



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PROGRAM FIELD SHEET

January 2020

Meter Passed End
of Day CCV
Yes / No

WIN Station Name: Cow Slough @ Farabee Rd

Date: 04/01/2020
(mm/dd/yyyy)

WIN/ Field ID: G3SD0160

WBID: 1964

Latitude: 27.03381

(Decimal Degrees)

County: DeSoto

ORG ID: 21FLFTM

Longitude: -81.69051

(Decimal Degrees)

Receiving Body of Water: ^{NR} Lake Okeechobee ^{PR} Peace River

RQ-2020- 03-30-50

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Nicole Reistad	X	X	X	X	X
John Barrington	X	X	X	X	X

Sampling Equipment	
☐ Sample Container	☐ Van Dorn
☒ Syringe	☐ Pole
☐ Dipper	☐ Other
Depth Measured with <u>secchi disk</u>	
Equipment ID	

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>SNEK</u>	
Photos: Yes / <u>No</u>	Flow: No Flow / <u>Flowing</u> / NA	Tide: Rising/ Falling/ Slack/ <u>NA</u>	Tide Times: High Low
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#:
Notes:			

Duplicate Sample

Time Zone: EST CEN Time: _____	Field ID: _____ (WIN ID_DUP)
WIN DMT Activity ID: _____	

Blank

Time Zone: EST CEN Time: _____	Field ID: _____ (Blank Type_DDMMYYYY)
DI Source: _____	Location: _____
☐ Field Blank ☐ Equipment Blank ☐ Field Cleaned Equipment Blank	Equipment ID: _____

Signature: <u>Nicole Reistad</u>	Date: <u>04/01/2020</u>
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LIMS EVENT ID: _____	WIN Import ID: _____
Enter Field Parameters, Verify Station ID In LIMS DMT: _____ (Initials/Date)	QC Station ID, Field Parameters In LIMS DMT: _____ (Initials/Date)
Scan/Save Field Sheets _____ (Initials/Date)	Migrate Data to WIN: _____ (Initials/Date)
	Verify Data In WIN: _____ (Initials/Date)



RQ-2020-

Customer:

Project ID:

Collected By:

Field Report Prepared By:

Sampling Agency:

Field ID/WIN ID



G3SD0160

Location



Cow Slough @FarabeeRoad

Comments:

Contains: 1:1 HNO₃
Lot No.: NA9301040
Expires: 10/28/20
See Safety Data Sheet (SDS)

Contains: 1:1 H₂SO₄
Lot No.: SA9301030
Expires: 10/28/20
See Safety Data Sheet (SDS)

Contains: 1:1 H₂SO₄
Lot No.: SA9301030
Expires: 10/28/20
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Contains: 1:1 H₂SO₄
Lot No.: SA9301030
Expires: 10/28/20
See Safety Data Sheet (SDS)

Matrix: Fresh / Marine

(Check one)

☒ GRAB☐ COMPOSITE

Date	Time	DO (mg/L)	DO (%SAT)	Temp. (C°)	pH	Sample Depth (m)	Secchi Disk (m)	Total Depth (m)	Sp COND (µmhos/cm)	Salinity (PPTH)
04/01/20	1135	6.59	83.1	27.2	7.31	0.25	0.5	0.5	714	0.35
(EST) CST							☒ VOB (S)			

Cental Lab please use top row for login purposes

EST / CST										
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Parameter Suite	Parameter Methods	Preservation	pH Check	# Bottles sent to Lab	Bottle Group
Preserved Nutrients (P-500ML)	☒ W-NH ₃ / ☒ W-NO ₂ NO ₃ / ☒ W-TKN / ☒ W-TOC / ☒ W-S-A-TP	☒ Ice ☒ H ₂ SO ₄ *	☒ <2		
	Lot # SA9301030 Exp: 10/28/20				
Metals (P-500ML)	☒ W-ICPMS ☒ W-ICP ☒ W-HARD	☒ Ice ☒ HNO ₃ *	☒ <2		
	Lot # NA9301040 Exp: 10/28/20				
Filtered Nutrients (P125ML)	☐ W-PO4-F ☐ Field Filtered 0.45 µm Filter	☐ Ice			
	Filter Lot # Exp:				
	Syringe Lot # Exp:				
Chlorophyll (BP-1L)	☐ CHLSUITE-W	☐ Ice			
Physical/Aggregate (Fresh) (P-1L)	☒ Alkalinity / ☒ W-F / ☒ W-TSS / ☒ TURBIDITY / ☒ W-CI-IC / ☒ W-COLOR / ☒ W-SO4-IC / ☒ W-TDS	☒ Ice			
Physical/Aggregate (Marine) (P-1L)	☐ Alkalinity / ☐ W-BR-IC / ☐ W-F / ☐ W-TSS / ☐ TURBIDITY	☐ Ice			
Macroinvertebrates (PJ-2L)	☐ MI-FW-QLDC	☐ Formalin			
Periphyton (PT-50ML)	☐ ALGAE-ID	☐ Ice			
Microbiology (Contract Lab Bottle)	☒ E.Coli ☐ F.Coli ☐ Enterococci	☒ Ice			
	Contract Lab <i>Benchmarks</i>				
Molecular (QPCR-P-500ML)	☐ PCR-HF183 ☐ PCR-BacR ☐ PCR-DG3	☐ Ice			
	☐ PCR-GULL2 ☐ PCR-GFD				
Tracers (BG-500ML)	☐ W-E8321-DI ☐ W-E8321-MS	☐ Ice			
Pesticides (BG-500ML) (BG-1L)	☐ W-E8321-DI ☐ W-E8321-MS ☐ W-PSNP-TQ ☐ W-CT-CL-R	☐ Ice			
	☐ W-PCL-SQ-R ☐ W-CARB-AA (5 ml of MCAA** Buffer Solution)				
		☐ Ice			

Relinquished By:	Date/Time	Shipping Method	Number of Coolers Shipped:	Received By:	Date/Time:
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*2.0 ml of Preservative used unless noted otherwise.

**MCAA: Monochloroacetic acid buffer solution

Email Submittal form to : lab.receiving@floridadep.gov.