Chevron

Timothy Brandenburg
Drilling Manager

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November 20, 2009

RECEIVED
NOV 23 2009
DEC
Division of Water Quality
Wastewater Discharge Program

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

RETURN RECEIPT REQUESTED
CERTIFIED MAIL 7006 3450 0000 0080 6904

Re: NPDES Permit No. AKG-31-5002
Trading Bay Production Facility October 2009 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 October 2009 NPDES Discharge Monitoring Reports (DMRs) for the Trading Bay Production Facility.

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,

Timothy Brandenburg

cc: ADEC / Certified Mail 7006 3450 0000 0080 6911

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

NAME Union Oil Company of California
ADDRESS Attn: John Zager
P.O. Box 196247
Anchorage, AK 99519-6247
FACILITY Trading Bay Production Facility
LOCATION Cook Inlet, Alaska

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
AKG-31-5002	015

MONITORING PERIOD

YEAR (20-21)	MO (22-23)	DAY (24-25)	TO	YEAR (26-27)	MO (28-29)	DAY (30-31)
09	10	01		09	10	31

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)
015 Produced Water Flow Rate *	SAMPLE MEASUREMENT	3.678739	6.139854	MGD						Weekly	Estimate
	PERMIT REQUIREMENT	Report	Report	MGD						Weekly	Estimate
015 Produced Water Produced Sand	SAMPLE MEASUREMENT						No Discharge				
	PERMIT REQUIREMENT						No Discharge				
015 Produced Water pH** Flow Rate >1 mgd	SAMPLE MEASUREMENT				7.0		7.6	su	0	Weekly	Grab
	PERMIT REQUIREMENT				6		9	su		Weekly	Grab
015 Produced Water Oil and Grease***	SAMPLE MEASUREMENT					7	11	mg/L	0	Weekly	Grab Average
	PERMIT REQUIREMENT					29	42	mg/l		Weekly	Grab Average
015 Produced Water Copper	SAMPLE MEASUREMENT					3	3	µg/l	0	Monthly	Grab
	PERMIT REQUIREMENT					47	117	µg/l		Monthly	Grab
015 Produced Water Manganese	SAMPLE MEASUREMENT					2	2	mg/l	0	Monthly	Grab
	PERMIT REQUIREMENT					25	50	mg/l		Monthly	Grab
015 Produced Water Mercury	SAMPLE MEASUREMENT					0.2	0.2	ug/L	0	Monthly	Grab
	PERMIT REQUIREMENT					0.6	1.0	ug/l		Monthly	Grab
015 Produced Water Silver	SAMPLE MEASUREMENT					5	5	ug/L	0	Monthly	Grab
	PERMIT REQUIREMENT					23	47	ug/l		Monthly	Grab
015 Produced Water Zinc	SAMPLE MEASUREMENT					0.03	0.03	mg/l	0	Monthly	Grab
	PERMIT REQUIREMENT					0.9	1.9	mg/l		Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

John Zager
General Manager
Mid Continent/Alaska Business Unit

TYPED OR PRINTED

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Timothy Brandenburg

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE AREA CODE	NUMBER	DATE YEAR	MO	DA
(907)	276-7600	09	11	20

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

See Trading Bay Production Facility Page 3 of 3 for comments.

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM *(NPDES)*

DISCHARGE MONITORING REPORT *(DMR)*

OMB No. 2040-0004

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015 Produced Water TAH	SAMPLE MEASUREMENT					8	8	mg/l	0	Monthly	Grab
	PERMIT REQUIREMENT					18	27	mg/L		Monthly	Grab
015 Produced Water TAqH	SAMPLE MEASUREMENT					8	8	mg/l	0	Monthly	Grab
	PERMIT REQUIREMENT					Report	Report	mg/L		Monthly	Grab
015 Produced Water Total Ammonia	SAMPLE MEASUREMENT					6	6	mg/l	0	Monthly	Grab
	PERMIT REQUIREMENT					Report	Report	mg/l		Quarterly	Grab
015 Produced Water Whole Effluent Toxicity Mytilus galloprovincialis	SAMPLE MEASUREMENT					143	143	TUC	0	Quarterly	Grab
	PERMIT REQUIREMENT					283	568	TUC		Quarterly	Grab
015 Produced Water Whole Effluent Toxicity Strongylocentrotus purpuratus ****	SAMPLE MEASUREMENT					143	143	TUC	0	Annually	Grab
	PERMIT REQUIREMENT					283	568	TUC		Annually	Grab
015 Produced Water Whole Effluent Toxicity Menidia beryllina	SAMPLE MEASUREMENT					143	143	TUC	0	Annually	Grab
	PERMIT REQUIREMENT					283	568	TUC		Annually	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

John Zager
General Manager
Mid Continent/Alaska Business Unit

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Timothy Brandenburg

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
(907) 276-7600		09	11	20
AREA CODE	NUMBER	YEAR	MO	DA

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

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COMMENTS PAGE 3 OF 3

* Flow rates include deck drainage from Dolly Varden, Grayling, King Salmon, Monopod, and Steelhead Platforms.
Estimated completion fluid flow rate: **0.050925 mgd**
Estimated workover fluid flow rate: **0.019530 mgd**

** Frequency of pH measurement has been increased to more closely monitor water quality.

*** Per Permit instructions weekly samples consist of an average of 4 grab samples over a 24 hour period.

**** Identified as the most sensitive species.

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.	Timothy Brandenburg SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	(907) 276-7600		09	11	20
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