



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

February 2016

PAGE ____ OF ____

Data Qualified?
Yes / No

STORET Station Name: Sweetwater Creek Hwy 4

Date: 9/28/16
(mm/dd/yyyy)

STORET Station ID: G4NW0293

Latitude: 30.855876

(Decimal Degrees)

WBID: 21

RQ - 2016-10-03-52

ORG ID: 21FLPNS

Longitude: -86.851560

(Decimal Degrees)

Receiving Body of Water: Blackwater R

Field ID: G4NW0293

County: Santa Rosa

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
RA									

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# 113529				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°)
EST	1232	0.3	0.5	7.9	93	5.4	0.0	VOB	17	23.0
CEN										

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	SAB209120	7/27/17	☒ <2
Metals	☐ W-ICPMS ☐ W-ICP		☐ Ice ☐ HNO3			☐ <2
Filtered Nutrients	☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter		☒ Ice			
Chlorophyll	☒ CHLSUITE-W		☒ Ice			
BOD	☐ BOD-UNIN		☐ Ice			
Physical/Aggregate (Kit A/C)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CL-IC / 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 ☐ Entero ☐ QPCR		☐ Ice			
Periphyton	☐ ALGAE JD		☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH		☐ Ice ☐ Other			

Place Preservative Sticker(s) Here
(If Available)

Notes:		Place Label Here (If Available)	
Signature: [Signature]		Date: 9/28/16	

Field Parameters Entered into LIMS: _____ (Initials/Date) Field Parameters QC in LIMS: _____ (Initials/Date)

Date Migrated to STORET: _____ Field Sheets Scanned/Saved: 10/5