

# Publicly Funded Mine Drainage Treatment or Abatement Project Information Sheet

## General Project Information

Project Name and or No.: ROCK TUNNEL PA-175  
Location: Municipality and County: SOMERSET  
Watershed: BENS CREEK  
USGS Quadrangle: HOOVERSVILLE  
Latitude and Longitude: 40.224167000000001 -78.988889

## Contact Information

Contact Organization: GREATER JOHNSTOWN WATERSHED ASSOCIATION  
Contact Person: WILLIAM TOWNS  
Contact Address: 108 4th STREET  
JEROME  
PA  
15937  
Contact Telephone Number: 0  
Contact Email: William.Towns@pa.usda.gov

## Organization Currently Responsible For Project Operations, Monitoring and Maintenance

Is this organization different from Contact Organization? True  
Organization Name: SOMERSET CONSERVATION DISTRICT  
Organization Contact Name: LENNY LICHVAR  
Organization Contact Address: 6024 GLADES PIKE, SOMERSET, PA 15501  
Organization Telephone Number: 814-445-8979 x136  
Organization Email: \_\_\_\_\_

## Site Information

Who owns the property the project is constructed upon?  
GREATER JOHNSTOWN WATERSHED ASSOC.

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

TAKE Rt 601 S. FROM JEROME, RIGHT ON MILLER RD  
GO 200 FT MAKE RIGHT, N. TO THOMAS MILLS, SITE IS  
1 MILE DOWN THE ROAD ON LEFT

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

Is there a perpetual access agreement for monitoring and O&M?  
Is the site readily accessible (by 2WD vehicle)?  
Was project completed as part of an overall watershed restoration plan?  
Is the plan available electronically?  
Could you provide the DEP a copy of the plan?  
Is a copy of the plan attached?

Yes or No  
Yes or No  
Yes or No  
Yes or No  
Yes or No  
Yes or No

**Publicly Funded Mine Drainage Treatment or Abatement Project Information Sheet**  
Project Description (Describe the treatment system including each individual component):

PASSIVE TREATMENT SYSTEM

**Pre-Construction Discharge 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: CONVENTIONAL WAY

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

GEOCHEMICAL TESTING (preconstruction data BASE 1987-1988)

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):

SOMERSET CONSERVATION DISTRICT  
0 6024 GLADES PIKE SUITE 103  
SOMERSET PA 15501

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:

YES, TO PROTECT THE STOCKED IN WILD POPULATION OF BEN'S CREEK

What is the Design Flow Rate? 1,000 GPM

Other design criteria (retention time, acidity loading or removal rate, metals loading or removal rate, alkalinity generation rate, etc.) NOT AVAILABLE

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

SOME OF THE FLOW IS BY PASSED

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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? 1994  
 When (specific date) did project construction begin? Dec. 8, 1993  
 When (specific date) was project construction completed? July 30, 1994  
 Who was the Construction Contractor? (Name, Address, Phone, email, contact person)  
LION MINING (NO LONGER IN BUSINESS)  
 When (specific date) did the treatment system go on-line? July 31, 1994

### Primary Funding Partners, and funding provided:

Source	True or false	Amount
Title IV, Appalachian Clean Streams	False	\$ .00
PADEP Growing Greener	True	\$146,000.00
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
Reclamation in lieu of Penalty	\$ .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? \_\_\_\_\_  
 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?

PA 0243

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:

This system was reconfigured in 2002 with baffles put in place and now are in critical need of being repaired

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

Is the data available electronically?

Yes or ☒ No

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

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) N/A

Indicate how flow was measured: Refer to DEP File PA0243

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

See Above

If yes, please list the rehabilitation activity. See Above - 2002

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?

Incorrect Baffles Failed - Poor Design

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How was maintenance work funded?

NO Funding, NO WORK Performed

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

Clean out Deposition of IRON  
Precipitates

**Other Comments**

Original project was rec-in-lieu. Major upgrade in 2001.

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

DR. ULDIS Kaktins & William Towns

**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):

Somerset Conservation District  
Lenny Lichvar