

**Publicly Funded Mine Drainage Treatment or Abatement Project Information Sheet**  
**General Project Information**

Project Name and or No.: BLACKLEGS CREEK BIG RUN # 7 PA-200  
Location: Municipality and County: INDIANA  
Watershed: BLACKLEGS CREEK  
USGS Quadrangle: AVONMORE  
Latitude and Longitude: 40.563611000000002 -79.431944000000001

**Contact Information**

Contact Organization: BLACKLEGGS CREEK WATERSHED ASSOCIATION  
Contact Person: ART GRGURIC  
Contact Address: P.O. BOX 59  
CLARKSBURG  
PA  
15725  
Contact Telephone Number: 0  
Contact Email: blackleggscwa@hotmail.com

**Organization Currently Responsible For Project Operations, Monitoring and Maintenance**

Is this organization different from Contact Organization? false  
Organization Name: Blackleggs Creek Watershed Association  
Organization Contact Name: \_\_\_\_\_  
Organization Contact Address: P.O. Box 59, Clarksburg, PA 15725  
Organization Telephone Number: 724-639  
Organization Email: \_\_\_\_\_

**Site Information**

Who owns the property the project is constructed upon? Blackleggs Creek Watershed Association  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Driving Directions to the Project Site (from an easily identifiable reference point): \_\_\_\_\_  
Traveling East on Rte 286 from Saltsburg, go 3 miles and turn left onto Sportsman's Road. Go 3 mile and treatment system is on the left.  
\_\_\_\_\_  
\_\_\_\_\_

Special instructions for entry to the site (gates, keys, notifications or permissions, etc.):  
\_\_\_\_\_  
\_\_\_\_\_

- |   |     |
|---|-----|
| Is there a perpetual access agreement for monitoring and O&M?           | Yes |
| Is the site readily accessible (by 2WD vehicle)?                        | Yes |
| Was project completed as part of an overall watershed restoration plan? | Yes |
| Is the plan available electronically?                                   | Yes |
| Could you provide the DEP a copy of the plan?                           | Yes |
| Is a copy of the plan attached?   | Yes |



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Does the treatment system take all of the flow or is some of the flow bypassed? \_\_\_\_\_ It takes all of the flow.

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### Plans and Specifications:

#### As-Bid Project Drawings and Technical Specifications

Is this information available electronically? No  
 Could you provide the DEP a copy of the plan? Yes  
 Is a copy attached? No

#### As-Built Drawings

Is this information available electronically? No  
 Could you provide the DEP a copy of the plan? Yes  
 Is a copy attached? No

### **Construction and Project Funding Information**

What year was the project constructed? 2006

When (specific date) did project construction begin? \_\_\_\_\_

When (specific date) was project construction completed? \_\_\_\_\_

Who was the Construction Contractor? (Name, Address, Phone, email, contact person)

GrGuric Excavating,

When (specific date) did the treatment system go on-line? \_\_\_\_\_

#### Primary Funding Partners, and funding provided:

Source	True or false	Amount
Title IV, Appalachian Clean Streams	False	\$ .00
PADEP Growing Greener	False	\$ .00
10% AMD Set Aside Funds	True	\$400,219.00
EPA Section 319	False	\$ .00
OSM Watershed Cooperative Assistance Program	False	\$ .00
NRCS	False	\$ .00
EPA Watershed Protection	False	\$ .00
USCOE	False	\$ .00
University	False	\$ .00
Private/Foundation	False	\$ .00

How or by whom was treatment system construction funded or other funding not included in the table?

Source	Amount
	\$ .00
	\$ .00

### **Post Construction Operation, Monitoring and Maintenance**

Is there a Sampling and Monitoring Plan? Yes

Is the plan available electronically? No

Is a copy of the plan attached? No

Is treatment system currently being sampled and monitored? Yes

If so, by whom? Kiski-Conemaugh Stream Team and PASEC

Approximately how many hours per year are spent doing O,M&M for this system? 40

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Where are samples being analyzed? (Name, Address, Phone, email, contact person)

\_\_\_\_ Mahaffey labs and field samples

\_\_\_\_  
If DEP Lab is being used, what is the project ID and the Sample Information System (SIS) monitoring point IDs? \_\_\_\_\_ DEP is conducting in-stream monitoring above and below project in regards to requirements of Norfolk Southern Agreement with Blackleggs Creek Watershed Association. \_\_\_\_\_

\_\_\_\_\_  
Is there an Operation and Maintenance Plan? No  
Is the plan available electronically? No  
Could you provide the DEP a copy of this information? No  
Is a copy of the information attached? No

Comments on the treatment system: \_\_\_\_\_

**Post- Construction Discharge Flow and Monitoring Data**

Is the data available electronically? Yes  
In what format? Microsoft Excel  Access Database \_\_\_\_ Other(specify) \_\_\_\_

\_\_\_\_\_  
Indicate how flow was measured: \_\_ flow meter

\_\_\_\_\_  
Could you provide the DEP a copy of this information? Yes  
Is a copy of the information attached? yes

**Post-Construction Receiving Stream Flow and Monitoring Data**

Is the data available electronically? Yes  
In what format? Microsoft Excel  Access Database \_\_\_\_ Other(specify) \_\_\_\_

\_\_\_\_\_  
Indicate how flow was measured: \_\_ flow meter

\_\_\_\_\_  
Could you provide the DEP a copy of this information? Yes  
Is a copy of the information attached? yes  
Were any biological or fish surveys that were completed on the receiving stream? Yes

**Treatment System Maintenance and/or Rehabilitation**

Has rehabilitation work been performed at the site? No  
True(yes) or false(no): False

If yes, please list the rehabilitation activity. \_\_\_\_\_

If yes, please list the date of rehabilitation. 0

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If yes, please list the rehabilitation cost. \$ .00

What routine or non-routine maintenance issues have arisen since system was put online?

How was maintenance work funded?

What routine or non-routine maintenance is currently needed or anticipated in the next 1-3 years?

**Other Comments**

**Person(s) Completing this Form (Name, Address, Phone, email, Date Completed):** Anne Daymut, Watershed Specialist, Indiana County Conservation District, USDA Service Center, 1432 RTE 286 HWY E., Indiana PA 15701 724-463-8547 ext 118, [a.daymut@iccdpa.org](mailto:a.daymut@iccdpa.org), completed 1-7-09

**Is there any other person, company or organization that should be contacted for information about this treatment system or the information requested in this form?**  
(Include Name, Address, Phone, email, etc): For biological and water quality data contact Missy Reckner of Kiski-Conemaugh Stream Team, Scott Alexander of DEP, and Alex Lezark of PASEC