



F ENVIRONMENTAL PROTECTION PROGRAM FIELD SHEET

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Field ID:



G1NE0001 08282017

March 2017

Data Qualified?

Yes / No

Sweetwater Creek
above wetland

STORET:



G1NE0001

Date:

8/29/17

mm/dd/yyyy

NBID: 2711

Latitude:

29.6209

(Decimal Degrees)

County: Alachua RQ - 2017 - 08-28-09

ORG ID: 21FLA

Longitude:

83.3239

(Decimal Degrees)

Receiving Body of Water:

Field ID: See Label

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Nicola Freeland									
Jeremy Parrish									

Sampling Equipment				
☐ Sample Container	☐ Van Dorn	☒ Pole		
☐ Carboy	☐ Syringe			
☐ Dipper	☐ Other			
Equipment ID OrthoKit # N/A				

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

Water Level:					Matrix:				
Dry / Pooled / Low / Normal / High / Flooded					Fresh / Marine / DI				

Meter ID#		Photos:		Tide Falling:	
YSI #4		Yes / No		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	1045	0.20	0.30	7.70	95.8	7.80	0.29	0.35	608	26.43
CEN								VOB		

Biological Samples Collected: ☒ None HA SCI RPS Algae ID LVS LVI Other

SBIO ID Numbers: SBIO-ID: RPS-ID: Macrophyte-ID: LIMS#:

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			☐ <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			
Physical/Aggregate (Fresh)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☐ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QLDC	☐ Formalin			
Periphyton	☐ ALGAE-ID	☐ Ice			
Microbiology	☒ E Coli ☐ F Coli ☐ Enterococci ☒ qPCR	☒ Ice			
Tracers	☐ W-SUC-AA-R ☒ W-UHERB-AA ☒ W-AHERB-AA	☒ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-PCL-SQ-R ☐ W-UHERB-AA ☐ W-GLYPH ☐ W-SUC-AA-R	☐ Ice ☐ Other			

Notes:

1050 DUP on tracers/
qPCRPlace Label Here
(If Available)

Signature:

MILLER

Date:

8/29/17

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)



**Advanced
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Client Name: FDEP			Project Name: RQ-2017-08-28-09			BOTTLE SIZE & TYPE														LABORATORY I.D. NUMBER									
Address: 8800 Baymeadow Way W Jaxs, FL 32256			P.O. Number or Project Number: RQ-2017-08-28-09																										
Phone: 904-256-1541			FDEP Facility No:																										
FAX:			Project Address:																										
Contact: Jovanny Parrish			Special Instructions:			ANALYSIS REQUIRED		E. coli																					
Sampled By: J. Parrish / N. Fredenck																													
Turn Around Time: ☒ STANDARD ☐ RUSH																													
Page: <u>1</u> of <u>1</u>			☐ ADaPT ☐ EQUIS ☐ Other			PRESERVATION																							
SAMPLE ID	SAMPLE DESCRIPTION		Grab Comp	SAMPLING				MATRIX	NO. COUNT																				
				DATE	TIME																								
GINE0096	Hatchett		G	8/29/17	0930	SW	1			X																			
GINE0098	Lake Forest		↓	↓	0950	↓	1			X																			
GINE0207	Machine Sink		↓	↓	1045	↓	1			X	NO SAMPLES																		
GINE0001	sweetwater		↓	↓	1045	↓	1			X																			
Matrix Code: WW = wastewater SW = surface water GW = ground water DW = drinking water O = oil A = air SO = soil SL = sludge															Preservation Code: I = ice H=(HCl) S = (H2SO4) N = (HNO3) T = (Sodium Thiosulfate)														
Received on Ice ☒ Yes ☐ No ☐ Temp taken from sample ☐ Temp from blank															☒ Where required, pH checked														
DCN: AD-051 Form last revised 04/30/2015															Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: <u>IT1</u> LT-2 T: 10A A: 3A M: 3A S: 1V														
Relinquished by:			Date		Time		Received by:			Date		Time		FOR DRINKING WATER USE: PWS ID: _____ Contact Person: _____ Phone: _____ Supplier of Water: _____ Site-Address: _____															
1	<u>miu</u>		<u>8/29/17</u>		<u>1115</u>		<u>[Signature]</u>			<u>8/29/17</u>		<u>1115</u>																	
2																													
3																													
4																													