



FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION STRATEGIC MONITORING PLAN FIELD SHEET

January 2020

Meter Passed End
of Day CCV
Yes / No

WIN Station Name: MILLS CREEK AT US 301/US1

Date: 7/28/2021

WIN/Field ID: 19020048

WBID: 2120B

ENR:

Latitude: 30.638913

County: NASSAU

Org ID: 21FLA

Longitude: -81.863061

Receiving Body of Water: Nassau river

RQ- 2021-07-26-23

Sampling Team Members		WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
☒	Jeremy Parrish	x		x		
☒	Kimberly Appleby		x		x	x
☐						
☐						

Sampling Equipment	
☒ Sample Container	☐ Carboy
☐ Dipper	☐ Van Dorn
☐ Syringe	☒ Pole
Depth measured with: Meter	
Secchi Equipment ID:	
Collection Method	
☐ Wading	☐ Canoe/Kayak
☐ From Shore	☐ Electric Motor
☒ Other Bridge	☐ Gasoline Motor

Water Level: ☒ Normal ☐ Low ☐ High ☐ Dry ☐ Pooled ☐ Flooded		Meter ID# BRUCE	
Photos: NO	Flow: FLOW	Tide:	Tide Times: High: Low:
Biological Samples Collected: ☒ None ☐ HA ☐ SCI ☐ RPS ☐ Algae ID ☐ LVS ☐ LVI Other:			
SBIO ID Numbers:			
Notes: Type text here SUNNY HOT			

Duplicate Sample

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

Blank

Time Zone:	Time:	Field ID:	(Blank Type_DDDMMYYY)
DI Source:	Location:		
DI Type:	Equipment ID:		
DI Container (Name/ID):		DI Container Type:	

LIMS EVENT ID: WIN Import ID: 28325

Enter Field Parameters, Verify Station ID In LIMS DMT: QC Station ID, Field Parameters In LIMS DMT: BD 08/17/2021

Scan/Save Field Sheets: Migrate Data to WIN: JP 8/27/21 Verify Data In WIN:

(Initials/Date) (Initials/Date) (Initials/Date)



RQ-2021-07-26-23

Customer: WQAP

Project ID: SMP

Collected By: Jeremy Parrish, Kimberly Appleby

Field Report Prepared By: Jeremy Parrish

Sampling Agency: FDEP

Place Label Here

WIN ID/Field ID:



19020048

Location: MILLS CREEK AT US 301/US1

Comments: Microbiology sample(s) submitted to contract laboratory

Matrix: Fresh

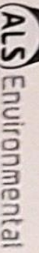
(Check one)

☒ 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)
	1150 EST	4.13	51	25.8	5.22	0.3	0.4 ☐ VOB (S)	1.17	53.6	0.02
7/28/2021										
	EST									
Parameter Suite		Parameter Methods				Preservation		pH Check	# Bottles sent to Lab	Bottle Group
Preserved Nutrients (P-500ML)		☐ W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP				☐ Ice ☐ H2SO4*		☐ <2		
		Lot #		Exp:						
Metals (P-500ML)		☒ W-ICPMS ☒ W-ICP ☒ W-HARD				☒ Ice ☒ HNO3*		☒ <2	1	.B
		Lot #	Na1105100	Exp:	6/7/22					
Filtered Nutrients (P125ML)		☐ W-PO4-F ☐ Field Filtered 0.45 µm Filter				☐ Ice				
		Filter Lot #								
		Syringe Lot #								
Chlorophyll (BP-1L)		☐ CHLSUITE-W				☐ Ice				
Physical/Aggregate (Fresh) (P-1L)		☐ Alkalinity / W-F / W-TSS / TURBIDITY / W-Cl-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 Lot #			☐ Formalin				
Periphyton (PT-50ML)		☐ ALGAE-ID				☐ Ice				
Microbiology (Contract Lab Bottle)		☒ E Coli ☐ F Coli ☐ Enterococci ☒ Contract Lab				☒ Ice			1	.B
Molecular (QPCR-P-500ML)		☐ PCR-HF183 ☐ PCR-BacR ☐ PCR-DG3 ☐ PCR-GULL2 ☐ PCR-GFD ☐				☐ Ice				
Tracers (BG-500ML)		☐ W-E8321-DI ☐ W-E8321-MS				☐ Ice				
Pesticides (BG-500ML) (BG-1L)		W-E8321-DI	WE8321-MS	W-PSNP-TQ	W-CT-CL-R	☐ Ice				
Phytoplankton/Periphyton		W-PCL-TQ-R	W-CARB-AA (5 ml of MCAA** Buffer Solution)	DTY-QN-C	PKD-QN-BV	☐ Ice				
Name: Jeremy Parrish Kimberly Appleby					Signature: <i>Jeremy Parrish</i>				Date: 7/28/2021	

*2.0 ml of Preservative used unless noted otherwise.

**MCAA: Monochloroacetic acid buffer solution



SR #	AI S Contact: Mandy Sullivan

Page 1 of 1

FDEP-NE ROC				Project Number		ANALYSIS REQUESTED (Include Method Number and Container Preservative)																					
Report To				Report CC		Preservative Key																					
Dep-Overflowmicro@dep.state.fl.us				Report CC																							
Company/Address				Report CC																							
8800 Baymeadows Way W				Report CC																							
Jacksonville, FL 32256				Report CC																							
Phone #				FAX #																							
904-256-1700				FAX #																							
Sampler's Signature				Sampler's Printed Name																							
Kim Appleby				Sampler's Printed Name																							
CLIENT SAMPLE ID		LAB ID		DATE		TIME		Matrix																			
NE400001				7/28/21		900		SW		1		X															
C4 NE0306				7/28/21		920		SW		1		X															
19020048				7/28/21		1150		SW		1		X															
19010046				7/28/21		1255		SW		1		X															
19010046				7/28/21		1422		SW		1		X															
Special Instructions/Comments: Email Report to: Dep-Overflowmicro@dep.state.fl.us																											
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