



# 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 ENR6

Date: 08/31/17  
(mm/dd/yyyy)

STORET # G4SE0105

WBID: 8089

Latitude: 25.40567782

(Decimal Degrees)

County: Miami-Dade

RQ - 2017-08-28-33

ORG ID: 21FLWPB

Longitude: -80.13402939

(Decimal Degrees)

Receiving Body of Water:

Field ID: G4SE0103

| Sampling Team Members                                                |                                                                                                                                              | WQ Measurements  | Sample Collection | Documentation | Preservation                                                                      | Preservation Check          | Sampling Equipment                                   |                                                    |                               |            |  |
|----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------|---------------|-----------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------|----------------------------------------------------|-------------------------------|------------|--|
|                                                                      |                                                                                                                                              |                  |                   |               |                                                                                   |                             | <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"/> 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 / Normal / High / Flooded            |                                                                                                                                              |                  |                   |               |                                                                                   |                             | Matrix: Fresh / Marine / DI                          |                                                    |                               |            |  |
| Meter ID# 423                                                        |                                                                                                                                              |                  | 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                                                                  | 10:55                                                                                                                                        | 0.3              | 2.6               | 6.8           | 106                                                                               | 7.8                         | 35.74                                                |                                                    | 54262                         | 29.5       |  |
| CEN                                                                  |                                                                                                                                              | 2.1              |                   | 6.4           | 109                                                                               | 7.8                         | 35.74                                                | 2.65                                               | 54242                         | 29.5       |  |
| 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 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-JCPMS <input type="checkbox"/> W-ICP                                                                              |                  |                   |               | <input type="checkbox"/> Ice <input type="checkbox"/> HNO3                        |                             |                                                      | <input type="checkbox"/> <2                        |                               |            |  |
| Filtered Nutrients                                                   | <input checked="" type="checkbox"/> W-P04-F <input type="checkbox"/> Field Filtered 0.45 um Filter                                           |                  |                   |               | <input checked="" type="checkbox"/> Ice                                           |                             |                                                      |                                                    |                               |            |  |
| Chlorophyll                                                          | <input type="checkbox"/> CHLSUITE-W                                                                                                          |                  |                   |               | <input checked="" type="checkbox"/> Ice                                           |                             |                                                      |                                                    |                               |            |  |
| Physical/Aggregate (Fresh)                                           | <input 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 checked="" 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:

Seas Runy

Place Label Here  
(If Available)

Signature: [Signature]

Date: 8/31/17

Field Parameters Entered into LIMS:

10/30/17

Field Parameters QC in LIMS:

DL 10/30/17

Date Migrated to STORET:

122992

DL 10/31/17

Field Sheets Scanned/Saved:

DL 10/31/17

(Initials/Date)

(Initials/Date)