

**FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION**

STRATEGIC MONITORING PLAN Field Sheet

July 2022

Meter
Passed End
of Day CCV
Yes / No

WIN Station Name:		POWELL LAKE CENTER N OF CAIN RD AREA				Sample Date:		4/26/2023	
WIN / Field ID:	G3NW0012	ORG ID:	21FLPNS	ENR:	-	Latitude:	30.27303		
County:	BAY	WBID:	1055A	ESTUARY	3M	Longitude:	-85.97478		
Receiving Body of Water:		GULF OF MEXICO BAY COUNTY				RQ-	2023-04-24-23		

Sampling Team Members	WQ Measurements	Sample Collection	Documentation	Preservation	Preservation Check
Lauren McNally	x		x		
Brook Olin		x		x	x

Sampling Equipment			
x	Sample Container		Carboy
	Dipper		Van Dorn
	Syringe		Pole
Syringe Lot#		Filter Lot#	
Secchi Equipment ID:		Secchi -1	
Collection Method			
	Wading		Canoe/Kayak
	From Shore		Electric Motor
		x	Gasoline Motor
Depth Measured With		Meter	

Water Level:	Normal
Flow:	NA
Matrix:	Marine
Tide Stage:	Rising
High Tide:	1251
Low Tide:	0005
Photos:	No
Meter ID:	155077 (ProDSS)
Depth Gauge ID:	depth_gauge

Time Zone	Time	Total Depth (m)	Sample Depth (m)	DO (mg/L)	DO (%SAT)	Temp. (°C)	pH	Secchi Disk (m)	Sp COND (µmhos/cm)	Salinity (PPTth)
CEN	1105	3.7	0.3	6.77	90	23.8	7.74	3.1	34626	21.77
	1107		3.2	2.47	34.8	25.8	7.59		44825	28.95

Biological Samples Collected:

None

SBIO Visit ID:**HA ID:****RPS ID:****Macrophyte ID:****LIMS Sample ID Entered
Into The Macrophyte Module:**

Parameter Suite	Parameter Methods (LIMS Test Codes)	Preservation				
		Type	Lot#	Expiration Date	pH Check	
Microbiology	Enterococci Contract Lab UWF	ICE				
Chlorophyll	CHLSUITE-W	ICE				
Physical/Aggregate Nutrients	ALKALINITY, TURBIDITY, W-F, W-TSS W-CL-IC, W-COLOR, W-SO4-IC, W-TDS	ICE				
Filtered Nutrients			Syringe Lot#; Filter Lot#:			
Acid Preserved Nutrients	W-NH3 / W-NO2NO3 / W-TKN / W-TOC / W-S-A-TP	ICE	H2SO4*	2299040	11/4/23	H2SO4 pH<2
Metals						
Organics (LC)						
Macroinvertebrates						
Organics (GC)			*2.0 ml of H2SO4 Used Unless Noted Otherwise			
Molecular						
Periphyton						
Phytoplankton						
BOD						
DOC						
			SyringeLot#		FilterLot#	
Other(s)						
Field Comments:						
Comments on COC:	Microbiology sample(s) submitted to contract laboratory.					
Relinquish Date:	04/26/2023	Signature:				

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)

Save Field Sheets on Network: _____

(Initials/Date)

Migrate Data to WIN: _____

(Initials/Date)