



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

PAGE 1 OF 1

Data Qualified?

Yes / No

STORET Station Name: _____

RQ-2017-02-13-22

3/1/2017

WBID 1932

G4SD030117-4

Field ID

Date: _____

(mm/dd/yyyy)

STORET Station ID: _____

Grassy Creek site 3
on 621 East

26010712FTM

STORET

County: Highlands RQ - _____

(Decimal Degrees)

Receiving Body of Water: Lake Istokopos

Field ID: _____

(Decimal Degrees)

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

Sampling Team Members

Ben Aswater

Chase Conley

WQ Measurements
Sample Collection
Documentation
Preservation
Preservation Check

Water Level: Dry / Pooled / Low / Normal / High / Flooded

Matrix: Fresh / Marine / DI

Meter ID# 5

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	1220	0.3	0.3	5.8	69	6.9	—	0.3	193	24.6
CEN										

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	6302030	10/28/17	☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO2			☐ <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-CH-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 ☐ Enterococcus ☐ PCR-FILTER	☐ Ice			
Tracers	☐ W-LCMS-DU (1/4 vial fill) ☐ W-UHERB-AA	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R ☐ W-LCMS-DU (1/4 vial fill) ☐ W-PCL-SQ-R ☐ W-UHERB-AA ☐ W-GLYPH	☐ Ice ☐ Other			

Place Label Here
(If Available)

Signature: _____

Date: _____

3-1-2017

Field Parameters Entered into LIMS: _____

Field Parameters QC in LIMS: _____

Date Migrated to STORET: _____

(Initials/Date)

(Initials/Date)

Field Sheets Scanned/Saved: _____

(Initials/Date)