



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2018

Data Qualified?

Yes / No

WIN Station Name: Bear Creek @ SR267

Date: 5/30/2016
(mm/dd/yyyy)

WIN/ Field ID: G1TLHR0052

WBID: _____

Latitude: 30.479824

(Decimal Degrees)

County: Gadsden

ORG ID: 21FLTLHR

Longitude: 84.626025

(Decimal Degrees)

Receiving Body of Water: Lake Talquin

RQ-2018- 06.04-12

Sampling Team Members					WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
<u>Don Woods</u> <u>Sade Buckner</u>					X		X		
							X	X	X

Sampling Equipment		
☒ Sample Container	☐ Van Dorn	☐ Pole
☐ Carboy	☐ Syringe	
☐ Dipper	☐ Other	
Depth Measured with _____		
Equipment ID _____		
Collection Method		
☐ Wading	☐ Canoe/Kayak	
☒ From Shore	☐ Electric Motor	
☐ Other	☐ Gasoline Motor	

Water Level: Dry / Pooled / Low / Normal / High / Flooded

Meter ID# 90 D55

Matrix: Fresh / Marine / DI

Photos: Yes / No No Flow: No Flow / Intestinal / 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 (PPTH)	Sp COND (µmhos/cm)	Temp. (C°)
EST	1345	0.3	0.15	0.3	7.74	90.1	4.69	0.02	39	22.9
CEN				5						

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	☐ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☐ Ice ☐ H2SO4			☐ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO3			☐ <2
Filtered Nutrients	☐ W-PO4-F ☐ Field Filtered 0.45 µm Filter	☐ Ice			
Chlorophyll	☐ CHLSUITE-W	☐ Ice			
Physical/Aggregate (Fresh)	☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-CI-IC / 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			

Place Preservative Sticker(s) Here
(If Available)

Notes: A-b/m (PCR-HF183, PCR-BacR)

Field/WIN ID →

Location ↓



G1TLHR0052



BEAR CREEK @ SR 267

Signature: _____

Date: 5/30/16

Enter Field Parameters, Verify Station ID In LIMS DMT: ju 6/1/16

QC Station ID, Field Parameters In LIMS DMT: _____

(Initials/Date)

Scan/Save Field Sheets _____

Migrate Data to WIN: _____

Verify Data In WIN: _____

(Initial/Date)

(Initial/Date)

(Initial/Date)

4034

Relinquished By: JW	Date/Time 5/30/18	Shipping Method HD	Number of Coolers Shipped: 1	Received By: [Signature]	Date/Time 5-30-18
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Group: A

Bottle Type: P-250ML-WO-THI
ECOLI-18QT

of Bottles: 12

Preservative:

ICE

Enter Number of Bottles Sent to Lab

4

Cooler Packing Worksheet for Request: RQ-2018-06-04-72
Bacteria Freshwater Suite ECOLI-18QT (Escherichia coli)

Ship Cooler On: 5/31/2018
Customer/Project: TLH-ROC/SMP

Assigned To: REYNOLDS_T
Requester: Chris Green
Priority: 3

850-245-8453
2600 Blair Stone Rd

Tallahassee, FL 32399

Attn: Chris Green

Please return
packing list with
sample submittal
forms.

Comments:
No preservatives needed.

no FedEx bills
no zip ties

Requested Analyses:

Bottle Group: A

of Sites: 12

Container ID: P-250ML-WO-THI

Qty: 12 Preservation: ICE

Lot #

C18806

Description:

Analysis
ECOLI-18QT

Description
Escherichia coli by Colifert 18 Quanti-Tray method - non-chlorinated water systems

Cooler Packed By: Tyler R

Number of Coolers: 1

Date: 05/29/18

Kit must also include:

- ☒ Field Sheets
- ☒ Temperature Control Bottle
- ☒ FedEx Bills, if applicable
- ☒ Plastic Bags/Zip Ties
- ☒ Acid Labels (sets of 24)

If Preservation Included:

ID _____	Exp _____	Lot # _____
ID _____	Exp _____	Lot # _____
ID _____	Exp _____	Lot # _____
ID _____	Exp _____	Lot # _____
ID _____	Exp _____	Lot # _____

PLEASE RETURN ALL COOLERS FOR RQ-2018-06-04-72

CALIBRATION AND VERIFICATION LOG (FDEP SOP FT 1000-FT 1500, FD 1000-FD 4000)

Boldly "X" this box if there is qualified data on this page.

Meter ID: ProDSS

RQ-

Project: SMP 2018

Notes: (1) Always wait for meter to stabilize before recording any readings.

(2) Report all digits displayed. Do not round before reporting measurements. (See special instructions for depth).

(3) For Calibrations, record calibrated meter reading. Do not record initial meter reading before calibration.

Circle/Fill In: Lab Calibration or Calibration/Verification on Site

Temperature (Quarterly) FT 1400

Date of Last Temperature Verification 3/17

DO DEP SOP FT 1500	Name	Date	Time CT-ET	Temp	D.O. Chart mg/L	Meter D.O. mg/L	% DO	Probe Charge	Probe Gain	Pass / Fail	Lab / Field
Calibr.	J. Burchett	5/30/18	755	22.1	8.73	8.73	100	-	1.06	P/F	L/F
ICV	↓	↓	405	22.0	8.74	8.75	100	-	-	P/F	L/F
CCV	Don Woods	↓	1452	26.1	8.10	8.12	100	-	-	P/F	L/F
CCV										P/F	L/F

DO Acceptance criteria from Table ± 0.3 mg/L.

Rapid-Pulse Sensors: DO Gain Range 0.7 to 1.4; DO Charge Range 25-75.

Optical: DO gain range 0.85 to 1.15; DO charge N/A.

Steady-state & Galvanic Sensors: DO Gain & Charge N/A.

Spec. Cond. FT 1200	Name	Date	Time CT-ET	Lot #	Expir. Date	Standard μ hos/cm	Meter Reading μ hos/cm	Pass / Fail	Lab / Field
Calibr.	J. Burchett	5/30/18	757	180403A	06/19	1000	1000	P/F	L/F
ICV	↓	↓	807	2802833	01/20	100	100	P/F	L/F
CCV	Don Woods	↓	1453	180403A	01/2019	1000	990	P/F	L/F
CCV	"	↓	1454	2802833	1/2020	100	100	P/F	L/F

Conductivity Acceptance criteria $\pm 5\%$

pH DEP SOP FT 1100	Name	Date	Time CT-ET	Lot #	Expir. Date	pH Buffer SU	Meter reading SU	mV	Pass / Fail	Lab / Field
Calibr.	J. Burchett	5/30/18	759	171121A	06/19	7.0	7.0	-20.1	P/F	L/F
Calibr.	↓	↓	801	180116D	01/19	4.0	4.0	139.7	P/F	L/F
Calibr.	↓	↓	803	180221E	09/19	10.0	10.0	-174.9	P/F	L/F
ICV	↓	↓	809	180221E	09/19	10.0	10.0	-175.2	P/F	L/F
CCV	Don Woods	↓	1455	180116D	01/2019	4.0	4.1	132	P/F	L/F
CCV									P/F	L/F

pH Acceptance criteria ± 0.2 SU; mV pH 7 Range 0 ± 50 ;

mV pH 4 Range $+180 \pm 50$;

mV pH 10 Range -180 ± 50 ;

If mV are recorded: slope from 7 to 10 , slope from 4 to 7 (both must be between 165 and 180 mV)

Is meter equipped with depth sensor? Yes / No If yes, list date of last quarterly depth verification 3/17

Depth Sensor (Daily Calibration & ICV)	Name	Date	Time CT-ET	Calibrated Value (0.00 or Offset), meters	ICV Value meters	Pass / Fail	Lab / Field
Pressure mode in air						P / F	L / F

Report two decimal places. Round numbers ≤ 4 down, ≥ 5 up. ICV acceptance criteria $\pm 5\%$ or ± 0.05 m, whichever is greater.

COMMENTS: