

April 28, 2016

U.S. Environmental Protection Agency, Region VI
Chief, Water Enforcement Branch (6EN-W)
Compliance Assurance and Enforcement Division
1445 Ross Avenue
Dallas, TX 75202-2733

Via U.S. Certified Mail
RRR #7015 1520 0002 4988 1573

U.S. Environmental Protection Agency, Region VI
Attn: Ms. Judy Edelbrock (6EN-W)
Environmental Protection Specialist
Enforcement Branch
1445 Ross Avenue
Dallas, TX 75202-2733

Via U.S. Certified Mail
RRR #7015 1520 0002 4988 1573

Re: DOJ Case No. [90-5-1-1-09215]
Consent Decree
Date of Lodging: July 23, 2013
Date of Entry: October 15, 2013
CA No. 5:13-cv-00666-DAE, United States of America and State of Texas v. San Antonio Water System, in the United States District Court for the Western District of Texas, San Antonio Division

Dear Sir/Madam:

Section 12 a. of the above-referenced Consent Decree requires that within 90 days after Lodging the San Antonio Water System shall provide a copy of the monthly compliance report required by its TPDES permits to the United States Environmental Protection Agency at the same time the report is submitted to the Texas Commission on Environmental Quality. **Revised monthly monitoring reports from November 2015 through March 2016 for our Leon Creek facility** are attached and are provided in compliance with Consent Decree requirements.

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 such 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.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jeffrey J. Haby".

Jeffrey J. Haby, P.E.
Vice President – Production & Treatment

Enc. As stated



April 28, 2016

U.S. Department of Justice
Environmental Enforcement Section
Environment and Natural Resources Division
P.O. Box 7611
Washington, D.C. 20044-7611

Via U.S. Certified Mail
RRR# 7015 1520 0002 4988 1566

Re: DOJ Case No. [90-5-1-1-09215]

Consent Decree

Date of Lodging: July 23, 2013

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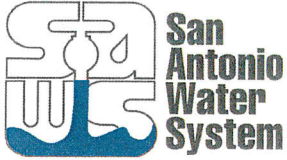
Sincerely,

A handwritten signature in blue ink, appearing to read "Jeffrey J. Haby", is written over the typed name.

Jeffrey J. Haby, P.E.

Vice President – Production & Treatment

Enc. As stated



April 27, 2016

Ms. Teresa R. Gillenwater
Texas Commission on Environmental Quality MC 224
12100 Park 35 Circle
Austin, TX 78753

RE: San Antonio Water System, TPDES Permit No. WQ0011030073 (CN60052069;
RN102182664) Leon Creek Water Recycling Center (LCWRC) TX0052639

REVISED DISCHARGE MONITORING REPORTS (DMRs)

Dear MS. Gillenwater,

On April 21, 2016, you requested that SAWS submits the revised DMRs that containing the new monitoring and reporting requirements for Total Dissolved Solids (TDS) and Total Chloride (TotCl) for LCWRC Outfall 001.

Please find attached the revised Discharge Monitoring Reports that include the TDS and TotCl data from November 2015 through March 2016 for our Leon Creek facility, TPDES Permit No. WQ0011030073. We will utilize the new DMR forms for April report and thereafter.

Should you have any questions or need additional information, please contact Floramie Welch, Environmental Analyst III at (210) 233-3744 or don't hesitate to call me at (210) 233-3239.

Sincerely,

A handwritten signature in black ink, appearing to read "Parviz Chavol". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Parviz Chavol, P.E.,
Sr. Director, Production and Treatment

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

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (include Facility Name/Location if
NAME: SAN ANTONIO WATER SYSTEM
ADDRESS: 3495 VALLEY RD
SAN ANTONIO, TX 78221
FACILITY: LEON CREEK WATER RECYCLING CENTER
LOCATION: 1104 MAURERMAN ROAD
SAN ANTONIO, TX 78224
ATTN: PARVIZ CHAVOL, SR. DIRECTOR

TX0052639	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
11/01/2015	11/30/2015
MONITORING PERIOD	

DMR Mailing ZIP CODE: 78221
MAJOR REVISION
(SUBR 13)
DOMESTIC FACILITY - 001
External Outfall

No Discharge

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Oxygen, dissolved [DO]	SAMPLE MEASUREMENT	*****	*****	6	*****	*****				
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	5 MO MIN	*****	*****		Daily	GRAB	
pH	SAMPLE MEASUREMENT	*****	*****	6.7	*****	7.8				
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	6 MINIMUM	*****	9 MAXIMUM		Daily	GRAB	
Solids, total suspended	SAMPLE MEASUREMENT	351	*****	*****	1.1	2.5				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	5755 DAILY AV	*****	*****	15 DAILY AV	40 DAILY MX		Daily	COMPOS	
Nitrogen, ammonia total [as N]	SAMPLE MEASUREMENT	150	*****	*****	.5	2.9				
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	767 DAILY AV	*****	*****	2 DAILY AV	7 DAILY MX		Daily	COMPOS	
Chloride [as Cl]	SAMPLE MEASUREMENT	41804	*****	*****	137	157	0			
00940 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	*****	*****	Req. Mon. DAILY AV	Req. Mon. DAILY MX		Daily	COMPOS	
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	37	54	*****	*****	*****				
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	MGD	*****	*****	*****		Continuous	TOTALZ	
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	41319	*****	*****	*****	*****				
50050 P 0 See Comments	PERMIT REQUIREMENT	63889 2HR PEAK	gal/min	*****	*****	*****		Continuous	TOTALZ	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	04/26/2016
TYPED OR PRINTED	AREA Code	NUMBER
		MM/DD/YYYY
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		

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

THE COMBINED FLOW FOR OUTFALLS 001 AND 002 SHALL NOT EXCEED 46 MGD AND 2- HR PEAK OF 63889 GPM. POUNDS PER DAY LOADING SHALL ALSO BE THE COMBINED TOATL OF BOTH OUTFALLS.

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

Form Approved
OMB No 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
NAME: SAN ANTONIO WATER SYSTEM
ADDRESS: 3495 VALLEY RD
SAN ANTONIO, TX 78221
FACILITY: LEON CREEK WATER RECYCLING CENTER
LOCATION: 1104 MAUERMAN ROAD
SAN ANTONIO, TX 78224
ATTN: PARVIZ CHAVOL, SR. DIRECTOR

TX0052639	001 - A
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
11/01/2015	11/30/2015
MONITORING PERIOD	

DMR Mailing ZIP CODE: 78221
MAJOR REVISION
(SUBR 1.3)
DOMESTIC FACILITY - 001
External Outfall

No Discharge

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Flow, in conduit or thru treatment plant	31	*****	*****	*****	*****	*****			
50050 Y 0 Effluent Gross (Supplementary)	46	*****	*****	*****	*****	*****			
Chlorine, total residual	*****	*****	*****	*****	*****	*****	Continuous	TOTALZ	
50060 A 0 Disinfection, Process Complete	*****	*****	*****	*****	*****	*****	Daily	GRAB	
Chlorine, total residual	*****	*****	*****	*****	*****	*****			
50060 B 0 Prior to Disinfection	*****	*****	*****	*****	*****	*****	Daily	GRAB	
E. coli	*****	*****	*****	*****	*****	*****			
51040 I 0 Effluent Gross	*****	*****	*****	*****	*****	*****	Five per Week	GRAB	
Solids, total dissolved	209031	*****	*****	*****	*****	*****	0		
70295 I 0 Effluent Gross	*****	*****	*****	*****	*****	*****	Daily	COMPOS	
BOD, carbonaceous (5 day, 20 C)	620	*****	*****	*****	*****	*****			
80082 I 0 Effluent Gross	2686	*****	*****	*****	*****	*****	Daily	COMPOS	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	04/26/2016
TYPED OR PRINTED	AREA Code	NUMBER
		MM/DD/YYYY
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		

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TX0052639	001 - A
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
12/01/2015	12/31/2015

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001
External Outfall

REVISION

No Discharge

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS			
Oxygen, dissolved [DO]	*****	*****	6.3	*****	*****			
00300 1 0 Effluent Gross	*****	*****	5 MO MIN	*****	*****		Daily	GRAB
pH	*****	*****	6.6	*****	7.7			
00400 1 0 Effluent Gross	*****	*****	6 MINIMUM	*****	9 MAXIMUM		Daily	GRAB
Solids, total suspended	292	*****	1	*****	1.2			
00530 1 0 Effluent Gross	5755 DAILY AV	*****	15 DAILY AV	*****	40 DAILY MX		Daily	COMPOS
Nitrogen, ammonia total [as N]	145	*****	.5	*****	1.7			
00610 1 0 Effluent Gross	767 DAILY AV	*****	2 DAILY AV	*****	7 DAILY MX		Daily	COMPOS
Chloride [as Cl]	41495	*****	144	*****	157			
00940 1 0 Effluent Gross	Req. Mon. DAILY AV	*****	Req. Mon. DAILY AV	*****	Req. Mon. DAILY MX		Daily	COMPOS
Flow, in conduit or thru treatment plant	35	43	*****	*****	*****			
50050 1 0 Effluent Gross	Req. Mon. DAILY AV	MGD	*****	*****	*****		Continuous	TOTALZ
Flow, in conduit or thru treatment plant	*****	36806	*****	*****	*****			
50050 P 0 See Comments	*****	63889 2HR PEAK	*****	*****	*****		Continuous	TOTALZ

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	04/26/2016
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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MM/DD/YYYY	MM/DD/YYYY
12/01/2015	12/31/2015

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001 REVISION
External Outfall
No Discharge

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	32	*****	*****	*****	*****	*****			
50050 Y 0 Effluent Gross (Supplementary)	PERMIT REQUIREMENT	46	*****	*****	*****	*****	*****			
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	*****	*****	.09	*****	Continuous	TOTALZ	
50060 A 0 Disinfection, Process Complete	PERMIT REQUIREMENT	*****	*****	*****	*****	.1 INST MAX	*****	Daily	GRAB	
Chlorine, total residual	SAMPLE MEASUREMENT	*****	*****	1	*****	*****	*****			
50060 B 0 Prior to Disinfection	PERMIT REQUIREMENT	*****	*****	1 MO MIN	*****	*****	*****	Daily	GRAB	
E. coli	SAMPLE MEASUREMENT	*****	*****	*****	1.1	4	*****			
51040 I 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	126 DAILY AV	399 DAILY MX	*****	Five per Week	GRAB	
Solids, total dissolved	SAMPLE MEASUREMENT	199751	*****	*****	692	773	*****			
70295 I 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	Daily	COMPOS	
BOD, carbonaceous [5 day, 20 C]	SAMPLE MEASUREMENT	578	*****	*****	*****	*****	*****			
80082 I 0 Effluent Gross	PERMIT REQUIREMENT	2686 DAILY AV	*****	*****	*****	17 DAILY MX	*****	Daily	COMPOS	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	12/31/2015
TYPED OR PRINTED	AREA Code	NUMBER
		MM/DD/YYYY

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

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

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OMB No. 2040-0004

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TX0052639	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
01/01/2016	01/31/2016

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001 REVISION
External Outfall

No Discharge

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Oxygen, dissolved [DO]	SAMPLE MEASUREMENT	*****	*****	6.3	*****	*****				
00300 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	5 MO MIN	*****	*****		Daily	GRAB	
pH	SAMPLE MEASUREMENT	*****	*****	6.8	*****	7.5				
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	6 MINIMUM	*****	9 MAXIMUM		Daily	GRAB	
Solids, total suspended	SAMPLE MEASUREMENT	279	*****	1	*****	1.5				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	5755 DAILY AV	*****	15 DAILY AV	*****	40 DAILY MX		Daily	COMPOS	
Nitrogen, ammonia total [as N]	SAMPLE MEASUREMENT	233	*****	.88	*****	3.4				
00610 1 0 Effluent Gross	PERMIT REQUIREMENT	767 DAILY AV	*****	2 DAILY AV	*****	7 DAILY MX		Daily	COMPOS	
Chloride [as Cl]	SAMPLE MEASUREMENT	38373	*****	145	*****	168				
00940 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	*****	Req. Mon. DAILY AV	*****	Req. Mon. DAILY MX		Daily	COMPOS	
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	32	*****	45	*****	*****				
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	*****	Req. Mon. DAILY MX	*****	*****		Continuous	TOTALZ	
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	34722	*****	34722	*****	*****				
50050 P 0 See Comments	PERMIT REQUIREMENT	*****	*****	63889 2HR PEAK	*****	*****		Continuous	TOTALZ	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	4/26/2016
TYPED OR PRINTED	AREA Code	NUMBER
		MM/DD/YYYY

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

THE COMBINED FLOW FOR OUTFALLS 001 AND 002 SHALL NOT EXCEED 46 MGD AND 2- HR PEAK OF 63889 GPM. POUNDS PER DAY LOADING SHALL ALSO BE THE COMBINED T O A T L OF BOTH OUTFALLS.

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

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
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ADDRESS: 3495 VALLEY RD
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FACILITY: LEON CREEK WATER RECYCLING CENTER
LOCATION: 1104 MAURERMAN ROAD
SAN ANTONIO, TX 78224
ATTN: PARVIZ CHAVOL, SR. DIRECTOR

TX0052639	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
01/01/2016	01/31/2016

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001 REVISION
External Outfall
No Discharge

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Flow, in conduit or thru treatment plant	32	*****	*****	*****	*****	*****			
50050 Y 0 Effluent Gross (Supplementary)	46	*****	*****	*****	*****	*****		Continuous	TOTALZ
Chlorine, total residual	*****	*****	*****	*****	*****	.09			
50060 A 0 Disinfection, Process Complete	*****	*****	*****	*****	*****	.1		Daily	GRAB
Chlorine, total residual	*****	*****	*****	*****	*****	INST MAX			
50060 B 0 Prior to Disinfection	*****	*****	*****	*****	*****	*****		Daily	GRAB
E. coli	*****	*****	*****	*****	*****	13			
51040 I 0 Effluent Gross	*****	*****	*****	*****	*****	399		Five per Week	GRAB
Solids, total dissolved	186757	*****	*****	*****	*****	706			
70295 I 0 Effluent Gross	*****	*****	*****	*****	*****	*****		Daily	COMPOS
BOD, carbonaceous [5 day, 20 C]	547	*****	*****	*****	*****	4			
80082 I 0 Effluent Gross	2686	*****	*****	*****	*****	17		Daily	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	04/26/2016
TYPED OR PRINTED	AREA Code	NUMBER
	04	2102333239
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		

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

THE COMBINED FLOW FOR OUTFALLS 001 AND 002 SHALL NOT EXCEED 46 MGD AND 2- HR PEAK OF 63889 GPM. POUNDS PER DAY LOADING SHALL ALSO BE THE COMBINED TREATMENT OUTFALLS.

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

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (include Facility Name/Location if
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LOCATION: 1104 MAUERMAN ROAD
SAN ANTONIO, TX 78224
ATTN: PARVIZ CHAVOL, SR. DIRECTOR

TX0052639	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
02/01/2016	02/29/2016

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001 REVISION
External Outfall
No Discharge

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Oxygen, dissolved [DO]	*****	*****	6	*****	*****	*****			
00300 1 0 Effluent Gross	*****	*****	5	*****	*****	mg/L	Daily	GRAB	
pH	*****	*****	6.5	*****	7.7				
00400 1 0 Effluent Gross	*****	*****	6	*****	9	SU	Daily	GRAB	
Solids, total suspended	332	*****	MINIMUM	1.1	2.4				
00530 1 0 Effluent Gross	5755	*****	*****	15	40	mg/L	Daily	COMPOS	
Nitrogen, ammonia total [as N]	319	*****	*****	1	5.5				
00610 1 0 Effluent Gross	767	*****	*****	2	7	mg/L	Daily	COMPOS	
Chloride [as Cl]	46257	*****	*****	151	163				
00940 1 0 Effluent Gross	Req. Mon. DAILY AV	*****	*****	Req. Mon. DAILY AV	*****	mg/L	Daily	COMPOS	
Flow, in conduit or thru treatment plant	37	45	*****	*****	*****	*****			
50050 1 0 Effluent Gross	Req. Mon. DAILY AV	*****	*****	*****	*****	*****	Continuous	TOTALZ	
Flow, in conduit or thru treatment plant	*****	36111	*****	*****	*****	*****			
50050 P 0 See Comments	*****	63889	*****	*****	*****	*****	Continuous	TOTALZ	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	02/26/2016
TYPED OR PRINTED	ABEA Code	NUMBER
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		

IDENTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE DATA SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PARTS OF MY KNOWLEDGE AND BELIEFS, THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEFS, 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.

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE COMBINED FLOW FOR OUTFALLS 001 AND 002 SHALL NOT EXCEED 46 MGD AND 2- HR PEAK OF 63889 GPM. POUNDS PER DAY LOADING SHALL ALSO BE THE COMBINED TOATL OF BOTH OUTFALLS.

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02/01/2016	02/29/2016

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001
External Outfall

REVISION

No Discharge

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Flow, in conduit or thru treatment plant	33	*****	*****	*****	*****	*****			
50050 Y 0 Effluent Gross (Supplementary)	46	*****	*****	*****	*****	*****			
Chlorine, total residual	*****	*****	*****	*****	*****	.09		Continuous	TOTALZ
50060 A 0 Disinfection, Process Complete	*****	*****	*****	*****	*****	1		Daily	GRAB
Chlorine, total residual	*****	*****	*****	*****	*****	INST MAX			
50060 B 0 Prior to Disinfection	*****	*****	*****	*****	*****	1		Daily	GRAB
E. coli	*****	*****	*****	*****	*****	4		Daily	GRAB
51040 I 0 Effluent Gross	*****	*****	*****	*****	*****	1.3			
Solids, Total dissolved	219960	*****	*****	*****	*****	126		Five per Week	GRAB
70295 I 0 Effluent Gross	*****	*****	*****	*****	*****	DAILY AV			
BOD, carbonaceous [5 day, 20 C]	614	*****	*****	*****	*****	716			
80082 I 0 Effluent Gross	2686	*****	*****	*****	*****	DAILY AV			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	02/26/2016
TYPED OR PRINTED	AREA Code	NUMBER
		MM/DD/YYYY
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		

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

THE COMBINED FLOW FOR OUTFALLS 001 AND 002 SHALL NOT EXCEED 46 MGD AND 2- HR PEAK OF 63889 GPM. POUNDS PER DAY LOADING SHALL ALSO BE THE COMBINED TOATL OF BOTH OUTFALLS.

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

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
NAME: SAN ANTONIO WATER SYSTEM
ADDRESS: 3495 VALLEY RD
SAN ANTONIO, TX 78221
FACILITY: LEON CREEK WATER RECYCLING CENTER
LOCATION: 1104 MAUERMAN ROAD
SAN ANTONIO, TX 78224
ATTN: PARVIZ CHAVOL, SR. DIRECTOR

TX0052639	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MM/DD/YYYY	MM/DD/YYYY
03/01/2016	03/31/2016

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001 REVISION
External Outfall

No Discharge

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	UNITS	VALUE	VALUE	UNITS	VALUE			
Oxygen, dissolved [DO]	PERMIT MEASUREMENT	*****	*****	6.3	*****	*****				
00300 1 0 Effluent Gross pH	PERMIT MEASUREMENT	*****	*****	5 MIO MIN	*****	*****		Daily	GRAB	
00400 1 0 Effluent Gross Solids, total suspended	PERMIT MEASUREMENT	*****	*****	6.5	*****	7.5				
00530 1 0 Effluent Gross Nitrogen, ammonia total [as N]	PERMIT MEASUREMENT	*****	*****	6	*****	9 MAXIMUM		Daily	GRAB	
00610 1 0 Effluent Gross Chloride [as Cl]	PERMIT MEASUREMENT	*****	*****	310	*****	1.1				
00940 1 0 Effluent Gross Flow, in conduit or thru treatment plant	PERMIT MEASUREMENT	*****	*****	5755 DAILY AV	*****	40 DAILY MX		Daily	COMPOS	
50050 1 0 Effluent Gross Flow, in conduit or thru treatment plant	PERMIT MEASUREMENT	*****	*****	100	*****	1.3				
50050 P 0 See Comments	PERMIT MEASUREMENT	*****	*****	767 DAILY AV	*****	7 DAILY MX		Daily	COMPOS	
		*****	*****	41792	*****	146				
		*****	*****	35	*****	161				
		*****	*****	53	*****	*****				
		*****	*****	39583	*****	*****				
		*****	*****	63889 2HR PEAK	*****	*****				

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	04/26/2016
TYPED OR PRINTED	AREA Code	NUMBER
		MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
THE COMBINED FLOW FOR OUTFALLS 001 AND 002 SHALL NOT EXCEED 46 MGD AND 2- HR PEAK OF 63889 GPM. POUNDS PER DAY LOADING SHALL ALSO BE THE COMBINED T O A T L OF BOTH OUTFALLS.

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

Form Approved
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if
NAME: SAN ANTONIO WATER SYSTEM
ADDRESS: 3495 VALLEY RD
SAN ANTONIO, TX 78221
FACILITY: LEON CREEK WATER RECYCLING CENTER
LOCATION: 1104 MAURERMAN ROAD
SAN ANTONIO, TX 78224
ATTN: PARVIZ CHAVOL, SR. DIRECTOR

TX0052639	001-A
PERMIT NUMBER	DISCHARGE NUMBER
MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
03/01/2016	03/31/2016

DMR Mailing ZIP CODE: 78221
MAJOR (SUBR 13)
DOMESTIC FACILITY - 001 REVISION
External Outfall

No Discharge

PARAMETER	QUANTITY OR LOADING		QUALITY OR CONCENTRATION		NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	UNITS	VALUE	UNITS			
Flow, in conduit or thru treatment plant	33	*****	*****	*****			
50050 Y 0 Effluent Gross (Supplementary) Chlorine, total residual	46 ANNL AVG	MGD	*****	*****		Continuous	TOTALZ
50060 A 0 Disinfection, Process Complete Chlorine, total residual	*****	*****	*****	.09			
50060 B 0 Prior to Disinfection E. coli	*****	*****	*****	.1 INST MAX		Daily	GRAB
51040 1 0 Effluent Gross Solids, total dissolved	*****	*****	*****	*****		Daily	GRAB
70295 1 0 Effluent Gross BOD, carbonaceous [5 day, 20 C]	231684	*****	*****	743		Five per Week	GRAB
80082 1 0 Effluent Gross	*****	*****	*****	*****		Daily	COMPOS
	2686 DAILY AV	lb/d	*****	17 DAILY MX		Daily	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	TELEPHONE	DATE
Parviz Chavol, Sr. Director	2102333239	04/20/2016
TYPED OR PRINTED	AREA Code	NUMBER
		MM/DD/YYYY
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		

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

THE COMBINED FLOW FOR OUTFALLS 001 AND 002 SHALL NOT EXCEED 46 MGD AND 2- HR PEAK OF 63889 GPM. POUNDS PER DAY LOADING SHALL ALSO BE THE COMBINED T OATL OF BOTH OUTFALLS.