



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2018

Data Qualified?

Yes / ☒ No

WIN Station Name: Jackson Creek at New Warrington Road

Date: 07.13.2020  
(mm/dd/yyyy)

WIN/ Field ID: 33020222

WBID: 846B

Latitude: 30.411028

(Decimal Degrees)

County: Escambia

ORG ID: 21FLPNS

Longitude: 87.276806

(Decimal Degrees)

Receiving Body of Water: BAYOU CHICO

RQ-2020- 07-13-57

| Sampling Team Members                                                                    |       |                                                                                                                                                                                                                                                                                            |                  | WQ Measurements                                                            | Sample Collection                   | Documentation                                                                        | Preservation                        | Preservation Check                                                | Sampling Equipment                         |                                   |                               |                                         |  |  |  |
|------------------------------------------------------------------------------------------|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|----------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------|--------------------------------------------|-----------------------------------|-------------------------------|-----------------------------------------|--|--|--|
| B. CUMMINS<br>T. MOLONY                                                                  |       |                                                                                                                                                                                                                                                                                            |                  | <input checked="" type="checkbox"/>                                        | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/>                                                  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/>                               | <input type="checkbox"/> Sample Container  | <input type="checkbox"/> Van Dorn | <input type="checkbox"/> Pole |                                         |  |  |  |
|                                                                                          |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     |                                                                   | <input type="checkbox"/> Carboy            | <input type="checkbox"/> Syringe  |                               |                                         |  |  |  |
|                                                                                          |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     |                                                                   | <input checked="" type="checkbox"/> Dipper | <input type="checkbox"/> Other    |                               |                                         |  |  |  |
| Depth Measured with FIELD METER                                                          |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     | Equipment ID DIPPER A                                             |                                            |                                   |                               |                                         |  |  |  |
|                                                                                          |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     | Collection Method                                                 |                                            |                                   |                               |                                         |  |  |  |
|                                                                                          |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     | <input type="checkbox"/> Wading                                   |                                            |                                   |                               | <input type="checkbox"/> Canoe/Kayak    |  |  |  |
|                                                                                          |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     | <input checked="" type="checkbox"/> From Shore                    |                                            |                                   |                               | <input type="checkbox"/> Electric Motor |  |  |  |
|                                                                                          |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     | <input type="checkbox"/> Other                                    |                                            |                                   |                               | <input type="checkbox"/> Gasoline Motor |  |  |  |
| Water Level: Dry/ Pooled/ Low / <input checked="" type="radio"/> Normal / High / Flooded |       |                                                                                                                                                                                                                                                                                            |                  | Meter ID# AT 600 537460                                                    |                                     |                                                                                      |                                     | Matrix: <input checked="" type="radio"/> Fresh / Marine / DI      |                                            |                                   |                               |                                         |  |  |  |
| Photos: <input checked="" type="radio"/> Yes / No                                        |       |                                                                                                                                                                                                                                                                                            |                  | Flow: No Flow / Intestinal / <input checked="" type="radio"/> Flowing / NA |                                     |                                                                                      |                                     | Tide: Rising/ Falling/ Slack/ <input checked="" type="radio"/> NA |                                            |                                   |                               | Tide Times: High Low                    |  |  |  |
| Time Zone                                                                                | Time  | Total Depth (m)                                                                                                                                                                                                                                                                            | Sample Depth (m) | Secchi Disk (m)                                                            | DO (mg/L)                           | DO (%SAT)                                                                            | pH                                  | Salinity (PPT <sub>h</sub> )                                      | Sp COND (µmhos/cm)                         | Temp. (C°)                        |                               |                                         |  |  |  |
| EST                                                                                      | 11:25 | 0.3                                                                                                                                                                                                                                                                                        | 0.15             | VOB                                                                        | 6.50                                | 80.04                                                                                | 6.18                                | 0.05                                                              | 108.57                                     | 28.30                             |                               |                                         |  |  |  |
| <input checked="" type="radio"/> CEN                                                     |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Biological Samples Collected: None HA SCI RPS Algae ID LVS LVI Other:                    |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| SBIO ID Numbers: SBIO-ID: HA-ID: RPS-ID: Macrophyte-ID: LIMS#:                           |       |                                                                                                                                                                                                                                                                                            |                  |                                                                            |                                     |                                                                                      |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Parameter Suite                                                                          |       | Parameter Methods                                                                                                                                                                                                                                                                          |                  |                                                                            |                                     | Preservation                                                                         |                                     | Lot#                                                              |                                            | Expiration pH Check               |                               |                                         |  |  |  |
| Preserved Nutrients                                                                      |       | <input type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                                                                                                                                                                       |                  |                                                                            |                                     | <input type="checkbox"/> Ice <input type="checkbox"/> H <sub>2</sub> SO <sub>4</sub> |                                     |                                                                   |                                            | <input type="checkbox"/> <2       |                               |                                         |  |  |  |
| Metals                                                                                   |       | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-ICP                                                                                                                                                                                                                            |                  |                                                                            |                                     | <input type="checkbox"/> Ice <input type="checkbox"/> HNO <sub>3</sub>               |                                     |                                                                   |                                            | <input type="checkbox"/> <2       |                               |                                         |  |  |  |
| Filtered Nutrients                                                                       |       | <input type="checkbox"/> W-PO4-F <input type="checkbox"/> Field Filtered 0.45 µm Filter                                                                                                                                                                                                    |                  |                                                                            |                                     | <input type="checkbox"/> Ice                                                         |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Chlorophyll                                                                              |       | <input type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                        |                  |                                                                            |                                     | <input type="checkbox"/> Ice                                                         |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Physical/Aggregate (Fresh)                                                               |       | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CH-IC / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                                                       |                  |                                                                            |                                     | <input type="checkbox"/> Ice                                                         |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Physical/Aggregate (Marine)                                                              |       | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY                                                                                                                                                                                                                              |                  |                                                                            |                                     | <input type="checkbox"/> Ice                                                         |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Macroinvertebrates                                                                       |       | <input type="checkbox"/> MI-FW-QLDC                                                                                                                                                                                                                                                        |                  |                                                                            |                                     | <input type="checkbox"/> Formalin                                                    |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Periphyton                                                                               |       | <input type="checkbox"/> ALGAE-ID                                                                                                                                                                                                                                                          |                  |                                                                            |                                     | <input type="checkbox"/> Ice                                                         |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Microbiology                                                                             |       | <input checked="" type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci                                                                                                                                                                            |                  |                                                                            |                                     | <input checked="" type="checkbox"/> Ice                                              |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Molecular                                                                                |       | <input type="checkbox"/> PCR-FILTER <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR-GFD                                                                                                               |                  |                                                                            |                                     | <input type="checkbox"/> Ice                                                         |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Tracers                                                                                  |       | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA                                                                                                                                                                                |                  |                                                                            |                                     | <input type="checkbox"/> Ice                                                         |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |
| Pesticides                                                                               |       | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-CARB-AA <input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-GLYPH <input type="checkbox"/> W-SUC-AA-R |                  |                                                                            |                                     | <input type="checkbox"/> Ice <input type="checkbox"/> Other                          |                                     |                                                                   |                                            |                                   |                               |                                         |  |  |  |

|                             |                  |
|-----------------------------|------------------|
| Notes: TURBIDITY = 1.77 NTU | Place Label Here |
| Signature: T. MOLONY        | Date: 7.13.2020  |

Enter Field Parameters, Verify Station ID in LIMS DMT: \_\_\_\_\_ QC Station ID, Field Parameters in LIMS DMT: \_\_\_\_\_  
(Initials/Date) (Initials/Date)  
Scan/Save Field Sheets \_\_\_\_\_ Migrate Data to WIN: \_\_\_\_\_ Verify Data In WIN: \_\_\_\_\_  
(Initials/Date) (Initials/Date) (Initials/Date)