

FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
CHAIN OF CUSTODY FORM

|           |                  |                  |                                |
|-----------|------------------|------------------|--------------------------------|
| Date:     | 8/8/2024         | Collected By:    | Katherine Halbert, Alee Knoell |
| Customer: | NE-DIST          | Sampling Agency: | FDEP                           |
| RQ:       | RQ-2024-08-05-21 | Project ID:      | BMAP                           |

PLEASE RETURN THE ORIGINAL OF THIS FORM WITH SAMPLE SUBMITTAL  
FORMS AND THE COOLER PACKING WORKSHEET TO THE LAB

Number of Coolers Shipped: 0                      Delivery Method: HandDelivered

**FIELD ID (Labels) submitted under this RQ for this collection date.**

| Site Location                                 | Field ID/WIN ID                                                                                  |
|-----------------------------------------------|--------------------------------------------------------------------------------------------------|
| MONCRIEF CR AT MONCRIEF ROAD                  | <br>20030726   |
| TROUT RIVER AT OLD KINGS RD                   | <br>20030753   |
| TERRAPIN CREEK AT FAYE ROAD                   | <br>20030653 |
| NW TRIBUTARY TO OPEN CR AT HODGES             | <br>20030848 |
| MONCRIEF CR AT 21ST ST                        | <br>20030897 |
| TROUT R AT DINSMORE BOAT RAMP DOCK NR<br>US 1 | <br>20030123 |

RELINQUISHED BY(SIGNATURE):



DATE/TIME: 8/8/2024  
1630EST

THIS SECTION TO BE COMPLETED BY LABORATORY

|                     |                       |
|---------------------|-----------------------|
| Rec'd/Inspected By: | Rec'd/Inspected Date: |
|---------------------|-----------------------|



## FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## BASIN MANAGEMENT ACTION PLAN Field Sheet

July 2022

Meter  
Passed End  
of Day CCV  
Yes / No

|                          |                             |         |       |        |              |               |            |
|--------------------------|-----------------------------|---------|-------|--------|--------------|---------------|------------|
| WIN Station Name:        | TERRAPIN CREEK AT FAYE ROAD |         |       |        | Sample Date: | 8/8/2024      |            |
| WIN / Field ID:          | 20030653                    | ORG ID: | 21FLA | ENR:   | -            | Latitude:     | 30.434361  |
| County:                  | Duval                       | WBID:   | 2204  | STREAM |              | Longitude:    | -81.565556 |
| Receiving Body of Water: | Dunn Creek                  |         |       |        | RQ-          | 2024-08-05-21 |            |

| Sampling Team Members | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|-----------------|-------------------|---------------|--------------|--------------------|
| Katherine Halbert     | x               |                   | x             |              |                    |
| Alee Knoell           |                 | x                 |               | x            | x                  |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |

| Sampling Equipment   |                  |             |                |
|----------------------|------------------|-------------|----------------|
| x                    | Sample Container |             | Carboy         |
|                      | Dipper           |             | Van Dorn       |
|                      | Syringe          | x           | Pole           |
|                      |                  |             | NA             |
| Syringe Lot#         |                  | Filter Lot# |                |
| Secchi Equipment ID: |                  | D#4         |                |
| Collection Method    |                  |             |                |
|                      | Wading           |             | Canoe/Kayak    |
| x                    | From Shore       |             | Electric Motor |
|                      |                  |             | Gasoline Motor |
| Depth Measured With  |                  | Meter       |                |

|                 |             |
|-----------------|-------------|
| Water Level:    | Flooded     |
| Flow:           | Flowing     |
| Matrix:         | Fresh       |
| Tide Stage:     |             |
| High Tide:      |             |
| Low Tide:       |             |
| Photos:         | No          |
| Meter ID:       | Bruce       |
| Depth Gauge ID: | depth_gauge |
|                 |             |
|                 |             |

| Time Zone | Time | Total Depth (m) | Sample Depth (m) | DO (mg/L) | DO (%SAT) | Temp. (°C) | pH   | Secchi Disk (m) | Sp COND (µmhos/cm) | Salinity (PPTth) |
|-----------|------|-----------------|------------------|-----------|-----------|------------|------|-----------------|--------------------|------------------|
| EST       | 1030 | 0.46            | 0.23             | 5.69      | 70.2      | 26         | 6.09 | 0.46            | 117.3              | 0.05             |
|           |      |                 |                  |           |           |            |      | VOB (s)         |                    |                  |

Biological Samples Collected: None

SBIO Visit ID: HA ID: RPS ID: Macrophyte ID: LIMS Sample ID  
In The Macrophyte Module:

| Parameter Suite              | Parameter Methods (LIMS Test Codes)                      | Type       | Lot# | Expiration Date | pH Check |
|------------------------------|----------------------------------------------------------|------------|------|-----------------|----------|
| Microbiology                 | E. coli<br>Contract Lab                                  | TANW       |      |                 |          |
| Chlorophyll                  |                                                          |            |      |                 |          |
| Physical/Aggregate Nutrients |                                                          |            |      |                 |          |
| Filtered Nutrients           |                                                          |            |      |                 |          |
| Acid Preserved Nutrients     |                                                          |            |      |                 |          |
| Metals                       |                                                          |            |      |                 |          |
| Organics (LC)                |                                                          |            |      |                 |          |
| Macroinvertebrates           |                                                          |            |      |                 |          |
| Organics (GC)                |                                                          |            |      |                 |          |
| Molecular                    |                                                          |            |      |                 |          |
| Periphyton                   |                                                          |            |      |                 |          |
| Phytoplankton                |                                                          |            |      |                 |          |
| BOD                          |                                                          |            |      |                 |          |
| DOC                          |                                                          |            |      |                 |          |
| Other(s)                     |                                                          |            |      |                 |          |
| Field Comments:              |                                                          |            |      |                 |          |
| Comments on COC:             | Microbiology sample(s) submitted to contract laboratory. |            |      |                 |          |
| Relinquish Date:             | 08/08/2024                                               | Signature: |      |                 |          |

LIMS EVENT ID: WIN Import ID:

Enter Field Parameters, Verify Station ID In LIMS DMT: QC Station ID, Field Parameters In LIMS DMT:

Save Field Sheets on Network: Migrate Data to WIN:



## FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## BASIN MANAGEMENT ACTION PLAN Field Sheet

July 2022

Meter  
Passed End  
of Day CCV  
Yes / No

|                          |                                   |         |       |        |              |               |            |
|--------------------------|-----------------------------------|---------|-------|--------|--------------|---------------|------------|
| WIN Station Name:        | NW TRIBUTARY TO OPEN CR AT HODGES |         |       |        | Sample Date: | 8/8/2024      |            |
| WIN / Field ID:          | 20030848                          | ORG ID: | 21FLA | ENR:   | -            | Latitude:     | 30.277383  |
| County:                  | Duval                             | WBID:   | 2299B | STREAM |              | Longitude:    | -81.461167 |
| Receiving Body of Water: | Icww Duval. St Johns County       |         |       |        | RQ-          | 2024-08-05-21 |            |

| Sampling Team Members | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|-----------------|-------------------|---------------|--------------|--------------------|
| Katherine Halbert     | x               |                   | x             |              |                    |
| Alee Knoell           |                 | x                 |               | x            | x                  |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |

| Sampling Equipment   |                  |             |                |
|----------------------|------------------|-------------|----------------|
| x                    | Sample Container |             | Carboy         |
|                      | Dipper           |             | Van Dorn       |
|                      | Syringe          | x           | Pole           |
|                      |                  |             | NA             |
| Syringe Lot#         |                  | Filter Lot# |                |
| Secchi Equipment ID: |                  | D#4         |                |
| Collection Method    |                  |             |                |
|                      | Wading           |             | Canoe/Kayak    |
| x                    | From Shore       |             | Electric Motor |
|                      |                  |             | Gasoline Motor |
| Depth Measured With  |                  | Meter       |                |

|                 |             |
|-----------------|-------------|
| Water Level:    | Normal      |
| Flow:           | Flowing     |
| Matrix:         | Fresh       |
| Tide Stage:     |             |
| High Tide:      |             |
| Low Tide:       |             |
| Photos:         | No          |
| Meter ID:       | Bruce       |
| Depth Gauge ID: | depth_gauge |
|                 |             |
|                 |             |

| Time Zone | Time | Total Depth (m) | Sample Depth (m) | DO (mg/L) | DO (%SAT) | Temp. (°C) | pH   | Secchi Disk (m) | Sp COND (µmhos/cm) | Salinity (PPTth) |
|-----------|------|-----------------|------------------|-----------|-----------|------------|------|-----------------|--------------------|------------------|
| EST       | 1110 | 0.59            | 0.3              | 6.08      | 76.1      | 26.8       | 6.69 | 0.59            | 358.3              | 0.17             |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |
|           |      |                 |                  |           |           |            |      | VOB (s)         |                    |                  |

Biological Samples Collected: None

SBIO Visit ID: HA ID: RPS ID: Macrophyte ID: LIMS Sample ID  
In The Macrophyte Module:

| Parameter Suite              | Parameter Methods (LIMS Test Codes)                      | Type       | Lot# | Expiration Date | pH Check |
|------------------------------|----------------------------------------------------------|------------|------|-----------------|----------|
| Microbiology                 | E. coli<br>Contract Lab TANW                             | ICE        |      |                 |          |
| Chlorophyll                  |                                                          |            |      |                 |          |
| Physical/Aggregate Nutrients |                                                          |            |      |                 |          |
| Filtered Nutrients           |                                                          |            |      |                 |          |
| Acid Preserved Nutrients     |                                                          |            |      |                 |          |
| Metals                       |                                                          |            |      |                 |          |
| Organics (LC)                |                                                          | MCAA***    |      |                 |          |
| Macroinvertebrates           |                                                          |            |      |                 |          |
| Organics (GC)                |                                                          |            |      |                 |          |
| Molecular                    |                                                          |            |      |                 |          |
| Periphyton                   |                                                          |            |      |                 |          |
| Phytoplankton                |                                                          |            |      |                 |          |
| BOD                          |                                                          |            |      |                 |          |
| DOC                          |                                                          |            |      |                 |          |
| Other(s)                     |                                                          |            |      |                 |          |
| Field Comments:              |                                                          |            |      |                 |          |
| Comments on COC:             | Microbiology sample(s) submitted to contract laboratory. |            |      |                 |          |
| Relinquish Date:             | 08/08/2024                                               | Signature: |      |                 |          |

LIMS EVENT ID: WIN Import ID:

Enter Field Parameters, Verify Station ID In LIMS DMT: QC Station ID, Field Parameters In LIMS DMT:

Save Field Sheets on Network: Migrate Data to WIN:



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## BASIN MANAGEMENT ACTION PLAN Field Sheet

July 2022

Meter  
Passed End  
of Day CCV  
Yes / No

|                          |          |                                  |       |        |   |              |               |          |  |
|--------------------------|----------|----------------------------------|-------|--------|---|--------------|---------------|----------|--|
| WIN Station Name:        |          | TROUT RIVER AT OLD KINGS RD      |       |        |   | Sample Date: |               | 8/8/2024 |  |
| WIN / Field ID:          | 20030753 | ORG ID:                          | 21FLA | ENR:   | - | Latitude:    | 30.431278     |          |  |
| County:                  | Duval    | WBID:                            | 2203  | STREAM |   | Longitude:   | -81.768583    |          |  |
| Receiving Body of Water: |          | St Johns River Above Dames Point |       |        |   | RQ-          | 2024-08-05-21 |          |  |

| Sampling Team Members | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|-----------------|-------------------|---------------|--------------|--------------------|
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |
| Katherine Halbert     | x               |                   | x             |              |                    |
| Alee Knoell           |                 | x                 |               | x            | x                  |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |

| Sampling Equipment   |                  |             |                |
|----------------------|------------------|-------------|----------------|
| x                    | Sample Container |             | Carboy         |
|                      | Dipper           |             | Van Dorn       |
|                      | Syringe          | x           | Pole           |
| Syringe Lot#         |                  | Filter Lot# |                |
| Secchi Equipment ID: |                  | D#4         |                |
| Collection Method    |                  |             |                |
|                      | Wading           |             | Canoe/Kayak    |
| x                    | From Shore       |             | Electric Motor |
|                      |                  |             | Gasoline Motor |
| Depth Measured With  |                  | Meter       |                |

|                 |             |
|-----------------|-------------|
| Water Level:    | Flooded     |
| Flow:           | Flowing     |
| Matrix:         | Fresh       |
| Tide Stage:     |             |
| High Tide:      |             |
| Low Tide:       |             |
| Photos:         | No          |
| Meter ID:       | Bruce       |
| Depth Gauge ID: | depth_gauge |
|                 |             |
|                 |             |

| Time Zone | Time | Total Depth (m) | Sample Depth (m) | DO (mg/L) | DO (%SAT) | Temp. (°C) | pH   | Secchi Disk (m) | Sp COND (µmhos/cm) | Salinity (PPTth) |
|-----------|------|-----------------|------------------|-----------|-----------|------------|------|-----------------|--------------------|------------------|
| EST       | 945  | 1.25            | 0.3              | 2.09      | 25.6      | 25.6       | 6.66 | 0.2             | 215.8              | 0.1              |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |

Biological Samples Collected: None

SBIO Visit ID: HA ID: RPS ID: Macrophyte ID: LIMS Sample ID  
In The Macrophyte Module:

| Parameter Suite                                                           | Parameter Methods (LIMS Test Codes) | Preservation |                            |                 |          |
|---------------------------------------------------------------------------|-------------------------------------|--------------|----------------------------|-----------------|----------|
|                                                                           |                                     | Type         | Lot#                       | Expiration Date | pH Check |
| Microbiology                                                              | E. coli<br>Contract Lab TANW        | ICE          |                            |                 |          |
| Chlorophyll                                                               |                                     |              |                            |                 |          |
| Physical/Aggregate Nutrients                                              |                                     |              |                            |                 |          |
| Filtered Nutrients                                                        |                                     |              | Syringe Lot#; Filter Lot#: |                 |          |
| Acid Preserved Nutrients                                                  |                                     |              |                            |                 |          |
| Metals                                                                    |                                     |              |                            |                 |          |
| Organics (LC)                                                             |                                     |              |                            |                 |          |
| Macroinvertebrates                                                        |                                     |              |                            |                 |          |
| Organics (GC)                                                             |                                     |              |                            |                 |          |
| Molecular                                                                 |                                     |              |                            |                 |          |
| Periphyton                                                                |                                     |              |                            |                 |          |
| Phytoplankton                                                             |                                     |              |                            |                 |          |
| BOD                                                                       |                                     |              |                            |                 |          |
| DOC                                                                       |                                     |              | SyringeLot#                | FilterLot#      |          |
| Other(s)                                                                  |                                     |              |                            |                 |          |
| Field Comments:                                                           |                                     |              |                            |                 |          |
| Comments on COC: Microbiology sample(s) submitted to contract laboratory. |                                     |              |                            |                 |          |
| Relinquish Date:                                                          | 08/09/2024                          | Signature:   |                            |                 |          |

LIMS EVENT ID: WIN Import ID:

Enter Field Parameters, Verify Station ID In LIMS DMT: QC Station ID, Field Parameters In LIMS DMT:

Save Field Sheets on Network: Migrate Data to WIN:



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## BASIN MANAGEMENT ACTION PLAN Field Sheet

July 2022

Meter  
Passed End  
of Day CCV  
Yes / No

|                          |          |                              |       |        |   |              |               |          |  |
|--------------------------|----------|------------------------------|-------|--------|---|--------------|---------------|----------|--|
| WIN Station Name:        |          | MONCRIEF CR AT MONCRIEF ROAD |       |        |   | Sample Date: |               | 8/8/2024 |  |
| WIN / Field ID:          | 20030726 | ORG ID:                      | 21FLA | ENR:   | - | Latitude:    | 30.370278     |          |  |
| County:                  | Duval    | WBID:                        | 2228B | STREAM |   | Longitude:   | -81.683833    |          |  |
| Receiving Body of Water: |          | Trout River                  |       |        |   | RQ-          | 2024-08-05-21 |          |  |

| Sampling Team Members | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|-----------------|-------------------|---------------|--------------|--------------------|
| Katherine Halbert     | x               |                   | x             |              |                    |
| Alee Knoell           |                 | x                 |               | x            | x                  |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |

| Sampling Equipment   |                  |             |                |
|----------------------|------------------|-------------|----------------|
| x                    | Sample Container |             | Carboy         |
|                      | Dipper           |             | Van Dorn       |
|                      | Syringe          | x           | Pole           |
| Syringe Lot#         |                  | Filter Lot# |                |
| Secchi Equipment ID: |                  | D#4         |                |
| Collection Method    |                  |             |                |
|                      | Wading           |             | Canoe/Kayak    |
| x                    | From Shore       |             | Electric Motor |
|                      |                  |             | Gasoline Motor |
| Depth Measured With  |                  | Meter       |                |

|                 |             |
|-----------------|-------------|
| Water Level:    | Normal      |
| Flow:           | Flowing     |
| Matrix:         | Fresh       |
| Tide Stage:     |             |
| High Tide:      |             |
| Low Tide:       |             |
| Photos:         | No          |
| Meter ID:       | Bruce       |
| Depth Gauge ID: | depth_gauge |
|                 |             |
|                 |             |

| Time Zone | Time | Total Depth (m) | Sample Depth (m) | DO (mg/L) | DO (%SAT) | Temp. (°C) | pH   | Secchi Disk (m) | Sp COND (µmhos/cm) | Salinity (PPTth) |
|-----------|------|-----------------|------------------|-----------|-----------|------------|------|-----------------|--------------------|------------------|
| EST       | 925  | 0.71            | 0.3              | 4.43      | 55.4      | 26.8       | 7.12 | 0.71            | 278.6              | 0.13             |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |
|           |      |                 |                  |           |           |            |      | VOB (s)         |                    |                  |

|                               |        |         |                |                |  |  |  |  |  |  |
|-------------------------------|--------|---------|----------------|----------------|--|--|--|--|--|--|
| Biological Samples Collected: |        | None    |                |                |  |  |  |  |  |  |
| SBIO Visit ID:                | HA ID: | RPS ID: | Macrophyte ID: | LIMS Sample ID |  |  |  |  |  |  |
| In The Macrophyte Module:     |        |         |                |                |  |  |  |  |  |  |

| Parameter Suite              | Parameter Methods (LIMS Test Codes)                      | Preservation |                            |                 |          |
|------------------------------|----------------------------------------------------------|--------------|----------------------------|-----------------|----------|
|                              |                                                          | Type         | Lot#                       | Expiration Date | pH Check |
| Microbiology                 | E. coli<br>Contract Lab                                  | TANW         |                            |                 |          |
| Chlorophyll                  |                                                          |              |                            |                 |          |
| Physical/Aggregate Nutrients |                                                          |              |                            |                 |          |
| Filtered Nutrients           |                                                          |              | Syringe Lot#; Filter Lot#: |                 |          |
| Acid Preserved Nutrients     |                                                          |              |                            |                 |          |
| Metals                       |                                                          |              |                            |                 |          |
| Organics (LC)                |                                                          |              |                            |                 |          |
| Macroinvertebrates           |                                                          |              |                            |                 |          |
| Organics (GC)                |                                                          |              |                            |                 |          |
| Molecular                    |                                                          |              |                            |                 |          |
| Periphyton                   |                                                          |              |                            |                 |          |
| Phytoplankton                |                                                          |              |                            |                 |          |
| BOD                          |                                                          |              |                            |                 |          |
| DOC                          |                                                          |              |                            |                 |          |
| Other(s)                     |                                                          |              |                            |                 |          |
| Field Comments:              |                                                          |              |                            |                 |          |
| Comments on COC:             | Microbiology sample(s) submitted to contract laboratory. |              |                            |                 |          |
| Relinquish Date:             | 08/08/2024                                               | Signature:   |                            |                 |          |

LIMS EVENT ID: \_\_\_\_\_ WIN Import ID: \_\_\_\_\_

Enter Field Parameters, Verify Station ID In LIMS DMT: \_\_\_\_\_ (Initials/Date) QC Station ID, Field Parameters In LIMS DMT: \_\_\_\_\_ (Initials/Date)

Save Field Sheets on Network: \_\_\_\_\_ (Initials/Date) Migrate Data to WIN: \_\_\_\_\_ (Initials/Date)



## FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## BASIN MANAGEMENT ACTION PLAN Field Sheet

July 2022

Meter  
Passed End  
of Day CCV  
Yes / No

|                          |                                            |         |       |         |              |               |            |
|--------------------------|--------------------------------------------|---------|-------|---------|--------------|---------------|------------|
| WIN Station Name:        | TROUT R AT DINSMORE BOAT RAMP DOCK NR US 1 |         |       |         | Sample Date: | 8/8/2024      |            |
| WIN / Field ID:          | 20030123                                   | ORG ID: | 21FLA | ENR:    | -            | Latitude:     | 30.436625  |
| County:                  | Duval                                      | WBID:   | 2203B | ESTUARY |              | Longitude:    | -81.761182 |
| Receiving Body of Water: | St Johns River Above Dames Point           |         |       |         | RQ-          | 2024-08-05-21 |            |

| Sampling Team Members | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|-----------------|-------------------|---------------|--------------|--------------------|
| Katherine Halbert     | x               |                   | x             |              |                    |
| Alee Knoell           |                 | x                 |               | x            | x                  |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |

| Sampling Equipment        |                      |     |                |
|---------------------------|----------------------|-----|----------------|
| x                         | Sample Container     |     | Carboy         |
|                           | Dipper               |     | Van Dorn       |
|                           | Syringe              | x   | Pole           |
|                           | Syringe Lot#         |     | Filter Lot#    |
|                           | Secchi Equipment ID: | D#4 |                |
| Collection Method         |                      |     |                |
|                           | Wading               |     | Canoe/Kayak    |
| x                         | From Shore           |     | Electric Motor |
|                           |                      |     | Gasoline Motor |
| Depth Measured With Meter |                      |     |                |

|                 |             |
|-----------------|-------------|
| Water Level:    | Normal      |
| Flow:           | NA          |
| Matrix:         | Fresh       |
| Tide Stage:     | Rising      |
| High Tide:      | 1338        |
| Low Tide:       | 0722        |
| Photos:         | No          |
| Meter ID:       | Bruce       |
| Depth Gauge ID: | depth_gauge |
|                 |             |
|                 |             |

| Time Zone | Time | Total Depth (m) | Sample Depth (m) | DO (mg/L) | DO (%SAT) | Temp. (°C) | pH   | Secchi Disk (m) | Sp COND (µmhos/cm) | Salinity (PPTth) |
|-----------|------|-----------------|------------------|-----------|-----------|------------|------|-----------------|--------------------|------------------|
| EST       | 1005 | 0.97            | 0.3              | 4.48      | 55        | 25.7       | 6.12 | 0.3             | 85.6               | 0.04             |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |

Biological Samples Collected: None

SBIO Visit ID: HA ID: RPS ID: Macrophyte ID: LIMS Sample ID  
In The Macrophyte Module:

| Parameter Suite              | Parameter Methods (LIMS Test Codes)                      | Type       | Lot# | Expiration Date | pH Check |
|------------------------------|----------------------------------------------------------|------------|------|-----------------|----------|
| Microbiology                 | Contract Lab Enterococci TANW                            | ICE        |      |                 |          |
| Chlorophyll                  |                                                          |            |      |                 |          |
| Physical/Aggregate Nutrients |                                                          |            |      |                 |          |
| Filtered Nutrients           |                                                          |            |      |                 |          |
| Acid Preserved Nutrients     |                                                          |            |      |                 |          |
| Metals                       |                                                          |            |      |                 |          |
| Organics (LC)                |                                                          | MCAA***    |      |                 |          |
| Macroinvertebrates           |                                                          |            |      |                 |          |
| Organics (GC)                |                                                          |            |      |                 |          |
| Molecular                    |                                                          |            |      |                 |          |
| Periphyton                   |                                                          |            |      |                 |          |
| Phytoplankton                |                                                          |            |      |                 |          |
| BOD                          |                                                          |            |      |                 |          |
| DOC                          |                                                          |            |      |                 |          |
| Other(s)                     |                                                          |            |      |                 |          |
| Field Comments:              |                                                          |            |      |                 |          |
| Comments on COC:             | Microbiology sample(s) submitted to contract laboratory. |            |      |                 |          |
| Relinquish Date:             | 08/08/2024                                               | Signature: |      |                 |          |

LIMS EVENT ID: WIN Import ID:

Enter Field Parameters, Verify Station ID In LIMS DMT: QC Station ID, Field Parameters In LIMS DMT:

Save Field Sheets on Network: Migrate Data to WIN:



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION

## BASIN MANAGEMENT ACTION PLAN Field Sheet

July 2022

Meter  
Passed End  
of Day CCV  
Yes / No

|                          |                        |         |       |        |              |               |            |
|--------------------------|------------------------|---------|-------|--------|--------------|---------------|------------|
| WIN Station Name:        | MONCRIEF CR AT 21ST ST |         |       |        | Sample Date: | 8/8/2024      |            |
| WIN / Field ID:          | 20030897               | ORG ID: | 21FLA | ENR:   | -            | Latitude:     | 30.356667  |
| County:                  | Duval                  | WBID:   | 2228B | STREAM |              | Longitude:    | -81.691083 |
| Receiving Body of Water: | Trout River            |         |       |        | RQ-          | 2024-08-05-21 |            |

| Sampling Team Members | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|-----------------|-------------------|---------------|--------------|--------------------|
| Katherine Halbert     | x               |                   | x             |              |                    |
| Alee Knoell           |                 | x                 |               | x            |                    |
|                       |                 |                   |               |              |                    |
|                       |                 |                   |               |              |                    |

| Sampling Equipment  |                      |       |                |
|---------------------|----------------------|-------|----------------|
| x                   | Sample Container     |       | Carboy         |
|                     | Dipper               |       | Van Dorn       |
|                     | Syringe              | x     | Pole           |
|                     | Syringe Lot#         |       | Filter Lot#    |
|                     | Secchi Equipment ID: | D#4   |                |
| Collection Method   |                      |       |                |
|                     | Wading               |       | Canoe/Kayak    |
| x                   | From Shore           |       | Electric Motor |
|                     |                      |       | Gasoline Motor |
| Depth Measured With |                      | Meter |                |

|                 |             |
|-----------------|-------------|
| Water Level:    | Normal      |
| Flow:           | Flowing     |
| Matrix:         | Fresh       |
| Tide Stage:     |             |
| High Tide:      |             |
| Low Tide:       |             |
| Photos:         | No          |
| Meter ID:       | Bruce       |
| Depth Gauge ID: | depth_gauge |
|                 |             |
|                 |             |

| Time Zone | Time | Total Depth (m) | Sample Depth (m) | DO (mg/L) | DO (%SAT) | Temp. (°C) | pH   | Secchi Disk (m) | Sp COND (µmhos/cm) | Salinity (PPTth) |
|-----------|------|-----------------|------------------|-----------|-----------|------------|------|-----------------|--------------------|------------------|
| EST       | 905  | 0.74            | 0.3              | 5.07      | 63.3      | 26.7       | 7.17 | 0.6             | 377.5              | 0.18             |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |
|           |      |                 |                  |           |           |            |      |                 |                    |                  |

Biological Samples Collected: None

SBIO Visit ID: HA ID: RPS ID: Macrophyte ID: LIMS Sample ID  
In The Macrophyte Module:

| Parameter Suite              | Parameter Methods (LIMS Test Codes)                      | Type       | Lot#                       | Expiration Date | pH Check |
|------------------------------|----------------------------------------------------------|------------|----------------------------|-----------------|----------|
| Microbiology                 | E. coli<br>Contract Lab TANW                             | ICE        |                            |                 |          |
| Chlorophyll                  |                                                          |            |                            |                 |          |
| Physical/Aggregate Nutrients |                                                          |            |                            |                 |          |
| Filtered Nutrients           |                                                          |            | Syringe Lot#; Filter Lot#: |                 |          |
| Acid Preserved Nutrients     |                                                          |            |                            |                 |          |
| Metals                       |                                                          |            |                            |                 |          |
| Organics (LC)                |                                                          | MCAA***    |                            |                 |          |
| Macroinvertebrates           |                                                          |            |                            |                 |          |
| Organics (GC)                |                                                          |            |                            |                 |          |
| Molecular                    |                                                          |            |                            |                 |          |
| Periphyton                   |                                                          |            |                            |                 |          |
| Phytoplankton                |                                                          |            |                            |                 |          |
| BOD                          |                                                          |            |                            |                 |          |
| DOC                          |                                                          |            | SyringeLot#                | FilterLot#      |          |
| Other(s)                     |                                                          |            |                            |                 |          |
| Field Comments:              |                                                          |            |                            |                 |          |
| Comments on COC:             | Microbiology sample(s) submitted to contract laboratory. |            |                            |                 |          |
| Relinquish Date:             | 08/08/2024                                               | Signature: |                            |                 |          |

LIMS EVENT ID: WIN Import ID:  
Enter Field Parameters, Verify Station ID In LIMS DMT: QC Station ID, Field Parameters In LIMS DMT:  
Save Field Sheets on Network: Migrate Data to WIN:

# CALIBRATION AND VERIFICATION LOG (FDEP SOP FT 1000-FT 1500, FD 1000-FD 4000)

Boldly "X" this box if there are qualified data on this page.

Meter ID: Bruce

RQ: 2024-08-05-21

Project: BMAP-2

- Notes: (1) Always wait for meter to stabilize before recording any readings.  
 (2) Report all digits displayed. Do not round before reporting measurements. (See special instructions for depth).  
 (3) For Calibrations, record calibrated meter reading. Do not record initial meter reading before calibration.

## Temperature (Quarterly) FT 1400

Date of Last Temperature Verification 07102

| DO DEP SOP FT 1500 | Name    | Date | Time CT-ET | Temp °C | Baro-meter mmHg | D.O. Chart mg/L | Meter D.O. mg/L | % DO | Probe Charge | Probe Gain | Pass / Fail | Lab / Field |
|--------------------|---------|------|------------|---------|-----------------|-----------------|-----------------|------|--------------|------------|-------------|-------------|
| Calibr.            | Aknoell | 8/08 | 0800       | 21.9    | 753.1           | —               | 8.7             | 99.1 | —            | 1.03       | (P) F       | (L) F       |
| ICV                | Aknoell | 8/08 | 0801       | 21.7    | 753.1           | 8.7             | 8.73            | 99.1 | —            | 1.03       | (P) F       | (L) F       |
| CCV                | Aknoell | 8/08 | 1206       | 23.8    | 752.9           | 8.4             | 8.41            | 99.6 | —            | 1.03       | P / F       | L / F       |
| CCV                |         |      |            |         |                 |                 |                 |      |              |            | P / F       | L / F       |

DO Acceptance criteria from Table  $\pm 0.3$  mg/L.

Rapid-Pulse Sensors: DO Gain Range 0.7 to 1.4; DO Charge Range 25-75.

Optical: DO gain range 0.85 to 1.15 (Pro DSS 0.75 to 1.50); DO charge N/A. Steady-state & Galvanic Sensors: DO Gain & Charge N/A.

| Spec. Cond. FT 1200 | Name    | Date | Time CT-ET | Lot #   | Expir. Date | Standard $\mu$ hos/cm | Meter Reading $\mu$ hos/cm | Pass / Fail | Lab / Field |
|---------------------|---------|------|------------|---------|-------------|-----------------------|----------------------------|-------------|-------------|
| Calibr.             | Aknoell | 8/08 | 0804       | 240618A | 06/25       | 1000                  | 1000                       | (P) F       | (L) F       |
| ICV                 | Aknoell | 8/08 | 0807       | 230612A | 01/25       | 100                   | 97.6                       | (P) F       | (L) F       |
| CCV                 | Aknoell | 8/08 | 1209       | 231103C | 11/24       | 50000                 | 49985                      | (P) F       | (L) F       |
| CCV                 |         |      |            |         |             |                       |                            | P / F       | L / F       |

Conductivity Acceptance criteria  $\pm 5\%$

| pH DEP SOP FT 1100 | Name    | Date | Time CT-ET | Lot #    | Expir. Date | pH Buffer SU | Temp °C | Meter reading SU | mV     | Pass / Fail | Lab / Field |
|--------------------|---------|------|------------|----------|-------------|--------------|---------|------------------|--------|-------------|-------------|
| Calibr.            | Aknoell | 8/08 | 0810       | 43110047 | 11/3/25     | 7.01         | 22.5    | 7.01             | -35.9  | (P) F       | (L) F       |
| Calibr.            | Aknoell | 8/08 | 0812       | 44040045 | 4/8/26      | 4.00         | 22.5    | 4.00             | 133.2  | (P) F       | (L) F       |
| Calibr.            | Aknoell | 8/08 | 0815       | 44020286 | 2/27/26     | 10.02        | 22.5    | 10.02            | -204.5 | (P) F       | (L) F       |
| ICV                | Aknoell | 8/08 | 0818       | 44040045 | 4/8/26      | 4.00         | 22.5    | 4.02             | 133.4  | (P) F       | (L) F       |
| CCV                | Aknoell | 8/08 | 1212       | 44020286 | 2/27/26     | 10.03        | 22.1    | 10.05            | -205.8 | (P) F       | (L) F       |
| CCV                |         |      |            |          |             |              |         |                  |        | P / F       | L / F       |

pH Acceptance criteria  $\pm 0.2$  SU; mV pH 7 Range  $0 \pm 50$ ; mV pH 4 Range  $+180 \pm 50$ ; mV pH 10 Range  $-180 \pm 50$ ;

If mV are recorded: slope from 7 to 10 168.6, slope from 4 to 7 169.1 (both must be between 165 and 180 mV)

Does meter have a depth sensor that will be used to measure total depth & sample depth? YES / NO / NA (not surf. water project)

If YES, complete daily Calibr. & ICV below and list date of last quarterly depth verification: 07102

If NO, what will be used? (circle one) Secchi Disk Line / Sonar Unique ID: \_\_\_\_\_; Date of last verification: \_\_\_\_\_

| Depth Sensor (Daily Calibration & ICV) | Name    | Date | Time CT-ET | Calibrated Value (0.00 or Offset), meters | ICV Value, meters | Pass / Fail | Lab / Field |
|----------------------------------------|---------|------|------------|-------------------------------------------|-------------------|-------------|-------------|
| Pressure mode in air                   | Aknoell | 8/08 | 0821       | 0.00                                      | 0.00              | (P) F       | (L) F       |

Report two decimal places. Round numbers  $\leq 4$  down,  $\geq 5$  up. ICV acceptance criteria  $\pm 5\%$  or  $\pm 0.05$ m, whichever is greater.

## COMMENTS:

## Eurofins Jacksonville

8021-B Philips Highway

Jacksonville, FL 32256

Phone (904) 296-3007 Phone (904) 296-6210

## Chain of Custody Record



Environmental Testing

|                                                                               |          |                                                                                                                                                                                                                        |             |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
|-------------------------------------------------------------------------------|----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|----------------------------|-----------------------------------|---------------------------------|--------------------------|----------------------------|----------------------------|
| Client Information                                                            |          | Lab PM: Savote, Noel                                                                                                                                                                                                   |             | Carrier Tracking No(s):                                                             |                                                          | COC No: 762-4973-783.1                                                                                                         |                            |                                   |                                 |                          |                            |                            |
| Client Contact: Sarah Menz                                                    |          | E-Mail: Noel.Savoie@eurofinsus.com                                                                                                                                                                                     |             | State of Origin:                                                                    |                                                          | Page: Page 1 of 1                                                                                                              |                            |                                   |                                 |                          |                            |                            |
| Company: DEP - Bureau of Labs Biology Section                                 |          | PWSID:                                                                                                                                                                                                                 |             | Analysis Requested                                                                  |                                                          | Job #:                                                                                                                         |                            |                                   |                                 |                          |                            |                            |
| Address: Twin Towers Lab Complex A Rm 216 6515 2600 Blairstone Rd N           |          | Due Date Requested:                                                                                                                                                                                                    |             |                                                                                     |                                                          | Preservation Codes: R - NaThioSO4                                                                                              |                            |                                   |                                 |                          |                            |                            |
| City: Tallahassee                                                             |          | TAT Requested (days):                                                                                                                                                                                                  |             |                                                                                     |                                                          | Other:                                                                                                                         |                            |                                   |                                 |                          |                            |                            |
| State, Zip: FL, 32399                                                         |          | Compliance Project: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                |             |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| Phone:                                                                        |          | PO #: C402CA                                                                                                                                                                                                           |             |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| Email: DEP-overflowmicro@floridadep.gov                                       |          | WO #:                                                                                                                                                                                                                  |             |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| Project Name: RQ-2024-08-05-21                                                |          | Project #: 76200778                                                                                                                                                                                                    |             |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| Site:                                                                         |          | SSOW#:                                                                                                                                                                                                                 |             |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| Sample Identification                                                         |          | Sample Date                                                                                                                                                                                                            | Sample Time | Sample Type (C=Comp, G=grab)                                                        | Matrix (W=water, S=solid, O=wastewater, B=tissue, A=air) | Field Filtered Sample (Yes or No)                                                                                              | Perform MS/MSD (Yes or No) | IDEX, ColIQ, 24H - Fecal Coliform | IDEX, Fmt, 9H, QT - Enterococci | 922B, ColIQ, 8H - E.Coli | Total Number of Containers | Special Instructions/Note: |
| 20030897                                                                      | 08/08/24 | 0905                                                                                                                                                                                                                   | G           | Water                                                                               |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            | RQ-2024- dilute 10x        |
| 20030726                                                                      | 08/08/24 | 0925                                                                                                                                                                                                                   | G           |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| 20030753                                                                      | 08/08/24 | 0945                                                                                                                                                                                                                   | G           |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| 20030123                                                                      | 08/08/24 | 1005                                                                                                                                                                                                                   | G           |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| 20030653                                                                      | 08/08/24 | 1030                                                                                                                                                                                                                   | G           |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            | dilute 10x                 |
| 20030848                                                                      | 08/08/24 | 1110                                                                                                                                                                                                                   | G           |                                                                                     |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| Possible Hazard Identification                                                |          | <input type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown <input type="checkbox"/> Radiological |             | Sample Disposal (A fee may be assessed if samples are retained longer than 1 month) |                                                          | <input type="checkbox"/> Return To Client <input type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For Months |                            |                                   |                                 |                          |                            |                            |
| Deliverable Requested: I, II, III, IV, Other (specify)                        |          |                                                                                                                                                                                                                        |             | Special Instructions/QC Requirements:                                               |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |
| Empty Kit Relinquished by: Katherine Halbert                                  |          | Date: 08/06/24                                                                                                                                                                                                         |             | Time: 11:12 AM 08/08/24                                                             |                                                          | Method of Shipment:                                                                                                            |                            |                                   |                                 |                          |                            |                            |
| Relinquished by: Katherine Halbert                                            |          | Date/Time: 08/08/24 / 1142                                                                                                                                                                                             |             | Company: FDEP                                                                       |                                                          | Date/Time: 8/8/24 1142                                                                                                         |                            | Company: EET                      |                                 |                          |                            |                            |
| Relinquished by:                                                              |          | Date/Time:                                                                                                                                                                                                             |             | Company:                                                                            |                                                          | Date/Time:                                                                                                                     |                            | Company:                          |                                 |                          |                            |                            |
| Relinquished by:                                                              |          | Date/Time:                                                                                                                                                                                                             |             | Company:                                                                            |                                                          | Date/Time:                                                                                                                     |                            | Company:                          |                                 |                          |                            |                            |
| Custody Seals Intact <input type="checkbox"/> Yes <input type="checkbox"/> No |          | Custody Seal No.:                                                                                                                                                                                                      |             | Cooler Temperature(s) °C and Other Remarks: 3.30 min ice T-096                      |                                                          |                                                                                                                                |                            |                                   |                                 |                          |                            |                            |