



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

February 2016

PAGE 1 OF 1

Data Qualified?
Yes / No

STORET Station Name: _____
STORET Station ID: _____
WBID: _____ RQ - _____
Receiving Body of Water: Atlantic Ocean

RQ-2017-01-09-05
1/10/2017
WBID 6011C
Grassy Key Bayside
off Morton Street
DO



Date: _____
(mm/dd/yyyy)

(Decimal Degrees)

(Decimal Degrees)

County: Monroe

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Chase Conley					☒	☒	☒	☒	☒
Kaitlin De'Aeth					☐	☐	☐	☐	☐
					☐	☐	☐	☐	☐
					☐	☐	☐	☐	☐

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# A 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 (umhos/cm)	Temp. (C°)
EST	1335	0.2	0.4	9.9	135	7.8	36.3	0.45	54560	19.5

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			☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☒ Ice ☒ HNO3			☒ <2
Filtered Nutrients	☒ W-P04-F ☐ Field Filtered 0.45 um Filter	☒ Ice			
Chlorophyll	☒ CHL SUITE-W	☒ Ice			
BOD	☒ BOD-UNIT	☒ Ice			
Physical/Aggregate (Kit A/C)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CH-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 ☐ Enterococcus ☐ QPCR	☐ Ice			
Periphyton	☐ ALGAE-ID	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-AHERB-AA ☐ W-PYR-AA-R	☐ Ice			
	☐ W-PC-AA-SF ☐ W-UHERB-AA ☐ W-GLYPH	☐ Other _____			

Notes: _____

Place Label Here
(If Available)

Signature: _____ Date: 1/10/17

Field Parameters Entered into LIMS: _____ (Initials/Date)
Date Migrated to STORET: _____ (Initials/Date)
Field Parameters QC in LIMS: _____ (Initials/Date)
Field Sheets Scanned/Saved: _____ (Initials/Date)