



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
STRATEGIC MONITORING PROGRAM FIELD SHEET

PAGE 4 OF

Data Qualified?  
Yes / No

STORET Station Name: \_\_\_\_\_

Date: 3/01/2016  
(mm/dd/yyyy)

STORET Station ID: \_\_\_\_\_



Latitude: 30.516667  
(Decimal Degrees)

WBID: 2242A

RQ - 2016- 02-29-35

ORG ID: 21FLA

Longitude: 81.99292  
(Decimal Degrees)

Receiving Body of Water: St. Marys River

Field ID: \_\_\_\_\_

County: Baker

| Sampling Team Members |              | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check | Duplicate Collection | Blank Collection |
|-----------------------|--------------|-----------------|-------------------|---------------|--------------|--------------------|----------------------|------------------|
| -                     | J. Parrish   |                 | X                 | X             | X            |                    |                      |                  |
| -                     | J. Gruentzel | X               | X                 | X             | X            |                    |                      |                  |
| -                     |              |                 |                   |               |              |                    |                      |                  |
| -                     |              |                 |                   |               |              |                    |                      |                  |

| Sampling Equipment                                   |                                   |                               |
|------------------------------------------------------|-----------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> Sample Container | <input type="checkbox"/> Van Dorn | <input type="checkbox"/> Pole |
| <input type="checkbox"/> Carboy                      | <input type="checkbox"/> Syringe  |                               |
| <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Other    |                               |
| Equipment ID: _____                                  |                                   |                               |

| Collection Method                              |                                         |  |
|------------------------------------------------|-----------------------------------------|--|
| <input type="checkbox"/> Wading                | <input type="checkbox"/> Via Boat       |  |
| <input checked="" type="checkbox"/> From Shore | <input type="checkbox"/> Canoe/Kayak    |  |
| <input type="checkbox"/> Other (note below)    | <input type="checkbox"/> Electric Motor |  |
|                                                | <input type="checkbox"/> Gasoline Motor |  |

Water Level: Dry / Low / Normal / High / Flooded Matrix: Fresh Marine / DI  
Meter ID# 143734 Photos: Yes / No Tide Falling: Yes / No / NA

| Time Zone | Time | Sample Depth (m) | Total Depth (m) | DO (mg/L) | DO (%SAT) | pH   | Salinity (ppt) | Secchi Disk (m) | Sp COND (umhos/cm) | Temp. (C°) |
|-----------|------|------------------|-----------------|-----------|-----------|------|----------------|-----------------|--------------------|------------|
| EST       | 1035 | 0.05             | 0.1             | 8.3       | 80.0      | 7.39 | 0.03           | 0.15            | 70                 | 12.99      |
| CEN       |      |                  |                 |           |           |      |                |                 |                    |            |

Biological Samples Collected: None HA SCI LVS RPS LVI Other

| Parameter Suite     | Parameter Methods                                                                                                                                                                                                                                                                  | Preservation                                                                      | Acid Lot# | Expiration | pH Check                    |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-----------|------------|-----------------------------|
| Preserved Nutrients | <input checked="" type="checkbox"/> TKN / TP / Nox / NH3 / TOC <input type="checkbox"/> Other                                                                                                                                                                                      | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 | 555020    | 9/16/16    | <input type="checkbox"/> <2 |
| Metals              | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-ICP                                                                                                                                                                                                                    | <input type="checkbox"/> Ice <input type="checkbox"/> HNO2                        |           |            | <input type="checkbox"/> <2 |
| Filtered Nutrients  | <input checked="" type="checkbox"/> oP <input checked="" type="checkbox"/> Field Filtered 0.45 um Filter                                                                                                                                                                           | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| Chlorophyll         | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| BOD                 | <input type="checkbox"/> BOD-INHB <input checked="" type="checkbox"/> BOD-UNIN                                                                                                                                                                                                     | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| Physical/Aggregate  | <input checked="" type="checkbox"/> TSS / Turbidity / Alkalinity / Color <input checked="" type="checkbox"/> W-F <input checked="" type="checkbox"/> W-CC-TC <input checked="" type="checkbox"/> W-504-TC <input type="checkbox"/> Other <input checked="" type="checkbox"/> W-TDS | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| Macroinvertebrates  | <input type="checkbox"/> MI-FW-QLDC                                                                                                                                                                                                                                                | <input type="checkbox"/> Formalin                                                 |           |            |                             |
| Microbiology        | <input type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Entero <input type="checkbox"/> QPCR                                                                                                                                                      | <input type="checkbox"/> Ice                                                      |           |            |                             |
| Periphyton          | <input type="checkbox"/> ALGAE-ID                                                                                                                                                                                                                                                  | <input type="checkbox"/> Ice                                                      |           |            |                             |
| Pesticides          | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-PC-AA-SF <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH                                                                | <input type="checkbox"/> Ice <input type="checkbox"/> Other                       |           |            |                             |

Place Label Here  
(If Available)

Signature: [Signature]

Date: 3/1/16

Field Parameters Entered into LIMS: [Signature] (Initials/Date)  
Date Migrated to STORET: [Signature] (Initials/Date)

Field Parameters QC in LIMS: \_\_\_\_\_ (Initials/Date)  
Field Sheets Scanned/Saved: \_\_\_\_\_ (Initials/Date)