



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2016

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Check box if data
qualified

STORET Station Name: _____

STORET Station ID: _____

RQ - _____

Place Site Label Here

Date: _____

Latitude: _____

(De)

RQ-2016-01-25-69

2/1/2016

WBID 1938I

Lake Lachard @
Center

G4SD020116-7

Field ID

* STORET
26010647

Receiving Body of Water: _____

County: _____

Sampling Team Members				WQ Measurements	Documentation	Sample Collection	Preservation	Preservation Check
Ben Lagwater								
Chris Link								

Sampling Equipment	
Sample Container	Van Dorn
Dipper	Other _____
Equipment ID: _____	

Collection Method	
Wading	Via Boat
From Shore	Canoe/Kayak
Other	Electric Motor
Gasoline Motor	

Water Level:		Dry / Low / Normal / High / Flooded		Matrix:		Fresh / Marine / DI	
Meter ID#		10		Photos:		Yes No	
Tide Falling:		Yes / No					

Time Zone	Time	Sample Depth (m)	Total Depth (m)	Temp (°C)	DO (mg/L)	DO (%SAT)	COND (µmhos/cm)	Salinity (ppt)	pH	Secchi Disk (m)
EST	Top	1150	0.3	19.4	12	132	153	—	8.3	1.9
	Bottom		0.7	17.9	8.2	87	155	—	7.6	
CST	Blank or Duplicate	Duplicate Field Blank Equipment Blank Equipment ID# _____								

Biological Samples Collected:		None		HA	SCI	LVS	RPS	LVI	Other
Parameter Suite		Parameter Methods		Preservation					
Preserved Nutrients		TKN ☐ TP ☐ NOx ☐ NH3 ☐ TOC ☐ Other		H2SO4		pH of all acidified samples verified to be <2 Yes No			
Metals		W-ICPMS ☐ W-ICP ☐		HNO3					
Filtered Nutrients		OP ☒ Field Filtered 0.45 µm Filter				Sulfuric Acid Lot# Expiration			
Macroinvertebrates		MI-FW-QLDC ☐		Formalin					
Microbiology		E Coli ☐ F Coli ☐ Entero ☐ QPCR ☐				Nitric Acid Lot# Expiration			
Periphyton		ALGAE-ID							
Pesticides		W-PSNP-TQ ☐ W-PC-AA-SF ☐ W-AHERB-AA ☐ W-UHERB-AA ☐		Other					
Other		All Other Samples Unless Otherwise Noted							
All Samples Placed in Wet Ice ≤ 6° C?		Yes No							

Notes:		Place Blank or Duplicate Label Here	
green water			

Sampler Signatures:	
Ben Lagwater	

Field Parameters Entered into LIMS: _____ Date: _____ Field Parameters QC in LIMS: _____ Date: _____