General Project Information Project Name and or No.: _____ PENGROVE COAL COMPANY, BEAN BF 467 PA-273 Location: Municipality and County: ____ CHERRY VALLEY BOROUGH BUTLER Watershed: SLIPPERY ROCK CREEK USGS Quadrangle: <u>EAU CLAIRE</u> Latitude and Longitude: ____41.145833000000003 -79.804167000000007 **Contact Information** Contact Organization: PADEP BAMR Contact Person: GEORGE STEINER Contact Address: 400 MARKET STREET P.O. BOX 8476 HARRISBURG PA 17105 Contact Telephone Number: <u>71</u>7-783-5645 Contact Email: gsteiner@state.pa.us Organization Currently Responsible For Project Operations, Monitoring and Maintenance Is this organization different from Contact Organization? __Yes Organization Name: PADEP BAMR CAMBRIA OFFICE Organization Contact Name: P.J. Shah Organization Contact Address: 286 INDUSTRIAL PARK ROAD EBENSBURG PA Organization Telephone Number: 814-472-1800_ _ _ Organization Email: **Site Information** Who owns the property the project is constructed upon? HOMER HUNTER, SHERB JAMISON(LEESEE) Driving Directions to the Project Site (from an easily identifiable reference point): From Eau Claire, follow Rt. 38 north 3/4 mile to access road. Turn left on access road to project area. Special instructions for entry to the site (gates, keys, notifications or permissions, etc.): DEPARTMENT (CAMBRIA OFFICE) Should have key(s) if there is a lock on the manhole cover. Is there a perpetual access agreement for monitoring and O&M? Yes ⊠ No Is the site readily accessible (by 2WD vehicle)? ⊠Yes ☐ No Was project completed as part of an overall watershed restoration plan? Yes No Is the plan available electronically? Yes 🕅 No Could you provide the DEP a copy of the plan? Yes 🛛 No Is a copy of the plan attached? Yes 🖂 No Project Description (Describe the treatment system including each individual component): ANAEROBIC SULFATE REDUCING BIOREACTOR Pre-Construction Discharge Flow and Monitoring Data Is data available electronically? Yes No Page 1 of 5 PA-«PROJID»

Publicly Funded Mine Drainage Treatment or Abatement Project Infor	mation Shoot
III What format? Microsoft Excel [X] Access Database [Other (gnosify)	mation Sheet
Indicate how flow was measured: not known	
Indicate laboratory that analyzed samples (or whether field kits were used)	
<u>DEP LAB</u>	
Could you provide this data to the DEP?	⊠Yes ☐ No
Is a copy of the data attached?	
	⊠Yes ∐ No
Pre-Construction Receiving Stream Flow and Monitoring Data	
is data available electronically?	
In what format? Microsoft Excel Access Database Other (specify)	□Yes ⊠ No
Indicate how flow was measured: not known	
Indicate laboratory that analyzed samples	
DEP LAB	•
Were any biological or fish surveys completed?	☐Yes ⋈ No
Could you provide this data to the DEP?	Yes No
Is a copy of the data attached?	Yes No
	☐ 1 e2 ☐ 1/0
Treatment System Design Information and Criteria	
Who or what firm completed project design? (Include name, address, phone, emaners on if available).	
person, if available): PADEP BAMR CENTRAL OFFICE	ii and contact
400 MARKET STREET P.O. BOX 8476, HARRISBURG, PA 17	7405
<u> MICHAEL LAZORCIK</u>	105
717-783-7927, mlazorcik@state.pa.us	
Are digital photographs of the site before, during and/or after construction available?	Yes \ No
was incre a specific Restoration or Treatment Goal for this treatment system?	Yes No
If yes, please describe the goal: Reduce the AMD from the existing seen	23 - 45 [] 1.10
what is the Design Flow Rate? 10 GPM	
Other design criteria (retention time, acidity loading or removal rate, metals loadi	ng or removal
rate, arkaninty generation rate, etc.) Joe Schueck provided design od Apperatio Sulf	ate reducing
Bioreactor.	<u>ato roddoning</u>
Does the treatment system take all of the flow or is some of the flow bypassed?	
ALL OF THE FLOW	

Plans and Specifications:		
As-Bid Project Drawings and Technical Specification	19	
Is this information available electronically?	15	5
Could you provide the DEP a copy of the plan	.9	Yes ☐ No
Is a copy attached?	₹	∑Yes ☐ No
As-Built Drawings		⊠Yes □ No
Is this information available electronically?		
Could you provide the DEP a copy of the plan	n	∐Yes ⊠ No
Is a copy attached?	<i>:</i>	☐Yes 🏻 No
15 w copy unuclicu:		∐Yes ⊠ No
Construction and Project Funding Information		
\\\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		
What year was the project constructed? 2005 When (specific date) did project construction begin?		
When (specific date) was project construction begin?	10/21/2004	
When (specific date) was project construction complete	ted? <u>7/20/2005</u>	
Who was the Construction Contractor? (Name, Address Joseph C. Purvear Trucking & Execution 2544)	ss, Phone, email, co	ontact person)
Joseph C. Puryear Trucking & Excavating, 254 Harrisville Joseph C. Puryear	Road, West Sunbur	<u>v, PA 16061</u>
When (specific date) did the treatment system go on-li	no? unles au	
via	ne: unknown	
Primary Funding Partners, and	finding	
Source		
Title IV, Appalachian Clean Streams	True or false	Amount
PADEP Growing Greener	<u>False</u>	<u> </u>
10% AMD Set Aside Funds	<u>False</u>	
EPA Section 319	<u>False</u>	
	<u>False</u>	
OSM Watershed Cooperative Assistance Program	<u>False</u>	
NRCS	<u>False</u>	
EPA Watershed Protection	<u>False</u>	
USCOE	<u>False</u>	
University	False	
Private/Foundation	False	
		
How or by whom was treatment system construction fu	nded or other fundi	ing not included in the
table?	or other rung,	ing not included in the
Source		Amount
Bonds		\$140,900.00
		<u> </u>
Day Co. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Post Construction Operation, Monitoring and Main	tenance	
s there a Sampling and Monitoring Plan?		□Yes ⊠ No
s the plan available electronically?		☐Yes 🕅 No
s a copy of the plan attached?		☐Yes ⊠ No
s treatment system currently being sampled and monito	red?	Yes No
I so, by whom? P. J. Shah		
Approximately how many hours per year are spent doing O,M&M for this system? unknown		
vincte are samples being analyzed? (Name, Address, Pl	one, email, contact	person)
DEP lab		

monitoring point IDs?	m (S1S)
Is there an Operation and Maintenance Plan?	Yes No
Is the plan available electronically?	Yes No
Could you provide the DEP a copy of this information?	
Is a copy of the information attached?	☐Yes ⊠ No
is a copy of the information attached:	☐Yes ☒ No
Comments on the treatment system:	
Post- Construction Discharge Flow and Monitoring Data	
Is the data available electronically?	☐Yes ⊠ No
In what format? Microsoft Excel Access Database Other(specify)	
Indicate how flow was measured:	
Indicate how flow was measured:Could you provide the DEP a copy of this information?	☐Yes 🛛 No
Is a copy of the information attached?	☐Yes 🛛 No
Post-Construction Receiving Stream Flow and Monitoring Data	•
Is the data available electronically?	☐Yes ⊠ No
In what format? Microsoft Excel Access Database Other(specify)	
Indicate how flow was measured:	
Could you provide the DEP a copy of this information?	☐Yes 🔯 No
Is a copy of the information attached?	☐Yes 🔯 No
Were any biological or fish surveys that were completed on the receiving stream?	☐Yes ☐ No
Treatment System Maintenance and/or Rehabilitation Has rehabilitation work been performed at the site? True(yes) or false(no):	∐Yes ⊠ No
If yes, please list the rehabilitation activity.	
If yes, please list the date of rehabilitation.	·
If yes, please list the rehabilitation cost.	
What routine or non-routine maintenance issues have arisen since system was put on N/A	online?
How was maintenance work funded? N?A	
What routine or non-routine maintenance is currently needed or anticipated in the IN/A	next 1-3 years?
Other Comments N/A	
Person(s) Completing this Form (Name, Address, Phone, email, Date Completed): Michael S. Lazorcik, BAMR, RCSOB, PO Box 8476, 400 Market, Harrisburg, PA 17105 7177837927, mlazorcik@state.pa.us, 1/20/09	

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):
P.J. Shah, Cambria Office, (814)472-1800