

## WETLAND DETERMINATION DATA FORM - Northcentral and Northeast Region

Project/Site: SPP City/County: Carlton Sampling Date: 9/5/2014  
 Applicant/Owner: Enbridge State: MN Sampling Point: CRC5017\_300d2W  
 Investigator(s): LEB/DGL Section, Township, Range: \_\_\_\_\_  
 Landform (hillslope, terrace, etc.): Depression Local relief (concave, convex, none) CC  
 Slope (%): 0 - 2% Lat.: 46.58749 Long.: -92.983169 Datum: \_\_\_\_\_  
 Soil Map Unit Name: 355 NWI Classification: PSSB  
 Are climatic/hydrologic conditions of the site typical for this time of the year? ☒ (If no, explain in remarks)  
 Are vegetation ☐, soil ☐, or hydrology ☐ significantly disturbed? Are "normal  
 Are vegetation ☐, soil ☐, or hydrology ☐ naturally problematic? circumstances" present? ☒  
 (If needed, explain any answers in remarks)

### SUMMARY OF FINDINGS

|                                                                                                                                                                                            |                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| Hydrophytic vegetation present? <u>Y</u><br>Hydric soil present? <u>Y</u><br>Indicators of wetland hydrology present? <u>Y</u>                                                             | <b>Is the sampled area within a wetland?</b> <u>Y</u><br><br>If yes, optional wetland site ID: _____ |
| Remarks: (Explain alternative procedures here or in a separate report.)<br>The wetland is a small open bog community within a larger basin wetland complex of predominantly alder thicket. |                                                                                                      |

### HYDROLOGY

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>Primary Indicators</b> (minimum of one is required; check all that apply)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Secondary Indicators</b> (minimum of two required)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |
| <input type="checkbox"/> Surface Water (A1)<br><input checked="" type="checkbox"/> High Water Table (A2)<br><input checked="" type="checkbox"/> Saturation (A3)<br><input type="checkbox"/> Water Marks (B1)<br><input type="checkbox"/> Sediment Deposits (B2)<br><input type="checkbox"/> Drift Deposits (B3)<br><input type="checkbox"/> Algal Mat or Crust (B4)<br><input type="checkbox"/> Iron Deposits (B5)<br><input type="checkbox"/> Inundation Visible on Aerial Imagery (B7)<br><input type="checkbox"/> Sparsely Vegetated Concave Surface (B8) | <input type="checkbox"/> Water-Stained Leaves (B9)<br><input type="checkbox"/> Aquatic Fauna (B13)<br><input type="checkbox"/> Marl Deposits (B15)<br><input type="checkbox"/> Hydrogen Sulfide Odor (C1)<br><input type="checkbox"/> Oxidized Rhizospheres on Living Roots (C3)<br><input type="checkbox"/> Presence of Reduced Iron (C4)<br><input type="checkbox"/> Recent Iron Reduction in Tilled Soils (C6)<br><input type="checkbox"/> Thin Muck Surface (C7)<br><input type="checkbox"/> Other (Explain in Remarks) | <input type="checkbox"/> Surface Soil Cracks (B6)<br><input type="checkbox"/> Drainage Patterns (B10)<br><input type="checkbox"/> Moss Trim Lines (B16)<br><input type="checkbox"/> Dry-Season Water Table (C2)<br><input type="checkbox"/> Crayfish Burrows (C8)<br><input type="checkbox"/> Saturation Visible on Aerial Imagery (C9)<br><input type="checkbox"/> Stunted or Stressed Plants (D1)<br><input checked="" type="checkbox"/> Geomorphic Position (D2)<br><input type="checkbox"/> Shallow Aquitard (D3)<br><input type="checkbox"/> Microtopographic Relief (D4)<br><input checked="" type="checkbox"/> FAC-Neutral Test (D5) |  |
| <b>Field Observations:</b><br>Surface water present? Yes <input type="checkbox"/> Depth (inches): _____<br>Water table present? Yes <input checked="" type="checkbox"/> Depth (inches): <u>12</u><br>Saturation present? Yes <input checked="" type="checkbox"/> Depth (inches): <u>10</u><br>(includes capillary fringe)                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Indicators of wetland hydrology present?</b> <u>Y</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |
| Describe recorded data (stream gauge, monitoring well, aerial photos, previous inspections), if available:                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |
| Remarks:<br>A high water table and saturation were observed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |