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| **WATER QUALITY MONITORING FORM—FRESH** | | | | | | | | | | | | | | | | | | | | | | | **Submit to:**  Houston-Galveston Area Council Clean Rivers Program  P.O. Box 22777  Houston TX 77227-2777  **Stream.Team@h-gac.com** | | | | | | | | | | | | | | | | |
| **Group ID** | | | |  | | | | | **Monitors ID #** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Site ID #** | | | |  | | | | | **Site Description** | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sample Date  MM-DD-YY | | | |  | | | | | Sample Time  (military: HHMM) | | | | |  | | | | | | | Sample Depth  Meters [not total depth] | | | | | | | | | | |  | | | | | | | |
| **Meter Calibration: (Within 24 hours of sampling)** | | | | | | | | | | | | | **YES** | | |  | | | | | | **NO** | | | | | | | | |  | | | | | | | | |
| Calibration | | | Date | | | | | Time | | | | | Standard Value | | | Standard Temp (C0) | | | | | | Initial Meter Reading | | | | | | | | | Meter Adjusted To | | | | | | | | |
| Conductivity | | |  | | | | |  | | | | |  | | |  | | | | | |  | | | | | | | | |  | | | | | | | | |
| pH (7.0) | | |  | | | | |  | | | | |  | | |  | | | | | |  | | | | | | | | |  | | | | | | | | |
| Core Test and Measurements | | | | | | | | | | | | | **Reagents:**  Are any reagents expired? | | | | | | | | | **YES** | | | |  | | | | | **NO** | | | | | | | |  |
|  | Conductivity | | | | | | | | | | | | **List Expired Regents OR reagents that need to be replaced.** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TDS Low/3 | | | | |  | TDS High/4 | | | | |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Air Temperature (C0) | | | | | | | | | | | |
|  | Water Temperature (C0) | | | | | | | | | | | | **Bacteria (E. coli) Test and Observations** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Average Below | Dissolved Oxygen (mg/L) | | | | | | | | | | | | **INCUBATION** | | Period  (28-31 hrs.) | | | |  | | | | | | | Temp. (oC)  (33+/-3oC) | | | | | | | |  | | | | | |
|  | 1st titration | | | |  | | 2nd titration | | | |  | | **SAMPLE 1** | | Sample Size | | | |  | | | | | | | Dilution Factor (mL) | | | | | | | | (100/sample size) | | | | | |
|  | pH(Standard Units) | | | | | | | | | | | | Colonies Counted | |  | | | X Dilution Factor | | | | | |  | | | | = |  | | | | | | | Colonies  /100 mL | | | |
|  | SECCHI Disk or Tube Transparency (Meters) | | | | | | | | | | | | **SAMPLE 2** | | Sample Size | | | |  | | | | | | | Dilution Factor (mL) | | | | | | | | (100/sample size) | | | | | |
|  | Total Depth (meters) | | | | | | | | | | | | Colonies Counted | |  | | | X Dilution Factor | | | | | |  | | | | = |  | | | | | | | | Colonies  /100 mL | | |
| Field Observations | | | | | | | | | | | | | FIELD BLANK: *E.coli* colony growth | | | | | | | | | | | YES | | |  | | | | | | NO | | | | |  | |
|  | | **FLOW SEVERITY**  1-no flow 2-low 3-normal 4-flood 5-high 6-dry | | | | | | | | | | | **DATA QUALITY REVIEW**: Checklist Completed | | | | | | | | | | | **YES** | | |  | | | | | | **NO** | | | | |  | |
|  | | **ALGAE COVER** 1-absent 2-rare (<25%) 3-common (26-50%) 4-abundant (51-75%) 5-dominant (>75%) | | | | | | | | | | | **Measurement and Field Observations Comments** | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **WATER COLOR** 1-no color 2-light green 3-dark green 4-tan 5-red 6-green/brown 7-black | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **WATER CLARITY**  1-clear 2-cloudy 3-turbid | | | | | | | | | | |
|  | | **WATER SURFACE**  1-clear 2-scum 3-foam 4-debris 5-sheen | | | | | | | | | | |
|  | | **WATER CONDITIONS**  1-calm 2-ripples 3-waves 4-white caps | | | | | | | | | | |
|  | | **WATER ODOR**  1-none 2-oil 3-acrid (pungent)  4-sewage 5-rotten egg 6-fishy 7-musky | | | | | | | | | | |
|  | | **PRESENT WEATHER**  1-clear 2-cloudy 3-overcast 4-rain | | | | | | | | | | |
|  | | **DAYS SINCE LAST SIGNIFICANT PRECIPITATION** (runoff) | | | | | | | | | | |
|  | | (Inches) **RAINFALL ACCUMULATION** (last 3 days) | | | | | | | | | | |
| **MINUTES (Total Time Spent Sampling and Traveling)** | | | | | | |  | | | **MILES (Total Roundtrip Distance Traveled)** | | | | | | |  | | | **TOTAL NUMBER OF PARTICIPANTS** | | | | | | | | | | | | | | |  | | | | |
| CERTIFIED MONITOR’S SIGNATURE | | | | | | |  | | | | | | | | | | | | | | | | | | DATE | | | | |  | | | | | | | | | |
| DATA MANAGER’S SIGNATURE | | | | | | |  | | | | | | | | | | | | | | | | | | DATE | | | | |  | | | | | | | | | |