



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2017

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Data Qualified?  
Yes / No

STORET Station Name: 5 Mile creek @ Okeechobee Rd

Date: 6/15/17  
(mm/dd/yyyy)

STORET Station ID: 28010001

WBID: 3194D

Latitude: 27.422972°

County: St. Lucie RQ - 2017-06-12-20

ORG ID: 21FLWPB

Longitude: -80.371583°

Receiving Body of Water: St. Lucie North Fork

Field ID: 28010001

| Sampling Team Members                                                |      |                                                                                                                                                      |                 | WQ Measurements             | Sample Collection | Documentation                                               | Preservation   | Preservation Check          | Sampling Equipment                             |                                         |                                          |  |
|----------------------------------------------------------------------|------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------|-------------------|-------------------------------------------------------------|----------------|-----------------------------|------------------------------------------------|-----------------------------------------|------------------------------------------|--|
| Hurley                                                               |      |                                                                                                                                                      |                 | X                           | X                 |                                                             |                |                             | <input type="checkbox"/> Sample Container      | <input type="checkbox"/> Van Dorn       | <input checked="" type="checkbox"/> Pole |  |
| Pitts                                                                |      |                                                                                                                                                      |                 |                             | X                 | X                                                           | X              |                             | <input type="checkbox"/> Carboy                | <input type="checkbox"/> Syringe        |                                          |  |
|                                                                      |      |                                                                                                                                                      |                 |                             |                   |                                                             |                |                             | <input type="checkbox"/> Dipper                | <input type="checkbox"/> Other          |                                          |  |
|                                                                      |      |                                                                                                                                                      |                 |                             |                   |                                                             |                |                             | Equipment ID                                   |                                         |                                          |  |
|                                                                      |      |                                                                                                                                                      |                 |                             |                   |                                                             |                |                             | Collection Method                              |                                         |                                          |  |
|                                                                      |      |                                                                                                                                                      |                 |                             |                   |                                                             |                |                             | <input type="checkbox"/> Wading                | 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 |                   |                                                             |                | Tide Falling: Yes / No / NA |                                                |                                         |                                          |  |
| Meter ID# AE3                                                        |      |                                                                                                                                                      |                 | Photos: Yes / No            |                   |                                                             |                |                             |                                                |                                         |                                          |  |
| 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                                                                  | 1125 | 0.3                                                                                                                                                  | 0.8             | 7.5                         | 94                | 7.5                                                         | 0.7            | 0.3                         | 1291                                           | 26.9                                    |                                          |  |
| 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                                                  |      | <input checked="" type="checkbox"/> W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP                                                                      |                 |                             |                   | <input type="checkbox"/> Ice <input 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"/> HNO2  |                |                             |                                                | <input type="checkbox"/> <2             |                                          |  |
| Filtered Nutrients                                                   |      | <input checked="" type="checkbox"/> W-PO4-F <input checked="" type="checkbox"/> Field Filtered 0.45 µm Filter                                        |                 |                             |                   | <input type="checkbox"/> Ice                                |                |                             |                                                |                                         |                                          |  |
| Chlorophyll                                                          |      | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                                       |                 |                             |                   | <input type="checkbox"/> Ice                                |                |                             |                                                |                                         |                                          |  |
| Physical/Aggregate (Fresh)                                           |      | <input checked="" type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CL-IC / W-COLOR / W-SO4-IC / W-TDS                                      |                 |                             |                   | <input type="checkbox"/> Ice                                |                |                             |                                                |                                         |                                          |  |
| Physical/Aggregate (Marine)                                          |      | <input type="checkbox"/> Alkalinity / W-F / W-TSS / 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"/> Enterococcus <input type="checkbox"/> PCR-FILTER |                 |                             |                   | <input type="checkbox"/> Ice                                |                |                             |                                                |                                         |                                          |  |
| Tracers                                                              |      | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA                                                                              |                 |                             |                   | <input type="checkbox"/> Ice                                |                |                             |                                                |                                         |                                          |  |
| Pesticides                                                           |      | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-PYR-AA-R                                           |                 |                             |                   | <input type="checkbox"/> Ice                                |                |                             |                                                |                                         |                                          |  |
|                                                                      |      | <input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-GLYPH                                             |                 |                             |                   | <input type="checkbox"/> Other                              |                |                             |                                                |                                         |                                          |  |
| E coli                                                               |      |                                                                                                                                                      |                 |                             |                   | +cc                                                         |                |                             |                                                |                                         |                                          |  |
| Notes: Light rain                                                    |      |                                                                                                                                                      |                 |                             |                   | Place Label Here (If Available)                             |                |                             |                                                |                                         |                                          |  |
| Signature:                                                           |      |                                                                                                                                                      |                 |                             |                   | Date:                                                       |                |                             |                                                |                                         |                                          |  |

Field Parameters Entered into LIMS: 7/18/17  
(Initials/Date)

Field Parameters QC in LIMS: DL 10/25/17  
(Initials/Date)

Date Migrated to STORET: 122038 DL 10/25/17

Field Sheets Scanned/Saved: DL 10/25/17