



Field ID:



G1NE0236 03282017

**ENVIRONMENTAL PROTECTION  
IG PROGRAM FIELD SHEET**

January 2017

PAGE 1 OF 1

Data Qualified?

Yes / No

Falling Creek @  
US 441

STORET

21010064

ID: 3477

Latitude:

Date:

3/28/2017  
(mm/dd/yyyy)

2017

County: Columbia RQ - 2017-03-27-01

ORG ID: 21 FLA

Longitude:

(Decimal Degrees)

(Decimal Degrees)

Receiving Body of Water: Suwannee

Field ID:

| Sampling Team Members                                     |      |                  |                 |           | WQ Measurements | Sample Collection | Documentation  | Preservation    | Preservation Check | Sampling Equipment                             |                                         |                                          |  |  |
|-----------------------------------------------------------|------|------------------|-----------------|-----------|-----------------|-------------------|----------------|-----------------|--------------------|------------------------------------------------|-----------------------------------------|------------------------------------------|--|--|
| Pat O'Conner<br>Nicole Fredrick                           |      |                  |                 |           | X               | X                 | X              | X               | X                  | <input type="checkbox"/> Sample Container      | <input type="checkbox"/> Van Dorn       | <input checked="" type="checkbox"/> Pole |  |  |
|                                                           |      |                  |                 |           |                 |                   |                |                 |                    | <input type="checkbox"/> Carboy                | <input type="checkbox"/> Syringe        |                                          |  |  |
|                                                           |      |                  |                 |           |                 |                   |                |                 |                    | <input type="checkbox"/> Dipper                | <input type="checkbox"/> Other          |                                          |  |  |
| Equipment ID                                              |      |                  |                 |           | Ortho Kit # 2   |                   |                |                 |                    | Collection Method                              |                                         |                                          |  |  |
|                                                           |      |                  |                 |           | X               | X                 | X              | X               | X                  | <input type="checkbox"/> Wading                | <input type="checkbox"/> Via Boat       |                                          |  |  |
|                                                           |      |                  |                 |           |                 |                   |                |                 |                    | <input checked="" type="checkbox"/> From Shore | <input type="checkbox"/> Canoe/Kayak    |                                          |  |  |
|                                                           |      |                  |                 |           |                 |                   |                |                 |                    | <input type="checkbox"/> Other (note below)    | <input type="checkbox"/> Electric Motor |                                          |  |  |
|                                                           |      |                  |                 |           |                 |                   |                |                 |                    | <input type="checkbox"/> Gasoline Motor        |                                         |                                          |  |  |
| Water Level: Dry / Pooled / Low / Normal / High / Flooded |      |                  |                 |           |                 |                   |                |                 |                    | Matrix: Fresh / Marine / DI                    |                                         |                                          |  |  |
| Meter ID# Quanta                                          |      |                  |                 |           |                 |                   |                |                 |                    | 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                                                       | 1000 | 0.10             | 0.25            | 6.14      | 64.5            | 7.98              | 0.05           | 0.25            | 89                 | 18.38                                          |                                         |                                          |  |  |
| CEN                                                       |      |                  |                 |           |                 |                   |                | VOD             |                    |                                                |                                         |                                          |  |  |

|                               |          |         |                |        |          |     |     |       |
|-------------------------------|----------|---------|----------------|--------|----------|-----|-----|-------|
| 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         | <input checked="" type="checkbox"/> W-NH3 / <input checked="" type="checkbox"/> W-NO2NO3 / <input checked="" type="checkbox"/> W-TKN / <input checked="" type="checkbox"/> W-TOC / <input checked="" type="checkbox"/> W-S-A-TP                                                                                                                                             | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 |           |            | <input type="checkbox"/> <2 |
| Metals                      | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-ICP                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Ice <input type="checkbox"/> HNO3                        |           |            | <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                                           |           |            |                             |
| Chlorophyll                 | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| Physical/Aggregate (Fresh)  | <input checked="" type="checkbox"/> Alkalinity / <input checked="" type="checkbox"/> W-F / <input checked="" type="checkbox"/> W-TSS / <input checked="" type="checkbox"/> TURBIDITY / <input checked="" type="checkbox"/> W-CI-IC / <input checked="" type="checkbox"/> W-COLOR / <input checked="" type="checkbox"/> W-SO4-IC / <input checked="" type="checkbox"/> W-TDS | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| Physical/Aggregate (Marine) | <input type="checkbox"/> Alkalinity / <input type="checkbox"/> W-F / <input type="checkbox"/> W-TSS / <input type="checkbox"/> TURBIDITY                                                                                                                                                                                                                                    | <input type="checkbox"/> Ice                                                      |           |            |                             |
| Macroinvertebrates          | <input type="checkbox"/> MI-FW-QLDC                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Formalin                                                 |           |            |                             |
| Periphyton                  | <input type="checkbox"/> ALGAE-ID                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Ice                                                      |           |            |                             |
| Microbiology                | <input checked="" type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Entero <input type="checkbox"/> PCR-FILTER                                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| Tracers                     | <input checked="" type="checkbox"/> W-LCMS-DU <input checked="" type="checkbox"/> W-UHERB-AA                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> Ice                                           |           |            |                             |
| Pesticides                  | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-PYR-AA-R<br><input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH                                                                                                                                                      | <input type="checkbox"/> Ice<br><input type="checkbox"/> Other                    |           |            |                             |

|                            |  |                                    |  |
|----------------------------|--|------------------------------------|--|
| Notes:                     |  | Place Label Here<br>(If Available) |  |
| Signature: Nicole Fredrick |  | Date: 3/28/2017                    |  |

|                                                                |                                                 |
|----------------------------------------------------------------|-------------------------------------------------|
| Field Parameters Entered into LIMS: 3/31/17<br>(Initials/Date) | Field Parameters QC in LIMS:<br>(Initials/Date) |
| Date Migrated to STORET:<br>(Initials/Date)                    | Field Sheets Scanned/Saved:<br>(Initials/Date)  |

Check Box That Applies To Your Location

☐ Flowers Chemical Laboratories, Inc.

481 Newburyport Ave.  
Altamonte Springs, FL 32701  
Bus: 407-339-5984  
Fax: 407-260-6110

☐ Flowers Chemical Labs-South

West Park Industrial Plaza  
571 N.W. Mercantile Pl., Ste. 111  
Port St. Lucie, FL 34986  
Bus: 772-343-8006  
Fax: 772-343-8089

☒ Flowers Chemical Labs-North

812 S.W. Harvey Greene Dr.  
Madison, FL 32340  
Bus: 850-973-6878  
Fax: 850-973-6878

☐ Flowers Chemical Labs-Keys

3980 Overseas Highway, Ste. 103  
Key West, FL 34290  
Bus: 305-741-8383  
Fax: 305-741-8385

**COPY**

**EMAILED**

**FLOWERS**  
**CHEMICAL**  
**LABORATORIES**  
INCORPORATED



DOWNLOAD REPORTS, INVOICES AND CHAINS OF CUSTODY [www.flowerslabs.com](http://www.flowerslabs.com)

|                                                               |                                                                      |                                                    |
|---------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------|
| Client<br><b>FDEP</b>                                         | Project Name<br><b>SWP-SUNNORTH 2</b>                                | Lab #<br><b>BQ-2017-03-27-01</b>                   |
| Address<br><b>8800 Baymeadows Way W</b>                       | Client Contact                                                       | FAX                                                |
| Phone<br><b>904-256-1541</b>                                  | FCL Project Manager                                                  | E-MAIL<br><b>DEP-overflowmicro@dep.state.fl.us</b> |
| Sampled By (PRINT):<br><b>Nicole Frederick / Pat O'Connor</b> | Requested Due Date<br>10 Day Standard <b>OR</b> <input type="text"/> | Rush Charges May Apply                             |
| Sampler Signature                                             | Pick-Up Fee \$ <input type="text"/>                                  | Vehicle Surcharge \$ <input type="text"/>          |
| Date Sampled                                                  | Sampling Fee \$ <input type="text"/>                                 |                                                    |

GW - ground water DW - drinking water WW - wastewater  
SW - surface water S - soil/solid SL - sludge HW - waste

| ITEM NO. | SAMPLE ID   | DATE    | TIME | MATRIX | (LAB USE ONLY) LAB NO. | PRESERVATIVES                                                                                          | ANALYSES REQUEST | COMMENTS      | Total # Containers |
|----------|-------------|---------|------|--------|------------------------|--------------------------------------------------------------------------------------------------------|------------------|---------------|--------------------|
|          |             |         |      |        |                        | NONE H <sub>2</sub> SO <sub>4</sub> HNO <sub>3</sub> HCl Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub> |                  |               |                    |
| 1        | 21010064    | 3/28/17 | 1000 | SW     |                        | X                                                                                                      | X                | Falling Creek |                    |
| 2        | 21010057    |         | 1020 |        |                        | X                                                                                                      | X                | Deep Creek    |                    |
| 3        | 21010033    |         | 1040 |        |                        | X                                                                                                      | X                | Little Creek  |                    |
| 4        | 21020063    |         | 1120 |        |                        | X                                                                                                      | X                | Hunter Creek  |                    |
| 5        | 21020004FLA |         | 1215 |        |                        | X                                                                                                      | X                | Swift Creek   |                    |
| 6        | 21010054    |         | 1240 |        |                        | X                                                                                                      | X                | Camp Branch   |                    |
| 7        |             |         |      |        |                        |                                                                                                        |                  |               |                    |
| 8        |             |         |      |        |                        |                                                                                                        |                  |               |                    |
| 9        |             |         |      |        |                        |                                                                                                        |                  |               |                    |
| 10       |             |         |      |        |                        |                                                                                                        |                  |               |                    |

|                                                                 |                        |                     |                                                  |                        |                     |                               |      |      |                           |      |      |
|-----------------------------------------------------------------|------------------------|---------------------|--------------------------------------------------|------------------------|---------------------|-------------------------------|------|------|---------------------------|------|------|
| Relinquished By / Affiliation<br><b>Nicole Frederick / FDEP</b> | Date<br><b>3/28/17</b> | Time<br><b>1330</b> | Accepted By / Affiliation<br><b>Pat O'Connor</b> | Date<br><b>3/28/17</b> | Time<br><b>1330</b> | Relinquished By / Affiliation | Date | Time | Accepted By / Affiliation | Date | Time |
|-----------------------------------------------------------------|------------------------|---------------------|--------------------------------------------------|------------------------|---------------------|-------------------------------|------|------|---------------------------|------|------|

**FINANCE CHARGES APPLIED TO PAST DUE INVOICES**