

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Frank Butler
 2567 Spring Hill Rd.
 Stanton, VA 24401



9590 9402 2016 6123 8109 25

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 B. Received by (Printed Name) C. Date of Delivery
 4-8-17

Address different from item 1? Yes
 or delivery address below: No

3. Service Type
- | | |
|-----------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input checked="" type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Thomas R. Davies
 Ruth Maxwell Davies Pierce Heirs
 1004 Greenmont Circle
 Vienna, WV 26105



9590 9402 2016 6123 8109 32

2. Article Number (Transfer from service label)

350404

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Thomas R. Davies 4-8-17

Address different from item 1? Yes
 or delivery address below: No

3. Service Type
- | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Charles JR & Barbara Wellings
 1232 WV Rt. 18
 West Union, WV 26456



9590 9402 2016 6123 8108 95

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 B. Received by (Printed Name) C. Date of Delivery
 Charles Wellings 4-10-17

Address different from item 1? Yes
 or delivery address below: No

3. Service Type
- | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

OPTION ON DELIVERY

A. Signature
 Charles Welby Agent Addressee

B. Received by (Printed Name)
Charles Welby

C. Date of Delivery
4-10-17

Address different from item 1? Yes
 or delivery address below: No

Ace Fuels INC
NM St Rt Box 3
RT 18S
West Union, WV 26456



9590 9402 2016 6123 8109 18

2. Article Number (Transfer from service label)

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

0942 695T 1000 034E 5TD2

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$ *APR CL 2017*
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To *17-460*
 Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0942 695T 1000 034E 5TD2

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$ *APR CL 2017*
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To *17-460*
 Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0942 695T 1000 034E 5TD2

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$ *APR CL 2017*
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To *17-460*
 Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0942 695T 1000 034E 5TD2

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

- Return Receipt (hardcopy) \$
- Return Receipt (electronic) \$
- Certified Mail Restricted Delivery \$ *APR CL 2017*
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To *17-460*
 Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3430 0001 1569 7484

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

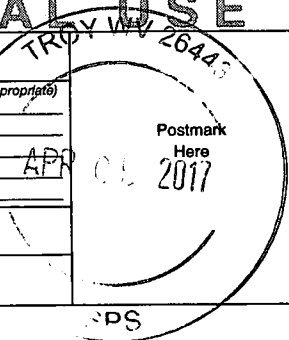
Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$



Sent To 17-460

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3430 0001 1569 7477

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

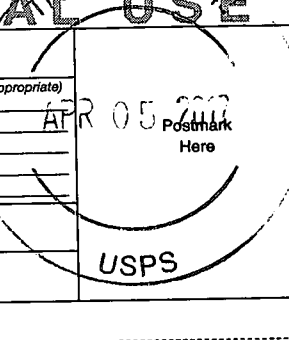
Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$



Sent To 17-460

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3430 0001 1569 7415

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

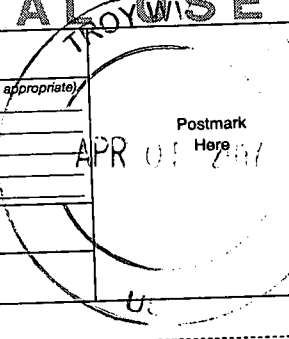
Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$



Sent To 17-460

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3430 0001 1569 7484

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

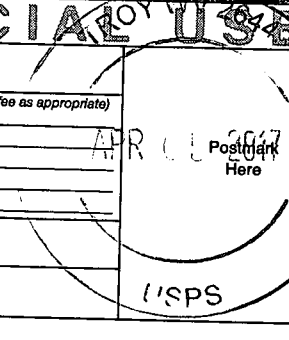
Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$



Sent To 17-460

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 3430 0001 1569 7477

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

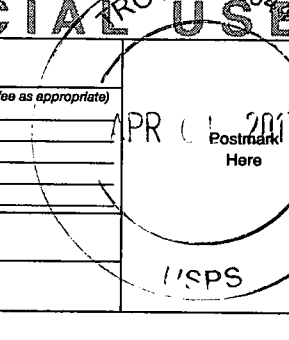
Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$



Sent To 17-460

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

**Karen M. Ireland
 Limited Partnership
 342 Ireland Rd
 Pullman, WV 26421**



9590 9402 2016 6123 8109 70

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- Agent
- Addressee

B. Received by (Printed Name)

WIK IRELAND

C. Date of Delivery

4/7/17

- address different from item 1? Yes
- or delivery address below: No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

USPS TRACKING #



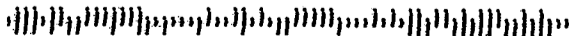
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 2016 6123 8109 70

United States
Postal Service

George Eidel
Doddridge County OEM/CFM
108 Court St. Ste 1
West Union, WV 26456

17-460



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

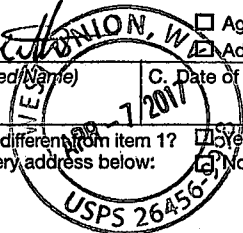
A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

 Address different from item 1? Yes
 or delivery address below: No


Carroll Aiden "Joey" Sutton
 917 WV Rt. 18
 West Union, WV 26456



9590 9402 2016 6123 8109 01

2. Article Number (Transfer from service label)

3. Service Type

- | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

USPS TRACKING#



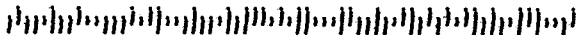
First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 2016 6123 8109 01

**United States
Postal Service**

**George Eidel
Doddridge County OEM/CFM
108 Court St. Ste 1
West Union, WV 26456**

17-460



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Richard D. Trent
Rt 2 Box 61
Buckhannon, WV 26201

17-460



9590 9402 2016 6123 8109 56

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Richard D. Trent* Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-7

Address different from item 1? Yes
 or delivery address below: No

3. Service Type

- | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

USPS TRACKING #



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 2016 6123 8109 56

**United States
Postal Service**

• Sender: Please print your name, address, and ZIP+4® in this box•

**George Eidel
Doddrige County OEM/CFM
108 Court St. Ste 1
West Union, WV 26456**



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Barbara McCutchan
PO Box 150
Beech Bottom, WV 26030



9590 9402 2016 6123 8108 88

2. Article Number (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

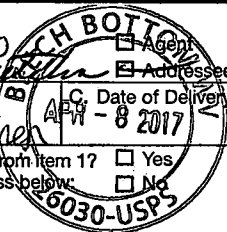
X *Barbara McCutchan* Agent Addressee

B. Received by (Printed Name)

Barbara McCutchan C. Date of Delivery

APR - 8 2017

Address different from item 1? Yes
or delivery address below: No



3. Service Type

- | | |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Insured Mail | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |

USPS TRACKING#
PITTSBURGH



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

9590 9402 2016 6123 8108 88

**United States
Postal Service**

George Eidel
Doddrige County OEM/CFM
108 Court St. Ste 1
West Union, WV 26456

17-460



Doddridge County Office of
Emergency Management/Floodplain Management
108 Court Street Suite 1
Tel 304-873-1343
doddridgecountyfpm@gmail.com



MARCH 24, 2017

Dear Sir or Ma'am,

You are receiving this letter because you have been identified as a land surface and/or mineral rights owner for property or adjacent property related to the proposed development/project identified by the following page.

No action is required of you. This letter is simply to inform you of the proposed development.

If you would like to comment on this proposed project, or would like additional information, you may contact the Doddridge County Floodplain Manager at the above address.

Respectfully yours,

A handwritten signature in cursive script, appearing to read "George Eidel".

George Eidel, CFM, OEM Director/Floodplain Manager



Doddridge County Floodplain Permits

(Week of April 3, 2017)

Please take notice that on the **24th day of March, 2017, Potesta on behalf of EQT Production Company** filed an application for a Floodplain Permit **#17-460** to develop land located at or about **39.290692N, 80.753433W to 39.274764N, 80.765678W, Bluestone Creek**. The Application is on file with the Clerk of the County Court and may be inspected or copied during regular business hours. Any interested persons who desire to comment shall present the same in writing by **April 24, 2017 (20 calendar days after the announcement at the regularly scheduled Doddridge County Commission Meeting)** delivered to the Clerk of the County Court at 108 Court Street Ste. 1, West Union, WV 26456. **This project is Bluestone WEU 6 to WEU 2 Water Line.**



Floodplain Development Permit

Doddridge County, WV Floodplain Management

This permit gives approval for the development/ project listed that impacts the FEMA-designated floodplain and/or floodway of Doddridge County, WV, pursuant to the rules and regulations established by all applicable Federal, State and local laws and ordinances, including the Doddridge County Floodplain Ordinance. This permit must be posted at the site of work as to be clearly visible, and must remain posted during entirety of development.

Permit: #17-460
Bluestone WEU 6 to WEU 2 Waterline

Date Approved: May 5, 2017

Expires: May 5, 2018

Issued to: EQT Production Company
Potesta

POC: Cory Chalmers
304-848-0061

Company Address: 120 Professional Place, Bridgeport, WV 26330

Project Address: Bluestone Creek

Firm:

Lat/Long: 39.290692, 80.753433 to
39.274764, 80.765678

Purpose of development: Bluestone WEU 6 to WEU 2 Waterline

Issued by: George C. Eidel, CFM, OEM Director/Doddridge County FPM (or designee)

Date: May 5, 2017

For additional information regarding this permit, please contact
Doddridge County Floodplain Manager at 304.873.2631, or via email at
doddridgecountyfpm@gmail.com
118 East Court Street; West Union, WV 26456

13812

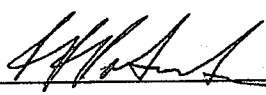
POTESTA & ASSOCIATES, INC.
7012 MACCORKLE AVE SE
CHARLESTON, WEST VIRGINIA 25304

E2ShieldSM Check Fraud
Protection for Business
69-36-519

DATE 05/01/17

PAY TO THE ORDER OF Doddridge County Commission \$ 500.00
Five Hundred Dollars and 00/100 DOLLARS

CHASE
JPMorgan Chase Bank, N.A.
www.Chase.com

FOR _____ 

⑆013812⑆ ⑆051900366⑆ 625733274⑆



Details on back
Security Features

#17-460 Bluestone NEU6 to WEU & WL

HOLD TO LIGHT TO VIEW WATERMARK IN PAPER HEAT SENSITIVE RED IMAGE DISAPPEARS WITH HEAT DETECTION AREA REVEALS A LOCK WHEN TESTED

13813

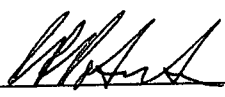
POTESTA & ASSOCIATES, INC.
7012 MACCORKLE AVE SE
CHARLESTON, WEST VIRGINIA 25304

E2ShieldSM Check Fraud
Protection for Business
69-36-519

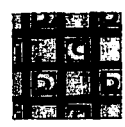
DATE 05/01/17

PAY TO THE ORDER OF Doddridge County Commission \$ 500.00
Five Hundred Dollars and 00/100 DOLLARS

CHASE
JPMorgan Chase Bank, N.A.
www.Chase.com

FOR _____ 

⑆013813⑆ ⑆051900366⑆ 625733274⑆



Details on back
Security Features

Doddridge County, West Virginia

RECEIPT NO: 9066

DATE: 2017/05/08

FROM: POTEST & ASSOCIATES

AMOUNT: \$

500.00

FIVE HUNDRED DOLLARS AND 00 CENTS

FOR: #17-460 BLUESTONE WEU 6 TO WEU 2 WATERLINE

00000013812 FP-BUILDING PERMITS

020-318

TOTAL: \$500.00

MICHAEL HEADLEY

SHERIFF & TREASURER

MEC

CLERK

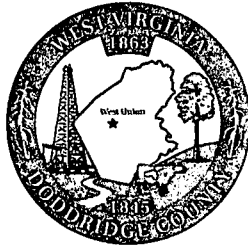
Customer Copy

FLOODPLAIN PERMIT #17-460

EQT/Potesta Bluestone

WEU6 to WEU2 WL

TASK	COMPLETE (DATE)	NOTES
CHECK RECEIVED		
US ARMY CORP. ENGINEERS (USACE)		
US FISH & WILDLIFE SERVICES (USFWS)		
WV DEPT. NATURAL RESOURCES (WVDNR)		
WV DEPT. ENVIROMENTAL PROTECTION (WVDEP)		
STATE HISTORIC & PRESERVATION OFFICE (SHPO)		
OFFICE of LAND & STREAM (OLS)		
DATE OF COMMISSION READING	April 4, 2017	
DATE AVAILABLE TO BE GRANTED	April 24, 2017	
PERMIT GRANTED	✓	
COMPLETE	✓	5-5-17



Doddridge County Floodplain Permits

(Week of April 3, 2017)

Please take notice that on the **24th day of March, 2017, Potesta on behalf of EQT Production Company** filed an application for a Floodplain Permit **#17-460** to develop land located at or about **39.290692N, 80.753433W to 39.274764N, 80.765678W, Bluestone Creek**. The Application is on file with the Clerk of the County Court and may be inspected or copied during regular business hours. Any interested persons who desire to comment shall present the same in writing by **April 24, 2017** (20 calendar days after the announcement at the regularly scheduled Doddridge County Commission Meeting) delivered to the Clerk of the County Court at 108 Court Street Ste. 1, West Union, WV 26456. **This project is Bluestone WEU 6 to WEU 2 Water Line.**



Engineers and Environmental Consultants

17-460

7012 MacCorkle Avenue, SE, Charleston, WV 25304 - (304) 342-1400 • FAX (304) 343-9031; www.potesta.com

March 21, 2017

Mr. George Eidel
Doddridge County Floodplain Coordinator
Doddridge County Commission
118 East Court Street
West Union, West Virginia 26456

MAR24 17 1:09PM

RE: Floodplain Permit Application
EQT Production Company
EQT WEU 6 to WEU 2 Water Line
Doddridge County, West Virginia
POTESTA Project No. 0101-11-0147-201D

Dear Mr. Eidel:

Potesta & Associates, Inc. (POTESTA) is pleased to submit this cover letter with the associated Floodplain Development Permit Application for the proposed Bluestone WEU 6 to WEU 2 Water Line Project located along Bluestone Creek in West Union Tax District. Based on information presented on the site FIRM (FM54017C0120C), portions of the project are located within the FEMA Flood Zone A. Flood Zone A is the regulatory floodplain associated with the Base Flood (1 percent annual chance flood event), commonly referred to as the 100-year floodplain, and indicates that the limits of the floodplain are approximate.

The proposed project will consist of approximately 9,583 linear feet of temporary water line. Approximately 1,200 feet is located within the floodplain limits, beginning with Station 44+50 on Sheet 3 and ending with Station 56+50 on Sheet 4. No excavation or fill will be associated with this project. Work within the floodplain limits will be placement of a portion of temporary water line.

Included with this letter are the permit application; directions to the site; Erosion and Sediment Control Plan shown on Drawing Nos. 3 and 4, which show the line location relative to the floodplain; Flood Insurance Rate Map, and land owner information.

POTESTA & ASSOCIATES, INC.

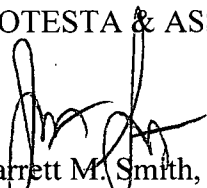
Charleston, West Virginia • Morgantown, West Virginia • Winchester, Virginia • Cambridge, Ohio

Mr. George Eidel
March 21, 2017
Page 2

If you have any questions, please feel free to contact me at (304) 342-1400 or jmsmith@potesta.com or Cory Chalmers (EQT) at (304) 848-0061 or CChalmers@eqt.com.

Sincerely,

POTESTA & ASSOCIATES, INC.

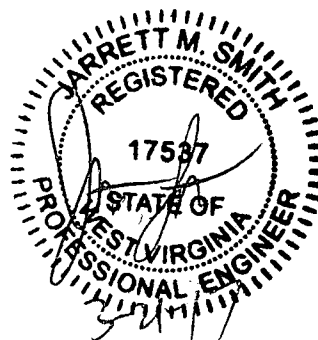


Jarrett M. Smith, P.E.
Senior Engineer

JMS:JWB/rjh

Enclosures

c: Mr. Cory Chalmers – EQT (via email)





Permit#	<u>17-460</u>
Project Name:	<u>WEU 6 to WEU 2</u> <u>Water Line</u>
Permittees Name:	<u>EQT Production</u>

Doddridge County, WV

Floodplain Development Permit Application

This document is to be used for projects that impact/potentially impact the FEMA—designated floodplain and/or floodway of Doddridge County, WV pursuant to the rules and regulations established by all applicable Federal, State and local laws and ordinances, including the Doddridge County Floodplain Ordinance.

MAR24 17 1:09PM

SECTION 1: GENERAL PROVISIONS (APPLICANT TO READ AND SIGN)

1. No work may start until a permit is issued.
2. The permit may be revoked if any false statements are made herein.
3. If revoked, all work must cease until permit is re-issued.
4. Development shall not be used or occupied until a Certificate of Compliance is issued.
5. The permit will expire if no work is commenced within six months of issuance.
6. Applicant is hereby informed that other permits may be required to fulfill local, state, and federal requirements.
7. Applicant hereby gives consent to the Floodplain Administrator/Manager or his/her representative to make inspections to verify compliance.
8. I THE APPLICANT CERTIFY THAT ALL STATEMENTS HEREIN AND IN ATTACHMENTS TO THIS APPLICATION ARE TO THE BEST OF MY KNOWLEDGE, TRUE AND ACCURATE.

APPLICANT'S SIGNATURE

DATE

3/20/17

Doddridge County Commercial/Industrial
Floodplain Development Permit Application

Applicant Information:

Please provide all pertinent data.

Applicant Information		
Responsible Company Name: EQT Production Company		
Corporate Mailing Address: 120 Professional Place		
City: Bridgeport	State: WV	Zip: 26330
Corporate Point of Contact (POC): Cory Chalmers		
Corporate POC Title: Environmental Coordinator		
Corporate POC Primary Phone: (304) 848-0061		
Corporate POC Primary Email: cchalmers@eqt.com		
Corporate FEIN: 25-0754685	Corporate DUNS: N/A	
Corporate Website: N/A		
Local Mailing Address: N/A		
City: N/A	State: N/A	Zip: N/A
Local Project Manager (PM): Same as Point of Contact		
Local PM Primary Phone: Same as Point of Contact		
Local PM Secondary Phone: Same as Point of Contact		
Local PM Primary Email: Same as Point of Contact		
Person Filing Application: Jordan Beard		
Applicant Title: Engineer		
Applicant Primary Phone: (304) 342-1400		
Applicant Secondary Phone: N/A		
Applicant Primary Email: jwbeard@potesta.com		

Doddridge County Commercial/Industrial
Floodplain Development Permit Application

Proposed Development:

Please check all elements of the proposed project that apply.

DESCRIPTION OF WORK (CHECK ALL APPLICABLE BOXES)

A. STRUCTURAL DEVELOPMENT

<u>ACTIVITY</u>	<u>STRUCTURAL TYPE</u>
<input type="checkbox"/> New Structure	<input type="checkbox"/> Residential (1 – 4 Family)
<input type="checkbox"/> Addition	<input type="checkbox"/> Residential (more than 4 Family)
<input type="checkbox"/> Alteration	<input type="checkbox"/> Non-residential (floodproofing)
<input type="checkbox"/> Relocation	<input type="checkbox"/> Combined Use (res. & com.)
<input type="checkbox"/> Demolition	<input type="checkbox"/> Replacement
<input type="checkbox"/> Manufactured/Mobil Home	

B. OTHER DEVELOPMENT ACTIVITIES:

- Fill Mining Drilling Pipelining
- Grading
- Excavation (except for STRUCTURAL DEVELOPMENT checked above)
- Watercourse Alteration (including dredging and channel modification)
- Drainage Improvements (including culvert work)
- Road, Street, or Bridge Construction
- Subdivision (including new expansion)
- Individual Water or Sewer System
- Other (please specify)

Doddridge County Commercial/Industrial
Floodplain Development Permit Application

Development Site/Property Information:

Please provide physical description of the site/property, along with pertinent ownership (surface and mineral rights) data as applicable. Attach appropriate maps from the WV Flood Tool showing location of proposed development. Use additional copies of this page if development spans multiple property boundaries. Designate each property by number (i.e. Property 1 of 1, Property 2 of 7, etc.)

Property Designation: ____ of ____

Site/Property Information:		
Legal Description: Please See Attached		
Physical Address/911 Address:		
Decimal Latitude/Longitude: Begin: 39.290692N, 80.753433W		
DMS Latitude/Longitude: End: 39.274764N, 80.765678W		
District:	Map:	Parcel:
Land Book Description:		
Deed Book Reference:		
Tax Map Reference:		
Existing Buildings/Use of Property:		

Floodplain Location Data: (to be completed by Floodplain Manager or designee)			
Community:	Number:	Panel:	Suffix:
Location (Lat/Long):		Approximate Elevation:	
		Estimated BFE:	
Is the development in the floodway? Yes No		Is the development in the floodplain? Yes No Zone: _____	
Notes:			

Doddridge County Commercial/Industrial
Floodplain Development Permit Application

Property Owner Data:

Please provide data on current site/property landowner(s), both surface and mineral rights (as applicable). Use additional copies of this page as needed. Designate each page in relation to each property listed above.

Property Designation: ___ of ___ See attached for property owners/adjacent landowners.

Property Owner Data:		
Name of Primary Owner (PO):		
PO Address:		
City:	State:	Zip:
PO Primary Phone:		
PO Secondary Phone:		
PO Primary Email:		

Surface Rights Owner Data:		
Name of Primary Owner (PO):		
PO Address:		
City:	State:	Zip:
PO Primary Phone:		
PO Secondary Phone:		
PO Primary Email:		

Mineral Rights Owner Data: (As Applicable)		
Name of Primary Owner (PO):		
PO Address:		
City:	State:	Zip:
PO Primary Phone:		
PO Secondary Phone:		
PO Primary Email:		

Doddridge County Commercial/Industrial
Floodplain Development Permit Application

Contractor Data:

Please provide all pertinent data for contractors and sub---contractors that may be participating in this project. Use additional copies of this page as needed. Designate each page in relation to each property listed above.

Property Designation: ___ of ___		
Contractor/Sub-Contractor (C/SC) Information:		
C/SC Company Name: N/A		
C/SC WV License Number:		
C/SC FEIN:	C/SC DUNS:	
Local C/SC Point of Contact (POC):		
Local C/SC POC Title:		
C/SC Mailing Address:		
City:	State:	Zip-Code:
Local C/SC Office Phone:		
Local C/SC POC Phone:		
Local C/SC POC E-Mail:		

Engineer Firm Information:		
Engineer Firm Name:		
Engineer WV License Number:		
Engineer Firm FEIN:	Engineer Firm DUNS:	
Engineer Firm Primary Point of Contact (POC):		
Engineer Firm Primary POC Title:		
Engineer Firm Mailing Address:		
City:	State:	Zip-Code:
Engineer Firm Office Phone:		
Engineer Firm Primary POC Phone:		
Engineer Firm Primary POC E-Mail:		

Adjacent and/or Affected Landowners Data

Please provide data for all adjacent and/or affected surface owners (both up and down stream) whose property may be impacted by proposed development as demonstrated by a floodplain study or survey. Use additional copies of this page as needed.

Adjacent Property Owner Data: Upstream		
Name of Primary Owner (PO):		
Physical Address:		
City:	State:	Zip:
PO Primary Phone:		
PO Secondary Phone:		
PO Primary Email:		

Adjacent Property Owner Data: Upstream		
Name of Primary Owner (PO):		
Physical Address:		
City:	State:	Zip:
PO Primary Phone:		
PO Secondary Phone:		
PO Primary Email:		

Adjacent Property Owner Data: Downstream		
Name of Primary Owner (PO):		
Physical Address:		
City:	State:	Zip:
PO Primary Phone:		
PO Secondary Phone:		
PO Primary Email:		

Adjacent Property Owner Data: Downstream		
Name of Primary Owner (PO):		
Physical Address:		
City:	State:	Zip:
PO Primary Phone:		
PO Secondary Phone:		
PO Primary Email:		

LANDOWNER INFORMATION FOR
WEU 6 TO WEU 2 WATER LINE

LEGAL DESCRIPTION OF PARCEL	PHYSICAL ADDRESS 911 ADDRESS	DECIMAL		LOCATION	DISTRICT	MAP	PARCEL	LAND BOOK DESCRIPTION	DEED BOOK REFERENCE	TAP MAP REFERENCE	EXISTING BUILDING	PHONE NUMBER
		LATITUDE	LONGITUDE									
LANDOWNERS												
BLUESTONE 81.91 AC	22 GARTON PLAZA WESTON, WV 26452	39.28641	-80.77922	ROUTE 18	8	12	71.1		256/324		FOREST LAND	304 269-7102
1/2 INT 34 AC 20 P MI CREEK	FRANK L BUTLER 2567 SPRING HILL RD STANTON, VA 24401	39.29139	-80.77707	ROUTE 50	8	12	64		259/275		FOREST LAND	304 269-7102
		7015 3430 0001 1569 7446										
1/2 INT 34 AC 20 P MI CREEK	KEY OIL CO											
See Deed Book 162/771	THOMAS R. DAVIES 1004 GREENMONT CIRCLE VIENNA, WV 26105 RUTH MAXWELL DAVIES PIERCE HEIRS	N/A	N/A	ROUTE 18	8	15	8		162/771		FOREST LAND	N/A
		7015 3430 0001 1569 7453										
BLUESTONE 650.84AC SURFACE	CHARLES JR AND BARBARA L WELLINGS	39.27831	-80.75439	ROUTE W UNION RT. 18	8	16	16		240/545		FARM	304 873-2329
ADJACENT LANDOWNERS												
BLUESTONE 1.91 AC	RICHARD D TRENT RT 2 BOX 61 BUCKHANNON, WV 26201	39.28399	-80.75832	STAR RT W UNION RT. 18	8	11	89		302/486		RESIDENTIAL	304 472-0079
		7015 3430 0001 1569 7460										
2.00 AC BLUESTONE CREEK	WILLIAM LEE AND CHRISTINA TRENT 1 FIRST AMERICAN WAY WESTLAKE, TX 76262	39.28507	-80.75722	STAR RT W UNION RT. 18	8	11	89.1		206/87		RESIDENTIAL	UNKNOWN
		7015 3430 0001 1569 7477										
M I CREEK 105.35 AC	KAREN M IRELAND LIMITED PARTNERSHIP 342 IRELAND RD PULLMAN, WV 26421	39.28732	-80.76283	RT. 18	8	11	80		235/3		PASTURE/FOREST	304 349-2957
		7015 3430 0001 1569 7484										
BLUESTONE LOT 31.33 AC	ACE FUELS INC NM ST RT BOX 3 WEST UNION, WV 26456	39.28205	-80.75698	RT. 18	8	16	16.3		203/226		COMMERCIAL	UNKNOWN
		7015 3430 0001 1569 7439										
BLUESTONE 22550 SQ FT .51 AC	ACE FUELS INC ROUTE 18 SOUTH WEST UNION, WV 26456	39.28164	-80.75674	RT. 18	8	16	16.4		203/226		COMMERCIAL	UNKNOWN
0.626 AC BLUESTONE	SUTTON ALDEN CARROLL "JOEY" ET UX	39.28235	-80.75619	RT. 18	8	16	16.1		196/359		RESIDENTIAL	UNKNOWN
BLUESTONE MH 123.38 AC	WILLIAM PAUL MCCUTCHAN TRUST UTA 11/9/1994	39.28196	-80.75389	RT. 18	8	16	1		WB48/610		RESIDENTIAL	304 873-1849

1 Charles Jr & Barbara Wellings 1232 W Rt. 18 West Union, WV 26456
7015 3430 0001 1569 7415

2 Barbara McCutchan
PO Box 150 Beech Bottom, WV 26030
7015 3430 0001 1569 7408

3. Carroll Alden "Joey" Sutton District: 8
917 W Rt 18 Map: 16
West Union, WV 26456 Parcel: 1.1 & 1.2
7015 3430 0001 1569 7422

Site Plan

A Site Plan is an accurate and detailed map of the proposed development for this project. It shows the size, shape, location and special features of the project property, and the size and location of any development planned to the property, especially as that development will impact the floodplain and/or floodway. Site plans show what currently exists on the project property, and any changes or improvements you are proposing to make. **A certified and licensed engineering firm should complete site plans.**

A SITE PLAN MUST CONTAIN THE FOLLOWING INFORMATION:

1. Legal description of the parcel, north arrow and scale
2. All property lines and their dimensions
3. Names of adjacent roads, location of driveways
4. Location of sloughs, tributaries, streams, rivers, wetlands, ponds, and lakes, with setbacks indicated, and including FEMA floodplain data based on most updated FIRM.
5. Location, size, shape of all buildings, existing and proposed, with elevation of lowest floor indicated.
6. Location and dimensions of existing or proposed on-site sewage systems.
7. Location of all propane tanks, fuel tanks or other liquid storage tanks whether above ground or below ground level.
8. Location and dimensions of any proposed pipeline placement(s) into floodplain/floodway.
9. Location and dimensions of any roadway development into floodplain/floodway. *(Includes initial development access roads)*
10. Location and dimensions of any bridge and/or culvert development into floodplain/floodway.
11. Location and dimensions of any storage yard or facility into the floodplain/floodway.
12. Location of any existing utilities and/or proposed utility placement and/or displacement.
13. Location, dimensions and depth of any existing or proposed fill on site.
14. A survey showing the **existing ground elevations** of at least location on the building site. **ELEVATION NOTE:** All vertical datum will reference either NGVD 29 or NAVD 88. Assumed datum will not be acceptable unless the property is located in an area where vertical datum has not been published. For those areas where vertical datum has not been established, a site plan with contours, elevations using assumed datum, high water marks and existing water levels of sloughs, rivers, lakes or streams and proposed lowest floor elevation.

Applicant

Please read print name, sign and date below:

- I certify that I am authorized to submit this application for the primary project developer.
- I certify that the information included in this application is to the best of my knowledge true and complete.
- I certify that all required Federal, State, and local permits required by law and/or ordinance for the above described development of this project have been properly attained, are current and valid, and must be presented with this application before a Doddridge County Floodplain Permit may be issued.
- I understand that if in the course of the development project additional permits become required that were not needed during the initial proposal, the primary developer must notify the Doddridge County Floodplain Manager within 48 hours of such need, and that a "Stop Work" order may be issued for all project work directly impacting the floodplain or floodway, until such time the required additional permits are acquired.
- I understand that once the floodplain permit is submitted, the application will be entered into official public record at the next regularly scheduled Doddridge County Commission meeting after the date of submittal.
- I understand that from the date of submittal of the fully completed permit application, the Doddridge County Floodplain Manager has ninety (90) days to make a determination to either grant or deny said permit application. During this approval period, the Doddridge County Floodplain Manager may, at his or her discretion, conduct a review and/or additional study of provided documentation by means of an independent engineering firm. All costs associated with said review and/or study must be reimbursed to the County before issuance of approved permit.
- I understand that during the approval period, the Doddridge County Floodplain Manager or designee may at his or her discretion conduct site visits and document conditions of proposed development pursuant to the permit application.
- I understand that once the Floodplain Permit is granted, the permit will be entered into official public record at the next scheduled Doddridge County Commission meeting after the date of issuance. Appeals to the permit may be made no later than twenty (20) days after said issuance. If a valid appeal is submitted, as determined by the Doddridge County Floodplain Manager, a "Stop Work" order will be issued for all project development directly involving the floodplain or floodway. A public hearing by the Doddridge County Appeals Board will be scheduled no less than ten (10) days after the next regularly scheduled Doddridge County Commission meeting.
- I understand that all decisions of the Doddridge County Appeals Board shall be final.
- I understand issuance of a Floodplain Permit authorizes me to proceed with construction as proposed. A Certificate of Compliance is required upon substantial completion of the project.
- In signing this application, the primary developer hereby grants the Doddridge County Floodplain Manager or designee the right to enter onto the above-described location to inspect the development work proposed, in progress, and/or completed.
- I understand that if I do not follow exactly the site-plan submitted and approved by this permit that a "Stop Work" order may be issued by the Wirt County Floodplain Manager and that I must stop all construction immediately until discrepancies of actual work vs. proposed work is resolved.

Applicant Signature: _____

Date: 3/20/17

Applicant Printed Name: Cory Chalmers

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FORWARD TO THE RIGHT

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

X

B. Received by (*Printed Name*) C. Date of Delivery

Address different from item 1? Yes
 or delivery address below: No

William Lee & Christina Trent
1 First American Way
Westlake, TX 76262



9590 9402 2016 6123 8109 49

2. Article Number (*Transfer from service label*)

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

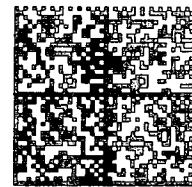
CERTIFIED MAIL

George Eidel
Doddridge County OEM/CFM
108 Court St. Ste 1
West Union, WV 26456



7015 3430 0001 1569 7477

WESTON
APR 15
2017



HASLER

\$006.74⁰

04/03/2017 ZIP 26456
012E14643162

US POSTAGE

Bus Closed
4-15-17

William Lee & Christina Trent
1 First American Way
Westlake, TX 76262

NIXIE 750 SE 1 0004/11/17

RETURN TO SENDER
NO SUCH NUMBER
UNABLE TO FORWARD

NSN
7645 622095
76262-5748

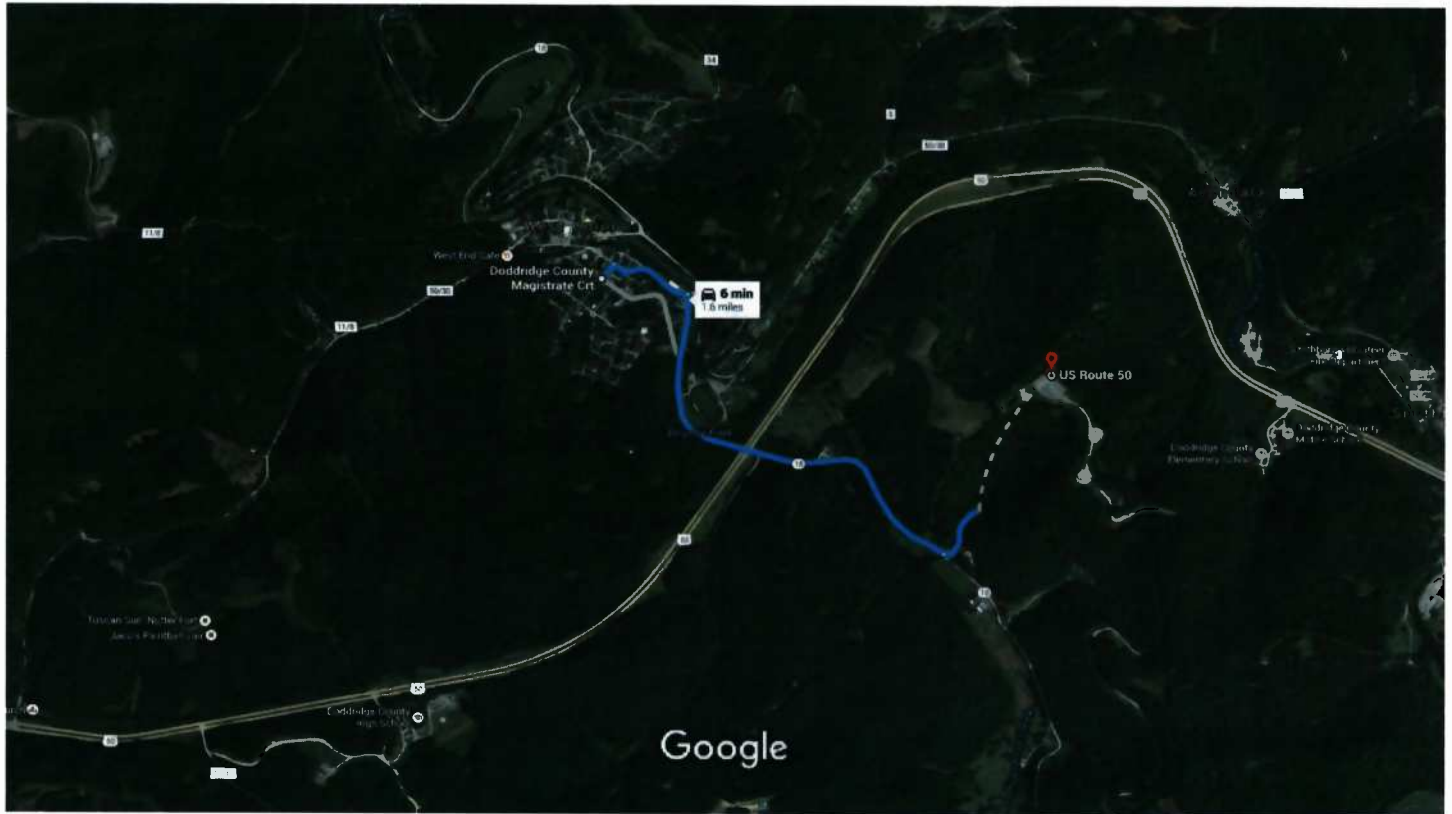
BC: 26456209501 *1871-04308-05-43





Doddridge County Magistrate Crt to US Route 50, West Union, WV 26456

Drive 1.6 miles, 6 min



Imagery ©2015 Google, Map data ©2015 Google 1000 ft

Doddridge County Magistrate Crt

118 E Court St Rm 104, West Union, WV 26456

- ↑ 1. Head northeast on Columbia St toward W Main St 269 ft
- ↘ 2. Turn right onto E Main St 0.2 mi
- ↘ 3. Turn right onto WV-18 S 1.2 mi
- ↙ 4. Turn left 0.2 mi

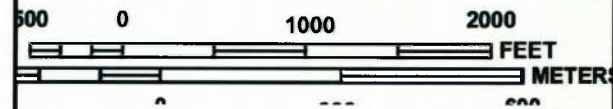
US Route 50

West Union, WV 26456

These directions are for planning purposes only. You may find that construction projects, traffic, weather, or other events may cause conditions to differ from the map results, and you should plan your route accordingly. You must obey all signs or notices regarding your route.



MAP SCALE 1" = 1000'



NFIP
 NATIONAL FLOOD INSURANCE PROGRAM

PANEL 0120C

FIRM
FLOOD INSURANCE RATE MAP
DODDRIDGE COUNTY,
WEST VIRGINIA
AND INCORPORATED AREAS

PANEL 120 OF 325
 (SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY	NUMBER	PANEL	SUFFIX
DODDRIDGE COUNTY	540324	0120	C
WEST UNION, TOWN OF	540325	0120	C

Notice to User: The **Map Number** shown below should be used when placing map orders; the **Community Number** shown above should be used on insurance applications for the subject community.



MAP NUMBER
54017C0120C
MAP REVISED
OCTOBER 4, 2011

Federal Emergency Management Agency

JOINS PANEL 0140

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

MATCHLINE DRAWING NO. 2

No.	Date	Revision

DESIGN
CAD File No.
JM
Drawn
JWB
Checked
JMS
Approved
1" = 100'
Scale:
JAN. 2016
Date:
11-0147.2016
Project No.

POTESTA & ASSOCIATES, INC.
ENGINEERS AND ENVIRONMENTAL CONSULTANTS
7013 MacArthur Ave. SE, Charleston, NY 14804
TEL: (804) 545-1400 FAX: (804) 545-9881
E-Mail: info@potesta.com



ISSUE DATE 1/13/2016

Client
EQT PRODUCTION COMPANY
120 PROFESSIONAL PLACE
BRIDGEPORT, WEST VIRGINIA

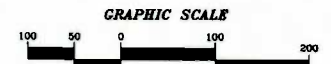
PLAN SHEET
WEU 6 TO WEU 2 IMPROVEMENT
EROSION & SEDIMENT CONTROL PLAN
DODDRIDGE COUNTY, WEST VIRGINIA

3
Drawing No.



NOTES:

1. BASE MAPPING TAKEN FROM AERIAL PHOTOGRAPHY. THE SCALE OF THE BASE MAPPING IS APPROXIMATE. ACTUAL LOCATIONS OF EXISTING FEATURES MAY VARY.
2. WEEKLY VISUAL INSPECTION OF THE SEDIMENT CONTROL MEASURES SHALL BE CONDUCTED TO VERIFY THEY ARE FUNCTIONING PROPERLY. SILT FENCE, IF REMOVED TO ALLOW CONSTRUCTION ACTIVITIES, SHALL BE REPLACED AT THE END OF EACH WORK DAY. SEDIMENT STRUCTURES SHALL BE CLEANED ONCE THE STORAGE CAPACITY HAS BEEN REDUCED BY 50%.
3. THE SITE SHALL BE INSPECTED ON A REGULAR BASIS TO ENSURE INTEGRITY OF GRADED SURFACES, VEGETATION, EROSION AND SEDIMENT CONTROL MEASURES AND OTHER PROTECTIVE DEVICES. THIS INSPECTION SHOULD BE PERFORMED AT A MINIMUM OF ONCE EVERY SEVEN CALENDAR DAYS, AND SHALL OCCUR WITHIN 24 HOURS AFTER ANY STORM EVENT GREATER THAN 0.5 INCHES OF RAINFALL PER 24-HOUR PERIOD UNTIL THE SITE HAS BEEN STABILIZED. ANY REQUIRED REPAIRS OR MAINTENANCE WILL BE MADE IMMEDIATELY.
4. DISTURBED AREAS SHALL BE SEEDED AND MULCHED UPON COMPLETION OF GRADING.
 - STABILIZATION MEASURES SHALL BE INITIATED AS SOON AS PRACTICABLE IN PORTIONS OF THE SITE WHERE CONSTRUCTION ACTIVITIES HAVE TEMPORARILY OR PERMANENTLY CEASED, BUT IN NO CASE MORE THAN SEVEN DAYS AFTER THE CONSTRUCTION ACTIVITY IN THAT PORTION OF THE SITE HAS PERMANENTLY CEASED.
 - WHERE THE INITIATION OF STABILIZATION MEASURES BY THE SEVENTH DAY AFTER CONSTRUCTION ACTIVITY TEMPORARILY OR PERMANENTLY CEASES IS PRECLUDED BY SNOW COVER, STABILIZATION MEASURES SHALL BE INITIATED AS SOON AS CONDITIONS ALLOW.
 - WHERE CONSTRUCTION ACTIVITY WILL RESUME ON A PORTION OF THE SITE WITHIN 14 DAYS FROM WHEN ACTIVITIES CEASED, (E.G., THE TOTAL TIME PERIOD THAT CONSTRUCTION ACTIVITY IS TEMPORARILY HALTED IS LESS THAN 14 DAYS) THEN STABILIZATION MEASURES DO NOT HAVE TO BE INITIATED ON THAT PORTION OF THE SITE BY THE SEVENTH DAY AFTER CONSTRUCTION ACTIVITIES HAVE TEMPORARILY CEASED.
 - AREAS WHERE THE SEED HAS FAILED TO GERMINATE ADEQUATELY (UNIFORM PERENNIAL VEGETATIVE COVER WITH A DENSITY OF 70%) WITHIN 30 DAYS AFTER SEEDING AND MULCHING MUST BE RESEEDDED IMMEDIATELY, OR AS SOON AS WEATHER CONDITIONS ALLOW.
5. EROSION & SEDIMENT CONTROLS SHALL BE INSTALLED IN LOCATIONS DOWN SLOPE FROM THE DISTURBED AREAS AS A FIRST MEASURE OF CONSTRUCTION. SILT FENCES SHALL BE INSPECTED AFTER EACH RAINFALL. ANY REQUIRED REPAIRS SHALL BE MADE IMMEDIATELY. DAMAGED, DECOMPOSED OR OTHERWISE INEFFECTIVE SILT FENCE SHALL BE REPLACED. SEDIMENT DEPOSITS SHOULD BE REMOVED AS REQUIRED WHEN DEPOSITS REACH APPROXIMATELY ONE-HALF OF THE BARRIER HEIGHT. ANY SEDIMENT DEPOSITS REMAINING IN PLACE AFTER THE SILT FENCE IS NO LONGER NEEDED SHALL BE DRESSED TO CONFORM TO THE EXISTING GRADE AND STABILIZED. CONTRACTOR MAY USE COMPOST FILTER SOCKS AS AN ALTERNATIVE TO SILT FENCE.
6. DEVICES LISTED HEREIN ARE CONSIDERED MINIMUM EROSION AND SEDIMENT CONTROLS. ADDITIONAL CONTROL MEASURES MAY BE NECESSARY DUE TO CONTRACTOR PHASING OR OTHER UNFORESEEN CONDITIONS. IT IS THE CONTRACTOR'S RESPONSIBILITY TO PROVIDE ADDITIONAL MEASURES IN ADDITION TO THOSE SHOWN, AS NEEDED, IN ORDER TO CONTROL EROSION AND CONTAIN SEDIMENT ON SITE.
7. THE CONTRACTOR IS RESPONSIBLE FOR KEEPING EXISTING PUBLIC ROADS IN A CLEAN, DUST AND MUD FREE CONDITION AT THE SITE.
8. ALL SILT FENCE SHALL BE INSTALLED ALONG THE CONTOURS, PERPENDICULAR TO THE FLOW OF WATER. SEE DETAIL ON THIS DRAWING.
9. BASED ON INFORMATION PRESENTED ON THE SITE FIRM, THE PROJECT IS LOCATED WITHIN FEMA FLOOD ZONE A, WHICH IS THE REGULATORY FLOODPLAIN ASSOCIATED WITH THE BASE FLOOD (1 PERCENT ANNUAL CHANCE FLOOD EVENT), COMMONLY REFERRED TO AS THE 100-YEAR FLOODPLAIN. FLOOD ZONE A INDICATES THAT THE LIMITS OF THE FLOODPLAIN ARE APPROXIMATE, AS SUCH, BASE FLOOD ELEVATIONS (BFES) HAVE NOT BEEN PREVIOUSLY ESTABLISHED BY FEMA. ALL WORK ASSOCIATED WITH THE PROPOSED PROJECT WITHIN THE LIMITS OF THE FLOODPLAIN WILL BE IN ACCORDANCE WITH THE FOLLOWING. NO PERMANENT ABOVE GROUND STRUCTURES ARE TO BE CONSTRUCTED WITHIN THE FLOODPLAIN. ANY STABILIZED CONSTRUCTION ENTRANCES TO BE INSTALLED WITHIN THE FLOODPLAIN SHALL BE INSTALLED BY REMOVING EXISTING MATERIAL TO A DEPTH SUITABLE FOR INSTALLING THE ENTRANCES SO THAT THE TOP OF THE GRAVEL SURFACE IS AT ORIGINAL GRADE ELEVATIONS. EXCESS MATERIAL ASSOCIATED WITH THIS ACTIVITY SHALL BE PLACED OUTSIDE OF THE FLOODPLAIN LIMITS. NO FILL SHALL BE PLACED WITHIN THE FLOODPLAIN LIMITS ABOVE ORIGINAL ELEVATIONS. THE PROPOSED WATERLINE WILL BE TEMPORARY AND INSTALLED ON THE SURFACE, IT WILL ALSO BE ANCHORED TO THE GROUND.



MAPPING REFERENCE:
BASE TOPOGRAPHIC MAPPING TAKEN FROM NATIONAL AGRICULTURE IMAGERY PROGRAM (NAIP), DATED OCTOBER 2014. CONTOURS ARE DERIVED FROM 3 METER RESOLUTION DIGITAL ELEVATION MODELS FROM USGS DATED 2003.

DATE: 1/13/2016
 DRAWN BY: JWB
 CHECKED BY: JMS
 PROJECT: EQT PRODUCTION COMPANY
 SHEET: WEU 6 TO WEU 2 IMPROVEMENT
 EROSION & SEDIMENT CONTROL PLAN
 DODDRIDGE COUNTY, WEST VIRGINIA

MATCHLINE DRAWING NO. 4

WATER FROM BMP, DESIGN 3 - 302 Streambed Construction Entrance @ WEU 6 TO WEU 2 WATER LINE. Wood Not for erosion Crossing If
 File: S:\2015-2016\Projects\2015 WEU 6 TO WEU 2\11-0147-2016\11-0147-2016-01-13-2016\11-0147-2016-01-13-2016.dwg
 Plotted By: jmc
 Date: 1/13/2016 11:13:28 AM



MATCHLINE DRAWING NO. 5

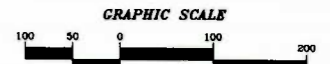
No.	Date	Revision

DESIGN
 CAD File No.
 JM
 Drawn
 JWB
 Checked
 JMS
 Approved
 1" = 100'
 Scale:
 JAN. 2016
 Date:
 11-0147-2016
 Project No.

MATCHLINE DRAWING NO. 3

NOTES:

- BASE MAPPING TAKEN FROM AERIAL PHOTOGRAPHY. THE SCALE OF THE BASE MAPPING IS APPROXIMATE. ACTUAL LOCATIONS OF EXISTING FEATURES MAY VARY.
- WEEKLY VISUAL INSPECTION OF THE SEDIMENT CONTROL MEASURES SHALL BE CONDUCTED TO VERIFY THEY ARE FUNCTIONING PROPERLY. SILT FENCE, IF REMOVED TO ALLOW CONSTRUCTION ACTIVITIES, SHALL BE REPLACED AT THE END OF EACH WORK DAY. SEDIMENT STRUCTURES SHALL BE CLEANED ONCE THE STORAGE CAPACITY HAS BEEN REDUCED BY 50%.
- THE SITE SHALL BE INSPECTED ON A REGULAR BASIS TO ENSURE INTEGRITY OF GRADED SURFACES, VEGETATION, EROSION AND SEDIMENT CONTROL MEASURES AND OTHER PROTECTIVE DEVICES. THIS INSPECTION SHOULD BE PERFORMED AT A MINIMUM OF ONCE EVERY SEVEN CALENDAR DAYS, AND SHALL OCCUR WITHIN 24 HOURS AFTER ANY STORM EVENT GREATER THAN 0.5 INCHES OF RAINFALL PER 24-HOUR PERIOD UNTIL THE SITE HAS BEEN STABILIZED. ANY REQUIRED REPAIRS OR MAINTENANCE WILL BE MADE IMMEDIATELY.
- DISTURBED AREAS SHALL BE SEEDED AND MULCHED UPON COMPLETION OF GRADING.
 - STABILIZATION MEASURES SHALL BE INITIATED AS SOON AS PRACTICABLE IN PORTIONS OF THE SITE WHERE CONSTRUCTION ACTIVITIES HAVE TEMPORARILY OR PERMANENTLY CEASED, BUT IN NO CASE MORE THAN SEVEN DAYS AFTER THE CONSTRUCTION ACTIVITY IN THAT PORTION OF THE SITE HAS PERMANENTLY CEASED.
 - WHERE THE INITIATION OF STABILIZATION MEASURES BY THE SEVENTH DAY AFTER CONSTRUCTION ACTIVITY TEMPORARILY OR PERMANENTLY CEASES IS PRECLUDED BY SNOW COVER, STABILIZATION MEASURES SHALL BE INITIATED AS SOON AS CONDITIONS ALLOW.
 - WHERE CONSTRUCTION ACTIVITY WILL RESUME ON A PORTION OF THE SITE WITHIN 14 DAYS FROM WHEN ACTIVITIES CEASED, (E.G., THE TOTAL TIME PERIOD THAT CONSTRUCTION ACTIVITY IS TEMPORARILY HALTED IS LESS THAN 14 DAYS) THEN STABILIZATION MEASURES DO NOT HAVE TO BE INITIATED ON THAT PORTION OF THE SITE BY THE SEVENTH DAY AFTER CONSTRUCTION ACTIVITIES HAVE TEMPORARILY CEASED.
 - AREAS WHERE THE SEED HAS FAILED TO GERMINATE ADEQUATELY (UNIFORM PERENNIAL VEGETATIVE COVER WITH A DENSITY OF 70%) WITHIN 30 DAYS AFTER SEEDING AND MULCHING MUST BE RESEEDING IMMEDIATELY, OR AS SOON AS WEATHER CONDITIONS ALLOW.
- EROSION & SEDIMENT CONTROLS SHALL BE INSTALLED IN LOCATIONS DOWN SLOPE FROM THE DISTURBED AREAS AS A FIRST MEASURE OF CONSTRUCTION. SILT FENCES SHALL BE INSPECTED AFTER EACH RAINFALL. ANY REQUIRED REPAIRS SHALL BE MADE IMMEDIATELY. DAMAGED, DECOMPOSED OR OTHERWISE INEFFECTIVE SILT FENCE SHALL BE REPLACED. SEDIMENT DEPOSITS SHOULD BE REMOVED AS REQUIRED WHEN DEPOSITS REACH APPROXIMATELY ONE-HALF OF THE BARRIER HEIGHT. ANY SEDIMENT DEPOSITS REMAINING IN PLACE AFTER THE SILT FENCE IS NO LONGER NEEDED SHALL BE DRESSED TO CONFORM TO THE EXISTING GRADE AND STABILIZED. CONTRACTOR MAY USE COMPOST FILTER SOCKS AS AN ALTERNATIVE TO SILT FENCE.
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ISSUE DATE 1/13/2016

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EQT PRODUCTION COMPANY
 120 PROFESSIONAL PLACE
 BRIDGEPORT, WEST VIRGINIA

PLAN SHEET
 WEU 6 TO WEU 2 IMPOUNDMENT
 WATER LINE
 EROSION & SEDIMENT CONTROL PLAN
 DODDRIIDGE COUNTY, WEST VIRGINIA

4
 Drawing No.