

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

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

Meter ID: Desi RQ- 2019-11-18-63 Project: Open Cr/LSTK West

- 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.

Temperature (Quarterly) FT 1400

Date of Last Temperature Verification 10/19

DO DEP SOP FT 1500	Name	Date	Time CT-ET	Temp °C	Baro-meter mmHg	D.O. Chart mg/L	Meter D.O. mg/L	% DO	Probe Charge	Probe Gain	Pass / Fail	Lab / Field
Calibr.	Brian Davis	11/19/19	741	21.1	758.6	8.9	✓	99.8	✓	1.03	P/F	L/F
ICV	↓	↓	744	21.5	758.7	8.8	8.80	99.7	✓	1.03	(P)F	(L)F
CCV	↓	↓	1455	19.6	758.2	9.1	9.05	98.7	✓	1.03	(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 (Pro DSS 0.75 to 1.50); 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.	Brian Davis	11/19/19	746	190711B	7/20	1000	1000	P/F	L/F
ICV	↓	↓	749	190711C	7/20	50,00	50,581	(P)F	(L)F
CCV	↓	↓	1459	190711B	7/20	1000	992	(P)F	(L)F
CCV								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	Temp °C	Meter reading SU	mV	Pass / Fail	Lab / Field
Calibr.	Brian Davis	11/19/19	751	2902778	1/21	7.01	22.9	7.01	-30.2	P/F	L/F
Calibr.			753	2907D62	7/21	4.0	23.0	4.00	149.9	P/F	L/F
Calibr.			755	2904E91	10/20	10.02	23.0	10.02	-202.6	P/F	L/F
ICV			757	2902778	1/21	7.01	23.0	7.05	-29.9	(P)F	(L)F
CCV			1500	2904E91	10/20	10.02	22.7	10.02	-23.1	(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)

Does meter have a depth sensor that will be used to measure total depth & sample depth? YES / NO / NA (not surf. water project)

If YES, complete daily Calibr. & ICV below and list date of last quarterly depth verification: _____

If NO, what will be used? (circle one) Secchi Disk Line / Sonar Unique ID: _____; Date of last verification: 10/19

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	Brian Davis	11/19/19	759	0.00	0.00	(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:

2 RQs / 1 Cal sheet



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2019

Data Qualified?

Yes ☒ No ☐

WIN Station Name: Open creek 200m above mouth

Date: 11/19/19
(mm/dd/yyyy)

WIN/ Field ID: G2NE1178

WBID: 2299A

Latitude: 30.261772

County: Pval

ORG ID: 21FLA

Longitude: 81.430511
(Decimal Degrees)

Receiving Body of Water: Intra coastal waterway

RQ-2018- 2019-11-18-63

Sampling Team Members				WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check	Sampling Equipment				
<u>J. Smith</u> <u>B. Davis</u>				☒	☒	☒	☒	☒	☒ Sample Container	☐ Van Dorn	☐ Pole		
									☐ Carboy	☐ Syringe			
									☐ Dipper	☐ Other			
									Depth Measured with <u>Sonar</u>				
									Equipment ID <u>Out6 #3</u>				
									Collection Method				
									☐ Wading	☐ Canoe/Kayak			
									☐ From Shore	☐ Electric Motor			
									☐ Other	☒ Gasoline Motor			
Water Level: Dry / Pooled / <u>Low</u> / Normal / High / Flooded				Meter ID# <u>DeSt</u>				Matrix: Fresh / <u>Marine</u> / DI					
Photos: Yes / <u>No</u>				Flow: No Flow / Intestinal / <u>Flowing</u> / NA				Tide: Rising / <u>Falling</u> / Slack / NA				Tide Times: High Low <u>9:00</u>	
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°)			
<u>EST</u>	<u>9:10</u>	<u>2.3</u>	<u>0.3</u>	<u>1.4</u>	<u>5.58</u>	<u>64.8</u>	<u>7.11</u>	<u>22.44</u>	<u>35,580</u>	<u>16.0</u>			
<u>CEN</u>			<u>1.7</u>		<u>5.58</u>	<u>66.4</u>	<u>7.33</u>	<u>24.22</u>	<u>38,102</u>	<u>16.8</u>			
Biological Samples Collected: <u>None</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		☒ W-NH3 / ☒ W-NO2NO3 / ☒ W-TKN / ☒ W-TOC / ☒ W-S-A-TP				☒ Ice ☒ H2SO4		<u>SA9203100</u>	<u>7/22/20</u>	☒ <2			
Metals		☒ W-ICPMS ☒ W-ICP				☒ Ice ☒ HNO3		<u>NA912900</u>	<u>5/9/20</u>	☒ <2			
Filtered Nutrients		☒ W-PO4-F ☒ Field Filtered 0.45 µm Filter				☒ Ice		<u>R9BA66875</u>					
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											

Notes:

WIN ID/Field ID:



G2NE1178

Open creek 200 meters above mouth

Signature: B. Davis

Date: 11/19/19

LIMS EVENT ID:

WIN Import ID:

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)

ICW Boat

Central Laboratory Submittal Form

last revised Jan 25, 2018

Customer: NE-DIST

Requester: Jeremy M. Parrish

Field Report Prepared By: Brian Davis

Project ID: SMP

Collected By: B Davis, J ParrishSampling Agency: DEAR NEP

Location	WIN ID/Field ID:		☐ Comp ☒ Grab	Collection (comp begin or grab) Date <u>11/19/19</u> Time <u>910</u>	☒ Eastern ☐ Central	Composite end Date _____ Time _____	Bottle Group(s) (See pg 2)
Field ID	G2NE1178		Matrix (type, e.g., Salt, Fresh, etc) <u>Salt</u>		Diss. Oxygen <u>5.58</u>	☒ mg/L ☐ % sat	Total Res. Chlorine (mg/L)
WIN/STO	Open creek 200 meters above mouth		Temp (C) <u>16.0</u>	pH <u>7.11</u>	Sample Depth <u>0.3</u>	☐ ft ☒ m	Sp. Conductance (umho/cm) <u>35,580</u>
Latitude	☐ dd ☐ dms	Longitude	☐ dd ☐ dms	Salinity (ppt) <u>22.44</u>	Comments		

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

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

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

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

Relinquished By: <u>B = P =</u>	Date/Time: <u>11/19/19 1600</u>	Shipping Method: <u>FedEx</u>	Number of Coolers Shipped: <u>2</u>	Received By:	Date/Time:
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Group: A	Bottle Type:	P-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	ALKALINITY TURBIDITY W-BR-IC W-F W-TSS						
Group: A	Bottle Type:	BP-1L	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	CHLSUITE-W						
Group: A	Bottle Type:	P-120ML-WC-THI	# of Bottles: 2	Preservative:	ICE	Enter Number of Bottles Sent to Lab	2 to ALS
	NE-ALS-ENQ						
Group: A	Bottle Type:	QPCR-P-500ML	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	PCR-HF183						
Group: A	Bottle Type:	BG-500ML	# of Bottles: 1	Preservative:	CH2CICOOH Pre-Preserved	Enter Number of Bottles Sent to Lab	1
	W-CARB-AA						
Group: A	Bottle Type:	BG-500ML	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4
	W-CT-CI-R W-PCL-SQ-R						
Group: A	Bottle Type:	BG-500ML	# of Bottles: 1	Preservative:	ICE	Enter Number of Bottles Sent to Lab	1
	W-E8321-DI W-E8321-MS						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	HNO3	Enter Number of Bottles Sent to Lab	1
	W-ICP W-ICPMS						
Group: A	Bottle Type:	P-500ML	# of Bottles: 1	Preservative:	ICE And H2SO4	Enter Number of Bottles Sent to Lab	1
	W-NH3 W-NO2NO3 W-S-A-TP W-TKN W-TOC						
Group: A	Bottle Type:	P-125ML	# of Bottles: 1	Preservative:	FILTER-ICE	Enter Number of Bottles Sent to Lab	1
	W-PO4-F						
Group: A	Bottle Type:	BG-1L	# of Bottles: 4	Preservative:	ICE	Enter Number of Bottles Sent to Lab	4

Group: A Bottle Type: BG-1L # of Bottles: 4 Preservative: ICE Enter Number of Bottles Sent to Lab 4

W-PSNP-TQ

CHAIN OF CUSTODY / LABORATORY ANALYSIS REQUEST FORM

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

SR #

ALS Contact

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