

Central Laboratory Submittal Form

Customer: NW-DIST

Requester: Michael King

Field Report Prepared By: N. Mulkey

Project ID: SMP

Collected By: Nathan Mulkey / Mike King

Sampling Agency: NWROC

Location	Location: West Sandy Creek above Kidd Rd	G3NW0053 Field ID STORET G3NW0053	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8/9/17</u> Time <u>0930</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Field ID	RQ-2017-08-07-278 WBID (269)		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>7.7</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #	Date: Time: <u>0930</u> CDT		Temp (C) <u>24.4</u>	pH <u>6.0</u>	Sample Depth <u>0.2</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>37</u>
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments		
Location	Location: Huckleberry Creek	G3NW0135 Field ID STORET G3NW0135	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8/9/17</u> Time <u>0945</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Bottle Group(s)
Field ID	RQ-2017-08-07-28 (WBID 246)		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen <u>7.0</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #	Date: Time: <u>0945</u> CDT		Temp (C) <u>24.8</u>	pH <u>5.7</u>	Sample Depth <u>0.2</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>34</u>
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments		
Location	Location: Huckleberry Creek	G3NW0135DUPLICATE Field ID STORET G3NW0135	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8/9/17</u> Time <u>0955</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Bottle Group(s)
Field ID	RQ-2017-08-07-28 (WBID 246)		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #	Date: Time: <u>0955</u> CT		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments		
Location	Location: Huckleberry Creek	FIELD BLANK Field ID	☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>8/9/17</u> Time <u>1000</u>	Eastern <u>Central</u>	Composite end Date _____ Time _____	Bottle Group(s)
Field ID	RQ-2017-08-07-28		Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #	Date: Time: <u>1000</u> CDT		Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments		

Relinquished By: <u>[Signature]</u>	Date/Time: <u>8/9/17</u>	Shipping Method: <u>FIA Ex</u>	Number of Coolers Shipped: <u>2</u>	Received By: <u>[Signature]</u>	Date/Time: <u>08-10-17/1000</u>
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Group: A	Bottle Type:	P-1L	# of Bottles: 7	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 7	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	CHLSUITE-W						
Group: A	Bottle Type:	P-500ML	# of Bottles: 7	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	4
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 7	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	4
	W-PO4-F						

Shoal/Gum WBID 246 269 160 167 167A Blank/DUP

Central Laboratory Submittal Form

last revised Apr 7, 2016

Customer: NW-DIST

Requester: Michael King

Field Report Prepared By: N. M. King

Project ID: SMP

Collected By: Nathan Miller / Mike KingSampling Agency: NRDC

Location	Location: Gum Creek above Hwy 83		G4NW0322	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 8/9/17 Time 1020	Eastern Central	Composite end Date Time	Bottle Group(s) (See pg 2)
Field ID	RQ-2017-08-07-278 WBID (167)		Field ID ↑ STORET ↓ G4NW0322	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 5.9	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #	Date: Time: 1020 CDT			Temp (C) 24.7	pH 4.9	Sample Depth 0.2	☐ ft ☒ m	Sp. Conductance (umho/cm) 33
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments			
Location	Location: Gum Creek		G4NW0381	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 8/9/17 Time 1115	Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID	RQ-2017-08-07-278 WBID (167A)		Field ID ↑ STORET ↓ G4NW0381	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 7.7	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #	Date: Time: 1115 CDT			Temp (C) 23.9	pH 5.1	Sample Depth 0.2	☐ ft ☒ m	Sp. Conductance (umho/cm) 28
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments			
Location	Location: Shoal River		G4NW0375	☐ Comp ☒ Grab	Collection (comp begin or grab) Date 8/9/17 Time 1145	Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID	RQ-2017-08-07-278 WBID (160)		Field ID ↑ STORET ↓ G4NW0375	Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen 7.6	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #	Date: Time: 1145 CDT			Temp (C) 24.4	pH 5.7	Sample Depth 0.2	☐ ft ☒ m	Sp. Conductance (umho/cm) 33
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments			
Location				☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time	Eastern Central	Composite end Date Time	Bottle Group(s)
Field ID				Matrix (type, e.g., Salt, Fresh, etc)		Diss. Oxygen	☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
STORET #				Temp (C)	pH	Sample Depth	☐ ft ☐ m	Sp. Conductance (umho/cm)
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt)	Comments			

Relinquished By: Nathan Miller

Date/Time: 8/9/17

Shipping Method: Fed Ex

Number of Coolers Shipped: 2

Received By: NRDC

Date/Time: 8-10-17

Group: A	Bottle Type:	P-1L	# of Bottles: 7	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>3</u>
	ALKALINITY						
	TURBIDITY						
	W-CL-IC						
	W-COLOR						
	W-F						
	W-SO4-IC						
	W-TDS						
	W-TSS						

Group: A	Bottle Type:	BP-1L	# of Bottles: 7	Preservative:	ICE	Enter Number of Bottles Sent to Lab	<u>3</u>
	CHLSUITE-W						

Group: A	Bottle Type:	P-500ML	# of Bottles: 7	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	<u>3</u>
	W-NH3						
	W-NO2NO3						
	W-S-A-TP						
	W-TKN						
	W-TOC						

Group: A	Bottle Type:	P-125ML	# of Bottles: 7	Preservative:	ICE-FLTR	Enter Number of Bottles Sent to Lab	<u>3</u>
	W-PO4-F						

Date of Request: 17-JUL-2017
 Created By: KING_M On: 17-JUL-2017
 Modified By: SWANSON_C On: 20-JUL-2017
 Customer: NW-DIST
 Project: SMP
 Division: Division of Environmental Assessment and Restoration
 District: Northwest District
 Sampling Event: Shoal/Gum WBID 246 269 160 167 167A Blank/DUP

Send Coolers To:

Phone: SC-695-0605
 160 W Government St
 Suite 208A
 Pensacola, FL 32502-5794
 Attn: Michael King

Program Module Number: 1306
 Priority: 3
 Event Status: R
 Criminal Investigation: NO
 Chemistry Request Reviewed By: WATTS_J On: 20-JUL-2017
 Biology Request Reviewed By: SWANSON_C On: 20-JUL-2017
 Sampling Kit Required: YES Ship on: 25-JUL-2017
 Sampling Kit Shipped: YES On: 25-JUL-2017
 Sampling Kit Packed By: GREENWOO_J
 Preservatives Needed: NO
 Date to Receive Samples: 07-AUG-2017
 Received By: SHAIK_A On: 10-AUG-2017

Send Final Report To:

160 W Government St
 Suite 208A
 Pensacola, FL 32502-5794
 Attn: Michael King

Report Type: Final Only
 FTP Data: NO
 QC Report: YES
 Date Log: NO
 Authorization Log: NO

Comments:**Bottle Group A (Water) With 7 Samples:**

Bottle Type: P-1L	Number of Bottles: 7	Preserved With: ICE
ALKALINITY	Template: DEFAULT	(SM 2320 B-97) Alkalinity in aqueous matrices as mg CaCO ₃ /L
TURBIDITY	Template: DEFAULT	(EPA 180.1 Rev. 2.0) Turbidity in aqueous matrices
W-CL-IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Chloride in aqueous matrices
W-COLOR	Template: DEFAULT	(SM 2120 B) True Color measured at 450 nm
Color (true)		
W-F	Template: DEFAULT	(SM 4500 F-C-97) Fluoride in aqueous matrices, without distillation (not valid for NPDES monitoring)
W-SO ₄ -IC	Template: DEFAULT	(EPA 300.0 Rev. 2.1) Sulfate in aqueous matrices
W-TDS	Template: DEFAULT	(SM 2540 C-97) Total Dissolved Solids in aqueous matrices
W-TSS	Template: DEFAULT	(SM 2540 D-97) Total Suspended Solids in aqueous matrices
Bottle Type: BP-1L	Number of Bottles: 7	Preserved With: ICE
CHLSUITE-W	Template: DEFAULT	(SM 10200 H (mod.)) Phytoplankton chlorophyll-a corrected, uncorrected, and phaeophytin by spectrophotometry
Bottle Type: P-500ML	Number of Bottles: 7	Preserved With: ICE And H ₂ SO ₄
W-NH ₃	Template: DEFAULT	(EPA 350.1 Rev. 2.0) Ammonia in aqueous matrices as mg N/L
W-NO ₂ NO ₃	Template: DEFAULT	(EPA 353.2 Rev. 2.0) Nitrite/Nitrate in aqueous matrices as mg N/L
W-S-A-TP	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Total Phosphorus in aqueous matrices as mg P/L
W-TKN	Template: DEFAULT	(EPA 351.2 Rev. 2.0) Total Kjeldahl Nitrogen in aqueous matrices
W-TOC	Template: DEFAULT	(SM 5310 B-00) Nonpurgeable Organic Carbon in aqueous matrices
Bottle Type: P-125ML	Number of Bottles: 7	Preserved With: ICE-FLTR
W-PO ₄ -F	Template: DEFAULT	(EPA 365.1 Rev. 2.0) Ortho-phosphate, dissolved, in filtered, aqueous matrices as mg P/L

Log-in Checklist

RQ- 2017-08-07-28

Shipping Method: Fed Exp

Date/Time of Receipt: 08-10-17/10:00

Cooler ID	Cooler Temperature*	No. Sample Containers in Cooler	Evidence Tape				Tracking # (fill out only if waybill copy is damaged)
			Present?		*Intact?		
			Yes	No	Yes	No	
Red	2.2C	16		☒			
Red	3.1C	12		☒			

*If the temperature of a cooler is above 6.0 °C (or above 10.0 °C for W-1-4-DIOX), or if Evidence Seal is damaged, identify the containers in the affected cooler(s) on back of this form.

****Note:** If "No" is checked in any of the fields below, fill out the back of this form with additional details (Field ID, Test IDs, etc.) and generate an NCR.

****Chain of Custody/ Field Sheet(s) Included?** Yes ☒ No ☐

CONTAINER CHECK

****Evidence Tape on Bottles?** Yes ☐ No ☒ If yes, is it intact? Yes ☐ No ☐

****Caps on tight?** Yes ☒ No ☐ ****Containers intact?** Yes ☒ No ☐

****Sufficient Sample Volume:** Yes ☒ No ☐

CHLORINE CHECK (Blue dot on container)

Check the Box marked "Yes" or "No" for the Presence of Chlorine. If Cl detected, an NCR is required.					
Analysis	Yes	No	Analysis	Yes	No
W-1,4 DIOX			W-PC-AA-SF		
W-AHERB-AA (-AHB-AA-R)			W-PCL-SQ (-R)		
W-BNA (-625, -R)			W-PDQUAT		
W-CARB-AA (-CAB-AA-R)			W-PESTNP-R		
W-ENDO-AA			W-PSCL-TQ		
W-GLYPH			W-PSNP-TQ		
W-NP-AA-SF			W-PST-CL-R		
W-PAH (-R)			W-TR-TQ		
W-PCB-R			W-CT-CL-R		

PRESERVATION CHECK (EXCLUDING SAMPLES SENT TO OVERFLOW LABS, "OV-")

****Acid Preserved Samples:** pH ≤ 2.0? Yes ☒ No ☐ NA ☐ Init: ABO

****W-1-4-DIOX (Green dot on container) preserved to pH < 4.0?** Yes ☐ No ☐ NA ☒ Init: ABO

Coolers Unpacked/Checked by: ABO Date: 8-10-17 NCRs (Y/N)? N

Event ID: Shoal/Gum WBID 246 269 160 167 16
NW-DIST-2017-08-10-02 (SMP) NCR #

Date Received: 10-AUG-2017 10:00

Log-in Checklist

Samples with Incorrect pH Preservation or presence of Chlorine

Field ID	Bottle Test ID(s)	pH / Cl	Action Taken

Samples in Coolers with Incorrect Preservation or Damaged Evidence Tape

Cooler ID	Field ID	Bottle Test ID(s)

Bottles Not Intact

Field ID	Bottle Test ID(s)	Loose Cap	Damaged Cap		Damaged Container		Evidence Tape Not Intact
			CK	BR	CK	BR	

Samples with Insufficient Volume for Analyses

Field ID	Bottle Test ID(s)	Action Taken

ENCORE SAMPLES

S-VOC-MS samples in Encores must be frozen within 48 hours of collection.

Were Encore samples received? Yes____ No____

Date and time placed in freezer _____

Were all samples placed in freezer within 48 hours of collection? Yes____ No____

If no, were samples shipped on dry ice? Yes____ No____

FOR CLEAN LAB USE ONLY – Total Mercury Preservation Check (W-HG-AF; W-HG-AF-F):

Samples preserved within 48 hours? Yes____ No____

Date and time samples preserved: _____

Additional Comments:

From **8/19/17**
To **Nathan Miller** Phone **850 595 0626**
Company **FIDEP**
Address **140 W Court St**
City **Pensacola** State **FL** ZIP **32502**

Internal Billing Reference

Recipient's Name **SAMPLE RECEIVING** Phone **850 245-6065**

Company **FLORIDA DEP/CHEMISTRY SECTION**

Address **2600 BLAIRSTONE RD**
Exact deliver to P.O. boxes or P.O. ZIP codes. Dept./Floor/Suite/Room

Address **TALLAHASSEE** State **FL** ZIP **32399-6542**

Hold Weekday
FedEx location address
REQUIRED. NOT available for
FedEx First Overnight.
Hold Saturday
FedEx location address
REQUIRED. Available ONLY for
FedEx Priority Overnight and
FedEx 2Day to select locations.



8119 3904 6040

0127681333

Form ID No. **0215**

4 Express Package Service

* To meet locations.

Packages up to 150 lbs.
For packages over 150 lbs., use the
FedEx Express Freight US Airbill.

Next Business Day

- ☐ **FedEx First Overnight**
Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☒ **FedEx Priority Overnight**
Next business morning. * Friday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☐ **FedEx Standard Overnight**
Next business afternoon. * Saturday Delivery NOT available.

2 or 3 Business Days

- ☐ **FedEx 2Day A.M.**
Second business morning. * Saturday Delivery NOT available.
- ☐ **FedEx 2Day**
Second business afternoon. * Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.
- ☐ **FedEx Express Saver**
Third business day. * Saturday Delivery NOT available.

5 Packaging

* Declared value limit \$500.

- ☐ FedEx Envelope* ☐ FedEx Pak* ☐ FedEx Box ☐ FedEx Tube ☒ Other

6 Special Handling and Delivery Signature Options

Fees may apply. See the FedEx Service Guide.

- ☐ **Saturday Delivery**
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

- ☐ **No Signature Required**
Package may be left without obtaining a signature for delivery.
- ☐ **Direct Signature**
Someone at recipient's address may sign for delivery.
- ☐ **Indirect Signature**
If no one is available at recipient's address, someone at a neighboring address may sign for delivery for residential deliveries only.

Does this shipment contain dangerous goods?

One box must be checked.

- ☐ No ☐ Yes As per attached Shipper's Declaration ☐ Yes Shipper's Declaration not required ☐ Dry Ice Dry Ice, 2 UN 1845 _____ kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.

☐ Cargo Aircraft Only

7 Payment Bill to:

Enter FedEx Acct. No. or Credit Card No. below.

Obtain recip. Acct. No. ☐

- ☐ Sender Acct. No. in Section 7 will be billed ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages Total Weight Credit Card Auth.

Your liability is limited to US\$100 unless you declare a higher value. See the current FedEx Service Guide for details.

611

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From **3/19/17**
To **Nathan Miller** Phone **850 595 0626**
Company **FIDEP**
Address **140 W Court St**
City **Pensacola** State **FL** ZIP **32502**

Internal Billing Reference

Recipient's Name **SAMPLE RECEIVING** Phone **850 245-6065**

Company **FLORIDA DEP/CHEMISTRY SECTION**

Address **2600 BLAIRSTONE RD**
Exact deliver to P.O. boxes or P.O. ZIP codes. Dept./Floor/Suite/Room

Address **TALLAHASSEE** State **FL** ZIP **32399-6542**

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FedEx location address
REQUIRED. NOT available for
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FedEx location address
REQUIRED. Available ONLY for
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8119 3904 6050

0127681333

Form ID No. **0215**

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* Declared value limit \$500.

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Obtain recip. Acct. No. ☐

- ☐ Sender Acct. No. in Section 7 will be billed ☒ Recipient ☐ Third Party ☐ Credit Card ☐ Cash/Check

Total Packages Total Weight Credit Card Auth.

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