

# NEPA COMPLIANCE SURVEY

315

Project Information	
<b>Project Title:</b> New power Line for new generator at ten sleep	<b>Date:</b> 12/14/10
<b>DOE Code:</b>	<b>Contractor Code:</b>
<b>Project Lead:</b> Mike Preston	
<p style="text-align: center;"><b>Project Overview</b></p> <ol style="list-style-type: none"> <li>1. Brief project description [include anything that could impact the environment]</li> <li>2. Legal location</li> <li>3. Duration of the project</li> <li>4. Major equipment to be used</li> </ol>	<p>Extend 3 phase power line from (existing) pole 99 to the Ten Sleep location for a new generator. The transformer bank at the WDF will be dismantled, the line extended overhead, across 5 new power poles, to the Ten Sleep Battery and the bank will be reassembled there. The new guy anchor at pole 99 will be located outside Palustrine wetlands. The line will be 34.5 /19.920 KV, approximately 1,200 feet in length. Ground disturbance will be minimal and have very little potential to affect the environment.</p> <p>SW, NE ¼, Section 10, Township 38 N, Range 78 W</p> <p>2 months</p> <p>Backhoe, Bucket truck, Stringer truck</p>

**The table below is to be completed by the Project Lead and reviewed by the Environmental Specialist and the DOE NEPA Compliance Officer. NOTE: If Change of Scope occurs, Project Lead must submit a new NEPA Compliance Survey and contact the Technical Assurance Department.**

	Impacts Anticipated?			If YES, then complete below
	Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:
<b>Water Quality</b>				
<b>Does the proposed project present potential for impacts on water resources or water quality?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Does the project affect surface water quantity or quality under both normal operations and accident conditions?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Does the proposed project affect groundwater quantity or quality under both normal operations and accident conditions?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Will the project area include "Waters of the State?"</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Will the project area require a Corps of Engineers permit?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	

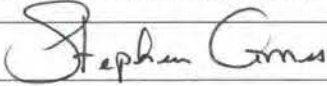
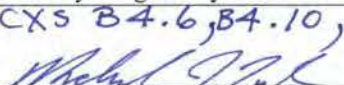
## NEPA COMPLIANCE SURVEY

	Impacts Anticipated?			If YES, then complete below.
	Yes	No	N A	If the anticipated impact might be unacceptable, recommend mitigation measures:
<b>Geology &amp; Soils</b>				
Does the proposed project present potential for impacts related to geology or soils?	<input type="checkbox"/>	x	<input type="checkbox"/>	
Does the proposed project alter, excavate or otherwise disturb land area consistent with other land use and habitat area?	<input type="checkbox"/>	x	<input type="checkbox"/>	
Is the proposed project likely to impact local seismicity?	<input type="checkbox"/>	x	<input type="checkbox"/>	
If the project involved disturbance of surface soils, are erosion and storm water control measures addressed?	<input type="checkbox"/>	x	<input type="checkbox"/>	Removed soil, will be immediately placed back in the hole and tamped.
<b>Air Quality</b>				
Does the proposed action present potential for impacts on ambient air quality under both normal and accident conditions?	<input type="checkbox"/>	x	<input type="checkbox"/>	
Are potential emissions (gases and/or airborne particulates including dust) outside of the normal scope for oil field operations?	<input type="checkbox"/>	x	<input type="checkbox"/>	
Does the project present risk to human health and the environment from exposure to radiation and hazardous chemicals in emissions?	<input type="checkbox"/>	x	<input type="checkbox"/>	
Is the project subject to New Source Performance Standards?	<input type="checkbox"/>	x	<input type="checkbox"/>	
Is the project subject to National Emissions Standards for Hazardous Air Pollutants?	<input type="checkbox"/>	x	<input type="checkbox"/>	

## NEPA COMPLIANCE SURVEY

Is the project subject to emissions limitations in an Air Quality Control Region?	<input type="checkbox"/>	x	<input type="checkbox"/>	
	<b>Impacts Anticipated?</b>			<b>If YES, then complete below.</b>
<b>Wildlife and Habitat</b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>If the anticipated impact might be unacceptable, recommend mitigation measures:</b>
Does the proposed action present potential for impacts on wildlife or habitat?	<input type="checkbox"/>	x	<input type="checkbox"/>	Project involves minimal ground disturbance
Does the project impact state or federally listed threatened and endangered species?	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Human Health Effects</b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>If the anticipated impact might be unacceptable, recommend mitigation measures:</b>
Does the proposed project present potential for effects on human health? e.g.: Hanta virus, radiological exposure, or chemical exposure (must provide MSDS)	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Transportation</b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>If the anticipated impact might be unacceptable, recommend mitigation measures:</b>
Does the proposed project involve transportation of radiological sources or hazardous materials (including explosives)?	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Waste Management and Waste Minimization</b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>If the anticipated impact might be unacceptable, recommend mitigation measures:</b>
Are pollution prevention and waste minimization practices needed in the proposed project?	<input type="checkbox"/>	x	<input type="checkbox"/>	
Does project plan establish procedures in compliance with local, state and/or federal laws and guidelines affecting the generation, transportation, treatment, storage or disposal of hazardous and other wastes?	<input type="checkbox"/>	x	<input type="checkbox"/>	
	<b>Impacts Anticipated?</b>			<b>If YES, then complete below.</b>
<b>Cultural Impact</b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>If the anticipated impact might be unacceptable, recommend mitigation measures:</b>

# NEPA COMPLIANCE SURVEY

<b>Is there potential for impact on cultural (historic) resources?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	Project footprint involves minimal potential for cultural resources disturbance.
<b>Community Impact</b>	<b>Yes</b>	<b>No</b>	<b>NA</b>	<b>If the anticipated impact might be unacceptable, recommend mitigation measures:</b>
<b>Will the proposed project introduce significantly adverse auditory, visual, or other impact?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Will the proposed project adversely affect the community's use of public land/resources?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>Will the proposed project adversely affect the community's access to private land?</b>	<input type="checkbox"/>	x	<input type="checkbox"/>	
<b>NOTE: Topography Map and Wetlands Map are required to be attached. Attach applicable SOPs for Risk Assessment Level 2 &amp; 3 and specific test procedures.</b>				
<b>Are environmental permits required? If YES, list below:</b>			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<b>Section below to be reviewed by Environmental Specialist and DOE NCO.</b>				
<b>Adequate Mitigation Measures Provided?</b>		<b>Adequate Mitigation Measures Provided?</b>		
	Yes	No		
Water Quality Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transportation Impacts	<input checked="" type="checkbox"/> <input type="checkbox"/>
Air Quality Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Waste Management Impacts	<input checked="" type="checkbox"/> <input type="checkbox"/>
"Wildlife and Habitat Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cultural Impacts	<input checked="" type="checkbox"/> <input type="checkbox"/>
Geology and Soils Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Community Impact	<input checked="" type="checkbox"/> <input type="checkbox"/>
Human Health Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Categorical Exclusion</b>	<input checked="" type="checkbox"/> <input type="checkbox"/>
<b>Approvals</b>				
<b>Comments and Conditions:</b>	<p>B1.3 (e) Plumbing, electrical utility, and telephone service repair.</p> <p>B4.6 Additions or modifications to electric power transmission facilities that would not affect the environment beyond the previously developed facility area including, but not limited to, switchyard rock grounding upgrades, secondary containment projects, paving projects, seismic upgrading, tower modifications, changing insulators, and replacement of poles, circuit breakers, conductors, transformers, and crossarms.</p> <p>B4.10 Deactivation, dismantling, and removal of electric powerlines, substations, switching stations, and other transmission facilities, and right-of-way abandonment.</p> <p>B4.12 Construction of electric powerlines approximately 10 miles in length or less that are not for the integration of major new generation resources into a main transmission system.</p> <p>B5. Categorical Exclusions Applicable to Conservation, Fossil, and Renewable Energy Activities</p> <p>B5.1 Actions to conserve energy, demonstrate potential energy conservation, and promote energy-efficiency that do not increase the indoor concentrations of potentially harmful substances. These actions may involve financial and technical assistance to individuals (such as builders, owners, consultants, designers), organizations (such as utilities), and state and local governments.</p>			
<b>Contractor ESS&amp;H</b>				Date 12-22-10
<b>Comments and Conditions:</b>				
	Based on my review of information conveyed to me and in my possession (or attached) concerning the proposed action, as NEPA Compliance Officer (as authorized under DOE Order 451.1A), I have determined that the proposed action fits within the specified class of actions, the other regulatory requirements set forth above are met, and the proposed action is hereby categorically excluded from further NEPA review.			
<b>DOE NEPA Compliance Officer</b>	CXS B4.6, B4.10, & B4.12 			Date 12/23/10

# NEPA COMPLIANCE SURVEY

## New Geothermal Powerline to B-TP-10



**Legend**

- Section Lines
- New Power Poles
- Existing Power Poles
- Existing Power Lines
- Transformers

**Wetlands**

- Palustrine Aquatic Bed (PAB)
- Palustrine Emergent (PEM)

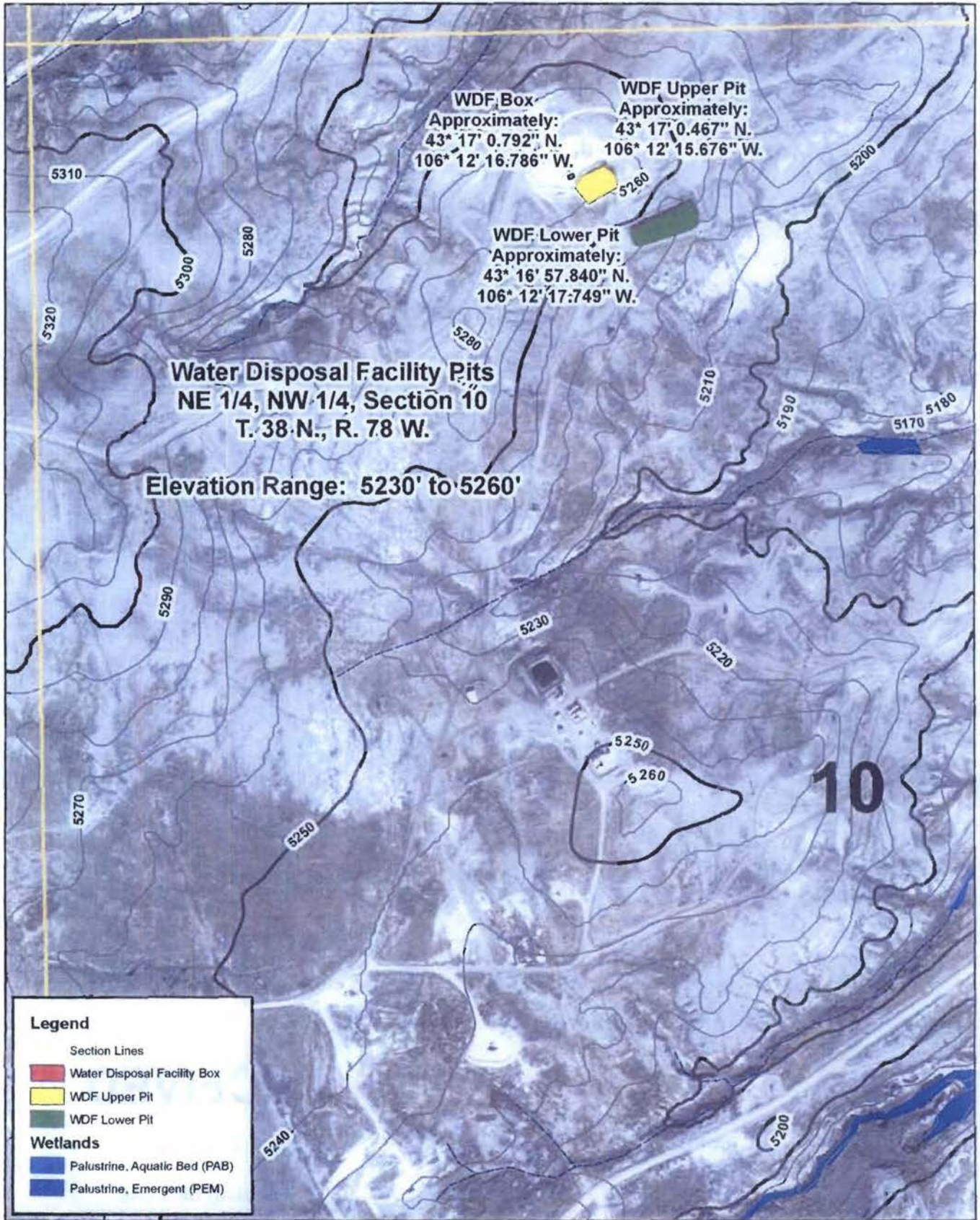
<b>New Geothermal Powerline to B-TP-10</b>			
Author: J Buell	Project Manager: M Preston		
CWS-PRJ-6730-020-61041-1	Date: 12/15/2010	Rev. Date:	
WY State Plane / East Central Zone / NAD27		Scale = 1:5,000	

0 250 500 1,000 Feet

RMOTC  
 007 N Poplar, Suite 150  
 Casper, WY 82601  
 307-233-4800

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# Restoration - Water Disposal Facility Closed Pits



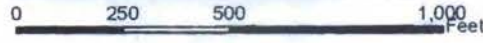
**Water Disposal Facility Pits**  
 NE 1/4, NW 1/4, Section 10  
 T. 38-N., R. 78 W.

**Elevation Range: 5230' to 5260'**

**Legend**

- Section Lines
- Water Disposal Facility Box
- WDF Upper Pit
- WDF Lower Pit
- Wetlands**
- Palustrine, Aquatic Bed (PAB)
- Palustrine, Emergent (PEM)

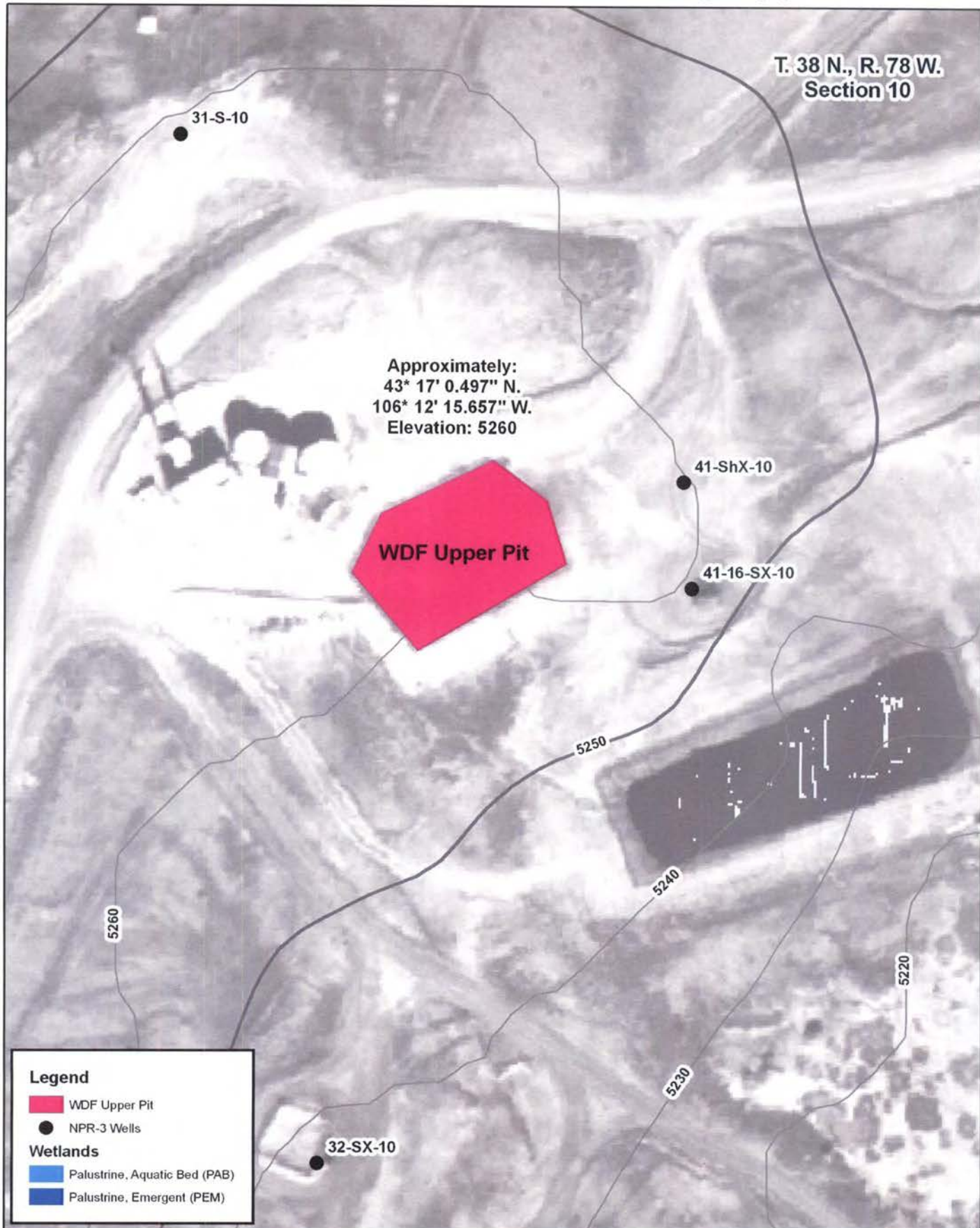
	<b>Restoration - Water Disposal Facility Closed Pits</b>		
	Author: J Buelt	Environmental Specialist: S Ames	
	GIS-REST-6740.010.00000-1	Date: 08/03/2010	Rev Date:
	WY State Plane / East Central Zone / NAD27		Scale = 1:5,000



RMOTC  
 907 N Poplar, Suite 150  
 Casper, WY 82601  
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# Restoration - Water Disposal Facility Upper Pit



T. 38 N., R. 78 W.  
Section 10

Approximately:  
43° 17' 0.497" N.  
106° 12' 15.657" W.  
Elevation: 5260

**WDF Upper Pit**

41-ShX-10

41-16-SX-10

5250

5240

5260

5220

5230

32-SX-10

## Legend

WDF Upper Pit

NPR-3 Wells

## Wetlands

Palustrine, Aquatic Bed (PAB)

Palustrine, Emergent (PEM)



## Restoration - Water Disposal Facility Upper Pit

Author: J Buelt	Environmental Specialist: S Ames
GIS-REST-6740.010.00000-1	Date: 04/14/2010
Rev Date:	Scale = 1:1,000
WY State Plane / East Central Zone / NAD27	

0 35 70 140 Feet

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307-233-4800

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# NEPA Review Routing Form

A copy of this form must be attached to all NEPA Compliance Surveys for review.

Originator: Technical Assurance Department – Environmental Group

Document Name: EXTEND POWER TO FEN SLEEP

Document Number:

Date of Routing: 12/16/10

Name	Reviewed Date	Signature	Forwarded To	Forwarded Date
AMES	12/16/10	<i>Ames</i>	THERIAULT	12/16/10
<del>Ames</del> Theriacult	12/16/10	<i>Ames</i>	Ames	12/16/10
AMES	12/16/10	<i>Ames</i>	ALSOBROOK	12/16/10
ALSOBROOK	12/22/10	<i>Ed Alsbrook</i>	Ames	12/22/10
Ames	12/22/10	<i>Ames</i>	TAYLOR	12/22/10
TAYLOR	12-23-10	<i>Theriacult</i>		
		APPROVED		

\* Steve,  
 Be sure that the correct categorical exclusion(s)  
 is/are listed on the RIPS Daily Listings. SEA