



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
STRATEGIC MONITORING PROGRAM FIELD SHEET

March 2017

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Data Qualified?

Yes / No

Location/STORET Station Name: WBID 8089 ENR7

Date: 8/16/17  
(mm/dd/yyyy)

STORET # G4SE0104

WBID: 8088

Latitude: 25.38762574

County: Miami-Dade

RQ - 2017-01-30-17

ORG ID: 21FLWPB

Longitude: -80.21388943

(Decimal Degrees)

(Decimal Degrees)

Receiving Body of Water:

Field ID: G4SE01034

| Sampling Team Members                                                       |                                                                                                                                              |                  |                 | WQ Measurements                     | Sample Collection                                                                 | Documentation                                        | Preservation             | Preservation Check                                 | Sampling Equipment                                   |                                         |                               |  |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|-------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------|--------------------------|----------------------------------------------------|------------------------------------------------------|-----------------------------------------|-------------------------------|--|
| SKAGGS<br>SEWELL                                                            |                                                                                                                                              |                  |                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>                                                          | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/>                           | <input checked="" type="checkbox"/> Sample Container | <input type="checkbox"/> Van Dorn       | <input type="checkbox"/> Pole |  |
|                                                                             |                                                                                                                                              |                  |                 |                                     |                                                                                   |                                                      |                          |                                                    | <input type="checkbox"/> Carboy                      | <input type="checkbox"/> Syringe        |                               |  |
|                                                                             |                                                                                                                                              |                  |                 |                                     |                                                                                   |                                                      |                          |                                                    | <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Other          |                               |  |
| Equipment ID                                                                |                                                                                                                                              |                  |                 |                                     |                                                                                   |                                                      |                          | Collection Method                                  |                                                      |                                         |                               |  |
|                                                                             |                                                                                                                                              |                  |                 | <input type="checkbox"/>            | <input type="checkbox"/>                                                          | <input type="checkbox"/>                             | <input type="checkbox"/> | <input type="checkbox"/>                           | <input type="checkbox"/> Wading                      | <input type="checkbox"/> Via Boat       |                               |  |
|                                                                             |                                                                                                                                              |                  |                 |                                     |                                                                                   |                                                      |                          |                                                    | <input type="checkbox"/> From Shore                  | <input type="checkbox"/> Canoe/Kayak    |                               |  |
|                                                                             |                                                                                                                                              |                  |                 |                                     |                                                                                   |                                                      |                          |                                                    | <input type="checkbox"/> Other (note below)          | <input type="checkbox"/> Electric Motor |                               |  |
|                                                                             |                                                                                                                                              |                  |                 |                                     |                                                                                   |                                                      |                          | <input checked="" type="checkbox"/> Gasoline Motor |                                                      |                                         |                               |  |
| Water Level: Dry / Pooled / Low / <u>Normal</u> / High / Flooded            |                                                                                                                                              |                  |                 |                                     |                                                                                   |                                                      |                          |                                                    | Matrix: Fresh / <u>Marine</u> / DI                   |                                         |                               |  |
| Meter ID# AE3                                                               |                                                                                                                                              |                  |                 | Photos: Yes / <u>No</u>             |                                                                                   |                                                      |                          | 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                                                                         | 9:45                                                                                                                                         | 0.3              | 1.5             | 4.3                                 | 71                                                                                | 7.7                                                  | 36.1                     | 1.5                                                | 54725                                                | 31.0                                    |                               |  |
| CEN                                                                         |                                                                                                                                              | 1.0              |                 | 4.3                                 | 71                                                                                | 7.7                                                  | 36.1                     | 1.5                                                | 54727                                                | 31.0                                    |                               |  |
| Biological Samples Collected: <u>NONE</u> 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 checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 |                                                      |                          | <input checked="" 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 um Filter                                |                  |                 |                                     | <input checked="" type="checkbox"/> Ice                                           | Place Preservative Sticker(s) Here<br>(If Available) |                          |                                                    |                                                      |                                         |                               |  |
| Chlorophyll                                                                 | <input type="checkbox"/> CHLSUITE-W                                                                                                          |                  |                 |                                     | <input checked="" type="checkbox"/> Ice                                           |                                                      |                          |                                                    |                                                      |                                         |                               |  |
| Physical/Aggregate (Fresh)                                                  | <input type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CI-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 checked="" 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 type="checkbox"/> E Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci <input type="checkbox"/> qPCR           |                  |                 |                                     | <input type="checkbox"/> Ice                                                      |                                                      |                          |                                                    |                                                      |                                         |                               |  |
| Tracers                                                                     | <input type="checkbox"/> W-SUC-AA-R <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-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"/> W-SUC-AA-R |                  |                 |                                     | <input type="checkbox"/> Other                                                    |                                                      |                          |                                                    |                                                      |                                         |                               |  |

Notes:

Place Label Here  
(If Available)

Signature:

Date: 8/16/17

Field Parameters Entered into LIMS:

Field Parameters QC in LIMS:

Date Migrated to STORET:

Field Sheets Scanned/Saved: