

## WETLAND DETERMINATION DATA FORM – Great Plains Region

Project/Site: \_\_\_\_\_ City/County: \_\_\_\_\_ Sampling Date: \_\_\_\_\_  
 Applicant/Owner: \_\_\_\_\_ State: \_\_\_\_\_ Sampling Point: \_\_\_\_\_  
 Investigator(s): \_\_\_\_\_ Section, Township, Range: \_\_\_\_\_  
 Landform (hillslope, terrace, etc.): \_\_\_\_\_ Local relief (concave, convex, none): \_\_\_\_\_ Slope (%): \_\_\_\_\_  
 Subregion (LRR): \_\_\_\_\_ Lat: \_\_\_\_\_ Long: \_\_\_\_\_ Datum: \_\_\_\_\_  
 Soil Map Unit Name: \_\_\_\_\_ NWI classification: \_\_\_\_\_

Are climatic / hydrologic conditions on the site typical for this time of year? Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, explain in Remarks.)  
 Are Vegetation \_\_\_\_\_, Soil \_\_\_\_\_, or Hydrology \_\_\_\_\_ significantly disturbed? Are "Normal Circumstances" present? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Are Vegetation \_\_\_\_\_, Soil \_\_\_\_\_, or Hydrology \_\_\_\_\_ naturally problematic? (If needed, explain any answers in Remarks.)

### SUMMARY OF FINDINGS – Attach site map showing sampling point locations, transects, important features, etc.

Hydrophytic Vegetation Present? Yes _____ No _____ Hydric Soil Present? Yes _____ No _____ Wetland Hydrology Present? Yes _____ No _____	<b>Is the Sampled Area within a Wetland?</b> Yes _____ No _____
Remarks: _____ _____ _____	

### VEGETATION – Use scientific names of plants.

<u>Tree Stratum</u> (Plot size: _____)	Absolute % Cover	Dominant Species?	Indicator Status	<b>Dominance Test worksheet:</b>
1. _____	_____	_____	_____	Number of Dominant Species That Are OBL, FACW, or FAC (excluding FAC-): _____ (A)  Total Number of Dominant Species Across All Strata: _____ (B)  Percent of Dominant Species That Are OBL, FACW, or FAC: _____ (A/B)
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
_____ = Total Cover				<b>Prevalence Index worksheet:</b> Total % Cover of: _____ Multiply by: _____ OBL species _____ x 1 = _____ FACW species _____ x 2 = _____ FAC species _____ x 3 = _____ FACU species _____ x 4 = _____ UPL species _____ x 5 = _____ Column Totals: _____ (A) _____ (B)  Prevalence Index = B/A = _____
Sapling/Shrub Stratum	(Plot size: _____)			
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
_____ = Total Cover				
Herb Stratum	(Plot size: _____)			
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
3. _____	_____	_____	_____	
4. _____	_____	_____	_____	
5. _____	_____	_____	_____	
6. _____	_____	_____	_____	
7. _____	_____	_____	_____	
8. _____	_____	_____	_____	
9. _____	_____	_____	_____	
10. _____	_____	_____	_____	
_____ = Total Cover				
Woody Vine Stratum	(Plot size: _____)			
1. _____	_____	_____	_____	
2. _____	_____	_____	_____	
_____ = Total Cover				
% Bare Ground in Herb Stratum _____				
<b>Hydrophytic Vegetation Present?</b> Yes _____ No _____				

Remarks: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SOIL**

Sampling Point: \_\_\_\_\_

**Profile Description: (Describe to the depth needed to document the indicator or confirm the absence of indicators.)**

Depth (inches)	Matrix		Redox Features				Texture	Remarks
	Color (moist)	%	Color (moist)	%	Type <sup>1</sup>	Loc <sup>2</sup>		

<sup>1</sup>Type: C=Concentration, D=Depletion, RM=Reduced Matrix, CS=Covered or Coated Sand Grains.      <sup>2</sup>Location: PL=Pore Lining, M=Matrix.

<p><b>Hydric Soil Indicators: (Applicable to all LRRs, unless otherwise noted.)</b></p> <p> <input type="checkbox"/> Histosol (A1)  <input type="checkbox"/> Histic Epipedon (A2)  <input type="checkbox"/> Black Histic (A3)  <input type="checkbox"/> Hydrogen Sulfide (A4)  <input type="checkbox"/> Stratified Layers (A5) <b>(LRR F)</b>  <input type="checkbox"/> 1 cm Muck (A9) <b>(LRR F, G, H)</b>  <input type="checkbox"/> Depleted Below Dark Surface (A11)  <input type="checkbox"/> Thick Dark Surface (A12)  <input type="checkbox"/> Sandy Mucky Mineral (S1)  <input type="checkbox"/> 2.5 cm Mucky Peat or Peat (S2) <b>(LRR G, H)</b>  <input type="checkbox"/> 5 cm Mucky Peat or Peat (S3) <b>(LRR F)</b> </p>	<p><b>Indicators for Problematic Hydric Soils<sup>3</sup>:</b></p> <p> <input type="checkbox"/> Sandy Gleyed Matrix (S4)  <input type="checkbox"/> Sandy Redox (S5)  <input type="checkbox"/> Stripped Matrix (S6)  <input type="checkbox"/> Loamy Mucky Mineral (F1)  <input type="checkbox"/> Loamy Gleyed Matrix (F2)  <input type="checkbox"/> Depleted Matrix (F3)  <input type="checkbox"/> Redox Dark Surface (F6)  <input type="checkbox"/> Depleted Dark Surface (F7)  <input type="checkbox"/> Redox Depressions (F8)  <input type="checkbox"/> High Plains Depressions (F16) <b>(MLRA 72 &amp; 73 of LRR H)</b> </p> <p><b>Indicators for Problematic Hydric Soils<sup>3</sup>:</b></p> <p> <input type="checkbox"/> 1 cm Muck (A9) <b>(LRR I, J)</b>  <input type="checkbox"/> Coast Prairie Redox (A16) <b>(LRR F, G, H)</b>  <input type="checkbox"/> Dark Surface (S7) <b>(LRR G)</b>  <input type="checkbox"/> High Plains Depressions (F16)  <input type="checkbox"/> <b>(LRR H outside of MLRA 72 &amp; 73)</b>  <input type="checkbox"/> Reduced Vertic (F18)  <input type="checkbox"/> Red Parent Material (TF2)  <input type="checkbox"/> Very Shallow Dark Surface (TF12)  <input type="checkbox"/> Other (Explain in Remarks)                 </p> <p><sup>3</sup>Indicators of hydrophytic vegetation and wetland hydrology must be present, unless disturbed or problematic.</p>
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<p><b>Restrictive Layer (if present):</b></p> <p>Type: _____</p> <p>Depth (inches): _____</p>	<p><b>Hydric Soil Present? Yes _____ No _____</b></p>
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Remarks: \_\_\_\_\_

**HYDROLOGY**

<p><b>Wetland Hydrology Indicators:</b></p> <p><u>Primary Indicators (minimum of one required; check all that apply)</u></p> <p> <input type="checkbox"/> Surface Water (A1)  <input type="checkbox"/> High Water Table (A2)  <input type="checkbox"/> Saturation (A3)  <input type="checkbox"/> Water Marks (B1)  <input type="checkbox"/> Sediment Deposits (B2)  <input type="checkbox"/> Drift Deposits (B3)  <input type="checkbox"/> Algal Mat or Crust (B4)  <input type="checkbox"/> Iron Deposits (B5)  <input type="checkbox"/> Inundation Visible on Aerial Imagery (B7)  <input type="checkbox"/> Water-Stained Leaves (B9)                 </p>		<p><u>Secondary Indicators (minimum of two required)</u></p> <p> <input type="checkbox"/> Salt Crust (B11)  <input type="checkbox"/> Aquatic Invertebrates (B13)  <input type="checkbox"/> Hydrogen Sulfide Odor (C1)  <input type="checkbox"/> Dry-Season Water Table (C2)  <input type="checkbox"/> Oxidized Rhizospheres on Living Roots (C3) <b>(where not tilled)</b>  <input type="checkbox"/> Presence of Reduced Iron (C4)  <input type="checkbox"/> Thin Muck Surface (C7)  <input type="checkbox"/> Other (Explain in Remarks)                 </p>	<p> <input type="checkbox"/> Surface Soil Cracks (B6)  <input type="checkbox"/> Sparsely Vegetated Concave Surface (B8)  <input type="checkbox"/> Drainage Patterns (B10)  <input type="checkbox"/> Oxidized Rhizospheres on Living Roots (C3) <b>(where tilled)</b>  <input type="checkbox"/> Crayfish Burrows (C8)  <input type="checkbox"/> Saturation Visible on Aerial Imagery (C9)  <input type="checkbox"/> Geomorphic Position (D2)  <input type="checkbox"/> FAC-Neutral Test (D5)  <input type="checkbox"/> Frost-Heave Hummocks (D7) <b>(LRR F)</b> </p>
<p><b>Field Observations:</b></p> <p>                     Surface Water Present?    Yes _____ No _____    Depth (inches): _____                      Water Table Present?      Yes _____ No _____    Depth (inches): _____                      Saturation Present?        Yes _____ No _____    Depth (inches): _____                      (includes capillary fringe)                 </p>		<p><b>Wetland Hydrology Present? Yes _____ No _____</b></p>	

Describe Recorded Data (stream gauge, monitoring well, aerial photos, previous inspections), if available: \_\_\_\_\_

Remarks: \_\_\_\_\_