

Publicly Funded Mine Drainage Treatment or Abatement Project Information Sheet

General Project Information

Project Name and or No.: REEVESDALE SOUTH DIP TUNNEL PA-240
Location: Municipality and County: SCHUYLKILL
Watershed: WABASH CREEK
USGS Quadrangle: DELANO
Latitude and Longitude: 40.784444000000001 -76.007778000000002

Contact Information

Contact Organization: SCHUYLKILL COUNTY CONSERVATION DISTRICT
Contact Person: WAYNE LEHMAN
Contact Address: 1206 AG CENTER DRIVE
POTTSVILLE
PA
17901
Contact Telephone Number: 5706223742
Contact Email: wlehman@co.schuykill.pa.us

Organization Currently Responsible For Project Operations, Monitoring and Maintenance

Is this organization different from Contact Organization? True
Organization Name:
Organization Contact Name:
Organization Contact Address:
Organization Telephone Number: 0
Organization Email:

Site Information

Who owns the property the project is constructed upon?
BLASCHAK COAL

Driving Directions to the Project Site (from an easily identifiable reference point):
FROM MIDDLEPORT - TRAVEL 209 TOWARDS TAMARUA TO INTERSECTION FOR BROCKTON - CONTINUE ON RT 209 FOR APPROX 1/2 MILE - WATCH FOR YELLOW GATE ON RIGHT SIDE OF ROAD - SYSTEM IS SOUTH OF THAT GATE
Special instructions for entry to the site (gates, keys, notifications or permissions, etc.):
SCD HAS A KEY FOR THE GATE

Is there a perpetual access agreement for monitoring and O&M? Yes or No
Is the site readily accessible (by 2WD vehicle)? Yes or No
Was project completed as part of an overall watershed restoration plan? Yes or No
Is the plan available electronically? Yes or No
Could you provide the DEP a copy of the plan? Yes or No
Is a copy of the plan attached? Yes or No

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Project Description (Describe the treatment system including each individual component):

OXIDIC VERTICAL FLOW LIMESTONE TS - RAW WATER FLOWS INTO 2 SEPARATE LIMESTONE CELLS - WATER FLOWS DOWN THRU LIMESTONE INTO OUTFLOW PIPES - PIPES ARE ~~CONNECTED~~ CONNECTED TO WETLAND CELL ON NORTH SIDE OF SCH RIVER WETLAND CELL ALLOWS TIME FOR IRON TO PRECIPITATE B-Y FLOWING INTO RIVER

Pre-Construction Discharge Flow and Monitoring Data

Is data available electronically? Yes or No
In what format? Microsoft Excel ___ Access Database X Other(specify) ___
Indicate how flow was measured: UNKNOWN
Indicate laboratory that analyzed samples (or whether field kits were used)
UNKNOWN - USGS -

Could you provide this data to the DEP? Yes or No
Is a copy of the data attached? Yes or No

Pre-Construction Receiving Stream Flow and Monitoring Data

Is data available electronically? Yes or No
In what format? Microsoft Excel ___ Access Database ___ Other(specify) ___
Indicate how flow was measured: UNKNOWN
Indicate laboratory that analyzed samples
USGS

Were any biological or fish surveys completed? Yes or No
Could you provide this data to the DEP? Yes or No
Is a copy of the data attached? Yes or No

Treatment System Design Information and Criteria

Who or what firm completed project design? (Include name, address, phone, email and contact person, if available): CLAYTON BUBECK
RETTEW ASSOCIATES
5703852270

Are digital photographs of the site before, during and/or after construction available? Yes or No
Was there a Specific Restoration or Treatment Goal for this treatment system? Yes or No
If yes, please describe the goal:

REMOVE IRON LOADING TO SCH RIVER
What is the Design Flow Rate? 500 GAL MIN
Other design criteria (retention time, acidity loading or removal rate, metals loading or removal rate, alkalinity generation rate, etc.) 5HR RETENTION (?)

Does the treatment system take all of the flow or is some of the flow bypassed?
100% MOST OF THE TIME

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Plans and Specifications:

As-Bid Project Drawings and Technical Specifications

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

As-Built Drawings

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

Construction and Project Funding Information

What year was the project constructed? 2006
 When (specific date) did project construction begin? NA
 When (specific date) was project construction completed? NA
 Who was the Construction Contractor? (Name, Address, Phone, email, contact person)
Lloyd AUGST 420 Rock Road PINE GROVE PA 17963
CONTACT Lloyd AUGST 570-345-8626
 When (specific date) did the treatment system go on-line? NA

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	False	\$.00
EPA Section 319	True	\$226,156.00
OSM Watershed Cooperative Assistance Program	True	\$100,000.00
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 or No
 Is the plan available electronically? Yes or No
 Is a copy of the plan attached? Yes or No
 Is treatment system currently being sampled and monitored? Yes or No
 If so, by whom? SCD - SCH HEADWATERS
 Approximately how many hours per year are spent doing O,M&M for this system? 40-60

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

~~XXXXXXXXXX~~ NA

If DEP Lab is being used, what is the project ID and the Sample Information System (SIS) monitoring point IDs?

NA

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

Comments on the treatment system: Limestone covered but oxid

Post- Construction Discharge Flow and Monitoring Data

- Is the data available electronically? USGS-CRAVETTA Yes or No
- In what format? Microsoft Excel Access Database Other(specify) _____
- Indicate how flow was measured: WEIRS - TIME FLOW
- Could you provide the DEP a copy of this information? Yes or No
- Is a copy of the information attached? Yes or No

Post-Construction Receiving Stream Flow and Monitoring Data

- Is the data available electronically? USGS-CRAVETTA Yes or No
- 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 or No
- Is a copy of the information attached? Yes or No
- Were any biological or fish surveys that were completed on the receiving stream? Yes or No

Treatment System Maintenance and/or Rehabilitation

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

If yes, please list the rehabilitation activity. MUSHROOM COMPOST REMOVED - LIMESTONE ADDED - PHASE II INSTALLED LARGER WETLAND DETENTION POND

If yes, please list the date of rehabilitation. 2007

If yes, please list the rehabilitation cost. \$ 72,000

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

REQUIRES FLUSHING

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How was maintenance work funded?

VOLUNTEER EFFORTS

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

FLUSHING - MONITORING

Other Comments

Person(s) Completing this Form (Name, Address, Phone, email, Date Completed):

William Reichert 570-622-3742 Ext 118

PO Box 1385

Pottsville PA 17901

breichert5@verizon.net

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):
