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

Project Name and or No.: Ravir	e Wetland	AD 605
Location: Municipality and County: _	Tremont Twp.	Schuylkill
Watershed: Swatara Creek	•	
USGS Quadrangle: Pine Grove		
Latitude and Longitude: 40.5915		-76.4110
<b>Contact Information</b>		
Contact Organization:	PADEP BAMR	
Contact Person:	MIKE KORB	
Contact Address:		RE, 5TH FLOOR
<del>-</del>		
<del>-</del>	PA 18711	
Contact Telephone Number:		
Contact Email:		IS .
Contact Eman.	mkorb@state.pa.c	
Organization Currently Responsible	e For Project Oper	rations, Monitoring and Maintenance
Is this organization different from Cor	_	
Organization Name:	<b>C</b>	·
Organization Contact Name:		
Organization Contact Name.  Organization Contact Address:		
Organization Contact Address.		
_		
_		
Organization Telephone Number: _		
Organization Email:		
Site Information		
Who owns the property the project is of	constructed upon?	
Pennsylvania Department of Transporta	ation	
Driving Directions to the Project Site		
•	the I-81 north bound	land at the Ravine Exit (104) and north of
the northbound on ramp.		
Special instructions for entry to the sit	a (gotas kavs notif	ications or parmissions atc.)
special instructions for entry to the sit	c (gates, keys, noth	leations of permissions, etc.).
Is there a perpetual access agreement to	for monitoring and	O&M?
Is the site readily accessible (by 2WD	_	Yes No
Was project completed as part of an or		
Is the plan available electronic		Yes No
Could you provide the DEP a could you provide the DEP a could you provide the DEP and the the	•	Yes No
Is a copy of the plan attached?	copy of the plan.	Yes No
is a copy of the plan attached:		165140
Project Description (Describe the treat	ment system includ	ling each individual component):
The project consisted of constructing tw		

The project consisted of constructing two anoxic wetland cells. Each cell consisted of a mixture of mushroom compost and limestone and approximately two and one half feet of standing water. The berms and spillways of the wetland cells were constructed of on site material and were lined with R-6 Rock. The project does not treat an individual mine discharge. Instead the system treats all of the water of the Lower Rausch Creek.

Pre-Construction Discharge Flow and Monitoring Data	
Is data available electronically?	☐Yes ☐ 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)	
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?	☐Yes ☐ 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 No
Could you provide this data to the DEP?	]Yes □ No
Is a copy of the data attached?	Yes No
Treatment System Design Information and Criteria	
Who or what firm completed project design? (Include name, address, phone, email a	ınd contact
person, if available): PA DEP - Dennis Palladino	
2 Public Sq. 5 <sup>th</sup> Flr., Wilkes-Barre, PA 18711	
(570)-830-3190	
dpalladino@state.pa.us	¬
<u>=</u>	∐Yes ☐ No
1	Yes No
If yes, please describe the goal: Reduce the iron loading on Lower Rausch Creek	
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?	
The treatment system treats all of the flow of Lower Rausch Creek	

Plans and Specifications:						
As-Bid Project Drawings and Technical Specifications						
Is this information available electronically?	⊠Yes ☐ No					
Could you provide the DEP a copy of the plan?	Yes No					
Is a copy attached?	Yes No					
As-Built Drawings						
Is this information available electronically?		☐Yes ⊠ No				
Could you provide the DEP a copy of the plan?	Yes No					
Is a copy attached?						
<b>Construction and Project Funding Information</b>						
What year was the project constructed? July 1, 199	)7					
When (specific date) did project construction begin?	July 1, 1997					
When (specific date) was project construction complet	ed? <u>February 27, 19</u>	998				
Who was the Construction Contractor? (Name, Addres WB-BAMR AD Crew	ss, Phone, email, con	ntact person)				
When (specific date) did the treatment system go on-li	ma?					
when (specific date) did the treatment system go on-in	ne:					
Primary Funding Partners, and	funding provided:					
Source	True or false	Amount				
Title IV, Appalachian Clean Streams						
PADEP Growing Greener						
10% AMD Set Aside Funds	True	291409				
EPA Section 319						
OSM Watershed Cooperative Assistance Program	<del></del>	<del></del>				
NRCS						
EPA Watershed Protection						
USCOE		<del></del>				
University						
Private/Foundation						
Filvate/Foundation						
How or by whom was treatment system construction futable?	unded or other fund					
Source		Amount				
DEP/EPA and many others- Dan Koury has all the funding sources		\$272,288.00				
L		<u> </u>				
Post Construction Operation, Monitoring and Mair	ntenance					
Is there a Sampling and Monitoring Plan?						
Is the plan available electronically?	Yes No					
Is a copy of the plan attached?						
Is treatment system currently being sampled and monitored? $\square$ Yes $\square$ No						
If so, by whom?						
Approximately how many hours per year are spent doing O,M&M for this system?						
Where are samples being analyzed? (Name, Address, Phone, email, contact person)						
r						

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

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: Flow meter ⊠Yes ☐ No Could you provide the DEP a copy of this information? Is a copy of the information attached?  $\square$ Yes  $\square$  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? ☐Yes ⊠ No True(yes) or false(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 online? Water was by-passing the system underground due to the porus material available on site. Clay was placed at various locations to stop by-passing 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): Todd Wood 2 Public Sq., 5<sup>th</sup> Flr., Wilkes-Barre, PA 18711 (570)-830-3171 twood@state.pa.us

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):				