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

Meter ID: Pro Dme | RQ- 2021-12-06-12 | Project: Caloosa Creeks

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

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 11/30/21

[redacted]												
Calibr.	Kirby Mille	12/16/21	720	23.2	761.4	8.6	8.72	102.2		1.0359	P / F	L / F
ICV	11	11	723	23.3	761.4	8.6	8.53	100.1			P / F	L / F
CCV	Kirby Mille	12/16/21	1348	26.0	760.2	8.1	8.05	99.7			P / F	L / F
CCV											P / F	L / F

DO Acceptance criteria from Table ± 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.

[redacted]									
Calibr.	Kirby Mille	12/16/21	724	2107655	6/23	50,000	50016	P / F	L / F
ICV	11	11	730	2109K87	9/23	100	98.1	P / F	L / F
CCV	Kirby Mille	12/16/21	1351	1108C98	9/23	2500	2453	P / F	L / F
CCV								P / F	L / F

Conductivity Acceptance criteria ± 5%

[redacted]											
Calibr.	Kirby Mille	12/16/21	735	2107C00	7/23	7.0	24.9	7.01	-45.9	P / F	L / F
Calibr.	11	11	739	2109D38	8/23	4.0	24.6	3.91	136.2	P / F	L / F
Calibr.	11	11	745	2110G52	4/23	10.0	24.7	9.93	-217.8	P / F	L / F
ICV	11	11	750	2107C00	7/23	7.0	24.7	7.05		P / F	L / F
CCV	Kirby Mille	12/16/21	1352	2110G52	4/23	10.0	24.0	10.11		P / F	L / F
CCV										P / F	L / F
										P / F	L / F

pH Acceptance criteria ± 0.2 SU; mV pH 7 Range 0 ± 50; mV pH 4 Range +180 ± 50; mV pH 10 Range -180 ± 50;
If mV are recorded: slope from 7 to 10 ________, slope from 4 to 7 ________ (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) [NO circled]
If **YES**, complete daily Calibr. & ICV below and list date of last quarterly depth verification: ________
If **NO**, what will be used? (circle one) **Secchi Disk Line / Sonar** Unique ID: Dep Blvn; Date of last verification: 8/16/21

[redacted]							
Pressure mode in air						P / F	L / F

Report two decimal places. Round numbers ≤ 4 down, ≥ 5 up. ICV acceptance criteria ± 5 % or ± 0.05m, whichever is greater.

COMMENTS:

Form effective August 1, 2018