

WETLAND DETERMINATION DATA FORM - Northcentral and Northeast Region

Project/Site: RSA 22 **City/County:** Carlton **Sampling Date:** 15-Sep-17
Applicant/Owner: Enbridge **State:** MN **Sampling Point:** w-48n17w8-b3
Investigator(s): SMR **Section, Township, Range:** S. 8 T. 48N R. 17W
Landform (hillslope, terrace, etc.): Lowland **Local relief (concave, convex, none):** concave **Slope:** 0.0 % / 0.0 °
Subregion (LRR or MLRA): LRR K **Lat.:** 46 39.3344 **Long.:** -92 31.4082 **Datum:** NAD 83
Soil Map Unit Name: 355C **NWI classification:** N/A

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 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 <input type="radio"/> No <input checked="" type="radio"/>	Depth (inches): <u>0</u>
Water Table Present? Yes <input checked="" type="radio"/> No <input type="radio"/>	Depth (inches): <u>10</u>
Saturation Present? (includes capillary fringe) Yes <input checked="" type="radio"/> No <input type="radio"/>	Depth (inches): <u>2</u>

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-48n17w8-b3

Tree Stratum (Plot size: <u>30</u>)	Absolute % Cover	Dominant Species?	Indicator Status	
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"/>	_____	
= Total Cover				
				Dominance Test worksheet:
				Number of Dominant Species That are OBL, FACW, or FAC: <u>4</u> (A)
				Total Number of Dominant Species Across All Strata: <u>4</u> (B)
				Percent of dominant Species That Are OBL, FACW, or FAC: <u>100.0%</u> (A/B)
				Prevalence Index worksheet:
				Total % Cover of: _____ Multiply by: _____
				OBL species <u>10</u> x 1 = <u>10</u>
				FACW species <u>110</u> x 2 = <u>220</u>
				FAC species <u>20</u> x 3 = <u>60</u>
				FACU species <u>0</u> x 4 = <u>0</u>
				UPL species <u>0</u> x 5 = <u>0</u>
				Column Totals: <u>140</u> (A) <u>290</u> (B)
				Prevalence Index = B/A = <u>2.071</u>
				Hydrophytic Vegetation Indicators:
				<input 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"/>
Herb Stratum (Plot size: <u>5</u>)				
= Total Cover				
1. <i>Calamagrostis canadensis</i>	10	<input type="checkbox"/>	OBL	
2. <i>Phalaris arundinacea</i>	30	<input checked="" type="checkbox"/>	FACW	
3. <i>Equisetum arvense</i>	20	<input checked="" type="checkbox"/>	FAC	
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"/>	_____	
= Total Cover				
Woody Vine Stratum (Plot size: <u>30</u>)				
= Total Cover				
1. _____	0	<input type="checkbox"/>	_____	
2. _____	0	<input type="checkbox"/>	_____	
3. _____	0	<input type="checkbox"/>	_____	
4. _____	0	<input type="checkbox"/>	_____	
= 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.

