

# GEORGIA ADOPT-A-STREAM: Chemical/Bacterial Form

To be conducted every month

SITE INFORMATION	Group Name: <u>WWALS</u>	Event Date: <u>2/28/2024</u> (MMDDYYYY)
	Group ID: G- <u>1727</u> Site ID: S- <u>7776</u>	Time Sample Collected: <u>4:00 PM</u> (HHMM am/pm)
	Stream Name: <u>FRANKS CREEK @</u>	Time Spent Sampling: <u>10</u> (Min)
	Monitor(s): <u>DEBBIE SMITH 122</u>	Total Time Spent Traveling (optional): <u>5</u> (Min)
	Number of Participants: <u>1</u>	Furthest Distance Traveled (optional): <u>5</u> (Miles)

WEATHER	<b>Present conditions (check all that apply)</b> <input type="checkbox"/> Heavy Rain <input type="checkbox"/> Steady Rain <input type="checkbox"/> Intermittent Rain <input type="checkbox"/> Overcast <input type="checkbox"/> Partly Cloudy <input checked="" type="checkbox"/> Clear/Sunny	<b>Amount of rain, if known?</b> Amount in Inches: _____ In Last Hours/Days: _____ <small>*Refer to wunderground.com for rainfall data</small>
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OBSERVATIONS	<b>Flow/Water Level:</b> (check all that apply) <input type="checkbox"/> Dry <input checked="" type="checkbox"/> Stagnant/Still <input type="checkbox"/> Low <input type="checkbox"/> Normal <input checked="" type="checkbox"/> High <input type="checkbox"/> Flow (over banks)
	<b>Water Clarity:</b> <input checked="" type="checkbox"/> Clear/Transparent <input type="checkbox"/> Cloudy/Somewhat Turbid <input type="checkbox"/> Opaque/Turbid
	<b>Water Color:</b> <input type="checkbox"/> No Color <input type="checkbox"/> Brown/Muddy <input type="checkbox"/> Green <input type="checkbox"/> Milky/White <input checked="" type="checkbox"/> Tannic <input type="checkbox"/> Other: _____
	<b>Water Surface:</b> <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Oily Sheen: does it break when disturbed? Yes/No (circle one) <input type="checkbox"/> Algae <input type="checkbox"/> Foam <input type="checkbox"/> Greater than 3" high <input type="checkbox"/> It is white
	<b>Water Odor:</b> <input checked="" type="checkbox"/> Natural/None <input type="checkbox"/> Gasoline <input type="checkbox"/> Sewage <input type="checkbox"/> Rotten Egg <input type="checkbox"/> Fishy <input type="checkbox"/> Chlorine <input type="checkbox"/> Other: _____
	<b>Photos:</b> Please take images to document your observations and changes in water quality conditions. Photo point directions can be found in the manuals. Send photo to AAS@gaepd.org.

CHEMICAL	<b>Trash:</b> <input checked="" type="checkbox"/> None <input type="checkbox"/> Yes, I did a cleanup <input type="checkbox"/> This site needs an organized cleanup																																																
	<b>Conductivity Meter Calibration (within 24hrs of sampling)</b> Date <u>2/28</u> Time <u>4:30</u> Standard Value _____ Initial Meter Reading _____ Meter Adjusted to _____																																																
	<b>Reagents: Are any reagents expired?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   List any expired: _____																																																
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BACTERIAL	<b>3M Petrifilm Method: Escherichia coli</b> Run three (3) plates/tests for each site, plus one (1) blank plate. Process within 6-24hrs, incubate at 35°C ±1° and read at 24 ± 1 hr																				
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Time START (HHMM): <u>5:00 PM</u> Time END (HHMM): <u>5:00 PM</u> MIN Temp (°C): <u>44.34, 5</u> MAX Temp (°C): <u>33</u>																					

COMMENTS	Any changes since you last sampled at this site? If yes, please describe.
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