FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION
STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2019

Data Qualified? Yes / No

WIN Station Name: UNNAMED DITCH TO DEEP CREEK AT REVELS FARM **Date:** ~~01/ /2019~~ 3/19/19 (mm/dd/yyyy)

WIN/ Field ID: G2NE0001 **WBID:** 2563 **Latitude:** 29.69883 (Decimal Degrees)

County: Putnam **ORG ID:** 21FLA **Longitude:** -81.46319 (Decimal Degrees)

Receiving Body of Water: SJR **RQ-2019-** ~~01-07-44~~ 02-18-10

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
B. V.	✓		✓		
T O'Connor		✓		✓	✓

Sampling Equipment
- ☑ Sample Container ☐ Van Dorn ☑ Pole
- ☐ Carboy ☐ Syringe
- ☐ Dipper ☐ Other
- Depth Measured with YSI #3
- Equipment ID

Collection Method
- ☐ Wading ☐ Canoe/Kayak
- ☑ From Shore ☐ Electric Motor
- ☐ Other ☐ Gasoline Motor

Water Level: Dry/ Pooled/ Low (Normal) / High / Flooded **Meter ID#** YSI #3 **Matrix:** (Fresh) / Marine / DI

Photos: Yes / (No) **Flow:** No Flow / Intestital / (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	920	0.1	0.05	VOB	9.08	92.7	7.46	1.47	2818	15.63 ✓
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	☐ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	☐ Ice ☐ H_2SO_4			☐ <2
Metals	☐ W-ICPMS ☐ W-ICP	☐ Ice ☐ HNO_3			☐ <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-Cl-IC / W-COLOR / W-SO4-IC / W-TDS	☐ Ice			
Physical/Aggregate (Marine)	☐ Alkalinity / W-BR-IC / 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-BacR ☐ PCR-GULL2 ☐ PCR-HF183 ☐ PCR-DG3 ☐ PCR-GFD	☐ Ice			
Tracers	☐ W-E8321-DI ☐ W-E8321-MS	☐ Ice			
Pesticides	☐ W-PSNP-TQ ☐ W-CT-CL-R ☐ W-E8321-DI ☐ W-PCL-SQ-R ☐ WE8321-MS ☐ W-CARB-AA	☐ Ice			
Phytoplankton	☐ DTY-QN-C ☐ PKD-QN-C				

Place Preservative Sticker(s) Here (If Available)

Notes:

WIN ID/Field ID: G2NE0001

UNNAMED DITCH TO DEEP CREEK AT REVELS FARM

Signature: B. V. **Date:** 3/19/19

LIMS EVENT ID: 2019-05-2204 **WIN Import ID:**

Enter Field Parameters, Verify Station ID In LIMS DMT: JL 3/25/19 (Initials/Date) **QC Station ID, Field Parameters In LIMS DMT:** BV 3/28/19 (Initials/Date)

Scan/Save Field Sheets BV 3/28/19 (Initials/Date) **Migrate Data to WIN:** (Initials/Date) **Verify Data In WIN:** (Initials/Date)

Request Number: RQ-2019-03-18-10

Hastings

Florida Department of Environmental Protection
Central Laboratory Submittal Form

Customer: NE-DIST

Project ID: SMP

Requester: Jeremy M. Parrish

Field Report Prepared By: B. Davis

Collected By: P. O'Connor

Sampling Agency: FDEP/NE ROC

WIN ID/Field ID: G2NE0001

UNNAMED DITCH TO DEEP CREEK AT REVELS FARM

Latitude ☐dd ☐dms	Longitude ☐dd ☐dms	☐ Comp ☐ Grab	Collection (comp begin or grab) Date 3-19-2019 Time 0920 Eastern Central	Composite end Date Time	Bottle Group(s) (See pg 2)	
		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 9.08 * ☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
		Temp (C) 15.6	pH 7.46	Sample Depth 0.05 ☐ ft ☒ m	Sp. Conductance (umho/cm) 2818	A
		Salinity (ppt) 1.47	Comments * Questionable reading - probe issues			

WIN ID/Field ID: 20030558

HASTINGS OUTLET AT SR 207

Latitude ☐dd ☐dms	Longitude ☐dd ☐dms	☐ Comp ☐ Grab	Collection (comp begin or grab) Date 3-19-2019 Time 1000 Eastern Central	Composite end Date Time	Bottle Group(s)	
		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen 6.74 * ☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
		Temp (C) 16.0	pH 7.21	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 1845	A
		Salinity (ppt) 0.94	Comments * Questionable reading - probe issues			

WIN ID/Field ID: 20030425

DOG BRANCH AT CR 207A

Latitude ☐dd ☐dms	Longitude ☐dd ☐dms	☐ Comp ☐ Grab	Collection (comp begin or grab) Date 3-19-2019 Time 1020 Eastern Central	Composite end Date Time	Bottle Group(s)	
		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen Probe failure ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
		Temp (C) 16.1	pH 6.59	Sample Depth 0.3 ☐ ft ☒ m	Sp. Conductance (umho/cm) 2722	A
		Salinity (ppt) 1.14	Comments pH probe reading 0.0			

WIN ID/Field ID: 20030844

COW CREEK @ E RIVER RD

Latitude ☐dd ☐dms	Longitude ☐dd ☐dms	☐ Comp ☐ Grab	Collection (comp begin or grab) Date Time Eastern Central	Composite end Date Time	Bottle Group(s)	
		Matrix (type, e.g., Salt, Fresh, etc)	Diss. Oxygen ☐ mg/L ☐ % sat	Total Res. Chlorine (mg/L)		
		Temp (C)	pH	Sample Depth ☐ ft ☐ m	Sp. Conductance (umho/cm)	
		Salinity (ppt)	Comments FLOODED - DID NOT SAMPLE			

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time
B. Davis	3-19-2019 1240	N/A	N/A		

Group: A Bottle Type: P-250ML-WI-THI # of Bottles: 4 Preservative: ICE Enter Number of Bottles Sent to Lab 3

NE-ALS-ECQ

Sent to ALS lab

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

ALS Environmental

9143 Philips Highway, Suite 200 Jacksonville, FL 32256 / Ph(904) 739-2277 / FAX (904) 739-2011

SR #

ALS Contact: Jerry Allen

Client Name	Project Number
FDEP-NE ROC	RQ ~~2018~~ 2019 -03-18-10
Report To	Report CC
Dep-Overflowmicro@dep.state.fl.us	J Parrish
Company/Address	
8800 Baymeadows Way W Jacksonville, Fl 32256	
Phone #	FAX #
904-256-1541	
Sampler's Signature	Sampler's Printed Name
B-D-	Brian Davis

ANALYSIS REQUESTED (Include Method Number and Container Preservative)

CLIENT SAMPLE ID	LAB ID	SAMPLING DATE	SAMPLING TIME	Matrix	NUMBER OF CONTAINERS	E.Coli	Enterocool	Preservative	REMARKS
20030425		3/19/19	1020	SW	1	1			
20030558		↓	1000	↓	1	1			
G2NE0001		↓	920	↓	1	1			

Preservative Key
0. None
1. HCL
2. HNO3
3. H2SO4
4. NaOH
5. Zn. Acetate
6. MeOH
7. NaHSO4
8. Other ICE

Special Instructions/Comments: **Email Report to: Dep-Overflowmicro@dep.state.fl.us**

1.3

TURNAROUND REQUIREMENTS

___ RUSH (SURCHARGES APPLY)
X STANDARD

REQUESTED FAX DATE
N/A

REQUESTED REPORT DATE
N/A

REPORT REQUIREMENTS

___ I. Results Only
___ II. Results + QC Summaries (LCS, DUP, MS/MSD as required)
___ III. Results + QC and Calibration Summaries
___ IV. Data Validation Report with Raw Data

Edata ___ Yes ___ No

INVOICE INFORMATION

P.O. # B10739

Bill to:

Relinquished By	Received By	Relinquished By	Received By	Relinquished By	Received By
Signature B-D-	Signature	Signature	Signature	Signature	Signature
Printed Name Brian Davis	Printed Name Levi Mason	Printed Name	Printed Name	Printed Name	Printed Name
Firm FDEP-DEAR	Firm ALS	Firm	Firm	Firm	Firm
Date/Time 3/19/19 1238	Date/Time 3/19/19 12:42	Date/Time	Date/Time	Date/Time	Date/Time