



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

Data Qualified?

Yes / No

January 2018

WIN Station Name: C-139 - SE

Date: 04/30/2018

(mm/dd/yyyy)

WIN/ Field ID: G1SD0056

WBID: 3255

Latitude: 26.43410

(Decimal Degrees)

County: Hendry

ORG ID:

Longitude: -81.946898

(Decimal Degrees)

Receiving Body of Water: Gulf of Mexico

RQ-2018- 04-30-75

| Sampling Team Members                                                     |      |                                                                                                                                                                                                                                                                                                |                  |                 |           | WQ Measurements                  | Sample Collection | Documentation                                                                     | Preservation       | Preservation Check         | Sampling Equipment                             |                                                      |                                             |                                          |  |
|---------------------------------------------------------------------------|------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|-----------|----------------------------------|-------------------|-----------------------------------------------------------------------------------|--------------------|----------------------------|------------------------------------------------|------------------------------------------------------|---------------------------------------------|------------------------------------------|--|
| Nicole Reistad                                                            |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  | X                 | X                                                                                 |                    |                            |                                                | <input checked="" type="checkbox"/> Sample Container | <input type="checkbox"/> Van Dorn           | <input checked="" type="checkbox"/> Pole |  |
| Maryann Dugan                                                             |      |                                                                                                                                                                                                                                                                                                |                  |                 |           | X                                |                   | X                                                                                 |                    | X                          |                                                | <input type="checkbox"/> Carboy                      | <input checked="" type="checkbox"/> Syringe |                                          |  |
|                                                                           |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            |                                                | <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Other              |                                          |  |
|                                                                           |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            | Depth Measured with<br>Equipment ID            |                                                      |                                             |                                          |  |
|                                                                           |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            | Collection Method                              |                                                      |                                             |                                          |  |
|                                                                           |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            | <input type="checkbox"/> Wading                | <input type="checkbox"/> Canoe/Kayak                 |                                             |                                          |  |
|                                                                           |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            | <input checked="" type="checkbox"/> From Shore | <input type="checkbox"/> Electric Motor              |                                             |                                          |  |
|                                                                           |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            | <input type="checkbox"/> Other                 | <input type="checkbox"/> Gasoline Motor              |                                             |                                          |  |
| Water Level: Dry/ Pooled/ Low / Normal / High / Flooded                   |      |                                                                                                                                                                                                                                                                                                |                  |                 |           | Meter ID# SNEK (#9)              |                   |                                                                                   |                    | Matrix: Fresh/ Marine/ DI  |                                                |                                                      |                                             |                                          |  |
| Photos: Yes/ No                                                           |      | Flow: No Flow / Intertidal / Flowing / NA                                                                                                                                                                                                                                                      |                  |                 |           | Tide: Rising/ Falling/ Slack/ NA |                   |                                                                                   |                    | Tide Times: High NA Low NA |                                                |                                                      |                                             |                                          |  |
| Time Zone                                                                 | Time | Total Depth (m)                                                                                                                                                                                                                                                                                | Sample Depth (m) | Secchi Disk (m) | DO (mg/L) | DO (%SAT)                        | pH                | Salinity (PPT)                                                                    | Sp COND (umhos/cm) | Temp. (C°)                 |                                                |                                                      |                                             |                                          |  |
| EST                                                                       | 1015 | 0.5                                                                                                                                                                                                                                                                                            | 0.25             | 0.4             | 7.4       | 94                               | 7.2               | 0.27                                                                              | 565                | 27.7                       |                                                |                                                      |                                             |                                          |  |
| CEN                                                                       |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            |                                                |                                                      |                                             |                                          |  |
| Biological Samples Collected: None 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 checked="" 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 checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 |                    | SA 7275010                 |                                                | 10/02/18                                             |                                             | <input checked="" type="checkbox"/> <2   |  |
| Metals                                                                    |      | <input type="checkbox"/> W-ICPMS <input type="checkbox"/> W-JCP                                                                                                                                                                                                                                |                  |                 |           |                                  |                   | <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                                           |                    |                            |                                                |                                                      |                                             |                                          |  |
| Chlorophyll                                                               |      | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                                 |                  |                 |           |                                  |                   | <input checked="" type="checkbox"/> Ice                                           |                    |                            |                                                |                                                      |                                             |                                          |  |
| Physical/Aggregate (Fresh)                                                |      | <input checked="" type="checkbox"/> Alkalinity / <input type="checkbox"/> W-F / <input type="checkbox"/> W-TSS / <input type="checkbox"/> TURBIDITY / <input type="checkbox"/> W-CI-IC / <input type="checkbox"/> W-COLOR / <input type="checkbox"/> W-SQ4-IC / <input type="checkbox"/> W-TDS |                  |                 |           |                                  |                   | <input checked="" 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-PW-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 type="checkbox"/> PCR-FILTER <input type="checkbox"/> PCR-HF183 <input type="checkbox"/> PCR-BacR <input type="checkbox"/> PCR-GULL2 <input type="checkbox"/> PCR-GFD                                                                                                                   |                  |                 |           |                                  |                   | <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-UHERB-AA <input type="checkbox"/> W-AHERB-AA <input type="checkbox"/> W-CARB-AA <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"/> Ice <input type="checkbox"/> Other                       |                    |                            |                                                |                                                      |                                             |                                          |  |
| Notes:<br>lots of Pistia in canal - some debris present in sample bottles |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            |                                                |                                                      |                                             |                                          |  |
| Field ID/WIN ID<br>Location<br>G1SD0056<br>C-139 - SE                     |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            |                                                |                                                      |                                             |                                          |  |
| Signature: Maryann Dugan Date: 04/30/2018                                 |      |                                                                                                                                                                                                                                                                                                |                  |                 |           |                                  |                   |                                                                                   |                    |                            |                                                |                                                      |                                             |                                          |  |

Enter Field Parameters, Verify Station ID in LIMS DMT:

QC Station ID, Field Parameters in LIMS DMT:

Scan/Save Field Sheets

Migrate Data to WIN:

Verify Data in WIN:

(Initials/Date)

(Initials/Date)

(Initials/Date)

(Initials/Date)