



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

February 2016

PAGE ____ OF ____

Data Qualified?
Yes / No

RQ-2016-05-09-14

6/19/2016
WBID 1932M

Blue Lake @ SE
Side



Date: _____
(mm/dd/yyyy)

Latitude: _____
(Decimal Degrees)

ORG ID: 21FLFTM Longitude: _____
(Decimal Degrees)

Receiving Body of Water: _____ Field ID: _____ County: Highlands

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Corey Anderson									
Chase Conley					X	X		X	X
Kaitlin DeBeth					X		X		

Sampling Equipment		
☒ Sample Container	☐ Van Dorn	☐ Pole
☐ Carboy	☒ Syringe	
☐ Dipper	☐ Other	
Equipment ID		

Collection Method	
☐ Wading	☐ Via Boat
☐ From Shore	☒ Canoe/Kayak
☐ Other (note below)	☒ Electric Motor
	☐ Gasoline Motor

Water Level: Dry / Low / Normal / High / Flooded Matrix: Fresh Marine / DI
Meter ID# 7 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 (µmhos/cm)	Temp. (C°)
<u>EST</u>	1020	0.3	4.1	7.9	100	7.8	0.1	3.5	186	27.9
CEN	1025	3.4		7.4	93	7.6	0.1		187	25.6

Biological Samples Collected: (None) HA SCI LVS RPS LVI Other

Parameter Suite	Parameter Methods	Preservation	Acid Lot#	Expiration	pH Check
Preserved Nutrients	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H2SO4	5259020	9/16/16	☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO2			☐ <2
Filtered Nutrients	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter	☒ Ice	Place Preservative Sticker(s) Here (If Available)		
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Kit A/C)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CHC / W-COLOR / W-SO4-IC / W-TDS	☒ Ice			
Physical/Aggregate (Kit B/D)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QLDC	☐ Formalin			
Microbiology	☐ E Coli ☐ F Coli ☐ Enterococcus ☐ QPCR	☐ Ice			
Periphyton	☐ ALGAE-ID	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other			

Notes: _____

Signature: _____ Date: 5/19/16

Place Label Here
(If Available)

Field Parameters Entered into LIMS: _____ (Initials/Date) Field Parameters QC in LIMS: _____ (Initials/Date)
Date Migrated to STORET: _____ (Initials/Date) Field Sheets Scanned/Saved: _____ (Initials/Date)