



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2018

Data Qualified?  
Yes / ☒ No

WIN Station Name: Soldier Creek @ just downstream of SR Hwy 419 Date: 07/11/2018  
(mm/dd/yyyy)

WIN/ Field ID: G2CE0162 WBID: 2986 Latitude: 28.719171  
(Decimal Degrees)

County: Seminole ORG ID: 21FLCEN Longitude: -81.308268

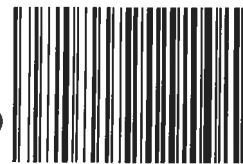
Receiving Body of Water: \_\_\_\_\_ RQ-2018- 07-09-47

| Sampling Team Members                                                                        |      |                                                                                                                                                                                                                                                                                     |                  |                 | WQ Measurements                                  | Sample Collection                   | Documentation                                               | Preservation                        | Preservation Check                  | Sampling Equipment                                   |                                         |                               |  |  |
|----------------------------------------------------------------------------------------------|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|--------------------------------------------------|-------------------------------------|-------------------------------------------------------------|-------------------------------------|-------------------------------------|------------------------------------------------------|-----------------------------------------|-------------------------------|--|--|
| <u>Mike Linger</u>                                                                           |      |                                                                                                                                                                                                                                                                                     |                  |                 | <input checked="" type="checkbox"/>              | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/>                         | <input checked="" type="checkbox"/> | <input checked="" 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        |                               |  |  |
| <u>Mike Deanna</u>                                                                           |      |                                                                                                                                                                                                                                                                                     |                  |                 | <input type="checkbox"/>                         | <input type="checkbox"/>            | <input type="checkbox"/>                                    | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Other          |                               |  |  |
|                                                                                              |      |                                                                                                                                                                                                                                                                                     |                  |                 |                                                  |                                     |                                                             |                                     |                                     | Depth Measured with <u>Secchi Disk Line</u>          |                                         |                               |  |  |
|                                                                                              |      |                                                                                                                                                                                                                                                                                     |                  |                 | <input type="checkbox"/>                         | <input type="checkbox"/>            | <input type="checkbox"/>                                    | <input type="checkbox"/>            | <input type="checkbox"/>            | Equipment ID <u>Crusty</u>                           |                                         |                               |  |  |
|                                                                                              |      |                                                                                                                                                                                                                                                                                     |                  |                 |                                                  |                                     |                                                             |                                     |                                     |                                                      |                                         |                               |  |  |
|                                                                                              |      |                                                                                                                                                                                                                                                                                     |                  |                 | <input checked="" type="checkbox"/>              | <input type="checkbox"/>            | <input type="checkbox"/>                                    | <input type="checkbox"/>            | <input type="checkbox"/>            | Collection Method                                    |                                         |                               |  |  |
|                                                                                              |      |                                                                                                                                                                                                                                                                                     |                  |                 |                                                  |                                     |                                                             |                                     |                                     | <input checked="" type="checkbox"/> Wading           | <input type="checkbox"/> Canoe/Kayak    |                               |  |  |
|                                                                                              |      |                                                                                                                                                                                                                                                                                     |                  |                 | <input type="checkbox"/>                         | <input type="checkbox"/>            | <input type="checkbox"/>                                    | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> From Shore                  | <input type="checkbox"/> Electric Motor |                               |  |  |
|                                                                                              |      |                                                                                                                                                                                                                                                                                     |                  |                 |                                                  |                                     |                                                             |                                     |                                     | <input type="checkbox"/> Other                       | <input type="checkbox"/> Gasoline Motor |                               |  |  |
| Water Level: Dry / Pooled / Low / <u>Normal</u> / High / Flooded                             |      |                                                                                                                                                                                                                                                                                     |                  |                 | Meter ID# <u>SCUD</u>                            |                                     |                                                             |                                     |                                     | Matrix: <u>Fresh</u> / Marine / DI                   |                                         |                               |  |  |
| Photos: <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No                |      |                                                                                                                                                                                                                                                                                     |                  |                 | Flow: No Flow / Intestinal / <u>Flowing</u> / NA |                                     |                                                             |                                     |                                     | Tide: Rising / Falling / Slack / <u>NA</u>           |                                         |                               |  |  |
| 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                                                                                          | 1302 |                                                                                                                                                                                                                                                                                     | 0.3              |                 | 6.34                                             | 79.2                                | 7.14                                                        | 0.10                                | 221.5                               | 26.8                                                 |                                         |                               |  |  |
|                                                                                              |      | 0.6                                                                                                                                                                                                                                                                                 |                  | 0.4             |                                                  |                                     |                                                             |                                     |                                     |                                                      |                                         |                               |  |  |
| CEN                                                                                          |      |                                                                                                                                                                                                                                                                                     |                  |                 |                                                  |                                     |                                                             |                                     |                                     |                                                      |                                         |                               |  |  |
| Biological Samples Collected: <u>None</u> HA SCI RPS Algae ID LVS LVI Other:                 |      |                                                                                                                                                                                                                                                                                     |                  |                 |                                                  |                                     |                                                             |                                     |                                     |                                                      |                                         |                               |  |  |
| SBIO ID Numbers: SBIO-ID: _____ HA-ID: _____ RPS-ID: _____ Macrophyte-ID: _____ LIMS#: _____ |      |                                                                                                                                                                                                                                                                                     |                  |                 |                                                  |                                     |                                                             |                                     |                                     |                                                      |                                         |                               |  |  |
| Parameter Suite                                                                              |      | Parameter Methods                                                                                                                                                                                                                                                                   |                  |                 |                                                  |                                     | Preservation                                                |                                     | Lot#                                | Expiration                                           | pH Check                                |                               |  |  |
| Preserved Nutrients                                                                          |      | <input type="checkbox"/> W-NH3 / <input type="checkbox"/> W-NO2NO3 / <input type="checkbox"/> W-TKN / <input type="checkbox"/> W-TOC / <input type="checkbox"/> 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"/> HNO3  |                                     |                                     |                                                      | <input type="checkbox"/> <2             |                               |  |  |
| Filtered Nutrients                                                                           |      | <input type="checkbox"/> W-PO4-F <input type="checkbox"/> Field Filtered 0.45 µm Filter                                                                                                                                                                                             |                  |                 |                                                  |                                     | <input type="checkbox"/> Ice                                |                                     |                                     |                                                      |                                         |                               |  |  |
| Chlorophyll                                                                                  |      | <input type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                 |                  |                 |                                                  |                                     | <input type="checkbox"/> Ice                                |                                     |                                     |                                                      |                                         |                               |  |  |
| Physical/Aggregate (Fresh)                                                                   |      | <input type="checkbox"/> Alkalinity / <input type="checkbox"/> W-F / <input type="checkbox"/> W-TSS / <input type="checkbox"/> TURBIDITY / <input type="checkbox"/> W-CH-IC / <input type="checkbox"/> W-COLOR / <input type="checkbox"/> W-SO4-IC / <input type="checkbox"/> W-TDS |                  |                 |                                                  |                                     | <input type="checkbox"/> Ice                                |                                     |                                     |                                                      |                                         |                               |  |  |
| Physical/Aggregate (Marine)                                                                  |      | <input type="checkbox"/> Alkalinity / <input type="checkbox"/> W-F / <input type="checkbox"/> W-TSS / <input type="checkbox"/> 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"/> Enterococci                                                                                                                                                                     |                  |                 |                                                  |                                     | <input checked="" type="checkbox"/> Ice                     |                                     |                                     |                                                      |                                         |                               |  |  |
| Molecular                                                                                    |      | <input checked="" type="checkbox"/> PCR-FILTER <input checked="" type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR-GFD                                                                                  |                  |                 |                                                  |                                     | <input checked="" type="checkbox"/> Ice                     |                                     |                                     |                                                      |                                         |                               |  |  |
| Tracers                                                                                      |      | <input checked="" type="checkbox"/> W-SUC-AA-R <input checked="" type="checkbox"/> W-UHERB-AA <input checked="" type="checkbox"/> W-AHERB-AA                                                                                                                                        |                  |                 |                                                  |                                     | <input checked="" type="checkbox"/> Ice                     |                                     |                                     |                                                      |                                         |                               |  |  |
| Pesticides                                                                                   |      | <input type="checkbox"/> W-PSNP-TQ <input type="checkbox"/> W-UHERB-AA <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-CARB-AA                                                                                                                                       |                  |                 |                                                  |                                     | <input type="checkbox"/> Ice                                |                                     |                                     |                                                      |                                         |                               |  |  |
|                                                                                              |      | <input type="checkbox"/> W-PCL-SQ-R <input type="checkbox"/> W-PYR-AA-R <input type="checkbox"/> W-GLYPH <input type="checkbox"/> W-SUC-AA-R                                                                                                                                        |                  |                 |                                                  |                                     | <input type="checkbox"/> Other                              |                                     |                                     |                                                      |                                         |                               |  |  |

Notes:

WIN ID / Field ID →

Soldier Creek @ just  
downstream of SR Hwy 419  
(2986)



G2CE0162

Signature: [Signature]

Date: 7/11/18

Enter Field Parameters, Verify Station ID In LIMS DMT: KWM JUL 17 2018 QC Station ID, Field Parameters In LIMS DMT: 72 7/18/18

Scan/Save Field Sheets KWM JUL 27 2018 Migrate Data to WIN: \_\_\_\_\_ Verify Data In WIN: \_\_\_\_\_  
(Initials/Date) (Initials/Date) (Initials/Date)