found in your NPDES permit.

If you have any questions concerning this matter, please contact us at 961-5171.

Sincerely,

J. B.

Jerry Beasley
Industrial Wastewater Control Branch

JB:ap
Enclosure
cc: SRO
Mr. Paul Zetterholm (w/enclosure)
Ms. Yvonne Martin, EPA (w/enclosure)

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

July 7, 1994

RECEIVED
JUL 11 1994
Dept of Environmental Quality
Office of Pollution Control

No. P 294 234 777
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. Jerry Beasley
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Beasley:

Attached is our EPA Discharge Monitoring Report for July, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ/vrf

Attachment:

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

June 10, 1994

RECEIVED
JUN 15 1994
Dept. of Environmental Quality
Office of Pollution Control

No. P 664 277 461
Certified Mail -
Return Receipt Requested

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for May, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Enclosure

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

May 6, 1994

RECEIVED
MAY 11 1994
Dept of Environmental Quality
Office of Pollution Control

No. P 664 277 458
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for April, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Attachment

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

May 2, 1994

Mr. P. W. Kirkendall, Plant Manager
Hercules, Inc.
P. O. Box 1937
Hattiesburg, Mississippi 39401-1937

Dear Mr. Kirkendall:

Re: NPDES Permit No. MS0001830

Enclosed is a copy of the Compliance Monitoring Inspection Report and sampling that was performed at the Hercules plant on March 14-15, 1994. The results of this inspection should be used by you as a guide for complying with requirements and limitations as stated by your NPDES permit.

Please note the enclosed laboratory report (pink copy) was prepared with the analytical results printed one line below the actual parameters analyzed. A pen and ink change has been made to the report correlating the numerical result with the correct analyzed pollutant.

If you have any questions concerning this matter, please contact us at 961-5171.

Respectfully,

Larry Hamil
Industrial Wastewater Control Branch

CLH:ap
Enclosures
cc: Ms. Yvonne Martin, EPA (w/enclosures)
SRO
Mr. Paul Zetterholm (w/attachment)

HERCULES

RECEIVED
APR 18 1994
DEQ-OPC

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

April 15, 1994

Certified Mail - Return Receipt Requested
NO. P 664 277 456

Mr. John Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

The purpose of this letter is to inform you that on 4/12/94 we experienced approximately 4.5 inches of rainfall. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (2610 GPM x 137 min) bypassing secondary treatment in order to prevent basin overflow.

	MGD	TOC mg/l	TOC lbs/day	Permit Limit
Bypass	0.360	73	218	
Outfall 001	0.84	134	939	3800
TOTAL	1.20	116	1157	

Also during this time period our #5 Lift Station flooded for approximately 45 minutes as the result of rainfall backing up into our plant. Our Neuphor sump also overflowed in its immediate area and was pumped back into the system as soon as hydraulic loading would permit. In both instances temporary lightning damage contributed to both events.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Supervisor

CSJ:mcl

Area floods in a flash

4/13/94



Michael Spooneybarger/Hattiesburg American

OSSING THE STREET: Scott Slade, 17, at front, and Donnie Canard, 16, wad[illegible]ugh the water at Seventh Street d 25th Avenue to get to a pay phone Tuesday afternoon.

■ Photos of flood, 9A
■ National flooding, 7A

By JANET BRASWELL
AMERICAN Senior Writer

Hattiesburg crews hit the streets in full force this morning, checking for damage and cleaning debris left behind by Tuesday afternoon's flash flood.

In less than two hours, 3.9 inches of rain whelmed natural and manmade drainage syst flooding streets, yards and a few buildings.

Gordon's Creek, which snakes through Hattiesburg, also crept out of its banks.

"We got lucky," Assistant Fire Chief Jim Cody said. "It stopped just before it got bad."

Another half inch of rain would have been disastrous, he said.

West Pine Street between Hemphill and Hardy streets remained closed this morning until crews determined the bridge over Gordon's Creek had not been damaged.

"Everything looked real solid," said Bennie Sellers, Public Services director. "We're going to open it back up."

Crews used a jackhammer to cut out a square of pavement to allow visual inspection of the underside of the bridge. Sellers expected the bridge to be open by 9:30 a.m. today. All other streets in the city were open today. The storm was r niscent of the massive flash flood of April 6, when 16 inches of rain in about 18 hours deli Hattiesburg.

Tuesday's storm simply swamped the city, said Jim Darrah, director of the Emergency Management District for Forrest and Lamar counties.

"Nobody can be prepared for rain like that," Darrah said. "The drainage system, the creeks, the streets, none of that can handle rainfall of that intensity."

The flood sent several inches of water pouring into the rear of Standard Office Supply and seeping under the front door at the corner of Hardy

■ **See FLOOD, section back**

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

April 6, 1994

RECEIVED
APR 11 1994
Dept. of Environmental Quality
Bureau of Pollution Control

No. P 664 277 454
Certified Mail -
Return Receipt Requested

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for March, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Enclosure

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

February 22, 1994

RECEIVED
FEB 24 1994
Dept. of Environmental Quality
Bureau of Pollution Control

No. P 664 277 447
Certified Mail -
Return Receipt Requested

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our 1/26/94 Bioassay Discharge Monitoring Report for 10/1/93 to 3/31/94.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
2/WP

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

February 10, 1994

RECEIVED
FEB 14 1994
Dept of Environmental Quality
Office of Pollution Control

No. P 664 277 446
Certified Mail -
Return Receipt Requested

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for January, 1994.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

Enclosure

FOREST

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

January 31, 1994



Certified Mail - Return Receipt Requested
NO. P 664 277 444

Mr. John Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

The purpose of this letter is to inform you that on 1/27/94 we experienced approximately 5 inches of rainfall. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (1080 GPM x 7 hrs) bypassing secondary treatment in order to prevent basin overflow.

		TOC		Permit
	MGD	mg/l	lbs/day	Limit
Bypass	0.454	213	806	
Outfall 001*	1.02	310 est*	2637 est*	3800
TOTAL	1.47	280 est*	3443 est*	

If I can answer any questions, please call me.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan
Environmental Supervisor

CSJ:mcl

*estimated, Not Analyzed (3 Samples/Week)
not a sample a day

HERCULES

RECEIVED
JAN 10 1994
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

January 5, 1994

No. P 664 277 442
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for December, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

FILE COPY

December 15, 1993

Mr. P. W. Kirkendall
Hercules, Inc.
P.O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Kirkendall:

Re: NPDES Permit No. MS0001830
Forrest County

Enclosed is a copy of the compliance monitoring inspection report and sampling that was performed at the Hercules facility on October 26, 1993. The sampling results indicate that the effluent was in compliance with your NPDES permit limits. The results of this inspection should be used by you as a guide for complying with requirements and limitations as stated by your NPDES permit.

If you have any questions concerning this matter, please contact us at 961-5171.

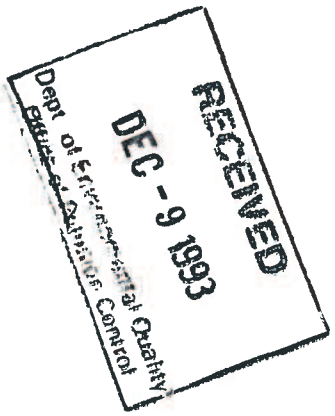
Respectfully,

John C. Taylor
Industrial Wastewater Control Branch

JCT:ap
Enclosures
cc: Mr. Al Herndon, EPA (w/enclosures)
SRO
Mr. Paul Zetterholm (w/attachment)

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

December 7, 1993



No. P 664 277 438
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Bioassay Discharge Monitoring Report for November, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

November 4, 1993

RECEIVED
NOV 15 1993
Dept. of Environmental Quality
Office of Pollution Control

No. P 664 277 435
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Bioassay Discharge Monitoring Report for October, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

BRUNINI, GRANTHAM, GROWER & HEWES
ATTORNEYS AT LAW

GEORGE P. HEWES, III
NEWT P. HARRISON
RICHARD W. DORTCH
LEIGH B. ALLEN, III
EDMUND L. BRUNINI, JR.
LAWRENCE R. ALLISON, JR.
CHARLES P. ADAMS, JR.
W. DAVID WATKINS
HOLMES S. ADAMS
WILLIAM L. SMITH
JEFFERSON D. STEWART
ROBERT D. DRINKWATER
CHRISTOPHER A. SHAPLEY
R. DAVID KAUFMAN
JOHN E. MILNER
R. WILSON MONTJOY II
WALTER S. WEEMS
JAMES T. THOMAS, IV
JAMES A. KEITH
LOUIS G. FULLER
WATTS C. UELTSCHEY
W. RODNEY CLEMENT, JR.
BRUCE S. EASON
JOHN E. WADE, JR.
I. FERAT SANSING
LYNNE K. GREEN
JAMES L. HALFORD
GRANVILLE TATE, JR.
ANNE C. SANDERS
JAMES W. YOUNG, JR.
PHILIP M. REEVES
CHERI O. GREEN
STEPHEN J. CARMODY
DORIAN E. TURNER
PAMELA W. DILL
JOSEPH S. VARNER, III
R. DAVID MARCHETTI
KATHRYN R. GILCHRIST
EUGENE R. WASSON
OTTOWA B. CARTER, JR.
P. DAVID ANDRESS
B. BLAKE TELLER
SHIRLEY T. KENNEDY
MICHAEL K. GRAVES
STEPHEN L. BARNETT
MICHAEL L. GIBSON
J. JEFFREY TROTTER

1400 TRUSTMARK BUILDING
248 EAST CAPITOL STREET
JACKSON, MISSISSIPPI 39201

MAILING ADDRESS
POST OFFICE DRAWER 119
JACKSON, MISSISSIPPI 39205

TELEPHONE
601-948-3101

FACSIMILE
601-960-6902

EDMUND L. BRUNINI
(1911-1992)

R. GORDON GRANTHAM
(1912-1986)

JOHN R. HUTCHERSON
(1939-1990)

JOHN M. GROWER
OF COUNSEL

October 18, 1993

Ms. Francis Grillo
Public Records Administrator
Mississippi Department of Environmental Quality
Southport Center
P. O. Box 10385
Jackson, Ms. 39289-0385

Forrest Co

RE: Request for Records
Hercules, Inc.
TXG Gas

Dear Ms. Grillo:

Please accept this letter as sufficient to request that I be allowed to review the Hercules, Inc. file, and the NPDES and Air files for TXG Gas Company.

As always, I appreciate your kind assistance.

Sincerely,
BRUNINI, GRANTHAM, GROWER & HEWES

John W. Harper
Legal Assistant

JWH/me

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

OCT 12 1993
Dept. of Environmental Quality
Office of Pollution Control

October 8, 1993

No. P 664 277 433
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Bioassay Discharge Monitoring Report for September, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

FILE COPY

October 13, 1993

Mr. Preston Kirkendall
Hercules, Inc.
P.O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Kirkendall:

Re: NPDES Permit No. MS0001830
Forrest County

Enclosed is a copy of the compliance evaluation inspection report and sampling that was performed at the Hercules facility on September 21-22, 1993. The sampling results indicate that the effluent was in compliance with your NPDES permit limits. The results of this inspection should be used by you as a guide for complying with requirements and limitations as stated by your NPDES permit.

If you have any questions concerning this matter, please contact us at 961-5171.

Respectfully,

John C. Taylor
Industrial Wastewater Control Branch

JCT:ap
Enclosures
cc: Mr. Al Herndon, EPA (w/enclosures)
SRO
Mr. Paul Zetterholm (w/attachment)

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

September 21, 1993

Mr. Charles Jordan
Hercules, Inc.
P.O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Jordan:

Re: NPDES Permit No. MS0001830
Forrest County

Enclosed is a copy of the compliance monitoring inspection report and sampling that was performed at the Hercules facility on July 7, 1993. The sampling results indicate that the effluent was in compliance with your NPDES permit limits. The results of this inspection should be used by you as a guide for complying with requirements and limitations as stated by your NPDES permit.

If you have any questions concerning this matter, please contact us at 961-5171.

Respectfully,

John C. Taylor
Industrial Wastewater Control Branch

JCT:ap
Enclosures
cc: Mr. Al Herndon, EPA (w/enclosures)
SRO
Mr. Paul Zetterholm (w/attachment)

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

RECEIVED
SEP - 9 1993
DEQ OPC

September 8, 1993

No. P 664 277 432
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for August, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
6

Attachment





Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

August 5, 1993

Certified Mail - Return Receipt Requested
No. P 664 277 405

Mr. John Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor

Re our 7/22/93 phone conversation, please find the following progress report on work related to recent overflows from one of our wastewater lift stations on 7/20, 7/29 and 8/2/93. Although this occurs during a relative short time period and is the direct result of heavy rainfall, plus by the time the #5 lift station overflows it is estimated to be either 100% storm water runoff or 97% storm water runoff if the process area is operating, we will continue to report any overflows that may occur. Also during heavy rainfall if the process area is operating and if time permits an orderly shutdown of the process, any overflow then also approaches 100% storm water runoff.

Over the years, as we have developed storm water pollution prevention, we have added between 15 to 20 acres of potentially contaminated storm water runoff into our industrial wastewater system. It is apparent that our industrial wastewater system and some of its associated lift station equipment hydraulic capacity has been reached with the additions of rainfall acreage. The following items are in progress to correct this concern for our #5 lift station. We expect to have these modifications complete around the middle of September.

Install a pump and two existing storage tanks to collect some storm water which can be drained to the lift station when it is not raining.

Install a bigger pump on two storage tanks at #5 lift station which presently accumulate hydraulic loading during heavy rainfall, and also add two more existing storage tanks for increased storage capacity. This will allow us to accumulate additional hydraulic flow during peak loading periods and drain this back into the system when loading is normal. We believe these two items coupled with some other minor improvements already being made will correct this concern.

On 8/2/93 we experienced approximately 4 inches of rainfall in approximately a two hour time period. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (2610 GPM X 115 Min) bypassing secondary treatment in order to prevent basin overflow.

		T.O.C.		Permit
	MGD	mg/l	lbs/day	Limit
Bypass	.300	59	148	
Outfall 001	.47	66	259	3800
Total			407	

If I can answer any additional questions, please call me.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

HERCULES

RECEIVED
AUG 10 1993
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

August 5, 1993

No. P 664 277 406
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for July, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
6

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

RECEIVED
AUG - 9 1993
Dept. of Environmental Quality
Office of Pollution Control

August 3, 1993

No. P 664 277 404
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Bioassay Discharge Monitoring Report for the period, 93/04/01 to 93/09/30.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

RECEIVED
JUL -9 1993
DEQ-OPC

July 7, 1993

Certified Mail - Return Receipt Requested
No. P 664 277 400

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for June, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
5

Attachment

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

July 2, 1993

CERTIFIED MAIL
NO. P 664 277 399
RETURN RECEIPT REQUESTED

Forrest County

Mr. John Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Re our 7/1/93 phone conversation, the purpose of this letter is to inform you that on 6/25/93 we experienced approximately 4 inches of rainfall in approximately a one hour time period. As a result of this excessive amount of rainfall, we estimate the following amount of primary wastewater (2610 GPM x 35 min) bypassing secondary treatment in order to prevent basin overflow. Also during this period we had lift station failure for a short time period. This was the result of area flooding as shown in the attachment where electrical motors were submerged and unable to operate.

	MGD	TOC mg/l	TOC lbs/day	Permit Limit
Bypass	0.09	75	56	
Outfall 001	1.16	34	329	3800
TOTAL	1.26	37	385	

If I can answer any questions, please all me.

Very truly yours,

HERCULES INCORPORATED

Charles Jordan

Charles Jordan
Environmental Supervisor

CJ/nb

Rainstorm dumps on Hub

3 inches fall in hour's time

By DEIRDRE McGRUDER
AMERICAN Staff Writer

A sudden thunderstorm in the Hattiesburg area briefly stranded many residents.

Mae Bramlett was on her way home from work when she got stuck in flood waters on Katie Avenue.

"I didn't realize it was that deep," she said. "I was coming from work and this is the way I always come."

Bramlett said luckily she was driving her husband's car.

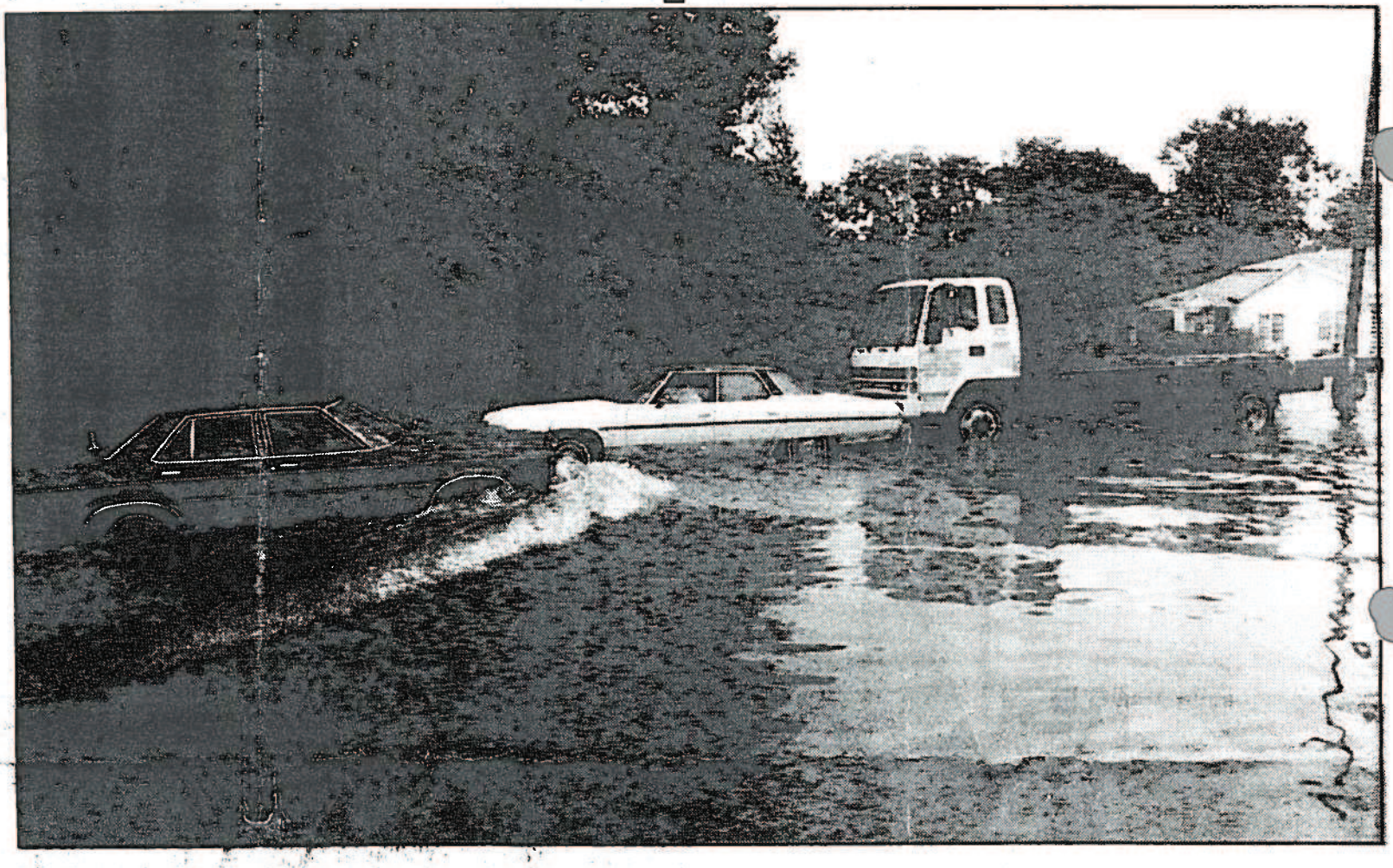
"My car is smaller," she said. "If I had been in mine, I probably would have gone under."

The yellow Chevrolet was pushed out of the water by a building supply truck.

Cases similar to Bramlett's happened all over Hattiesburg Friday afternoon, but the heavy rains that caused them seemed to pass as quickly as they came.

Beth Johnson, operations officer for the local Emergency Management District, said the heaviest storms hit Hattiesburg within the space of about an hour. The storms hit between about 3:45 and 4:45 p.m. In that hour, Hattiesburg accumulated 3 inches of rain.

"It just came so fast. It was like someone poured a big bucket of water on Hattiesburg,"



Steve Coleman/Hattiesburg American

HIGH WATERS: Mae Bramlett, in the yellow car, gets a push through a flooded section of Katie Avenue in Hattiesburg as another car plows through the water.

FILE COPY

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

June 16, 1993

Mr. P. W. Kirkendall
Hercules, Inc.
P.O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Kirkendall:

Re: NPDES Permit No. MS0001830
Forrest County

Enclosed is a copy of the compliance monitoring inspection report and sampling that was performed at the Hercules facility on March 23, 1993. The sampling results indicate that the effluent was in compliance with your NPDES permit limits. The results of this inspection should be used by you as a guide for complying with requirements and limitations as stated by your NPDES permit.

If you have any questions concerning this matter, please contact us at 961-5171.

Respectfully,

John C. Taylor
Industrial Wastewater Control Branch

JCT:ap
Enclosures
cc: SRO
Mr. Paul Zetterholm (w/attachment)

HAZARDOUS MATERIAL RELEASE REPORT
MISSISSIPPI EMERGENCY RESPONSE COMMISSION

RECEIVED
JUN 16 1993
DEQ-OPC

1. Release Location

County FORREST

2. Date 6/14/93

3. Time 10 30 AM

4. Company Name

HERCULES INC

5. Contact for further information:

Name: CHARLES JORDAN

Title: ENVIR SUPV

Address: PO BOX 1937

City: HATTIESBURG

State MS Zip: 39401

Phone: 601 545-3450

6. Release Information

a) Name of substance: TOLUENE

b) NA/UN: _____ CAS: 108-88-3 c) Est. Quantity: ~2500 lbs

d) Date of Release: 6/13/93 e) Time of Release: 3 30 PM

f) Duration of Release: ~2 HR est.

g) Release occurred into [X] Air [ ] Water [ ] Ground

h) Substance is extremely hazardous [ ] YES [X] NO
(per list in 40 CFR 355)

7. Recommended precautions

RELEASE WAS THE MECHANICAL FAILURE OF A LEAKING LINE PROCESSING 50% ROSIN IN TOLUENE SOLUTION. SOLUTION WAS RECOVERED FROM THE PROCESS SUMP BUT DURING THIS COLLECTION SOME SOLUTION DISCHARGED THRU THE PROCESS COLLECTION SUMP ONTO THE SURFACE OF OUR PLANT WASTEWATER COLLECTION SYSTEM. THIS MATERIAL QUICKLY EVAPORATED (volatilized) IN THE HOT SUN AND THUS RESULTED IN A REPORTABLE RELEASE. NO INJURIES

8. Anticipated Health Risks

9. Person reporting release:

Name: CHARLES JORDAN

Title: ENVIRONMENTAL SUPV.

Address: PO BOX 1937

City: HATTIESBURG

State MS Zip: 39401

Phone: 601 545 3450

MISSISSIPPI EMERGENCY
RESPONSE COMMISSION

EMERGENCY NOTIFICATION
(24 Hour In State Toll Free)
1-800-222-6362
Out of State
(601) 352-9100
Fax Number (601) 352-8314

MERC - III - 1 (REV—APR88)

HERCULES

RECEIVED
JUN 15 1993
Dept. of Environmental Quality
Bureau of Pollution Control

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

June 9, 1993

No. P 664 277 388
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for May, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

FILE COPY

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

June 8, 1993

Mr. P. W. Kirkendall
Hercules, Inc.
P.O. Box 1937
Hattiesburg, Mississippi 39401

Dear Mr. Kirkendall:

Re: NPDES Permit No. MS0001830
Forrest County

Enclosed is a copy of the compliance evaluation inspection report that was performed at the Hercules facility on June 4, 1993. The results of this inspection should be used by you as a guide for complying with requirements and limitations as stated by your NPDES permit. The inspection indicated that the facility was in compliance.

However, the effluent had a grayish color with a film on the surface. It was recommended, during the inspection, that the cause of this situation be determined and corrected. Refer to the attached inspection report.

If you have any questions concerning this matter, please contact us at 961-5171.

Respectfully,

John C. Taylor
Industrial Wastewater Control Branch

JCT:ap
Enclosures
cc: Mr. Al Herndon, EPA (w/enclosures)
SRO
Mr. Paul Zetterholm (w/attachment)

Hercules - Forrest County
June 3, 1993

Hercules discharge







TO: STEVE SPENGLER

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
OFFICE OF POLLUTION CONTROL
P. O. Box 10385
JACKSON, MISSISSIPPI 39289-0385

COMPLAINT FORM

6-2-93 (Date) 8:50 a.m. (Time) ___Air _X_Water ___ Solid Waste ___UST

Person Reporting: _X_ Mr. ___Mrs. ___Ms. Otis Smith

Address: Petal (City) Forrest (County) 36 Barrontown Rd.,Lot 37 (Street or P.O. Box) 583-1775 (Phone)

Complaint Site: Little Creek off gravel pit off Bouie River.

Text of Complaint: Little Creek full of something black. All vegetation is dead - Hercules?

Directions: Highway 11 - Launch boat at Leaf River - go up to Bouie, take Bouie to gravel pit on left, keep to left in gravel pit until creek.

Complaint taken by: Loyd V. Sharp

___ North Regional Office
___ Central Regional Office
_X_ South Regional Office
___ Main Office

Referred by: _X_ Phone ___ Mail ___ FAX

Routed to R.O. by: _____ Date: _____

Resolution: _____

STATE OF MISSISSIPPI
DEPARTMENT OF ENVIRONMENTAL QUALITY
JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

M E M O R A N D U M

TO: STEVE SPENGLER

FROM: ERROL WHITE

SUBJECT: HERCULES - FORREST COUNTY

DATE: JUNE 3, 1993

On the above date, Richard McCrory and myself investigated the attached complaint concerning a gray-black discharge into the Bouie River. Knowing that this was going to be the effluent from Hercules we traced the receiving stream from the discharge point to the gravel pit it empties into before going into the Bouie River. The discharge has a strong odor and there was no evidence of any life without its aquatic bounds. Photos 1 & 2 show the color of the stream as well as the black discoloration of the substrate at the streams banks. Photo 3 shows the discharge at the point in which it enters and mixes with the waters of the abandoned gravel pit.

This is perhaps the most degradated and aesthetically sickening receiving stream I have encountered. As you are aware this has been an on-going problem for many years. If there is anything I can do to help alleviate this problem, please call on me to do so.

ERROL WHITE

FILE COPY

STATE OF MISSISSIPPI

DEPARTMENT OF ENVIRONMENTAL QUALITY

JAMES I. PALMER, JR.
EXECUTIVE DIRECTOR

May 19, 1993

Mr. Charles Jordan
Hercules, Inc.
P.O. Box 1937
Hattiesburg, Mississippi 39401-1937

Dear Mr. Jordan:

Re: NPDES Permit No. MS0001830
Forrest County

Enclosed is a copy of the compliance monitoring inspection report and sampling that was performed at the Hercules facility on March 23, 1993. The sampling results indicate that the effluent was in compliance with your NPDES permit limits. The results of this inspection should be used by you as a guide for complying with requirements and limitations as stated by your NPDES permit.

If you have any questions concerning this matter, please contact us at 961-5171.

Respectfully,

John C. Taylor
Industrial Wastewater Control Branch

JCT:ap
Enclosures
cc: Mr. Al Herndon, EPA (w/enclosures)
SRO
Mr. Paul Zetterholm (w/attachment)

RECEIVED
MAY - 7 1993
Dept of Environmental Quality
Office of Pollution Control

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

May 5, 1993

Certified Mail - Return Receipt Requested
No. P 904 256 310

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for April, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
81

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

March 30, 1993

RECEIVED
APR - 1 1993
Dept. of Environmental Quality
Office of Pollution Control

Certified Mail - Return Receipt Requested
No. P 904 256 226

Mr. John Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor

Re our 3/26/93 phone conversation, the purpose of this letter is to inform you that on 3/26/93 we experienced approximately a 20 minute power failure as a result of an electrical line fire. As a result of this, a wastewater lift station overflow into an on-site storm ditch was estimated to be 700 gallons containing 0.5 lbs. conventional TOC.

If I can answer any questions, please call me.

Very truly yours,

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
80

cc: P. W. Kirkendall

HERCULES

RECEIVED
MAR 23 1993
DEQ-OPC

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

March 17, 1993

Forrest County

No. P 904 256 225
Certified Mail - Return Receipt Requested

Mr. John Taylor
Bureau of Pollution Control
P.O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

The purpose of this letter is to inform you that on 3/12/93 we experienced total power failure during a snow storm. As a result of this power failure over a short period of time, we estimate the following amount of primary wastewater (2610 gpm/2 x 5 hrs. x 60 min.) bypassing secondary treatment.

	Flow	TOC		Permit
	MGD	mg/l	lbs./day	Limit
Bypass	~0.039	165	536 (Net)	
Outfall 001			98 (Net)	3800 (Net)
Total			634 (Net)	

If I can answer any additional questions, please call me.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
jordan/62

cc: P. W. Kirkendall

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

RECEIVED
APR 15 1993
Dept. of Environmental Quality
Office of Pollution Control

March 12, 1993

No. P 904 256 275
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for March, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

RECEIVED
MAR 9 1993
DEQ-OPC

March 4, 1993

No. P 904 256 222
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for February, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

RECEIVED
MAR - 8 1993
Dept. of Environmental Quality
Office of Pollution Control

March 4, 1993

Certified Mail - Return Receipt Requested
NO. P 904 256 223

Forrest County

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Re previous communications, please find the following summary. On 3/2/93 we released an estimated 50 gallons or less of para-cymene feedstock, natural solvenol, CAS 8006 64 2, which is a member of the terpene family.

Prior to 3/2/93 we had a tank overflow into a dike. Most of the material was contained in the dike and recovered. Some material did leak thru the dike wall into a non-flow storm ditch which has a secondary containment underflow/overflow baffle system. The material which left the dike area by gravity flow and was contained at the baffle was removed. In order to remove all of the material, we then ran a water hose into the drainage ditch to insure that all of the material moved to the baffle for final recovery. At this point we believed the recovery was complete. The dike wall has been repaired.

The drainage ditch consists of an open ditch section, an underground culvert section, and then an open section with the baffle. There is apparently some hold up in the culvert section which trapped floating material. Evidently the culvert is big enough where the water hose used would not deliver trapped floating material. On 3/2/93 heavy rainfall forcefully moved trapped material out of the culvert, flooded and overflowed the baffle, and was released off-site.

Hercules personnel cleaned up material in the off-site drainage ditch under the supervision of the LEPC.

If I can answer any additional questions please let me know.

Very truly yours,

Charles S. Jordan

Charles S. Jordan
Environmental Supervisor

CSJ:mcl

W45

HERCULES

RECEIVED
MAR - 5 1993
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

March 3, 1993

Forrest County

No. P 904 256 221
Certified Mail - Return Receipt Requested

Mr. John Taylor
Bureau of Pollution Control
P.O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

The purpose of this letter is to inform you that on 3/2/93 we experienced approximately three (3) inches of rainfall. As a result of this excessive amount of rainfall over a short period of time, we estimate the following amount of primary wastewater (2610 gpm/2 x 30 min.) bypassing secondary treatment.

	Flow MGD	TOC mg/l	TOC lbs./day	Permit Limit
Bypass	~0.039	986	320 (Net)	
Outfall 001			965 (Net)	3800 (Net)
Total			1,285 (Net)	

If I can answer any additional questions, please call me.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
jordan/62

cc: P. W. Kirkendall

HERCULES

RECEIVED
FEB 2 . 1993
DEQ-OPC

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

February 17, 1993

No. P 904 256 217
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Bioassay Discharge Monitoring Report for the period, 92/10/01 to 93/03/31.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

HERCULES

RECEIVED
FEB - 5 1993
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

February 3, 1993

No. P 904 256 216
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Forrest County

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for January, 1993.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

HERCULES

RECEIVED
JAN 22 1993
DEQ-OPC

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

January 21, 1993

No. P 904 256 211
Certified Mail - Return Receipt Requested

Mr. John Taylor
Bureau of Pollution Control
P.O. Box 10385
Jackson, MS 39209

Forrest County

Dear Mr. Taylor:

Re our 1/21/93 phone conversation, the purpose of this letter is to inform you that on 1/20/93 we experienced approximately six (6) inches of rainfall. As a result of this excessive amount of rainfall over a short period of time, we estimate the following amount of primary wastewater (2610 gpm x 55 min.) bypassing secondary treatment.

	Flow	TOC		Permit
	MGD	mg/l	lbs./day	Limit
Bypass	~0.144	23	23 (Net)	
Outfall 001			1095 (Net)	3800 (Net)
Total			1118 (Net)	

If I can answer any additional questions, please call me.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
jordan/62

cc: P. W. Kirkendall

HERCULES

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401
(601) 545-3450

September 23, 1991

No. P 004 497 738
CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. Taher Diab
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Diab:

The purpose of this letter is to inform you that on 9/18/91 we experienced approximately five (5) inches of rainfall over a one-hour period of time. As a result of this excessive amount of rainfall over a short period of time, we estimate the following amount of primary wastewater (2610 gpm x 60 min.) bypassing secondary treatment.

	Flow	TOC	
	MGD	mg/l	lbs./day
Bypass	~0.157	196	246 (Net)
Outfall 001			721 (Net)
Total			967 (Net)

If I can answer any additional questions, please call me.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan
Environmental Supervisor

CSJ:mcl
jordan/49

cc: P. W. Kirkendall

HERCULES

RECEIVED
JAN 11 1993
Dept. of Environmental Quality
Office of Pollution Control

Hercules Incorporated
West 7th Street
P.O. Box 1937
Hattiesburg, MS 39401-1937
(601) 545-3450

January 7, 1993

No. P 904 256 208
CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

Format

Mr. John C. Taylor
Bureau of Pollution Control
P. O. Box 10385
Jackson, MS 39209

Dear Mr. Taylor:

Attached is our EPA Discharge Monitoring Report for December, 1992.

Very truly yours,

HERCULES INCORPORATED

Charles S. Jordan

Charles S. Jordan
Environmental Supervisor

CSJ:ml
5

Attachment

Report sent to Hercules 2/97

Hercules: Hattiesburg

File: Forrest Co

RECEIVED
NOV 25 1996
Dept. of Environmental Quality
Office of Pollution Control

INTRODUCTION

The EPA, Region IV, Wetlands Protection Section requested a field evaluation of water quality and biological impacts to the Bouie River associated with sand and gravel mining operations (American Sand and Gravel) in Hattiesburg, Mississippi. EPA and the Corps of Engineers (COE) are participants in an interagency task force to address concerns of sand and gravel mining in the Mobile District.

In response to this request, staff of the Ecological Support Branch, Region IV, Athens, Georgia, the Water Quality Standards Section, EPA, Region IV, Atlanta, Georgia, and the Mississippi Office of Pollution Control (MOPC) conducted a field evaluation during the period June 12-15, 1995.

BACKGROUND

American Sand and Gravel has been in operation in the study area since the turn of the century (personal communication, Jim Morris) and instream mining has created a series of run-of-the-river mined pits and side pits removed from the river channel alignment (figure 1). In some instances, mined depths have approached 60'.

The concern for environmental effects of the mining operations and permit issues prompted participants of the interagency task force to request this field evaluation.

STUDY AREA

The Bouie River lies within the Southeast Plains and Hills ecoregion. The Bouie River is formed from the confluence of Okatoma Creek in Covington County, Mississippi and Bowie Creek in Forrest County, Mississippi (Figure 1). Hattiesburg, Mississippi lies near the confluence of the Bouie and Leaf Rivers. Sand and gravel mining occurs in the southern part of the watershed below I-59.

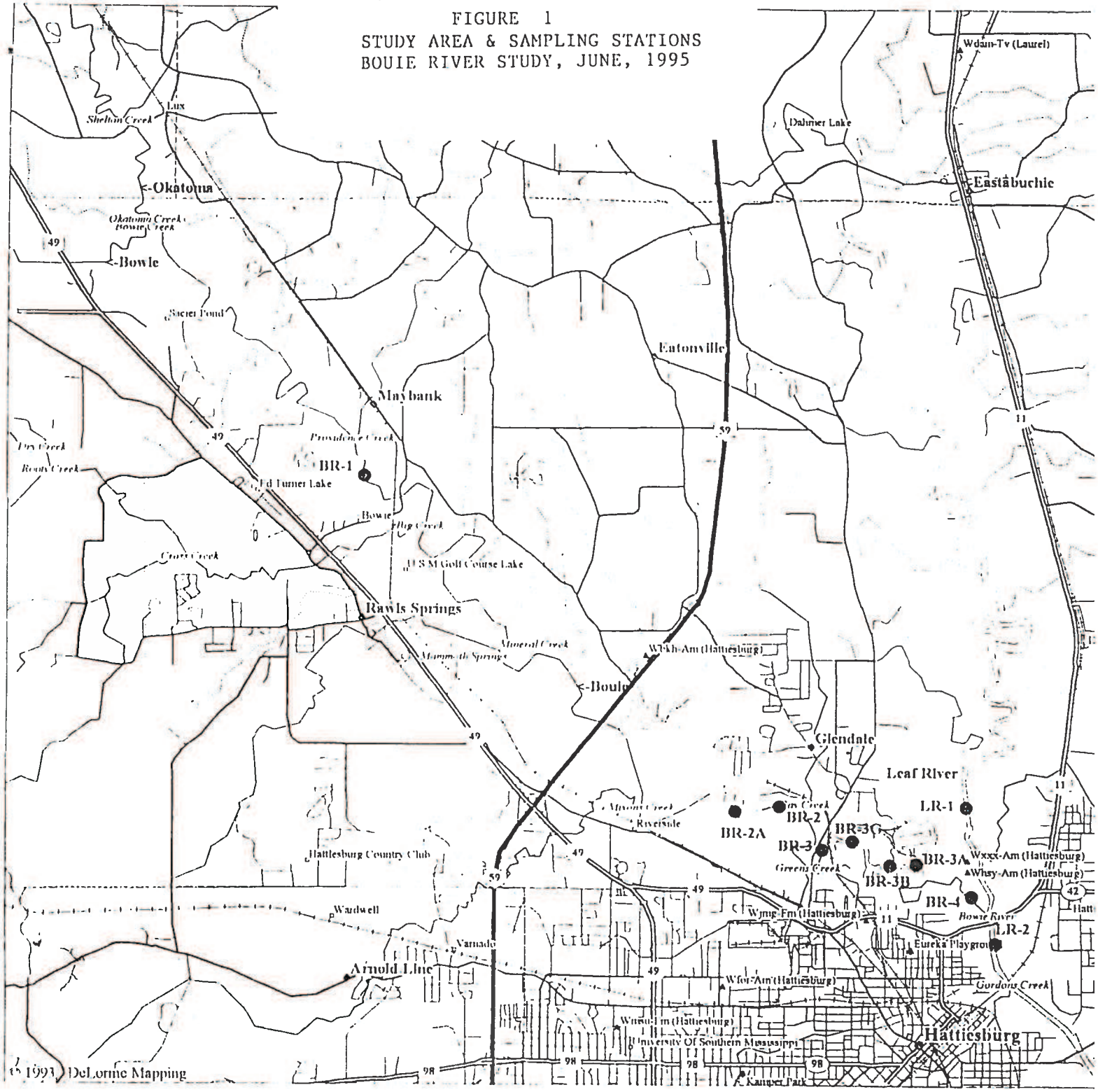
Sampling stations were located above the mining operations (BR-1) at Pep's Point and within the mined reach (BR-2, upstream of Glendale Bridge, BR-3, downstream of Glendale Bridge, and BR-4, immediately upstream of confluence with Leaf River. The Leaf River was also sampled upstream (LR-1) and downstream (LR-2) of the confluence with the Bouie River. Two types of mined pits were sampled: (1.) those aligned with the river channel (BR-2A and BR-3C), and (2.) those designated as side pits which were not aligned with the river channel (BR-3A and BR-3B). All sampling stations are shown in Figure 1.

METHODS

Water Chemistry

Grab surface samples for nitrogen series (ammonia, nitrate-

FIGURE 1
STUDY AREA & SAMPLING STATIONS
BOUIE RIVER STUDY, JUNE, 1995



LEGEND

- State Route
- Geo Feature
- Town, Small City
- Large City
- Hill
- Park
- Interstate, Turnpike
- US Highway
- Population Center
- Street, Road
- Hwy Ramp
- Major Street/Road
- Interstate Highway
- State Route
- US Highway
- Railroad
- Intermittent River
- Utility (powerline)
- Land Mass
- Open Water

Mag 13.00
Thu Aug 24 14:04:01 1995

Scale 1:75,000 (at center)

1 Miles

2 KM

nitrite,and Total Kjeldahl),total phosphorus, and total suspended solids were taken at all stations during the period June 13-14, 1995 with the exception of mined pits BR-3A and BR-3B. Due to water column stratification, samples at BR-3A and BR-3B were taken near the bottom in the anaerobic zone. Samples were collected, preserved, and stored according to the Analytical Support Branch SOP and QA Manual (1990).

Biology

Benthic macroinvertebrates provide an indication to water quality and detect environmental perturbations due to introduced pollutants. Due to their limited mobility and relatively long life span, the macroinvertebrate community is a reflection of water quality conditions over time.

With the exception of BR-2A, BR-3A, BR-3B, and BR-3C, all sites were wadeable, thus, the Rapid Bioassessment approach was utilized to sample benthic macroinvertebrates. Rapid bioassessment includes three phases: (1.) the biosurvey (benthic macroinvertebrate collections), (2.) in-situ physicochemical measurements, and (3.) habitat evaluations. Deep water precluded the use of a Rapid Bioassessment approach at BR-2A, BR-3A, BR-3B, and BR-3C. Benthic macroinvertebrate community assessment was only conducted at BR-2A and grab samples (3 replicates) were collected with a Ponar dredge.

In conjunction with the benthic macroinvertebrate sampling or biosurvey, in-situ physicochemical measurements and habitat evaluations were also conducted. Parameters recorded during the in-situ physicochemical measurements were water temperature, pH, conductivity, and dissolved oxygen. Field instruments utilized to measure these physicochemical parameters were calibrated at the beginning and end of each day as per the Ecological Support Branch SOP and QA Manual (1991). Habitat evaluations were conducted per the Rapid Bioassessment Protocols (EPA, 1989). No habitat evaluations were conducted at deep water sites since the habitat evaluation technique is specific for wadeable streams.

Sediment particle size

Substrate is an important factor in determining the composition of the benthic macroinvertebrate community. Alteration of the natural substrates by deposition of fines and organic matter directly affects the bottom fauna and the chemical character of the substrates. Past studies (Minshall,1968, and Hynes, 1970) have shown that coarser substrates support a more diverse benthic macroinvertebrate community.

In conjunction with the benthic macroinvertebrate sampling, unsieved sediment samples were collected from near bank and channel and composited to comprise the sediment sample. Sediment particle size analysis involved a wet sieving procedure through a series of U.S. Standard Sieves (8mm, #10, #35, #120, and #230). The size classification retained in each sieve corresponds to the modified

Wentworth scale (EPA, 1990). The clay and silt fractions, which represent the liquid captured from the sieving process, are separated by centrifugation at 750 rpm for three minutes. Only dry weights were obtained due to time constraints and sample backlog. Dry weights provided a breakdown on percentage gravel, coarse to fine sands, and fines (very fine sand, silt and clay) in bottom sediments. Bottom substrates were characterized relative to particle size at Stations BR-1, BR-2A, BR-4, and LR-2.

RESULTS

Water Chemistry

Complete results of water chemistry analyses are provided in Table 1.

Ammonia nitrogen, not detected at the station upstream of mining operations (BR-1), increased at Bouie River stations downstream of sand and gravel mining (Table 1; Figure 3). Highest concentrations of ammonia nitrogen occurred in water samples collected from the anaerobic, near bottom stratum at the side pits not aligned with the river channel (BR-3A and BR-3B). Stations BR-3A and BR-3B had ammonia nitrogen concentrations that were 3 and 5 times greater (0.29 and 0.42 mg/L), respectively than the average ammonia nitrogen concentration (0.08 mg/L) for the three Bouie River stations downstream of mining (Table 1; Figure 3). Water samples from the mined pit aligned with the river channel, BR-2A, had an ammonia nitrogen concentration in the range of the other two Bouie River stations downstream of thge mining operations (Table 1; Figure 3). An examination of Table 1 and Figure 3 indicates that ammonia nitrogen concentrations in the Bouie River downstream of sand and gravel mining may be impacting the water chemistry characteristics of the Leaf River. Water sample analysis from station LR-1, the Leaf River upstream of the confluence with the Bouie River, did not reveal the presence of ammonia nitrogen (Table 1; Figure 3). Conversely, water samples from station LR-2, approximately 0.5 miles downstream of the confluence with the Bouie River, had an ammonia nitrogen concentration of 0.10 mg/L (Table 1; Figure 3) which is within the range of concentrations observed in Bouie River stations downstream of mining.

Total nitogen concentrations in the mainstem Bouie River were higher downstream of sand and gravel mining operations than at BR-1, upstream of mining (Table 1; Figure 2). Highest concentration of total nitrogen (2.13 mg/L) occurred at BR-2A, a 47' deep mined area in the Bouie River channel upstream of the Glendale Road bridge (Figure 1). Stations located in mined areas not aligned with the river channel (BR-3A and BR-3B) also exhibited elevated total nitrogen concentrations (Table 1; Figure 2). As pointed out in the preceding paragraph, water chemistry characteristics of the Bouie River may be impacting the Leaf River. An examination of Table 1 and Figure 2 reveal that total nitrogen concentrations at LR-2 (0.95 mg/L), Leaf River downstream of the confluence with the Bouie, increased 42% over LR-1 (0.67 mg/L), the Leaf River station upstream of the confluence of the two rivers.

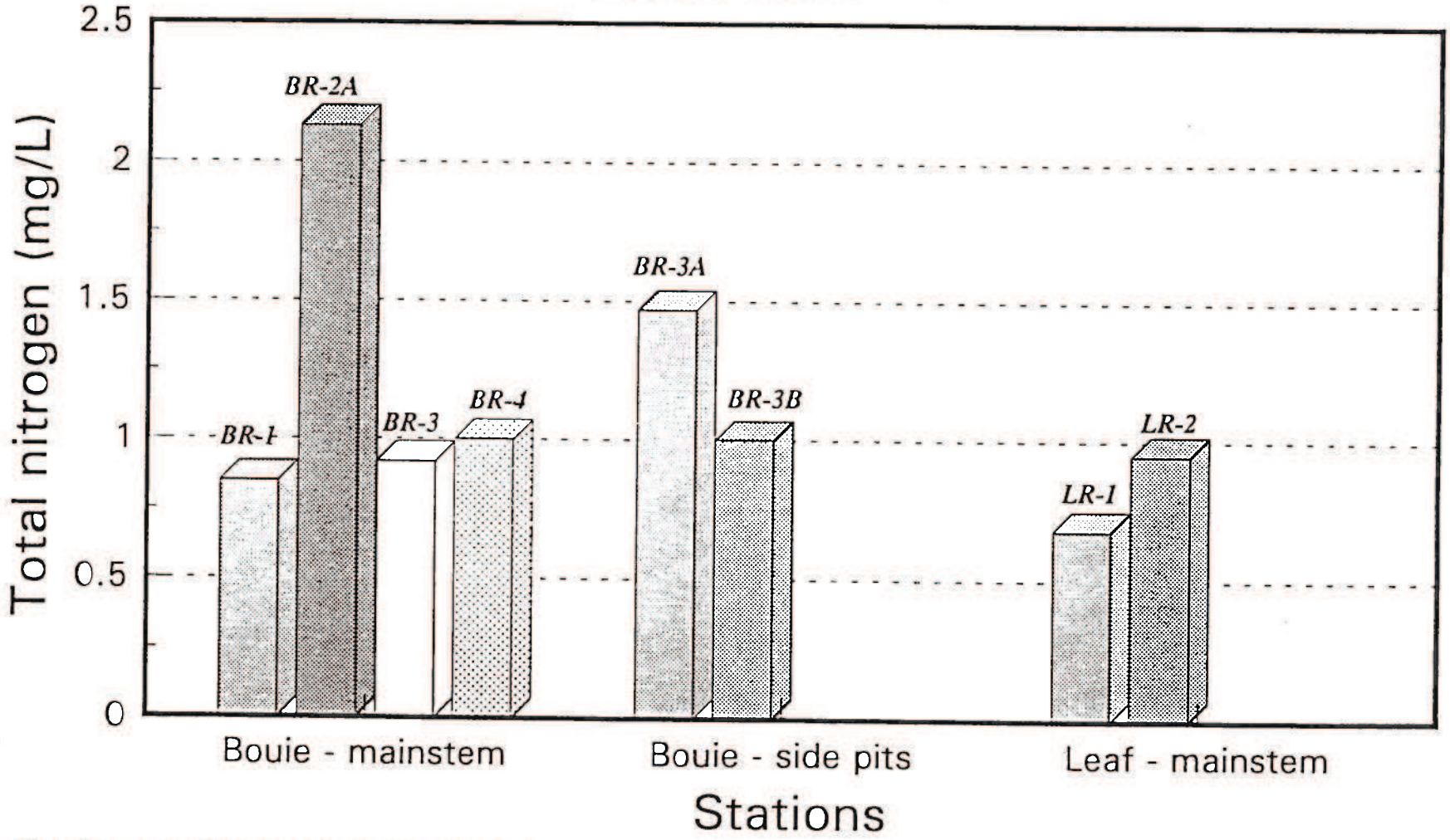
The mined pits not aligned with the river are an active nutrient

Table 1. Water chemistry, Bouie and Leaf Rivers, June, 1995.

Station	Concentration (mg/L)					
	ammonia nitrogen	nitrate-nitrite	TKN	Total nitrogen	Total phosp.	Tot. susp. solids
BR-1	*N/D	0.6	0.25	0.85	0.09	8.0
BR-2A	0.06	0.53	1.6	2.13	0.10	7.0
BR-3	0.06	0.52	0.40	0.92	0.09	11.0
BR-4	0.13	0.47	0.53	1.00	0.09	6.0
BR-3A	0.29	0.07	1.4	1.47	0.10	18.0
BR-3B	0.42	*N/D	1.0	1.0	0.10	14.0
LR-1	*N/D	0.33	0.34	0.67	0.05	5.0
LR-2	0.10	0.42	0.53	0.95	0.08	4.0

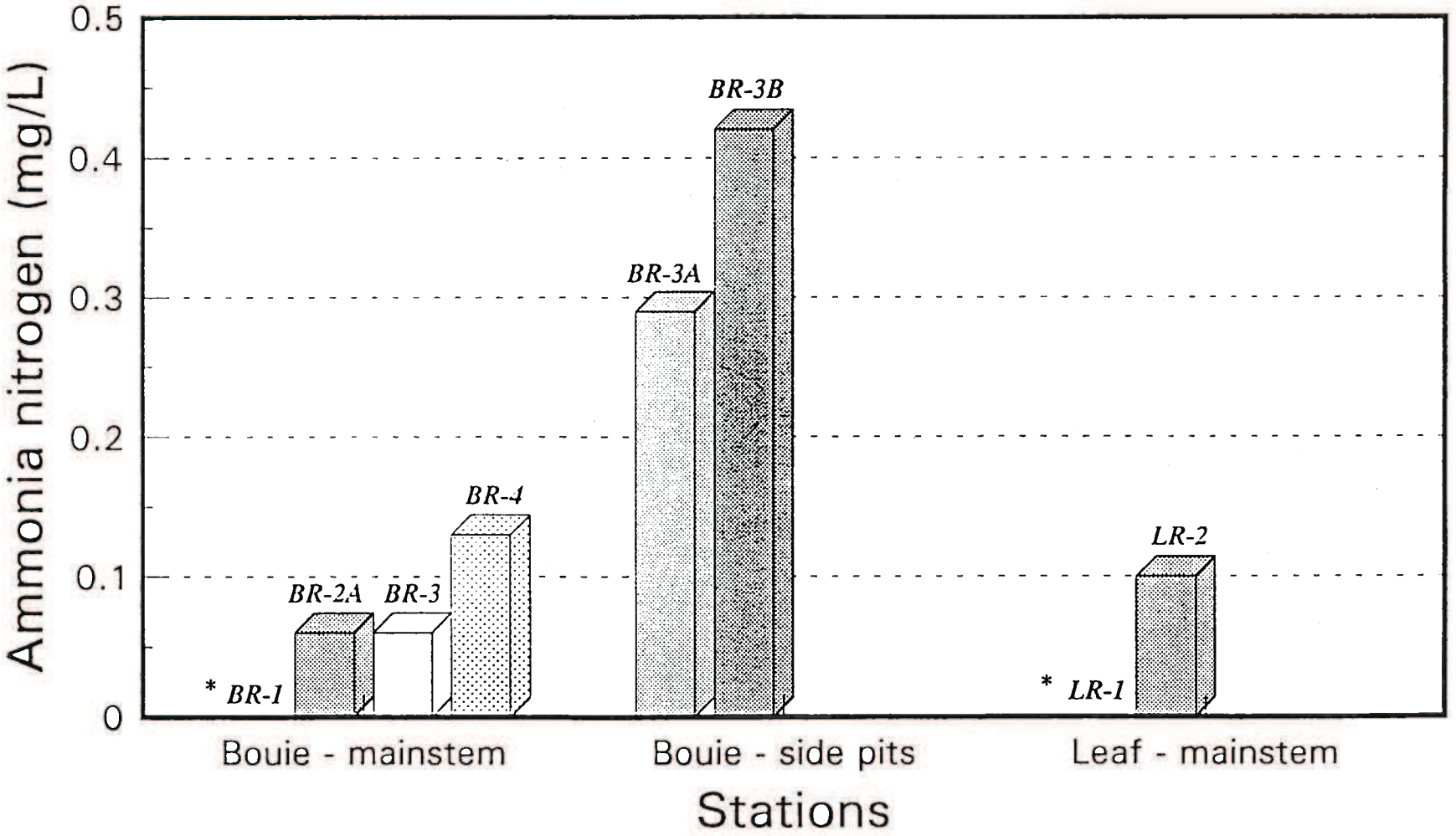
*not detected

Fig.2 Total nitrogen concentrations, Bouie River mainstem & side pits, Leaf River mainstem, June, 1995



side pits = not aligned with stream channel
For complete data set see Table 1.

Fig. 3 Ammonia nitrogen concentrations, Bouie River mainstem & side pits, Leaf River mainstem, June, 1995



side pits = not aligned with stream channel

* = not detected

sink. In addition, it appears that total suspended solids (Table 1) are also trapped in these same pits. Concentrations of total suspended solids at the two pits not aligned with the river channel (BR-3A and BR-3B), 18.0 and 14.0 mg/L respectively (Table 1), were much higher than the Bouie River mainstem stations (6.0 - 11.0 mg/L) and the mined area in the channel (BR-2A; 7.0 mg/L).

Biology

Biological studies were conducted per the Rapid Bioassessment Protocols methodology (EPA, 1989). Rapid Bioassessment consisted of three phases: (1.) in-situ physicochemical measurements, (2.)habitat evaluations, and (3.) macroinvertebrate collections. The results of each phase is discussed below.

o In-situ physicochemical measurements (pH, conductivity, water temperature, and dissolved oxygen) consisted of vertical profiles at non-wadeable sites and mid-depth measurements at wadeable sites.

Vertical profiles at mined areas not aligned with the river channel indicated water column stratification below 9' and resultant violations of state water quality standards for dissolved oxygen (Table 2; Figures 4,5, and 7). These violations occurred during both the June and July 1995 sampling periods. During the July, 1995 sampling period, the state water quality standard for pH was violated (Figure 7; Table 2). Mined areas aligned with the river channel did not exhibit water column stratification (Table 2; Figures 6 and 8). No violations of state water quality standards for instantaneous dissolved oxygen (4.0 mg/L) occurred at either the mainstem Bouie River stations (BR-1, BR-3, and BR-4), the Leaf River stations (LR-1 and LR-2), and the mined areas in the Bouie that were aligned with the river channel (BR-2A and BR-3C; Table 2).

In both June and July, 1995 a thermal gradient accompanied dissolved oxygen excursion at mined area BR-3A (Table 2). No thermal gradient was present at the stations aligned with the river channel (BR-2A and BR-3C).

o Habitat evaluations were completed at stations BR-1, BR-3, BR-4, LR-1, and LR-2. The habitat evaluation procedure is specific for wadeable streams therefore no evaluation was made of non-wadeable stations. Results of the habitat evaluation are given in Table 3. The Bouie River station upstream of mining operations (BR-1) had the highest habitat score of all the wadeable sites. The two downstream stations, BR-3 and BR-4, had identical scores of 86 which was 21 points lower than the 107 score at BR-1 (Table 3). Habitat was degraded downstream of mining operations due to sedimentation. This was reflected in the habitat scores at BR-3 and BR-4 (7 and 8, respectively) where habitat parameter #5, bottom scouring and deposition, scored lower than station BR-1 (11). The Leaf River stations (LR-1 and LR-2) had lower habitat scores than BR-1, BR-3, and BR-4. Gravel was the main sediment component at the Bouie River stations while coarse/medium/fine sands were the

Table 2. Summary results, in-situ physicochemical measurements, Bouie and Leaf Rivers, June, 1995 and July, 1995.

Station	Date	Time	D.O. (range in mg/L)	Temp. (°C)	pH	Cond. (umhos/cm)
BR-1	6/13/95	0830	7.5	22.3	6.2	38.1
BR-2A	6/13/95	1315	4.6 to 6.1	24.6 to 26.0	5.9 to 6.2	42.1 to 42.5
LR-1	6/13/95	1700	8.0	26.9	6.6	117.8
BR-3A	6/14/95	0930	0.0 to 6.7 *	22.4 to 26.5	5.4 to 6.1	41.3 to 49.1
BR-3C	6/14/95	0950	5.6 to 5.7	25.9 to 26.0	6.1 to 6.2	42.8 to 42.9
BR-3	6/14/95	1005	5.7	25.8	6.1	41.5
BR-3B	6/14/95	1430	0.0 to 8.0 *	22.0 to 28.9	5.5 to 6.5	38.9 to 45.2
BR-4	6/14/95	1620	6.8	27.4	6.3	45.6
LR-2	6/14/95	1530	7.1	27.1	6.3	71.4
BR-3A	7/25/95	1255	0.0 to 13.2 *	20.1 to 32.9	5.8 to 9.3 *	47.4 to 210.0
BR-3C	7/25/95	1320	6.3 to 7.2	29.9 to 30.5	6.3 to 7.2	41.7 to 49.7

* = Violation of state water quality standards

FIGURE 4
DISSOLVED OXYGEN PROFILE,
STATION BR-3A, 6/14/95

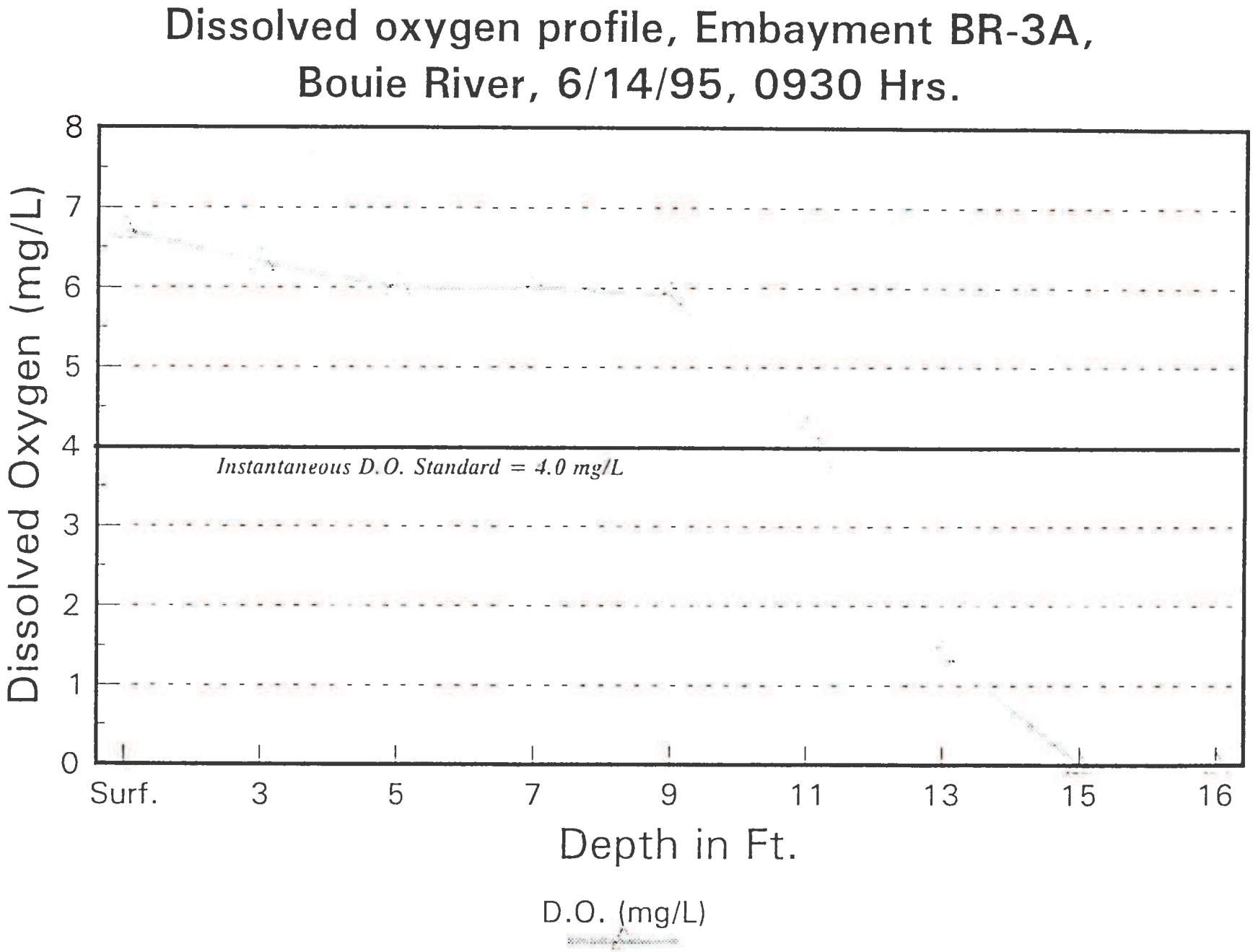


FIGURE 5
DISSOLVED OXYGEN PROFILE,
STATION BR-3B, 6/14/95

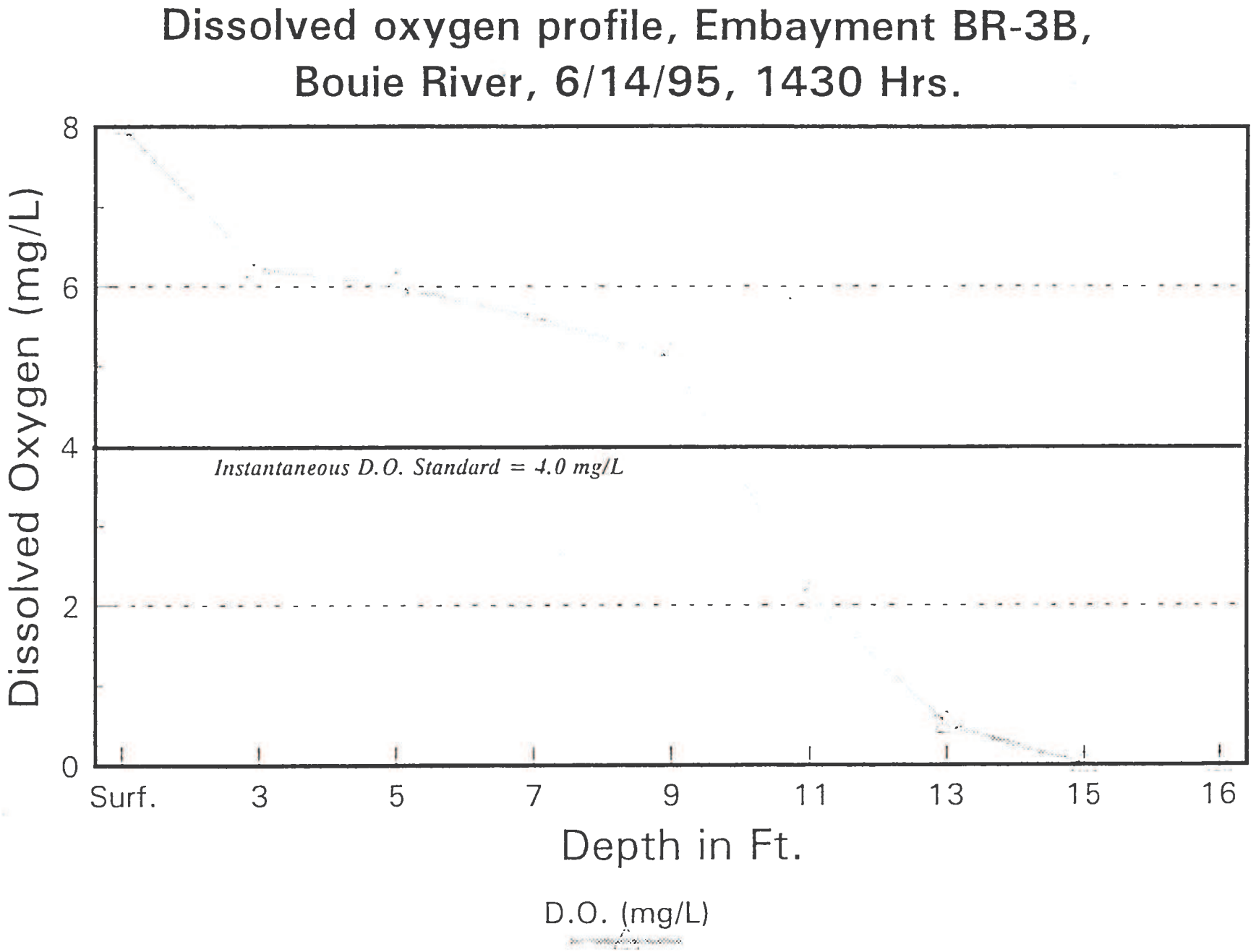


FIGURE 6
DISSOLVED OXYGEN PROFILE,
STATION BR-3C, 6/14/95

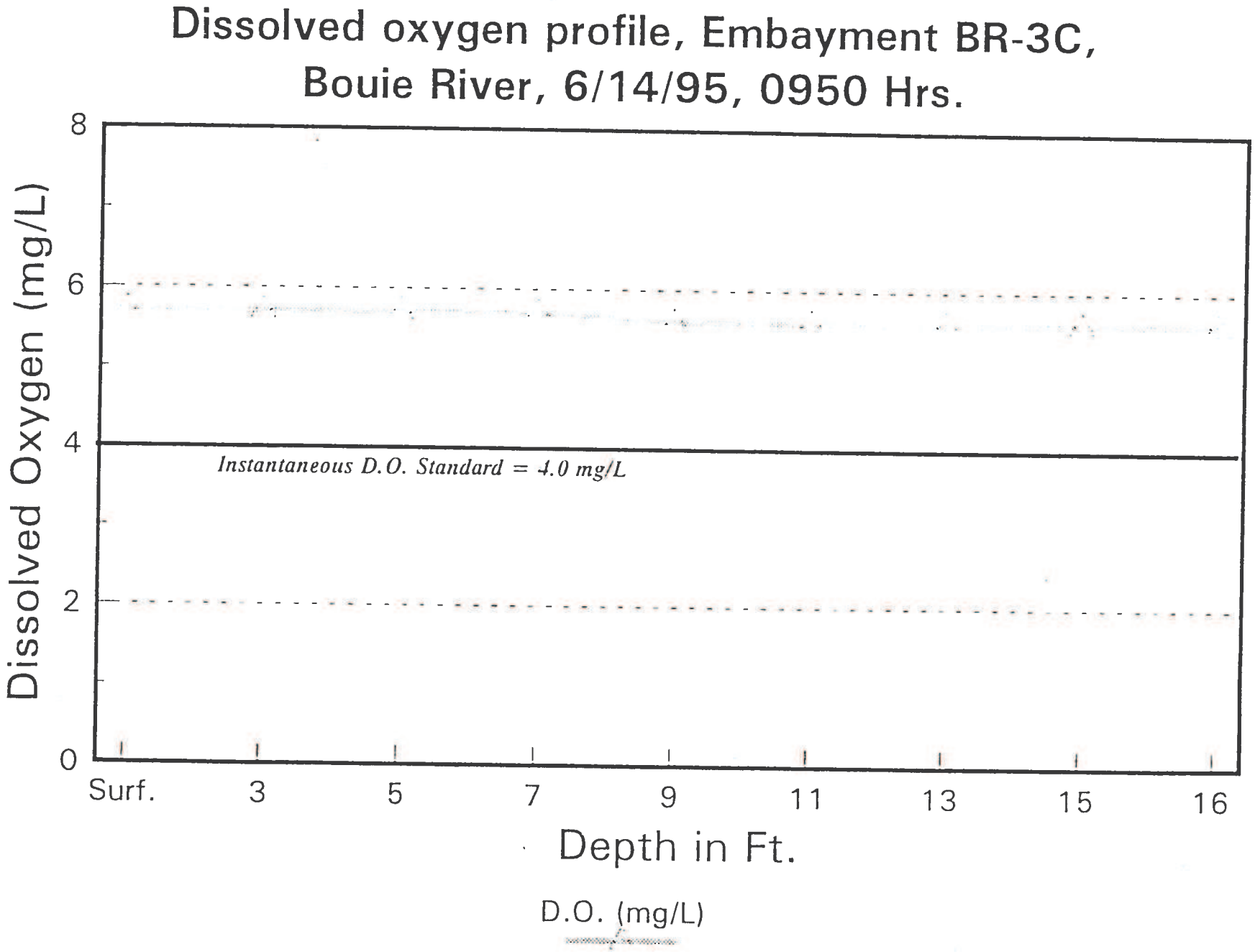


FIGURE 7
DISSOLVED OXYGEN PROFILE,
STATION BR-3A, 7/25/95

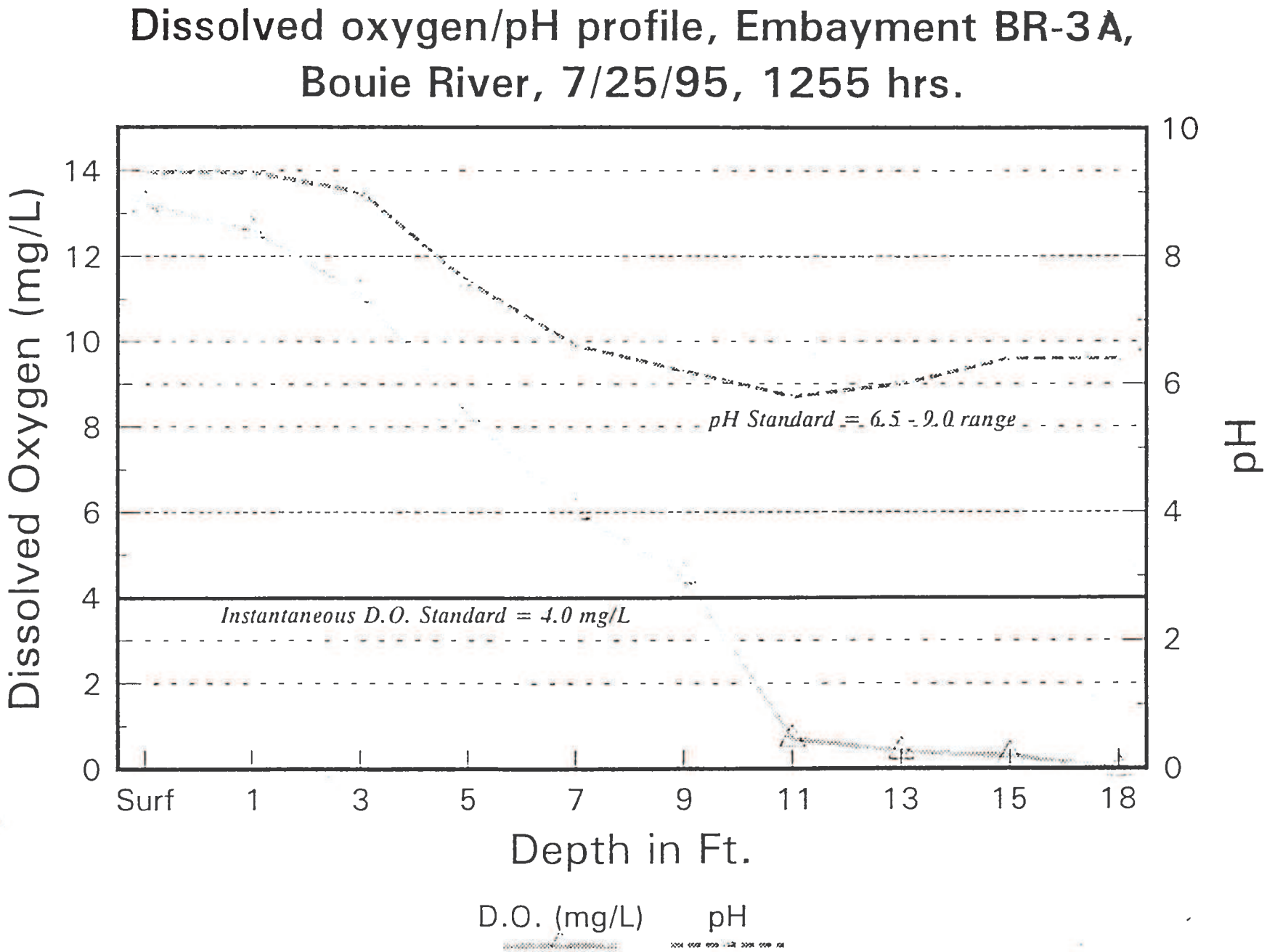


FIGURE 8
DISSOLVED OXYGEN PROFILE,
STATION BR-3C, 7/25/95

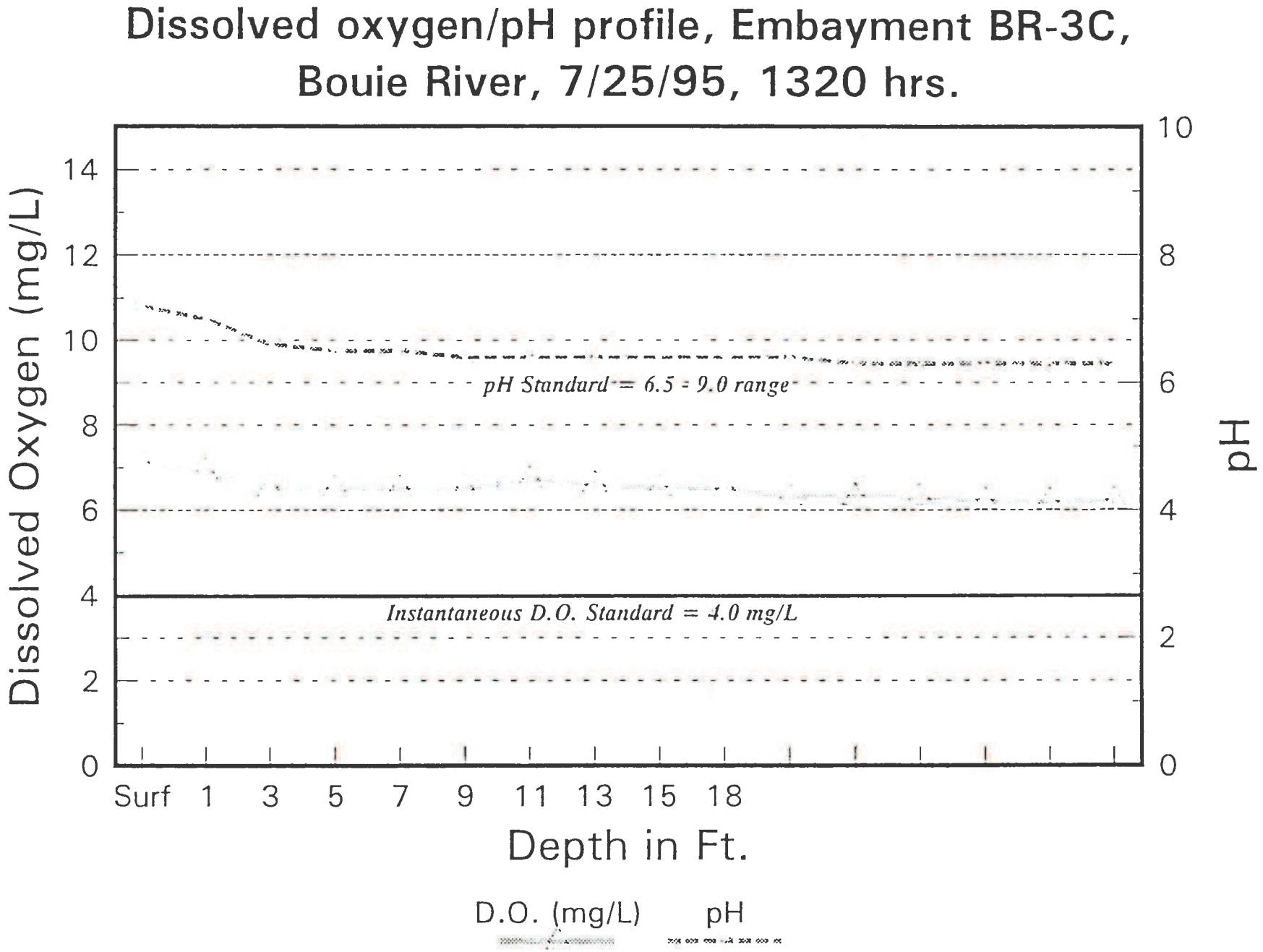


Table 3 . Habitat Evaluation Scores,
Bouie and Leaf Rivers, June, 1995.

Station #	Locale	Habitat Score
BR-1	Bouie R. @ Pep's Point (Upstream mining operations)	107
BR-3	Bouie R. ~200 yds. downstream Glendale Rd. bridge (downstream of mining operations)	86
BR-4	Bouie R. ~ 200 yds. upstream of US 11 bridge (downstream of mining operations)	86
LR-1	Leaf R. ~ 1 mi. upstream of US 11 bridge (above confluence with Bouie R.)	79
LR-2	Leaf R. ~ 0.5 mi. downstream of US 11 bridge and confluence with Bouie R.	59

predominant sediment at the Leaf River station (Table 5). This fact contributed to the lower habitat scores at the Leaf River sites.

o Benthic macroinvertebrates were more diverse at BR-1 (51 sp.; Table 4 & appendix) than at any other sampling station. The EPT Index, a compilation of species in the orders Ephemeroptera, Plecoptera, and Trichoptera, was 18 at BR-1. Generally, the more pollution-sensitive organisms are in the Ephemeroptera, Plecoptera, and Trichoptera. A decline in taxa richness and the EPT Index occurred at stations downstream of sand and gravel mining operations. Benthic macroinvertebrate collections from BR-2A, a 47' deep mined area, indicates that these areas are not conducive to establishment of a diverse benthic macroinvertebrate community. In addition, sediment particle size analysis revealed sediment characteristics at BR-2A unfavorable for benthic organisms. The EPT Index at BR-2A was 0 and only 4 species of benthic organisms were collected (Table 4; appendix). Bouie River mainstem stations downstream of the sand and gravel mining operations had a taxa richness range of 28 to 40 species and the EPT Index ranged from 11 to 14. The Leaf River stations, due to habitat limitations alluded to earlier, had similar taxa richness and EPT Index scores to Bouie River stations downstream of mining (Table 4).

Sediment particle size

Sediment size characteristics were examined at four stations: BR-1, BR-2A, BR-4, and LR-2.

Gravel and cobble were the predominant substrate at BR-1 which is upstream of sand and gravel mining (Table 5). Fine sediments, such as very fine sand, silt, and clay, comprised less than 1% of the sediments at BR-1 (Table 5). Station BR-2A, the 47' deep mined area, had a bottom substrate almost solely comprised (91%) of very fine sand, silt, and clay (Table 5). In contrast to the riverine stations at both the Bouie and Leaf Rivers, sediments at BR-2A had less than 1% gravel. Bouie River station BR-4, below all sand and gravel mining operations, had similar sediment composition to BR-1 with one exception (Table 5). BR-1 had a large number of rocks and boulders, especially in the riffle runs. These would not be collected in a sediment grab for particle size analysis. BR-4 did not have the boulders and rocks that were prevalent at BR-1.

CONCLUSIONS

Sand and gravel mining in the Bouie River has negatively altered the water chemistry and biology of a wadeable stream. Bouie River, in its natural state upstream of mining operations, is a wadeable stream characterized by a diversity of habitats for both fish and benthic macroinvertebrates. A system of run-of-the-river lakes and embayments offset from the river channel alignment characterize the Bouie downstream of mining operations. Short reaches of the river, between mined areas, do exist but mining impacts such as sedimentation and water quality impacts associated with the side

pits or offset embayments have degraded those reaches. The greatest liability appears to be the mined areas that are offset or not aligned with the river channel. State water quality standards were violated due to the anaerobic state of bottom waters at these sites and the fact that these sites are nutrient and sediment sinks. Ammonia nitrogen production at the side pits is contributing to an increase in concentration of ammonia nitrogen in the mainstem Bouie River downstream of mining operations. An additional concern is the eutrophic state of these areas. Excessive algal production was occurring during the July, 1995 in-situ physicochemical profiles.

Table 4. Summary of biometrics, Bouie and Leaf Rivers, Benthic macroinvertebrates, RBP III, June, 1995.

Station	Taxa Richness	EPT Index	% Dominant taxon
BR-1	51	18	23.2
BR-2	33	14	16.3
BR-2A	4	0	45.0
BR-3	28	11	24.7
BR-4	40	13	28.5
LR-1	29	13	28.5
LR-2	32	10	61.0

FIGURE 9
BENTHIC MACROINVERTEBRATES,
TAXA RICHNESS AND EPT INDEX,
BOUIE RIVER, JUNE, 1995

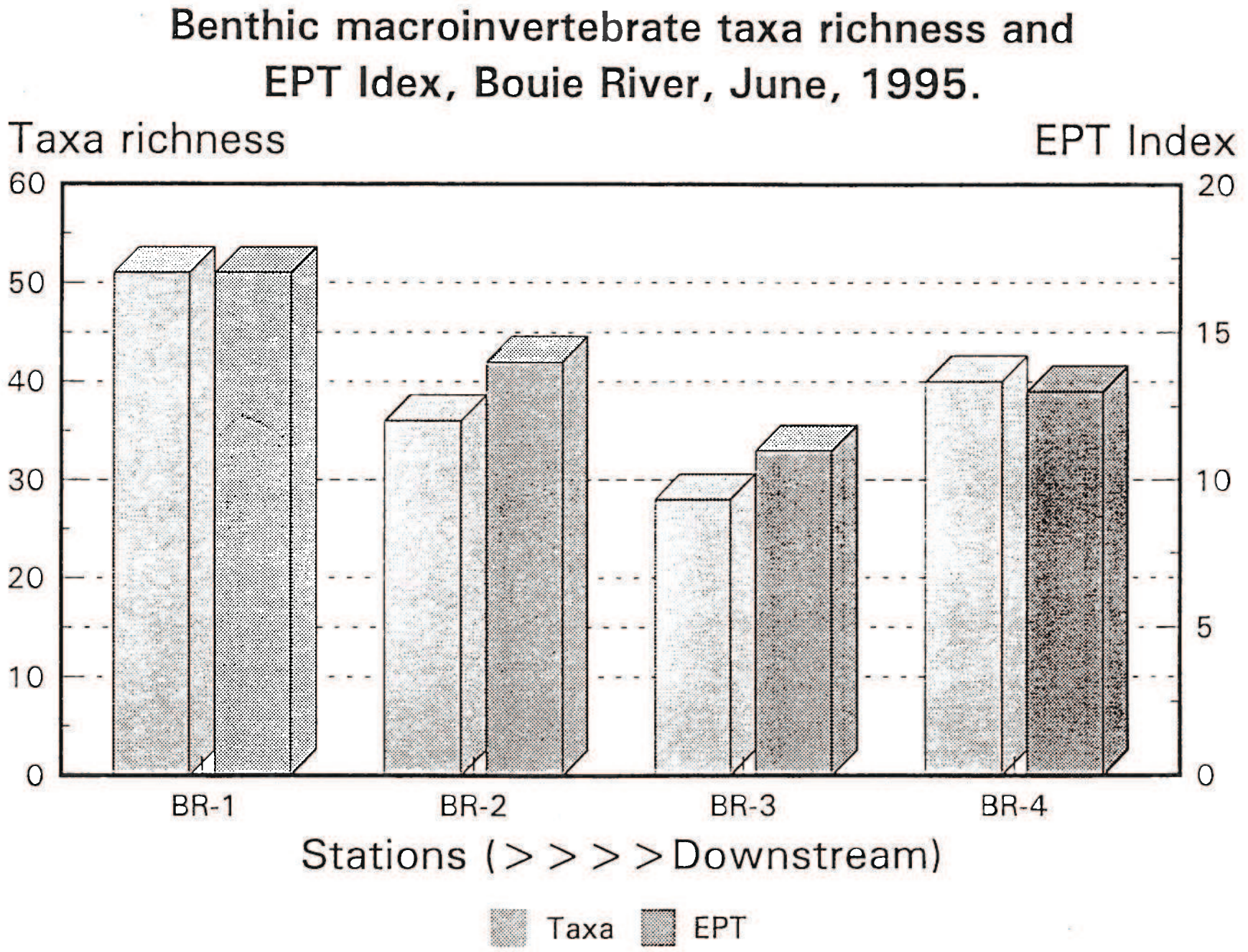


Table 5. Sediment composition, % total dry weight, Bouie and Leaf Rivers, June, 1995.

Station	Date	% Gravel	% Coarse, medium, fine, sand	% Very fine sand, silt, clays
BR-1	6/13/95	80	19	<1%
BR-2A	6/13/95	<1%	9	91
BR-4	6/14/95	78	22	<1%
LR-2	6/14/95	33	66	<1%

Summary of Findings - Bouie River

1.) Vertical profiles of D.O., pH, Conductivity, and temperature at embayments (mined pits) not aligned with the river channel exhibited water column stratification and violations of water quality standards. Profiles during the June 1995 study revealed D.O. values below the standard for instantaneous D.O. (4.0 mg/L) at both mined pits not aligned with the river channel (BR-3A & BR-3B). Mined pit BR-3C, which is aligned with the river channel, met water quality standards and did not exhibit water column stratification during the June 1995 study. Additional vertical profiles were completed at these same sites in July 1995. Results of the July 1995 profiles also revealed a water quality standards violation at BR-3A for instantaneous D.O. In both June and July 1995, a thermal gradient accompanied D.O. excursion at BR-3A. No thermal gradient was present at BR-3C. In addition, the water quality standard for pH (range of 6.5 - 9.0) was also violated at BR-3A in July 1995. At this time, pH ranged from 5.8 - 9.3 at BR-3A. As in June 1995, the station aligned with the river channel, BR-3C, met water quality standards in July 1995. One area of concern is the obvious algal production in the euphotic zone (surface to 3') at BR-3A in July 1995 stimulated by the excessive nutrients (especially NH_3) originating from the reducing conditions associated with anoxic bottom waters (denitrification). This has led to a water column dissolved oxygen regime ranging from 0.0 - 13.2 mg/L at BR-3A as opposed to a range of 6.2 - 7.1 mg/L at BR-3C.

2.) Ammonia nitrogen concentrations exhibited a longitudinal increase in the main stem Bouie River stations downstream of mining operations. Denitrification in the mined pits not aligned with the river channel appear to be the contributing source of ammonia nitrogen to the river. For example, the two pits with anaerobic bottom waters (BR-3A & BR-3B) had concentrations of ammonia nitrogen that were 3 and 5 times greater, respectively, than the average ammonia nitrogen concentration for the three Bouie River stations downstream of mining operations. As was mentioned earlier in the text, excessive ammonia nitrogen production in these pits not aligned with the river channel is contributing to eutrophic conditions there. Additionally, pits such as BR-3A and BR-3B are a source for the increased ammonia nitrogen in the Bouie River. Ammonia nitrogen was not detected at the Bouie River station upstream of mining operations (BR-1) or the Leaf River station upstream of the confluence with the Bouie (LR-1).

3.) Habitat evaluations, conducted as part of the Rapid Bioassessment, indicated a decline in habitat quality at Bouie River stations downstream of mining operations when compared to habitat quality at the station upstream of mining operations (BR-1). The highest habitat evaluation score (107) occurred at BR-1, upstream of mining operations. Habitat evaluation scores downstream of mining operations decreased due to sedimentation effects.

4.) Greatest diversity of benthic macroinvertebrates occurred at BR-1, upstream of mining operations. A decline in taxa richness and the EPT Index occurred at stations downstream of mining operations. Benthic macroinvertebrate collections from BR-2A, a 47' deep mined pit aligned with the river channel, indicates that these mined areas are not conducive to establishment of a diverse benthic macroinvertebrate community. Particle size analysis at BR-2A revealed that over 91% of the sediments are composed of very fine sand, silt, and clay. These fine, unconsolidated sediments are not favorable habitats for benthic organisms. Past studies have shown that coarser substrates provide greater habitat diversity for benthic organisms. Riverine stations in the Bouie River were characterized by a bottom substrate composed of cobble, gravel, coarse sand, and medium sand.

5.) An area of concern that needs further investigation is the increase in water temperature above background due to the vast open water areas created by the mined pits. For example, water temperature at the background (upstream) station, BR-1, was measured at 22.3°C at 8:30 a.m. on 6/13/95. Water temperature at BR-3, downstream of mining operations, at 10:05 a.m. on 6/14/95 was 25.8°C. This represents a 3.5°C increase in water temperature.

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(2.) Minshall, G. Wayne. 1968. Community dynamics of the benthic fauna in a woodland springbrook. Hydrobiol. 32: 305-339.

(3.) Morris, Jim. 8/23/95. Personal communication.

(4.) Plafkin, James L., Michael T. Barbour, Kimberly D. Porter, Sharon K. Gross, and Robert M. Hughes. 1989. Rapid Bioassessment Protocols for Use in Streams and Rivers. EPA/440/4-89-001.

(5.) U.S. Environmental Protection Agency, Region IV. 1990. Analytical Support Branch SOP and QA Manual. Environmental Services Division, Athens, GA.

(6.) U.S. Environmental Protection Agency, Region IV. 1991. Ecological Support Branch SOP and QA Manual. Environmental Services Division, Athens, GA.

(7.) U.S. Environmental Protection Agency, Office of Research and Development. 1990. Macroinvertebrate Field and Laboratory Methods for Evaluating the Biological Integrity of Surface Waters. EPA/600/4-90/030.

APPENDIX

Water Body : Bouie River, Hattiesburg, MS, BR-1
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1		REPLIC 2		REPLIC 3		COMPOSITE	
		Count	#M»	Count	#M»	Count	#M»	Count	#M»
DIPTERA	*Atherix sp.*	5	5					5	
	Bezzia sp.	1	1					1	
	Cryptochironomus sp.	2	2					2	
	Hemerodromia sp.	1	1					1	
	Nilothauma sp.	1	1					1	
	Polypedilum sp.	36	36					36	
	Rheocricotopus sp.	15	15					15	
	Rheotanytarsus sp.	19	19					19	
	Simulium sp.	201	201					201	
	Tanytarsus sp.	1	1					1	
	Tvetenia sp.	33	33					33	
TRICHOPTERA	*Brachycentrus sp.*	53	53					53	
	Cheumatopsyche sp.	68	68					68	
	Chimarra sp.	9	9					9	
	Hydropsyche sp.	77	77					77	
	Macrostemum sp.	25	25					25	
	Nectopsyche sp.	23	23					23	
	Oecetis sp.	3	3					3	
PLECOPTERA	*Paragnetina sp.*	7	7					7	
	Perlesta sp.	9	9					9	
EPHEMEROPTERA	*Baetis sp.*	8	8					8	
	Caenis sp.	8	8					8	
	Cinygmula sp.	13	13					13	
	Isonychia sp.	92	92					92	
	Leptohyphes sp.	6	6					6	
	Pseudocloeon sp.	1	1					1	
	Seratella sp.	13	13					13	
	Stenonema sp.	22	22					22	
	Tricorythodes sp.	12	12					12	
ODONATA	*Argia sp.*	1	1					1	
	Boyeria sp.	1	1					1	
	Calopteryx sp.	2	2					2	
	Dromogomphus sp.	2	2					2	
	Macromia sp.	1	1					1	
	Stylurus sp.	1	1					1	
HEMIPTERA	*Rhagovelia sp.*	1	1					1	
COLEOPTERA	*Dineutus sp.*	5	5					5	
	Dubiraphia sp.	3	3					3	
	Helichus sp.	2	2					2	
	Macronychus sp.	3	3					3	
	Microcylloepus sp.	12	12					12	

- Continued on next page -

Water Body : Bouie River, Hattiesburg, MS, BR-1
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSITE Count	#M»
	Stenelmis sp.	46	46					46	
ISOPODA	*Caecidotea sp.*	2	2					2	
MEGALOPTERA	*Corydalus sp.*	7	7					7	
OLIGOCHAETA	*Branchiura sowerbyi*	3	3					3	
	Limnodrilus sp.	1	1					1	
	Lumbriculidae unid.	2	2					2	
	Pristina sp.	1	1					1	
	Tubificidae unid.	3	3					3	
DECAPODA	*Palaemonetes paludosus*	1	1					1	
MOLLUSCA	*Sphaerium sp.*	1	1					1	
								0	
								0	
								0

Water Body : Bouie R., Hattiesburg, MS BR-2A
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Ponar

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 122.4	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 3	Grabs :	Grabs :	Grabs : 3
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1		REPLIC 2		REPLIC 3		COMPOSITE	
		Count	#M»	Count	#M»	Count	#M»	Count	#M»
DIPTERA	*Procladius sp.*	1	41					1	
OLIGOCHAETA	*Limnodrilus sp.*	7	286					7	
	Tubificidae unid.	15	612					15	
MOLLUSCA	*Sphaerium sp.*	10	408					10	
								0	
								0	
								0

Water Body : Bouie R., Hattiesburg, MS BR-2
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1		REPLIC 2		REPLIC 3		COMPOSITE	
		Count	#M»	Count	#M»	Count	#M»	Count	#M»
DIPTERA	*Dicrotendipes sp.*	1	1					1	
	Polypedilum sp.	2	2					2	
	Rheotanytarsus sp.	8	8					8	
	Simulium sp.	1	1					1	
	Tanytarsus sp.	1	1					1	
TRICHOPTERA	*Cheumatopsyche sp.*	9	9					9	
	Hydropsyche sp.	11	11					11	
	Hydroptila sp.	1	1					1	
	Macrostemum sp.	2	2					2	
	Nectopsyche sp.	2	2					2	
	Oecetis sp.	1	1					1	
	Triaenodes sp.	4	4					4	
PLECOPTERA	*Paragnetina sp.*	1	1					1	
EPHEMEROPTERA	*Baetis sp.*	5	5					5	
	Caenis sp.	7	7					7	
	Isonychia sp.	1	1					1	
	Stenacron sp.	5	5					5	
	Stenonema sp.	5	5					5	
	Tricorythodes sp.	20	20					20	
ODONATA	*Argia sp.*	2	2					2	
	Didymops sp.	1	1					1	
COLEOPTERA	*Macronychus sp.*	3	3					3	
	Stenelmis sp.	6	6					6	
ISOPODA	*Caecidotea sp.*	2	2					2	
AMPHIPODA	*Hyalella azteca*	2	2					2	
DECAPODA	*Palaemonetes paludosus*	5	5					5	
OLIGOCHAETA	*Lumbriculidae unid.*	1	1					1	
MEGALOPTERA	*Corydalus sp.*	1	1					1	
HIRUDINEA	*Placobdella sp.*	1	1					1	
TURBELLARIA	*Turbellarian unid.*	2	2					2	
MOLLUSCA	*Menetus sp.*	1	1					1	
	Physella sp.	7	7					7	
	Sphaerium sp.	2	2					2	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET	TOTALS:	123	123	0	0	0	0	123	0
	# OF TAXA:	33		0		0		33	
	DIVERSITY INDEX:		4.45		0		0		4.45

EPT Index: 14

Water Body : Bouie R.; BR-3 Rootbank; Hattiesburg, MS
Date Placed : 6/14/95 Date Collected : 6/14/95
Collector : Howard Sorted By : Howard
Identified By: Howard/Smith/Schultz Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSITE Count	#M»
DIPTERA	*Endochironomus sp.*	1	1					1	
	Nilotanypus sp.	1	1					1	
	Polypedilum sp.	13	13					13	
	Rheotanytarsus sp.	5	5					5	
	Simulium sp.	8	8					8	
	Tvetenia sp.	2	2					2	
TRICHOPTERA	*Cheumatopsyche sp.*	40	40					40	
	Hydropsyche sp.	31	31					31	
	Macrostemum sp.	9	9					9	
	Neureclipsis sp.	2	2					2	
EPHEMEROPTERA	*Baetis sp.*	1	1					1	
	Caenis sp.	1	1					1	
	Isonychia sp.	5	5					5	
	Seratella sp.	2	2					2	
	Stenonema sp.	9	9					9	
	Tricorythodes sp.	10	10					10	
ODONATA	*Argia sp.*	2	2					2	
	Enallagma sp.	1	1					1	
	Macromia sp.	1	1					1	
DECAPODA	*Astacidae unid.*	3	3					3	
	Palaemonetes paludosus	1	1					1	
AMPHIPODA	*Gammarus sp.*	2	2					2	
	Hyalella azteca	2	2					2	
MOLLUSCA	*Physella sp.*	1	1					1	
	Sphaerium sp.	5	5					5	
MEGALOPTERA	*Corydalus sp.*	1	1					1	
COLEOPTERA	*Stenelmis sp.*	2	2					2	
PLECOPTERA	*Paragnetina sp.*	1	1					1	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET	TOTALS:	162	162	0	0	0	0	162	0
	# OF TAXA:	28		0		0		28	
	DIVERSITY INDEX:		3.74		0		0		3.7

EPT Index: 11
% Contribution dominant taxon: 24.7

Water Body : Bouie R.; Hattiesburg, MS BR-4
Date Placed : 6/14/95 Date Collected : 6/14/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSITE Count	#M»
DIPTERA	*Ablabesmyia sp.*	2	2					2	
	Axarus sp.	1	1					1	
	Cricotopus sp.	17	17					17	
	Dicrotendipes sp.	19	19					19	
	Endochironomus sp.	1	1					1	
	Glyptotendipes sp.	1	1					1	
	Nanocladius sp.	2	2					2	
	Polypedilum sp.	112	112					112	
	Rheocricotopus sp.	3	3					3	
	Rheotanytarsus sp.	23	23					23	
	Simulium sp.	6	6					6	
	Tanytarsus sp.	4	4					4	
	Thienemanniella sp.	3	3					3	
TRICHOPTERA	*Cheumatopsyche sp.*	68	68					68	
	Hydropsyche sp.	32	32					32	
	Hydroptila sp.	4	4					4	
	Macrostemum sp.	8	8					8	
	Neureclipsis sp.	14	14					14	
	Phylocentropus sp.	2	2					2	
EPHEMEROPTERA	*Baetis sp.*	12	12					12	
	Caenis sp.	2	2					2	
	Centroptilum sp.	2	2					2	
	Isonychia sp.	23	23					23	
	Leptohyphes sp.	1	1					1	
	Stenonema sp.	3	3					3	
	Tricorythodes sp.	19	19					19	
ODONATA	*Argia sp.*	14	14					14	
	Enallagma sp.	1	1					1	
	Ischnura sp.	6	6					6	
	Macromia sp.	3	3					3	
COLEOPTERA	*Berosus sp.*	1	1					1	
	Stenelmis sp.	1	1					1	
DECAPODA	*Astacidae unid.*	5	5					5	
ISOPODA	*Caecidotea sp.*	1	1					1	
AMPHIPODA	*Hyalella azteca*	5	5					5	
OLIGOCHAETA	*Lumbriculidae unid.*	1	1					1	
MOLLUSCA	*Menetus sp.*	10	10					10	
	Physella sp.	1	1					1	
	Sphaerium sp.	9	9					9	
TURBELLARIA	*Turbellarian unid.*	1	1					1	
								0	

MACROINVERTEBRATE	TOTALS:	443	443	0	0	0	0	443	0
BIOLOGY DATA SHEET	# OF TAXA:	40		0		0		40	
	DIVERSITY INDEX:		4.03		0		0		4.03

EPT Index: 13

Water Body : Leaf R., Hattiesburg, MS LR-1
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSITE Count	#M»
DIPTERA	*Cladotanytarsus sp.*	1	1					1	
	Cricotopus sp.	1	1					1	
	Meropelopia sp.	3	3					3	
	Orthocladius sp.	2	2					2	
	Polypedilum sp.	57	57					57	
	Rheotanytarsus sp.	11	11					11	
	Simulium sp.	36	36					36	
	Stenochironomus sp.	1	1					1	
	Thienemanniella sp.	1	1					1	
	Tvetenia sp.	2	2					2	
TRICHOPTERA	*Cheumatopsyche sp.*	113	113					113	
	Chimarra sp.	2	2					2	
	Macrostemum sp.	12	12					12	
	Oecetis sp.	3	3					3	
	Triaenodes sp.	1	1					1	
EPHEMEROPTERA	*Baetis sp.*	23	23					23	
	Baetisca sp.	1	1					1	
	Caenis sp.	7	7					7	
	Isonychia sp.	28	28					28	
	Stenonema sp.	38	38					38	
	Tricorythodes sp.	21	21					21	
ODONATA	*Hetaerina sp.*	1	1					1	
	Macromia sp.	1	1					1	
HEMIPTERA	*Ranatra sp.*	1	1					1	
COLEOPTERA	*Stenelmis sp.*	15	15					15	
DECAPODA	*Astacidae unid.*	1	1					1	
MOLLUSCA	*Corbicula manilensis*	6	6					6	
PLECOPTERA	*Neoperla sp.*	2	2					2	
	Paragnetina sp.	5	5					5	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE	TOTALS:	396	396	0	0	0	0	396	0
BIOLOGY DATA SHEET	# OF TAXA:	29		0		0		29	
	DIVERSITY INDEX:		3.52		0		0		3.52

EPT Index: 13

Water Body : Leaf R., Hattiesburg, MS LR-2
Date Placed : 6/14/95 Date Collected : 6/14/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1		REPLIC 2		REPLIC 3		COMPOSITE	
		Count	#M»	Count	#M»	Count	#M»	Count	#M»
DIPTERA	*Ablabesmyia sp.*	1	1					1	
	Corynoneura sp.	1	1					1	
	Cricotopus sp.	78	78					78	
	Dicrotendipes sp.	8	8					8	
	Nanocladius sp.	3	3					3	
	Orthocladius sp.	1	1					1	
	Polypedilum sp.	518	518					518	
	Rheotanytarsus sp.	1	1					1	
	Simulium sp.	2	2					2	
	Synorthocladius sp.	2	2					2	
	Tanytarsus sp.	98	98					98	
	Thienemanniella sp.	31	31					31	
TRICHOPTERA	*Ceraclea sp.*	1	1					1	
	Cheumatopsyche sp.	9	9					9	
	Hydropsyche sp.	2	2					2	
	Macrostemum sp.	1	1					1	
	Neureclipsis sp.	2	2					2	
	Triaenodes sp.	1	1					1	
EPHEMEROPTERA	*Baetis sp.*	5	5					5	
	Caenis sp.	6	6					6	
	Stenonema sp.	5	5					5	
	Tricorythodes sp.	39	39					39	
ODONATA	*Argia sp.*	4	4					4	
	Enallagma sp.	7	7					7	
	Ischnura sp.	9	9					9	
	Macromia sp.	2	2					2	
HEMIPTERA	*Metrobates sp.*	1	1					1	
COLEOPTERA	*Stenelmis sp.*	1	1					1	
DECAPODA	*Astacidae unid.*	1	1					1	
AMPHIPODA	*Hyalella azteca*	5	5					5	
MEGALOPTERA	*Corydalus sp.*	1	1					1	
MOLLUSCA	*Sphaerium sp.*	3	3					3	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET	TOTALS:	849	849	0	0	0	0	849	0
	# OF TAXA:	32		0		0		32	
	DIVERSITY INDEX:		2.25		0		0		2.25

EPT Index: 10

HC-1 : Hercule discharge
6/14/95 9:10 am
pH - 6.87
Temp - 28.7°
DO = 3.5
Cond = 1246.0

Took water quality samples
@ 11:15 am @ HC-1

Charles - attached data is from the discharge ditch (creek?) for Hercules. Sampling locale is ~30' upstream of confluence with Bovie Lake

Bovie River - STA BR-3A (Anoxic embayment)
Embayment 1/2 mile D/S RR Bridge ~~[illegible]~~
on Left Bank (Lunky D/S) @ Power Line Crossing Near Processor for Gravel Operation (Depth ≈ 20 feet)
0930 6/14/95

Depth	pH	DO	Temp	Cond
Surface	6.1	6.7	26.5	41.6
3 feet	6.1	6.3	26.2	41.4
5 feet	6.0	6.0	26.[illegible]	41.5
7 feet	5.99	6.0	26.1	41.3
9 feet	5.97	5.9	26.0	41.8
11 feet	5.8	4.2	25.7	42.6
13 feet	5.5	1.43	24.5	42.1
15 feet	5.4	0.2	23.2	44.4
16 feet	5.4	0.1	22.4	49.[illegible] *

*Took W.Q. Sample @ 1415 hrs
6/14/95 @ 16' depth

Daily avg 5.0
DO Stl Bovie - inst min 4.0

SAMPLE AND ANALYSIS MANAGEMENT SYSTEM
EPA-REGION IV ESD, ATHENS, GA.

ECIFIED ANALYSIS DATA REPORT

07/21/95

PROJECT NO. 95-0303 SAMPLE NO. 95108 SAMPLE TYPE: SURFACEWA PROG ELEM: WQU COLLECTED BY: H HOWARD
SOURCE: BOWIE RIVER CITY: HATTIESBUR ST: MS
STATION ID: HC-1 COLLECTION START: 06/14/95 1115 STOP: 00/00/00

RESULTS	UNITS	PARAMETER
25	MG/L	AMMONIA
0.05U	MG/L	NITRATE-NITRITE NITROGEN
29	MG/L	TOTAL KJELDAHL NITROGEN
0.14	MG/L	TOTAL-PHOSPHORUS
5.0	MG/L	TOTAL SUSPENDED SOLIDS

Tot N = 29.0
Inorg N = 25.0
Org N = 4.0

FOOTNOTES***
*A-AVERAGE VALUE *NA-NOT ANALYZED *NAI-INTERFERENCES *J-ESTIMATED VALUE *N-PRESUMPTIVE EVIDENCE OF PRESENCE OF MATERIAL
*K-ACTUAL VALUE IS KNOWN TO BE LESS THAN VALUE GIVEN *L-ACTUAL VALUE IS KNOWN TO BE GREATER THAN VALUE GIVEN
*U-MATERIAL WAS ANALYZED FOR BUT NOT DETECTED. THE NUMBER IS THE MINIMUM QUANTITATION LIMIT.

Hercules
County: Forrest Co

RECEIVED
NOV 25 1995
Dept. of Environmental Quality
Office of Pollution Control

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INTRODUCTION

The EPA, Region IV, Wetlands Protection Section requested a field evaluation of water quality and biological impacts to the Bouie River associated with sand and gravel mining operations (American Sand and Gravel) in Hattiesburg, Mississippi. EPA and the Corps of Engineers (COE) are participants in an interagency task force to address concerns of sand and gravel mining in the Mobile District.

In response to this request, staff of the Ecological Support Branch, Region IV, Athens, Georgia, the Water Quality Standards Section, EPA, Region IV, Atlanta, Georgia, and the Mississippi Office of Pollution Control (MOPC) conducted a field evaluation during the period June 12-15, 1995.

BACKGROUND

American Sand and Gravel has been in operation in the study area since the turn of the century (personal communication, Jim Morris) and instream mining has created a series of run-of-the-river mined pits and side pits removed from the river channel alignment (figure 1). In some instances, mined depths have approached 60'.

The concern for environmental effects of the mining operations and permit issues prompted participants of the interagency task force to request this field evaluation.

STUDY AREA

The Bouie River lies within the Southeast Plains and Hills ecoregion. The Bouie River is formed from the confluence of Okatoma Creek in Covington County, Mississippi and Bowie Creek in Forrest County, Mississippi (Figure 1). Hattiesburg, Mississippi lies near the confluence of the Bouie and Leaf Rivers. Sand and gravel mining occurs in the southern part of the watershed below I-59.

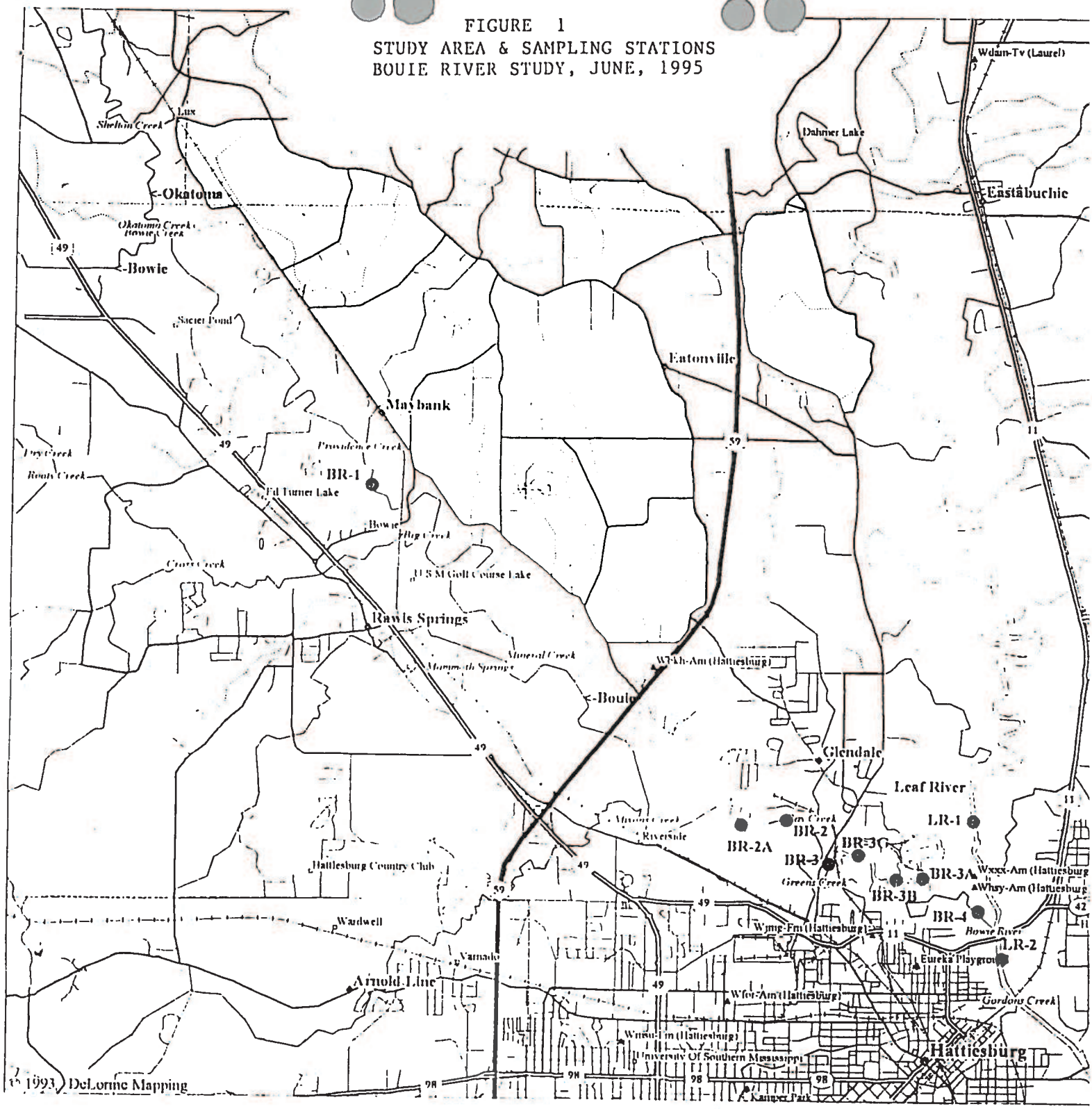
Sampling stations were located above the mining operations (BR-1) at Pep's Point and within the mined reach (BR-2, upstream of Glendale Bridge, BR-3, downstream of Glendale Bridge, and BR-4, immediately upstream of confluence with Leaf River. The Leaf River was also sampled upstream (LR-1) and downstream (LR-2) of the confluence with the Bouie River. Two types of mined pits were sampled: (1.) those aligned with the river channel (BR-2A and BR-3C), and (2.) those designated as side pits which were not aligned with the river channel (BR-3A and BR-3B). All sampling stations are shown in Figure 1.

METHODS

Water Chemistry

Grab surface samples for nitrogen series (ammonia, nitrate-

FIGURE 1
STUDY AREA & SAMPLING STATIONS
BOUIE RIVER STUDY, JUNE, 1995



LEGEND

- State Route
- Geo Feature
- Town, Small City
- Large City
- Hill
- Park
- Interstate, Turnpike
- US Highway
- Population Center
- Street, Road
- Hwy Ramp
- Major Street/Road
- Interstate Highway
- State Route
- US Highway
- Railroad
- Intermittent River
- Utility (powerline)
- Land Mass
- Open Water

Mag 13.00
Thu Aug 24 14:04:01 1995

Scale 1:75,000 (at center)

1 Miles

2 KM

nitrite,and Total Kjeldahl),total phosphorus, and total suspended solids were taken at all stations during the period June 13-14, 1995 with the exception of mined pits BR-3A and BR-3B. Due to water column stratification, samples at BR-3A and BR-3B were taken near the bottom in the anaerobic zone. Samples were collected, preserved, and stored according to the Analytical Support Branch SOP and QA Manual (1990).

Biology

Benthic macroinvertebrates provide an indication to water quality and detect environmental perturbations due to introduced pollutants. Due to their limited mobility and relatively long life span, the macroinvertebrate community is a reflection of water quality conditions over time.

With the exception of BR-2A, BR-3A, BR-3B, and BR-3C, all sites were wadeable, thus, the Rapid Bioassessment approach was utilized to sample benthic macroinvertebrates. Rapid bioassessment includes three phases: (1.) the biosurvey (benthic macroinvertebrate collections), (2.) in-situ physicochemical measurements, and (3.) habitat evaluations. Deep water precluded the use of a Rapid Bioassessment approach at BR-2A, BR-3A, BR-3B, and BR-3C. Benthic macroinvertebrate community assessment was only conducted at BR-2A and grab samples (3 replicates) were collected with a Ponar dredge.

In conjunction with the benthic macroinvertebrate sampling or biosurvey, in-situ physicochemical measurements and habitat evaluations were also conducted. Parameters recorded during the in-situ physicochemical measurements were water temperature, pH, conductivity, and dissolved oxygen. Field instruments utilized to measure these physicochemical parameters were calibrated at the beginning and end of each day as per the Ecological Support Branch SOP and QA Manual (1991). Habitat evaluations were conducted per the Rapid Bioassessment Protocols (EPA, 1989). No habitat evaluations were conducted at deep water sites since the habitat evaluation technique is specific for wadeable streams.

Sediment particle size

Substrate is an important factor in determining the composition of the benthic macroinvertebrate community. Alteration of the natural substrates by deposition of fines and organic matter directly affects the bottom fauna and the chemical character of the substrates. Past studies (Minshall,1968, and Hynes, 1970) have shown that coarser substrates support a more diverse benthic macroinvertebrate community.

In conjunction with the benthic macroinvertebrate sampling, unsieved sediment samples were collected from near bank and channel and composited to comprise the sediment sample. Sediment particle size analysis involved a wet sieving procedure through a series of U.S. Standard Sieves (8mm, #10, #35, #120, and #230). The size classification retained in each sieve corresponds to the modified

Wentworth scale (EPA, 1990). The clay and silt fractions, which represent the liquid captured from the sieving process, are separated by centrifugation at 750 rpm for three minutes. Only dry weights were obtained due to time constraints and sample backlog. Dry weights provided a breakdown on percentage gravel, coarse to fine sands, and fines (very fine sand, silt and clay) in bottom sediments. Bottom substrates were characterized relative to particle size at Stations BR-1, BR-2A, BR-4, and LR-2.

RESULTS

Water Chemistry

Complete results of water chemistry analyses are provided in Table 1.

Ammonia nitrogen, not detected at the station upstream of mining operations (BR-1), increased at Bouie River stations downstream of sand and gravel mining (Table 1; Figure 3). Highest concentrations of ammonia nitrogen occurred in water samples collected from the anaerobic, near bottom stratum at the side pits not aligned with the river channel (BR-3A and BR-3B). Stations BR-3A and BR-3B had ammonia nitrogen concentrations that were 3 and 5 times greater (0.29 and 0.42 mg/L), respectively than the average ammonia nitrogen concentration (0.08 mg/L) for the three Bouie River stations downstream of mining (Table 1; Figure 3). Water samples from the mined pit aligned with the river channel, BR-2A, had an ammonia nitrogen concentration in the range of the other two Bouie River stations downstream of thge mining operations (Table 1; Figure 3). An examination of Table 1 and Figure 3 indicates that ammonia nitrogen concentrations in the Bouie River downstream of sand and gravel mining may be impacting the water chemistry characteristics of the Leaf River. Water sample analysis from station LR-1, the Leaf River upstream of the confluence with the Bouie River, did not reveal the presence of ammonia nitrogen (Table 1; Figure 3). Conversely, water samples from station LR-2, approximately 0.5 miles downstream of the confluence with the Bouie River, had an ammonia nitrogen concentration of 0.10 mg/L (Table 1; Figure 3) which is within the range of concentrations observed in Bouie River stations downstream of mining.

Total nitogen concentrations in the mainstem Bouie River were higher downstream of sand and gravel mining operations than at BR-1, upstream of mining (Table 1; Figure 2). Highest concentration of total nitrogen (2.13 mg/L) occurred at BR-2A, a 47' deep mined area in the Bouie River channel upstream of the Glendale Road bridge (Figure 1). Stations located in mined areas not aligned with the river channel (BR-3A and BR-3B) also exhibited elevated total nitrogen concentrations (Table 1; Figure 2). As pointed out in the preceding paragraph, water chemistry characteristics of the Bouie River may be impacting the Leaf River. An examination of Table 1 and Figure 2 reveal that total nitrogen concentrations at LR-2 (0.95 mg/L), Leaf River downstream of the confluence with the Bouie, increased 42% over LR-1 (0.67 mg/L), the Leaf River station upstream of the confluence of the two rivers.

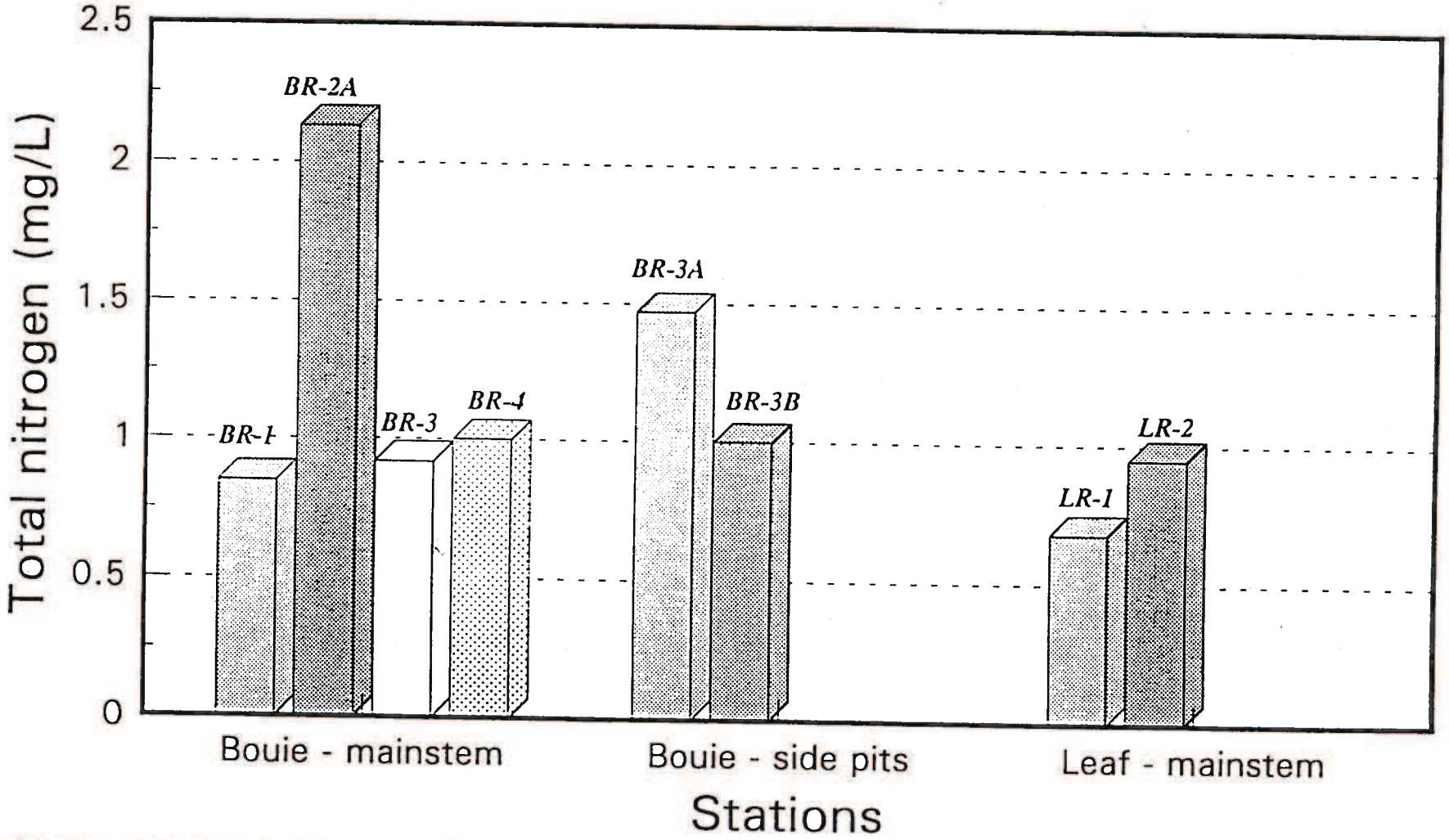
The mined pits not aligned with the river are an active nutrient

Table 1. Water chemistry, Bouie and Leaf Rivers, June, 1995.

Station	Concentration (mg/L)					
	ammonia nitrogen	nitrate-nitrite	TKN	Total nitrogen	Total phosp.	Tot. susp. solids
BR-1	*N/D	0.6	0.25	0.85	0.09	8.0
BR-2A	0.06	0.53	1.6	2.13	0.10	7.0
BR-3	0.06	0.52	0.40	0.92	0.09	11.0
BR-4	0.13	0.47	0.53	1.00	0.09	6.0
BR-3A	0.29	0.07	1.4	1.47	0.10	18.0
BR-3B	0.42	*N/D	1.0	1.0	0.10	14.0
LR-1	*N/D	0.33	0.34	0.67	0.05	5.0
LR-2	0.10	0.42	0.53	0.95	0.08	4.0

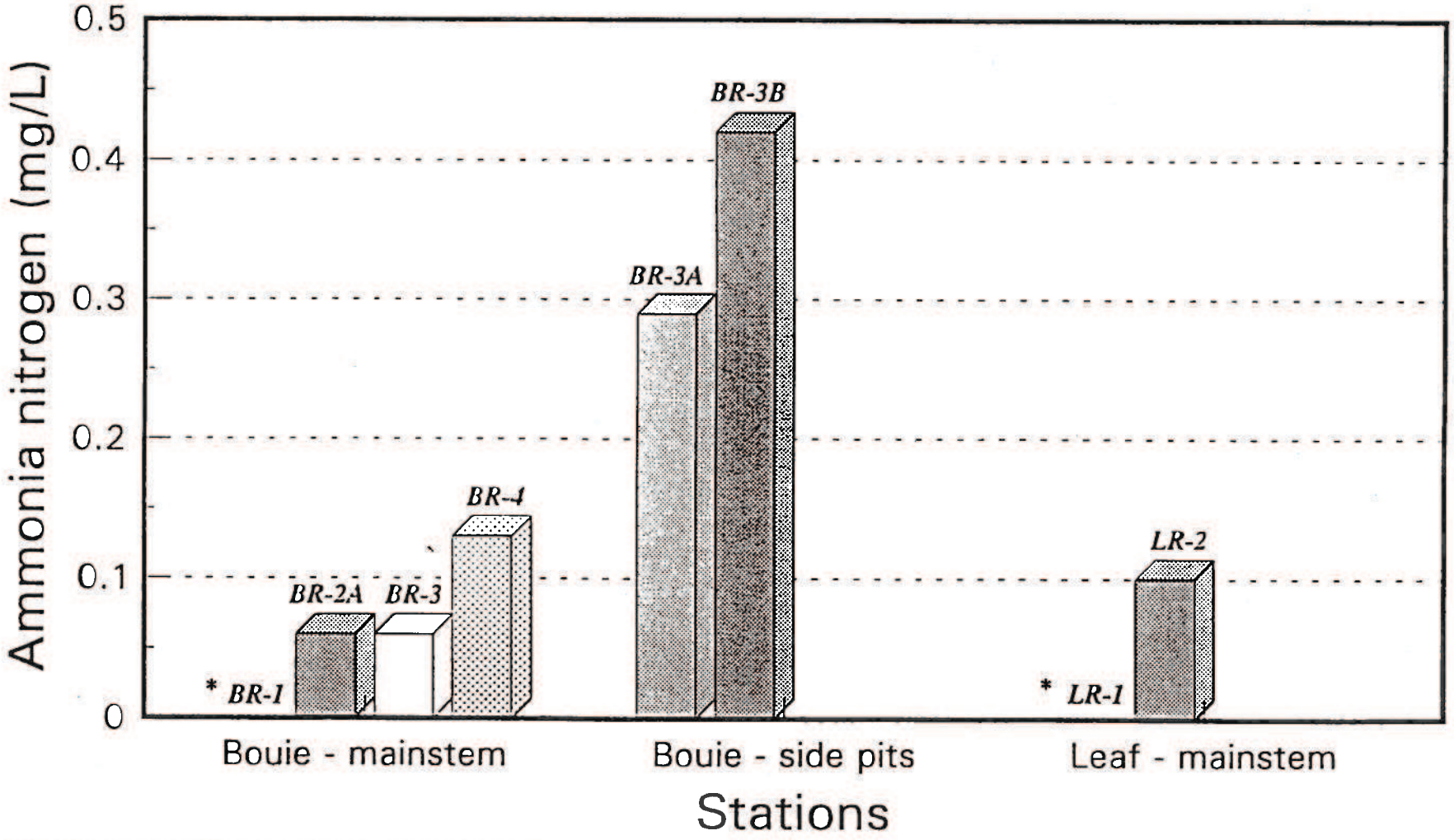
*not detected

Fig.2 Total nitrogen concentrations, Bouie River mainstem & side pits, Leaf River mainstem, June, 1995



side pits = not aligned with stream channel
For complete data set see Table 1.

Fig. 3 Ammonia nitrogen concentrations, Bouie River mainstem & side pits, Leaf River mainstem, June, 1995



side pits = not aligned with stream channel

* = not detected

sink. In addition, it appears that total suspended solids (Table 1) are also trapped in these same pits. Concentrations of total suspended solids at the two pits not aligned with the river channel (BR-3A and BR-3B), 18.0 and 14.0 mg/L respectively (Table 1), were much higher than the Bouie River mainstem stations (6.0 - 11.0 mg/L) and the mined area in the channel (BR-2A; 7.0 mg/L).

Biology

Biological studies were conducted per the Rapid Bioassessment Protocols methodology (EPA, 1989). Rapid Bioassessment consisted of three phases: (1.) in-situ physicochemical measurements, (2.)habitat evaluations, and (3.) macroinvertebrate collections. The results of each phase is discussed below.

o In-situ physicochemical measurements (pH, conductivity, water temperature, and dissolved oxygen) consisted of vertical profiles at non-wadeable sites and mid-depth measurements at wadeable sites.

Vertical profiles at mined areas not aligned with the river channel indicated water column stratification below 9' and resultant violations of state water quality standards for dissolved oxygen (Table 2; Figures 4,5, and 7). These violations occurred during both the June and July 1995 sampling periods. During the July, 1995 sampling period, the state water quality standard for pH was violated (Figure 7; Table 2). Mined areas aligned with the river channel did not exhibit water column stratification (Table 2; Figures 6 and 8). No violations of state water quality standards for instantaneous dissolved oxygen (4.0 mg/L) occurred at either the mainstem Bouie River stations (BR-1, BR-3, and BR-4), the Leaf River stations (LR-1 and LR-2), and the mined areas in the Bouie that were aligned with the river channel (BR-2A and BR-3C; Table 2).

In both June and July, 1995 a thermal gradient accompanied dissolved oxygen excursion at mined area BR-3A (Table 2). No thermal gradient was present at the stations aligned with the river channel (BR-2A and BR-3C).

o Habitat evaluations were completed at stations BR-1, BR-3, BR-4, LR-1, and LR-2. The habitat evaluation procedure is specific for wadeable streams therefore no evaluation was made of non-wadeable stations. Results of the habitat evaluation are given in Table 3. The Bouie River station upstream of mining operations (BR-1) had the highest habitat score of all the wadeable sites. The two downstream stations, BR-3 and BR-4, had identical scores of 86 which was 21 points lower than the 107 score at BR-1 (Table 3). Habitat was degraded downstream of mining operations due to sedimentation. This was reflected in the habitat scores at BR-3 and BR-4 (7 and 8, respectively) where habitat parameter #5, bottom scouring and deposition, scored lower than station BR-1 (11). The Leaf River stations (LR-1 and LR-2) had lower habitat scores than BR-1, BR-3, and BR-4. Gravel was the main sediment component at the Bouie River stations while coarse/medium/fine sands were the

Table 2. Summary results, in-situ physicochemical measurements, Bouie and Leaf Rivers, June, 1995 and July, 1995.

Station	Date	Time	D.O. (range in mg/L)	Temp. ("C)	pH	Cond. (umhos/cm)
BR-1	6/13/95	0830	7.5	22.3	6.2	38.1
BR-2A	6/13/95	1315	4.6 to 6.1	24.6 to 26.0	5.9 to 6.2	42.1 to 42.5
LR-1	6/13/95	1700	8.0	26.9	6.6	117.8
BR-3A	6/14/95	0930	0.0 to 6.7 *	22.4 to 26.5	5.4 to 6.1	41.3 to 49.1
BR-3C	6/14/95	0950	5.6 to 5.7	25.9 to 26.0	6.1 to 6.2	42.8 to 42.9
BR-3	6/14/95	1005	5.7	25.8	6.1	41.5
BR-3B	6/14/95	1430	0.0 to 8.0 *	22.0 to 28.9	5.5 to 6.5	38.9 to 45.2
BR-4	6/14/95	1620	6.8	27.4	6.3	45.6
LR-2	6/14/95	1530	7.1	27.1	6.3	71.4
BR-3A	7/25/95	1255	0.0 to 13.2 *	20.1 to 32.9	5.8 to 9.3 *	47.4 to 210.0
BR-3C	7/25/95	1320	6.3 to 7.2	29.9 to 30.5	6.3 to 7.2	41.7 to 49.7

* = Violation of state water quality standards

FIGURE 4
DISSOLVED OXYGEN PROFILE,
STATION BR-3A, 6/14/95

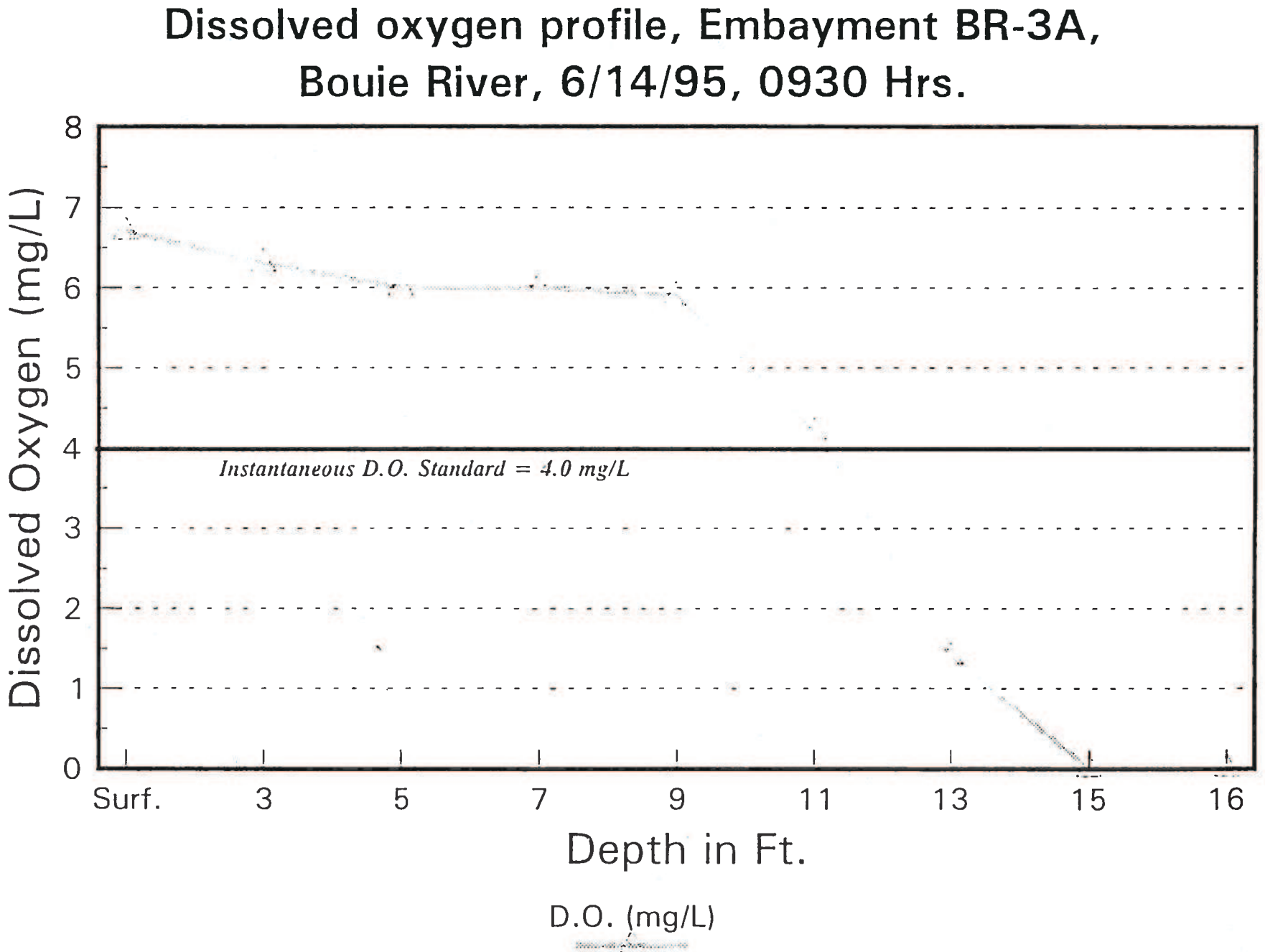


FIGURE 5
DISSOLVED OXYGEN PROFILE,
STATION BR-3B, 6/14/95

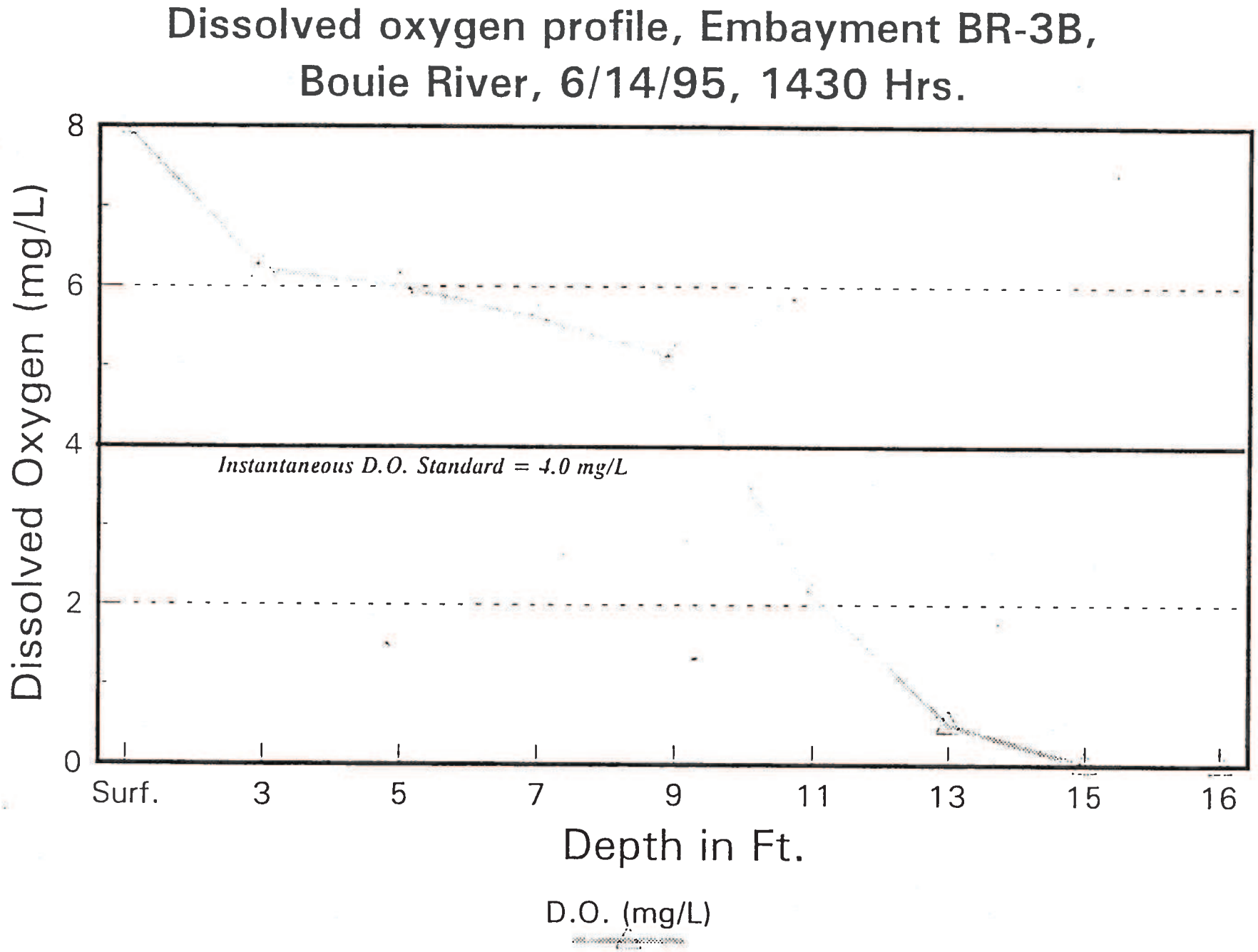


FIGURE 6
DISSOLVED OXYGEN PROFILE,
STATION BR-3C, 6/14/95

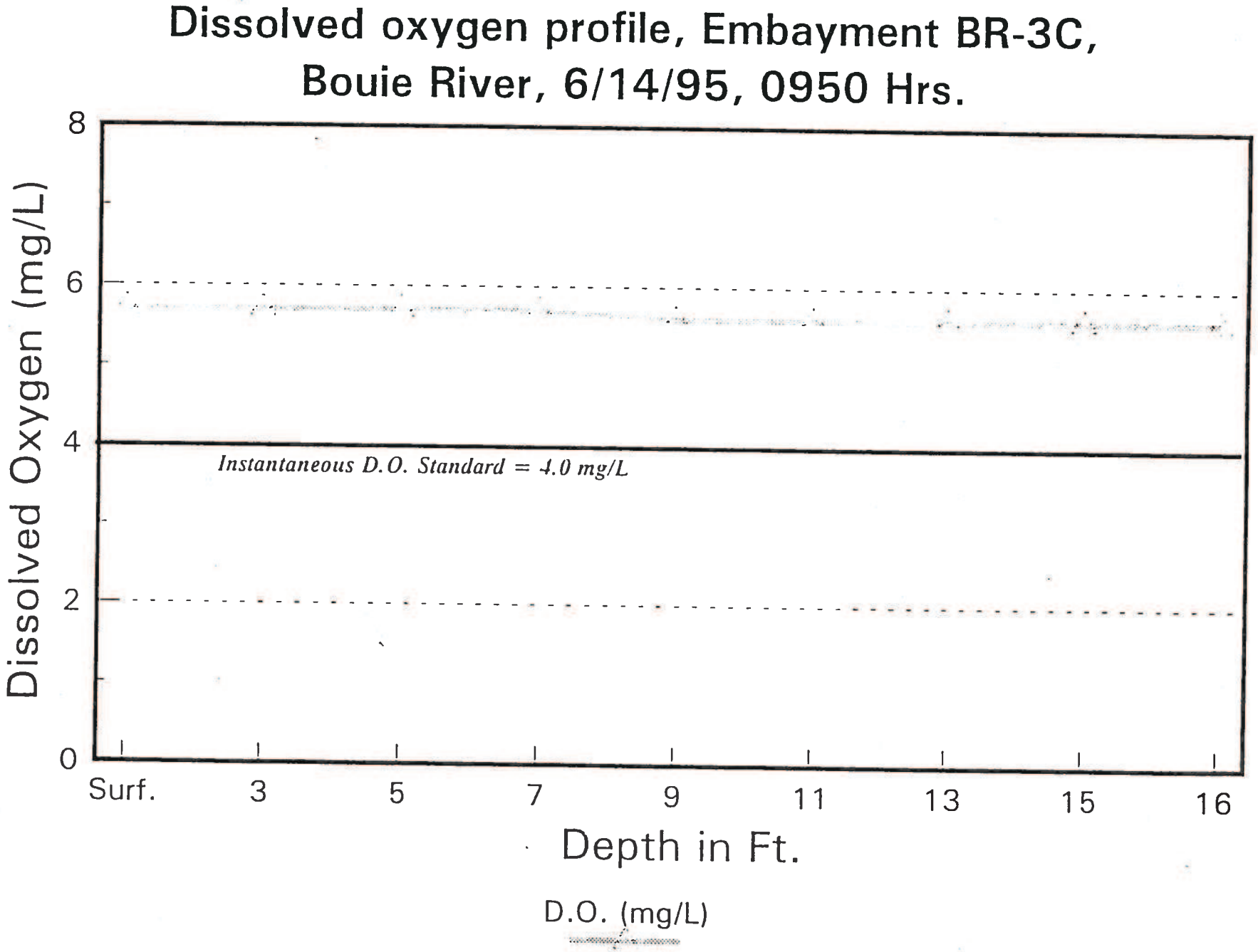


FIGURE 7
DISSOLVED OXYGEN PROFILE,
STATION BR-3A, 7/25/95

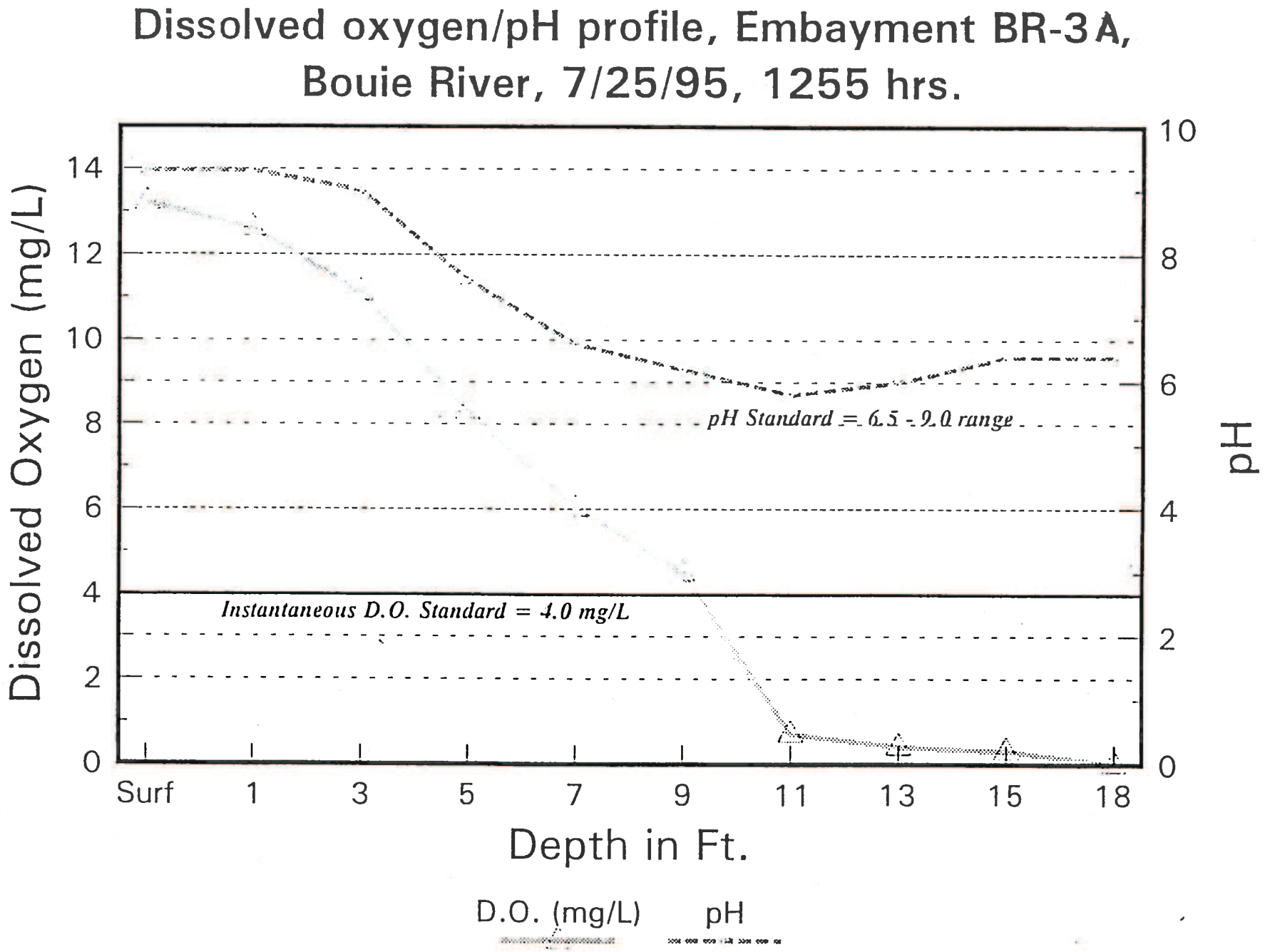


FIGURE 8
DISSOLVED OXYGEN PROFILE,
STATION BR-3C, 7/25/95

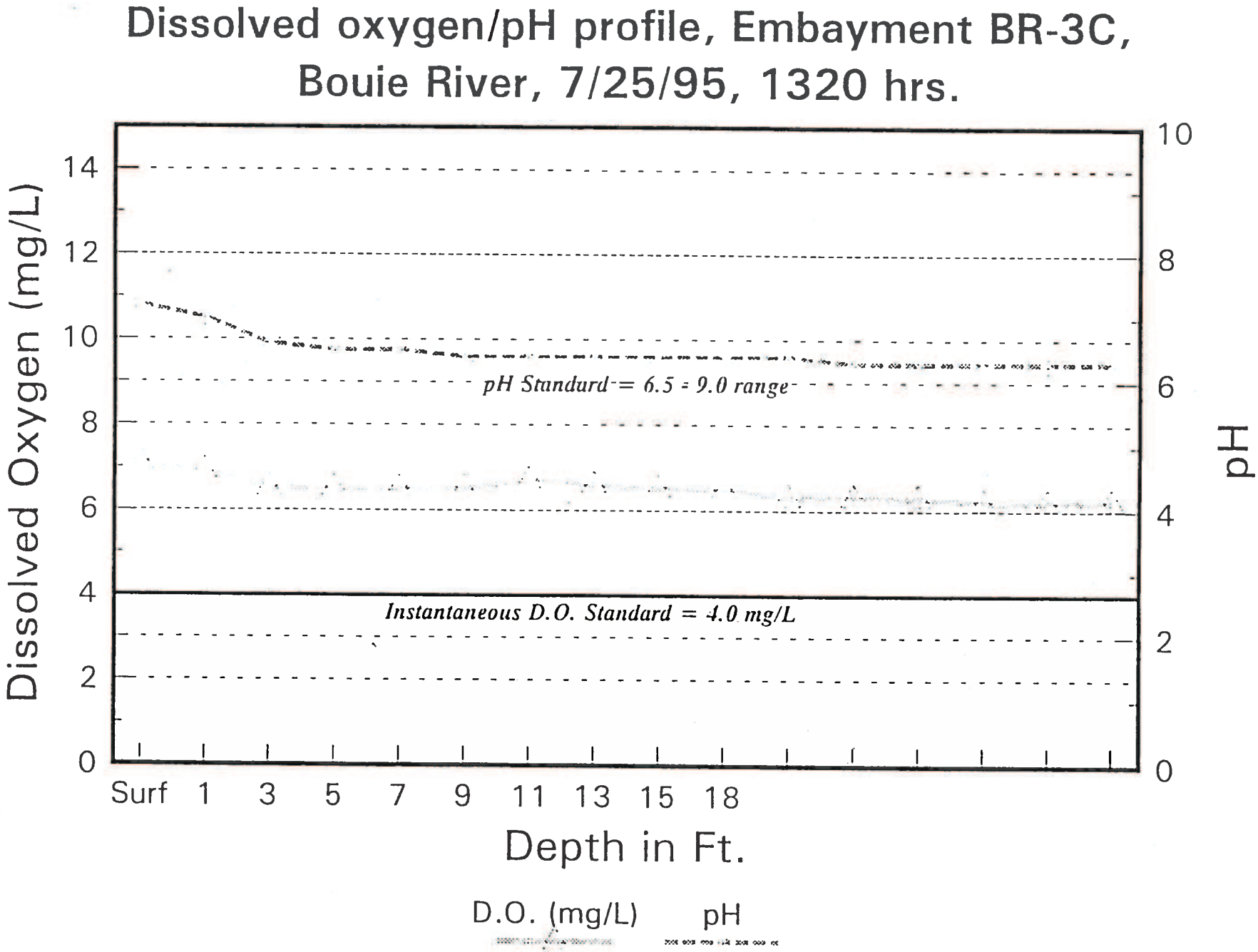


Table 3 . Habitat Evaluation Scores, Bouie and Leaf Rivers, June, 1995.

Station #	Locale	Habitat Score
BR-1	Bouie R. @ Pep's Point (Upstream mining operations)	107
BR-3	Bouie R. ~200 yds. downstream Glendale Rd. bridge (downstream of mining operations)	86
BR-4	Bouie R. ~ 200 yds. upstream of US 11 bridge (downstream of mining operations)	86
LR-1	Leaf R. ~ 1 mi. upstream of US 11 bridge (above confluence with Bouie R.)	79
LR-2	Leaf R. ~ 0.5 mi. downstream of US 11 bridge and confluence with Bouie R.	59

predominant sediment at the Leaf River station (Table 5). This fact contributed to the lower habitat scores at the Leaf River sites.

o Benthic macroinvertebrates were more diverse at BR-1 (51 sp.; Table 4 & appendix) than at any other sampling station. The EPT Index, a compilation of species in the orders Ephemeroptera, Plecoptera, and Trichoptera, was 18 at BR-1. Generally, the more pollution-sensitive organisms are in the Ephemeroptera, Plecoptera, and Trichoptera. A decline in taxa richness and the EPT Index occurred at stations downstream of sand and gravel mining operations. Benthic macroinvertebrate collections from BR-2A, a 47' deep mined area, indicates that these areas are not conducive to establishment of a diverse benthic macroinvertebrate community. In addition, sediment particle size analysis revealed sediment characteristics at BR-2A unfavorable for benthic organisms. The EPT Index at BR-2A was 0 and only 4 species of benthic organisms were collected (Table 4; appendix). Bouie River mainstem stations downstream of the sand and gravel mining operations had a taxa richness range of 28 to 40 species and the EPT Index ranged from 11 to 14. The Leaf River stations, due to habitat limitations alluded to earlier, had similar taxa richness and EPT Index scores to Bouie River stations downstream of mining (Table 4).

Sediment particle size

Sediment size characteristics were examined at four stations: BR-1, BR-2A, BR-4, and LR-2.

Gravel and cobble were the predominant substrate at BR-1 which is upstream of sand and gravel mining (Table 5). Fine sediments, such as very fine sand, silt, and clay, comprised less than 1% of the sediments at BR-1 (Table 5). Station BR-2A, the 47' deep mined area, had a bottom substrate almost solely comprised (91%) of very fine sand, silt, and clay (Table 5). In contrast to the riverine stations at both the Bouie and Leaf Rivers, sediments at BR-2A had less than 1% gravel. Bouie River station BR-4, below all sand and gravel mining operations, had similar sediment composition to BR-1 with one exception (Table 5). BR-1 had a large number of rocks and boulders, especially in the riffle runs. These would not be collected in a sediment grab for particle size analysis. BR-4 did not have the boulders and rocks that were prevalent at BR-1.

CONCLUSIONS

Sand and gravel mining in the Bouie River has negatively altered the water chemistry and biology of a wadeable stream. Bouie River, in its natural state upstream of mining operations, is a wadeable stream characterized by a diversity of habitats for both fish and benthic macroinvertebrates. A system of run-of-the-river lakes and embayments offset from the river channel alignment characterize the Bouie downstream of mining operations. Short reaches of the river, between mined areas, do exist but mining impacts such as sedimentation and water quality impacts associated with the side

pits or offset embayments have degraded those reaches. The greatest liability appears to be the mined areas that are offset or not aligned with the river channel. State water quality standards were violated due to the anaerobic state of bottom waters at these sites and the fact that these sites are nutrient and sediment sinks. Ammonia nitrogen production at the side pits is contributing to an increase in concentration of ammonia nitrogen in the mainstem Bouie River downstream of mining operations. An additional concern is the eutrophic state of these areas. Excessive algal production was occurring during the July, 1995 in-situ physicochemical profiles.

Table 4. Summary of biometrics, Bouie and Leaf Rivers, Benthic macroinvertebrates, RBP III, June, 1995.

Station	Taxa Richness	EPT Index	% Dominant taxon
BR-1	51	18	23.2
BR-2	33	14	16.3
BR-2A	4	0	45.0
BR-3	28	11	24.7
BR-4	40	13	28.5
LR-1	29	13	28.5
LR-2	32	10	61.0

FIGURE 9
BENTHIC MACROINVERTEBRATES,
TAXA RICHNESS AND EPT INDEX,
BOUIE RIVER, JUNE, 1995

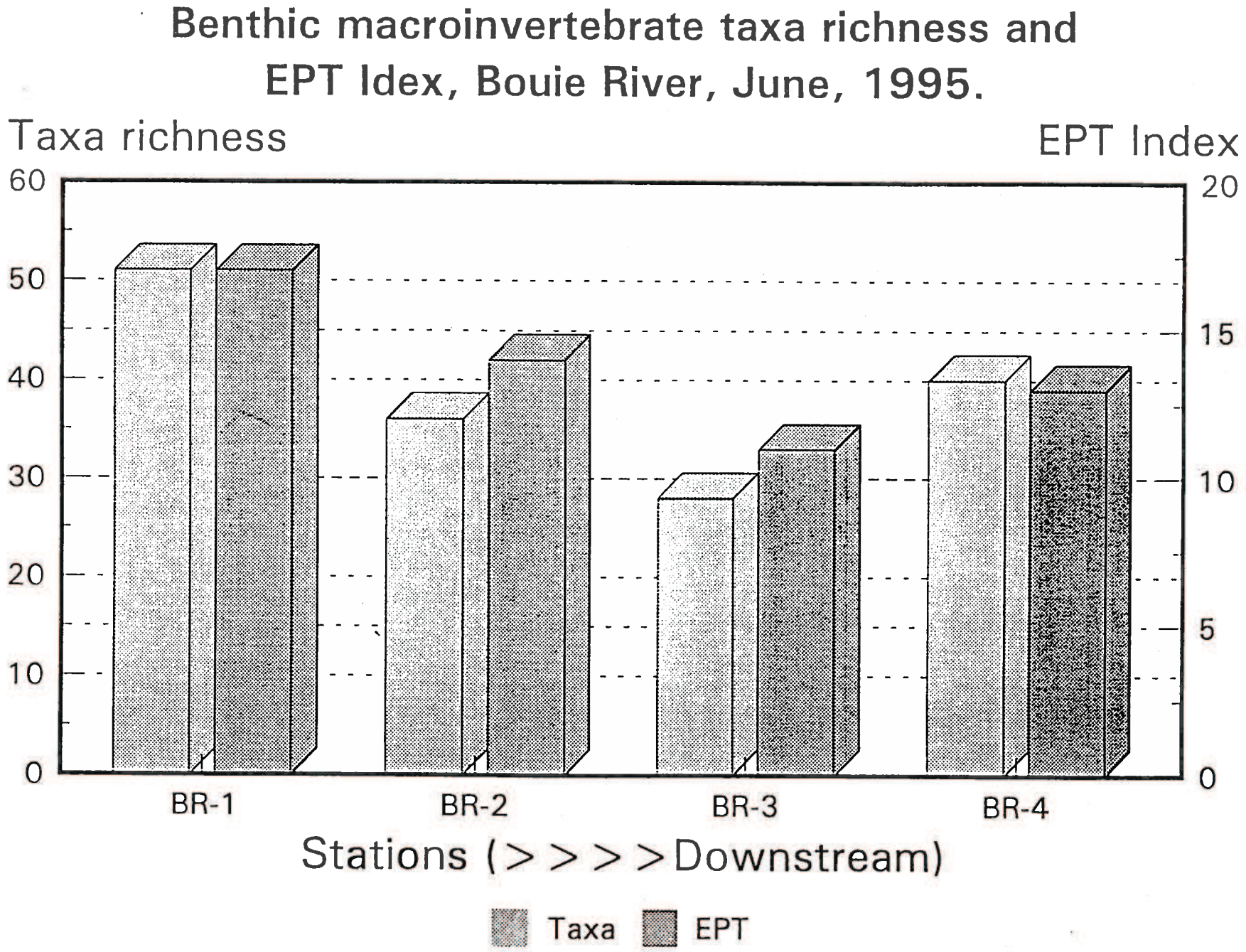


Table 5. Sediment composition, % total dry weight, Bouie and Leaf Rivers, June, 1995.

Station	Date	% Gravel	% Coarse, medium, fine, sand	% Very fine sand, silt, clays
BR-1	6/13/95	80	19	<1%
BR-2A	6/13/95	<1%	9	91
BR-4	6/14/95	78	22	<1%
LR-2	6/14/95	33	66	<1%

Summary of Findings - Bouie River

1.) Vertical profiles of D.O., pH, Conductivity, and temperature at embayments (mined pits) not aligned with the river channel exhibited water column stratification and violations of water quality standards. Profiles during the June 1995 study revealed D.O. values below the standard for instantaneous D.O. (4.0 mg/L) at both mined pits not aligned with the river channel (BR-3A & BR-3B). Mined pit BR-3C, which is aligned with the river channel, met water quality standards and did not exhibit water column stratification during the June 1995 study. Additional vertical profiles were completed at these same sites in July 1995. Results of the July 1995 profiles also revealed a water quality standards violation at BR-3A for instantaneous D.O. In both June and July 1995, a thermal gradient accompanied D.O. excursion at BR-3A. No thermal gradient was present at BR-3C. In addition, the water quality standard for pH (range of 6.5 - 9.0) was also violated at BR-3A in July 1995. At this time, pH ranged from 5.8 - 9.3 at BR-3A. As in June 1995, the station aligned with the river channel, BR-3C, met water quality standards in July 1995. One area of concern is the obvious algal production in the euphotic zone (surface to 3') at BR-3A in July 1995 stimulated by the excessive nutrients (especially NH_3) originating from the reducing conditions associated with anoxic bottom waters (denitrification). This has led to a water column dissolved oxygen regime ranging from 0.0 - 13.2 mg/L at BR-3A as opposed to a range of 6.2 - 7.1 mg/L at BR-3C.

2.) Ammonia nitrogen concentrations exhibited a longitudinal increase in the main stem Bouie River stations downstream of mining operations. Denitrification in the mined pits not aligned with the river channel appear to be the contributing source of ammonia nitrogen to the river. For example, the two pits with anaerobic bottom waters (BR-3A & BR-3B) had concentrations of ammonia nitrogen that were 3 and 5 times greater, respectively, than the average ammonia nitrogen concentration for the three Bouie River stations downstream of mining operations. As was mentioned earlier in the text, excessive ammonia nitrogen production in these pits not aligned with the river channel is contributing to eutrophic conditions there. Additionally, pits such as BR-3A and BR-3B are a source for the increased ammonia nitrogen in the Bouie River. Ammonia nitrogen was not detected at the Bouie River station upstream of mining operations (BR-1) or the Leaf River station upstream of the confluence with the Bouie (LR-1).

3.) Habitat evaluations, conducted as part of the Rapid Bioassessment, indicated a decline in habitat quality at Bouie River stations downstream of mining operations when compared to habitat quality at the station upstream of mining operations (BR-1). The highest habitat evaluation score (107) occurred at BR-1, upstream of mining operations. Habitat evaluation scores downstream of mining operations decreased due to sedimentation effects.

4.) Greatest diversity of benthic macroinvertebrates occurred at BR-1, upstream of mining operations. A decline in taxa richness and the EPT Index occurred at stations downstream of mining operations. Benthic macroinvertebrate collections from BR-2A, a 47' deep mined pit aligned with the river channel, indicates that these mined areas are not conducive to establishment of a diverse benthic macroinvertebrate community. Particle size analysis at BR-2A revealed that over 91% of the sediments are composed of very fine sand, silt, and clay. These fine, unconsolidated sediments are not favorable habitats for benthic organisms. Past studies have shown that coarser substrates provide greater habitat diversity for benthic organisms. Riverine stations in the Bouie River were characterized by a bottom substrate composed of cobble, gravel, coarse sand, and medium sand.

5.) An area of concern that needs further investigation is the increase in water temperature above background due to the vast open water areas created by the mined pits. For example, water temperature at the background (upstream) station, BR-1, was measured at 22.3°C at 8:30 a.m. on 6/13/95. Water temperature at BR-3, downstream of mining operations, at 10:05 a.m. on 6/14/95 was 25.8°C. This represents a 3.5°C increase in water temperature.

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(1.) Hynes,H.B.N. 1970. The Ecology of Running Waters. Liverpool University Press. 541p.

(2.) Minshall, G. Wayne. 1968. Community dynamics of the benthic fauna in a woodland springbrook. Hydrobiol. 32: 305-339.

(3.) Morris, Jim. 8/23/95. Personal communication.

(4.) Plafkin, James L., Michael T. Barbour, Kimberly D. Porter, Sharon K. Gross, and Robert M. Hughes. 1989. Rapid Bioassessment Protocols for Use in Streams and Rivers. EPA/440/4-89-001.

(5.) U.S. Environmental Protection Agency, Region IV. 1990. Analytical Support Branch SOP and QA Manual. Environmental Services Division, Athens, GA.

(6.) U.S. Environmental Protection Agency, Region IV. 1991. Ecological Support Branch SOP and QA Manual. Environmental Services Division, Athens, GA.

(7.) U.S. Environmental Protection Agency, Office of Research and Development. 1990. Macroinvertebrate Field and Laboratory Methods for Evaluating the Biological Integrity of Surface Waters. EPA/600/4-90/030.

APPENDIX

Water Body : Bouie River, Hattiesburg, MS, BR-1
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1		REPLIC 2		REPLIC 3		COMPOSITI	
		Count	#M»	Count	#M»	Count	#M»	Count	#M»
DIPTERA	*Atherix sp.*	5	5					5	
	Bezzia sp.	1	1					1	
	Cryptochironomus sp.	2	2					2	
	Hemerodromia sp.	1	1					1	
	Nilothauma sp.	1	1					1	
	Polypedilum sp.	36	36					36	
	Rheocricotopus sp.	15	15					15	
	Rheotanytarsus sp.	19	19					19	
	Simulium sp.	201	201					201	
	Tanytarsus sp.	1	1					1	
	Tvetenia sp.	33	33					33	
TRICHOPTERA	*Brachycentrus sp.*	53	53					53	
	Cheumatopsyche sp.	68	68					68	
	Chimarra sp.	9	9					9	
	Hydropsyche sp.	77	77					77	
	Macrostemum sp.	25	25					25	
	Nectopsyche sp.	23	23					23	
	Oecetis sp.	3	3					3	
PLECOPTERA	*Paragnetina sp.*	7	7					7	
	Perlesta sp.	9	9					9	
EPHEMEROPTERA	*Baetis sp.*	8	8					8	
	Caenis sp.	8	8					8	
	Cinygmula sp.	13	13					13	
	Isonychia sp.	92	92					92	
	Leptohyphes sp.	6	6					6	
	Pseudocloeon sp.	1	1					1	
	Seratella sp.	13	13					13	
	Stenonema sp.	22	22					22	
	Tricorythodes sp.	12	12					12	
ODONATA	*Argia sp.*	1	1					1	
	Boyeria sp.	1	1					1	
	Calopteryx sp.	2	2					2	
	Dromogomphus sp.	2	2					2	
	Macromia sp.	1	1					1	
	Stylurus sp.	1	1					1	
HEMIPTERA	*Rhagovelia sp.*	1	1					1	
COLEOPTERA	*Dineutus sp.*	5	5					5	
	Dubiraphia sp.	3	3					3	
	Helichus sp.	2	2					2	
	Macronychus sp.	3	3					3	
	Microcylloepus sp.	12	12					12	

- Continued on next page -

Water Body : Bouie River, Hattiesburg, MS, BR-1
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	REPLIC 1 #M»	REPLIC 2 Count	REPLIC 2 #M»	REPLIC 3 Count	REPLIC 3 #M»	COMPOSITI Count	COMPOSITI #M»
	Stenelmis sp.	46	46					46	
ISOPODA	*Caecidotea sp.*	2	2					2	
MEGALOPTERA	*Corydalus sp.*	7	7					7	
OLIGOCHAETA	*Branchiura sowerbyi*	3	3					3	
	Limnodrilus sp.	1	1					1	
	Lumbriculidae unid.	2	2					2	
	Pristina sp.	1	1					1	
	Tubificidae unid.	3	3					3	
DECAPODA	*Palaemonetes paludosus*	1	1					1	
MOLLUSCA	*Sphaerium sp.*	1	1					1	
								0	
								0	
								0

Water Body : Bouie R., Hattiesburg, MS BR-2A
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Ponar

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 122.4	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 3	Grabs :	Grabs :	Grabs : 3
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1		REPLIC 2		REPLIC 3		COMPOSIT	
		Count	#M»	Count	#M»	Count	#M»	Count	#M
DIPTERA	*Procladius sp.*	1	41					1	
OLIGOCHAETA	*Limnodrilus sp.*	7	286					7	
	Tubificidae unid.	15	612					15	
MOLLUSCA	*Sphaerium sp.*	10	408					10	
								0	
								0	
								0

Water Body : Bouie R., Hattiesburg, MS BR-2
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSIT Count	#M»
DIPTERA	*Dicrotendipes sp.*	1	1					1	
	Polypedilum sp.	2	2					2	
	Rheotanytarsus sp.	8	8					8	
	Simulium sp.	1	1					1	
	Tanytarsus sp.	1	1					1	
TRICHOPTERA	*Cheumatopsyche sp.*	9	9					9	
	Hydropsyche sp.	11	11					11	
	Hydroptila sp.	1	1					1	
	Macrostemum sp.	2	2					2	
	Nectopsyche sp.	2	2					2	
	Oecetis sp.	1	1					1	
	Triaenodes sp.	4	4					4	
PLECOPTERA	*Paragnetina sp.*	1	1					1	
EPHEMEROPTERA	*Baetis sp.*	5	5					5	
	Caenis sp.	7	7					7	
	Isonychia sp.	1	1					1	
	Stenacron sp.	5	5					5	
	Stenonema sp.	5	5					5	
	Tricorythodes sp.	20	20					20	
ODONATA	*Argia sp.*	2	2					2	
	Didymops sp.	1	1					1	
COLEOPTERA	*Macronychus sp.*	3	3					3	
	Stenelmis sp.	6	6					6	
ISOPODA	*Caecidotea sp.*	2	2					2	
AMPHIPODA	*Hyalella azteca*	2	2					2	
DECAPODA	*Palaemonetes paludosus*	5	5					5	
OLIGOCHAETA	*Lumbriculidae unid.*	1	1					1	
MEGALOPTERA	*Corydalus sp.*	1	1					1	
HIRUDINEA	*Placobdella sp.*	1	1					1	
TURBELLARIA	*Turbellarian unid.*	2	2					2	
MOLLUSCA	*Menetus sp.*	1	1					1	
	Physella sp.	7	7					7	
	Sphaerium sp.	2	2					2	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET									
TOTALS:	123	123	0	0	0	0	123	0	
# OF TAXA:	33		0		0		33		
DIVERSITY INDEX:		4.45		0		0		4.45	

EPT Index: 14

Water Body : Bouie R.; BR-3 Rootbank; Hattiesburg, MS
Date Placed : 6/14/95 Date Collected : 6/14/95
Collector : Howard Sorted By : Howard
Identified By: Howard/Smith/Schultz Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSIT Count	#M
DIPTERA	*Endochironomus sp.*	1	1					1	
	Nilotanypus sp.	1	1					1	
	Polypedilum sp.	13	13					13	
	Rheotanytarsus sp.	5	5					5	
	Simulium sp.	8	8					8	
	Tvetenia sp.	2	2					2	
TRICHOPTERA	*Cheumatopsyche sp.*	40	40					40	
	Hydropsyche sp.	31	31					31	
	Macrostemum sp.	9	9					9	
	Neureclipsis sp.	2	2					2	
EPHEMEROPTERA	*Baetis sp.*	1	1					1	
	Caenis sp.	1	1					1	
	Isonychia sp.	5	5					5	
	Seratella sp.	2	2					2	
	Stenonema sp.	9	9					9	
	Tricorythodes sp.	10	10					10	
ODONATA	*Argia sp.*	2	2					2	
	Enallagma sp.	1	1					1	
	Macromia sp.	1	1					1	
DECAPODA	*Astacidae unid.*	3	3					3	
	Palaemonetes paludosus	1	1					1	
AMPHIPODA	*Gammarus sp.*	2	2					2	
	Hyalella azteca	2	2					2	
MOLLUSCA	*Physella sp.*	1	1					1	
	Sphaerium sp.	5	5					5	
MEGALOPTERA	*Corydalus sp.*	1	1					1	
COLEOPTERA	*Stenelmis sp.*	2	2					2	
PLECOPTERA	*Paragnetina sp.*	1	1					1	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET	TOTALS:	162	162	0	0	0	0	162	0		
	# OF TAXA:	28		0		0		28			
	DIVERSITY INDEX:		3.74		0		0			3.7	

EPT Index: 11

% Contribution dominant taxon: 24.7

Water Body : Bouie R.; Hattiesburg, MS BR-4
Date Placed : 6/14/95 Date Collected : 6/14/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSITE Count	#M»
DIPTERA	*Ablabesmyia sp.*	2	2					2	
	Axarus sp.	1	1					1	
	Cricotopus sp.	17	17					17	
	Dicrotendipes sp.	19	19					19	
	Endochironomus sp.	1	1					1	
	Glyptotendipes sp.	1	1					1	
	Nanocladius sp.	2	2					2	
	Polypedilum sp.	112	112					112	
	Rheocricotopus sp.	3	3					3	
	Rheotanytarsus sp.	23	23					23	
	Simulium sp.	6	6					6	
	Tanytarsus sp.	4	4					4	
	Thienemanniella sp.	3	3					3	
TRICHOPTERA	*Cheumatopsyche sp.*	68	68					68	
	Hydropsyche sp.	32	32					32	
	Hydroptila sp.	4	4					4	
	Macrostemum sp.	8	8					8	
	Neureclipsis sp.	14	14					14	
	Phylocentropus sp.	2	2					2	
EPHEMEROPTERA	*Baetis sp.*	12	12					12	
	Caenis sp.	2	2					2	
	Centroptilum sp.	2	2					2	
	Isonychia sp.	23	23					23	
	Leptohyphes sp.	1	1					1	
	Stenonema sp.	3	3					3	
	Tricorythodes sp.	19	19					19	
ODONATA	*Argia sp.*	14	14					14	
	Enallagma sp.	1	1					1	
	Ischnura sp.	6	6					6	
	Macromia sp.	3	3					3	
COLEOPTERA	*Berosus sp.*	1	1					1	
	Stenelmis sp.	1	1					1	
DECAPODA	*Astacidae unid.*	5	5					5	
ISOPODA	*Caecidotea sp.*	1	1					1	
AMPHIPODA	*Hyalella azteca*	5	5					5	
OLIGOCHAETA	*Lumbriculidae unid.*	1	1					1	
MOLLUSCA	*Menetus sp.*	10	10					10	
	Physella sp.	1	1					1	
	Sphaerium sp.	9	9					9	
TURBELLARIA	*Turbellarian unid.*	1	1					1	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET	TOTALS:	443	443	0	0	0	0	443	0
	# OF TAXA:	40		0		0		40	
	DIVERSITY INDEX:		4.03		0		0		4.03

EPT Index: 13

Water Body : Leaf R., Hattiesburg, MS LR-1
Date Placed : 6/13/95 Date Collected : 6/13/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1 Count	#M»	REPLIC 2 Count	#M»	REPLIC 3 Count	#M»	COMPOSITE Count	#M»
DIPTERA	*Cladotanytarsus sp.*	1	1					1	
	Cricotopus sp.	1	1					1	
	Meropelopia sp.	3	3					3	
	Orthocladius sp.	2	2					2	
	Polypedilum sp.	57	57					57	
	Rheotanytarsus sp.	11	11					11	
	Simulium sp.	36	36					36	
	Stenochironomus sp.	1	1					1	
	Thienemanniella sp.	1	1					1	
	Tvetenia sp.	2	2					2	
TRICHOPTERA	*Cheumatopsyche sp.*	113	113					113	
	Chimarra sp.	2	2					2	
	Macrostemum sp.	12	12					12	
	Oecetis sp.	3	3					3	
	Triaenodes sp.	1	1					1	
EPHEMEROPTERA	*Baetis sp.*	23	23					23	
	Baetisca sp.	1	1					1	
	Caenis sp.	7	7					7	
	Isonychia sp.	28	28					28	
	Stenonema sp.	38	38					38	
	Tricorythodes sp.	21	21					21	
ODONATA	*Hetaerina sp.*	1	1					1	
	Macromia sp.	1	1					1	
HEMIPTERA	*Ranatra sp.*	1	1					1	
COLEOPTERA	*Stenelmis sp.*	15	15					15	
DECAPODA	*Astacidae unid.*	1	1					1	
MOLLUSCA	*Corbicula manilensis*	6	6					6	
PLECOPTERA	*Neoperla sp.*	2	2					2	
	Paragnetina sp.	5	5					5	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET									
	TOTALS:	396	396	0	0	0	0	396	0
	# OF TAXA:	29		0		0		29	
	DIVERSITY INDEX:		3.52		0		0		3.52
	EPT Index: 13								

Water Body : Leaf R., Hattiesburg, MS LR-2
Date Placed : 6/14/95 Date Collected : 6/14/95
Collector : Howard/Loch Sorted By : Howard
Identified By: Howard/Loch/Smith Sample Mechanism: Dipnet

REPLICATE 1	REPLICATE 2	REPLICATE 3	COMPOSITE
Factor: 1	Factor:	Factor:	
Depth :	Depth :	Depth :	
Grabs : 1	Grabs :	Grabs :	Grabs : 1
Sample #:	Sample #:	Sample #:	Bottom:

	ORGANISMS	REPLIC 1		REPLIC 2		REPLIC 3		COMPOSITE	
		Count	#M»	Count	#M»	Count	#M»	Count	#M»
DIPTERA	*Ablabesmyia sp.*	1	1					1	
	Corynoneura sp.	1	1					1	
	Cricotopus sp.	78	78					78	
	Dicrotendipes sp.	8	8					8	
	Nanocladius sp.	3	3					3	
	Orthocladius sp.	1	1					1	
	Polypedilum sp.	518	518					518	
	Rheotanytarsus sp.	1	1					1	
	Simulium sp.	2	2					2	
	Synorthocladius sp.	2	2					2	
	Tanytarsus sp.	98	98					98	
	Thienemanniella sp.	31	31					31	
TRICHOPTERA	*Ceraclea sp.*	1	1					1	
	Cheumatopsyche sp.	9	9					9	
	Hydropsyche sp.	2	2					2	
	Macrostemum sp.	1	1					1	
	Neureclipsis sp.	2	2					2	
	Triaenodes sp.	1	1					1	
EPHEMEROPTERA	*Baetis sp.*	5	5					5	
	Caenis sp.	6	6					6	
	Stenonema sp.	5	5					5	
	Tricorythodes sp.	39	39					39	
ODONATA	*Argia sp.*	4	4					4	
	Enallagma sp.	7	7					7	
	Ischnura sp.	9	9					9	
	Macromia sp.	2	2					2	
HEMIPTERA	*Metrobates sp.*	1	1					1	
COLEOPTERA	*Stenelmis sp.*	1	1					1	
DECAPODA	*Astacidae unid.*	1	1					1	
AMPHIPODA	*Hyalella azteca*	5	5					5	
MEGALOPTERA	*Corydalus sp.*	1	1					1	
MOLLUSCA	*Sphaerium sp.*	3	3					3	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

MACROINVERTEBRATE BIOLOGY DATA SHEET									
	TOTALS:	849	849	0	0	0	0	849	0
	# OF TAXA:	32		0		0		32	
	DIVERSITY INDEX:		2.25		0		0		2.25
	EPT Index: 10								

HC-1 , Hercule discharge
6/14/95 9:10 am
pH - 6.87
Temp - 28.7°
D.O. = 3.5
Cond = 1246.0

Took water quality samples
@ 11:15 am @ HC-1

Charles - attached
data is from
the discharge ditch
(creek?) for Hercules.
Sampling locale is ~50'
upstream of confluence
with Bovie. Lake

Bovie River - STA BR-3A (Anoxic embayment)
Embayment 1/2 mile D/S RR. Bridge ~~[illegible]~~
on Left Bank (Lunny D/S) @ Power
Line Crossing Near Processor for Gravel
Operation (Depth ≈ 20 feet)
0930 6/14/95

Depth	pH	DO	Temp	Cond
Surface	6.1	6.7	26.5	41.6
3 feet	6.1	6.3	26.2	41.4
5 feet	6.0	6.0	26.[illegible]	41.5
7 feet	5.99	6.0	26.1	41.3
9 feet	5.97	5.9	26.0	41.8
11 feet	5.8	4.2	25.7	42.6
13 feet	5.5	1.43	24.5	42.1
15 feet	5.4	0.2	23.2	44.4
16 feet	5.4	0.1	22.4	49.1 *

*Took W.Q. Sample @ 1415 hrs
6/14/95 @ 16' depth

DO Std Bovie = Daily avg 5.0
inst min. 4.0

file
fonnest
Comfy

HERCULES SITE INVESTIGATION
NOVEMBER 11, 1996

UNNAMED TRIBUTARY TO BOWIE RIVER

Parameter	(1) Hwy 42	(2) Above Trib	(3) Above 1st Pool	(4) In 2nd Pool	(5) Near Mouth
Bottom Depth (feet)	1.07	0.75	1.00	4.19	1.67
Sample Depth (feet)	0.35	0.41	0.71	2.14	0.92
Water Temp (^{0}C)	29.23	28.91	28.67	28.38	27.90
DO (mg/l)	**2.85**	**2.85**	**2.71**	4.85	**3.80**
DO % Sat	37.7	37.5	35.3	65.8	49.0
pH	6.79	6.86	6.82	6.94	6.88
Sp. Cond (umhos/cm)	**2810**	**2675**	**2632**	**2550**	**2470**
TDS (mg/l)	**1790**	**1710**	**1680**	**1620**	**1580**
TSS (mg/l)	21.0				8.0
BOD_5 (mg/l)	**92.0**				**70.0**
TOC (mg/l)	**73.0**				**58.0**
TP (mg/l)	<0.01				<0.01
TKN (mg/l)	**3.21**				**2.87**
NH_3 (mg/l)	0.30				0.18
NO_2 + NO_3 (mg/l)	0.04				<0.04
Time (hours)	1408	1340	1331	1325	1220

Bold indicates data violating State Water Quality Criteria and/or chemical screening levels.


GRAVEL
PITS
50
150
148
City Cem
Tr Pk
BM 159
OPEN CULVERT
Jones Sch
ALLEN ST
Eureka Playground
9TH
MOBILE
WT
Cem
7TH
168
Jeff Davis Sch
MAIN
5TH
ICG
4TH
MABEL ST
166
Eureka Sch
ST

TABLE III-7

Acceptable Target Levels and Water Quality Criteria for Use Support Decisions
Rivers, Streams, Lakes and Estuaries

WQ Category / Parameters	Units	Acceptable Target Level	Aquatic Life Criterion (Fresh water)	Aquatic Life Criterion (Salt water)	Comments
Category: General					
Temperature	C		<32.2	<32.2	
pH	standard		6.5 - 9.0	6.5 - 9.0	
Category: Dissolved Oxygen					
Dissolved Oxygen	mg/l		>4.0	>4.0	
Category: Oxygen Demand					
Biochemical oxygen demand	mg/l	<5			
Chemical oxygen demand	mg/l	<50			
Total organic carbon	mg/l	<15			
Category: Nutrients					
Total Kjeldahl Nitrogen	mg/l as N	<1			
Nitrate and Nitrite	mg/l as N	<1			PWS<10(Nitrate)
Total Phosphorus	mg/l as P	<0.2			
Category: Water Clarity					
Turbidity	NTU	<100			Not>50 over background
Total Suspended Solids	mg/l	<80			
Transparency, Secchi	meters	>0.2			
Chlorophyll a	mg/cu mtr	<10			<40 Lakes & Estuaries
Category: Dissolved Substances					
Conductivity	umhos/cm		<1000		PWS<500
Total dissolved solids	mg/l		<1500		PWS <500, Miss. R.<400
Chlorides	mg/l		-		PWS <230, Miss. R. <60
Category: Bacteria					
Fecal coliform (upper limit)	# / 100 ml		<4000	<4000	PWS,FW (Nov. - April)
Fecal coliform (lower limit)	# / 100 ml		<400	<400	SHL <43
Category: Water Column Toxicants*					
Arsenic (III), Total	ug/l		<360	<69	(CMC) PWS<0.0175
Cadmium, Total	ug/l		<1.8	<44	(CMC) PWS<10
Chromium (III),Total	ug/l		<984	-	(CMC)
Copper, Total	ug/l		<9.22	<2.5	(CMC)
Lead, Total	ug/l		<34	<235	(CMC) PWS<50
Mercury (II), Total	ug/l		<2.4	<2.1	(CMC) PWS<0.151
Nickel, Total	ug/l		<789	<75.2	(CMC)
Phenol, Total	mg/l		<0.3	<0.3	(CMC) PWS<0.001
Selenium, Total	ug/l		<21.7	<325	(CMC) PWS<10
Zinc, Total	ug/l		<65	<92	(CMC)

Key:	
	PWS- Public Water Supply
	FW- Fish & Wildlife
	SHL- Shellfish Harvesting
	CMC- Criteria Max. Conc.

* Aquatic life criteria for metals was calculated by converting total dissolved CMC (acute) criteria as stated in the State of Mississippi Water Quality Standards (proposed amendments, August 1995), to total recoverable acute criteria using conversion factors published in the 1996 305(b) guidance document. Hardness-dependent criteria are based on a hardness less or equal to 50 mg/l as CaCo3.

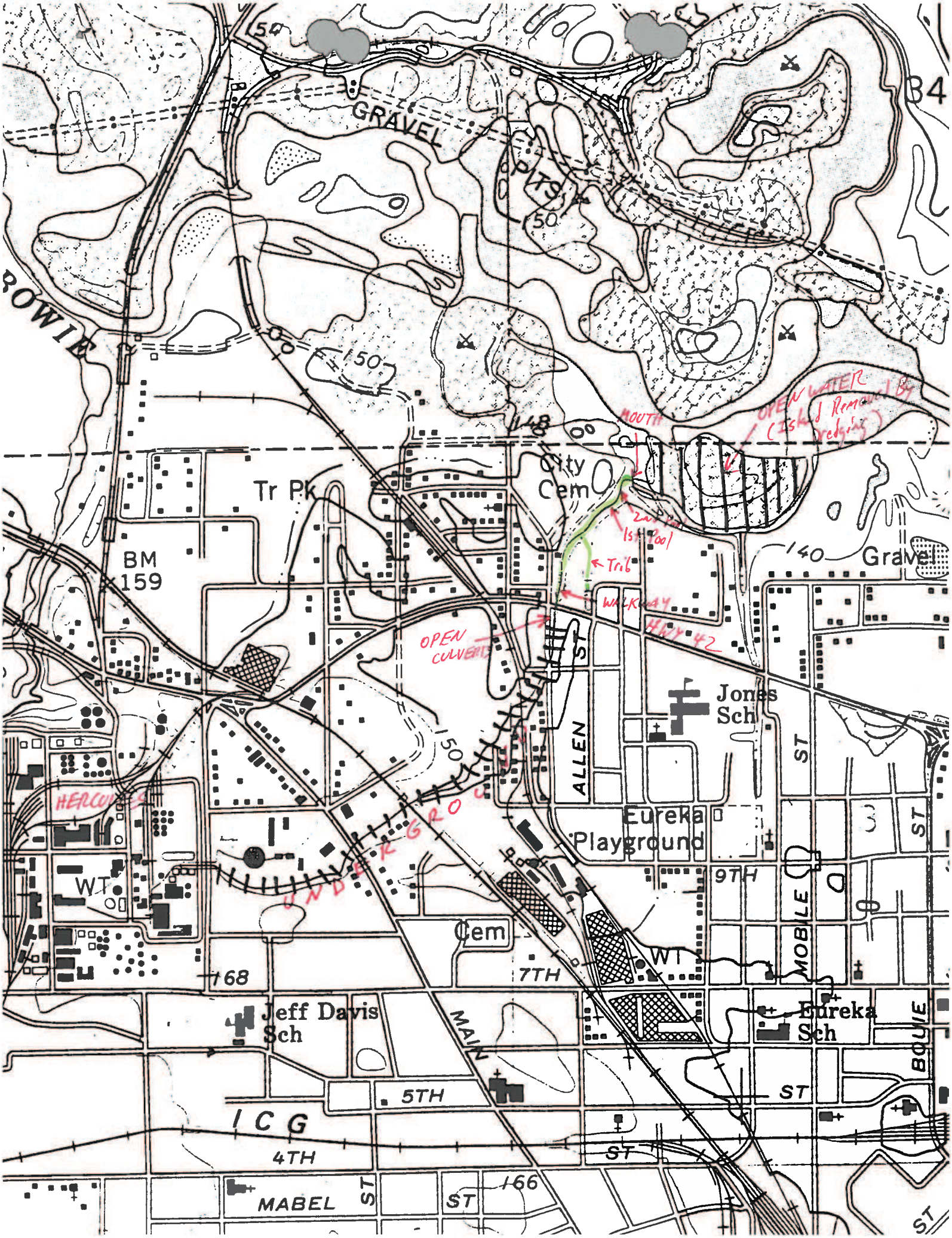
File
Hercules
Hattiesburg
Found by T's Sles

HERCULES SITE INVESTIGATION
NOVEMBER 11, 1996

UNNAMED TRIBUTARY TO BOWIE RIVER

Parameter	(1) Hwy 42	(2) Above Trib	(3) Above 1st Pool	(4) In 2nd Pool	(5) Near Mouth
Bottom Depth (feet)	1.07	0.75	1.00	4.19	1.67
Sample Depth (feet)	0.35	0.41	0.71	2.14	0.92
Water Temp (^{0}C)	29.23	28.91	28.67	28.38	27.90
DO (mg/l)	**2.85**	**2.85**	**2.71**	4.85	**3.80**
DO % Sat	37.7	37.5	35.3	65.8	49.0
pH	6.79	6.86	6.82	6.94	6.88
Sp. Cond (umhos/cm)	**2810**	**2675**	**2632**	**2550**	**2470**
TDS (mg/l)	**1790**	**1710**	**1680**	**1620**	**1580**
TSS (mg/l)	21.0				8.0
BOD_5 (mg/l)	**92.0**				**70.0**
TOC (mg/l)	**73.0**				**58.0**
TP (mg/l)	<0.01				<0.01
TKN (mg/l)	**3.21**				**2.87**
NH_3 (mg/l)	0.30				0.18
NO_2 + NO_3 (mg/l)	0.04				<0.04
Time (hours)	1408	1340	1331	1325	1220

Bold indicates data violating State Water Quality Criteria and/or chemical screening levels.



34
GRAVEL
PITS
ROWIE
150
148
City
Cem
Tr Pk
BM
159
MOUTH
OPEN WATER
(Island Removed By
redging)
2nd Pool
1st Pool
Trib
WALKWAY
HWY 42
OPEN
CULVERTS
140
Gravel
ALLEN
ST
Jones
Sch
ST
HERCULES
UNDERGROUND
Eureka
Playground
ST
9TH
WT
Cem
WT
MOBILE
168
7TH
Jeff Davis
Sch
MAIN
Eureka
Sch
BOUIE
5TH
ST
ICG
4TH
ST
MABEL
ST
ST
166
ST

TABLE III-7

Acceptable Target Levels and Water Quality Criteria for Use Support Decisions
Rivers, Streams, Lakes and Estuaries

WQ Category / Parameters	Units	Acceptable Target Level	Aquatic Life Criterion (Fresh water)	Aquatic Life Criterion (Salt water)	Comments
Category: General					
Temperature	C		<32.2	<32.2	
pH	standard		6.5 - 9.0	6.5 - 9.0	
Category: Dissolved Oxygen					
Dissolved Oxygen	mg/l		>4.0	>4.0	
Category: Oxygen Demand					
Biochemical oxygen demand	mg/l	<5			
Chemical oxygen demand	mg/l	<50			
Total organic carbon	mg/l	<15			
Category: Nutrients					
Total Kjeldahl Nitrogen	mg/l as N	<1			
Nitrate and Nitrite	mg/l as N	<1			PWS<10(Nitrate)
Total Phosphorus	mg/l as P	<0.2			
Category: Water Clarity					
Turbidity	NTU	<100			Not>50 over background
Total Suspended Solids	mg/l	<80			
Transparency, Secchi	meters	>0.2			
Chlorophyll a	mg/cu mtr	<10			<40 Lakes & Estuaries
Category: Dissolved Substances					
Conductivity	umhos/cm		<1000		PWS<500
Total dissolved solids	mg/l		<1500		PWS <500, Miss. R.<400
Chlorides	mg/l		-		PWS <230, Miss. R. <60
Category: Bacteria					
Fecal coliform (upper limit)	# / 100 ml		<4000	<4000	PWS,FW (Nov. - April)
Fecal coliform (lower limit)	# / 100 ml		<400	<400	SHL <43
Category: Water Column Toxicants*					
Arsenic (III), Total	ug/l		<360	<69	(CMC) PWS<0.0175
Cadmium, Total	ug/l		<1.8	<44	(CMC) PWS<10
Chromium (III),Total	ug/l		<984	-	(CMC)
Copper, Total	ug/l		<9.22	<2.5	(CMC)
Lead, Total	ug/l		<34	<235	(CMC) PWS<50
Mercury (II), Total	ug/l		<2.4	<2.1	(CMC) PWS<0.151
Nickel, Total	ug/l		<789	<75.2	(CMC)
Phenol, Total	mg/l		<0.3	<0.3	(CMC) PWS<0.001
Selenium, Total	ug/l		<21.7	<325	(CMC) PWS<10
Zinc, Total	ug/l		<65	<92	(CMC)

Key:	
	PWS- Public Water Supply
	FW- Fish & Wildlife
	SHL- Shellfish Harvesting
	CMC- Criteria Max. Conc.

* Aquatic life criteria for metals was calculated by converting total dissolved CMC (acute) criteria as stated in the State of Mississippi Water Quality Standards (proposed amendments, August 1995), to total recoverable acute criteria using conversion factors published in the 1996 305(b) guidance document. Hardness-dependent criteria are based on a hardness less or equal to 50 mg/l as CaCo3.

HERCULES SITE INVESTIGATION
NOVEMBER 11, 1996

UNNAMED TRIBUTARY TO BOWIE RIVER

Parameter	(1) Hwy 42	(2) Above Trib	(3) Above 1st Pool	(4) In 2nd Pool	(5) Near Mouth
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Sample Depth (feet)	0.35	0.41	0.71	2.14	0.92
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DO (mg/l)	**2.85**	**2.85**	**2.71**	4.85	**3.80**
DO % Sat	37.7	37.5	35.3	65.8	49.0
pH	6.79	6.86	6.82	6.94	6.88
Sp. Cond (umhos/cm)	**2810**	**2675**	**2632**	**2550**	**2470**
TDS (mg/l)	**1790**	**1710**	**1680**	**1620**	**1580**
TSS (mg/l)	21.0				8.0
BOD_5 (mg/l)	**92.0**				**70.0**
TOC (mg/l)	**73.0**				**58.0**
TP (mg/l)	<0.01				<0.01
TKN (mg/l)	**3.21**				**2.87**
NH_3 (mg/l)	0.30				0.18
NO_2 + NO_3 (mg/l)	0.04				<0.04
Time (hours)	1408	1340	1331	1325	1220

Bold indicates data violating State Water Quality Criteria and/or chemical screening levels.

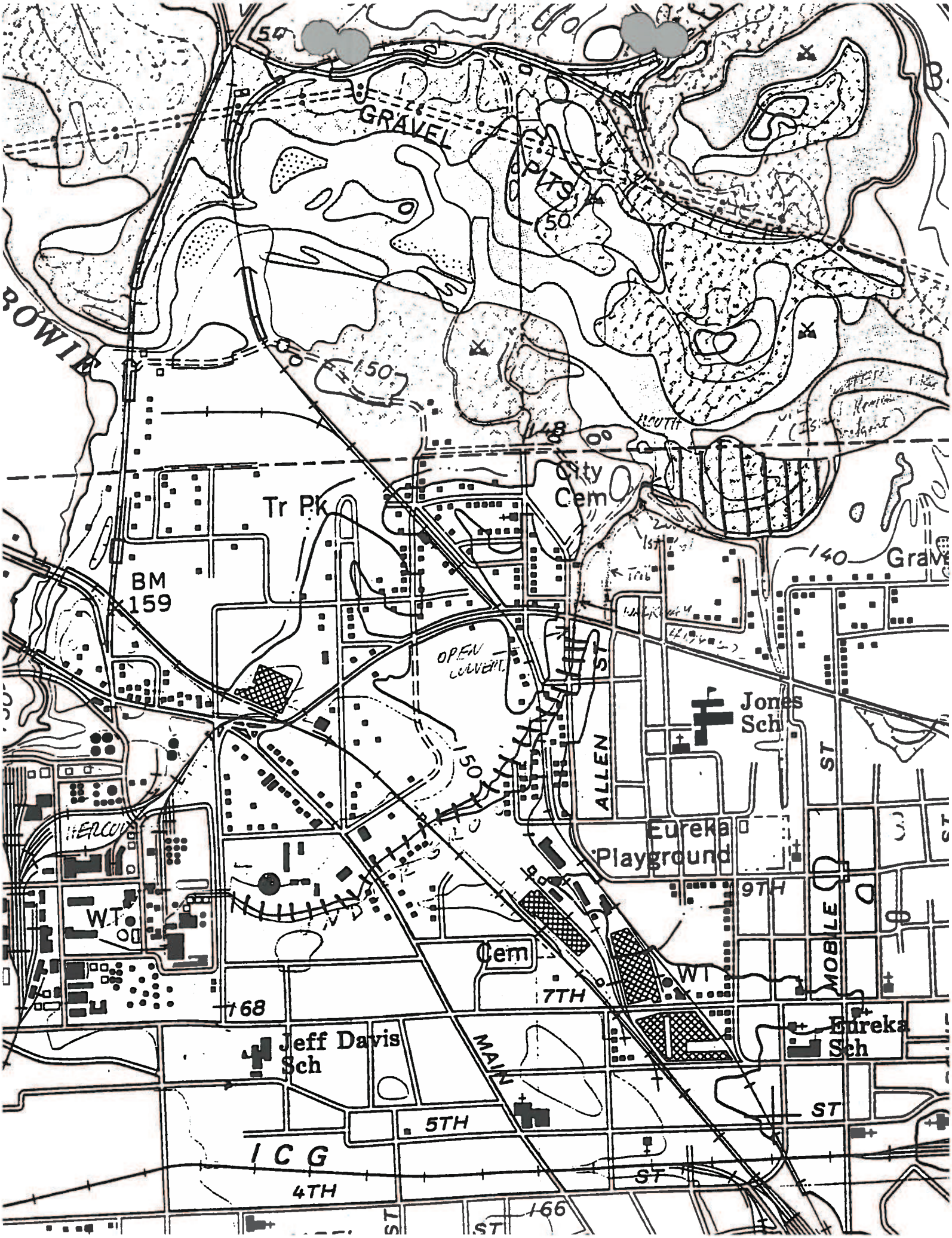
GRAVEL
BOWIE
Tr Pk
City Cem
BM 159
OPEN CULVERT
ALLEN ST
Jones Sch
Eureka Playground
9TH
MOBILE
Cem
7TH
Jeff Davis Sch
MAIN
Eureka Sch
5TH
ICG
4TH
ST

TABLE III-7

Acceptable Target Levels and Water Quality Criteria for Use Support Decisions
Rivers, Streams, Lakes and Estuaries

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Dissolved Oxygen	mg/l		>4.0	>4.0	
Category: Oxygen Demand					
Biochemical oxygen demand	mg/l	<5			
Chemical oxygen demand	mg/l	<50			
Total organic carbon	mg/l	<15			
Category: Nutrients					
Total Kjeldahl Nitrogen	mg/l as N	<1			
Nitrate and Nitrite	mg/l as N	<1			PWS<10(Nitrate)
Total Phosphorus	mg/l as P	<0.2			
Category: Water Clarity					
Turbidity	NTU	<100			Not>50 over background
Total Suspended Solids	mg/l	<80			
Transparency, Secchi	meters	>0.2			
Chlorophyll a	mg/cu mtr	<10			<40 Lakes & Estuaries
Category: Dissolved Substances					
Conductivity	umhos/cm		<1000		PWS<500
Total dissolved solids	mg/l		<1500		PWS <500, Miss. R.<400
Chlorides	mg/l		-		PWS <230, Miss. R. <60
Category: Bacteria					
Fecal coliform (upper limit)	# / 100 ml		<4000	<4000	PWS,FW (Nov. - April)
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Category: Water Column Toxicants*					
Arsenic (III), Total	ug/l		<360	<69	(CMC) PWS<0.0175
Cadmium, Total	ug/l		<1.8	<44	(CMC) PWS<10
Chromium (III),Total	ug/l		<984	-	(CMC)
Copper, Total	ug/l		<9.22	<2.5	(CMC)
Lead, Total	ug/l		<34	<235	(CMC) PWS<50
Mercury (II), Total	ug/l		<2.4	<2.1	(CMC) PWS<0.151
Nickel, Total	ug/l		<789	<75.2	(CMC)
Phenol, Total	mg/l		<0.3	<0.3	(CMC) PWS<0.001
Selenium, Total	ug/l		<21.7	<325	(CMC) PWS<10
Zinc, Total	ug/l		<65	<92	(CMC)

Key:	
	PWS- Public Water Supply
	FW- Fish & Wildlife
	SHL- Shellfish Harvesting
	CMC- Criteria Max. Conc.

* Aquatic life criteria for metals was calculated by converting total dissolved CMC (acute) criteria as stated in the State of Mississippi Water Quality Standards (proposed amendments, August 1995), to total recoverable acute criteria using conversion factors published in the 1996 305(b) guidance document. Hardness-dependent criteria are based on a hardness less or equal to 50 mg/l as CaCo3.

United States Environmental Protection Agency

Office of Enforcement
Washington, DC 20460

EPA Form 3510-2C
Revised February 1985
Previous editions are obsolete.

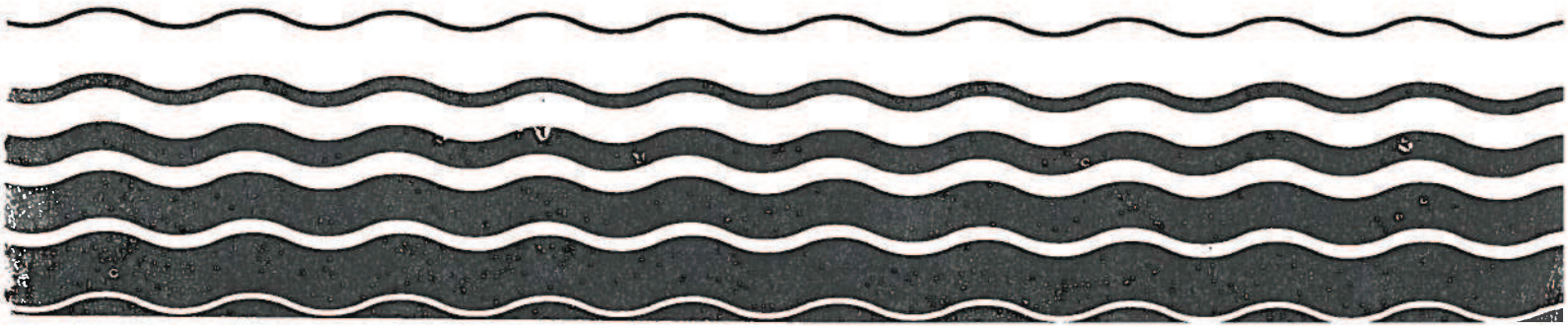
Permits Division

EPA

Application Form 2C - Wastewater Discharge Information

Consolidated Permits Program

This form must be completed by all persons applying for an EPA permit to discharge wastewater *(existing manufacturing, commercial, mining, and silvicultural operations)*.







United States Environmental Protection Agency

Office of Enforcement
Washington, DC 20460

EPA Form 3510-1
Revised October 1980
Previous edition may be used until supply is exhausted.

Permits Division

EPA

Application Form 1 - General Information

Consolidated Permits Program

This form must be completed by all persons applying for a permit under EPA's Consolidated Permits Program. See the general instructions to Form 1 to determine which other application forms you will need.



Riverside
GULF
Substa
Claypits
Radio Tower
Cem
BOWIE
GRAVEL PITS
Tr Pk
City Cem
Gravel Pit
RIVER
Creek
Greens
Roseland Park Cem
Jones Sch
Eureka Playground
Cem
Jeff Davis Sch
Eureka Sch
Lamar Sch
Radio Tower (WFOR)
ICG
MABEL
MILLER
Main St Sch
High Sch
Gordons
Hawkins Jr High Sch
Courthouse
Jaycee Park
Oaklawn Cem
Kamper Park
Camp Sch
Woodley Sch
HATTIESBURG
Park
Sacred Heart Sch
Walthall Sch
Methodist Hospital
Bethune Sch
Rowan High Sch
Pineview Park
William Carey College
Radio Tower
SCALE 1:24 000
1 MILE
7000 FEET
1 KILOMETER

ase print or type in the unshaded areas only
l—in areas are spaced for elite type, i.e., 12 characters

Form App[illegible] No. 2040-0086 Approval expires 7-31-88

FORM 1 GENERAL

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

F MSD008182081 D

LABEL ITEMS

. EPA I.D. NUMBER

II. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

PLEASE PLACE LABEL IN THIS SPACE

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill—in area below. Also, if any of the preprinted data is absent *(the area to the left of the label space lists the information that should appear)*, please provide it in the proper fill—in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI *(except VI-B which must be completed regardless)*. Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

I. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the perenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold—faced terms.

SPECIFIC QUESTIONS	MARK 'X' YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X	
B. Does or will this facility *(either existing or proposed)* include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	X		X
D. Is this a proposed facility *(other than those described in A or B above)* which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		X	
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X	
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in-situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1 SKIP HERCULES INCORPORATED

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)			
2 CHARLES JORDAN ENVIR COORD	601	545	3450	Ext. 360

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 P.O. BOX 1937

B. CITY OR TOWN	C. STATE	D. ZIP CODE
4 HATTIESBURG	MS	39401

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 613 WEST 7TH STREET

B. COUNTY NAME

FORREST

C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
6 HATTIESBURG	MS	39401	

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST	B. SECOND
2861 (specify) Gum and Wood Chemicals	2821 (specify) Synthetic Resins
C. THIRD	**D. FOURTH**
2869 (specify) Industrial Organic Chemicals	2899 (specify) Chemicals and Chemical Preps.

VIII. OPERATOR INFORMATION

A. NAME

Hercules Incorporated

B. Is the name listed in Item VIII-A also the owner? ☒ YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL, S = STATE, P = PRIVATE, M = PUBLIC (other than federal or state), O = OTHER (specify)

P (specify)

D. PHONE (area code & no.) A 601 545 3450

E. STREET OR P.O. BOX

P. O. Box 1937

F. CITY OR TOWN

Hattiesburg

G. STATE MS

H. ZIP CODE 39401

IX. INDIAN LAND

Is the facility located on Indian lands? ☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)	D. PSD (Air Emissions from Proposed Sources)
9 N MS0001830	9 P
B. UIC (Underground Injection of Fluids)	**E. OTHER** (specify)
9 U	9 0800-00001 (specify) AIR PERMIT
C. RCRA (Hazardous Wastes)	**E. OTHER** (specify)
9 R	9 (specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Diversified chemical manufacturer of modified resins and resin solutions, paper chemicals, polyamides, ketene dimer, rosin emulsions, and wax emulsions.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

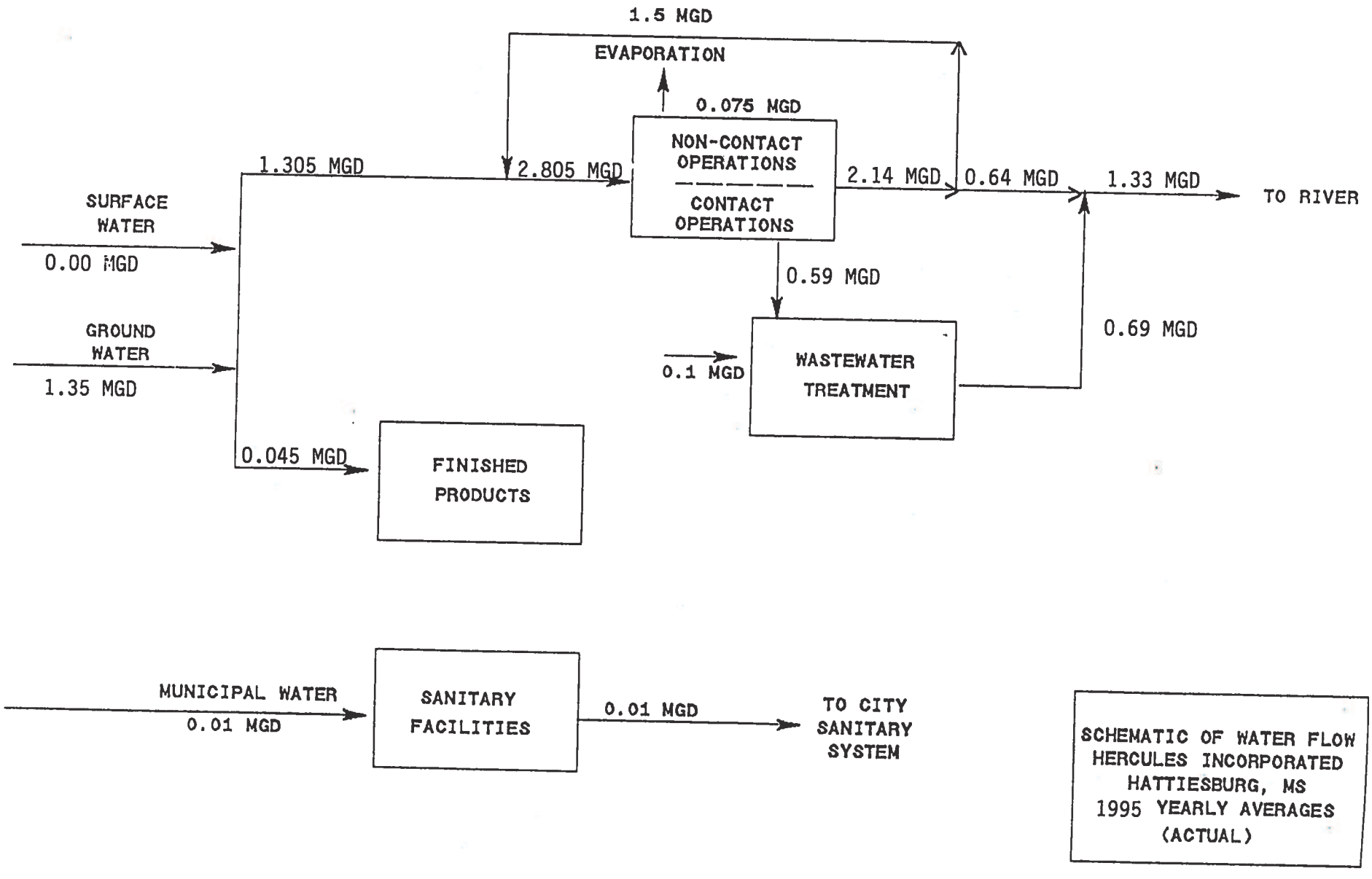
A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Gerald Burch Plant Manager	Gerald D. Burch	4/15/96

COMMENTS FOR OFFICIAL USE ONLY

C

☆ U.S. Government Printing Office : 1985 - 486 785/3299

FIGURE - 3



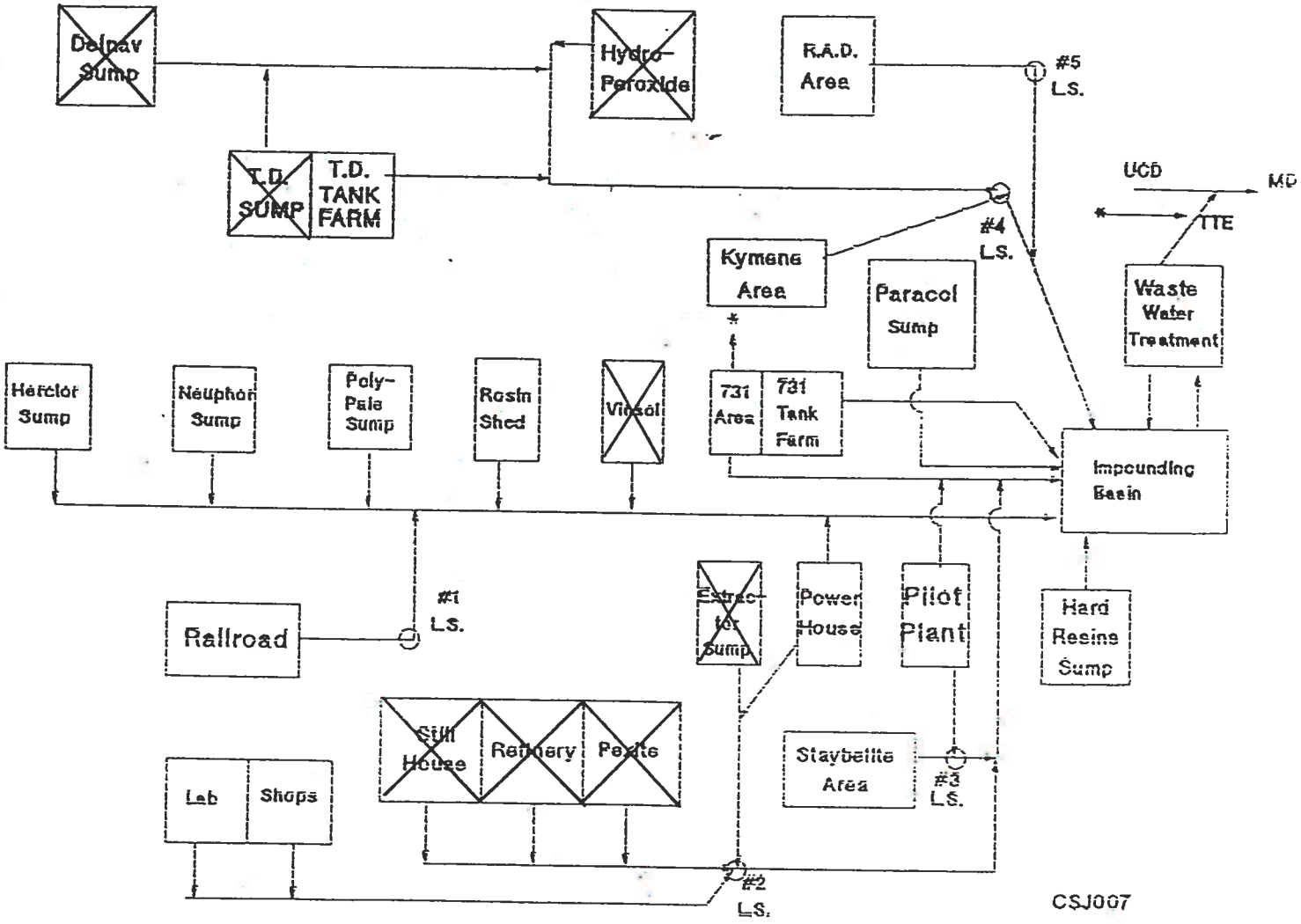
SCHEMATIC OF WATER FLOW
HERCULES INCORPORATED
HATTIESBURG, MS
1995 YEARLY AVERAGES
(ACTUAL)

CSJ014

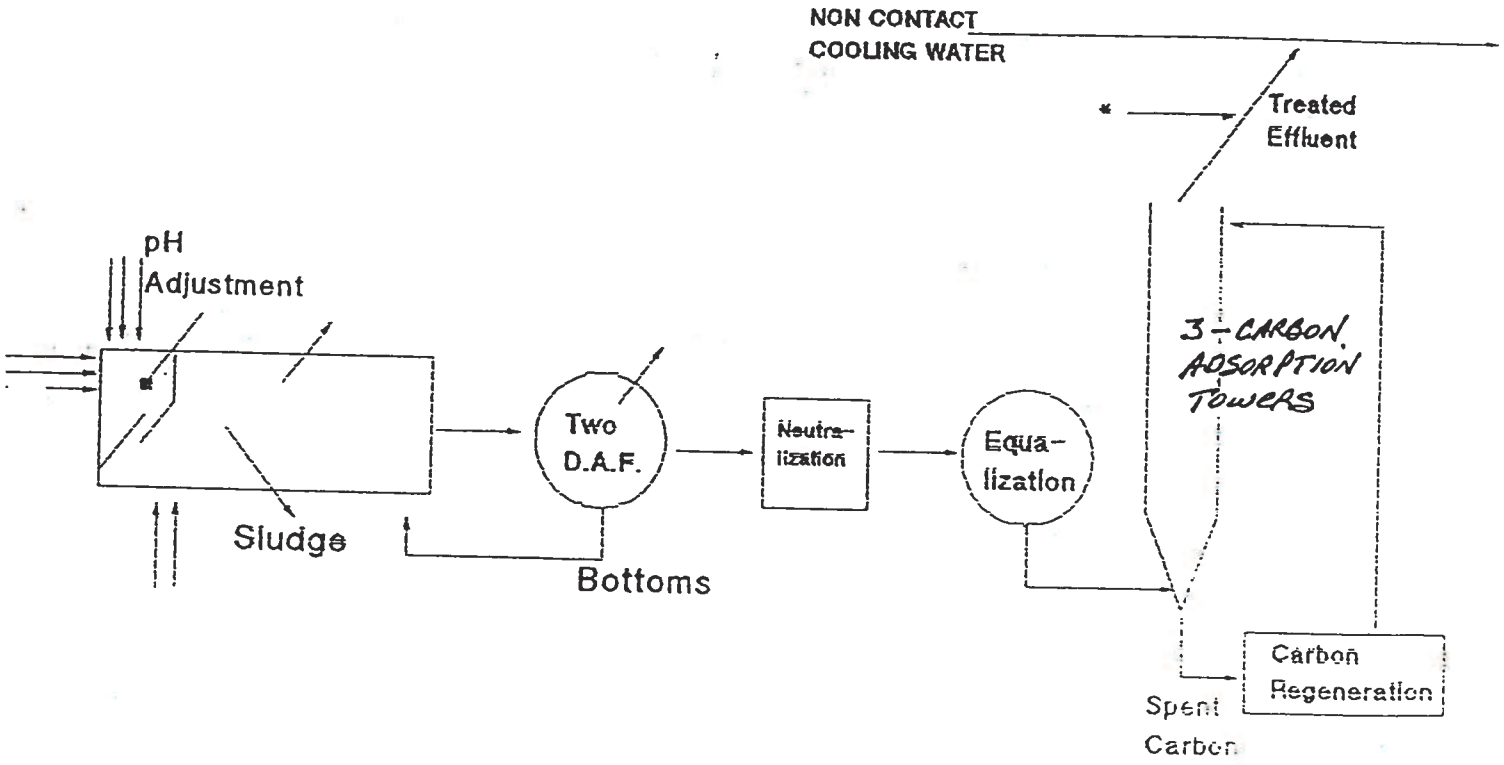




AREA WASTEWATER FLOWS



WASTEWATER AREA



CSJ006




EPA I.D. NUMBER (copy from Item 1 of Form 1): MSD008182081

OUTFALL NUMBER: 002

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
MS FRACTION – PESTICIDES (continued)															
. Heptachlor xide 24-57-3)	(See OUTFALL 001 FORM 2C)														
. PCB-1242 169-21-9)															
. PCB-1254 097-69-1)															
. PCB-1221 104-28-2)															
PCB-1232 141-16-5)															
PCB-1248 172-29-6)															
PCB-1260 196-82-5)															
PCB-1016 74-11-2)															
Toxaphene 1-35-2)															

Please print or type in the unshaded areas only.

I.D. NUMBER (copy from Item 1 of Form 1) SD.0081820 81

OMB No. 2040-0086
Approval expires 7-31-88

FORM 2C NPDES

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING, AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE 1. DEG.	2. MIN.	3. SEC.	C. LONGITUDE 1. DEG.	2. MIN.	3. SEC.	D. RECEIVING WATER (name)
001	N31	20	18	W89	18	16	BOUIE RIVER
002	N31	20	18	W89	18	16	BOUIE RIVER

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatments received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO. (list)	2. OPERATION(S) CONTRIBUTING FLOW a. OPERATION (list)	b. AVERAGE FLOW (include units)	3. TREATMENT a. DESCRIPTION	b. ST CODES FROM TABLE 2C-1	
001	NAVAL STORES PRODUCTS (MODIFIED RESINS AND RESIN SOLUTIONS);	0.3 MGD		1H	1U
				2A	2K
				4A	5H
	PAPER CHEMICALS (Polyamides, Ketene Dimer, Rosin Emulsions, AND WAX Emulsions)	0.3 MGD			
	SYNTHETIC RUBBER	0.1 MGD			
002	COMBINATION OF 001 AND NON-CONTACT COOLING WATER	1.4 MGD	NONE		
	SANITARY FACILITIES	0.01 MGD	TO CITY FACILITIES		
	ESTIMATE 001 includes 0.005 MGD (INDUSTRIAL ACTIVITY) STORM WATER RUNOFF				
	ESTIMATE 002 includes 0.01 MGD (NON-INDUSTRIAL ACTIVITY) STORM WATER RUNOFF				

OFFICIAL USE ONLY (effluent guidelines sub-categories)

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items I-A or I-B intermittent or seasonal?
☐ YES (complete the following table) ☒ NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION(S) CONTRIBUTING FLOW (list)	3. FREQUENCY a. DAYS PER WEEK (specify average)	3. FREQUENCY b. MONTHS PER YEAR (specify average)	4. FLOW a. FLOW RATE (in mgd) 1. LONG TERM AVERAGE	4. FLOW a. FLOW RATE (in mgd) 2. MAXIMUM DAILY	4. FLOW b. TOTAL VOLUME (specify with units) 1. LONG TERM AVERAGE	4. FLOW b. TOTAL VOLUME (specify with units) 2. MAXIMUM DAILY	5. DURATION (in days)

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?
☒ YES (complete Item III-B) ☐ NO (go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?
☒ YES (complete Item III-C) ☐ NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION (CAPACITY) a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	2. AFFECTED OUTFALLS (list outfall numbers)
1,016,640	lbs/DAY	MODIFIED ROSINS	001
840,000	lbs/DAY	MODIFIED RESINS	001
76,800	lbs/DAY	RUBBER*	001
1,222,080	lbs/DAY	MISCELLANEOUS (PAPER CHEMICALS, Polyamides, Ketene Dimer, ROSIN Emulsions, AND WAX Emulsions)	001
		*TREATMENT ON LEON CHEMICAL WASTEWATER	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.
☐ YES (complete the following table) ☒ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS a. NO.	2. AFFECTED OUTFALLS b. SOURCE OF DISCHARGE	3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE a. REQUIRED	4. FINAL COMPLIANCE DATE b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any discharges described in Item II-A or B intermittent or seasonal?
☐ YES (complete the following table) ☐ NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION(S) CONTRIBUTING FLOW (list)	3. FREQUENCY a. DAYS PER WEEK (specify average)	3. FREQUENCY b. MONTHS PER YEAR (specify average)	4. FLOW a. FLOW RATE (in mgd) 1. LONG TERM AVERAGE	4. FLOW a. FLOW RATE (in mgd) 2. MAXIMUM DAILY	4. FLOW b. TOTAL VOLUME (specify with units) 1. LONG TERM AVERAGE	4. FLOW b. TOTAL VOLUME (specify with units) 2. MAXIMUM DAILY	4. FLOW DURATION (in days)

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?
☒ YES (complete Item III-B) ☐ NO (go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?
☒ YES (complete Item III-C) ☐ NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION (MONTHLY MAXIMUM) a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	2. AFFECTED OUTFALLS (list outfall numbers)
151,529	lbs/DAY	MODIFIED ROSINS	001
385,118	lbs/DAY	MODIFIED RESINS	001
65,300	lbs/DAY	RUBBER *	001
645,695	lbs/DAY	MISCELLANEOUS (PAPER CHEMICALS, POLYAMIDES, Ketene Dimer, Rosin Emulsions, AND WAX EMULSIONS)	001
		*TREATMENT OF ZEN CHEMICALS WASTEWATER	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.
☐ YES (complete the following table) ☒ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS a. NO.	2. AFFECTED OUTFALLS b. SOURCE OF DISCHARGE	3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE a. REQUIRED	4. FINAL COMPLIANCE DATE b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ YES (complete the following table) ☐ NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION(s) CONTRIBUTING FLOW (list)	3. FREQUENCY a. DAYS PER WEEK (specify average)	3. FREQUENCY b. MONTHS PER YEAR (specify average)	4. FLOW a. FLOW RATE (in mgd) 1. LONG TERM AVERAGE	4. FLOW a. FLOW RATE (in mgd) 2. MAXIMUM DAILY	4. FLOW b. TOTAL VOLUME (specify with units) 1. LONG TERM AVERAGE	4. FLOW b. TOTAL VOLUME (specify with units) 2. MAXIMUM DAILY	4. FLOW c. DURATION (in days)

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☒ YES (complete Item III-B) ☐ NO (go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

☒ YES (complete Item III-C) ☐ NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION (YEARLY AVERAGE) a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	2. AFFECTED OUTFALLS (list outfall numbers)
75,691	lbs/DAY	MODIFIED ROSINS	001
269,486	lbs/DAY	MODIFIED RESINS	001
40,800	lbs/DAY	RUBBER*	001
549,678	lbs/DAY	MISCELLANEOUS (PAPER CHEMICALS, POLYAMIDES, KETENE DIMER, ROSIN EMULSIONS, AND WAX EMULSIONS)	001
		*TREATMENT OF ZEON CHEMICAL WASTEWATER	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES (complete the following table) ☒ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS a. NO.	2. AFFECTED OUTFALLS b. SOURCE OF DISCHARGE	3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE a. REQUIRED	4. FINAL COMPLIANCE DATE b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

ASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of nformation on separate sheets *(use the same format)* instead of completing these pages. INSTRUCTIONS.

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*: MSD 008182081

Form Approved. OMB No. 2040-0086 Approval expires 7-31-88

INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 001

RT A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

OLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	3. UNITS (specify if blank) a. CONCENTRATION	3. UNITS b. MASS	4. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	4. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	4. INTAKE (optional) b. NO. OF ANALYSES
lochemical gen Demand D)	212	1747	151	871	77	445	156	mg/l	lbs/DAY			
hemical gen Demand D)					640	3,309	1	mg/l	lbs/DAY			
otal Organic ion (TOC)	149	1352	129	742	78	448	156	mg/l	lbs/DAY			
otal Suspended ds (TSS)	97	542	29	172	22	126	156	mg/l	lbs/DAY			
mmonia (as N)					9.1	47	1	mg/l	lbs/DAY			
ow	VALUE 1.94		VALUE 0.96.		VALUE 0.69		365	MG-D		VALUE		
mperature ter)	VALUE (see OUTFALL 002)		VALUE		VALUE			°C		VALUE		
mperature mer)	VALUE (see OUTFALL 002)		VALUE (see OUTFALL 002)		VALUE			°C		VALUE		
	MINIMUM (see OUTFALL 002)	MAXIMUM	MINIMUM	MAXIMUM				STANDARD UNITS				

T B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

OLLUT-T AND LS NO. *vailable)*	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
omide 59-67-9)		X					7.1	37	1	mg/l	lbs/DAY			
lorine, Residual		X					ND*		1					
lor	X						15		1					
cal orm		X					ND		1					
loride 34-48-8)		X					0.15	0.78	1	mg/l	lbs/DAY			
rate— e (as N)	X						ND		1					

CONTINUE ON REVERSE

. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
Nitrogen, otal Organic s N)	X						8.9		1	mg/l	lbs/DAY			
Oil and rease	X		25.4	161	7.2	42	3.3	19	156	mg/l	lbs/DAY			
Phosphorus s P), Total 723-14-0)	X						0.17	0.87	1	mg/l	lbs/DAY			
Radioactivity														
) Alpha, otal		X					ND		1					
) Beta, otal		X					ND		1					
) Radium, otal		X					ND		1					
) Radium 26, Total		X					ND		1					
Sulfate SO_4) 4808-79-8)	X						480	2,482	1					
Sulfide S)	X						3.0	15.5	1					
. Sulfite SO_3) 4265-45-3)	X						3.8	19.6	1					
Surfactants	X						0.17	0.87	1					
Aluminum, tal 429-90-5)	X						0.22	1.14	1					
Barium, tal 440-39-3)		X					ND		1					
Boron, tal 440-42-8)	X						0.22	1.14	1					
Cobalt, tal 440-48-4)		X					ND		1					
ron, Total 439-89-6)	X						0.22	1.14	1					
Magnesium, tal 439-95-4)	X						2.8	14.5	1					
Molybdenum, tal 439-98-7)		X					0.009	0.05	1					
Manganese, tal 439-96-5)	X						0.07	0.36	1					
Tin, Total 440-31-5)	X						< .01		1					
Titanium, tal 440-32-6)		X					ND		1					

CONTINUED FROM PAGE 2

EPA I.D. NUMBER (copy from Item 1 of Form 1) MSD008182081

Form Approved. OMB No. 2040-0086 Approval expires 7-31-88

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding - Complete one set of tables for each outfall - Annotate the outfall number in the space provided. NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
We use the following chemicals but have no reason to believe they are necessarily present in our discharge. EPICHLOROHYDRIN TRIETHANOLAMINE TRIETHYLAMINE			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES (list all such pollutants below)

☒ NO (go to Item VI-B)

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☒ YES (identify the test(s) and describe their purposes below) ☐ NO (go to Section VIII)

SEMI-ANNUAL 48 HOUR STATIC BIOASSAY TESTS ARE ONE OF THE MONITORING REQUIREMENTS IN 0012 CURRENT NPDES PERMIT.

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

☒ YES (list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below) ☐ NO (go to Section IX)

A. NAME	B. ADDRESS	C. TELEPHONE (area code & no.)	D. POLLUTANTS ANALYZED (list)
BONNER ANALYTICAL TESTING COMPANY	2703 OAK GROVE ROAD HATTIESBURG, MS 39402	601 264 2854	ALL APPLICATION REQUIREMENTS EXCEPT CURRENT NPDES PERMIT REQUIREMENTS

IX. CERTIFICATION

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.

A. NAME & OFFICIAL TITLE (type or print)	B. PHONE NO. (area code & no.)
GERALD BURCH PLANT MANAGER	601 545 3450
C. SIGNATURE	D. DATE SIGNED
[signature]	4/15/96

EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
MSR008182081	001

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

RT C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	2. MARK 'X' b. BELIEVED PRESENT	2. MARK 'X' c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
ALS, CYANIDE, AND TOTAL PHENOLS															
ntimony, (7440-36-0)			X					ND		1					
rsenic, Total -38-2)			X					ND		1					
eryllium, 7440-41-7)			X					ND		1					
admium, (7440-43-9)			X					ND		1					
hromium, (7440-47-3)			X					ND		1					
pper, Total 0-8)			X					ND		1					
ad, Total 2-1)			X					ND		1					
ercury, Total 97-6)			X					ND		1					
ickel, Total 02-0)		X						<0.01		1					
elenium, 7782-49-2)			X					0.009	0.05	1					
ilver, Total 22-4)			X					ND		1					
hallium, 7440-28-0)		X						0.018	0.09	1					
inc, Total 66-6)		X						0.04	0.20	1					
yanide, 57-12-5)			X					ND		1					
henols,		X						0.03	0.16	1					
N															
-Tetra-dibenzo-P- (1764-01 6)			X	DESCRIBE RESULTS											

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POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
/MS FRACTION – VOLATILE COMPOUNDS															
Acrolein 7-02-8)		X						< .005		1	mg/l	lbs/DAY			
Acrylonitrile 7-13-1)			X					ND		1					
Benzene -43-2)		X						< .005		1	mg/l	lbs/DAY			
Bis (Chloro-hyl) Ether 2-88-1)			X					ND		1					
Bromoform 25-2)			X					ND		1					
Carbon achloride 23-5)			X					ND		1					
Chlorobenzene 3-90-7)			X					ND		1					
Chlorodi-nomethane 1-48-1)			X					ND		1					
Chloroethane 00-3)			X					ND		1					
2-Chloro-ivinyl Ether 1-75-8)			X					ND		1					
Chloroform 56-3)			X					ND		1					
Dichloro-nomethane 27-4)			X					ND		1					
Dichloro-oromethane 71-8)			X					ND		1					
1,1-Dichloro-ne (75-34-3)			X					ND		1					
1,2-Dichloro-ne (107-06-2)			X					ND		1					
1,1-Dichloro-ene (75-35-4)			X					ND		1					
1,2-Dichloro-ane (78-87-5)		X						< .005		1	mg/l	lbs/DAY			
,3-Dichloro-ene (542-75-6)		X						< .005		1	mg/l	lbs/DAY			
Ethylbenzene 41-4)			X					ND		1					
Methyl ide (74-83-9)			X					ND		1					
Methyl ide (74-87-3)			X					ND		1					

CONTINUE ON PAGE V-5

EPA I.D. NUMBER (copy from Item 1 of Form 1) MSD 008182081 | OUTFALL NUMBER 001

OMB No. 2040-0086
Approval expires 7-31-88

POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
MS FRACTION – VOLATILE COMPOUNDS (continued)															
Methylene ride (75-09-2)			X					ND		1					
1,1,2,2-Tetra-oethane 4-5)			X					ND		1					
Tetrachloro-ene (127-18-4)			X					ND		1					
Toluene 88-3)		X						0.235	1.21	1	mg/L	lbs/DAY			
1,2-Trans-oroethylene 60-5)			X					ND		1					
1,1,1-Tri-oethane 5-6)			X					ND		1					
1,1,2-Tri-oethane 0-5)			X					ND		1					
Trichloro-ene (79-01-6)			X					ND		1					
Trichloro-methane 9-4)			X					ND		1					
Vinyl ide (75-01-4)			X					ND		1					
S FRACTION – ACID COMPOUNDS															
Chlorophenol 7-8)			X					ND		1					
4-Dichloro-l (120-83-2)			X					ND		1					
4-Dimethyl-l (105-67-9)			X					ND		1					
6-Dinitro-O-(534-52-1)			X					ND		1					
4-Dinitro-(51-28-5)			X					ND		1					
Nitrophenol -5)			X					ND		1					
Nitrophenol 2-7)			X					ND		1					
Chloro-M-(59-50-7)			X					ND		1					
ntachloro-(87-86-5)			X					ND		1					
henol 5-2)		X		0.829	4.7	0.30	1.7	0.106	0.61	156	mg/L	lbs/DAY			
,4,6-Tri-henol 2)			X					ND		1					

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POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
MS FRACTION – BASE/NEUTRAL COMPOUNDS															
Acenaphthene -32-9)			X					ND		1					
Acenaphtylene 8-96-8)			X					ND		1					
Anthracene 0-12-7)			X					ND		1					
Benzidine -87-5)			X					ND		1					
Benzo (a) hracene -55-3)			X					ND		1					
Benzo (a) ene (50-32-8)			X					ND		1					
3,4-Benzo- ranthene 5-99-2)			X					ND		1					
Benzo (ghi) ylene 1-24-2)			X					ND		1					
Benzo (k) oranthene 7-08-9)			X					ND		1					
. Bis (2-Chloro- oxy) Methane 1-91-1)			X					ND		1					
. Bis (2-Chloro- il) Ether 1-44-4)			X					ND		1					
Bis (2-Chloroiso- l) Ether (102-60-1)			X					ND		1					
. Bis (2-Ethyl- yl) Phthalate 7-81-7)		X						2.02		1					
. 4-Bromo- nyl Phenyl er (101-55-3)			X					ND		1					
. Butyl Benzyl alate (85-68-7)		X						0.036	0.19	1					
. 2-Chloro- nthalene 58-7)			X					ND		1					
. 4-Chloro- nyl Phenyl er (7005-72-3)			X					ND		1					
Chrysene -01-9)			X					ND		1					
Dibenzo (a,h) racene 70-3)			X					ND		1					
1,2-Dichloro- ene (95-50-1)			X					ND		1					
1,3-Dichloro- ene (541-73-1)			X					ND		1					

CONTINUED FROM PAGE 2

EPA I.D. NUMBER (copy from Item 1 of Form 1)
MSD008182081

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided. NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
(SEE OUTFALL 001 FORM 2C)			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES (list all such pollutants below) ☐ NO (go to Item VI-B)

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING DATA

1. Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ YES *(identify the test(s) and describe their purposes below)* ☐ NO *(go to Section VIII)*

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

☐ YES *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☐ NO *(go to Section IX)*

A. NAME	B. ADDRESS	C. TELEPHONE (area code & no.)	D. POLLUTANTS ANALYZED (list)
Bonner Analytical Testing Company	2703 Oak Grove Road Hattiesburg MS 39402	601 264 2854	Part of Item V (NH_3 & COD)

IX. CERTIFICATION

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.

A. NAME & OFFICIAL TITLE (type or print)	B. PHONE NO. (area code & no.)
Gerald Burch Plant Manager	601 545 3450
C. SIGNATURE	D. DATE SIGNED

SE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of formation on separate sheets *(use the same format)* instead of completing these pages.
NSTRUCTIONS.

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*: MSD 008182081

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

ITAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 002

RT A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	3. UNITS (specify if blank) a. CONCENTRATION	3. UNITS b. MASS	4. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	4. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	4. INTAKE b. NO. OF ANALYSES
chemical en Demand ')					101	1,289	1					
emical en Demand)					469	5,984	1	mg/l	lbs/DAY			
tal Organic n (TOC)					106	1,353	1					
tal Suspended (TSS)					18.2	232	1					
monia (as N)					3.8	48.5	1					
w	VALUE		VALUE		VALUE		365			VALUE		
nperature r)	VALUE 25 (77)		VALUE		VALUE		78	°C (°F)		VALUE		
nperature ner)	VALUE 35 (95)		VALUE		VALUE		78	°C (°F)		VALUE		
	MINIMUM 6.1	MAXIMUM 8.3	MINIMUM	MAXIMUM			365	STANDARD UNITS				

B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE b. NO. OF ANALYSES
mide 9-67-9)	(	See OUTFALL 001 FORM 2C)												
orine, Residual														
or														
al rm														
oride 4-48-8)														
ate— (as N)														

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
Nitrogen, otal Organic s N)														
Oil and rease														
Phosphorus s P), Total 723-14-0)														
Radioactivity														
) Alpha, otal														
) Beta, otal														
) Radium, otal														
) Radium 26, Total														
Sulfate SO_4) 4808-79-8)														
Sulfide S)														
. Sulfite SO_3) 4265-45-3)														
Surfactants														
Aluminum, tal 429-90-5)														
Barium, tal 440-39-3)														
Boron, tal 440-42-8)														
Cobalt, tal 440-48-4)														
ron, Total 439-89-6)														
Magnesium, tal 439-95-4)														
Molybdenum, tal 439-98-7)														
Manganese, tal 439-96-5)														
Tin, Total 440-31-5)														
Titanium, tal 440-32-6)														

CONTINUE ON PAGE V-3

EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
MSD008182081	002

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)	
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
METALS, CYANIDE, AND TOTAL PHENOLS														
Antimony, (7440-36-0)				(See OUTFALL 001 Form 2C)										
Arsenic, Total (-38-2)														
Beryllium, (7440-41-7)														
Cadmium, (7440-43-9)														
Chromium, (7440-47-3)														
Copper, Total (0-8)														
Lead, Total (2-1)														
Mercury, Total (97-6)														
Nickel, Total (02-0)														
Selenium, (7782-49-2)														
Silver, Total (22-4)														
Thallium, (7440-28-0)														
Zinc, Total (56-6)														
Cyanide, (57-12-5)														
Phenols,														
DIOXIN														
2,3,7,8-Tetra-chlorodibenzo-P (1764-01-6)				DESCRIBE RESULTS										

Form 3510 2C (Rev. 2-86)

CONTINUE ON REVERSE

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OLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
MS FRACTION – VOLATILE COMPOUNDS															
Acrolein -02-8)															
Acrylonitrile -13-1)															
Benzene 43-2)															
Bis *(Chloro- yl)* Ether -88-1)															
Bromoform 25-2)															
Carbon achloride 23-5)															
Chlorobenzene -90-7)															
Chlorodi- omethane -48-1)															
Chloroethane 00-3)															
2-Chloro- lvinyl Ether -75-8)															
Chloroform 66-3)															
Dichloro- omethane 27-4)															
Dichloro- promethane 71-8)															
1,1-Dichloro- ne (75-34-3)															
1,2-Dichloro- ne (107-06-2)															
1,1-Dichloro- ene (75-35-4)															
1,2-Dichloro- ane (78-87-5)															
,3-Dichloro- ene (542-75-6)															
Ethylbenzene 41-4)															
Methyl ide (74-83-9)															
Methyl ide (74-87-3)															

TINUED FROM PAGE V-4

EPA I.D. NUMBER (copy from Item 1 of Form 1): MSD008182081

OUTFALL NUMBER: 002

OMB No. 2040-0086
Approval expires 7-31-88

POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	2. MARK 'X' b. BELIEVED PRESENT	2. MARK 'X' c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
VMS FRACTION – VOLATILE COMPOUNDS (continued)															
Methylene ride (75-09-2)	(See OUTFALL 001 FORM 2C)														
1,1,2,2-Tetra-oethane 34-5)															
Tetrachloro-lene (127-18-4)															
Toluene -88-3)															
1,2-Trans-loroethylene -60-5)															
1,1,1-Tri-oethane 5-6)															
1,1,2-Tri-oethane 0-5)															
Trichloro-ene (79-01-6)															
Trichloro-omethane 9-4)															
Vinyl ride (75-01-4)															
IS FRACTION – ACID COMPOUNDS															
-Chlorophenol 7-8)															
,4-Dichloro-ol (120-83-2)															
,4-Dimethyl-ol (105-67-9)															
,6-Dinitro-O-l (534-52-1)															
,4-Dinitro-l (51-28-5)															
Nitrophenol 5-5)															
Nitrophenol 02-7)															
Chloro-M-(59-50-7)															
ntachloro-l (87-86-5)															
henol 5-2)															
2,4,6-Tri-phenol 5-2)															

Form 3510-2C (Rev. 3-89)

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POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
C/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
. Acenaphthene 3-32-9)															
. Acenaphtylene 08-96-8)															
. Anthracene 20-12-7)															
. Benzidine 2-87-5)															
. Benzo *(a)* ithracene 5-55-3)															
. Benzo *(a)* rene (50-32-8)															
. 3,4-Benzo- oranthene 05-99-2)															
. Benzo *(ghi)* ryiene 91-24-2)															
. Benzo *(k)* uoranthene 07-08-9)															
B. Bis *(2-Chloro- ioxy)* Methane 11-91-1)															
B. Bis *(2-Chloro- yl)* Ether 11-44-4)															
. Bis *(2-Chloroiso- yl)* Ether (102-60-1)															
B. Bis *(2-Ethyl- cyl)* Phthalate 17-81-7)															
B. 4-Bromo- enyl Phenyl ıer (101-55-3)															
B. Butyl Benzyl thalate (85-68-7)															
3. 2-Chloro- ohthalene -58-7)															
3. 4-Chloro- inyl Phenyl ıer (7005-72-3)															
3. Chrysene 8-01-9)															
3. Dibenzo *(a,h)* thracene -70-3)															
3. 1,2-Dichloro- ızene (95-50-1)															
3. 1,3-Dichloro- ızene (541-73-1)															

EPA I.D. NUMBER (copy from Item 1 of Form 1): MSD008182081

OUTFALL NUMBER: 002

OMB No. 2040-0086
Approval expires 7-31-88

LUTANT D CAS MBER vailable)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
FRACTION – BASE/NEUTRAL COMPOUNDS (continued)															
4-Dichloro- e (106-46-7)	(See OUTFALL 001 FORM 2C)														
3'-Dichloro- ne 1)															
ethyl te 2)															
methyl te -3)															
-N-Butyl te 2)															
4-Dinitro- (121-14-2)															
6-Dinitro- (606-20-2)															
-N-Octyl te -0)															
-Diphenyl- e (as Azo- l (122-66-7)															
uoranthene -0)															
uorene 7)															
chlorobenzene															
xa- tadiene)															
xachloro- ntadiene)															
xachloro- 57-72-1)															
ene l) Pyrene 5)															
phorone)															
phthalene)															
robenzene)															
litro- ylamine)															
litrosodi amine 7)															

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LLUTANT ID CAS UMBER available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
FRACTION – BASE/NEUTRAL COMPOUNDS (continued)															
-Nitro-enylamine -6)															
henanthrene 8)															
yrene 0-0)															
2,4 - Tri-benzene 2-1)															
FRACTION – PESTICIDES															
rin 0-2)															
HC 1-6)															
HC 5-7)															
HC 9)															
HC 5-8)															
ordane 9)															
-DDT 3)															
-DDE 9)															
-DDD 3)															
eldrin 1)															
Endosulfan -7)															
Endosulfan -7)															
dosulfan 7-8)															
drin 1)															
drin ie 3-4)															
ptachlor 3)															

United States Environmental Protection Agency

Office of Enforcement
Washington, DC 20460

EPA Form 3510-1
Revised October 1980
Previous edition may be used until supply is exhausted.

Permits Division

EPA

Application Form 1 - General Information

Consolidated Permits Program

This form must be completed by all persons applying for a permit under EPA's Consolidated Permits Program. See the general instructions to Form 1 to determine which other application forms you will need.

ase print or type in the unshaded areas only
l—in areas are spaced for elite type, i.e., 12 characters/inch).

Form ... No. 2040-0086 Approval expires 7-31-88

FORM 1 GENERAL

U.S. ENVIRONMENTAL PROTECTION AGENCY
GENERAL INFORMATION
Consolidated Permits Program
(Read the "General Instructions" before starting.)

I. EPA I.D. NUMBER

| | | |

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

	A. FIRST	B. SECOND
	2861 (specify) Gum and Wood Chemicals	2821 (specify) Synthetic Resins
	C. THIRD	D. FOURTH
	2869 (specify) Industrial Organic Chemicals	2899 (specify) Chemicals and Chemical Preps

VIII. OPERATOR INFORMATION

A. NAME: Hercules Incorporated

B. Is the name listed in Item VIII-A also owner? [X] YES [ ] NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)
F = FEDERAL; S = STATE; P = PRIVATE; M = PUBLIC (other than federal or state); O = OTHER (specify)
P (specify)

D. PHONE (area code & no.): A 601 545 3450

E. STREET OR P.O. BOX: P O Box 1937

F. CITY OR TOWN: Hattiesburg

G. STATE: MS

H. ZIP CODE: 39401

IX. INDIAN LAND

Is the facility located on Indian lands? [ ] YES [X] NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water): N MS0001830	D. PSD (Air Emissions from Proposed Sources): P	
B. UIC (Underground Injection of Fluids): U	E. OTHER (specify): 0800-00001	(specify) Air Permit
C. RCRA (Hazardous Wastes): R	E. OTHER (specify):	(specify)

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property bounderies. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Diversified chemical manufacturer of modified resins and resin solutions, paper chemicals, polyamides, ketene dimer, rosin emulsions, and wax emulsions.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and al attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in th application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submittin false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
Gerald Burch Plant Manager	Gerald D. Burch	4/15/96

COMMENTS FOR OFFICIAL USE ONLY

C



Riverside
GULF
Substa
Claypits
Radio Tower
Cem
BOWIE
GRAVEL
Tr Pk
City Cem
Gravel Pit
RIVER
Creek
Greens
Roseland Park Cem
Jones Sch
Eureka Playground
Jeff Davis Sch
Eureka Sch
Lamar Sch
Radio Tower (WFOR)
ICG
MABEL
MILLER
Main St Sch
High Sch
Gordons
Hawkins Jr High Sch
Courthouse
Jaycee Park
Oaklawn Cem
Kamper Park
Camp Sch
Woodley Sch
HATTIESBURG
Sacred Heart Sch
Walthall Sch
Methodist Hospital
Bethune Sch
Rowan High Sch
William Carey College
Pineview
Radio Tower
SCALE 1:24 000
1000 0 1000 2000 3000 4000 5000 6000 7000 FEET

Unit[illegible]ates
Environmenta[illegible]tection
Agency

Office of
Enforcement
Washington, DC 20460

EPA Form 3510-2C
Revised February 1985
Previous editions
are obsolete.

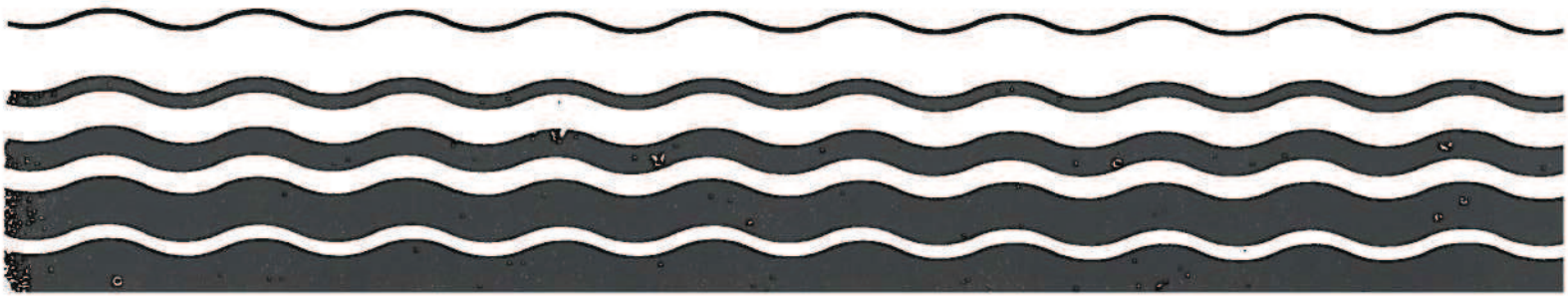
Permits Division

EPA

Application Form 2C - Wastewater Discharge Information

Consolidated Permits Program

This form must be completed by all persons applying for an EPA permit to discharge wastewater *(existing manufacturing, commercial, mining, and silvicultural operations)*.



Please print or type in the unshaded areas only.

I.D. NUMBER (copy from Item 1 of Form 1): MSD.008.82.081

OMB No. 2040-0086
Approval expires 7-31-88

FORM 2C NPDES — EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE 1. DEG.	2. MIN.	3. SEC.	C. LONGITUDE 1. DEG.	2. MIN.	3. SEC.	D. RECEIVING WATER (name)
001	N31	20	18	W89	18	16	BOUIE RIVER
002	N31	20	18	W89	18	16	BOUIE RIVER

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined (e.g., for certain mining activities), provide a schematic description of the system and quantify, if possible, the average daily flow.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including processes, treatment systems, cooling water, and storm water runoff; (2) The average flow contributed by each operation listed; (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

A. OUTFALL NO. (list)	B. OPERATION (list)	C. AVERAGE FLOW (include units)	D. DESCRIPTION	E. TREATMENT 1. LIST CODES FROM TABLE 2C-1	2. LIST CODES FROM TABLE 2C-1
001	NAVAL STORES PRODUCTS (MODIFIED RESINS AND RESIN SOLUTIONS);	0.3 MGD		1H	1K
				2A	2K
				4A	5H
	PAPER CHEMICALS (Polyamides, Ketene Dimer, Rosin Emulsions, and WAX Emulsions)	0.3 MGD			
	SYNTHETIC RUBBER	0.1 MGD			
002	COMBINATION OF 001 AND NON-CONTACT COOLING WATER	1.4 MGD	NONE		
	SANITARY FACILITIES	0.01 MGD	TO CITY FACILITIES		

ESTIMATE 001 includes 0.005 MGD (INDUSTRIAL ACTIVITY) STORM WATER RUNOFF
ESTIMATE 002 includes 0.01 MGD (NON-INDUSTRIAL ACTIVITY) STORM WATER RUNOFF

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ YES (complete the following table) ☐ NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION(S) CONTRIBUTING FLOW (list)	3. FREQUENCY		4. FLOW			
		a. DAYS PER WEEK (specify average)	b. MONTHS PER YEAR (specify average)	a. FLOW RATE (in mgd) 1. LONG TERM AVERAGE	a. FLOW RATE (in mgd) 2. MAXIMUM DAILY	b. TOTAL VOLUME (specify with units) 1. LONG TERM AVERAGE	b. TOTAL VOLUME (specify with units) 2. MAXIMUM DAILY

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☒ YES (complete Item III-B) ☐ NO (go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

☒ YES (complete Item III-C) ☐ NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION (MONTHLY MAXIMUM)			2. AFFECTED OUTFALLS
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	(list outfall numbers here)
151,529	lbs/DAY	MODIFIED ROSINS	001
385,118	lbs/DAY	MODIFIED RESINS	001
65,300	lbs/DAY	RUBBER *	001
645,695	lbs/DAY	MISCELLANEOUS (PAPER CHEMICALS, POLYAMIDES, KETENE DIMER, ROSIN EMULSIONS, AND WAX EMULSIONS)	001
		*TREATMENT OF ZEON CHEMICALS WASTEWATER	

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES (complete the following table) ☒ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE
	a. NO.	b. SOURCE OF DISCHARGE		a. REQUIRED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

EPA Form 3510-2

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks or spills and [illegible] discharges described in Items II-A or B [illegible]

☐ YES (complete the following table) ☐ NO (go to Section III)

1. OUTFALL NUMBER (list)	2. OPERATION(S) CONTRIBUTING FLOW (list)	3. FREQUENCY A. DAYS PER WEEK (specify average)	3. FREQUENCY B. MONTHS PER YEAR (specify average)	4. FLOW A. LONG TERM AVERAGE	4. FLOW B. [illegible]	4. FLOW C. TOTAL VOLUME (specify with units) 1. LONG TERM AVERAGE	4. FLOW C. TOTAL VOLUME (specify with units) 2. MAXIMUM DAILY	4. FLOW C. [illegible]

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☒ YES (complete Item III-B) ☐ NO (go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measure of operation)?

☒ YES (complete Item III-C) ☐ NO (go to Section IV)

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION (YEARLY AVERAGE) a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. (specify)	2. AFFECTED OUTFALLS (list outfall numbers)
75,691	lbs/DAY	MODIFIED ROSINS	001
269,486	lbs/DAY	MODIFIED RESINS	001
40,800	lbs/DAY	RUBBER*	001
549,678	lbs/DAY	MISCELLANEOUS (PAPER CHEMICALS, POLYAMIDES, KETENE DIMER, ROSIN EMULSIONS, AND WAX EMULSIONS)	001

*TREATMENT OF ZEON CHEMICAL WASTEWATER

IV. IMPROVEMENTS

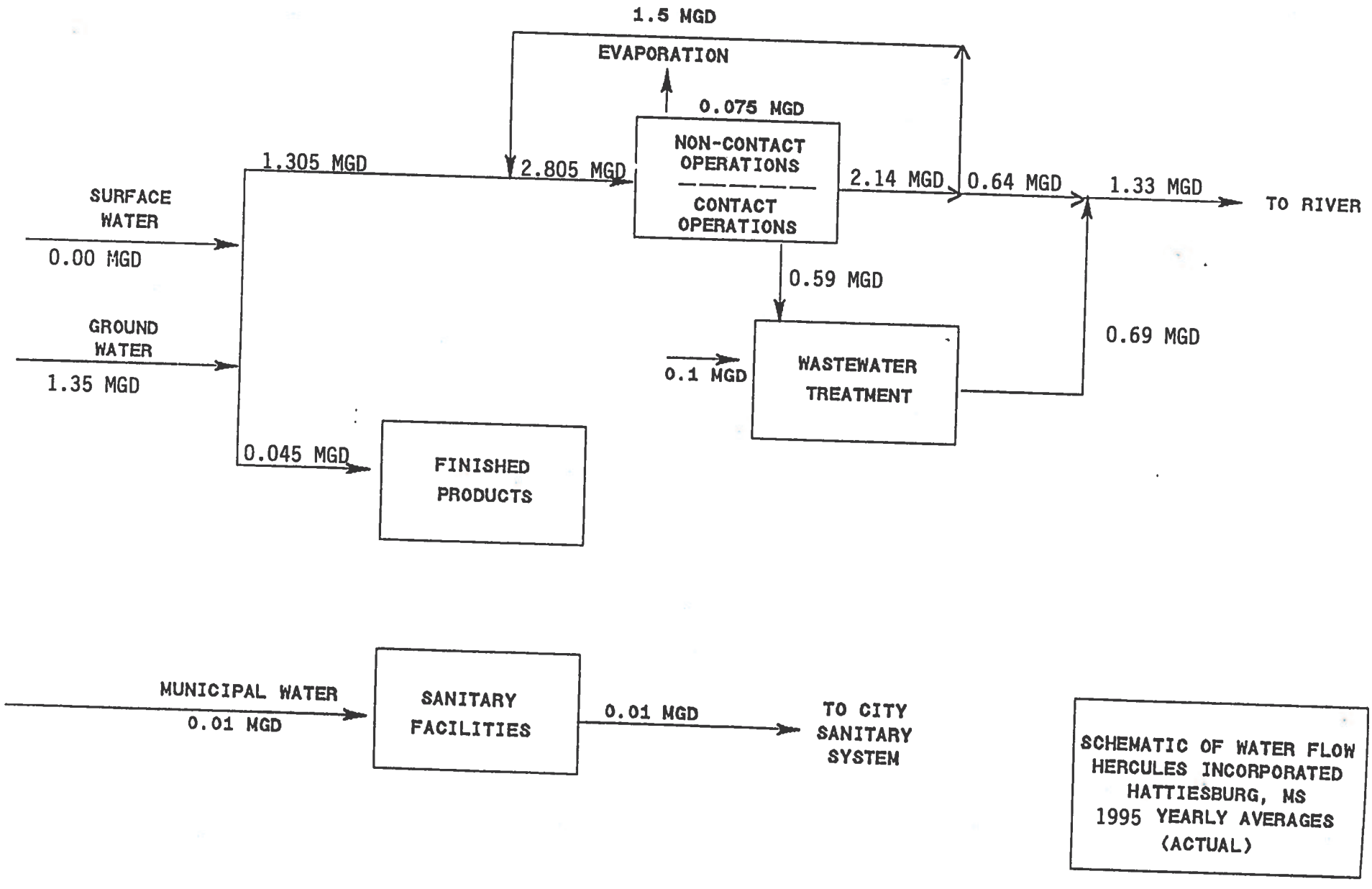
A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES (complete the following table) ☒ NO (go to Item IV-B)

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS a. NO.	2. AFFECTED OUTFALLS b. SOURCE OF DISCHARGE	3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE a. REQUIRED	4. FINAL COMPLIANCE DATE b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (for other environmental projects which may affect your discharges) you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

FIGURE - 3



SCHEMATIC OF WATER FLOW
HERCULES INCORPORATED
HATTIESBURG, MS
1995 YEARLY AVERAGES
(ACTUAL)

CSJ014

AREA WASTEWATER FLOWS

