



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2018

Data Qualified?

Yes / ☒

Location/STORET Station Name: Beech Tree Creek above un-named road

Date: 8/21/18

(mm/dd/yyyy)

WIN ID G4NW0330

WBID: 196

Latitude: 30.82904721

(Decimal Degrees)

County: Walton

RQ - 2018-08-20-14 ORG ID: 21FLPNS

Longitude: -86.33813243

(Decimal Degrees)

Receiving Body of Water: Long Creek

Field ID: G4NW0330

| Sampling Team Members                                                        |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 | WQ Measurements                     | Sample Collection                                                                 | Documentation                       | Preservation                        | Preservation Check                     | Sampling Equipment                                   |                                         |                               |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------|-----------------|-------------------------------------|-----------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|----------------------------------------|------------------------------------------------------|-----------------------------------------|-------------------------------|
| <u>J.P. B</u><br><u>W. Bretana</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        |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 |                                     |                                                                                   |                                     |                                     |                                        | <input type="checkbox"/> Dipper                      | <input type="checkbox"/> Other          |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 |                                     |                                                                                   |                                     |                                     |                                        | Equipment ID                                         |                                         |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 |                                     |                                                                                   |                                     |                                     |                                        | Collection Method                                    |                                         |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 |                                     |                                                                                   |                                     |                                     |                                        | <input checked="" type="checkbox"/> Wading           | <input type="checkbox"/> Canoe/Kayak    |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 |                                     |                                                                                   |                                     |                                     |                                        | <input type="checkbox"/> From Shore                  | <input type="checkbox"/> Electric Motor |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 |                                     |                                                                                   |                                     |                                     |                                        | <input type="checkbox"/> Other                       | <input type="checkbox"/> Gasoline Motor |                               |
| Water Level: Dry / Low / <u>Normal</u> / Above Normal / Flooded              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  |                 | Meter ID# <u>12148132237</u>        |                                                                                   |                                     | Matrix: <u>Fresh</u> Marine / DI    |                                        |                                                      |                                         |                               |
| Photos: Yes / <u>No</u> Flow: No Flow / Intestinal / <u>Flowing</u> / 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                                                                          | 1150                                                                                                                                                                                                                                                                                                                                                                        | 0.2             | 0.1              | 0.1             | 8.09                                | 97.0                                                                              | 5.00                                | 0.00                                | 13                                     | 24.54                                                |                                         |                               |
| CEN                                                                          |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  | 0.2             |                                     |                                                                                   |                                     |                                     |                                        |                                                      |                                         |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  | WUB             |                                     |                                                                                   |                                     |                                     |                                        |                                                      |                                         |                               |
|                                                                              |                                                                                                                                                                                                                                                                                                                                                                             |                 |                  | "S"             |                                     |                                                                                   |                                     |                                     |                                        |                                                      |                                         |                               |
| Biological Samples Collected: <u>Nope</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 checked="" type="checkbox"/> W-NH3 / <input checked="" type="checkbox"/> W-NO2NO3 / <input checked="" type="checkbox"/> W-TKN / <input checked="" type="checkbox"/> W-TOC / <input checked="" type="checkbox"/> W-S-A-TP                                                                                                                                             |                 |                  |                 |                                     | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 | <u>SA8085170</u>                    | <u>3/26/19</u>                      | <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 µm 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 checked="" type="checkbox"/> W-F / <input checked="" type="checkbox"/> W-TSS / <input checked="" type="checkbox"/> TURBIDITY / <input checked="" type="checkbox"/> W-CH-IC / <input checked="" type="checkbox"/> W-COLOR / <input checked="" type="checkbox"/> W-SO4-IC / <input checked="" 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-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 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"/> 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                                                    |                                     |                                     |                                        |                                                      |                                         |                               |

Place Preservative Sticker(s) Here  
(If Available)

Place Label Here  
(If Available)

Notes:

Signature: Mr. R. B.

Date: 8/21/18

Enter Field Parameters, Verify Station ID in LIMS DMT: 8/21/18

QC Station ID, Field Parameters in LIMS DMT: 8/21/18

Scan/Save Field Sheets 8/21/18

(Initials/Date)

Migrate Data to WIN: 8/21/18

(Initials/Date)

Verify Data in WIN: 8/21/18

(Initials/Date)

(Initials/Date)