

AMD Treatment System Form for Dashed AML/AMD Remediation Projects

Project Name: Glenn 19 AMLIS #: _____

Latitude: 41 11 25 Longitude: 79 12 18 Determined by GPS? Y ☒ N ☐

Watershed Name: Mill Creek Receiving Stream: Little Mill Creek

USGS Quadrangle: Corsica County: Jefferson

Township/City: Union

Contact Person/Organization:							
Name:				Address:			
Peter Dalby				221 Ponds View Lane, Marble, PA 16334			
Telephone Number + Area Code:							
814 782 3227							
Email Address:							
barbara_dalby@yahoo.com							
Organization responsible for operation/maintenance of project if different than above:							
Name:				Address:			
Telephone Number + Area Code:							
Email Address:							
Source of AMD:							
Underground	<input checked="" type="checkbox"/>	Surface	<input type="checkbox"/>	Refuse	<input type="checkbox"/>	Oil-Gas well	<input type="checkbox"/>
Treatment System Information:							
Year Constructed:		9/2011		Total Capital Cost:		\$	
Was this a Rehabilitation Project?		Y <input type="checkbox"/>	N <input checked="" type="checkbox"/>	Date of Original System:		Costs Of Rehabilitation: \$	
Describe Rehabilitation Activities:							

If this project includes land reclamation as more than 50% of the total cost, what is the estimated cost of the land reclamation? \$ _____

Primary Funding Partners and Funding Provided				
Source		Amount		
Title IV, Appalachian Clean Streams				
PADEP Growing Greener				
PADEP Other				
PADCNR				
AMD Set Aside Funds				
EPA Section 319				
OSM Watershed Cooperative Assistance Program				
NRCS				
EPA Watershed Protection				
USCOE				
University				
Bond Forfeiture				
Reclamation in Lieu of Penalty				
Consent Order				
Foundation for PA Watersheds				
Private/Foundation				
In-kind Contributions				
Other Funding Partner (Please note)		NRCS PL 566 Economic Stimulus		
Treatment Technology: Select all that apply at the site.				
Treatment System	# of Treatment Cells	Contain Siphon Automatic Flushing		Comments
		Y	N	
Typical methods		<input type="checkbox"/>	<input type="checkbox"/>	
Aerobic Wetland		<input type="checkbox"/>	<input type="checkbox"/>	
Anaerobic Wetland		<input type="checkbox"/>	<input type="checkbox"/>	
ALD		<input type="checkbox"/>	<input type="checkbox"/>	
Limestone Sand Dosing		<input type="checkbox"/>	<input type="checkbox"/>	
Diversion Well/Mechanical Limestone Addition	2	<input type="checkbox"/>	<input type="checkbox"/>	Topography and several AMD points did not allow for an ALD, therefore, two upflow Limestone columns (ULC), each located in concrete tanks, were utilized.
Oxic Limestone Drain (OLD)		<input type="checkbox"/>	<input type="checkbox"/>	
Oxic Limestone Channel (OLC)		<input type="checkbox"/>	<input type="checkbox"/>	
Low pH Fe Oxidation Channel		<input type="checkbox"/>	<input type="checkbox"/>	
Limestone Pond (Specify UP, DF or HF under comments)		<input type="checkbox"/>	<input type="checkbox"/>	
SAP (Specify UP, DF or HF under comments)		<input type="checkbox"/>	<input type="checkbox"/>	
Bio-Reactor (Specify UP, DF or HF under comments)		<input type="checkbox"/>	<input type="checkbox"/>	
VFP (Specify UP, DF or HF under comments)		<input type="checkbox"/>	<input type="checkbox"/>	
Manganese Removal Bed	1	<input type="checkbox"/>	<input type="checkbox"/>	
Pyrolusite Bed		<input type="checkbox"/>	<input type="checkbox"/>	
Settling/oxidation Pond	1	<input type="checkbox"/>	<input type="checkbox"/>	

UF = Upflow

DF = Downflow (like in a traditional SAP)

HF = Horizontal Flow

Other Methods	Comments
Well Plugging	
Steel Slag	
Land Reclamation to cover toxic material or prevent water infiltration.	
In-Situ Treatment <i>(Include type under comments)</i>	
Chemical Addition Treatment Plant <i>(Include Chemical used under comments)</i>	
Lime Doser <i>(Include Chemical used under comments)</i>	
Mechanical Aeration <i>(Include type under comments)</i>	
Others <i>(discuss in comments)</i>	

UF = Upflow

DF = Downflow (like in a traditional SAP)

HF = Horizontal Flow

Project Designer:			
EADS Group/Dietz Gourley Consulting			
Organization:			Telephone Number + Area Code:
			814-764-5050 and 814-278-7596
Water Information:			
	Inflow	Outflow	Load Reductions (lbs/day)
Flow (gpm)	15-100	15-100	
pH	less than 5		
Total Iron (mg/L)	20		
Ferrous Iron (mg/L)			
Hot Acidity (mg/L)	80		
Alkalinity (mg/L)	20		
Total Aluminum (mg/L)	less than 0.5		
Total Manganese (mg/L)	35		
Date of Collection	4/2006		

If more detailed water quantity and quality data is available, please provide the following:	
Contact:	
Telephone:	
Email:	

If receiving stream or macroinvertebrate information is available please provide the following:		
Contact:		
Telephone:		
Email:		
Comments: (specific to O&M; performance; impact on receiving stream. Include date of inspection and name and telephone number of person making comment)		
Date	Name	Telephone Number + Area Code
Comment: _____ _____ _____ _____		
Any links specific to this watershed that should be included?		
Web Address		

Send to your DEP Project Advisor with your Final Report Paperwork: One digital copy of Operational, Maintenance and Repair/Replacement (O, M & R) Plan that includes the “as-built” drawings and site schematics in PDF, and any water quality information in EXCEL format.

After DEP Project Advisor has approved your Final Report Paperwork, send to the Bureau of Conservation and Restoration: One digital copy of the Dashed form in Word, the Operational, Maintenance and Repair/Replacement (O, M & R) Plan that includes the “as-builts” drawings and site schematics in PDF, and any water quality information in EXCEL format to the address under Final Report Guidelines.