

Publicly Funded Mine Drainage Treatment or Abatement Project Information Sheet

General Project Information

Project Name and or No.: BABB CREEK ANNA S. PA-050
Location: Municipality and County: TIOGA
Watershed: BABB CREEK
USGS Quadrangle: MORRIS
Latitude and Longitude: 41.623333000000002 -77.303055999999998

Contact Information

Contact Organization: BABB CREEK WATERSHED ASSOCIATION
Contact Person: WILLIAM BEACOM
Contact Address: 35 DARTT SETTLEMENT ROAD, WELLSBORO, PA 16901
Contact Telephone Number: 5707247564
Contact Email: stargazr@ptd.net

Organization Currently Responsible For Project Operations, Monitoring and Maintenance

Is this organization different from Contact Organization? True FALSE
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? PA DCNR Bureau of Forestry, Tioga State Forest, One Nessmuk Lane, Wellsboro, PA 16901

Driving Directions to the Project Site (from an easily identifiable reference point):

FROM VILLAGE OF MORRIS GO NORTH ON RT 287 3.1 MILES TO ANNAS ROAD (T-345). TURN LEFT GO .6 MILES, BEAR LEFT WHEN ANNAS RD. MAKES SHARP RIGHT TURN. FOLLOW ACCESS ROAD ABOUT 1 MILE TO TREATMENT SYSTEM

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

ACCESS ROAD GATED & LOCKED. OBTAIN PERMISSION & KEY FROM LANDOWNER AT 570-724-2868

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):

CONSISTS OF 4 VERTICAL FLOW PONDS AND ONE  
MAN MADE WETLAND, AND ONE FLUSHING POND

**Pre-Construction Discharge Flow and Monitoring Data** DEP 515

Is data available electronically? \_\_\_\_\_ Yes or No

In what format? Microsoft Excel \_\_\_\_\_ Access Database \_\_\_\_\_ Other(specify) \_\_\_\_\_

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

Indicate laboratory that analyzed samples (or whether field kits were used)

DEP LAB BABBCREEK/BABB CREEK WATERSHED PROJECT  
MONITORING POINT ID #'S 464 AND 466

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: \_\_\_\_\_

Indicate laboratory that analyzed samples \_\_\_\_\_

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): BOB HEDIN

HEDIN ENVIRONMENTAL

4125712204

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: \_\_\_\_\_

What is the Design Flow Rate? \_\_\_\_\_

Other design criteria (retention time, acidity loading or removal rate, metals loading or removal rate, alkalinity generation rate, etc.) \_\_\_\_\_

Does the treatment system take all of the flow or is some of the flow bypassed?

DURING PERIODS OF VERY HIGH WATER, PORTION OF  
DISCHARGE BYPASSES SYSTEM

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**Plans and Specifications:**

As-Bid Project Drawings and Technical Specifications *DRAWINGS ONLY*

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? 2004

When (specific date) did project construction begin? OCTOBER 2002

When (specific date) was project construction completed? MAY 2004

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

E.M. BROWN PO BOX 767 CLEARFIELD, PA 16830

DENNIS MERROW 814 765-3461

When (specific date) did the treatment system go on-line? JANUARY 2004

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

Source	True or false	Amount
Title IV, Appalachian Clean Streams	False	\$ .00
PADEP Growing Greener	True	\$1,108,314.00
10% AMD Set Aside Funds	False	\$ .00
EPA Section 319	False	\$ .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
Babb Creek Watershed Association	\$ .00
	\$ .00

*PART OF OPERATIONS & MAINT. PLAN*

**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? BABB CREEK WATERSHED ASSN EMPLOYEES

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)

DEP LAB UNTIL 1/7/07. NOW GTC COAL ANALYSIS LAB  
SUMMERVILLE, PA 15864 814-849-2559

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

BABB CREEK / BABB CREEK WATERSHED PROJECT  
MONITORING POINT I.D. #'S 46.4, 46.6, 46.41, 46.42, 46.43, 46.44, AND 46.45

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: SYSTEM HAS BEEN VERY EFFECTIVE IN TREATING MINE DISCHARGES

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

Is the data available electronically?

ATTACHED + DEP SIS

Yes or No

In what format? Microsoft Excel \_\_\_ Access Database \_\_\_ Other(specify) \_\_\_

Indicate how flow was measured: BUCKET & STOP WATCH

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 NONE**

Is the data available electronically?

Yes or 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 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. \_\_\_\_\_

If yes, please list the date of rehabilitation. 0

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

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

NINE FLUSHING VALVES HAD TO BE DUG UP TO REPLACE SHEER PINS. REPLACED WITH STAINLESS STEEL ONE. ACID WATER ATE PINS AWAY. DITCH THAT TAKE TREATED WATER FROM VFP'S HAD TO BE CLEAN OUT TWICE - PLUGGED WITH IRON SLUDGE + VEGETATION. FLOOD DAMAGE IN 2004 ABOUT \$7,000. Page 4 of 5 - TROPICAL STORM IVAN PA-50

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How was maintenance work funded?

BCWA FUNDS

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

CLEAN DITCH THAT CARRIES WATER FROM VFP'S TO WETLAND EVERY YEAR. STIR COMPOST LAYER ON ALL VFP'S IN 2010

**Other Comments**

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

SAME AS CONTACT PERSON 12/17/08

**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):**