

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

Project Name and or No.: BABB CREEK RED RUN DIVERSION WELLS
PA-090

Location: Municipality and County: TIOGA

Watershed: BABB CREEK

USGS Quadrangle: CHERRY FLATS

Latitude and Longitude: 41.66166700000001 -77.16555999999995

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? False

Organization Name: BABB CREEK WATERSHED ASSOCIATION

Organization Contact Name: STEVEN SCHLESING

Organization Contact Address: 2051 REED STREET
WILLIAMSPORT
PA
17701

Organization Telephone Number: 5703220749

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 ARNOT, TAKE LANDRUS ROAD AT WESTERN END. GO
ABOUT 1 MILE, ACCESS ROAD TO SITE ANGLES OFF ON RIGHT, JUST
BEFORE LARGE POWERLINE. FOLLOW ACCESS ROAD ABOUT 1 MILE
TO SITE - ON LEFT ALONG RED RUN.

Special instructions for entry to the site (gates, keys, notifications or permissions, etc.):
ACCESS ROAD LOCKED + GATED. OBTAIN PERMISSION AND KEY
FROM LANDOWNER @ 570-724-7564

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 ONE DAM IN RED RUN AND TWO LIMESTONE
DIVERSION WELLS. ONE WELL GET WATER FROM DAM AND
THE OTHER DIRECTLY FROM THE DAVIS MINE.

Pre-Construction Discharge Flow and Monitoring Data UNKNOWN

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) ___

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 UNKNOWN

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):
0

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?
TAKE ALL THE FLOW FROM DAVIS MINE AND ONLY A
PORTION OF RED RUN

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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? 1995

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)

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	False	\$.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
Babb Creek Trust Funds	\$1,500.00
	\$.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? EMPLOYEES OF BABB CREEK WATERSHED ASSOCIATION

Approximately how many hours per year are spent doing O,M&M for this system? 100

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

DEP LAB

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

BABOCREEK/DABB CREEK WATERSHED PROJECT
MONITORING POINT ID#S 8.3, 8.4, 8.41

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: _____

Post- Construction Discharge Flow and Monitoring Data DEP SIS

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

Post-Construction Receiving Stream Flow and Monitoring Data

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?

INTAKE IN RED BOX DAM CONTINUOUSLY GETS PLUGGED AFTER HIGH WATER EVENTS. WELLS MUST BE FILLED WEEKLY SO ACCESS ROAD & LANDUS ROAD MUST BE PLOWED IN WINTER.

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How was maintenance work funded?

BY BCWA

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

REPLACE NOZZLES EVERY YEAR OR TWO

Other Comments

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

SAME AS CONTACT 12/15/09

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):

