

**GIS Data Collection Form**  
**AML/AMD Remediation Projects**

State:

KY:\_\_\_ MD:\_\_\_ OH:\_\_\_ PA:\_\_\_ TN:\_\_\_ VA:\_\_\_ WV:\_\_\_

Last date record was updated:\_\_\_\_\_

Submitted By: \_\_\_\_\_

Telephone No. \_\_\_\_\_

Date: \_\_\_\_\_

Project Name: \_\_\_\_\_

Latitude:\_\_\_\_\_ Longitude:\_\_\_\_\_ Determined by GPS? Y N

Watershed Name:\_\_\_\_\_ Receiving Stream:\_\_\_\_\_

USGS Quadrangle:\_\_\_\_\_ County:\_\_\_\_\_

Contact Person/Organization:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Organization responsible for operation/maintenance of project if different than above:

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Source of AMD:

Underground \_\_\_ Surface \_\_\_ Refuse \_\_\_ Oil-Gas well \_\_\_

Year Constructed:\_\_\_\_\_ Total Initial Cost:\_\_\_\_\_

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

Rehabilitation: Y N

Date \_\_\_\_\_

Costs \_\_\_\_\_

Describe Rehabilitation Activities:

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Primary Funding Partners, and funding provided:

Source	Amount
Title IV, Appalachian Clean Streams	
PADEP Growing Greener	
10% AMD Set Aside Funds	
EPA Section 319	
OSM Watershed Cooperative Assistance Program	
NRCS	
EPA Watershed Protection	
USCOE	
University	
Private/Foundation	

Treatment Technology: Select all that apply at the site:

Treatment system	# of treatment cells	Contain Siphon (Y or N) Automatic Flushing
Aerobic Wetland		
Anerobic Wetland		
ALD		
In-Situ Treatment		
Chemical addition treatment plant		
Chemical Doser		
Limestone Sand Dosing		
Steel Slag		
Mechanical Aeration		
Diversion Well/mechanical limestone add.		
UF Limestone Bed		
DF Limestone Bed		

HF Limestone Bed		
Manganese Removal Bed		
Oxic Limestone Channel (OLD)		
UF SAP		
DF SAP		
HF SAP		
UF Bio-Reactor		
DF Bio-Reactor		
HF Bio-Reactor		
Well Plugging		
Settling/oxidation Pond		
Land Reclamation to cover toxic material or prevent water infiltration.		
Others (discuss in comments)		

UF = Upflow    HF = Horizontal Flow    DF = Downflow (like in a traditional SAP)

Comments: \_\_\_\_\_

Project Designer: \_\_\_\_\_  
 Organization            \_\_\_\_\_  
 Telephone Number      \_\_\_\_\_

Water Information:

	Inflow	Outflow
Flow (gpm)		
pH		
Total Iron		
Ferrous Iron		
Hot Acidity		
Alkalinity		
Aluminum		
Manganese		
Date of Collection		
ID Number		

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

Contact: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
e-mail: \_\_\_\_\_

If receiving stream or macro-invertebrate information is available please provide the following:

Contact: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
e-mail: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any links specific to this watershed that should be included?

Web Address: \_\_\_\_\_