



# FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2018

Data Qualified?

Yes / No

WIN Station Name: Alligator Creek @ Glen Oak

Date: 3-14-18  
(mm/dd/yyyy)

WIN/ Field ID: G1SW0057

WBID: 1574

Latitude: 27.97488

(Decimal Degrees)

County: Pinellas

ORG ID: 21FLTPA

Longitude: -82.713354

(Decimal Degrees)

Receiving Body of Water: Tampa Bay

RQ-2018- 03-12-11

| Sampling Team Members |  |  |  |  | WQ Measurements | Sample Collection | Documentation | Preservation | Preservation Check |
|-----------------------|--|--|--|--|-----------------|-------------------|---------------|--------------|--------------------|
| Judy Ashton           |  |  |  |  |                 | X                 |               |              |                    |
| Ben Paswater          |  |  |  |  | X               |                   | X             |              |                    |
| DYLAN HARNING         |  |  |  |  |                 |                   |               |              |                    |

| Sampling Equipment                                   |                                         |                               |
|------------------------------------------------------|-----------------------------------------|-------------------------------|
| <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          |                               |
| Depth Measured with Secchi                           |                                         |                               |
| Equipment ID <u>Secchi #1</u>                        |                                         |                               |
| Collection Method                                    |                                         |                               |
| <input 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/ Pooled/ Low / Normal / High / Flooded

Meter ID# LIL JON 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 (umhos/cm) | Temp. (C°)   |
|------------|-------------|-----------------|------------------|-----------------|-------------|-------------|-------------|----------------|--------------------|--------------|
| <u>EST</u> | <u>1020</u> | <u>0.4</u>      | <u>0.3</u>       | <u>0.3</u>      | <u>7.88</u> | <u>82.1</u> | <u>7.81</u> | <u>0.25</u>    | <u>525</u>         | <u>17.19</u> |
|            |             |                 |                  | <u>"S"</u>      |             |             |             |                |                    |              |

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 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-P                                                                                                                                                                                                             | <input checked="" type="checkbox"/> Ice <input checked="" type="checkbox"/> H2SO4 | SA7275010 | 10/2/2018  | <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 checked="" 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                                           | 9841668   |            |                                        |
| Chlorophyll                 | <input checked="" type="checkbox"/> CHLSUITE-W                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> Ice                                           |           |            |                                        |
| Physical/Aggregate (Fresh)  | <input checked="" type="checkbox"/> Alkalinity / W-F / W-TSS / TURBIDITY / W-CH-C / W-COLOR / W-SO4-IC / W-TDS                                                                                                                                                                             | <input checked="" type="checkbox"/> Ice                                           |           |            |                                        |
| Physical/Aggregate (Marine) | <input type="checkbox"/> Alkalinity / W-F / W-TSS / 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"/> Coli <input type="checkbox"/> F Coli <input type="checkbox"/> Enterococci                                                                                                                                                                              | <input checked="" type="checkbox"/> Ice                                           |           |            |                                        |
| Molecular                   | <input checked="" 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: TRACERS + MARKERS  
E. COLI

Field ID/WIN: G1SW0057

Site Name: Alligator Creek @ Glen Oak

Signature: [Signature] Date: 3-14-18

SMPO31218-FB / SMP031318-FB

Enter Field Parameters, Verify Station ID In LIMS DMT: SM 04/04/2018

QC Station ID, Field Parameters In LIMS DMT: SM 04/09/2018 SM 04/25/2018

Scan/Save Field Sheets SM 06/06/2018  
(Initials/Date)

Migrate Data to WIN: SM 06/06/2018 5369  
(Initials/Date)

Verify Data In WIN: \_\_\_\_\_  
(Initials/Date)

Request Number: RQ-2018-03-12-11

Pinellas WBIDS By June

# Florida Department of Environmental Protection Central Laboratory Submittal Form

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last revised Jan 25, 2018

Customer: SW-DIST

Requester: Benjamin Paswater

Field Report Prepared By:

Project ID: SMP

Collected By:

Sampling Agency:

|            |                                                             |                                                                           |                                                                         |                                              |                                                                            |                                         |  |                               |
|------------|-------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------|--|-------------------------------|
| Location   |                                                             | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date <u>3-14-18</u> Time <u>1040</u> |                                              | Eastern<br>Central                                                         | Composite end<br>Date _____ Time _____  |  | Bottle Group(s)<br>(See pg 2) |
| Field ID   | Field ID/WIN<br><b>G1SW0062</b>                             | Matrix (type, e.g., Salt, Fresh, etc)                                     |                                                                         | Diss. Oxygen<br><u>8.42</u>                  | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)           |  | B/C                           |
| WIN/S      |                                                             | Temp (C)<br><u>15.78</u>                                                  | pH<br><u>7.71</u>                                                       | Sample Depth<br><u>0.3</u>                   | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m       | Sp. Conductance<br>(umho/cm) <u>578</u> |  |                               |
| Site Name: | Alligator Creek @ Old Coachman                              | Salinity (ppt)<br><u>0.28</u>                                             |                                                                         | Comments<br><u>E. COLI DROPPED OFF 2 AEL</u> |                                                                            |                                         |  |                               |
| Latitude   | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |                                                                           |                                                                         |                                              |                                                                            |                                         |  |                               |

  

|            |                                                             |                                                                           |                                                                         |                                              |                                                                            |                                         |  |                 |
|------------|-------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------|----------------------------------------------------------------------------|-----------------------------------------|--|-----------------|
| Location   |                                                             | <input type="checkbox"/> Comp<br><input checked="" type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date <u>3-14-18</u> Time <u>1020</u> |                                              | Eastern<br>Central                                                         | Composite end<br>Date _____ Time _____  |  | Bottle Group(s) |
| Field ID   | Field ID/WIN<br><b>G1SW0057</b>                             | Matrix (type, e.g., Salt, Fresh, etc)                                     |                                                                         | Diss. Oxygen<br><u>7.88</u>                  | <input checked="" type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)           |  | B/C             |
| WIN/S      |                                                             | Temp (C)<br><u>17.19</u>                                                  | pH<br><u>7.81</u>                                                       | Sample Depth<br><u>0.3</u>                   | <input type="checkbox"/> ft<br><input checked="" type="checkbox"/> m       | Sp. Conductance<br>(umho/cm) <u>525</u> |  |                 |
| Site Name: | Alligator Creek @ Glen Oak                                  | Salinity (ppt)<br><u>0.25</u>                                             |                                                                         | Comments<br><u>E. COLI DROPPED OFF 2 AEL</u> |                                                                            |                                         |  |                 |
| Latitude   | <input type="checkbox"/> dd<br><input type="checkbox"/> dms |                                                                           |                                                                         |                                              |                                                                            |                                         |  |                 |

  

|              |                                                             |                                                                |                                                             |                |                                                                 |                                        |  |                 |
|--------------|-------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------|----------------|-----------------------------------------------------------------|----------------------------------------|--|-----------------|
| Location     |                                                             | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date _____ Time _____    |                | Eastern<br>Central                                              | Composite end<br>Date _____ Time _____ |  | Bottle Group(s) |
| Field ID     |                                                             | Matrix (type, e.g., Salt, Fresh, etc)                          |                                                             | Diss. Oxygen   | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)          |  |                 |
| WIN/STORET # |                                                             | Temp (C)                                                       | pH                                                          | Sample Depth   | <input type="checkbox"/> ft<br><input type="checkbox"/> m       | Sp. Conductance<br>(umho/cm)           |  |                 |
| Latitude     | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude                                                      | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity (ppt) | Comments                                                        |                                        |  |                 |

  

|              |                                                             |                                                                |                                                             |                |                                                                 |                                        |  |                 |
|--------------|-------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------------------|----------------|-----------------------------------------------------------------|----------------------------------------|--|-----------------|
| Location     |                                                             | <input type="checkbox"/> Comp<br><input type="checkbox"/> Grab | Collection (comp begin or grab)<br>Date _____ Time _____    |                | Eastern<br>Central                                              | Composite end<br>Date _____ Time _____ |  | Bottle Group(s) |
| Field ID     |                                                             | Matrix (type, e.g., Salt, Fresh, etc)                          |                                                             | Diss. Oxygen   | <input type="checkbox"/> mg/L<br><input type="checkbox"/> % sat | Total Res. Chlorine<br>(mg/L)          |  |                 |
| WIN/STORET # |                                                             | Temp (C)                                                       | pH                                                          | Sample Depth   | <input type="checkbox"/> ft<br><input type="checkbox"/> m       | Sp. Conductance<br>(umho/cm)           |  |                 |
| Latitude     | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Longitude                                                      | <input type="checkbox"/> dd<br><input type="checkbox"/> dms | Salinity (ppt) | Comments                                                        |                                        |  |                 |

|                  |           |                 |                            |              |           |
|------------------|-----------|-----------------|----------------------------|--------------|-----------|
| Relinquished By: | Date/Time | Shipping Method | Number of Coolers Shipped: | Received By: | Date/Time |
|------------------|-----------|-----------------|----------------------------|--------------|-----------|

|          |                                                                                    |                |                               |               |               |                                     |   |
|----------|------------------------------------------------------------------------------------|----------------|-------------------------------|---------------|---------------|-------------------------------------|---|
| Group: A | Bottle Type:                                                                       | P-1L           | # of Bottles: 2               | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1 |
|          | ALKALINITY<br>TURBIDITY<br>W-CL-IC<br>W-COLOR<br>W-F<br>W-SO4-IC<br>W-TDS<br>W-TSS |                |                               |               |               |                                     |   |
| Group: A | Bottle Type:                                                                       | BP-1L          | # of Bottles: 2               | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 1 |
|          | CHLSUITE-W                                                                         |                |                               |               |               |                                     |   |
| Group: A | Bottle Type:                                                                       | P-500ML        | # of Bottles: 2               | Preservative: | ICE And H2SO4 | Enter Number of Bottles Sent to Lab | 1 |
|          | W-NH3<br>W-NO2NO3<br>W-S-A-TP<br>W-TKN<br>W-TOC                                    |                |                               |               |               |                                     |   |
| Group: A | Bottle Type:                                                                       | P-125ML        | # of Bottles: 2               | Preservative: | FILTER-ICE    | Enter Number of Bottles Sent to Lab | 1 |
|          | W-PO4-F                                                                            |                |                               |               |               |                                     |   |
| Group: B | Bottle Type:                                                                       | QPCR-P-250ML   | # of Bottles: <del>2</del> 16 | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 8 |
|          | PCR-FILTER, PCR-HA183 (2)                                                          |                |                               |               |               |                                     |   |
| Group: B | Bottle Type:                                                                       | BG-500ML       | # of Bottles: 3               | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 3 |
|          | W-E8321-DI<br>W-E8321-MS                                                           |                |                               |               |               |                                     |   |
| Group: C | Bottle Type:                                                                       | P-120ML-WC-THI | # of Bottles: 5               | Preservative: | ICE           | Enter Number of Bottles Sent to Lab | 5 |
|          | SWD-AEL-EC<br>DROPPED AND 2 AEL                                                    |                |                               |               |               |                                     |   |



Advanced  
Environmental Laboratories, Inc.

☐ **Gainesville:** 4965 SW 41st Blvd. • Gainesville, FL 32608 • 352.377.2349 • Fax 352.395.6639  
☐ **Jacksonville:** 6681 Southpoint Pkwy. • Jacksonville, FL 32216 • 904.363.9350 • Fax 904.363.9354  
☐ **Miramar:** 10200 USA Today Way • Miramar, FL 33025 • 954.889.2286 • Fax 954.889.2281  
☐ **Tallahassee:** 2639 North Monroe Street, Suite D • Tallahassee, FL 32303 • 850.219.6274 • Fax 850.219.6275  
☒ **Tampa:** 9610 Princess Palm Ave. • Tampa, FL 33619 • 813.630.9616 • Fax 813.630.4327

|                                                                                              |  |                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |
|----------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|--|
| Client Name: FDEP SW Dist.                                                                   |  | Project Name: SMP                                                                            |  | <div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">BOTTLE SIZE &amp; TYPE</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">Analysis Required</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">E. COLI</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">ICE</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">LABORATORY I.D. #</div> </div> |  |  |  |  |  |  |  |  |  |  |  |
| Address: 13051 N. Telecom Pkwy. Temple Terrace FL 33637                                      |  | P.O. Number: AF315E                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |
| Phone: 813-470-5770                                                                          |  | Project Address:                                                                             |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |
| Contact: Judy Ashton 813-470-5772                                                            |  | Special Instructions:<br>RQ-2018-03-12-11                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |
| Sampled By:                                                                                  |  |                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |
| Turn Around Time: <input checked="" type="checkbox"/> STANDARD <input type="checkbox"/> RUSH |  | <input type="checkbox"/> ADaPT <input type="checkbox"/> EQUIS <input type="checkbox"/> Other |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |
| Page: 1 of 1                                                                                 |  |                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |  |  |  |

  

| SAMPLE ID                                                                                                       | SAMPLE DESCRIPTION                        | Grab Comp | SAMPLING |      | MATRIX | NO. COUNT | PRES | ER | VATI | ON |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------|----------|------|--------|-----------|------|----|------|----|--|--|--|--|--|--|--|--|--|--|--|--|--|
|                                                                                                                 |                                           |           | DATE     | TIME |        |           |      |    |      |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Field ID/WIN<br>G5SW0129<br>   | Site Name: Cedar Creek @ Pinehurst        |           | 3-14-18  | 0945 | SW     | 1         |      |    |      |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Field ID/WIN<br>G1SW0097<br>   | Site Name: Long Branch @ Michigan         |           | 3-14-18  | 1055 | "      | 1         |      |    |      |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Field ID/WIN<br>G1SW0098<br>   | Site Name: Long Branch @ @ Appt. Walkway  |           | 3-14-18  | 1110 | "      | 1         |      |    |      |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Field ID/WIN<br>G1SW0062<br> | Site Name: Alligator Creek @ Old Coachman |           | 3-14-18  | 1040 | "      | 1         |      |    |      |    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Field ID/WIN<br>G1SW0057<br> | Site Name: Alligator Creek @ Glen Oak     |           | 3-14-18  | 1020 | "      | 1         |      |    |      |    |  |  |  |  |  |  |  |  |  |  |  |  |  |

  

Matrix Code: WW = wastewater SW = surface water GW = ground water DW = drinking water O = oil A = air SO = soil SL = sludge Preservation Code: I = ice H = (HCl) S = (H2SO4) N = (HNO3) T = (Sodium Thiosulfate)

Received on Ice ☐ Yes ☐ No ☐ Temp taken from sample ☐ Temp from blank ☐ Where required, pH checked Temperature when received \_\_\_\_\_ (in degrees celcius)

DCN: AD-051 Form last revised 04/30/2015 Device used for measuring Temp by unique identifier (circle IR temp gun used) J: 9A G: LT-1 LT-2 T: 10A A: 3A M: 3A S: 1V

|                                                                                                     |               |           |                                                                                                  |               |            |
|-----------------------------------------------------------------------------------------------------|---------------|-----------|--------------------------------------------------------------------------------------------------|---------------|------------|
| Relinquished by:  | Date: 3/14/18 | Time: 210 | Received by:  | Date: 3/14/18 | Time: 1216 |
|-----------------------------------------------------------------------------------------------------|---------------|-----------|--------------------------------------------------------------------------------------------------|---------------|------------|

**FOR DRINKING WATER USE:**

PWS ID: \_\_\_\_\_