

**WETLAND DETERMINATION DATA FORM - Northcentral and Northeast Region**

**Project/Site:** RSA 22 **City/County:** St. Louis **Sampling Date:** 13-Sep-17  
**Applicant/Owner:** Enbridge **State:** MN **Sampling Point:** w-50n20w1-d2  
**Investigator(s):** DPT **Section, Township, Range:** S. 1 T. 50N R. 20W  
**Landform (hillslope, terrace, etc.):** Lowland **Local relief (concave, convex, none):** concave **Slope:** 0.0 % / 0.0 °  
**Subregion (LRR or MLRA):** LRR K **Lat.:** 46 50.4437 **Long.:** -92 48.8407 **Datum:** NAD 83  
**Soil Map Unit Name:** B107A **NWI classification:** PSSB

**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**

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

**Hydrology**

<b>Wetland Hydrology Indicators:</b> <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)
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**Field Observations:**

Surface Water Present? Yes  No  Depth (inches): 4

Water Table Present? Yes  No  Depth (inches): 0

Saturation Present? (includes capillary fringe) Yes  No  Depth (inches): 0

**Wetland Hydrology Present?** Yes  No

Describe Recorded Data (stream gauge, monitoring well, aerial photos, previous inspections), if available:

Remarks:

**VEGETATION - Use scientific names of plants**

Sampling Point: w-50n20w1-d2

Tree Stratum (Plot size: <u>30</u> )	Absolute % Cover	Dominant Species?	Indicator Status	<b>Dominance Test worksheet:</b>	
1. <u>Fraxinus nigra</u>	10	<input checked="" type="checkbox"/>	FACW	Number of Dominant Species That are OBL, FACW, or FAC:	<u>5</u> (A)
2. _____	0	<input type="checkbox"/>	_____	Total Number of Dominant Species Across All Strata:	<u>5</u> (B)
3. _____	0	<input type="checkbox"/>	_____	Percent of dominant Species That Are OBL, FACW, or FAC:	<u>100.0%</u> (A/B)
4. _____	0	<input type="checkbox"/>	_____	<b>Prevalence Index worksheet:</b>	
5. _____	0	<input type="checkbox"/>	_____	Total % Cover of:	Multiply by:
6. _____	0	<input type="checkbox"/>	_____	OBL species <u>40</u>	x 1 = <u>40</u>
7. _____	0	<input type="checkbox"/>	_____	FACW species <u>100</u>	x 2 = <u>200</u>
<b>Sapling/Shrub Stratum</b> (Plot size: <u>15</u> )			10 = Total Cover	FAC species <u>20</u>	x 3 = <u>60</u>
1. <u>Alnus incana</u>	60	<input checked="" type="checkbox"/>	FACW	FACU species <u>10</u>	x 4 = <u>40</u>
2. <u>Fraxinus nigra</u>	10	<input type="checkbox"/>	FACW	UPL species <u>0</u>	x 5 = <u>0</u>
3. <u>Populus tremuloides</u>	10	<input type="checkbox"/>	FACU	Column Totals:	<u>170</u> (A) <u>340</u> (B)
4. _____	0	<input type="checkbox"/>	_____	Prevalence Index = B/A = <u>2.000</u>	
5. _____	0	<input type="checkbox"/>	_____	<b>Hydrophytic Vegetation Indicators:</b>	
6. _____	0	<input type="checkbox"/>	_____	<input type="checkbox"/> Rapid Test for Hydrophytic Vegetation	
7. _____	0	<input type="checkbox"/>	_____	<input checked="" type="checkbox"/> Dominance Test is > 50%	
8. _____	0	<input type="checkbox"/>	_____	<input checked="" type="checkbox"/> Prevalence Index is ≤3.0 <sup>1</sup>	
9. _____	0	<input type="checkbox"/>	_____	<input type="checkbox"/> Morphological Adaptations <sup>1</sup> (Provide supporting data in Remarks or on a separate sheet)	
10. _____	0	<input type="checkbox"/>	_____	<input type="checkbox"/> Problematic Hydrophytic Vegetation <sup>1</sup> (Explain)	
11. _____	0	<input type="checkbox"/>	_____	<sup>1</sup> Indicators of hydric soil and wetland hydrology must be present, unless disturbed or problematic.	
12. _____	0	<input type="checkbox"/>	_____	<b>Definitions of Vegetation Strata:</b>	
<b>Herb Stratum</b> (Plot size: <u>5</u> )			80 = Total Cover	Tree - Woody plants, 3 in. (7.6 cm) or more in diameter at breast height (DBH), regardless of height.	
1. <u>Onoclea sensibilis</u>	20	<input checked="" type="checkbox"/>	FACW	Sapling/shrub - Woody plants less than 3 in. DBH and greater than 3.28 ft (1m) tall.	
2. <u>Equisetum arvense</u>	20	<input checked="" type="checkbox"/>	FAC	Herb - All herbaceous (non-woody) plants, regardless of size, and woody plants less than 3.28 ft tall.	
3. <u>Calamagrostis canadensis</u>	40	<input checked="" type="checkbox"/>	OBL	Woody vine - All woody vines greater than 3.28 ft in height.	
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"/>	_____		
<b>Woody Vine Stratum</b> (Plot size: <u>30</u> )			80 = Total Cover	<b>Hydrophytic Vegetation Present?</b> 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"/>	_____		
			0 = Total Cover		
<b>Remarks: (Include photo numbers here or on a separate sheet.)</b>					

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

