



I. Project information

Project title: High Island Creek Pollutant Load Monitoring Project

Local Partner information:

Organization name: Sibley Soil and Water Conservation District

Street address: 112 5th Street, P.O. Box 161

City: Gaylord

State: MN

Zip code: 55334

Primary contact name: Jack Bushman

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Fiscal contact name: Joel Wurscher

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Field contact name: Jack Bushman

Phone: 507-702-7077

Email address: jack.bushman@sibleyswcd.org

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Reporting period for Section II Table 1:

Start date: 1/1/2020
(mm/dd/yyyy)

End date: 3/21/2020
(mm/dd/yyyy)

Project details:

Basin (check all that apply):

☐ Red River ☐ Rainy River ☐ Lake Superior ☒ Minnesota ☐ Lower Mississippi ☐ St. Croix ☐ Upper Mississippi

Major Watershed(s): Lower Minnesota

Hydrologic unit code(s): 07020012

Name of eligible laboratory: MVTL, Inc.

How many full-time equivalents (FTEs) worked on this project (total project hours/2,088 hours): .10 FTE

II. Activities completed

Table 1: Workplan activities

Please list activities completed during the reporting period. Include task level detail as appropriate. Please separate activities by calendar year, if applicable. Refer to the instructions for examples. (Insert more rows as needed by hitting the tab key in the last row/column.)

This section includes activities completed in 2020. Previous years' activities can be found on past Interim Progress Reports.

Task	Description
Task C	LDO Replacement sensor caps and pH probe purchased from HACH. Road safety equipment purchased from Forestry Suppliers.
Task F	Field meter was calibrated monthly to ensure it remains in working condition.
Task J	2017 loads were calculated as part of staff training. No verification was done.
Task K	Invoice #4 and #5 were submitted. A change order was done to move money into the equipment budget.
Task L	Interim progress report was submitted January 30, 2020. Final progress report was submitted on March 23, 2020. All reports are displayed on www.sibleyswcd.org

Task N	Efforts were made to attend all necessary telephone conferences.
Task O	FLUX32 training was attended on January 8, 2020 in St. Cloud, MN.

1. Please answer the following questions for activities completed in 2020.

- a. Were FLUX32 pollutant loads submitted to your MPCA Project Manager?

☐ Yes ☐ No ☒ N/A

Please list the sites and year(s) that loads were calculated:

If no, please describe why:

Data was not available.

- b. Were you able to attend a majority of the weekly check-in telephone conferences during the reporting period?

☒ Yes ☐ No If no, please describe:

- c. Was a backup sampler used to collect any of the samples?

☐ Yes ☒ No

If yes, please describe when, who, if they were trained, and any other details:

2. Please answer the following questions relating to the deliverables for the entire project.

- a. When was the Quality Assurance Project Plan executed?

Date (mm/dd/yyyy): 3/20/2019

- b. Were any changes made to the Quality Assurance Project Plan during the reporting period?

☐ Yes ☒ No Revision date (mm/dd/yyyy): _____

If yes, please summarize:

- c. Were Interim Progress Reports submitted?

2016: ☐ Yes ☒ No Submittal date (mm/dd/yyyy): _____

If no, please describe why:

N/A-This project began in 2019.

2017: ☐ Yes ☒ No Submittal date (mm/dd/yyyy): _____

If no, please describe why:

N/A-This project began in 2019.

2018: ☐ Yes ☒ No Submittal date (mm/dd/yyyy): _____

If no, please describe why:

N/A-This project began in 2019.

2019: ☒ Yes ☐ No Submittal date (mm/dd/yyyy): 1/30/2020

If no, please describe why:

3. Please answer the following questions and provide comments to the following questions regarding the overall experience during the contract.

Were you comfortable with your level of training and current ability to:

- a. Collect stream samples over the entire range of the hydrograph? ☒ Yes ☐ No

Comments:

- b. Calibrate and use the field meter and equipment? ☒ Yes ☐ No

Comments:

- c. Enter data and information into the MPCA templates and logs? ☒ Yes ☐ No

Comments:

- d. Use the FLUX32 model and submit pollutant load data and supporting information? ☒ Yes ☐ No

Comments:

Training was attended towards the end of the contract and 2018 loads were not available.

- e. Complete and submit invoices? ☒ Yes ☐ No

Comments:

- f. Complete the Interim Progress Report? ☒ Yes ☐ No

Comments:

4. **Describe in detail any problems, delays, or difficulties that occurred in fulfilling the requirements of the workplan in 2020. How did you resolve these problems?**

All work in 2020 was completed in a timely manner with little delay.

5. **Were there any change orders and/or amendments to the contract and workplan in 2020? If yes, summarize the changes.**

☒ Yes ☐ No

Comments:

Change Order #3: Done in 2020 to use remaining contract money on sampling equipment and road safety equipment.

6. **If there are unspent funds, please list the Objective and Task and explain the reason for the unspent funds:**

Some money was left in the Equipment and Supplies category. Shipping costs turned out to be higher than expected when purchasing road safety cones and was unable to purchase a similar product from stores.

7. **Please provide any constructive feedback regarding the WPLMN (training, forms, program directives, etc.):**

Project went as planned. All training and information provided was well thought out and very effective.

III. Budget information

This budget summary is a compilation of the entire contract.

Contract execution date: 2/13/2019

Contract End Date: 3/21/2020

Budget item	Objective 1	Objective 2	Objective 3	Objective 4	Objective 5	Total expended
Objective title:	Stream Monitoring/Project Oversight/Data Management					
Personnel: wages and benefits						
Staff #1: No. of hours <u>214.25</u>	\$ 10,248.00	\$	\$	\$	\$	\$ 10,248.00
Staff #2: No. of hours _____	\$	\$	\$	\$	\$	\$
Staff #3: No. of hours _____	\$	\$	\$	\$	\$	\$
Staff #4: No. of hours _____	\$	\$	\$	\$	\$	\$
Staff #5: No. of hours _____	\$	\$	\$	\$	\$	\$
Staff #6: No. of hours _____	\$	\$	\$	\$	\$	\$
Staff #7: No. of hours _____	\$	\$	\$	\$	\$	\$
Staff #8: No. of hours _____	\$	\$	\$	\$	\$	\$
Staff #9: No. of hours _____	\$	\$	\$	\$	\$	\$
Laboratory analyses: No. of samples <u>59</u>	\$ 3,380.70	\$	\$	\$	\$	\$ 3,380.70
Travel reimbursement: No. of miles <u>3,042.50</u>	\$ 1,763.85	\$	\$	\$	\$	\$ 1,763.85
Monitoring supplies and Equipment	\$ 1,744.05	\$	\$	\$	\$	\$ 1,744.05
Shipping	\$ 0	\$	\$	\$	\$	\$ 0
Lodging	\$ 108.12	\$	\$	\$	\$	\$ 108.12
Other (describe the activity and cost – be specific):						
Meals	\$ 33.00	\$	\$	\$	\$	\$ 33.00
	\$	\$	\$	\$	\$	\$
Column total:	\$ 17,313.72	\$	\$	\$	\$	\$ 17,313.72

Comments:

IV. Hydrographs

Comments:

Hydrographs are provisional.

