

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

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

Meter QUANTA #1 RQ- 2016-05-02-28 Project NASSAU MIDDLE

- Notes: (1) Numbers ≤ 4 , are rounded down; numbers ≥ 5 are rounded up (e.g., 5.15 becomes 5.2).
 (2) Always wait for meter to stabilize before recording any readings.
 (3) For Calibrations, record calibrated meter reading. Do not record initial meter reading before calibration.

Circle/Fill In: Lab Calibration or Calibration/Verification on Site _____

Temperature (Quarterly) FT 1400 Date of Last Temperature Verification 04/ - / 2016

DO DEP SOP FT 1500	Name	Date	Time CT-ET	Temp	D.O. Chart mg/L	Meter D.O. mg/L	% DO	Probe Charge	Probe Gain	Pass / Fail	Lab / Field
Calibr.	PO'Connor	05-04-16	0650	23.7	8.46	8.47	100.0	—	—	Pass	LAB
ICV	↓	↓	0656	23.7	8.46	8.44	98.9	—	—	Pass	LAB
CCV	PO'Connor	05-04-16	1333	23.7	8.46	8.53	101.1	—	—	Pass	LAB
CCV											

Report DO mg/L with one decimal figure and DO % saturation as a whole number with no decimals.

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; 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 μ mhos/cm	Meter Reading μ mhos/cm	Pass / Fail	Lab / Field
Calibr.	PO'Connor	05-04-16	0658	160216A	02/2017	1000	1000	Pass	LAB
ICV	↓	↓	0700	↓	↓	↓	997	Pass	LAB
CCV	PO'Connor	05-04-16	1335	160216B	08/2016	100	102	Pass	LAB
CCV									

Report specific conductance as a whole number with no decimal figure.

Conductivity Acceptance criteria $\pm 5\%$

pH DEP SOP FT 1100	Name	Date	Time CT-ET	Lot #	Expir. Date	pH Buffer SU	Meter reading SU	mV	Pass / Fail	Lab / Field
Calibr.	PO'Connor	05-04-16	0702	2509677	08-2017	7.0	7.00	—	Pass	LAB
Calibr.	↓	↓	0714	2509F74	09-2017	4.0	4.00	—	Pass	LAB
Calibr.	↓	↓		2509677	08-2017	7.0	6.96	—	Pass	LAB
ICV	PO'Connor	05/04/16	1337	2509F74	09/2017	4.0	4.08	—	Pass	LAB
CCV										
CCV										

Report pH with one decimal place; pH Acceptance criteria ± 0.2 SU;

mV pH7 Range 0 $\pm$ 50;

mV pH 4 Range

+180 $\pm$ 50; mV pH 10 Range -180 $\pm$ 50;

Slope from 7 to 10 and 4 to 7 must be between 165

and 180mV

Depth (Quarterly)

N/A

Date of Last Depth Verification

N/A

Depth Sensor (Daily)	Name	Date	Time CT-ET	Zero the Sensor	ICV Value	Pass / Fail	Lab / Field
Pressure mode in air				0.000			

ICV acceptance criteria $\pm 5\%$ or ± 0.05 m, whichever is greater

QA/QC Sample Information

Duplicate

Time Zone: <u>EST</u> CEN		Sample Depth (m): _____		Field ID: _____	
Time: _____		Total Depth (m): _____			
Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	☐ TKN / TP / Nox / NH3 / TOC ☐ Other _____	☐ Ice ☐ H ₂ SO ₄			☐ < 2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO ₃			☐ < 2
Filtered Nutrients	☐ oP ☐ Field Filtered 0.45 µm Filter	☐ Ice	Place Preservative Sticker(s) Here (If Available)		
Chlorophyll	☐ CHLSUITE-W	☐ Ice			
BOD	☐ BOD-INHB ☐ BOD-UNIN	☐ Ice			
Physical/Aggregate	☐ TSS / Turbidity / Alkalinity / Color ☐ Other _____	☐ Ice			
Microbiology	☐ E Coli ☐ F Coli ☐ Entero ☐ QPCR	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other _____			

Blank - Field

Time Zone: <u>EST</u> CEN		Time: <u>1005</u>		Field ID: <u>19010063</u>		Location: <u>Brandy Br 0121</u>	
☒ Field Blank ☐ Equipment Blank ☐ Field Cleaned Equipment Blank		Equipmet ID _____					
Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check		
Preserved Nutrients	☒ TKN / TP / Nox / NH3 / TOC ☐ Other _____	☒ Ice ☒ H ₂ SO ₄			☒ < 2	Contains 1:1 Sulfuric Acid SA-5259020 EXP: 09/16/16 Warning! See MSDS	
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO ₃			☐ < 2		
Filtered Nutrients	☒ oP ☐ Field Filtered 0.45 µm Filter	☒ Ice					
Chlorophyll	☐ CHLSUITE-W	☐ Ice					
BOD	☐ BOD-INHB ☐ BOD-UNIN	☐ Ice					
Physical/Aggregate	☒ TSS / Turbidity / Alkalinity / Color ☐ Other _____	☒ Ice					
Microbiology	☐ E Coli ☐ F Coli ☐ Entero ☐ QPCR	☐ Ice					
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other _____					

Notes:

Place Label Here
(If Available)

Signature:

A. K. Bacher

Date:

5-4-2016

Field Parameters Entered into LIMS: JP 5/6/16

(Initials/Date)

Field Parameters QC in LIMS: _____

(Initials/Date)

Date Migrated to STORET: _____

(Initials/Date)

Field Sheets Scanned/Saved: _____

(Initials/Date)