



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

Data Qualified?

Yes / No

January 2018

WIN Station Name: CAULKINS CK Trib @ Hamp Register Rd. Date: 03/06/2018

WIN/ Field ID: 19010042 WBID: 2274 Latitude: 30.3305 (mm/dd/yyyy)

County: NASSAU ORG ID: 21FLA Longitude: 82.2425 (Decimal Degrees)

Receiving Body of Water: CEDAR Creek RQ-2018- 03-12-22 (Decimal Degrees)

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
J. KAIM HACHER						X	X	X	X
P. O'CONNOR					X		X		

Sampling Equipment		
☒ Sample Container	☐ Van Dorn	☒ Pole
☐ Carboy	☐ Syringe	
☐ Dipper	☐ Other	
Depth Measured with <u>Secchi disc</u>		
Equipment ID <u>CR410 47</u>		

Collection Method		
☐ Wading	☐ Canoe/Kayak	
☒ From Shore	☐ Electric Motor	
☐ Other	☐ Gasoline Motor	

Water Level: Dry/ Pooled/ Low / Normal / High / Flooded Meter ID# QUANTITA #1 Matrix: Fresh Marine/ DI

Photos: Yes / No Flow: No Flow / Interstitial / Flowing / NA Tide: Rising/ Falling/ Slack/ NA Tide Times: High Low

Time Zone	Time	Total Depth (m)	Sample Depth (m)	Secchi Disk (m)	DO (mg/L)	DO (%SAT)	pH	Salinity (PPT)	Sp COND (µmhos/cm)	Temp. (C°)
EST	1000	0.2	0.1	0.25	6.75	64.3	7.3	0.03	60	13.5
CEN				806						

Biological Samples Collected: None HA SCI RPS Algae ID LVS LVI Other:

SPIO ID Numbers: SBIO-ID: HA-ID: RPS-ID: Macrophyte-ID: LIMS#:

Parameter Suite	Parameter Methods	Preservation	Lot#	Expiration	pH Check
Preserved Nutrients	☒ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☒ Ice ☒ H2SO4	SA7341020	12-01-18	☒ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO3			☐ <2
Filtered Nutrients	☒ W-PO4-F ☐ Field Filtered 0.45 µm Filter	☒ Ice	R7EA12511		
Chlorophyll	☒ CHLSUITE-W	☒ Ice			
Physical/Aggregate (Fresh)	☒ Alkalinity / W-F / W-TSS / TURBIDITY / W-CHC / W-COLOR / W-SO4-IC / W-TDS	☒ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / W-F / W-TSS / TURBIDITY	☐ Ice			
Macroinvertebrates	☐ MI-FW-QLDC	☐ Formalin			
Periphyton	☐ ALGAE-ID	☐ Ice			
Microbiology	☒ E Coli ☐ F Coli ☐ Enterococci	☒ Ice			
Molecular	☐ PCR-FILTER ☐ PCR-HF183 ☐ PCR-BacR ☐ PCR-GULL2 ☐ PCR-GFD	☐ Ice			
Tracers	☐ W-SUC-AA-R ☐ W-UHERB-AA ☐ W-AHERB-AA	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-UHERB-AA ☐ W-AHERB-AA ☐ W-CARB-AA ☐ W-PCL-SQ-R ☐ W-PYR-AA-R ☐ W-GLYPH ☐ W-SUC-AA-R	☐ Ice ☐ Other			

Notes:

WIN /Field ID: 19010042

CALKINS CK TRIB @ HAMP REGISTER RD

Signature: P. O'Connor Date: 03-06-18

Enter Field Parameters, Verify Station ID in LIMS DMT: BT 3/15/18 QC Station ID, Field Parameters in LIMS DMT: BT 3/15/18

Scan/Save Field Sheets BT 3/15/18 Migrate Data to WIN: BT 3/15/18 Verify Data in WIN: BT 3/15/18

Contains: 1:1 H2SO4
Lot No.: SA7341020
Expires: 12/07/18
See Safety Data Sheet (SDS)

Place Preservation (If A)

SULFURIC ACID - 65%
DANGER
Corrosive 1:1 H2SO4
1480-262-2711
7705-14-8

May be corrosive to metals. Causes severe skin burns and eye damage. Do not breathe dust/fume/gas/aerosol. Wash thoroughly after use. Wear protective gloves/protective clothing/protective eyewear. Do not get inside clothing. If swallowed, seek medical advice immediately. If inhaled, seek medical advice immediately. If on skin, wash with plenty of water. If in eyes, rinse cautiously with water for several minutes. Remove contact lenses, if available and it does not increase the risk. Store in corrosion resistant container. Do not mix. Do not empty into drain.

Customer: NE-DIST

Project ID: SMP

Requester: Nicole Frederick

Field Report Prepared By:

Collected By:

Sampling Agency:

A. Kelmacher
FDEP/NE ROC

WIN /Field ID:

19010042

CALKINS CK TRIB @ HAMP REGISTER RD

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

WIN /Field ID:

19010123

UNNAMED BRANCH @ CR125

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

WIN /Field ID:

19010018

ST MARYS R S PRONG @ SR 125

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

WIN /Field ID:

19010023

ST MARYS S PRONG @ CR 23C

Latitude ☐ dd ☐ dms Longitude ☐ dd ☐ dms

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
<i>YK-3cc</i>	1530 03-06-2018	<i>FedEx</i>			

Latitude	Longitude	Temp (c)	pH	Salinity (ppt)	Collection (comp begin or grab)	Date	Time	Sample Depth	Diss. Oxygen	Sp. Conductance	Total Res. Chlorine	Bottle Group(s)
		13.5	7.3	0.03	Comp	03-06-2018	1000	0.1	6.75	96		A
		14.5	7.2	0.03	Comp	03-06-2018	1045	0.3	7.03	69		A
		14.3	5.4	0.03	Comp	03-06-2018	1300	0.2	7.75	59		A
		15.7	6.6	0.05	Comp	03-06-2018	1145	0.3	7.0	96		A

Group: A	Bottle Type: ALKALINITY TURBIDITY W-CL-IC W-COLOR W-F W-SO4-IC W-TDS W-TSS	P-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: CHLSUITE-W	BP-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: NE-ALS-ECQ	P-250ML-WI-THI	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC	P-500ML	# of Bottles: 4	Preservative: ICE And H2SO4	ICE	Enter Number of Bottles Sent to Lab	4
Group: A	Bottle Type: W-PO4-F	P-125ML	# of Bottles: 4	Preservative: FILTER-ICE	ICE	Enter Number of Bottles Sent to Lab	4

SENT TO CONTRACT LAB

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM



9143 Phillips Highway, Suite 200 Jacksonville, FL 32256 / PH(904) 739-2277 / FAX (904) 739-2011

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SR # _____
ALS Contact: Jerry Allen

Client Name FDEP-NE ROC		Project Number RO-2018-03-12-22		ANALYSIS REQUESTED (Include Method Number and Container Preservative)	
Report To Dep-OverFlowmicro@dep.state.fl.us		Report CC jerry.m.parrish@state.fl.us		Preservative Key 0. None 1. HCL 2. HNO3 3. H2SO4 4. NaOH 5. Zn Acetate 6. MeOH 7. NaHSO4 8. Other ICE	
Company/Address 8800 Baymeadows Way W Jacksonville, FL 32256		Phone # 904-256-1541		FAX #	
Sampler's Signature <i>Amy Kalmbacher</i>		Sampler's Printed Name Amy Kalmbacher		REMARKS	
CLIENT SAMPLE ID	LAB ID	SAMPLING DATE	TIME	MATRIX	NUMBER OF CONTAINERS
19010042		3-6-18	1600	SW	1 X
19010123			1045		1 X
19010023			1145		1 X
19010018			1300		1 X
Special Instructions/Comments: Email Report to: Dep-OverFlowmicro@dep.state.fl.us 1.70C					
Relinquished By Signature: <i>Amy Kalmbacher</i> Printed Name: Amy Kalmbacher Firm: FDEP Date/Time: 3-6-2018 1437		Received By Signature: <i>[Signature]</i> Printed Name: <i>[Name]</i> Firm: <i>[Firm]</i> Date/Time: 3-6-18 1538		TURNOVER REQUIREMENTS RUSH (SURCHARGES APPLY) ☒ STANDARD REQUESTED FAX DATE REQUESTED REPORT DATE Edata Yes No	
Relinquished By Signature: <i>[Signature]</i> Printed Name: <i>[Name]</i> Firm: <i>[Firm]</i> Date/Time: <i>[Date/Time]</i>		Received By Signature: <i>[Signature]</i> Printed Name: <i>[Name]</i> Firm: <i>[Firm]</i> Date/Time: <i>[Date/Time]</i>		REPORT REQUIREMENTS I. Results Only II. Results + QC Summaries (LCS, DUP, MSMSD as required) III. Results + QC and Calibration Summaries IV. Data Validation Report with Raw Data P.O. # B10739 Bill to:	
Relinquished By Signature: <i>[Signature]</i> Printed Name: <i>[Name]</i> Firm: <i>[Firm]</i> Date/Time: <i>[Date/Time]</i>		Received By Signature: <i>[Signature]</i> Printed Name: <i>[Name]</i> Firm: <i>[Firm]</i> Date/Time: <i>[Date/Time]</i>		INVOICE INFORMATION	