Incident Action Plan Wolf WPA



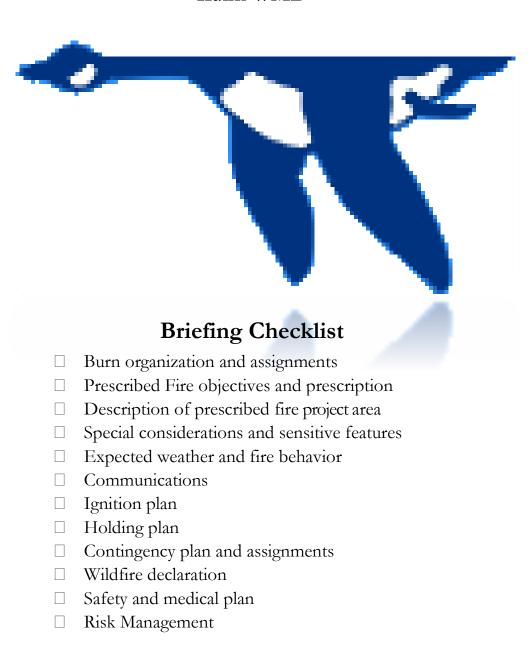
Unit 2



North Dakota Fire Zone

Kulm WMD





1. Incident	2. Incident Location:	3. Operational
Name:	McIntosh County. Burn unit is 4 miles west and 9 miles south of Kulm, ND, along 86th St SE	Period:
Kulm WMD, Wolf WPA – Unit 2	Intersection of 64th Ave SE & 86th St SE, Kulm, ND 58456 46.1704° -99.0348°	

AGENCY ADMINISTRATOR IGNITION AUTHORIZATION (Prescribed Fire Plan, Element 2A)

Instructions: The Agency Administrator Ignition Authorization must be completed before a prescribed fire can be implemented. If ignition of the prescribed fire is not initiated prior to expiration date determined by the agency administrator, a new authorization will be required.

Prior to signature the agency administrator should discuss the following key items with the fire management officer (FMO) or burn boss. Attach any additional instructions or discussion documentation (optional) to this document.

Key	y Discussion Items				
Α.	Has anything changed since the Prescribed Fire Plan was approved or revalidated?				
	Such as drought or other climate indicators of increased risk, insect activity, new subdivisions/structures, smoke requirements, Complexity Analysis Rating.				
В.	Have compliance requirements and pre-burn considerations been completed?				
	Such as preparation work, NEPA mitigation requirements, cultural, threatened and endangered species, smoke permits, state burn permits/authorizations.				
C.	Can all of the elements and conditions specified in Prescribed Fire Plan be met?				
	Such as weather, scheduling, smoke management conditions, suitable prescription window, correct season, staffing and organization, safety considerations, etc.				
D.	Are processes in place to ensure all internal and external notifications and media releases will be completed?				
E.	Have key agency staffs been fully briefed about the implementation of this prescribed fire?				
F.	Are there circumstances that could affect the successful implementation of the plan?				
	Such as preparedness level restrictions, resource availability, other prescribed fire or wildfire activity				
G.	Have you communicated your expectations to the Burn Boss and FMO regarding if and when you are to be notified that contingency actions are being taken?				
Н.	Have you communicated your expectations to the Burn Boss and FMO regarding decisions to declare the prescribed fire a wildfire?				
Imr	plementation Recommended by:				
	O or Prescribed Fire Burn Boss Signature: Date:				
pro disc	n authorizing ignition of this prescribed fire between the dates of and It is my expectation that the ject will be implemented within this time frame and as discussed and documented and attached to this plan. If the conditions we cussed change during this time frame, it is my expectation you will brief me on the circumstances and an updated authorization will be obtained if necessary.				
Ado	ditional Instructions or Discussion Documentation attached (Optional): Yes \Box No \Box				
_	ition Authorized by:				
1 ~	page Administrator Signature and Titles				

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PRESCRIBED FIRE GO/NO-GO CHECKLIST

(Prescribed Fire Plan, Element 2B)

Preliminary Questions	Circle YES or NO		
 A. Have conditions in or adjacent to the ignition unit changed, (for example: drought conditions or fuel loadings), which were not considered in the prescription development? If <u>NO</u> proceed with the Go/NO-GO Checklist below, if <u>YES</u> go to item B. 	YES NO		
 B. Has the prescribed fire plan been reviewed and an amendment been approved; or has it been determined that no amendment is necessary? If <u>YES</u>, proceed with checklist below. If <u>NO</u>, STOP: Implementation is not allowed. An amendment is needed. 	YES NO		
GO/NO-GO Checklist	Circle YES or NO		
Have ALL permits and clearances been obtained?	YES NO		
Have ALL permits and clearances been obtained? Have ALL the required notifications been made?	YES NO YES NO		
Have ALL the required notifications been made?			
Have ALL the required notifications been made? Have ALL the pre-burn considerations and preparation work identified in the	YES NO		

Has the availability of contingency resources applicable to today's implementation been checked and are they available?

Have ALL personnel been briefed on the project objectives, their assignment, safety hazards, escape routes, and safety zones?

If all the questions were answered "YES" proceed with a test fire. Document the current conditions, location and results. If any questions were answered "NO", DO NOT proceed with the test fire: Implementation is not allowed.

Are ALL smoke management specifications met?

Are ALL planned operations personnel and equipment on-site, available, and operational?

YES NO

YES NO

After evaluating the test fire, in your judgment can the prescribed fire be carried out according to the prescribed fire plan and will it meet the planned objective? Circle: YES or NO

Burn Boss Signature:	Date:
Duili Doss Signature.	Date.

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	INCIDENT OBJECTIVES (ICS 202)							
Objective(s):								
A. Resource obj	ectives:							
1. Reduce ≥	70% litter/duff layer within the unit.							
2. Decrease	10% of non-native grasses and shrubs.							
3. Increase r	native plant production within the unit.							
B. Prescribed fire	e objectives:							
1. Remove ≥	270% of litter and duff layer.							
2. Decrease	% non-native grasses and woody plants 10% - 20%.							
Operational Perio	d Command Emphasis:							
The Burn Boss	is responsible for determining if an escape has become a wildfire.							
 Protecti Protecti Protecti 	event of a wildfire are as follows: ion of public and fire line personnel life safety ion of privately owned primary residences ion of private property and lands are any damage to natural resources							
General Situational Safety Hazards:								
• Traffic	on gravel roads.							
	ds on boundary - Driving interior of unit & access around water.							
Smoke-Sensitive	•							
	 86th St SE, on the northern perimeter of the burn unit Multiple residences/farms, within 2 miles of burn unit boundary (NW, SE, NE) 							
Leaders Intent								
1. Task: Ignit	te, hold, patrol, mop-up the perimeter, and protect values at risk within and adjacent to the burn to	anit.						
	protect private property, reduce hazardous fuels, and enhance wildlife habitat							
	: Fire stays on FWS lands, within containment lines. Damage to natural resources do not occur o occur. No vehicles get stuck.	r are minimized.						
6. Site Safety Plan	Required? Yes ⊠ No □							
•	Safety Plan(s) Located at: Station Safety Plan and JHA's are located at Kulm WMD C	office.						

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Prescription Parameters

Spot Forecast

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ICS 202

ICS 204

7. Incident Action Plan (the items checked below are included in this Incident Action Plan):

ICS 206

ICS 207

ICS 214

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A/A Ign Authorization

Rx Fire Go/No-Go

ICS 205A

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ASSIGNMENT LIST (ICS 204)

ASSIGNMENT LIST (ICS 204)									
4. Physical Description									
	Township Range Section		Latitude Long 46.1704°	itude (NAD 83)	<u>County/Township</u> McIntosh/Antelope				
		T131N R6W S14		-99.0348°		*			
Location	Topo Quad 24	<u>-k</u>	<u>Fire District</u>		· · · · · · · · · · · · · · · · · · ·	<u>Address</u>			
	Coldwater Lake	Coldwater Lake NE		ire Department	Intersection of 64th Ave SE & 86th				
	Goldwater Paire			1	St SE, Kulm ND 58456				
Size	<u>Unit Acres</u>		Burnat	ole Acres	<u>Perimeter</u>	Fire Break Miles			
Size	49		4	19	1.0	0.5			
Topography	<u>Aspect</u>			<u>ope</u>		<u>vation</u>			
тородгарну	Flat		0	%	1953	0-1945			
5. Operations Person	5. Operations Personnel:				Contact Number(s)				
FWS Project Leader:			Todd Frerichs 701-460-0576						
FWS Zone FMO:			Jeff Dion		701-650-1171				
Fire Management Specialist:		Mike Hill 701-450-8514							
(D									
6. Resources Assigne	ed:	# of Persons	Contact (e.g., phone, pager,		Reporting Location, Special				
D 11 .:	т 1	of			Equipment and Supplies, Remai				
Resource Identifier	Leader		radio frequency	y, etc.)	Notes, Information				
RXB2		1			Truck /UTV				
ENGB, FFT2 2				ENG6 Wet-liner					
FFT2/ATVO 1				UTV Pumper					
FFT2/ATVO 1				UTV Pumper					
FFT2/ATVO 1				UTV Pumper					
	1								

7. Work Assignments:

Ignite, hold and patrol line along the boundary. Continually patrol between ignition and test fire to ensure line is secure.

8. Special Instructions:

Critical holding areas: any portion of the border that requires a mowed fire break. Patrol until line is secure to ensure there is no possibility of fire creeping outside the unit.

9. Communications (radio and/or phone contact numbers needed for this assignment):

Name	Function	RX Freq	RX Tone/NAC	TX Freq	TX Tone/NAC	Mod	Remarks
FWS FIRE	Tac	168.3500	CSq	168.3500	CSq	D	FWS RX Fire TA
ST2-EMER	Command	155.4750	CSq	158.4750	156.7	A	County Dispatch
VFIRE23	Tac	154.2950	CSq	154.2950	CSq	A	State Fire Mutual
AIR2GRND	Tac	167.4250	CSq	167.4250	CSq	A	ND01 AirtoGround

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COMMUNICATIONS LIST (ICS 205A)

Basic Local Communications Inf	Basic Local Communications Information:							
Name	Phone #	Time/Comment						
ND 7 EMO L (CD.	701-285-3341/							
ND Zone FMO – Jeff Dion	701-650-1171							
Bismarck Nat'l Wx Service	701-250-4494							
ND Dispatch Center	701-989-7330							
State Radio	701-328-9921							
Residence (within 2 miles)								
Wayne Kusler (NE 2 mi)	701-698-2610 (h)							
Unknown Residence (NW 1/2 mi)	Unknown, visit							
·	in person							
Glenn Reinke (SE 1 3/4 mi)	701-698-2657 (h)							
Hilmer Baier (SE 2 mi)	701-698-2602 (h)							
Adjacent Landowners (* absentee								
Rueben Wolf (W)	701-698-2609 (h)							
Gary/Shirley Grosz (N)	701-698-2648 (h)							
Larry/Sheila Moser (N)	701-968-4041 (h)							

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MEDICAL PLAN (ICS 206)

4. Medical Aid Station	s:							
Name			Location	Location		nber(s)/Frequency		medics Site?
							☐ Yes ☐ No	
							□ Yes	s 🗆 No
5. Transportation (indi- Ambulance Ser	O	and):	Location		Contact Nur	aber(s)/Frequency	Level o	of Service
Medina Ambul			Medina, ND			-2121 – State Radio	□ ALS ⊠ BLS	
Jamestown Area Ar	nbulance		Jamestown, ND		911/1800-472-	-2121 – State Radio		S □ BLS
Napoleon Ambu			Napoleon, ND			-2121 – State Radio		S ⊠ BLS
Medical Air Sei			Jamestown, ND			-2121 – State Radio		
			,		•		⊠ ALS □ BLS	
Bismarck Air Medical Bismarck, ND 911/1800-472-2121 − State Radio ⊠ ALS					, LI BLS			
6. Hospitals:		A 1.1		T.	177	<u> </u>	T	
Hospital Name	Latitue	Address, de & Longitude if Helipad	Contact Number(s)/ Frequency Air Ground Trauma Center		Burn Center	Helipad		
Jamestown Regional Medical Center	Jam	nestown, ND	701-251-0343	15 min	45 min	⊠Yes Level: 4	□ Yes ⊠ No	⊠ Yes □ No
Oakes Hospital	(Dakes, ND	701-742-3291	15 min	1.5 hr	⊠Yes Level: 5	□ Yes ⊠ No	⊠ Yes □ No
St. Alexius Medical Center	Bis	smarck, ND	701-530-7000	15 min	1.5 hr	⊠Yes Level: 2	□ Yes ⊠ No	⊠ Yes □ No
Sanford Health	Jam	nestown, ND	701-253-4000	15 min	1.5 hr	⊠ Yes Level: 2	□ Yes ⊠ No	⊠ Yes □ No
Regions Hospital	St	:. Paul, MN	800-922-2876	1.5 hr	5.5 hr	⊠ Yes Level: 1	⊠ Yes	⊠ Yes □ No
If so, contact Central Da	e emergency. C akota Commun	llosest Medical Aid perso ication Center via 911.	onnel respond. Burn Boss w to assess patient and provid	,		, ,	1	

MEDICAL PLAN (ICS 206 WF)

Controlled Unclassified Information//Basic

Medical Incident Report

FOR A NON-EMERGENCY INCIDENT, WORK THROUGH CHAIN OF COMMAND TO REPORT AND TRANSPORT INJURED PERSONNEL AS NECESSARY.

FOR A MEDICAL EMERGENCY: IDENTIFY ON SCENE INCIDENT COMMANDER BY NAME AND POSITION AND ANNOUNCE "MEDICAL EMERGENCY" TO INITIATE RESPONSE FROM IMT COMMUNICATIONS/DISPATCH.

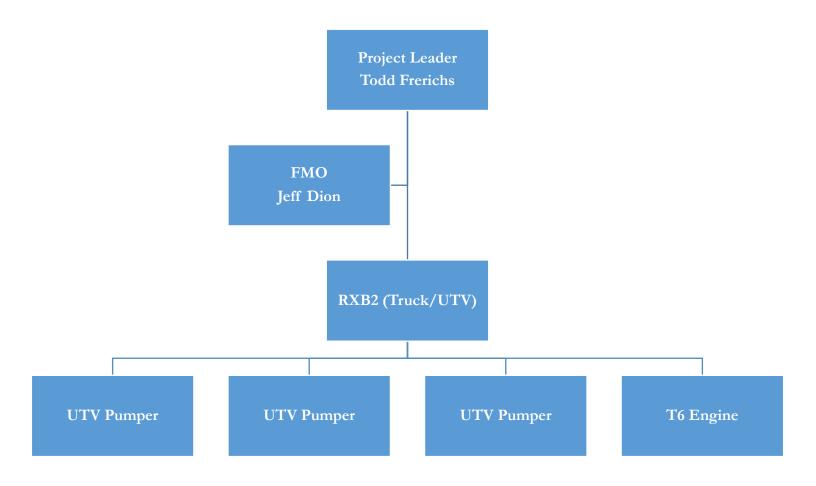
Use the following items to communicate situation to communications/dispatch.

Ex: "Commun 2. INCIDENT ST Ex: "Commun	DMMUNICATIONS / I nications, Div. Alpha. Sta TATUS: Provide incider ications, I have a Red pr C is TFLD Jones. EMT	and-by for nt summa riority patie	Emergency Traffic." ry (including number of ent, unconscious, struc	f patients) and c k by a falling tre	command s	tructure.	o Forest Road 1 at (Lat./Long.) This will be the Trout	
	rgency / Transport iority	Ex: U YELL Ex: Si ☐ GREE	nconscious, difficulty b	reathing, bleed Serious Injury Je to walk, 2° – 3 nor Injury or	ing severel	y, 2° – 3° burns more ss. Evacuation ma of more than 1-3 palm		
	njury or Illness & sm of Injury						Brief Summary of Injury or Illness (Ex: Unconscious, Struck by Falling Tree)	
Transpo	ort Request						Air Ambulance / Short Haul/Hoist Ground Ambulance / Other	
Patient	Location						Descriptive Location & Lat. / Long. (WGS84)	
Incide	nt Name						Geographic Name + "Medical" (Ex: Trout Meadow Medical)	
On-Scene Inci	dent Commander						Name of on-scene IC of Incident within an Incident (Ex: TFLD Jones)	
Patie	nt Care						Name of Care Provider (Ex: EMT Smith)	
3. INITIAL PATI	ENT ASSESSMENT:	Complete	this section for each pat	tient as applicabl	e (start with	the most severe patier	nt)	
Patient Assessm	ent: See IRPG page	106						
Treatment:								
4. TRANSPORT								
Evacuation Loca	tion (<i>if different</i>): (<i>De</i> s	scriptive	Location (drop point	t, intersection,	etc.) or L	.at. / Long.) Patier	nt's ETA to Evacuation Location:	
Helispot / Extract	ion Site Size and Ha	zards:						
5. ADDITIONAL	RESOURCES / EQUI	PMENT	NEEDS:					
Example: Paramed	lic/EMT, Crews, Immobil	ization De	vices, AED, Oxygen, T	rauma Bag, IV/	Fluid(s), S _l	olints, Rope rescue, W	Wheeled litter, HAZMAT, Extrication	
	TIONS: Identify Sta							
Function	Channel Name/Numb	er	Receive (RX)	Tone/N/	4C *	Transmit (TX)	Tone/NAC *	_
COMMAND								
AIR-TO-GRND TACTICAL								_
	Y: C onsiderations: If	primary o	options fail, what action	ons can be imp	plemented	in conjunction with p	primary evacuation method? Be thinking	=
3. ADDITIONAL	INFORMATION: Upda	ates/Chan	ges, etc.					

REMEMBER: Confirm ETA's of resources ordered. Act according to your level of training. Be Alert. Keep Calm. Think Clearly. Act Decisively.

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INCIDENT ORGANIZATION CHART (ICS 207)



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Prescription Parameters

ENVIRONMENTAL CONDITIONS	ACCEPTABLE	DESIRED	FORECASTED (NWS spot forecast)
Temperature	30-89	50-89	
Relative Humidity	20-59	25-44	
1 hr. Fuel Moisture (%)*	2-9	5-7	
Wind Speed mph (20' forecast)	0-20	5-15	
Wind Direction	W, N, SW, 1	NE, E, S	
Dispersion Index**	>13,0	00	
FIRE BEHAVIOR (BehavePlus5 runs – FM 1, 6% Slope, Direction of Maximum Spread)	ACCEPTABLE	DESIRED	FORECASTED (if environmental conditions are outside acceptable ranges – see below)
Surface Rate of Spread (ch/h)	3.6-665.6	44.9-297.3	
Fireline Intensity (Btu/ft/s)	5-1415	73-504	
Flame Length (ft)	0.9-12.7	3.2-7.9	
FIRE BEHAVIOR (NFDRS Calculator)	ACCEPTABLE	DESIRED	FORECASTED (RAWS)
Energy Release Component (ERC)	2-7	3-4	
Burning Index (BI)	10-91	25-53	

See Appendix E: Fire Behavior Modeling Documentation or Empirical Documentation The Fire Behavior Prescription is the range of acceptable and desired fire behavior to obtain the fire treatment and resource objectives. The Environmental Conditions are used only to determine Fire Behavior. Any combination of weather and fuels guidance parameters that result in and acceptable fire behavior range will be considered within prescription.

- **Dispersion Index (Transport Winds X Mixing Height)
 - <13,000: Poor, No burning will be conducted
 - 13,000 29,999: Fair
 - 30,000 59,000: Good
 - 60,000 or greater: Excellent

Method and Frequency for Obtaining Weather and Smoke Management Forecast(s)

- A spot weather forecast for the burn site will be requested from the NWS for each ignition operational period by submitting the online form at http://www.crh.noaa.gov/bis/fire.htm or by phone at 701-250-4224.
- NFDRS data for point forecasts, including Burning Index, Energy Release Component, Ignition Component, and others, may
 be obtained from NDC or directly from the RAWS located in the area (Long Lake or Sand Lake).

Prepared by: Mike Hill/RXB2

^{*1} hr. Fuel Moistures are Reference Fuel Moistures with Fuel Moisture Content Correction of 0-1 during May, June and July. Forecasted 1 hr. Fuel Moisture can be determined using the Fireline Handbook Appendix B: Fire Behavior or taken from a representative RAWS.

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UNIT LOG (ICS 214)

4. Name:		5. ICS Position:	6. Home Agency (and Unit):
7. Resources Assi	gned:		
	ame	ICS Position	Home Agency (and Unit)
8. Activity Log:	_		
Date/Time	Notable Activities		

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	Aspect			Cover Type			% Green		
Date/Time		Temp			Wind		% Cloud	Remarks: (smoke dispersal,	
	Location	Dry	Wet	RH	Speed	Direction	Cover	fire behavior, fuel consumption)	
	Test Fire								

Prepared by: Mike Hill/RXB2