

Application for NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT

STATE OF WEST VIRGINIA

NPDES Permit #
WV1011642

Module 1: General Information

WVDEP Region # 1.2

Date(s) Submitted January 4, 2007, Revised March 2, 2007

Application Type, Fees & Hydrologic Region

Type of Permitting Action(s) Requested (Mark all that apply and enter appropriate numbers in the spaces provided)

New Reissue # _____ Transfer # _____ Abandon Modification # 1

(If a transfer is included with reissuance enter reissuance # and the transfer #)

Filing Fee : Required reissuance filing date: January 30, 2010 *(120 days prior to expiration date)*

(Art. 3) \$1,000.00 \$500.00

(New or Reissuance) (Modification)

(Other) Annual Fees Paid: _____ Application Fee: _____

(Enter the last date annual fees were paid) (Attach fee schedule worksheet)

USGS/SCS Hydrologic Region(s) Receiving Effluent.

05030106 Upper Ohio South

(8 digit code) (Name of Hydrologic Region)

Part I: Applicant Owner (Operator) Information

A. Applicant Name: Ohio County Development Authority

Mailing Address: 1500 Chapline Street *(If P.O. Box show street address also)*

Street Address: Room 215

Town Wheeling State WV Zip 26003 Telephone No. 304-234-3893

B. Category of applicant (Check appropriate category; if "other" specify type)

Federal State Private Public Other _____

Part II: Facility Information

A. Facility Name: The Highlands

Mailing Address: SEE PART I-A *(If P.O. Box show street address also)*

Street Address: _____

Town _____ State _____ Zip _____ Phone No. _____

Physical Location of Facility: County Ohio Nearest P.O. Triadelphia, WV

From Wheeling, east on I-70, take the Cabela's exit, turn right onto Cabela Drive. The site is located in the Storch's Run area.

Facility Contact: Gregory Stewart, Secretary/Treasurer 304-234-3893

(Name and Title) (Phone)

B. The facility and discharges therefrom fall under the selected category below:

- New Source - Facility covered under 40 CFR Part 434, including an abandoned mine for which remining commenced after September 19, 1977 or which is determined to constitute a major alteration. (See Title 47, Series 30, Section 2.29.)
- Existing Source - A coal mine, preparation plant, and all refuse or waste there from: (a) from where there is or may be a discharge or pollutants which commenced prior to September 19, 1977; and (b) which is not a new source. (See Title 47, Series 30, Section 2.20.)

C. In the table below show the type of permitting action being requested and the type(s) of operations to be covered in this application. Enter each operation in the appropriate category column.

Permitting Action Requested (Mark the one that applies)		Operations Covered: (choose from items 1 through 11 below)		
		Operate	Remine	Abandon
<input type="checkbox"/> Issue New Permit	<input checked="" type="checkbox"/> Reissue Permit	5, 10		
(Enter corresponding operation numbers under appropriate category column above.)				
1 Deep Mine	2 Surface Mine	3 Preparation/Cleaning Plant		
4 Loadout Facility	5 Refuse Area	6 Underground Disposal System		
7 Haulroad	8 Office or Shop Area	9 Bath House / Sewage		
10 AMD Monitoring and Treatment	11 _____			
(other; describe)		(other; describe)		

D. Mark all activities below that this application is requesting coverage for.

- Sewage Treatment
 - Chemical Treatment
 - Underground Disposal System
 - Physical Treatment
 - Passive Treatment
 - Remining [under CWA Sec. 301(p)]
 - Ash Utilization
 - Other _____
- (describe activity)

Part III: Reissuance of Existing Permits

N/A

A. Provide a narrative describing all permitting actions taken since the last issuance of this permit up to and including this reissuance application. Briefly describe each modification or transfer request submitted (by number) and the date they were approved, withdrawn, or denied (to include any changes requested in this application). Label it as "Attachment I-III-A"

Part IV: SIC Code

A. Mark all SIC code(s) below that this facility falls under.

- 1221 Coal Mining
 - 1423 Granite
 - 1442 Construction Sand & Gravel
 - 1422 Limestone
 - 1429 Stone
 - 1446 Industrial Sand
 - other **17 Various activities**
 - other _____
- (describe activity) (describe activity)

Part V: Environmental Permits

- A.** List the following information for all existing or required environmental permits for this facility.
(If effluent from this facility is treated under another NPDES permit list that permit with an asterisk)

ISSUING AGENCY AND ADDRESS	TYPE OF PERMIT	PERMIT OR ID NUMBER	DATE ISSUED	EXPIRATION DATE
WV DEP Division of Water and Waste Management	NPDES/Art 11			
WV DEP Division of Water and Waste Management	UIC			
WV DEP DWWM, Office of Waste Management				
WV DEP Division of Air Quality	Article 5			
WV Health Department	Sewage			
WV Public Land Corporation				
US Army Corps of Engineers				
WV DEP Division of Mining & Reclamation	Art. 4			
WV DEP Division of Mining & Reclamation (List all)	SMCRA/Art 3			
WVDEP Division of Water and Waste Management Phase 8	NPDES Cons	WVR101252	January 6, 2005	
WVDEP Division of Water and Waste Management Phase 1B, 3 and 8	NPDES Cons	WVR101151	December 6, 2004	
WVDEP Division of Mining and Reclamation	NPDES/Art 11	WV1011642	June, 2006	June 30, 2010

Part VI: Map

- A.** A topographic map drawn to a reasonable scale and extending at least one thousand feet (1,000') beyond the limits of the facility that identifies and/or shows: (Label "Exhibit I-VI-A")
(**Read and follow all instructions concerning map requirements and preparation**)
- Limits of each and every operation (permit) to be covered, and adjacent operations.
 - All physical (sediment control), chemical, sewage, biological and passive treatment systems.
 - All intake or discharge points and any internal, ground water or in-stream monitoring stations.
 - All streams, creeks, rivers, lakes or other surface bodies of water.
 - All seeps, springs or other ground water discharge points.
 - All drinking, domestic use or ground water monitoring wells and any production, injection or abandoned commercial wells.
 - Delineate all wellhead protection areas.
 - Delineate all wetlands known to be affected by this facility.
 - Legend, title block, location map and North arrow.
 - If Module 14 is included in this application, then locate all items shown in "Table 14-I-A" of the Groundwater Protection Plan (GPP) on the map and label them by the ID# shown in that table.
This information may be shown on the mine site topographic map, submitted with DEP's Article 3 (MR-4) mining application, if it can **clearly** show **all** of the required information and is submitted in a joint application.

Part VII: Transfers and Additional Responsibilities

A. If proposing any of the following (with this application) include the appropriate attachments:

1. To allow effluent from operations, owned by persons or organizations other than the applicant, to be discharged through any outlet proposed (or covered) by this application, or to allow flow from operations proposed (or covered) by this application to be discharged through an outlet of a different NPDES permit.

No Yes (If YES, include Module 1R) N/A (previously submitted)

2. To transfer the Groundwater Protection Plan. No Yes (If YES, include MR-5GT)

Part VIII: Applicant Certification

A. I certify under penalty of law that this application and all attachments were prepared under the direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Gregory L. Stewart Sec. Treas. [Signature]

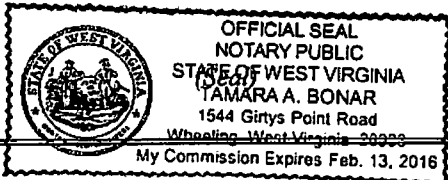
(Typed or Printed Name and Title of Official)

(Signature in accordance with Title 47, Series 30, Section 4.7.1)

Subscribed and sworn before me this 10 day of March, 2007.

My commission expires Feb 13, 2016.

Tamara A Bonar
 (Signature of Notary Public)



Application for NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT

STATE OF WEST VIRGINIA

NPDES Permit # WV 1011642

Module 2: Monitoring Information

Part I: Location and Watershed Data

- A.** Submit "Table 2-I-A" (found at the end of this module) for all outlets and monitoring stations to be used at this facility showing for each outlet/monitoring station:
1. It's type. (on-bench, in-stream, underground injection, ground water monitoring well, etc.)
 2. The Number or ID.
 3. The latitude and longitude.
 4. The Elevation (water level and bottom for ground water monitoring wells)
 5. The WVDNR code of the receiving stream
 6. The first named tributary of the receiving waters and the stream(s) it is a tributary of.
 7. The WV Watershed Management Project group the receiving stream is in.
- (See instructions for the correct procedure for filling out this table.)
(All stream codes needed are available at the WVDEP regional offices)*
- B.** For all outlets located in the waters of the State (in-stream outlets only) with a contributing watershed of 200 acres or more, provide the size (in pre-mining acres) of the contributing watershed area for each, measured from a USGS Topographical map.
- N/A See "Attachment 2-I-C" (Mark if necessary to continue on additional sheets)

Outlet No.	Watershed (Acres)	Outlet No.	Watershed (Acres)	Outlet No.	Watershed (Acres)

Part II: Flows, Sources of Pollution, and Treatment Technologies

- A.** Attach a flow chart (Title "Exhibit 2-II-A") showing the water flow onto, through and off of the facility to the down stream monitoring station. Include the following on the chart:
1. All sources of intake water (storm water, pumped, seeps, springs, wells, streams, mines, slurry etc.)
 2. All facilities and operations (active refuse, inactive surface, abandoned deep mine, adjacent permits/ mines etc) contributing to the effluent. (identify by Art. 3 permit number or if unknown by name)
 3. All types of treatment units (physical, chemical, passive, sewage, etc. identified by name i.e. Pond 1, Ditch 2)
 4. All outlets, internal and in-stream monitoring stations labeled to correspond to "Exhibit 1-VI-A" (If an outlet is permitted under another NPDES permit, that is receiving effluent from a SMCRA permit covered by this NPDES Permit, show all corresponding NPDES & SMCRA Permit Nos. and Outlet Nos.)
 5. Water balance from the intake(s) to the downstream monitoring station(s). (Use designed flows from intakes, facilities, operations, treatment units, outlets, etc.)

Part III: Required Compliance

A. Do any Federal, State or Local authorities require the meeting or any implementation of a schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs that may affect the discharges described in this application?
(This includes, but is not limited to, permit conditions, compliance schedules, stipulations, court orders, and grant or loan conditions)

No Yes *(If Yes complete the following table)*

Identification of Condition, Agreement, etc.	Affected Outlets		Brief Description of Project	Final Compliance Date	
	No.	Source of Discharge		Required	Projected

Part IV: Intake and Effluent Characteristics

A. Submit one complete **set** of Tables 2-IV-A, 2-IV-B and 2-IV-C *(found at the end of this module)* for the effluent *(treated discharge)* from **each** outlet¹.

NA; *(New Permit, Outlets not constructed yet.)*

B. Submit "Table 2-IV-D" *(found at the end of this module)* showing a **raw water** *(influent prior to any type of treatment)* analyses for, at a minimum, the representative outlets used in Section A above, and all ground water monitoring stations. Enter the following parameters for each site: Flow, pH, Total Iron, Total Manganese, Total Aluminum, Acidity mg/l as CaCO₃, Alkalinity mg/l as CaCO₃ and Sulfates as SO₄. *(See footnote 1)*

NA *(New Permit; No Outlets or Ground Water Monitoring Stations exist yet)*

C. Submit "Table 2-IV-E" *(found at the end of this module)* for each **set** of **new** in-stream monitoring stations. The analysis in "Table 2-IV-E" must be submitted for each stream receiving effluent from the facility. The analyses reported must be either the average value of data collected over a period reflecting seasonal variations *(minimum six months)*, **or** for a **seven consecutive day** flow during drought stream conditions that would occur with a frequency of every **ten** years (7Q10 flow).

(If this application is for a new NPDES permit, discharge into a new receiving stream or new section of the stream not currently covered by this permit then "Table E" must be completed)

NA *(Existing permit; no new streams or section of streams affected)*

¹ When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the other outlets it represents must be shown in the space provided at the top of Tables 2-IV-A, B and C.

D. Is it known, or is there reason to believe, any pollutants listed in Appendix C or E of the NPDES Regulations 47CSR30 are discharged, or may be discharged, from any outlet?

No Yes; Complete table below

(If YES; list below every pollutant believed present, briefly describe the reasons believed to be present, and report any analytical data possessed as "Attachment 2-IV-D")

POLLUTANT	SOURCE	POLLUTANT	SOURCE

E. Were the analyses required in "Module 2" for all pollutants performed in accordance with 40 CFR, Part 136?

Yes No *(List the pollutant, and describe method used for analysis below.)*

POLLUTANT	DESCRIPTION OF METHOD

F. Were the toxic metals, cyanide and phenols reported under Table 2-IV-C analyzed with a precision to the nearest microgram per liter?

Yes No *(List below the pollutant, method and detection limit used for analysis.)*

POLLUTANT	DESCRIPTION OF METHOD

G. Provide the days the applicant will collect the required compliance monitoring samples for the proposed WVNPDES permit.

FREQUENCY	DAY(S) OF WEEK	WEEK(S) OF MONTH	MONTH OF YEAR
Semi Monthly			ALL
Monthly	Wednesday	First	ALL
Quarterly			
Yearly			

Part V: Potential Discharges not Covered by Analysis

A. Is any pollutant listed in "Table 2-IV-C" a substance or a component of a substance which is now, or is expect over the next five (5) years, to be used or manufactured as an intermediate or final product or byproduct? *(If Yes, list all such pollutants and possible sources as "Attachment 2-V-A".)*

No Yes; See "Attachment 2-V-A"

Part VI: Biological Toxicity Testing Data

A. Has there been performed, or is there any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any discharges or on a receiving water in relation to a proposed discharge within the last three (3) years? *(If yes, submit copies of test results and a description of the reason for test for the outfall or stream on which the test was performed as "Attachment 2-VI-A".)*

No Yes; See "Attachment 2-VI-A"

Part VII: Benthic Survey

A. Has there been performed, or is there any knowledge or reason to believe that any Benthic Surveys have been done on a receiving water in relation to a proposed discharge within the last three (3) years? *(If yes, submit copies of results along with a description of the reason for the survey, the stream on which the test was performed and the location of each test site.)*

No Yes; See "Attachment 2-VII-A"

Part VIII: Discharges into Non-complying Waters

A. Is there a proposed discharge into a stream (or water segment) which either does not meet applicable water quality standards for the pollutant(s) to be discharged, or is not expected to meet those standards even after treating the discharge to the required technology based limits, and the State has performed a pollutant waste allocation for these pollutants?

If yes submit documentation that:

1. There are sufficient remaining pollutant load allocations to allow for the discharge; and
2. The existing discharges into that segment are subject to compliance schedules designed to bring the segment into compliance with applicable water quality standards; **OR**
3. The applicant qualifies for an alternate water quality based effluent limitation by making an adequate demonstration to the Director pursuant to the Environmental Quality Board's Administrative Regulations, 46 CSR1.

No Yes; See "Attachment 2-VIII-A"

Part IX: Variances

A. Is a variance from effluent limitations requested? *(If Yes, Comply with NPDES regulations, Title 47, Series 30, Sections 4.5.6. or 4.5.7.)*

No Yes; See "Attachment 2-IX-A"

TABLE 2-IV-A

**OUTLET
NO.001**

Representing Outlets:

Date Sampled

Date Analyzed **4/15/04**

Analysis performed by: Name **Industrial Lab Analysis**
Address **2240 Williamsburg Drive, Glen Dale, WV 26038**

POLLUTANT	EFFLUENT				NO. OF ANALYSES
	MAXIMUM DAILY VALUE		LONG-TERM AVERAGE VALUE		
	CONCENTRATION	MASS	CONCENTRATION	MASS	
Biochemical Oxygen Demand (BOD-5day)					
Chemical Oxygen Demand (COD)					
Total Organic Carbon (TOC)					
Fecal Coliform					
Total Residual Chlorine (if used)					
Ammonia (as N)					
Total Suspended Solids (TSS)	4 mg/l		2 mg/l		
Oil & Grease					
pH					
Flow (CFS)	0.44		0.44		
Temperature (Deg. C) (Summer)					
Temperature (Deg. C) (Winter)					

Representative Outlet Justification:

TABLE 2-IV-A INSTRUCTIONS

1. Provide the results of at least one analysis for every pollutant in this table (except as noted in item 3 below) in accordance with 4.5.2.f.1 of the NPDES Regulations 47CSR30.
2. Complete one table for each outfall. When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the group of outlets it represents must be shown in the space provided at the top of the table. Justification for using the "Representative Outlet" for the group must also be provided at the bottom of the table. "Zero" (0) or "No flow" will not be accepted; samples must be taken during times of flow.
3. If sewage or bathhouse waste is not part of the effluent, Biochemical Oxygen Demand, COD, TOC, Fecal Coliform and Ammonia is waived.
4. If ammonia is used as a chemical reagent, then ammonia (as Nitrogen), temperature and field pH (at the time of sampling) must be included.
5. If Chlorine is used (in sewage treatment, chemical treatment, etc.) it must be analyzed for, if not it may be waived.
6. Include units used to report pollutant concentration and mass.

TABLE 2-IV-B

OUTLET
NO.001

Representing Outlets

Date Sampled 5/3/05

Date Analyzed App. 5/24/05

Analysis performed by: Name **Tra-Det, Inc.**
Address **P. O. Box 2019, Wheeling, WV 26003-0219**

POLLUTANT AND CAS NO. (if available)	EFFLUENT						
	MARK 'X' IF:		MAXIMUM DAILY VALUE		LONG TERM AVG. VALUE		NO. OF
	PRESENT	ABSENT	CONCENTRATION	MASS	CONCENTRATION	MASS	ANALYSES
Bromide (24959-67-9)							
Color							
Fluoride (1698-48-8)							
Nitrate-Nitrite (as N)							
Nitrogen, Total Organic (as N)							
Phosphorus, Total (as P) (7723-14-0)							
Sulfate (as SO ₄) (14808-79-8)							
Sulfide (as S)							
Sulfite (as SO ₃) (14265-45-3)							
Surfactants							
Aluminum, Total (7429-90-5)							
Barium, Total (7440-39-3)							
Boron, Total (7440-42-8)							
Cobalt, Total (7440-48-4)							
Iron, Total (7439-89-6)							
Magnesium, Total (7439-95-4)							
Molybdenum, Total (7439-98-7)							
Manganese, Total (7439-96-5)							
Tin, Total (7440-31-5)							
Titanium, Total (7440-32-6)							
Chloride							
Hardness							
RADIOACTIVITY							
Alpha, Total							
Beta, Total							
Radium, Total							
Radium 226, Total							

TABLE 2-IV-B INSTRUCTIONS

1. For each pollutant listed mark an "X" in the "Present" column if it is known or have reason to believe it is present in the effluent or "Absent" column if believed absent.
2. Provide the results of at least one analysis for every pollutant listed that are believed to be present in the effluent in accordance with 4.5.2.f.3.B of the NPDES Regulations 47CSR30. At a minimum, analyses must be submitted for Sulfate, Aluminum, Iron, Manganese, Chloride, and Hardness.
3. Complete one table for each outfall. When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the other outlets it represents must be shown in the space provided at the top of the table. "Zero" (0) or "No flow" will not be accepted; samples must be taken during times of flow.
4. Include units used to report pollutant concentration and mass.

TABLE 2-IV-C

OUTLET NO. 001

Representing Outlets:

Date Sampled 5/03/05

Date Analyzed App 5/24/05

Analysis performed by: Name	Tra-Det, Inc.
Address	P. O. Box 2019, Wheeling, WV 26003-0219

POLLUTANT AND CAS NO. (if available)	EFFLUENT				NO. OF ANALYSES
	MAXIMUM DAILY VALUE		LONG-TERM AVERAGE VALUE		
	CONCENTRATION	MASS	CONCENTRATION	MASS	
METALS, CYANIDE, AND TOTAL PHENOLS:					
Antimony, Total (7440-36-0)					
Arsenic, Total (7440-38-2)					
Beryllium, Total (7440-41-7)					
Cadmium, Total (7440-43-9)					
Chromium, Total (7440-47-3)					
Copper, Total (7550-50-8)					
Lead, Total (7439-92-1)					
Mercury, Total (7439-97-6)					
Nickel, Total (7440-02-0)					
Selenium, Total (7782-49-2)					
Silver, Total (7440-22-4)					
Thallium, Total (7440-28-0)					
Zinc, Total (7440-66-6)					
Cyanide, Total (57-12-5)					
Phenols, Total					

TABLE 2-IV-C INSTRUCTIONS

1. Provide the results of at least one analysis for every pollutant in this table in accordance with 4.5.2.f.2 of the NPDES Regulations 47CSR30.
2. Complete one table for each outfall. When an applicant has two or more outlets with substantially identical effluents the director may allow the applicant to test only one outfall and report that the quantitative data also applies to the substantially identical outlet. If a "Representative Outlet" is used the other outlets it represents must be shown in the space provided at the top of the table. "Zero" (0) or "No flow" will not be accepted; samples must be taken during times of flow.
3. All Toxic Metals, Cyanide, and Phenols must be analyzed to the nearest microgram per liter. If not, complete required information in Mod. 2, IV-E.
4. Include units used to report pollutant concentration and mass.

TABLE 2-IV-D

Analysis performed by: Name	Microbac Laboratories, Inc.
Address	100 Marshall Drive, Warrendale, PA 15086

Submit analyses for raw water (influent prior to any type of treatment) for representative outlets and ground water monitoring stations for the following parameters: Flow (water elevation for wells only), pH, Total Iron, Total Manganese, Total Aluminum, Acidity mg/l as CaCO₃, Alkalinity mg/l as CaCO₃ and Sulfates as SO₄. (You must be able to justify each representative sampling point)

Outlet Number	SP1	SP2	SP3	SP4	SP5	SP6	SP7		
Date Sampled	9/15/04	9/15/04	9/15/04	9/15/04	9/15/04	9/15/04	9/15/04		
Time Sampled	10:30	11:00	11:45	12:15	12:30	13:15	14:00		
Date Analyzed	9/24/04	9/24/04	9/24/04	9/24/04	9/24/04	9/24/04	9/24/04		
Type of Sample									
Water Elev. (ft)									
Flow (cfs)	.00056	.00018	.000013	.0000022	.00084	.00029	.00013		
pH (std. units)	2.8	2.6	2.8	7.6	7.3	7.2	7.8		
Fe (mg/l)	81.5	135	119	10.4	27.1	128	9.98		
Mn (mg/l)									
Al (mg/l)									
Acidity (mg/L)	356	766	453	<1	<1	<1	<1		
Alkalinity (mg/l)	<1	<1	<1	126	512	355	296		
SO ₄ (mg/l)	2070	2400	2200	3040	2690	1200	584		

TABLE 2-IV-D INSTRUCTIONS

1. Use raw water influent for all analyses in this table. "Raw Water" is the influent prior to any type of treatment (chemical, physical, biological, passive, etc.). Representative outlets may be used in accordance with Title 47, Series 30, Section 4.5.b.6.
2. Show the flow amount in cubic feet per second (cfs). "Zero" (0) or "No flow" will not be accepted; samples must be taken during times of flow. For ground water monitoring wells show water elevation in well (flow would be NA unless artesian well)
3. Show the "Type of Sample" as follows: I = Influent; P = Pooled water. For sediment ditches (channels), where there is no influent area that can be sampled, a pooled water sample may be used for the analysis.

Application for
NPDES/ARTICLE 11 WATER POLLUTION CONTROL PERMIT
 STATE OF WEST VIRGINIA

NPDES Permit # WV 1011642 Modification # 1

Module 11: Modification

WVDEP Region #	1.2	Date(s) Submitted:	January 4, 2007, revised March 2, 2007	Filing Fee \$500.00 <input checked="" type="checkbox"/>
Permit Issuance Date: <u>June 30, 2006</u> <i>(Current issuance date)</i>		Required Reissuance filing Date: <u>January 31, 2010</u> <i>(120 days prior to expiration date)</i>		

Part I:	Applicant Information	New Address?	Yes	<input checked="" type="checkbox"/> No
A. Applicant Name: <u>Ohio County Development Authority</u>				
Mailing Address: <u>1500 Chapline Street</u>		<i>(If P.O. Box show</i>		
Street Address: <u>215 City County Building</u>		<i>street address also)</i>		
Town	<u>Wheeling</u>	State	<u>WV</u>	Zip <u>26003</u> Telephone No. <u>(304)234-3893</u>

B. Facility Name: <u>The Highlands</u>				
Mailing Address: <u>See Part I-A</u>		<i>(If P.O. Box show</i>		
Street Address: _____		<i>street address also)</i>		
Town	_____	State	_____	Zip _____ Phone No. _____
Physical Location of Facility: County <u>Ohio</u> Nearest P.O. <u>Triadelphia, WV</u>				
From Wheeling, east on I-70, take the Cabela's exit, turn right onto Cabela Drive. The site is located in the Storch's Run area.				
Facility Contact: <u>Gregory Stewart, Secretary-Treasurer</u>		<u>(304)234-3893</u>		
<i>(Name and Title)</i>		<i>(Phone)</i>		

Part II: Modification Category

A. Mark the category(s) of modification(s) being requested and enter the section(s) of the regulations that covers the modification(s) in the space provided.	
<input type="checkbox"/>	Minor; in accordance with 47CSR30 8.2.c.1 _____ <i>(If Transfer use only Module 12)</i>
<input checked="" type="checkbox"/>	Major; in accordance with 47CSR30 8.2.c.2 <u>A</u> _____ <i>(If "Major Mod". include sample advertisement with location map attached)</i>

NPDES MODIFICATION ADVERTISEMENT
(EACH BLANK MUST BE FILLED IN ACCORDANCE WITH THE MR-34-BM INSTRUCTIONS)
ADVERTISEMENT

Notice is hereby given that **Ohio County Development Authority** has submitted an application for Modification No. **1** to Article 11 /WVNPDES Permit No. **WV1011642** to the Department of Environmental Protection, **601 57th Street SE, Charleston, WV 25304** _____ in order to **enclose the main portion of Storch's Run in a valley drainage blanket.** The operation will discharge effluent into **Storch's Run of Middle Wheeling Creek and the Ohio River** and is located **1.0** (miles), **East of Triadelphia, WV**, in **Triadelphia** District of **Ohio** County, Longitude **80° 36' 54"** and Latitude **40° 02' 33"** (Coordinates from USGS Topographic Map).

The Department of Environmental Protection is seeking information on private surface water intakes for human consumption located in the above listed receiving streams and located down stream of this operation. Please provide your name, phone number, mailing address, the name of the stream being with the intake, and the physical location of the intake. This information needs to be submitted to the address above.

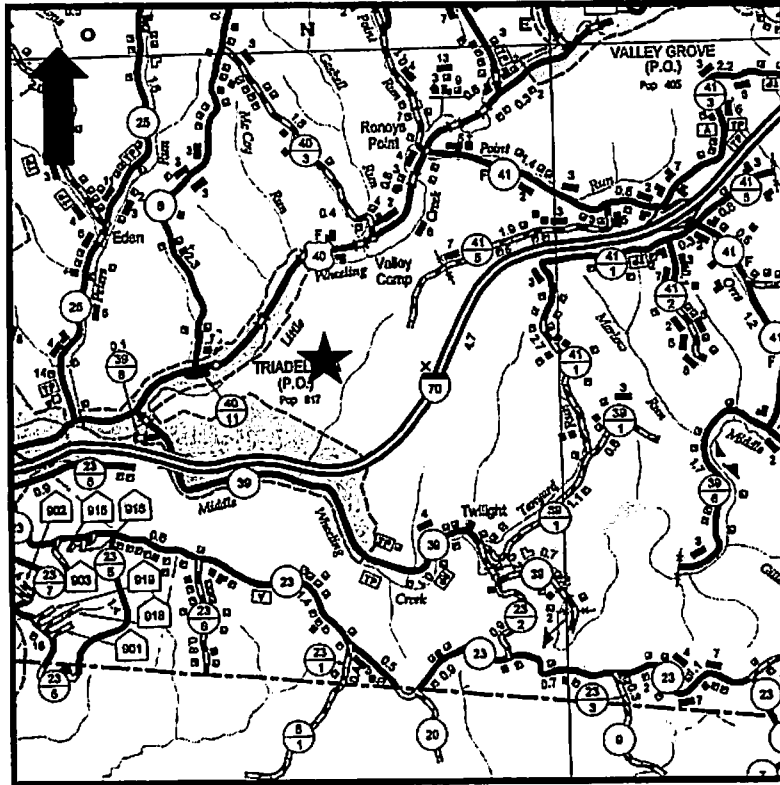
An anti-degradation review has been conducted. Tier 1 protection is afforded because effluent limitations ensure compliance with water quality criteria for all designated uses. Tier 2 protection is also afforded because the agency has made a determination that the discharge(s) will not cause significant degradation to the receiving streams(s) for any parameters of concern.

Comments on the Article 11/WVNPDES application or requests for a public hearing regarding the Article 11/NPDES application shall be in writing and if a public hearing is requested shall state the nature of the issues proposed to be raised in the hearing. Such written comments or requests should be sent to the Department of Environmental Protection (DEP) at the address above, and must also reference the Article 11 /WVNPDES permit number shown above. Comments received by _____, or thirty (30) days from date of publication, will be considered. A copy of the Article 11/WVNPDES application, draft permit and fact sheet (if required) will be available for inspection and obtaining copies during normal business hours at the DEP Regional Office located at the address above.

DEP Telephone No. **(304) 926-0490**

Article 11/NPDES Permit No. **WV1011642**

PROJECT LOCATION:



1" = 1.25 miles

PS&R

Pennsylvania Soil and Rock Incorporated

July 24, 2007

PS&R Project No. 07-305

Mr. Greg Stewart
Ohio County Development Authority
1500 Chapline Street
215 City-Council Building
Wheeling, WV 26003

RE: Acid-Base Accounting Test Results
The Highlands Development – Phase V Shot Rock
Ohio County, West Virginia

Dear Greg:

As requested by Jim Greene, PS&R has completed a series of Acid-Base Accounting tests on the various rock layers which will be encountered in the Phase V cut area. The testing was completed in response to Item 7 in the West Virginia DEP's letter dated June 25, 2007 regarding the modification to the NPDES permit WV1011642.

Laboratory Testing

Prior to submitting the samples for testing, we reviewed the rock core logs previously completed for the Phase V Blasting Study. Five distinct rock strata were encountered within the Phase V area, which include: shale, claystone, limestone, sandstone and siltstone. Representative samples of each rock strata were obtained from the core samples and submitted to Conti Testing Laboratories, Inc. for Acid-Base Accounting testing. A total of twelve rock samples were tested. Please see the attached laboratory data sheet for the individual test results. The results indicated are Net Neutralization Potential (NNP) values.

Conclusions

Based on the test results and available published literature on the interpretation of Acid-Base Accounting, the majority of the rock present in Phase V would produce alkaline drainage. Typically rock with an NNP less than -20 ppt CaCO_3 produce acid drainage. This was determined, as would be anticipated, for the coal sample tested from core location PH5-6A and the claystone from location PH5-2A. The claystone at this location was obtained directly below a coal seam.

Pennsylvania Soil and Rock Incorporated

The Highlands – Phase V Rock

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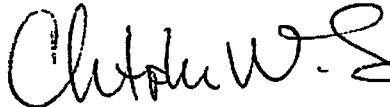
July 24, 2007

Rock with an NNP greater than 0 ppt CaCO_3 do not produce acid, while an NNP greater than 20 ppt CaCO_3 tend to produce alkaline drainage. The shale present in Phase V generally falls into the 0 to 20 NNP range. The more competent, durable rock such as the sandstone, siltstone and limestone was all found to have NNP values greater than 20.

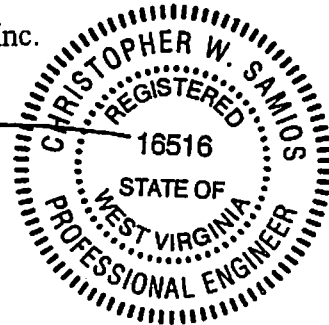
Generally, the more durable rock is utilized to construct the valley drainage blankets. The use of the limestone, sandstone and siltstone present in Phase V will actually help neutralize any acidic drainage from the mine spoil present upslope from the Phase VIII valley fill where the Phase V shot rock is to be placed. The less durable shale and claystone materials are typically limited for use in the general fill areas, well above the valley drainage blanket.

If you have any questions or require additional information regarding this issue please feel free to call me at 412-372-4000.

Very truly yours,
Pennsylvania Soil and Rock, Inc.



Christopher W. Samios, P.E.
Project Engineer





CONTI TESTING LABORATORIES, INC.

P. O. Box 174 Bethel Park, PA 15102
 P. (412) 833 7766
 F. (412) 854 0373
 contilab@verizon.net

~~07-302~~
 07-305
 P&R

Pennsylvania Soil & Rock Inc
 570 Beatty Road
 Monroeville, PA 15146
 Attn: Mr. Ray Glenn
 office: 412-372-4000
 fax: 412-372-4664

07/19/07

Received: 07/16/07
 Sampled by: client

RESULTS

<u>CTL ID</u>	<u>Sample ID</u>	<u>Acid Base Account</u> <u>Tons of CaCO3 equivalent per 1000 Tons Material</u>
113454	PH5-5A 6.4-9.2 Shale	8.5
113455	PH5-5A 9.2-18.5 Sandstone	50.2
113456	PH5-5A 72.0-76.5 Limestone	52.0
113457	PH5-6A 42.0-61.0 Shale	1.9
113458	PH5-6A 61.0-62.5 Coal	-144.3
113459	PH5-6A 65.0-70.0 Silstone	32.3
113460	PH5-1A 25.0-28.0 Sandstone	50.1
113461	PH5-1A 22.0-75.0 Shale	11.6
113462	PH5-1A 89.0-99.0 Limestone	49.1
113463	PH5-1A 143.9-162.0 Siltstone	50.9
113464	PH5-2A 41.0-68.0 Claystone	22.0
113465	PH5-2A 97.0-127.0 Claystone w/ Silstone	-66.7

Approved By: *J. B. Orsola*