Chevron

Dale Haines
Operations Manager

Union Oil Company of California
3800 Centerpoint Drive
Suite 100
Anchorage, Alaska 99503
Tel 907 263 7951
Fax 907 263 7698
Email daleah@chevron.com

September 20, 2010

Mr. Chae Park
U.S. Environmental Protection Agency
Region 10, Water Compliance Section
1200 Sixth Avenue, OW-133
Seattle, WA 98101

SCANNED
SFD

RECEIVED
SEP 22 2010
DEC
Division of Water Quality
Wastewater Discharge Program

RETURN RECEIPT REQUESTED - CERTIFIED MAIL 91 7108 2133 3937 7382 8265

Re: NPDES Permit No. AKG-31-5002
Trading Bay Production Facility August 2010 Discharge Monitoring Reports (DMR)

Dear Mr. Park:

Union Oil Company of California operates the Trading Bay Production Facility that discharges regulated effluents in Cook Inlet, Alaska under NPDES Permit No. AKG-31-5002. Pursuant to condition VI.B of the Permit, Union Oil Company of California is hereby submitting the August 2010 NPDES Discharge Monitoring Reports (DMRs) for the Trading Bay Production Facility.

We are using the forms provided by EPA with corrections to accommodate the reporting that is required by the permit. The corrections were approved by your Data Steward in an e-mail to Marilu Moreno-Jones dated September 3, 2010 e-mail. We plan to use this same format for our future DMR submittals.

Consistent with the authorization in your e-mail of September 16, 2010, this letter certifies all of the 5 pages of DMRs for Trading Bay Production Facility attached to this letter.

If you have any questions, please direct them to Ms. Marilu Moreno-Jones at 907-263-7305 or via e-mail at mmjones@chevron.com.

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.

Best regards,

Dale Haines

Dale Haines

cc: ADEC / Certified Mail 91 7108 2133 3937 7382 8234
Al Vann, EPA – Data Steward, Compliance Department (w/o attachment)
Hahn Shaw, EPA – Permitting Department (w/o attachment)

NATIONAL PALLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No 2040-0004

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

NAME: UNION OIL COMPANY OF CALIFORNIA (UNOCAL)
ADDRESS: P.O. BOX 196247
ANCHORAGE, AK 99519-6247
FACILITY: TRADING BAY TREATMENT FACILITY
LOCATION: COOK INLET, Alaska
ATTN JOHN ZAGER, GENERAL MANAGER

AKG315002	015-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD		
	MM/DD/YYYY	MM/DD/YYYY
FROM	08/01/2010	TO 08/31/2010

DMR Mailing ZIP CODE: 99519
MINOR
(SUBR 02)
PRODUCED WATER AND SAND
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Nitrogen, ammonia total (as N)*	SAMPLE MEASUREMENT	******	******	******	******	No Sample	No Sample	mg/L	0	Quarterly	GRAB
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Silver total recoverable	SAMPLE MEASUREMENT	******	******	******	******	5	5	ug/L	0	Monthly	GRAB
01079 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	23 MO AVG	47 DAILY MX	ug/L		Monthly	GRAB
Silver total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
01079 P 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	23 MO AVG	47 DAILY MX	ug/L		Quarterly	CALCTD
Silver total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
01079 Q 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	23 MO AVG	47 DAILY MX	ug/L		Weekly	GRAB
Zinc, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	0.03	0.03	mg/L	0	Monthly	GRAB
01094 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	0.9 MO AVG	1.9 DAILY MX	mg/L		Monthly	GRAB
Zinc, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
01094 P 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	0.9 MO AVG	1.9 DAILY MX	mg/L		Monthly	GRAB
Zinc, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
01094 Q 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	0.9 MO AVG	1.9 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
John Zager, General Manager Mid Continent/Alaska Business Unit	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(907) 276-7600	09/20/2010
TYPED OR PRINTED			AREA Code NUMBER	MM/DD/YYYY

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

*Trading Bay Production Facility conducted it's third quarter ammonia testing in July 2010

P=MONT. REDUCE (II.G.6.a.1.)
Q=MONT INCREASE (II G.6.a 2.)
R=ACCELERATED TESTING (III A.7)

EPA Form 3320-1 (Rev 01/06) Previous editions may be used

NATIONAL PALLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

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

NAME: UNION OIL COMPANY OF CALIFORNIA (UNOCAL)
ADDRESS: P O. BOX 196247
ANCHORAGE, AK 99519-6247
FACILITY: TRADING BAY TREATMENT FACILITY
LOCATION: COOK INLET, Alaska
ATTN: JOHN ZAGER, GENERAL MANAGER

AKG315002	015-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD		
	MM/DD/YYYY	MM/DD/YYYY
FROM	08/01/2010	TO 08/31/2010

DMR Mailing ZIP CODE: 99519
MINOR
(SUBR 02)
PRODUCED WATER AND SAND
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	5	5	ug/L	0	Monthly	GRAB
01119 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	47 MO AVG	117 DAILY MX	ug/L		Monthly	GRAB
Copper, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
01119 P 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	47 MO AVG	117 DAILY MX	ug/L		Quarterly	GRAB
Copper, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
01119 Q 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	47 MO AVG	117 DAILY MX	ug/L		Weekly	GRAB
Manganese, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	1.5	1.5	mg/L	0	Monthly	GRAB
11123 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	25 MO AVG	50 DAILY MX	mg/L		Monthly	GRAB
Manganese, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
11123 P 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	25 MO AVG	50 DAILY MX	mg/L		Quarterly	GRAB
Manganese, total recoverable	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
11123 Q 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	25 MO AVG	50 DAILY MX	mg/L		Weekly	GRAB
Total Aromatic Hydrocarbons	SAMPLE MEASUREMENT	******	******	******	******	10	10	mg/L	0	Monthly	GRAB
39942 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	18 MO AVG	27 DAILY MX	mg/L		Monthly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
John Zager, General Manager Mid Continent/Alaska Business Unit	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(907) 276-7600		09/20/2010
TYPED OR PRINTED			AREA Code	NUMBER	MM/DD/YYYY

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

P=MONT. REDUCE (II.G.6.a.1)
Q=MONT INCREASE (II.G.6.a.2)
R=ACCELERATED TESTING (III A.7)

EPA Form 3320-1 (Rev.01/06) Previous editions may be used

NATIONAL PALLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No 2040-0004

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

NAME: UNION OIL COMPANY OF CALIFORNIA (UNOCAL)
ADDRESS: P.O. BOX 196247
ANCHORAGE, AK 99519-6247
FACILITY: TRADING BAY TREATMENT FACILITY
LOCATION: COOK INLET, Alaska
ATTN. JOHN ZAGER, GENERAL MANAGER

AKG315002	015-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD			
	MM/DD/YYYY		MM/DD/YYYY
FROM	08/01/2010	TO	08/31/2010

DMR Mailing ZIP CODE: 99519
MINOR
(SUBR 02)
PRODUCED WATER AND SAND
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Total Aromatic Hydrocarbons	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
39942 P 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	18 MO AVG	27 DAILY MX	mg/L		Quarterly	GRAB
Total Aromatic Hydrocarbons	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
39942 Q 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	18 MO AVG	27 DAILY MX	mg/L		Weekly	GRAB
Total Aqueous Hydrocarbons	SAMPLE MEASUREMENT	******	******	******	******	10	10	mg/L		Monthly	GRAB
50259 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Monthly	GRAB
Total Aqueous Hydrocarbons	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
50259 P 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Quarterly	GRAB
Total Aqueous Hydrocarbons	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
50259 Q 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	Req. Mon. MO AVG	Req. Mon. DAILY MX	mg/L		Weekly	GRAB
Mercury, total (as Hg)	SAMPLE MEASUREMENT	******	******	******	******	0.2	0.2	mg/L	0	Monthly	GRAB
71900 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	0.6 MO AVG	1.0 DAILY MX	ug/L		Monthly	GRAB
Mercury, total (as Hg)	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
71900 P 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	0.6 MO AVG	1.0 DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
John Zager, General Manager Mid Continent/Alaska Business Unit	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(907) 276-7600		09/20/2010
TYPED OR PRINTED			AREA Code	NUMBER	MM/DD/YYYY

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

P=MONT REDUCE (II.G.6.a.1.)
Q=MONT INCREASE (II.G.6 a.2)
R=ACCELERATED TESTING (III.A.7)

EPA Form 3320-1 (Rev.01/08) Previous editions may be used

NATIONAL PALLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004

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

NAME: UNION OIL COMPANY OF CALIFORNIA (UNOCAL)
ADDRESS: P.O. BOX 196247
ANCHORAGE, AK 99519-6247
FACILITY: TRADING BAY TREATMENT FACILITY
LOCATION: COOK INLET, Alaska
ATTN: JOHN ZAGER, GENERAL MANAGER

AKG315002	015-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD		
	MM/DD/YYYY	MM/DD/YYYY
FROM	08/01/2010	TO 08/31/2010

DMR Mailing ZIP CODE: 99519
MINOR
(SUBR 02)
PRODUCED WATER AND SAND
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Mercury, total (as Hg)	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
71900 Q 0 See Comments	PERMIT REQUIREMENT	******	******	******	******	0.6 MO AVG	1.0 DAILY MX	ug/L		Weekly	GRAB
Toxicity, Chronic	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
TT000 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	283 MO AVG	568 DAILY MX	toxic		Weekly	GRAB
Toxicity, Chronic*	SAMPLE MEASUREMENT	******	******	******	******	No Sample	No Sample	toxic		Quarterly	GRAB
TT000 P 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	283 MO AVG	568 DAILY MX	toxic		Quarterly	GRAB
Toxicity, Chronic	SAMPLE MEASUREMENT	******	******	******	******	NA	NA	NA	NA	NA	NA
TT000 R 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	283 MO AVG	568 DAILY MX	toxic		See Permit	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE
John Zager, General Manager Mid Continent/Alaska Business Unit	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(907) 276-7600		09/20/2010
TYPED OR PRINTED			AREA Code	NUMBER	MM/DD/YYYY

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

P=MONT. REDUCE (II.G.6.a.1.)
Q=MONT INCREASE (II.G.6.a.2.)
R=ACCELERATED TESTING (III.A.7)

EPA Form 3320-1 (Rev.01/06) Previous editions may be used