

**AMD Treatment System Form for Datashed
 AML/AMD Remediation Projects**

Project Name: Mary D East AMD 54(3695)101.1 AMLIS #: _____

Latitude: 40/45/32 Longitude: -76/03/01 Determined by GPS? Y N

Watershed Name: Schuylkill River Receiving Stream: Swift Creek

USGS Quadrangle: Delano, PA County: Schuylkill

Township/City: Schuylkill Township

Contact Person/Organization:							
Name:				Address:			
Todd Wood				2 Public Sq, 5 th Flr.			
Telephone Number + Area Code:				Wilkes Barre, PA 18701			
(570) 830-3171							
Email Address:							
twood@pa.gov							
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:	2009			Total Capital Cost:	\$ \$268,253.55		
Was this a Rehabilitation Project?	<input type="checkbox"/> Y	<input checked="" type="checkbox"/> N	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	\$77,552.76
PADEP Growing Greener	\$78,859.90
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)	\$111,840.89 - Exelon

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	1	<input type="checkbox"/>	<input type="checkbox"/>	2.7 Acres
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		<input type="checkbox"/>	<input type="checkbox"/>	
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		<input type="checkbox"/>	<input type="checkbox"/>	
Pyrolusite Bed		<input type="checkbox"/>	<input type="checkbox"/>	
Settling/oxidation Pond	1	<input type="checkbox"/>	<input type="checkbox"/>	0.13 Acre

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>	

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Project Designer:			
Todd Wood			
Organization:			Telephone Number + Area Code:
DEP-BCR			570-830-3171
Water Information:			
	Inflow	Outflow	Load Reductions (lbs/day)
Flow (gpm)	650	780	
pH	6.5	6.8	
Total Iron (mg/L)	7.1	1.3	
Ferrous Iron (mg/L)	6.5		
Hot Acidity (mg/L)	-14.6	-34.2	
Alkalinity (mg/L)	65.7	43.8	
Total Aluminum (mg/L)	<0.2	<0.2	
Total Manganese (mg/L)	1.3	1.3	
Date of Collection	Average values	Average values	

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: <i>(specific to O&M; performance; impact on receiving stream. Include date of inspection and name and telephone number of person making comment)</i>		
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 Datashed 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.