

**SDMS US EPA Region V**  
*Imagery Insert Form*

**Document ID:**

179235

**Some images in this document may be illegible or unavailable in SDMS. Please see reason(s) indicated below:**



Illegible due to bad source documents. Image(s) in SDMS is equivalent to hard copy.

**Specify Type of Document(s) / Comments:**

DISCHARGE MONITORING REPORT



Includes \_\_\_\_ COLOR or \_\_\_\_ RESOLUTION variations.  
Unless otherwise noted, these pages are available in monochrome. The source document page(s) is more legible than the images. The original document is available for viewing at the Superfund Records Center.

**Specify Type of Document(s) / Comments:**



Confidential Business Information (CBI).  
This document contains highly sensitive information. Due to confidentiality, materials with such information are not available in SDMS. You may contact the EPA Superfund Records Manager if you wish to view this document.

**Specify Type of Document(s) / Comments:**



Unscannable Material:  
Oversized \_\_\_\_ or \_\_\_\_ Format.  
Due to certain scanning equipment capability limitations, the document page(s) is not available in SDMS. The original document is available for viewing at the Superfund Records center.

**Specify Type of Document(s) / Comments:**



Document is available at the EPA Region 5 Records Center.

**Specify Type of Document(s) / Comments:**

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

NAME PLAINFELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINFELL MI 49080

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

110003798 PERMIT NUMBER  
 005 A DISCHARGE NUMBER

179235 SURFACE WATER QUALITY  
 U.K. Uyan  
 OMB No. 2040-0004  
 Approval expires 05-31-98  
 FEB 11 2000  
 PCS - Recd.

MAJOR (SUBR PP)  
 F - FINAL  
 005/TRETD PROC WASTE/NONCONTA  
 \*\*\* NO DISCHARGE \*\*\*  
 NOTE: Read instructions before completing this form.

FACILITY LOCATION PLAINFELL PAPER CO.  
 PLAINFELL MI 49080  
 APPLICANT: SHAJIA KAIYUDDIN

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
90	01	01	00	01	31
(20-21)	(22-28)	(24-29)	(26-27)	(28-29)	(30-31)

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
OXIDEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****		3.7	*****	*****	( 19)	0	1/7	oral
0000 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				***				MG/L			
DO, 5-DAY (20 D% C)	SAMPLE MEASUREMENT	174	233	( 26)	*****	*****	*****		0	4/7	24hc
0010 1 2 0	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE				LBS/DY				***			
	SAMPLE MEASUREMENT	*****	*****		7.4	*****	*****	( 12)	0	5/7	oral
0040 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				***				SU			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	300	487	( 26)	*****	*****	*****		0	5/7	24hc
0030 1 2 0	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE				LBS/DY				***			
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	0.10	*****	( 19)	0	1/7	24hc
0050 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				***				MG/L			
PHOS, IN CONDUIT OR TREATMENT PLANT	SAMPLE MEASUREMENT	2.38	2.76	( 03)	*****	*****	*****		0	contin flow	
0000 1 0 0	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE				MGD				***			
FLUORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.02	( 19)	0	1/7	oral
0060 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				***				MG/L			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREON 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			
Robert L. Mansler Plant Manager						616 685-5851		00	01	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)  
 MONITORING - MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
ADDRESS 200 ALLSGAN STREET  
PLAINWELL MI 49000

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-18)

10003798  
PERMIT NUMBER

005 A  
DISCHARGE NUMBER

MAJOR (SUBR PP) F - FINAL  
005/TRETD PRODC WASTE/NONCONTA  
Form Approved. OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY LOCATION PLAINWELL PAPER CO.  
PLAINWELL MI 49000

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
90	01	01	90	01	31	
(20-31)	(22-33)	(24-25)	(26-27)	(28-29)	(30-31)	

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

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (48-53)			(4 Card Only) QUANTITY OR CONCENTRATION (48-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
WATER, DISSOLVED (00)	SAMPLE MEASUREMENT	*****	*****		3.7	*****	*****	( 19)	0	1/7	anal
0000 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				****				MG/L			
00, 5-DAY (20 D55. C)	SAMPLE MEASUREMENT	174	233	( 26)	*****	*****	*****		0	4/7	24hc
0000 1 2 0	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE				LPS/DY				***			
	SAMPLE MEASUREMENT	*****	*****		7.4	*****	*****	( 12)	0	5/7	anal
0000 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				****				50			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	300	487	( 26)	*****	*****	*****		0	5/7	24hc
0000 1 2 0	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE				LBS/DY				***			
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	0.10	*****	( 19)	0	1/7	24hc
0000 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				****				MG/L			
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT	SAMPLE MEASUREMENT	2.38	2.76	( 03)	*****	*****	*****		0	cont'n	flow
0000 1 0 0	PERMIT REQUIREMENT										
EFFLUENT GROSS VALUE				MGD				***			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.02	( 19)	0	1/7	anal
0000 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE				****				MG/L			
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 16 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Permittee 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	
Robert E. Gansler								616 685-5851		00 01 09	
Bill Paragon								AREA CODE NUMBER		YEAR MO DAY	
TYPED OR PRINTED											

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080  
 ACH: KHAJA NAEMUDDIN

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

PERMIT NUMBER: HD0003794  
 DISCHARGE NUMBER: 005 A

MONITORING PERIOD  
 FROM 00 01 01 TO 00 01 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR SURFACE WATER QUALITY (SUBR PP)  
 F - FINAL  
 005/TREATED PROC WASTE/NONCONTA

Form Approved: OMB No. 2040-0004  
 05-31-98

FEB 11 2000

\*\*\* NO DISCHARGE - Req'd \*\*\*  
 NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
UPPER OBSERVATION, VISUAL, VIB RESPONSE			*****	( 94 )	*****	*****	*****	0	contin	visual
INFLUENT GROSS VALUE				ES=1 NO=0						
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	
Robert L. ... Bill ...							16 685-5851		00 09	
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 CAD10M- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME: PLAINFELL PAPER CO  
 ADDRESS: 200 ALLEGAN STREET  
 PLAINFELL

MI 49083

FACILITY LOCATION: PLAINFELL PAPER CO.  
 PLAINFELL

MI 49083

OWNER: SHAJA MAJIDUDDIN

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

410003794  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SUBR 0P)  
 F - FINAL  
 005/TRETED PROC WASTE/NONCONTA

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

063335

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	01	01	00	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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
WTFALL OBSERVATION, VISUAL, VAV RESPONSE	1		*****	( 04 )	*****	*****	*****		0	cont'n	visual
EFFLUENT GROSS VALUE				ES=1 NO=0							

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
Robert L. Trudisler Mill Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	016 685-5851
TYPED OR PRINTED		AREA CODE NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR- MONITOR QUARTERLY... JAPAN, JUNE, SEPTEMBER AND DECEMBER.

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	1	1
TO	2000	1	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT UNIT	3.0 Minimum MG/L	1,800 Max. Lbs / Day	6.5--9.0 SU	2,100 Max. Lbs / Day	1.0 Avg. MG/L	MGD	0.036 Max. MG/L	1:Yes & 0: No	Max UG / L
1							1.56		1	
2				7.7	209		1.57		1	
3			233	7.5	487		2.54		1	
4			197	7.8	351	0.12	2.63		1	
5			173	7.5	481		2.31	0.020	1	
6		3.9	139	7.8	377		2.38		1	
7							2.76		1	
8							2.39		1	
9				7.5	251		2.51		1	
10			154	7.4	308		2.64		1	
11			218	7.7	282	0.07	2.62		1	
12			178	7.8	357		2.68	0.020	1	
13		4.4	147	7.8	168		2.53		1	
14							2.63		1	
15							2.23		1	
16				7.8	224		2.45		1	
17			146	7.7	292		2.50		1	
18			180	7.8	383		2.70		1	
19			197	7.8	438	0.12	2.63		1	
20		4.0	218	7.8	415		2.62	0.020	1	
21							2.58		1	
22							2.12		1	
23				7.5	289		2.04		1	
24			166	7.8	208		2.50		1	
25			117	7.8	137	0.10	2.35		1	
26			191	7.7	468		2.55	0.020	1	
27		3.7	148		274		2.53		1	
28							2.33		1	
29							1.92		1	
30				7.9	99		1.98		1	
31			150	7.9	116		2.00		1	
	TOTAL	16.0	2952	181.2	6564	0.41	73.78	0.060	31	0.00
	AVG.	4.0	174	7.7	300	0.10	2.38	0.020	1	#DIV/0!
	Min.	3.7	117	7.4	99	0.07	1.56	0.020	1	0.00
	Max.	4.4	233	7.9	487	0.12	2.76	0.020	1	0.00

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 3 years.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>[Signature]</i>	2/10/00

0633336

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	1	1
	2000	1	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min—Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,800 Max.	6.5—9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L			UG / L
1							1.56		1	
2				7.7	208		1.57		1	
3			233	7.5	487		2.54		1	
4			197	7.6	351	0.12	2.63		1	
5			173	7.5	481		2.31	0.020	1	
6		3.9	139	7.6	377		2.38		1	
7							2.76		1	
8							2.39		1	
9				7.5	251		2.51		1	
10			154	7.4	308		2.64		1	
11			218	7.7	282	0.07	2.62		1	
12			178	7.6	357		2.68	0.020	1	
13		4.4	147	7.8	168		2.53		1	
14							2.63		1	
15							2.23		1	
16				7.6	224		2.45		1	
17			146	7.7	292		2.50		1	
18			180	7.8	383		2.70		1	
19			197	7.8	438	0.12	2.63		1	
20		4.0	218	7.8	415		2.62	0.020	1	
21							2.58		1	
22							2.12		1	
23				7.5	289		2.04		1	
24			166	7.8	208		2.50		1	
25			117	7.6	137	0.10	2.35		1	
26			191	7.7	468		2.55	0.020	1	
27		3.7	148		274		2.53		1	
28							2.33		1	
29							1.92		1	
30				7.9	99		1.98		1	
31			150	7.9	116		2.00		1	
	TOTAL	16.0	2952	161.2	6594	0.41	73.78	0.060	31	0.00
	AVG.	4.0	174	7.7	300	0.10	2.38	0.020	1	#DIV/0!
	Min.	3.7	117	7.4	99	0.07	1.56	0.020	1	0.00
	Max.	4.4	233	7.9	487	0.12	2.78	0.020	1	0.00

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>[Signature]</i>	2/09/00

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	1	1
	2000	1	31

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
LIMIT	3.0 Minimum	1,800 Max.	6.5--9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max	
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L	
1							1.56		1	
2				7.7	209		1.57		1	
3			233	7.5	487		2.54		1	
4			197	7.6	351	0.12	2.63		1	
5			173	7.5	481		2.31	0.020	1	
6		3.9	139	7.6	377		2.38		1	
7							2.76		1	
8							2.39		1	
9				7.5	251		2.51		1	
10			154	7.4	308		2.64		1	
11			218	7.7	282	0.07	2.62		1	
12			178	7.8	357		2.68	0.020	1	
13		4.4	147	7.8	168		2.53		1	
14							2.63		1	
15							2.23		1	
16				7.6	224		2.45		1	
17			146	7.7	282		2.50		1	
18			180	7.8	383		2.70		1	
19			197	7.8	438	0.12	2.63		1	
20		4.0	218	7.8	415		2.62	0.020	1	
21							2.58		1	
22							2.12		1	
23				7.5	289		2.04		1	
24			166	7.8	208		2.50		1	
25			117	7.6	137	0.10	2.35		1	
26			191	7.7	488		2.55	0.020	1	
27		3.7	148		274		2.53		1	
28							2.33		1	
29							1.92		1	
30				7.9	99		1.98		1	
31			150	7.9	116		2.00		1	
	TOTAL	16.0	2952	161.2	6564	0.41	73.78	0.080	31	0.00
	AVG.	4.0	174	7.7	300	6.10	2.38	0.020	1	#DIV/0!
	Min.	3.7	117	7.4	99	0.07	1.56	0.020	1	0.00
	Max.	4.4	233	7.9	487	0.12	2.78	0.020	1	0.00

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 or between 6 months and 5 years.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>[Signature]</i>	2/10/00

0633338



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

ME PLAINFELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINFELL MI 49080

CITY PLAINFELL PAPER CO.  
 LOCATION PLAINFELL MI 49080

OWN: CHAJA NAEMUDDIN *Km*

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-18) (17-19)

910003798 PERMIT NUMBER  
 005 1 DISCHARGE NUMBER

MAJOR (SUBR PP)  
 F - FINAL  
 005/PRETED PROC WASTE/NONCONTA

Form Approved  
 OMB No. 2040-0004  
 Surface Water Quality  
 Approved Expires 05-31-88

MAR 16 2000

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	02	01	00	02	29
(20-21)	(22-28)	(24-28)	(28-27)	(28-28)	(30-31)

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
IRON, DISSOLVED (D)	0000 L 0 0	*****	*****		3.7	*****	*****	( 19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***							NG/L
DO, 5-DAY (21 DEG. C)	0000 L 2 0	173	638	( 25)	*****	*****	*****		0	4/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PH	0000 L 0 0	*****	*****		7.5	*****	8.0	( 12)	0	5/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***							SU
SOLIDS, TOTAL SUSPENDED	0000 L 2 0	183	276	( 25)	*****	*****	*****		0	5/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PHOSPHORUS, TOTAL (AS P)	0000 L 0 0	*****	*****		0.07	*****	*****	( 19)	0	1/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***							MG/L
FLOW, IN CONDUIT OR POND TREATMENT PLANT	0000 L 0 0	2.40	2.89	( 03)	*****	*****	*****		0		contlr flow
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD							
CHLORINE, TOTAL RESIDUAL	0000 L 0 0	*****	*****		0.02	*****	*****	( 19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***							MG/L

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert L. Tranter  
 Mill 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.)

*R. Br...*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 616,685-5851  
 DATE 00 03 13  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

The B.O.D Test For 2/29/00 was omitted. There was a problem with dilutions at K.A.R. Laboratory. Letter To Follow

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49093

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

310003794 PERMIT NUMBER  
 005 A DISCHARGE NUMBER

MAJOR (SUBR PP)  
 P - PINAL  
 005/TRETD PROC WASTE/NONCONTA

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

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49093

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	00	02	01		00	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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
IRON, DISSOLVED (D)	*****	*****			3.7	*****	*****	( 19)	0	1/7	gral
PERMIT REQUIREMENT	*****	*****									
IRON, 5-DAY (20 DRS. C)	*****	*****	( 25)		*****	*****	*****		0	4/7	24hr
PERMIT REQUIREMENT	*****	*****	LBS/DY								
PH	*****	*****			7.5	*****	8.0	( 12)	0	5/7	gral
PERMIT REQUIREMENT	*****	*****									
SOLIDS, TOTAL SUSPENDED	*****	*****	( 25)		*****	*****	*****		0	5/7	24hr
PERMIT REQUIREMENT	*****	*****	LBS/DY								
PHOSPHORUS, TOTAL (AS P)	*****	*****			*****	0.07	*****	( 19)	0	1/7	24hr
PERMIT REQUIREMENT	*****	*****									
FLOW, IN CONDUIT OR SURF TREATMENT PLANT	*****	*****	( 03)		*****	*****	*****		0	contlr	flow
PERMIT REQUIREMENT	*****	*****	MGD								
CHLORINE, TOTAL RESIDUAL	*****	*****			*****	*****	0.02	( 19)	0	1/7	gral
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		
Point L. Tranter Mill Manager		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	616 685-5851	00	03
TYPED OR PRINTED		AREA CODE NUMBER	YEAR	MO	DAY

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

MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

The B.O.D Test for 2/29/00 was omitted. There was a problem with dilutions at K.A.R Laboratory. Letter To Follow.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49083

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49083

OFFICER: KHAJA NAINUDDIN

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

410003791  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SUBR PP)  
 F - FINAL  
 005/TREATED PROC WASTE/NONCONTA

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 06-31-98

MONITORING PERIOD

FROM YEAR 00 MO 02 DAY 01 TO YEAR 00 MO 02 DAY 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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DIFFERENTIAL OBSERVATION, VISUAL, Y/N RESPONSE	1	*****	(94)	*****	*****	*****	*****	0	cont.	visual	
EFFLUENT GROSS VALUE	ES=1 NO=0	***		***							

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Polent L. Traushen  
 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. Brullman*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 16 685-5851  
 DATE 00 03 13  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 304104- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

06.3341

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080  
 ATTN: ANAJA NAIKHOODEN *Km*

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

310003741 PERMIT NUMBER  
 005 2 DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	02	01	00	02	29
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

MAJOR (SUBR PP)  
 F - FINAL  
 005/TREATED PROC WASTE/NONCONTA

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

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DIAPHRAGM OBSERVATION, VISUAL, Y/N RESPONSE	1		*****	( 94)	*****	*****	*****		0	contin	visual
INFLUENT GROSS VALUE	PERMIT REQUIREMENT			ES=1 NO=0							
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT 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		
Point of Contact Plant Manager		<i>[Signature]</i>	16 685-5851	00	03
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)  
 ADDITION- MONITOR QUARTERLY...SACR, JUNE, SEPTEMBER AND DECEMBER.

063342

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	2	1
TO	2000	2	29

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARAMETER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,800 Max.	6.5--9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L
1			114	7.7	95	0.06	2.28	0.020	1	
2		4.5	144	7.9	123		2.46		1	
3			175	8	153		2.62		1	
4							2.56		1	
5							2.23		1	
6				7.8	151		2.26		1	
7			155	7.7	174		2.32		1	
8			137	7.6	235	0.10	2.35	0.020	1	
9			97	7.5	195		2.34		1	
10		4.0	175	7.6	272		2.33		1	
11							2.28		1	
12							2.09		1	
13				7.6	250		2.00		1	
14			176	7.7	196		2.35		1	
15			166	7.8	165	0.06	2.48	0.020	1	
16			148	7.8	169		2.53		1	
17		3.7	119		178		2.37		1	
18							2.55		1	
19							2.22		1	
20				7.9	209		2.28		1	
21			152	7.8	261		2.61		1	
22			120	8.0	120	0.06	2.89	0.020	1	
23		4.9	133	7.7	155		2.66		1	
24			106	7.7	106		2.56		1	
25							2.43		1	
26							2.37		1	
27				7.8	156		2.08		1	
28			638	7.8	276		2.55		1	
29				7.8	213	0.06	2.55		1	
30										
31										
	TOTAL	17.1	2775	155.2	3852	0.34	69.60	0.080	29	0.00
	AVG.	4.3	173	7.8	183	0.07	2.40	0.020	1	#DIV/0!
	Min.	3.7	97	7.6	95	0.06	2.00	0.020	1	0.00
	Max.	4.9	638	8.0	276	0.10	2.89	0.020	1	0.00

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. & 101 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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	3/12/00

063343

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	2	1
	2000	2	29

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,800 Max.	6.5--9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L
1			114	7.7	95	0.06	2.28	0.020	1	
2		4.5	144	7.9	123		2.46		1	
3			175	8	153		2.62		1	
4							2.56		1	
5							2.23		1	
6				7.8	151		2.28		1	
7			155	7.7	174		2.32		1	
8			137	7.6	235	0.10	2.35	0.020	1	
9			97	7.5	195		2.34		1	
10		4.0	175	7.6	272		2.33		1	
11							2.28		1	
12							2.09		1	
13				7.6	250		2.00		1	
14			176	7.7	196		2.35		1	
15			186	7.8	165	0.06	2.48	0.020	1	
16			148	7.8	160		2.53		1	
17		3.7	119		178		2.37		1	
18							2.55		1	
19							2.22		1	
20				7.9	209		2.28		1	
21			152	7.8	281		2.61		1	
22			120	8.0	120	0.06	2.89	0.020	1	
23		4.9	133	7.7	155		2.66		1	
24			106	7.7	108		2.56		1	
25							2.43		1	
26							2.37		1	
27				7.8	156		2.08		1	
28			638	7.8	276		2.55		1	
29				7.8	213	0.06	2.55		1	
30										
31										
	TOTAL	17.1	2775	155.2	3852	0.34	69.60	0.060	29	0.00
	AVG.	4.3	173	7.8	183	0.07	2.40	0.020	1	#DIV/0!
	Min.	3.7	97	7.6	95	0.06	2.00	0.020	1	0.00
	Max.	4.9	638	8.0	276	0.10	2.89	0.020	1	0.00

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	3/12/00

063344

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	2	1
TO	2000	2	29

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min—Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
LIMIT	UNIT	3.0 Minimum MG/L	1,800 Max. Lbs / Day	6.5—9.0 SU	2,100 Max. Lbs / Day	1.0 Avg. MG/L	MGD	0.036 Max. MG/L	1:Yes & 0: No	Max UG / L
1			114	7.7	95	0.06	2.28	0.020	1	
2		4.5	144	7.9	123		2.46		1	
3			175	8	153		2.62		1	
4							2.56		1	
5							2.23		1	
6				7.8	151		2.26		1	
7			155	7.7	174		2.32		1	
8			137	7.6	235	0.10	2.35	0.020	1	
9			97	7.5	195		2.34		1	
10		4.0	175	7.6	272		2.33		1	
11							2.28		1	
12							2.09		1	
13				7.6	250		2.00		1	
14			176	7.7	198		2.35		1	
15			186	7.8	165	0.06	2.48	0.020	1	
16			148	7.8	169		2.53		1	
17		3.7	119		178		2.37		1	
18							2.55		1	
19							2.22		1	
20				7.9	209		2.28		1	
21			152	7.8	261		2.61		1	
22			120	8.0	120	0.06	2.89	0.020	1	
23		4.9	133	7.7	155		2.66		1	
24			106	7.7	106		2.56		1	
25							2.43		1	
26							2.37		1	
27				7.8	156		2.08		1	
28			638	7.8	276		2.55		1	
29				7.8	213	0.06	2.55		1	
30										
31										
	TOTAL	17.1	2775	155.2	3852	0.34	69.60	0.080	29	0.00
	AVG.	4.3	173	7.8	183	0.07	2.40	0.020	1	#DIV/0!
	Min.	3.7	97	7.6	95	0.06	2.00	0.020	1	0.00
	Max.	4.9	638	8.0	276	0.10	2.89	0.020	1	0.00

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 3 years.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	3/12/00

063345

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC. *Km*  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	2	1
	2000	2	29

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
LIMIT	3.0 Minimum	1,800 Max.	6.5---9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max	
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L	
1			114	7.7	95	0.06	2.28	0.020	1	
2		4.5	144	7.9	123		2.46		1	
3			175	8	153		2.62		1	
4							2.56		1	
5							2.23		1	
6				7.8	151		2.26		1	
7			155	7.7	174		2.32		1	
8			137	7.6	235	0.10	2.35	0.020	1	
9			97	7.5	195		2.34		1	
10		4.0	175	7.6	272		2.33		1	
11							2.28		1	
12							2.09		1	
13				7.6	250		2.00		1	
14			176	7.7	196		2.35		1	
15			166	7.8	165	0.06	2.48	0.020	1	
16			148	7.8	169		2.53		1	
17		3.7	119		178		2.37		1	
18							2.55		1	
19							2.22		1	
20				7.9	209		2.28		1	
21			152	7.8	281		2.61		1	
22			120	8.0	120	0.06	2.89	0.020	1	
23		4.9	133	7.7	155		2.66		1	
24			106	7.7	106		2.56		1	
25							2.43		1	
26							2.37		1	
27				7.8	156		2.08		1	
28			638	7.8	276		2.55		1	
29				7.8	213	0.06	2.55		1	
30										
31										
	TOTAL	17.1	2775	155.2	3852	0.34	69.60	0.080	29	0.00
	AVG.	4.3	173	7.8	183	0.07	2.40	0.020	1	#DIV/0!
	Min.	3.7	97	7.5	95	0.06	2.00	0.020	1	0.00
	Max.	4.9	638	8.0	276	0.10	2.89	0.020	1	0.00

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	3/12/00

063346



~~Resubmitted Report~~

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PP  
063347

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.

*Km*

200 ALLEGAN STREET

PLAINWELL, MICHIGAN 49080

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	2	1
	2000	2	29

DAY	PAR #	00310100	00310120	00400100	00530120	00685100	5005100	50060102	84130100	01027100
	PARAMETER	Dissolved Oxygen	* BOD 5 - Day	pH Min—Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,800 Max.	6.5—9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L
1			114	7.7	95	0.08	2.28	0.020	1	
2		4.5	144	7.9	123		2.48		1	
3			175	8	153		2.82		1	
4							2.58		1	
5							2.23		1	
6				7.8	151		2.28		1	
7			155	7.7	174		2.32		1	
8			137	7.8	235	0.10	2.35	0.020	1	
9			97	7.5	185		2.34		1	
10		4.0	175	7.8	272		2.33		1	
11							2.28		1	
12							2.08		1	
13				7.8	250		2.00		1	
14			178	7.7	198		2.35		1	
15			188	7.8	185	0.08	2.48	0.020	1	
16			148	7.8	189		2.53		1	
17		3.7	119		178		2.37		1	
18							2.55		1	
19							2.22		1	
20				7.9	209		2.28		1	
21			152	7.8	281		2.61		1	
22			120	8.0	120	0.08	2.89	0.020	1	
23		4.9	133	7.7	155		2.66		1	
24			108	7.7	108		2.58		1	
25							2.43		1	
26							2.37		1	
27				7.8	158		2.08		1	
28			638	7.8	278		2.55		1	
29			957	7.8	213	0.08	2.55		1	
30										
31										
	TOTAL	17.1	2776 3122	155.2	3852	0.34	69.60	0.080	29	0.00
	AVG.	4.3	178 219	7.8	183	0.07	2.40	0.020	1	#DIV/0!
	Min.	3.7	97	7.5	95	0.08	2.00	0.020	1	0.00
	MAX	4.9	438 957	8.0	278	0.10	2.89	0.020	1	0.00

SURFACE WATER QUALITY

MAR 29 2000

PGS - Rec'd.

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	3/12/00

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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-78) (17-79)

Form Approved.  
OMB No. 2040-0004  
APR 1992 EDITION GSA GEN. REG. NO. 27

*Resubmitted Report*

PERMIT NUMBER: [ ] DISCHARGE NUMBER: [ ]

SURFACE WATER QUALITY

MAR 29 2000

063348

CITY: [ ]  
STATE: [ ]

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

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
[ ]		[ ]	[ ]	[ ]	3.7	[ ]	[ ]	[ ]	1/7	[ ]
[ ]		[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	DAILY	[ ]
OR 5-DAY		173	957	[ ]	[ ]	[ ]	[ ]	[ ]	4/7	[ ]
[ ]		1200	1800	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
[ ]		NO AVG	DAILY MK	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
[ ]		[ ]	[ ]	[ ]	7.5	[ ]	[ ]	[ ]	1/7	[ ]
[ ]		[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	DAILY	[ ]
[ ]		123	270	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
[ ]		1400	2100	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
[ ]		NO AVG	DAILY MK	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
[ ]		[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	1/7	[ ]
[ ]		[ ]	[ ]	[ ]	[ ]	1.0	[ ]	[ ]	DAILY	[ ]
[ ]		[ ]	[ ]	[ ]	[ ]	NO AVG	[ ]	[ ]	[ ]	[ ]
[ ]		2.40	2.50	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
[ ]		REPORT	REPORT	[ ]	[ ]	[ ]	[ ]	[ ]	DAILY	[ ]
[ ]		NO AVG	DAILY MK	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
[ ]		[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	1/7	[ ]
[ ]		[ ]	[ ]	[ ]	[ ]	0.015	[ ]	[ ]	DAILY	[ ]

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		
			AREA CODE	NUMBER	YEAR
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT [ ]				

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



**PlainwellPaper**

A century of craftsmanship.

Plainwell Paper Company  
200 Allegan Street  
Plainwell, Michigan 49080  
616.685.5851 Fax 616.685.2597

PCS-Data Entry  
MDEQ-SWQD  
PO Box 30273  
Lansing, MI 48909-7773

On our DMR report for February, the 2/29/00 result for BOD was omitted. There had been a problem with the testing procedure at KAR Lab and the final figure was not available when the form needed to be sent in. I called Fred Morley on the morning of 3/9/00 and explained the problem. This letter is to explain the final outcome of the difficulties for 2/29/00.

As you know our NPDES permit testing is now being provided by KAR Laboratories of Kalamazoo. Our normal BOD test results are in the 8-12 mg/l range. On 2/29/00 the dilutions for that day were set up in the normal range. When the test was completed it was evident that the normal range had been exceeded. We were informed of the problem and told that the mg/l would be in excess of 40mg/l. The test was rerun to determine what the range would be. It is understood that this test would be beyond the accepted time for holding a sample for this test.

When the results for the second test were obtained it was again evident that the incorrect dilutions were used. This time there was not enough sample used and very little oxygen was used. KAR Laboratories again set up a range for testing and informed us at its conclusion that the BOD range was likely in the 44-45 mg/l range.

Our NPDES limit for this parameter is 1,800/day. At the estimated mg/l of 45 for this day the BOD lbs./day would be 957 lbs. We therefore do not expect that any violation of permit limits occurred on this date.

Date Hill

Environmental Supervisor  
Plainwell Paper Company Inc.

SURFACE WATER QUALITY

MAR 29 2000

PCS - Rec'd

063349

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49083

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

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

410003790  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SUBR PP)  
 P - FINAL  
 005/TRETD PROC WASTE/NONCONTA

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49083

OWNER: SHAJA HAJMUDDIN

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	03	31	00	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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
WYSEN, DISSOLVED (DJ) 00300 L 0 0 EFFLUENT GROSS VALUE	*****	*****			4.0	*****	*****	( 19)	0	1/7	grab
PERMIT REQUIREMENT	*****	*****	***	***							
100, 5-DAY (20 DB5, C) 00310 L 2 0 EFFLUENT GROSS VALUE	*****	221	514	( 26)	*****	*****	*****		0	4/7	24hc
PERMIT REQUIREMENT	*****	NO AV		LBS/DY							
PH	*****	*****			7.6	*****	*****	( 12)	0	5/7	grab
PERMIT REQUIREMENT	*****	*****	***	***							
SOLIDS, TOTAL SUSPENDED 00530 L 2 0 EFFLUENT GROSS VALUE	*****	181	311	( 26)	*****	*****	*****		0	5/7	24hc
PERMIT REQUIREMENT	*****	NO AV		LBS/DY							
PHOSPHORUS, TOTAL (AS P) 00565 L 0 0 EFFLUENT GROSS VALUE	*****	*****			*****	0.07	*****	( 19)	0	1/7	24hc
PERMIT REQUIREMENT	*****	*****	***	***							
CADMIUM, TOTAL (AS CD) 01027 L 0 0 EFFLUENT GROSS VALUE	*****	*****			*****	*****	< 0.2	( 28)	0	1/90	24hc
PERMIT REQUIREMENT	*****	*****	***	***							
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT 00050 L 0 0 EFFLUENT GROSS VALUE	*****	2.46	3.00	( 03)	*****	*****	*****		0	contin. flow	
PERMIT REQUIREMENT	*****	NO AV		MGD							

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert P. Tradler  
 Mill 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. (Permittees under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

*R. Tradler*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
616	685-5851	00	04	10
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITORING QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

Surface Water  
 APR 11 2000

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

PLAINEWELL PAPER CO  
 100 ALLEGAN STREET  
 PLAINEWELL MI 49093

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

410003720  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SUBR PP)  
 FINAL

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

FACILITY LOCATION  
 PLAINEWELL PAPER CO.  
 PLAINEWELL MI 49093

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	03	01	00	03	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

005/TREATED PROC WASTE/NONCONTA

\*\*\* NO DISCHARGE \*\*\*  
 NOTE: Read Instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58-59)	MINIMUM (60-61)	AVERAGE (62-63)	MAXIMUM (64-65)				UNITS (66-67)
ARSENIC, DISSOLVED (00)	PERMIT REQUIREMENT	*****	*****	***	4.0	*****	*****	( 19)	0	1/7	gral
ARSENIC, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 26)	0	4/7	24hr
BARIUM, DISSOLVED (01)	PERMIT REQUIREMENT	*****	*****	***	7.6	*****	*****	( 12)	0	5/7	gral
BARIUM, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 26)	0	5/7	24hr
BOD, 5-DAY (02)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
BOD, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 28)	0	1/90	24hr
CADMIUM, DISSOLVED (03)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 03)	0	Contn.	flow
CADMIUM, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
COPPER, DISSOLVED (04)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
COPPER, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
COD, IN CONDUIT OR TREATMENT PLANT (05)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
COD, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
CHLORIDE, TOTAL (AS CL) (06)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
CHROMIUM, TOTAL (AS CR) (07)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
CYANIDE, TOTAL (AS CN) (08)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
FLUORIDE, TOTAL (AS F) (09)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
IRON, TOTAL (AS FE) (10)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
LEAD, DISSOLVED (11)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
LEAD, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
MANGANESE, DISSOLVED (12)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
MANGANESE, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
NITRATE, DISSOLVED (13)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
NITRATE, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
NITRITE, DISSOLVED (14)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
NITRITE, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
PHOSPHORUS, DISSOLVED (15)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
PHOSPHORUS, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
SILICA, DISSOLVED (16)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
SILICA, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
SODIUM, DISSOLVED (17)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
SODIUM, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
ZINC, DISSOLVED (18)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr
ZINC, TOTAL (20 DES. C)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 19)	0	1/7	24hr

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL

MI 49089

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL

MI 49089

ATTN: SHAJA NATHUDDIN *X*

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

410003794  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR  
 (SUBR PP)  
 P - FINAL

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

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	03	01	00	03	31	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

005/TRETD PROC WASTE/NONCONTA

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)			
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS						
CHLORINE, TOTAL RESIDUAL 0000 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****			0	1/7	grab			
	PERMIT REQUIREMENT			***										
OUTFALL OBSERVATION, VISUAL, Y/Y RESPONSE 0110 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1	*****	( 94)	*****	*****	*****		0	contin	visual			
	PERMIT REQUIREMENT			BS=1 MO=0										
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT 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					
Robert J. Tranter Mill Manager								SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			616 685-5851	00	04	10
TYPED OR PRINTED								DATE OF MONITOR QUARTERLY			MO	DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITORING- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

APR 11 2000

063352

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

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

910003794  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR  
 (SUBR PP)  
 P - FINAL

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-88

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	03	01	00	03	31	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

005/TRETD PROC WASTE/NONCONTA

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

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
RESIDUAL EFFLUENT GROSS VALUE	*****	*****			*****	*****			0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***							
WIPALL OBSERVATION, VISUAL, Y/N RESPONSE	1	*****	( 94)		*****	*****	*****		0	contin	visual
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			ES=1 N(1)=0							
	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  
 Robert S. ...  
 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  
 616 685-5851 00 04 10  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITORING MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	3	1
TO	2000	3	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
LIMIT	UNIT	3.0 Minimum MG/L	1,800 Max. Lbs / Day	6.5---9.0 SU	2,100 Max. Lbs / Day	1.0 Avg. MG/L	MGD	0.036 Max. MG/L	1:Yes & 0: No	Max UG / L
1		5.0	204	7.8	143		2.45	0.020	1	
2			514	8.0	238		2.57		1	
3							2.47		1	
4							2.22		1	
5				7.7	290		2.05		1	
6			233	7.7	311		2.33		1	
7			232	7.7	211	0.08	2.53		1	
8			263	8.0	242		2.42	0.020	1	
9		4.4	239	7.8	108		2.60		1	
10							2.54		1	
11							2.01		1	
12				8.0	153		2.04		1	
13			148	7.7	212		2.54		1	
14			145	7.6	145	0.03	2.48		1	≤ 0.2
15		4.0	180	7.7	112		2.69	0.020	1	
16			450	7.6	300		3.00		1	
17							2.70		1	
18							1.97		1	
19				7.7	98		1.96		1	
20			116		116		2.32		1	
21			197	7.6	219	0.08	2.62		1	
22			248	8.0	180		2.70	0.020	1	
23		5.2	230	7.6	115		2.76		1	
24							2.93		1	
25							2.16		1	
26				8.0	89		2.13		1	
27			139	7.9	209		2.78		1	
28			129	8.0	150	0.07	2.57		1	
29			156	8.0	156		2.34	0.020	1	
30		4.9	153	8.1	178		2.62		1	
31							2.80		1	
	TOTAL	23.5	3976	164.2	3973	0.26	76.30	0.100	31	0.20
	AVG.	4.7	221	7.8	181	0.07	2.46	0.020	1	0.20
	Min.	4.0	116	7.6	89	0.03	1.96	0.020	1	0.20
	Max.	5.2	514	8.1	311	0.08	3.00	0.020	1	0.20

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	4/7/2000

063354



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	3	1
TO	2000	3	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT UNIT	3.0 Minimum MG/L	1,800 Max. Lbs / Day	6.5--9.0 SU	2,100 Max. Lbs / Day	1.0 Avg. MG/L	MGD	0.036 Max. MG/L	1: Yes & 0: No	Max UG / L
1		5.0	204	7.8	143		2.45	0.020	1	
2			514	8.0	238		2.57		1	
3							2.47		1	
4							2.22		1	
5				7.7	290		2.05		1	
6			233	7.7	311		2.33		1	
7			232	7.7	211	0.08	2.53		1	
8			263	8.0	242		2.42	0.020	1	
9	4.4		239	7.8	108		2.60		1	
10							2.54		1	
11							2.01		1	
12				8.0	153		2.04		1	
13			148	7.7	212		2.54		1	
14			145	7.6	145	0.03	2.48		1	< 0.2
15	4.0		180	7.7	112		2.69	0.020	1	
16			450	7.8	300		3.00		1	
17							2.70		1	
18							1.97		1	
19				7.7	98		1.96		1	
20			116		118		2.32		1	
21			197	7.8	219	0.08	2.62		1	
22			248	8.0	180		2.70	0.020	1	
23	5.2		230	7.6	115		2.76		1	
24							2.93		1	
25							2.16		1	
26				8.0	89		2.13		1	
27			139	7.9	209		2.78		1	
28			129	8.0	150	0.07	2.57		1	
29			156	8.0	156		2.34	0.020	1	
30	4.9		153	8.1	178		2.62		1	
31							2.80		1	
	TOTAL	23.5	3976	164.2	3973	0.28	76.30	0.100	31	0.20
	AVG.	4.7	221	7.8	181	0.07	2.46	0.020	1	0.20
	Min.	4.0	116	7.8	89	0.03	1.96	0.020	1	0.20
	Max.	5.2	514	8.1	311	0.08	3.00	0.020	1	0.20

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	4/7/00

063355

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	3	1
	2000	3	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min—Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
LIMIT	UNIT	3.0 Minimum MG/L	1,800 Max. Lbs / Day	6.5—9.0 SU	2,100 Max. Lbs / Day	1.0 Avg. MG/L	MGD	0.036 Max. MG/L	1:Yes & 0: No	Max UG / L
1		5.0	204	7.8	143		2.45	0.020	1	
2			514	8.0	236		2.57		1	
3							2.47		1	
4							2.22		1	
5				7.7	290		2.05		1	
6			233	7.7	311		2.33		1	
7			232	7.7	211	0.08	2.53		1	
8			263	8.0	242		2.42	0.020	1	
9		4.4	239	7.8	108		2.60		1	
10							2.54		1	
11							2.01		1	
12				8.0	153		2.04		1	
13			148	7.7	212		2.54		1	
14			145	7.8	145	0.03	2.48		1	< 0.2
15		4.0	180	7.7	112		2.69	0.020	1	
16			450	7.8	300		3.00		1	
17							2.70		1	
18							1.97		1	
19				7.7	98		1.96		1	
20			116		116		2.32		1	
21			197	7.6	219	0.08	2.62		1	
22			248	8.0	180		2.70	0.020	1	
23		5.2	230	7.8	115		2.76		1	
24							2.93		1	
25							2.16		1	
26				8.0	89		2.13		1	
27			139	7.9	209		2.78		1	
28			129	8.0	150	0.07	2.57		1	
29			156	8.0	156		2.34	0.020	1	
30		4.9	153	8.1	178		2.62		1	
31							2.80		1	
	TOTAL	23.5	3976	164.2	3973	0.26	76.30	0.100	31	0.20
	AVG.	4.7	221	7.8	181	0.07	2.48	0.020	1	0.20
	Min.	4.0	116	7.6	89	0.03	1.96	0.020	1	0.20
	Max.	5.2	514	8.1	311	0.08	3.00	0.020	1	0.20

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	4/7/00

063356

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

PLAINWELL PAPER CO. OH  
 200 ALLEGAN STREET  
 PLAINWELL MI 49083

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

410003794  
 PERMIT NUMBER  
 005 A  
 DISCHARGE NUMBER

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

MAJOR (SUBR PP)  
 P - PINAL  
 005/TREATED PROC WASTE/NONCONTA

CITY PLAINWELL PAPER CO.  
 PLAINWELL MI 49083  
 PH: KHAJA NAIMUDDIN

MONITORING PERIOD  
 YEAR MO DAY YEAR MO DAY  
 FROM 00 04 01 TO 00 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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	4.0	*****	*****	0	1/7	grab
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	0	4/7	24hc
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	7.2	*****	8.5	0	5/7	grab
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	0	5/7	24hc
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	0.07	*****	0	1/7	24hc
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	0	contin flow	
0000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	0.02	0	1/7	grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Robert D Bradsher Mill 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.)	TELEPHONE 616 685-5851	DATE 00 05 09
	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT Robert D Bradsher	AREA CODE 616	NUMBER 685-5851

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 200104- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

Surface Water Quality

MAY 11 2000

063357

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

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

PERMIT NUMBER 410003794  
 DISCHARGE NUMBER 0054

MAJOR (SUBR PP)  
 P - FINAL  
 005/TREATED PROC WASTE/NONCONTA

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

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49081  
 EPN: THAIA WAKHIDDEN

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
90	04	01	90	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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58-59)	MINIMUM (38-39)	AVERAGE (40-41)	MAXIMUM (42-43)	UNITS (44-45)			
00700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		4.0	*****	*****	( 19)	0	1/7	grab
00800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	4/7	24hc
00900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		7.2	*****	8.5	( 12)	0	5/7	grab
01000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	5/7	24hc
01100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
01900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
02900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
03900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
04900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
05900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
06900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
07900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
08900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09200 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09500 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09700 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09800 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
09900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc
10000 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	*****		0	1/7	24hc

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49093

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

410003794  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SUBR PP)  
 P - FINAL  
 005/TRETED PROC WASTE/NONCONTA

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

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49093

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	04	01	00	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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (48-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-43)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-55)	MAXIMUM (56-57)	UNITS (58-59)	MINIMUM (39-40)	AVERAGE (41-42)	MAXIMUM (43-44)			
WTFALL OBSERVATION, VISUAL, T/N RESPONSE	1		*****	( 94)	*****	*****	*****	0	cont	visual
WATER GROSS VALUE	PERMIT REQUIREMENT			25=1 10=0						
	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  
 Robert D. Bradsher  
 Mill 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.)

Robert D. Bradsher  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE  
 616 1685-5851 00 05 00  
 AREA NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 ADMITUM- MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

063359

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49093

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-78) (17-78)

410003794 PERMIT NUMBER  
 0054 DISCHARGE NUMBER

MAJOR (SRR PP)  
 P - FINAL  
 005/TREATED PROC WASTE/NONCONTA  
 Form Approved. OMB No. 2040-0004  
 Approval expires 05-31-88

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49093  
 TYPE: GRAVEYARD

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	04	01	00	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)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DIPWELL OBSERVATION, VISUAL, T/W RESPONSE	1		*****	( 94)	*****	*****	*****		0	cont	visua
FREQUENT CROSS VALU	PERMIT REQUIREMENT			ES=1 MO=0							
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT 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		
Robert D. C... Mill Manager TYPED OR PRINTED		Robert D. C... SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	616 685-5851 AREA CODE NUMBER	00	05

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

063360

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080  
Summer ( 5/1-9/30 )

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	4	1
	2000	4	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L			
1							2.25		1	
2				8.3	138		2.08		1	
3			217.0	7.7	260		2.60		1	
4			287	8.0	287	0.10	2.87	0.020	1	
5		4.0	619	7.5	197		3.37		1	
6			277	7.7	328		3.02		1	
7							3.07		1	
8							2.29		1	
9				8.5	212		2.32		1	
10			196	7.8	275		2.35		1	
11			201	8.0	261	0.08	2.41		1	
12		5.2	261	7.5	209		3.13		1	
13			231	7.2	139		2.77	0.020	1	
14							2.74		1	
15							2.45		1	
16				8.2	167		2.22		1	
17			208	7.9	185		2.77		1	
18			198	8.1	124	0.06	2.96	0.020	1	
19			268	7.5	112		2.68		1	
20		5.4	110	7.6	132		2.64		1	
21							2.68		1	
22							1.99		1	
23				7.9	100		2.00		1	
24			202	7.6	202		3.03		1	
25			131	7.8	131	0.05	2.61	0.020	1	
26		4.2	127	8.0	127		2.53		1	
27			150	7.4	129		2.57		1	
28							2.76		1	
29							2.51		1	
30				7.8	142		2.43		1	
31										
	TOTAL	18.8	3683	164.0	3857	0.29	78.10	0.080	30	0
	AVG.	4.7	230	7.8	184	0.07	2.60	0.020	1	#DIV/0!
	Min.	4.0	110	7.2	100	0.05	1.99	0.020	1	0.0
	Max.	5.4	619	8.5	328	0.10	3.37	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	Robert D Bradsher II	5/10/00

0633361

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.

200 ALLEGAN STREET

PLAINWELL, MICHIGAN 49080

Summer ( 5/1-9/30 )

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	4	1
	2000	4	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min---Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	ug / L
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L			
1							2.25		1	
2				8.3	138		2.08		1	
3			217.0	7.7	260		2.60		1	
4			287	8.0	287	0.10	2.87	0.020	1	
5		4.0	619	7.5	197		3.37		1	
6			277	7.7	328		3.02		1	
7							3.07		1	
8							2.29		1	
9				8.5	212		2.32		1	
10			196	7.8	275		2.35		1	
11			201	8.0	281	0.08	2.41		1	
12		5.2	281	7.5	209		3.13		1	
13			231	7.2	139		2.77	0.020	1	
14							2.74		1	
15							2.45		1	
16				8.2	167		2.22		1	
17			208	7.9	185		2.77		1	
18			198	8.1	124	0.06	2.96	0.020	1	
19			268	7.5	112		2.68		1	
20		5.4	110	7.6	132		2.64		1	
21							2.68		1	
22							1.99		1	
23				7.9	100		2.00		1	
24			202	7.6	202		3.03		1	
25			131	7.8	131	0.05	2.61	0.020	1	
26		4.2	127	8.0	127		2.53		1	
27			150	7.4	129		2.57		1	
28							2.76		1	
29							2.51		1	
30				7.8	142		2.43		1	
31										
	<b>TOTAL</b>	18.8	3683	164.0	3857	0.29	78.10	0.080	30	0
	<b>AVG.</b>	4.7	230	7.8	184	0.07	2.60	0.020	1	#DIV/0!
	<b>Min.</b>	4.0	110	7.2	100	0.05	1.99	0.020	1	0.0
	<b>Max.</b>	5.4	619	8.5	328	0.10	3.37	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	Robert D Bradsher TT	5/10/00

0633362



224

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
**DAILY DISCHARGE MONITORING REPORT**

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080  
 Summer ( 5/1-9/30 )

REPORTING PERIOD		
YEAR	MONTH	DAY
2000	4	1
2000	4	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min---Max .	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L			
1							2.25		1	
2				8.3	138		2.08		1	
3			217.0	7.7	260		2.60		1	
4			287	8.0	287	0.10	2.87	0.020	1	
5	4.0		619	7.5	197		3.37		1	
6			277	7.7	328		3.02		1	
7							3.07		1	
8							2.29		1	
9				8.5	212		2.32		1	
10			196	7.8	275		2.35		1	
11			201	8.0	281	0.08	2.41		1	
12	5.2		261	7.5	209		3.13		1	
13			231	7.2	139		2.77	0.020	1	
14							2.74		1	
15							2.45		1	
16				8.2	167		2.22		1	
17			208	7.9	185		2.77		1	
18			198	8.1	124	0.06	2.96	0.020	1	
19			268	7.5	112		2.68		1	
20	5.4		110	7.6	132		2.64		1	
21							2.68		1	
22							1.99		1	
23				7.9	100		2.00		1	
24			202	7.6	202		3.03		1	
25			131	7.8	131	0.05	2.61	0.020	1	
26	4.2		127	8.0	127		2.53		1	
27			150	7.4	129		2.57		1	
28							2.76		1	
29							2.51		1	
30				7.8	142		2.43		1	
31										
	<b>TOTAL</b>	18.8	3683	164.0	3857	0.29	78.10	0.080	30	0
	<b>AVG.</b>	4.7	230	7.8	184	0.07	2.60	0.020	1	#DIV/0!
	<b>Min.</b>	4.0	110	7.2	100	0.05	1.99	0.020	1	0.0
	<b>Max.</b>	5.4	619	8.5	328	0.10	3.37	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	Robert D Bradsher	5/10/00

063363

204

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
**DAILY DISCHARGE MONITORING REPORT**

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080  
 Summer ( 5/1-9/30 )

REPORTING PERIOD		
YEAR	MONTH	DAY
2000	4	1
2000	4	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L			
1							2.25		1	
2				8.3	138		2.08		1	
3			217.0	7.7	260		2.60		1	
4			287	8.0	287	0.10	2.87	0.020	1	
5	4.0		619	7.5	197		3.37		1	
6			277	7.7	328		3.02		1	
7							3.07		1	
8							2.29		1	
9				8.5	212		2.32		1	
10			198	7.8	275		2.35		1	
11			201	8.0	281	0.08	2.41		1	
12	5.2		261	7.5	209		3.13		1	
13			231	7.2	139		2.77	0.020	1	
14							2.74		1	
15							2.45		1	
16				8.2	167		2.22		1	
17			208	7.9	185		2.77		1	
18			198	8.1	124	0.06	2.96	0.020	1	
19			268	7.5	112		2.68		1	
20	5.4		110	7.6	132		2.64		1	
21							2.68		1	
22							1.99		1	
23				7.9	100		2.00		1	
24			202	7.6	202		3.03		1	
25			131	7.8	131	0.05	2.61	0.020	1	
26	4.2		127	8.0	127		2.53		1	
27			150	7.4	129		2.57		1	
28							2.76		1	
29							2.51		1	
30				7.8	142		2.43		1	
31										
	<b>TOTAL</b>	18.8	3683	164.0	3857	0.29	78.10	0.080	30	0
	<b>AVG.</b>	4.7	230	7.8	184	0.07	2.60	0.020	1	#DIV/0!
	<b>Min.</b>	4.0	110	7.2	100	0.05	1.99	0.020	1	0.0
	<b>Max.</b>	5.4	619	8.5	328	0.10	3.37	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	Robert D. Bradsher II	5/10/00

063364

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

NAME PLAINFELL PAPER CO  
ADDRESS 200 ALLEGAN STREET  
PLAINFELL MI 49080

CITY PLAINFELL PAPER CO.  
LOCATION PLAINFELL MI 49080

OFFICER: SHAHA NAJBUDDIN

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

MI 0003794 PERMIT NUMBER  
005 DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	06	01	TO	00	06 30

MAJOR (SDBR PP)  
F - FINAL  
005/PRETED PROC WASTE/NONCONTA

SURFACE WATER QUALITY  
FORM APPROVED  
EPA 823-B-89-004

JUL 11 2000

PCS - Rec'd.

\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read Instructions before completing this form.

063365

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
COBALT, DISSOLVED (D)	0300 L 0 0	*****	*****		4.0	*****	*****	( 19)	0	1/7	Grat
PERMIT REQUIREMENT		*****	*****	***	*****	*****	*****	MG/L		WEEKLY GRAB	
FLUORIDE GROSS VALUE	00, 5-DAY (20 DEG. C)	*****	411	( 26)	*****	*****	*****		0	4/7	24hc
PERMIT REQUIREMENT		*****	*****	LBS/DY	*****	*****	*****			FOUR WEEK	COMP 20
PHOSPHORUS, TOTAL	0100 L 0 0	*****	*****		7.4	*****	8.0	( 12)	0	5/7	Grat
PERMIT REQUIREMENT		*****	*****	***	*****	*****	*****	50		WEEKLY GRAB	
FLUORIDE GROSS VALUE	0530 L 1 0	*****	320	( 26)	*****	*****	*****		0	5/7	24hc
PERMIT REQUIREMENT		*****	*****	LBS/DY	*****	*****	*****			WEEKLY COMP 20 DAYS	
PHOSPHORUS, TOTAL (AS P)	0300 L 0 0	*****	*****		*****	0.07	*****	( 19)	0	1/7	24hc
PERMIT REQUIREMENT		*****	*****	***	*****	1.0	*****	MG/L		WEEKLY GRAB	
FLUORIDE GROSS VALUE	00100 L 0 0	*****	*****		*****	*****	<0.2	( 28)	0	1/90	24hc
PERMIT REQUIREMENT		*****	*****	***	*****	*****	REPORT DAILY MX	UG/L		DAILY COMP 20	
AMMONIA, TOTAL (AS ND)	0050 L 0 0	*****	2.45	( 03)	*****	*****	*****		0	contin flow	
PERMIT REQUIREMENT		*****	*****	***	*****	*****	*****			DAILY COMP 20	
FLUORIDE GROSS VALUE	0050 L 0 0	*****	*****		*****	*****	*****			DAILY COMP 20	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Robert D. Bradsher  
Mill Manager  
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*R. Bradsher*

TELEPHONE 616 685-5851  
DATE 00 07 10  
AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
ADDITION - MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

PLAINWELL PAPER CO  
200 ALLGREN STREET  
PLAINWELL MI 49080

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

MI 0003794 PERMIT NUMBER  
005 A DISCHARGE NUMBER

MAJOR (SJR PP) F - FINAL  
005/TRETD PROC WASTE/NONCONTA  
SURFACE WATER QUALITY OMB No. 2040-0004  
JUL 11 2000 CS-Recd.

CITY PLAINWELL PAPER CO.  
CATION PLAINWELL MI 49080

MONITORING PERIOD  
YEAR MO DAY TO YEAR MO DAY  
FROM 00 06 01 TO 00 06 30

NO DISCHARGE NOTE: Read instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.02	( 19)	0	1/7	Grat.
PLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L		WEEKLY	GRAB
ITPALL OBSERVATION, USUAL, Y/N RESPONSE	SAMPLE MEASUREMENT	1	*****	( 94)	*****	*****	*****		0	contin	visua
PLUENT GROSS VALUE	PERMIT REQUIREMENT			YES=1 NO=0						DAILY	VISUAL
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Robert D. Eradsher  
Mill Manager  
TYPED OR PRINTED

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

*A. Buller*  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 516 685-5851  
DATE 00 07 10  
AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
VIOLATION- MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

ME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

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

Form Approved.  
 OMB No. 2040-0004

MI0003794  
 PERMIT NUMBER

005  
 DISCHARGE NUMBER

MAJOR (SUDR PP)  
 P - FINAL  
 005/PRETRD PROC WASTE/NONCONTA

CITY PLAINWELL PAPER CO.  
 LOCATION PLAINWELL MI 49080

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	06	01	TO	00	06	30

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

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
1388N, DISSOLVED (D)	SAMPLE MEASUREMENT	*****	*****		4.0	*****	*****	( 19)	0	1/7	Grab
0300 L 0 0	PERMIT REQUIREMENT	*****	*****	***	DISPER	*****	*****	MG/L	0	WEEKLY	GRAB
0300 GROSS VALUE											
00, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	411	( 26)	*****	*****	*****		0	4/7	24hc
0310 L 1 0	PERMIT REQUIREMENT	*****	1200	DAILY EX	*****	*****	*****	***	0	FOUR/	COMP24
0310 GROSS VALUE				LBS/DY				***		WEEK	
1	SAMPLE MEASUREMENT	*****	*****		7.4	*****	8.0	( 12)	0	5/7	Grab
0100 L 0 0	PERMIT REQUIREMENT	*****	*****	***	DAI	*****	*****	DAI	0	WEEKLY	GRAB
0100 GROSS VALUE				***				50			
0105, TOTAL	SAMPLE MEASUREMENT	*****	320	( 26)	*****	*****	*****		0	5/7	24hc
0530 L 1 0	PERMIT REQUIREMENT	*****	*****	DAILY EX	*****	*****	*****	***	0	WEEK	COMP24
0530 GROSS VALUE				LPS/DY				***		DAYS	
0530PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****		*****	0.07	*****	( 19)	0	1/7	24hc
0555 L 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	1.0	*****	***	0	WEEKLY	GRAB
0555 GROSS VALUE				***	*****	NO AVG	*****	MG/L			
0610PHOSPHORUS, TOTAL (AS CD)	SAMPLE MEASUREMENT	*****	*****		*****	*****	<0.2	( 28)	0	1/90	24hc
1027 L 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	REPORT	***	0	DAILY	COMP24
1027 GROSS VALUE				***	*****	*****	DAILY EX	MG/L			
104, BY SINKHET OR	SAMPLE MEASUREMENT	2.45	2.93	( 03)	*****	*****	*****		0	contirflow	
0050 L 0 0	PERMIT REQUIREMENT	REPORT	REPORT	***	*****	*****	*****	***	0	DAILY	COMPLO
0050 GROSS VALUE		NO AVG	DAILY EX	MGD				***			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert D. Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

*R. Bradsher*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 616 685-5851  
 DATE 00 07 10  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 ADHUM- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

063367

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

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

Form Approved.  
 OMB No. 2040-0004

MI0003790 PERMIT NUMBER  
 005 a DISCHARGE NUMBER

MAJOR (SJOR PP)  
 F - FINAL  
 005/TREATED PROC WASTE/NONCONTA

CITY PLAINWELL PAPER CO.  
 LOCATION PLAINWELL MI 49080

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	06	01	TO	00	06	30

NO DISCHARGE  
 NOTE: Read instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.02	( 19)	0	1/7	Grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	ES=1 NO=0	*****	*****	*****	MG/L		WEEKLY	GRAB
DIPNALL OBSERVATION, USUAL, Y/M RESPONSE	SAMPLE MEASUREMENT	1	*****	( 94)	*****	*****	*****		0	contin	visua
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	ES=1 NO=0	*****	*****	*****			DAILY	VISUAL
	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  
 Robert C. Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

*A. Bradsher*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 516 685-5851  
 DATE 00 07 10  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

063368

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080  
Summer ( 5/1-9/30 )

DAILY DISCHARGE MONITORING REPORT

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	6	1
TO	2000	6	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARAMETER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5--9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1		4.7	174	7.8	251		2.32		1	
2							2.26		1	
3							2.11		1	
4					295		2.08		1	
5			144		207		2.48		1	
6			285	7.4	219	0.08	2.63	0.020	1	0.2
7		4.0	411	7.7	268		2.90		1	
8			97	7.8	97		2.93		1	
9							2.71		1	
10							2.13		1	
11				7.8	128		2.16		1	
12			234	7.6	320		2.56		1	
13			364	7.6	159	0.06	2.73	0.020	1	
14			334	7.6	267		2.67		1	
15		5.1	372	7.5	262		2.62		1	
16							2.88		1	
17							1.77		1	
18				8.0	62		1.85		1	
19			205	7.6	138		2.73		1	
20			193	7.7	169	0.06	2.89	0.020	1	
21			275	7.5	275		2.75		1	
22		4.2	206	7.7	206		2.74		1	
23							2.18		1	
24							2.00		1	
25				8.0	128		1.88		1	
26			137	7.7	78		1.82		1	
27			198	7.6	110	0.06	2.64	0.020	1	
28		5.3	228	7.9	183		2.74		1	
29			225	7.8	135		2.70		1	
30							2.57			
31										
	TOTAL	23.3	4082	146.3	3947	0.26	73.43	0.080	29	0
	AVG.	4.7	240	7.7	188	0.07	2.45	0.020	1	0
	Min.	4.0	97	7.4	62	0.06	1.77	0.020	1	0.2
	Max.	5.3	411	8.0	320	0.08	2.93	0.020	1	0.2

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 or between 6 months and 5 years.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. D. Bradsher</i>	7/10/00

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC. *LM*  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080  
Summer ( 5/1-9/30 )

DAILY DISCHARGE MONITORING REPORT

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	6	1
TO	2000	6	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
UNIT	PARAMETER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L	MG/L	1:Yes & 0: No	UG / L	
1		4.7	174	7.8	251		2.32		1	
2							2.26		1	
3							2.11		1	
4					285		2.08		1	
5			144		207		2.48		1	
6			285	7.4	219	0.08	2.63	0.020	1	0.2
7		4.0	411	7.7	266		2.90		1	
8			97	7.8	97		2.93		1	
9							2.71		1	
10							2.13		1	
11				7.8	126		2.16		1	
12			234	7.6	320		2.56		1	
13			364	7.6	159	0.06	2.73	0.020	1	
14			334	7.6	267		2.67		1	
15		5.1	372	7.5	262		2.62		1	
16							2.88		1	
17							1.77		1	
18				8.0	62		1.85		1	
19			205	7.6	136		2.73		1	
20			193	7.7	169	0.06	2.89	0.020	1	
21			275	7.5	275		2.75		1	
22		4.2	206	7.7	206		2.74		1	
23							2.18		1	
24							2.00		1	
25				8.0	126		1.88		1	
26			137	7.7	76		1.82		1	
27			198	7.6	110	0.06	2.64	0.020	1	
28		5.3	228	7.9	183		2.74		1	
29			225	7.8	135		2.70		1	
30							2.57			
31										
	TOTAL	23.3	4082	146.3	3947	0.26	73.43	0.080	29	0
	AVG.	4.7	240	7.7	188	0.07	2.45	0.020	1	0
	Min.	4.0	97	7.4	62	0.06	1.77	0.020	1	0.2
	Max.	5.3	411	8.0	320	0.08	2.93	0.020	1	0.2

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	7/10/00

0633370



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080  
Summer ( 5/1-9/30 )

DAILY DISCHARGE MONITORING REPORT

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	6	1
	2000	6	30

DAY	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L
1		4.7	174	7.8	251		2.32		1	
2							2.26		1	
3							2.11		1	
4					295		2.08		1	
5			144		207		2.48		1	
6			285	7.4	219	0.08	2.63	0.020	1	0.2
7		4.0	411	7.7	266		2.90		1	
8			97	7.8	97		2.93		1	
9							2.71		1	
10							2.13		1	
11				7.8	126		2.16		1	
12			234	7.6	320		2.56		1	
13			364	7.6	159	0.06	2.73	0.020	1	
14			334	7.6	267		2.67		1	
15		5.1	372	7.5	262		2.62		1	
16							2.88		1	
17							1.77		1	
18				8.0	62		1.85		1	
19			205	7.6	136		2.73		1	
20			193	7.7	169	0.06	2.89	0.020	1	
21			275	7.5	275		2.75		1	
22		4.2	206	7.7	206		2.74		1	
23							2.18		1	
24							2.00		1	
25				8.0	126		1.88		1	
26			137	7.7	78		1.82		1	
27			198	7.6	110	0.06	2.64	0.020	1	
28		5.3	228	7.9	183		2.74		1	
29			225	7.8	135		2.70		1	
30							2.57			
31										
	TOTAL	23.3	4082	146.3	3947	0.26	73.43	0.080	29	0
	AVG.	4.7	240	7.7	188	0.07	2.45	0.020	1	0
	Mln.	4.0	97	7.4	62	0.06	1.77	0.020	1	0.2
	Max.	5.3	411	8.0	320	0.08	2.93	0.020	1	0.2

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	7/10/00

0633371

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080  
Summer ( 5/1-9/30 )

DAILY DISCHARGE MONITORING REPORT

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	6	1
TO	2000	6	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
UNIT	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
MG/L	LIMIT	3.0 Minimum	1,200 Max.	6.5--9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
MG/L	MG/L	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1		4.7	174	7.8	251		2.32		1	
2							2.26		1	
3							2.11		1	
4					295		2.08		1	
5			144		207		2.48		1	
6			285	7.4	219	0.08	2.63	0.020	1	0.2
7		4.0	411	7.7	268		2.90		1	
8			97	7.8	97		2.93		1	
9							2.71		1	
10							2.13		1	
11				7.8	128		2.16		1	
12			234	7.6	320		2.56		1	
13			364	7.6	159	0.06	2.73	0.020	1	
14			334	7.6	287		2.67		1	
15		5.1	372	7.5	262		2.62		1	
16							2.88		1	
17							1.77		1	
18				8.0	62		1.85		1	
19			205	7.6	138		2.73		1	
20			193	7.7	169	0.06	2.89	0.020	1	
21			275	7.5	275		2.75		1	
22		4.2	206	7.7	208		2.74		1	
23							2.18		1	
24							2.00		1	
25				8.0	128		1.88		1	
26			137	7.7	76		1.82		1	
27			198	7.6	110	0.06	2.64	0.020	1	
28		5.3	228	7.9	183		2.74		1	
29			225	7.8	135		2.70		1	
30							2.57			
31										
TOTAL		23.3	4082	146.3	3947	0.26	73.43	0.080	29	0
AVG.		4.7	240	7.7	188	0.07	2.45	0.020	1	0
Min.		4.0	97	7.4	62	0.06	1.77	0.020	1	0.2
Max.		5.3	411	8.0	320	0.08	2.93	0.020	1	0.2

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>R. Bradsher</i>	7/10/00

0633372

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

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

10003724  
 PERMIT NUMBER

005-A  
 DISCHARGE NUMBER

SURFACE WATER QUALITY  
 OMB No. 2040-0004

AUG 11 2000

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080  
 TEB: BHAJA NAIKODIA KM

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

MAJOR (SUBR PP)  
 F - FINAL  
 005/TREATED PROG WASTE/NONCONT  
 PCS - Rec'd.

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

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, DISSOLVED (DB) 0000 1 0 0 EFFLUENT GROSS VALUE		*****	*****		4.6	*****	*****	( 19)	0	1/7	grab
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT		***							
COD, 5-DAY (20 DEG. C) 0010 1 1 0 EFFLUENT GROSS VALUE		*****	351	( 26)	*****	*****	*****		0	4/7	24hc
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT		***							
PH		*****	*****		7.4	*****	8.1	( 12)	0	1/7	grab
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT		***							
SOLIDS, TOTAL SUSPENDED 0030 1 1 0 EFFLUENT GROSS VALUE		*****	373	( 26)	*****	*****	*****		0	5/7	24hc
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT		***							
PHOSPHORUS, TOTAL (AS P) 0055 1 0 0 EFFLUENT GROSS VALUE		*****	*****		*****	0.06	*****	( 19)	0	1/7	24hc
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT		***							
FLOW, IN CONDUIT OR TREATMENT PLANT 0060 1 0 0 EFFLUENT GROSS VALUE		2.30	2.82	( 03)	*****	*****	*****		0	cont	flow
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT		***							
CHLORINE, TOTAL RESIDUAL 0090 1 0 0 EFFLUENT GROSS VALUE		*****	*****		*****	*****	0.02	( 19)	0	1/7	grab
		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT		***							

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert D. Bradford  
 Mill Manager  
 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 616 685-5851  
 DATE 00 08 09  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 DAILY - MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

A  
 M  
 0633373

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080

ATTN: RAJAJA RAJMOOJI *Ku*

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

410003790 PERMIT NUMBER  
 005 A DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
01	07	01	TO	01	07	11

FROM

TO

UNFAIR WATER QUALITY  
 OMB No. 2040-0604

MAJOR (508R PF)  
 FINAL  
 005/TRETD PROC WASTE/NONCONTA  
 PCS - Rec'd.

AUG 11 2000

NO DISCHARGE  
 NOTE: Read instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
DIURNAL OBSERVATION, VISUAL, Y/N RESPONSE	1		*****	( 94)	*****	*****	*****		0	contli.	visub
FIELD 1 0 0	PERMIT REQUIREMENT	NO TOSS		RS=1 NO=0							
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert L. Gardner  
 Mill Manager  
 TYPED OR PRINTED

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

*R. Gardner*  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 616 685-5851  
 DATE 00 08 09  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 DAILY - MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

0633374

NAME PLAINWELL PAPER CO  
ADDRESS 200 ALLEGAN STREET  
PLAINWELL MI 49080

MI 003794  
PERMIT NUMBER

005  
DISCHARGE NUMBER


MAJOR (5) BR PP  
F - FINAL  
005/TREATED PROC WASTE/NONCONTA

FACILITY LOCATION PLAINWELL PAPER CO.  
PLAINWELL MI 49080  
ATTN: SHAJIA NAIMUDDIN

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

NO DISCHARGE  
NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	*****	*****			4.6	*****	*****	(19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT							MG/L			
BOD, 5-DAY (20 DEG. C)	*****	351	(26)		*****	*****	*****		0	4/7	24hr
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PH	*****	*****			7.4	*****	8.1	(12)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT										
SOLIDS, TOTAL SUSPENDED	*****	373	(26)		*****	*****	*****		0	3/7	24hr
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PHOSPHORUS, TOTAL (AS P)	*****	*****			*****	0.06	*****	(19)	0	1/7	24hr
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT							MG/L			
LOAD, IN CONDUIT OR TREATMENT PLANT	*****	2.30	2.82	(03)	*****	*****	*****		0	cont'n	flow
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD							
CHLORINE, TOTAL RESIDUAL	*****	*****			*****	*****	0.02	(19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT							MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Robert B. Bradsher Mill Manager TYPED OR PRINTED			616 685-5851	00	08	09

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
SODIUM- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

0633375

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

PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

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

Form Approved  
 OMB No. 2040-0004

410003704  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SJR PF)  
 FINAL  
 005/TRKTED PROC WASTE/NONCONTA

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080

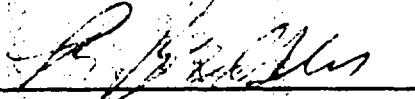
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
01	07	01		01	07	31

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

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
EFFLUENT OBSERVATION, VISUAL, Y/N RESPONSE	1		*****	( 94)	*****	*****	*****		0	cont'n	visibl
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			PS=1 MO=0				***			
	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  
 Robert E. Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  


TELEPHONE NUMBER 616 585-5851  
 DATE 00 08 09  
 YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	7	1
	2000	7	31

Summer ( 5/1-9/30 ) *Y.M.*

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min---Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L			
1							2.30		1	
2					300		2.25		1	
3			115.0		115		1.38		1	
4			104	7.9	93	0.03	1.39		1	
5			72	8.0	90		2.15	0.020	1	
6		4.8	291	7.8	249		2.49		1	
7							2.52		1	
8							2.64		1	
9				8.1	217		2.60		1	
10			280	7.7	348		2.59		1	
11			351	7.7	373	0.11	2.63		1	
12			212	7.6	290		2.32	0.020	1	
13		4.7	137	7.4	293		2.34		1	
14							2.82		1	
15							2.15		1	
16					192		2.09		1	
17			171		235		2.56		1	
18			147	7.8	210	0.05	2.52		1	
19		4.8	176	7.7	197		2.63	0.020	1	
20			170		105		2.53		1	
21							2.28		1	
22							1.28		1	
23					48		1.45		1	
24			175		131		2.62		1	
25			207	7.8	299	0.03	2.76		1	
26		4.6	252	7.9	229		2.75	0.020	1	
27			194	8.0	216		2.59		1	
28							2.74		1	
29							1.83		1	
30				7.8	69		1.37		1	
31							2.71		1	
TOTAL		18.9	3054	109.2	4297	0.22	71.28	0.080	31	0
AVG.		4.7	191	7.8	205	0.06	2.30	0.020	1	#DIV/0!
Min.		4.6	72	7.4	48	0.03	1.28	0.020	1	0.0
Max.		4.8	351	8.1	373	0.11	2.82	0.020	1	0.0

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 or between 6 months and 3 years.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	

0633377

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD		
YEAR	MONTH	DAY
2000	7	1
2000	7	31

Summer ( 5/1-9/30 ) *KM*

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min—Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
LIMIT		3.0 Minimum	1,200 Max.	6.5—9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	ug / L
UNIT		MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1							2.30		1	
2							2.25		1	
3			115.0			300	1.38		1	
4			104	7.9		93	1.39		1	
5			72	8.0		90	2.15	0.020	1	
6		4.8	291	7.8		249	2.49		1	
7							2.52		1	
8							2.64		1	
9				8.1		217	2.60		1	
10			280	7.7		348	2.59		1	
11			351	7.7		373	2.63		1	
12			212	7.6		290	2.32	0.020	1	
13		4.7	137	7.4		283	2.34		1	
14							2.82		1	
15							2.15		1	
16						182	2.09		1	
17			171			235	2.56		1	
18			147	7.8		210	2.52		1	
19		4.8	176	7.7		197	2.63	0.020	1	
20			170			105	2.53		1	
21							2.28		1	
22							1.28		1	
23						48	1.45		1	
24			175			131	2.62		1	
25			207	7.8		299	2.76		1	
26		4.8	252	7.9		229	2.75	0.020	1	
27			194	8.0		216	2.59		1	
28							2.74		1	
29							1.83		1	
30				7.8		69	1.37		1	
31							2.71		1	
<b>TOTAL</b>		18.9	3054	109.2		4297	71.28	0.080	31	0
<b>AVG.</b>		4.7	191	7.8		205	2.30	0.020	1	#DIV/0!
<b>Min.</b>		4.6	72	7.4		48	1.28	0.020	1	0.0
<b>Max.</b>		4.8	351	8.1		373	2.82	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	

063378



PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT


DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	7	1
	2000	7	31

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
UNIT	LIMIT	3.0 Minimum	1,200 Max.	6.5--9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
		MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1							2.30		1	
2					300		2.25		1	
3			115.0		115		1.38		1	
4			104	7.9	93	0.03	1.39		1	
5			72	8.0	90		2.15	0.020	1	
6		4.8	291	7.8	249		2.49		1	
7							2.52		1	
8							2.64		1	
9				8.1	217		2.60		1	
10			280	7.7	348		2.59		1	
11			351	7.7	373	0.11	2.63		1	
12			212	7.6	280		2.32	0.020	1	
13		4.7	137	7.4	283		2.34		1	
14							2.82		1	
15							2.15		1	
16					182		2.09		1	
17			171		235		2.56		1	
18			147	7.8	210	0.05	2.52		1	
19		4.8	176	7.7	197		2.83	0.020	1	
20			170		105		2.53		1	
21							2.28		1	
22							1.28		1	
23					48		1.45		1	
24			175		131		2.62		1	
25			207	7.8	289	0.03	2.76		1	
26		4.6	252	7.9	229		2.75	0.020	1	
27			194	8.0	216		2.59		1	
28							2.74		1	
29							1.83		1	
30				7.8	69		1.37		1	
31							2.71		1	
	TOTAL	18.9	3054	109.2	4297	0.22	71.28	0.060	31	0
	AVG.	4.7	191	7.8	205	0.06	2.30	0.020	1	#DIV/0!
	Min.	4.6	72	7.4	48	0.03	1.28	0.020	1	0.0
	Max.	4.8	351	8.1	373	0.11	2.82	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager		

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49089

FACILITY PLAINWELL PAPER CO.  
 LOCATION PLAINWELL MI 49089

OWNER: SHAJIA VAHIDDI

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

49000798 PERMIT NUMBER  
 005 DISCHARGE NUMBER

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	08	01	TO	00	08	31

MAJOR (SUBR PP)  
 FINAL  
 005/TREATED PROC

SURFACE WATER QUALITY  
 OMB No. 2040-0004

SEP 11 2000

PCS-Recd.

\*\*\* NO DISCHARGE \*\*\*  
 NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	SAMPLE MEASUREMENT	*****	*****	( 19)	3.6	*****	*****	( 19)	0	1/7	grab
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*****	323	( 26)	*****	*****	*****		0	4/7	24hc
00310 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PH	SAMPLE MEASUREMENT	*****	*****	( 12)	7.5	*****	8.4	8.4	0	1/7	grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				SD			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	429	( 26)	*****	*****	*****		0	5/7	24hc
00540 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PHOSPHORUS, TOTAL (AS P)	SAMPLE MEASUREMENT	*****	*****	( 19)	*****	0.06	*****	( 19)	0	1/7	24hc
00650 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
LOAD, IN CONDUIT OR TREATMENT PLANT	SAMPLE MEASUREMENT	2.60	2.94	( 03)	*****	*****	*****		0	contin flow	
00650 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD							
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****	( 19)	*****	*****	0.02	( 19)	0	1/7	grab
00650 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  Robert D. Bradsher Mill Manager	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  <i>R. Bradsher</i>	TELEPHONE	DATE
			616 685-5851 AREA CODE NUMBER	00 09 09 YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 ADDITIONAL MONITORING QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49083

FACILITY PLAINWELL PAPER CO.  
 LOCATION PLAINWELL MI 49083

ATTN: SHAJA NAIMUDDIN

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

Form Approved.  
 OMB No. 2040-0004

00003704 PERMIT NUMBER  
 005 A DISCHARGE NUMBER

MAJOR (S)BR PP  
 F - FINAL  
 005/TRETED PROC WASTE/NONCONTA

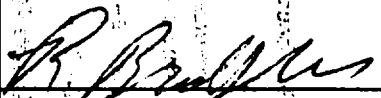
MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	08	01	TO	00	08	31

NO DISCHARGE  
 NOTE: Read instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN, DISSOLVED (DO)	00300 1 0 0	*****	*****		3.6	*****	*****	(19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
TEMP, 5-DAY (20 DEG. C)	00310 1 1 0	*****	32.3	(26)	*****	*****	*****		0	4/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PH	00400 1 0 0	*****	*****		7.5	*****	*****	(12)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT							PH			
SOLIDS, TOTAL SUSPENDED	00530 1 1 0	*****	429	(26)	*****	*****	*****		0	5/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY							
PHOSPHORUS, TOTAL (AS P)	00655 1 0 0	*****	*****		0.06	*****	*****	(19)	0	1/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT							MG/L			
LOG, IN CONDUIT OR THROUGH TREATMENT PLANT	00050 1 0 0	2.60	2.84	(03)	*****	*****	*****		0	contin flow	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD							
CHLORINE, TOTAL RESIDUAL	00050 1 0 0	*****	*****		0.02	*****	*****	(19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT							MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert D. Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  


TELEPHONE 616 685-5851  
 DATE 00 09 09  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 CADMIUM- MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

0633380

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080

ATTN: AHAJA MAIMUDDIN

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

10003701  
 PERMIT NUMBER

005  
 DISCHARGE NUMBER

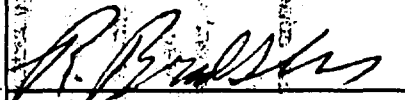
MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	08	01	TO	00	08	31

Form Approved  
 SURFACE WATER QUALITY

MAJOR (SUBR PP)  
 FINAL  
 005/TREATED PROC WASTE/MONCONTA  
 SEP 11 2000  
 PCS = Rec'd.  
 \*\*\* NO DISCHARGE \*\*\*  
 NOTE: Read Instructions before completing this form.

063381

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
UPPER OBSERVATION, VISUAL, I/N RESPONSE	SAMPLE MEASUREMENT	1	*****	(94)	*****	*****	*****		0	contin	vis
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			25=1 NO=0							
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE:	DATE			
Robert D. Bradsher Mill Manager TYPED OR PRINTED			616 685-5851	00 09 09			
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 RADIUM - MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

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

Form Approved.  
 OMB No. 2040-0004

MI 0003704  
 PERMIT NUMBER

005  
 DISCHARGE NUMBER

MAJOR (SUHR PP)  
 P - FINAL  
 005/TREATED PROC WASTE/NONCONTA


FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
00	04	01	TO	00	04	31

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

PTS: KHAJA NATAUDDIN

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OUTFALL OBSERVATION, USUAL, Y/Y RESPONSE	1		*****	( 94)	*****	*****	*****		0	contin	vis
4130 L 0 0	PERMIT REQUIREMENT			ES=1							
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			NO=0							
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
Robert D. Bradsher Mill Manager			616 685-5851	00 09 09
TYPED OR PRINTED			AREA CODE NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 CADMIUM- MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

063382

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080  
 Summer ( 5/1-9/30 ) *Ylu*

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	8	1
	2000	8	31

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max .	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1			168	8.0	240	0.04	2.88		1	
2			112	8.4	201		2.68	0.020	1	
3		6.4	323.0	8.2	254		2.77		1	
4							2.79		1	
5							2.57		1	
6					350		2.33		1	
7			225	7.8	429		2.45		1	
8			287	7.8	398	0.09	2.65		1	
9			185	8.0	205		2.46	0.020	1	
10		5.4	157	8.0	157		2.69		1	
11							2.77		1	
12							2.26		1	
13				7.8	132		1.97		1	
14			119	7.8	119		2.38		1	
15			179	7.5	159	0.03	2.39		1	
16		4.5	188	7.6	188		2.50		1	
17			232	7.8	189		2.53	0.020	1	
18							2.55		1	
19							2.78		1	
20				7.7	123		2.45		1	
21			155	7.9	133		2.66		1	
22			160	7.6	367	0.08	2.75		1	
23			284	7.7	131		2.62	0.020	1	
24		3.6	123		368		2.94		1	
25							2.82		1	
26							2.59		1	
27				7.8	186		2.47		1	
28			140	7.8	140		2.80		1	
29			161	7.7	231	0.04	2.77		1	
30		4.5	182	7.7	114		2.73	0.020	1	
31			155	7.8	133		2.65		1	
	TOTAL	24.4	3535	164.2	4927	0.28	80.65	0.100	31	0
	AVG.	4.9	186	7.8	214	0.06	2.60	0.020	1	#DIV/0!
	Min.	3.6	112	7.5	114	0.03	1.97	0.020	1	0.0
	Max.	6.4	323	8.4	429	0.09	2.94	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	9/8/00

063383

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	8	1
	2000	8	31

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
DAY	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1			168	8.0	240	0.04	2.88		1	
2			112	8.4	201		2.68	0.020	1	
3	6.4		323.0	8.2	254		2.77		1	
4							2.79		1	
5							2.57		1	
6					350		2.33		1	
7			225	7.8	429		2.45		1	
8			287	7.8	398	0.09	2.65		1	
9			185	8.0	205		2.46	0.020	1	
10	5.4		157	8.0	157		2.69		1	
11							2.77		1	
12							2.26		1	
13				7.8	132		1.97		1	
14			119	7.8	119		2.38		1	
15			179	7.5	159	0.03	2.39		1	
16	4.5		188	7.6	188		2.50		1	
17			232	7.6	169		2.53	0.020	1	
18							2.55		1	
19							2.78		1	
20				7.7	123		2.45		1	
21			155	7.9	133		2.68		1	
22			160	7.6	367	0.08	2.75		1	
23			284	7.7	131		2.62	0.020	1	
24	3.6		123		368		2.94		1	
25							2.82		1	
26							2.59		1	
27				7.8	186		2.47		1	
28			140	7.8	140		2.80		1	
29			161	7.7	231	0.04	2.77		1	
30	4.5		182	7.7	114		2.73	0.020	1	
31			155	7.8	133		2.65		1	
	TOTAL	24.4	3535	164.2	4927	0.28	80.65	0.100	31	0
	AVG.	4.9	186	7.8	214	0.06	2.60	0.020	1	#DIV/0!
	Mln.	3.6	112	7.5	114	0.03	1.97	0.020	1	0.0
	Max.	6.4	323	8.4	429	0.09	2.94	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	9/8/00

53384

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	8	1
	2000	8	31

Summer ( 5/1-9/30 ) *km*

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1			168	8.0	240	0.04	2.88		1	
2			112	8.4	201		2.68	0.020	1	
3		6.4	323.0	8.2	254		2.77		1	
4							2.79		1	
5							2.57		1	
6					350		2.33		1	
7			225	7.8	429		2.45		1	
8			287	7.8	398	0.09	2.65		1	
9			185	8.0	205		2.46	0.020	1	
10		5.4	157	8.0	157		2.69		1	
11							2.77		1	
12							2.26		1	
13				7.8	132		1.97		1	
14			119	7.8	119		2.38		1	
15			179	7.5	159	0.03	2.39		1	
16		4.5	188	7.6	188		2.50		1	
17			232	7.6	169		2.53	0.020	1	
18							2.55		1	
19							2.78		1	
20				7.7	123		2.45		1	
21			155	7.9	133		2.66		1	
22			160	7.6	367	0.06	2.75		1	
23			284	7.7	131		2.62	0.020	1	
24		3.6	123		368		2.94		1	
25							2.82		1	
26							2.59		1	
27				7.8	186		2.47		1	
28			140	7.8	140		2.80		1	
29			161	7.7	231	0.04	2.77		1	
30		4.5	182	7.7	114		2.73	0.020	1	
31			155	7.8	133		2.65		1	
	TOTAL	24.4	3535	164.2	4927	0.28	80.65	0.100	31	0
	AVG.	4.9	186	7.8	214	0.06	2.60	0.020	1	#DIV/0!
	Min.	3.6	112	7.5	114	0.03	1.97	0.020	1	0.0
	Max.	6.4	323	8.4	429	0.09	2.94	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	9/8/00



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

Summer ( 5/1-9/30 ) *Xm*

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	8	1
TO	2000	8	31

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5--9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1			168	8.0	240	0.04	2.88		1	
2			112	8.4	201		2.68	0.020	1	
3		6.4	323.0	8.2	254		2.77		1	
4							2.79		1	
5							2.57		1	
6					350		2.33		1	
7			225	7.8	429		2.45		1	
8			287	7.8	398	0.09	2.65		1	
9			185	8.0	205		2.46	0.020	1	
10		5.4	157	8.0	157		2.69		1	
11							2.77		1	
12							2.26		1	
13				7.8	132		1.97		1	
14			119	7.8	119		2.38		1	
15			179	7.5	159	0.03	2.39		1	
16		4.5	188	7.6	188		2.50		1	
17			232	7.6	189		2.53	0.020	1	
18							2.55		1	
19							2.78		1	
20				7.7	123		2.45		1	
21			155	7.9	133		2.66		1	
22			160	7.6	387	0.08	2.75		1	
23			284	7.7	131		2.62	0.020	1	
24		3.6	123		368		2.94		1	
25							2.82		1	
26							2.59		1	
27				7.8	186		2.47		1	
28			140	7.8	140		2.80		1	
29			161	7.7	231	0.04	2.77		1	
30		4.5	182	7.7	114		2.73	0.020	1	
31			155	7.8	133		2.65		1	
	TOTAL	24.4	3535	164.2	4927	0.28	80.65	0.100	31	0
	AVG.	4.9	186	7.8	214	0.06	2.60	0.020	1	#DIV/0!
	Min.	3.6	112	7.5	114	0.03	1.97	0.020	1	0.0
	Max.	6.4	323	8.4	429	0.09	2.94	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	9/8/00

063386

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET

PLAINWELL, MICHIGAN 49080

Summer ( 5/1-9/30 ) *km*

REPORTING PERIOD

FROM  
TO

YEAR	MONTH	DAY
2000	8	1
2000	8	31

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5--9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	ug / L
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1			168	8.0	240	0.04	2.88		1	
2			112	8.4	201		2.68	0.020	1	
3		6.4	323.0	8.2	254		2.77		1	
4							2.79		1	
5							2.57		1	
6					350		2.33		1	
7			225	7.8	429		2.45		1	
8			287	7.8	398	0.09	2.65		1	
9			185	8.0	205		2.46	0.020	1	
10		5.4	157	8.0	157		2.69		1	
11							2.77		1	
12							2.26		1	
13				7.8	132		1.97		1	
14			119	7.8	119		2.38		1	
15			179	7.5	159	0.03	2.39		1	
16		4.5	188	7.6	188		2.50		1	
17			232	7.6	169		2.53	0.020	1	
18							2.55		1	
19							2.78		1	
20				7.7	123		2.45		1	
21			155	7.9	133		2.66		1	
22			160	7.6	367	0.08	2.75		1	
23			284	7.7	131		2.62	0.020	1	
24		3.6	123		368		2.94		1	
25							2.82		1	
26							2.59		1	
27				7.8	186		2.47		1	
28			140	7.8	140		2.80		1	
29			161	7.7	231	0.04	2.77		1	
30		4.5	182	7.7	114		2.73	0.020	1	
31			155	7.8	133		2.65		1	
	TOTAL	24.4	3535	164.2	4927	0.28	80.65	0.100	31	0
	AVG.	4.9	186	7.8	214	0.06	2.60	0.020	1	#DIV/0!
	Min.	3.6	112	7.5	114	0.03	1.97	0.020	1	0.0
	Max.	6.4	323	8.4	429	0.09	2.94	0.020	1	0.0

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>Robert D. Bradsher</i>	9/8/00

063387

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

FACILITY PLAINWELL PAPER CO.  
 LOCATION PLAINWELL MI 49080

ATTN: KHAJA NAINUDDIN Kh

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

MTD003794  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SDBR PP)  
 P - FINAL  
 005/TREATED PROCS

OCT 11 2000

Form Approved  
 OMB No. 2040-0004


MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
00	09	01		00	09	30

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

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MG/L		*****	*****	( 19)	0	1/7	grab
00310 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	378	LBS/DY		*****	*****	*****	0	4/7	24hr
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MG/L	7.5	*****	8.2	( 12)	0	1/7	grab
00530 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	591	LBS/DY	*****	*****	*****	*****	0	5/7	24hr
00555 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MG/L	*****	0.05	*****	( 19)	0	1/7	24hr
01027 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MG/L	*****	*****	0.2	( 28)	0	1/90	24hr
00050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	2.26	2.79	MGD	*****	*****	*****	*****	0	continflw	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert D. Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 616 6855851  
 DATE 00 08 09  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 CADMIUM- MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

063388

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

NAME PLAINWELL PAPER CO  
ADDRESS 200 ALLEGAN STREET  
PLAINWELL MI 49080

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

310003794  
PERMIT NUMBER

005  
DISCHARGE NUMBER

SURFACE WATER QUALITY  
OMB No. 2040-0004

OCT 11 2000

MAJOR (SUBR PP)  
P - FINAL  
005/TREATED PROGS/RECONTA

FACILITY LOCATION PLAINWELL PAPER CO.  
PLAINWELL MI 49080

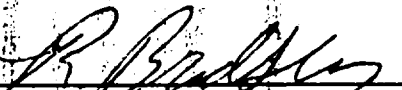
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	09	01	00	09	30

\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORIDE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	*****		(19)	0	1/7	RES
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
SURFACE OBSERVATION, VISUAL, Y/N RESPONSE	SAMPLE MEASUREMENT		*****	(94)	*****	*****	*****		0	contin vis	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			ES=1 NO=0							
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Robert D. Bradsher  
Mill Manager  
TYPED OR PRINTED

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

  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: 616 685-585  
DATE: 00 10 20  
AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

753389

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLRAN STREET  
 PLAINWELL MI 49083

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

Form Approved  
 OMB No. 2040-0004

410001794  
 PERMIT NUMBER

005 A  
 DISCHARGE NUMBER

MAJOR (SUD P2)  
 FE- FINAL  
 005/TREATED PROC WASTE/NONCONTA

FACILITY PLAINWELL PAPER CO.  
 LOCATION PLAINWELL MI 49083

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	09	01	00	09	30


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

ATTN: KHAJA NAIMUDDIN Km

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ARSENIC, DISSOLVED (DD)	PERMIT REQUIREMENT	*****	*****	***		*****	*****	( 19)	0	1/7	grab
00300 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
BOD, 5-DAY (20 DEG. C)	PERMIT REQUIREMENT	*****	278	( 26)	*****	*****	*****		0	1/7	24hr
00310 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY				***			
CADMIUM	PERMIT REQUIREMENT	*****	*****	***	7.5	*****	*****	( 12)	0	1/7	grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				5U			
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	*****	501	( 25)	*****	*****	*****		0	5/7	24hr
00530 1 1 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY				***			
PHOSPHORUS, TOTAL (AS P)	PERMIT REQUIREMENT	*****	*****	***	*****	0.05	*****	( 19)	0	1/7	24hr
00555 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
SODIUM, TOTAL (AS SD)	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	( 28)	0	1/20	24hr
01027 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				UG/L			
FLOW, IN CONDUIT OR THROUGH TREATMENT PLANT	PERMIT REQUIREMENT	2.26	2.79	( 03)	*****	*****	*****		0	continflw	
00050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD				***			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert D. Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

  
 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE 616 6855851  
 DATE 00 09 09  
 AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 SODIUM- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

063390

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49090

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49090

ATTN: KHARAJA NAIMUDDIN Kh

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

Form Approved.  
 OMB No. 2040-0004

0100003794  
 PERMIT NUMBER

005  
 DISCHARGE NUMBER

MONITORING PERIOD  
 FROM 30 09 01 TO 00 09 30


MAJOR (SUBR PP)  
 F - FINAL  
 005/TRETD PROC WASTE/NONCONTA

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

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	*****	( 19)		0	1/7	grab
0050 1 0 0	PERMIT REQUIREMENT			***							
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT		*****	( 94)	*****	*****	*****		0	contin	vis
0130 1 0 0	PERMIT REQUIREMENT			ES=1							
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			NO=0							
	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  
 Robert D. Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  


TELEPHONE: 616 685-585  
 DATE: 00 10 09

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 ADMISS- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

0633391

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION  
DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080

Summer ( 5/1-9/30 ) *KW*

REPORTING PERIOD

FROM  
TO

YEAR	MONTH	DAY
2000	9	1
200	9	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
LIMIT	3.0 Minimum	1,200 Max.	6.5--9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L	
UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L			
1							2.72		1	
2							2.77		1	
3				8.2	218		2.00		1	
4			34	7.9	108		0.59		1	
5			22	8.0	79	0.04	0.53		1	
6			257	7.7	385		1.37	0.020	1	
7		5.7	378	7.5	147		2.52		1	
8							2.49		1	
9							2.33		1	
10				7.9	234		2.34		1	
11			187	7.8	208		2.49		1	
12			187	7.6	272	0.03	2.51		1	0.2
13		4.1	184	7.6	513		2.46	0.020	1	
14			148	7.6	356		2.51		1	
15							2.79		1	
16							2.16		1	
17				7.8	125		1.88		1	
18			131	7.6	131		1.75		1	
19			133	7.5	133	0.03	2.00		1	
20		4.4	174	7.7	174		2.81	0.020	1	
21			222	7.6	222		2.66		1	
22							2.72		1	
23							2.77		1	
24				8.0	373		2.83		1	
25			229	8.2	503		2.74		1	
26			318	7.8	363	0.08	2.72		1	
27			271	7.7	408		2.32	0.020	1	
28		4.8	211	7.9	591		2.53		1	
29							2.59		1	
30							1.44		1	
31										
TOTAL		19.0	3064	155.6	5549	0.18	67.94	0.080	30	0
AVG.		4.8	192	7.8	277	0.05	2.26	0.020	1	0
Min.		4.1	22	7.5	79	0.03	0.53	0.020	1	0.2
Max.		5.7	378	8.2	591	0.08	2.79	0.020	1	0.2

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>[Signature]</i>	10/19/00

063392

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080  
 Summer ( 5/1-9/30 ) *KM*

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	9	1
TO	200	9	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min—Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5—9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	ug / L
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1							2.72		1	
2							2.77		1	
3				8.2	218		2.00		1	
4			34	7.9	108		0.59		1	
5			22	8.0	79	0.04	0.53		1	
6			257	7.7	395		1.37	0.020	1	
7		5.7	378	7.5	147		2.52		1	
8							2.49		1	
9							2.33		1	
10				7.9	234		2.34		1	
11			187	7.8	208		2.49		1	
12			187	7.8	272	0.03	2.51		1	0.2
13		4.1	184	7.6	513		2.46	0.020	1	
14			146	7.8	358		2.51		1	
15							2.79		1	
16							2.18		1	
17				7.8	125		1.88		1	
18			131	7.8	131		1.75		1	
19			133	7.5	133	0.03	2.00		1	
20		4.4	174	7.7	174		2.61	0.020	1	
21			222	7.8	222		2.66		1	
22							2.72		1	
23							2.77		1	
24				8.0	373		2.63		1	
25			229	8.2	503		2.74		1	
26			318	7.8	363	0.08	2.72		1	
27			271	7.7	408		2.32	0.020	1	
28		4.8	211	7.9	591		2.53		1	
29							2.59		1	
30							1.44		1	
31									1	
	TOTAL	19.0	3064	155.6	5549	0.18	67.94	0.080	30	0
	AVG.	4.8	192	7.8	277	0.05	2.26	0.020	1	0
	Min.	4.1	22	7.8	79	0.03	0.53	0.020	1	0.2
	Max.	5.7	378	8.2	591	0.08	2.79	0.020	1	0.2

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>[Signature]</i>	10/9/00

063393



MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080  
 Summer ( 5/1-9/30 ) KM

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	9	1
	200	9	30

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max.	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,200 Max.	6.5---9.0	1,400 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	UG / L
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		
1							2.72		1	
2							2.77		1	
3				8.2	216		2.00		1	
4			34	7.9	108		0.59		1	
5			22	8.0	79	0.04	0.53		1	
6			257	7.7	395		1.37	0.020	1	
7		5.7	378	7.5	147		2.52		1	
8							2.49		1	
9							2.33		1	
10				7.9	234		2.34		1	
11			187	7.8	208		2.49		1	
12			167	7.6	272	0.03	2.51		1	0.2
13		4.1	184	7.6	513		2.46	0.020	1	
14			146	7.6	356		2.51		1	
15							2.79		1	
16							2.16		1	
17				7.8	125		1.88		1	
18			131	7.6	131		1.75		1	
19			133	7.5	133	0.03	2.00		1	
20		4.4	174	7.7	174		2.61	0.020	1	
21			222	7.6	222		2.66		1	
22							2.72		1	
23							2.77		1	
24				8.0	373		2.63		1	
25			229	8.2	503		2.74		1	
26			318	7.8	363	0.08	2.72		1	
27			271	7.7	406		2.32	0.020	1	
28		4.8	211	7.9	591		2.53		1	
29							2.59		1	
30							1.44		1	
31										
	TOTAL	19.0	3064	155.6	5549	0.18	67.94	0.080	30	0
	AVG.	4.8	192	7.8	277	0.05	2.26	0.020	1	0
	Min.	4.1	22	7.6	79	0.03	0.53	0.020	1	0.2
	Max.	5.7	378	8.2	591	0.08	2.79	0.020	1	0.2

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 or between 6 months and 5 years.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>[Signature]</i>	10/9/00

063394

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.

200 ALLEGAN STREET

PLAINWELL, MICHIGAN 49080

Summer ( 5/1-9/30 ) *Km*

DAILY DISCHARGE MONITORING REPORT

REPORTING PERIOD

FROM  
TO

YEAR	MONTH	DAY
2000	9	1
200	9	30

DAY	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		ug / L
1							2.72			
2							2.77			
3				8.2	216		2.00			
4			34	7.9	108		0.59			
5			22	8.0	79	0.04	0.53			
6			257	7.7	395		1.37	0.020		
7		5.7	378	7.5	147		2.52			
8							2.49			
9							2.33			
10				7.9	234		2.34			
11			187	7.8	208		2.49			
12			167	7.6	272	0.03	2.51			0.2
13		4.1	184	7.6	513		2.46	0.020		
14			146	7.6	356		2.51			
15							2.79			
16							2.16			
17				7.8	125		1.88			
18			131	7.6	131		1.75			
19			133	7.5	133	0.03	2.00			
20		4.4	174	7.7	174		2.61	0.020		
21			222	7.6	222		2.66			
22							2.72			
23							2.77			
24				8.0	373		2.63			
25			229	8.2	503		2.74			
26			318	7.8	363	0.08	2.72			
27			271	7.7	406		2.32	0.020		
28		4.8	211	7.9	591		2.53			
29							2.59			
30							1.44			
31										
<b>TOTAL</b>		19.0	3064	155.6	5549	0.18	67.94	0.080	30	0
<b>AVG.</b>		4.8	192	7.8	277	0.06	2.26	0.020	1	0
<b>Min.</b>		4.1	22	7.5	79	0.03	0.53	0.020	1	0.2
<b>Max.</b>		5.7	378	8.2	591	0.08	2.79	0.020	1	0.2

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager	<i>[Signature]</i>	10/9/00

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

NAME PLAINWELL PAPER CO  
ADDRESS 200 ALLEGAN STREET  
PLAINWELL MI 49080

FACILITY PLAINWELL PAPER CO.  
LOCATION PLAINWELL MI 49080  
EPA: KWAJA NAIUDDIN

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

110001704  
PERMIT NUMBER

0051  
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	10	01	00	10	31

FROM

TO

MAJOR (SUBR PD)  
P: FINAL

Form Approved SURFACE WATER QUALITY

NOV 13 2000

005/TREATED PROC. WASTE/NONCONTA

PCS - Rec'd.  
\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read Instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
OXIGEN, DISSOLVED (D)	0000 1 0 0	*****	*****		4.0	*****	*****	( 19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
DO, 5-DAY (20 DEG. C)	0010 1 2 0	217	353	( 25)	*****	*****	*****		0	4/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY				***			
	0000 1 0 0	*****	*****		7.2	*****	*****	( 12)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				50			
SOLIDS, TOTAL SUSPENDED	0030 1 2 0	273	1005	( 26)	*****	*****	*****		0	5/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY				***			
PHOSPHORUS, TOTAL (AS P)	0065 1 0 0	*****	*****		*****	0.04	*****	( 19)	0	1/7	24hc
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
LOSS, IN CONDUIT OR (BY) TREATMENT PLANT	0030 1 0 0	2.22	2.77	( 03)	*****	*****	*****		0	contin flow	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD				***			
CHLORINE, TOTAL RESIDUAL	0050 1 0 0	*****	*****		*****	*****	0.02	( 19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
Robert D. Bradsher  
Mill Manager  
TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*R. Bradsher*

TELEPHONE: 616 685-5851  
DATE: 00 11 10  
AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
MONITOR MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49083

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49083

ATTN: KHAJA NAIMOODER

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

Form Approved  
 OMB No. 2040-0004

MI 0003704 PERMIT NUMBER  
 0057 DISCHARGE NUMBER

MAJOR (SUBR PD)  
 F - FINAL  
 005/TRETED PROC WASTE/NONCONTA


MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	10	01	00	10	31

FROM

TO

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

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
OXYGEN, DISSOLVED (D)	0000 1 0 0	*****	*****		4.0	*****	*****	( 19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
DO, 5-DAY (20 DEG. C)	0010 1 2 0	217	353	( 25)	*****	*****	*****		0	4/7	24hr
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			RS/DY							
PH	0040 1 0 0	*****	*****		7.2	*****	*****	( 12)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				PH			
SOLIDS, TOTAL SUSPENDED	0030 1 2 0	273	1005	( 25)	*****	*****	*****		0	5/7	24hr
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			RS/DY							
PHOSPHORUS, TOTAL (AS P)	0055 1 0 0	*****	*****		*****	0.04	*****	( 19)	0	1/7	24hr
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			
DO, IN CONDUIT OR (OR) TREATMENT PLANT	0050 1 0 0	2.22	2.77	( 03)	*****	*****	*****		0	contin flow	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			MGD							
CHLORINE, TOTAL RESIDUAL	0060 1 0 0	*****	*****		*****	*****	0.02	( 19)	0	1/7	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***				MG/L			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
Robert D. Bradsher Mill Manager TYPED OR PRINTED			616,685-5851	00 11 10			
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 MONITOR MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

063397

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49080

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49080

ATTN: KHAJA NAIMUDDIN

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

MT0003791  
 PERMIT NUMBER  
 005  
 DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
00	10	01	00	10	31

MAJOR (SUBR PP)  
 FINAL  
 DDS/TRETD PROC

SURFACE WATER QUALITY  
 OMB No. 2040-0004

NOV 18 2000

PCSE/Recd.


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

063398

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
WUPALL OBSERVATION, VISUAL, T/N RESPONSE	1		*****	( 94)	*****	*****	*****	0	contin	visual
EFFLUENT CROSS VALUE	PERMIT REQUIREMENT			KS=1 NO=0						
	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  
 Robert D Bradsher  
 Mill Manager  
 TYPED OR PRINTED

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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  


TELEPHONE NUMBER 616 685-5851  
 DATE 00 11 10

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 ADDITION- MONITOR QUARTERLY... MARCH, JUNE, SEPTEMBER AND DECEMBER.

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

NAME PLAINWELL PAPER CO  
 ADDRESS 200 ALLEGAN STREET  
 PLAINWELL MI 49003

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

Form Approved  
 OMB No. 2040-0004

MI0003791  
 PERMIT NUMBER  
 005 A  
 DISCHARGE NUMBER

MAJOR (SUBR PP)  
 FINAL  
 005/TREATED PROC WASTE/NONCONTA

FACILITY LOCATION PLAINWELL PAPER CO.  
 PLAINWELL MI 49003  
 ATTN: SHAJA NAIMUDDIN

MONITORING PERIOD  
 FROM 00 10 01 TO 00 10 31

NO DISCHARGE  
 NOTE: Read instructions before completing this form.

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OUTFALL OBSERVATION, VISUAL, Y/N RESPONSE	1		*****	( 94)	*****	*****	*****			0	contin visual
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			ES=1 NO=0							
	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  Robert D Bradsher Mill Manager TYPED OR PRINTED	I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  	TELEPHONE	DATE		
			616-685-5851 AREA CODE NUMBER	00	11	10

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
 ADDITION- MONITOR QUARTERLY...MARCH, JUNE, SEPTEMBER AND DECEMBER.

063399

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
 SURFACE WATER QUALITY DIVISION  
 DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS  
 PLAINWELL INC.  
 200 ALLEGAN STREET  
 PLAINWELL, MICHIGAN 49080

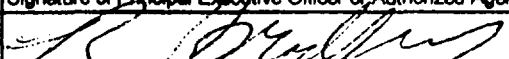
REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	10	1
	2000	10	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT UNIT	3.0 Minimum MG/L	1,800 Max. Lbs / Day	6.5---9.0 SU	2,100 Max. Lbs / Day	1.0 Avg. MG/L	MGD	0.036 Max. MG/L	1:Yes & 0: No	Max UG / L
1					138		1.48		1	
2			84	7.8	117		2.01		1	
3			111	7.8	187	0.03	2.23		1	
4			181	7.6	555		2.77	0.020	1	
5		4.6	130	7.6	195		2.60		1	
6							2.61		1	
7							2.57		1	
8				7.8	231		2.52		1	
9			270	8.0	427		2.69		1	
10			235	8.0	176	0.03	2.35		1	
11			353	8.1	416		2.49	0.020	1	
12		4.8	234		234		2.55		1	
13		4.0					2.65		1	
14							1.52		1	
15					114		1.52		1	
16			127		127		1.91		1	
17			186	7.4	1005	0.09	2.23		1	
18			303	7.2	417		2.27	0.020	1	
19		5.0	202	7.7	264		2.43		1	
20							2.18		1	
21							2.17		1	
22					156		2.08		1	
23			269	7.7	128		2.15		1	
24			269	7.3	143	0.03	2.15		1	
25			249	7.4	166		2.49	0.020	1	
26		5.6	188	7.6	188		2.28		1	
27							2.17		1	
28							1.80		1	
29				7.8	149		1.79		1	
30			295	7.8	555		2.08		1	
31			243	7.8	208	0.02	2.24		1	
	TOTAL	24.0	3909	138.4	6270	0.20	68.96	0.080	31	0.00
	AVG.	4.8	217	7.7	273	0.04	2.22	0.020	1	#DIV/0!
	Min.	4.0	84	7.2	114	0.02	1.48	0.020	1	0.00
	Max.	5.6	383	8.1	1005	0.09	2.77	0.020	1	0.00

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 or between 6 months and 5 years.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
Robert D. Bradsher Mill Manager		11/10/00

053400

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.

200 ALLEGAN STREET

PLAINWELL, MICHIGAN 49080

DAILY DISCHARGE MONITORING REPORT

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

REPORTING PERIOD

FROM	YEAR	MONTH	DAY
TO	2000	10	1
	2000	10	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,800 Max.	6.5--9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L
1					138		1.48		1	
2			84	7.8	117		2.01		1	
3			111	7.8	167	0.03	2.23		1	
4			161	7.6	555		2.77	0.020	1	
5		4.6	130	7.6	195		2.60		1	
6							2.61		1	
7							2.57		1	
8				7.8	231		2.52		1	
9			270	8.0	427		2.69		1	
10			235	8.0	176	0.03	2.35		1	
11			353	8.1	416		2.49	0.020	1	
12		4.8	234		234		2.55		1	
13		4.0					2.65		1	
14							1.52		1	
15					114		1.52		1	
16			127		127		1.91		1	
17			186	7.4	1005	0.09	2.23		1	
18			303	7.2	417		2.27	0.020	1	
19		5.0	202	7.7	264		2.43		1	
20							2.18		1	
21							2.17		1	
22					156		2.08		1	
23			269	7.7	126		2.15		1	
24			269	7.3	143	0.03	2.15		1	
25			249	7.4	166		2.49	0.020	1	
26		5.6	188	7.6	188		2.26		1	
27							2.17		1	
28							1.60		1	
29				7.8	149		1.79		1	
30			285	7.6	555		2.08		1	
31			243	7.8	206	0.02	2.24		1	
	TOTAL	24.0	3909	138.4	6270	0.20	68.96	0.080	31	0.00
	AVG.	4.8	217	7.7	273	0.04	2.22	0.020	1	#DIV/0!
	Min.	4.0	84	7.2	114	0.02	1.48	0.020	1	0.00
	Max.	5.6	353	8.1	1005	0.09	2.77	0.020	1	0.00

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
---	--	------



063402

MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY  
SURFACE WATER QUALITY DIVISION

DISCHARGE NUMBER	PERMIT NUMBER
005 A	MI 0003794

PERMITTEE'S NAME AND ADDRESS

PLAINWELL INC.  
200 ALLEGAN STREET  
PLAINWELL, MICHIGAN 49080

DAILY DISCHARGE MONITORING REPORT

REPORTING PERIOD

	YEAR	MONTH	DAY
FROM	2000	10	1
TO	2000	10	31

Winter (10/1-4/30) \*1200 BOD \*\*1400TSS

DAY	PAR #	00310100	00310120	00400100	00530120	00665100	5005100	50060102	84130100	01027100
	PARA-METER	Dissolved Oxygen	* BOD 5 - Day	pH Min--Max	** Total Solids Suspended	Phosphorus Total (as P)	Flow In Conduit	Chlorine Total Residual	Outfall Observation	Cadmium Total
	LIMIT	3.0 Minimum	1,800 Max.	6.5--9.0	2,100 Max.	1.0 Avg.		0.036 Max.	1:Yes & 0: No	Max
	UNIT	MG/L	Lbs / Day	SU	Lbs / Day	MG/L	MGD	MG/L		UG / L
1					136		1.48		1	
2			84	7.8	117		2.01		1	
3			111	7.8	167	0.03	2.23		1	
4			161	7.6	555		2.77	0.020	1	
5	4.6		130	7.6	195		2.60		1	
6							2.61		1	
7							2.57		1	
8				7.8	231		2.52		1	
9			270	8.0	427		2.69		1	
10			235	8.0	176	0.03	2.35		1	
11			353	8.1	416		2.49	0.020	1	
12	4.8		234		234		2.55		1	
13	4.0						2.65		1	
14							1.52		1	
15					114		1.52		1	
16			127		127		1.91		1	
17			186	7.4	1005	0.09	2.23		1	
18			303	7.2	417		2.27	0.020	1	
19	5.0		202	7.7	264		2.43		1	
20							2.18		1	
21							2.17		1	
22					156		2.08		1	
23			289	7.7	126		2.15		1	
24			269	7.3	143	0.03	2.15		1	
25			249	7.4	166		2.49	0.020	1	
26	5.6		188	7.6	188		2.26		1	
27							2.17		1	
28							1.80		1	
29				7.8	149		1.79		1	
30			295	7.6	555		2.06		1	
31			243	7.8	206	0.02	2.24		1	
	TOTAL	24.0	3909	138.4	6270	0.20	68.96	0.080	31	0.00
	AVG.	4.8	217	7.7	273	0.04	2.22	0.020	1	#DIV/0!
	Min.	4.0	84	7.2	114	0.02	1.48	0.020	1	0.00
	Max.	5.6	383	8.1	1008	0.09	2.77	0.020	1	0.00

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.)

Printed Name and Title of Principal Executive Officer or Authorized Agent	Signature of Principal Executive Officer or Authorized Agent	Date
---	--	------