



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
STRATEGIC MONITORING PROGRAM FIELD SHEET

PAGE 1 OF 1

Data Qualified?  
Yes ☒ No ☐

June 2016

RQ-2016-06-13-4

6/27/2016  
3235P

G3SD06272016-3

Field ID

STORET

G3SD0061

ST Olga Creek @ SR

Co

80

WBID:

Latitude:

(Decimal Degrees)

ORG ID: 21FLFTM

Longitude:

(Decimal Degrees)

Receiving Body of Water: Caloosahatchee R. Field ID:

| Sampling Team Members                                              |             |                                                                                                                                |                 | WQ Measurements | Sample Collection | Documentation                                                                     | Preservation   | Preservation Check                                   | Sampling Equipment                                     |                                             |                                          |  |
|--------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------|-------------------|-----------------------------------------------------------------------------------|----------------|------------------------------------------------------|--------------------------------------------------------|---------------------------------------------|------------------------------------------|--|
| Corey Anderson<br>Dannay Berger                                    |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      | <input checked="" type="checkbox"/> Sample Container   | <input type="checkbox"/> Van Dorn           | <input checked="" type="checkbox"/> Pole |  |
|                                                                    |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      | <input type="checkbox"/> Carboy                        | <input checked="" 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 type="checkbox"/> From Shore                    | <input type="checkbox"/> Canoe/Kayak        |                                          |  |
|                                                                    |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      | <input checked="" type="checkbox"/> Other (note below) | <input type="checkbox"/> Electric Motor     |                                          |  |
|                                                                    |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      | Bridge/Culvert                                         |                                             |                                          |  |
|                                                                    |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      | <input type="checkbox"/> Gasoline Motor                |                                             |                                          |  |
| Water Level: Dry / Low / <u>Normal</u> / High / Flooded            |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      |                                                        | Matrix: <u>Fresh</u> Marine / DI            |                                          |  |
| Meter ID# <u>A</u> Photos: Yes / <u>No</u>                         |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      |                                                        | Tide Falling: Yes / No / <u>NA</u>          |                                          |  |
| 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>                                                         | <u>1000</u> | <u>0.3</u>                                                                                                                     | <u>0.4</u>      | <u>2.5</u>      | <u>30</u>         | <u>7.1</u>                                                                        | <u>-</u>       | <u>0.4</u> <sup>S</sup>                              | <u>1081</u>                                            | <u>25.3</u>                                 |                                          |  |
| Biological Samples Collected: <u>None</u> HA SCI LVS RPS LVI Other |             |                                                                                                                                |                 |                 |                   |                                                                                   |                |                                                      |                                                        |                                             |                                          |  |
| Parameter Suite                                                    |             | Parameter Methods                                                                                                              |                 |                 |                   | Preservation                                                                      |                | Acid Lot#                                            | Expiration                                             | pH Check                                    |                                          |  |
| Preserved Nutrients                                                |             | <input checked="" type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                |                 |                 |                   | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 |                | <u>5259020</u>                                       | <u>9/16/16</u>                                         | <input checked="" 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"/> W-PO4-F <input checked="" type="checkbox"/> Field Filtered 0.45 µm Filter                  |                 |                 |                   | <input checked="" type="checkbox"/> Ice                                           |                | Place Preservative Sticker(s) Here<br>(If Available) |                                                        |                                             |                                          |  |
| Chlorophyll                                                        |             | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                 |                 |                 |                   | <input checked="" type="checkbox"/> Ice                                           |                |                                                      |                                                        |                                             |                                          |  |
| BOD                                                                |             | <input type="checkbox"/> BOD-UNIN                                                                                              |                 |                 |                   | <input type="checkbox"/> Ice                                                      |                |                                                      |                                                        |                                             |                                          |  |
| Physical/Aggregate (Fresh)                                         |             | <input checked="" type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS                |                 |                 |                   | <input checked="" type="checkbox"/> Ice                                           |                |                                                      |                                                        |                                             |                                          |  |
| Physical/Aggregate (Marine)                                        |             | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY                                                                  |                 |                 |                   | <input 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"/> Enteroc <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"/> Ice                                                      |                |                                                      |                                                        |                                             |                                          |  |
|                                                                    |             | <input type="checkbox"/> W-PC-AA-SF <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH                       |                 |                 |                   | <input type="checkbox"/> Other                                                    |                |                                                      |                                                        |                                             |                                          |  |

Notes:

Place Label Here  
(If Available)

Signature:

Date:

6-27-16

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)