

WETLAND DETERMINATION DATA FORM - Northcentral and Northeast Region

Project/Site: Main L3R ESC **City/County:** Cass **Sampling Date:** 21-Sep-17
Applicant/Owner: Enbridge **State:** MN **Sampling Point:** w-138n30w10-aa1
Investigator(s): SMR **Section, Township, Range:** S. 10 T. 138N R. 30W
Landform (hillslope, terrace, etc.): Lowland **Local relief (concave, convex, none):** concave **Slope:** 0.0 % / 0.0 °
Subregion (LRR or MLRA): LRR K **Lat.:** 46 46.8660 **Long.:** -94 27.6090 **Datum:** NAD 83
Soil Map Unit Name: 549 **NWI classification:** PSS1C

Are climatic/hydrologic conditions on the site typical for this time of year? Yes No (If no, explain in Remarks.)
Are Vegetation , **Soil** , **or Hydrology** **significantly disturbed?** **Are "Normal Circumstances" present?** Yes No
Are Vegetation , **Soil** , **or Hydrology** **naturally problematic?** (If needed, explain any answers in Remarks.)

Summary of Findings - Attach site map showing sampling point locations, transects, important features, etc

Hydrophytic Vegetation Present? Yes <input checked="" type="radio"/> No <input type="radio"/> Hydric Soil Present? Yes <input checked="" type="radio"/> No <input type="radio"/> Wetland Hydrology Present? Yes <input checked="" type="radio"/> No <input type="radio"/>	Is the Sampled Area within a Wetland? Yes <input checked="" type="radio"/> No <input type="radio"/>
Remarks: (Explain alternative procedures here or in a separate report.) 	

Hydrology

Wetland Hydrology Indicators: <u>Primary Indicators (minimum of one required; check all that apply)</u> <input checked="" type="checkbox"/> Surface Water (A1) <input type="checkbox"/> Water-Stained Leaves (B9) <input checked="" type="checkbox"/> High Water Table (A2) <input type="checkbox"/> Aquatic Fauna (B13) <input checked="" type="checkbox"/> Saturation (A3) <input type="checkbox"/> Marl Deposits (B15) <input type="checkbox"/> Water Marks (B1) <input type="checkbox"/> Hydrogen Sulfide Odor (C1) <input type="checkbox"/> Sediment Deposits (B2) <input type="checkbox"/> Oxidized Rhizospheres along Living Roots (C3) <input type="checkbox"/> Drift deposits (B3) <input type="checkbox"/> Presence of Reduced Iron (C4) <input type="checkbox"/> Algal Mat or Crust (B4) <input type="checkbox"/> Recent Iron Reduction in Tilled Soils (C6) <input type="checkbox"/> Iron Deposits (B5) <input type="checkbox"/> Thin Muck Surface (C7) <input type="checkbox"/> Inundation Visible on Aerial Imagery (B7) <input type="checkbox"/> Other (Explain in Remarks) <input type="checkbox"/> Sparsely Vegetated Concave Surface (B8)	<u>Secondary Indicators (minimum of 2 required)</u> <input type="checkbox"/> Surface Soil Cracks (B6) <input type="checkbox"/> Drainage Patterns (B10) <input type="checkbox"/> Moss Trim Lines (B16) <input type="checkbox"/> Dry Season Water Table (C2) <input type="checkbox"/> Crayfish Burrows (C8) <input type="checkbox"/> Saturation Visible on Aerial Imagery (C9) <input type="checkbox"/> Stunted or Stressed Plants (D1) <input checked="" type="checkbox"/> Geomorphic Position (D2) <input type="checkbox"/> Shallow Aquitard (D3) <input type="checkbox"/> Microtopographic Relief (D4) <input checked="" type="checkbox"/> FAC-neutral Test (D5)
Field Observations: Surface Water Present? Yes <input checked="" type="radio"/> No <input type="radio"/> Depth (inches): <u>4</u> Water Table Present? Yes <input checked="" type="radio"/> No <input type="radio"/> Depth (inches): <u>0</u> Saturation Present? (includes capillary fringe) Yes <input checked="" type="radio"/> No <input type="radio"/> Depth (inches): <u>0</u>	
Wetland Hydrology Present? Yes <input checked="" type="radio"/> No <input type="radio"/>	
Describe Recorded Data (stream gauge, monitoring well, aerial photos, previous inspections), if available: 	
Remarks: 	

VEGETATION - Use scientific names of plants

Sampling Point: w-138n30w10-aa1

	Absolute % Cover	Dominant Species?	Indicator Status	
Tree Stratum (Plot size: <u>30</u>)				Dominance Test worksheet: Number of Dominant Species That are OBL, FACW, or FAC: <u>2</u> (A) Total Number of Dominant Species Across All Strata: <u>2</u> (B) Percent of dominant Species That Are OBL, FACW, or FAC: <u>100.0%</u> (A/B) Prevalence Index worksheet: Total % Cover of: <u>100</u> Multiply by: OBL species <u>100</u> x 1 = <u>100</u> FACW species <u>0</u> x 2 = <u>0</u> FAC species <u>0</u> x 3 = <u>0</u> FACU species <u>0</u> x 4 = <u>0</u> UPL species <u>0</u> x 5 = <u>0</u> Column Totals: <u>100</u> (A) <u>100</u> (B) Prevalence Index = B/A = <u>1.000</u> Hydrophytic Vegetation Indicators: <input checked="" type="checkbox"/> Rapid Test for Hydrophytic Vegetation <input checked="" type="checkbox"/> Dominance Test is > 50% <input checked="" type="checkbox"/> Prevalence Index is ≤3.0 ¹ <input type="checkbox"/> Morphological Adaptations ¹ (Provide supporting data in Remarks or on a separate sheet) <input type="checkbox"/> Problematic Hydrophytic Vegetation ¹ (Explain) ¹ Indicators of hydric soil and wetland hydrology must be present, unless disturbed or problematic. Definitions of Vegetation Strata: Tree - Woody plants, 3 in. (7.6 cm) or more in diameter at breast height (DBH), regardless of height. Sapling/shrub - Woody plants less than 3 in. DBH and greater than 3.28 ft (1m) tall.. Herb - All herbaceous (non-woody) plants, regardless of size, and woody plants less than 3.28 ft tall. Woody vine - All woody vines greater than 3.28 ft in height. Hydrophytic Vegetation Present? Yes <input checked="" type="radio"/> No <input type="radio"/>
1. _____	0	<input type="checkbox"/>	_____	
2. _____	0	<input type="checkbox"/>	_____	
3. _____	0	<input type="checkbox"/>	_____	
4. _____	0	<input type="checkbox"/>	_____	
5. _____	0	<input type="checkbox"/>	_____	
6. _____	0	<input type="checkbox"/>	_____	
7. _____	0	<input type="checkbox"/>	_____	
	0	= Total Cover		
Sapling/Shrub Stratum (Plot size: <u>15</u>)				
1. _____	0	<input type="checkbox"/>	_____	
2. _____	0	<input type="checkbox"/>	_____	
3. _____	0	<input type="checkbox"/>	_____	
4. _____	0	<input type="checkbox"/>	_____	
5. _____	0	<input type="checkbox"/>	_____	
6. _____	0	<input type="checkbox"/>	_____	
7. _____	0	<input type="checkbox"/>	_____	
	0	= Total Cover		
Herb Stratum (Plot size: <u>5</u>)				
1. <i>Iris versicolor</i>	10	<input type="checkbox"/>	OBL	
2. <i>Carex lacustris</i>	30	<input checked="" type="checkbox"/>	OBL	
3. <i>Carex lasiocarpa</i>	60	<input checked="" type="checkbox"/>	OBL	
4. _____	0	<input type="checkbox"/>	_____	
5. _____	0	<input type="checkbox"/>	_____	
6. _____	0	<input type="checkbox"/>	_____	
7. _____	0	<input type="checkbox"/>	_____	
8. _____	0	<input type="checkbox"/>	_____	
9. _____	0	<input type="checkbox"/>	_____	
10. _____	0	<input type="checkbox"/>	_____	
11. _____	0	<input type="checkbox"/>	_____	
12. _____	0	<input type="checkbox"/>	_____	
	100	= Total Cover		
Woody Vine Stratum (Plot size: <u>30</u>)				
1. _____	0	<input type="checkbox"/>	_____	
2. _____	0	<input type="checkbox"/>	_____	
3. _____	0	<input type="checkbox"/>	_____	
4. _____	0	<input type="checkbox"/>	_____	
	0	= Total Cover		
Remarks: (Include photo numbers here or on a separate sheet.) 				

*Indicator suffix = National status or professional decision assigned because Regional status not defined by FWS.

