



Squaw Creek Snapshot – October 10, 2009

Field Information (to be completed by the volunteer)

Site # SC Site Name: _____

Sampler Name(s) (print): _____

Date: _____ Time: _____ AM PM *(Must match time and date of lab sample)*

Weather *(circle all that apply)*

Sunny Partly Sunny Cloudy Rain/Snow Windy Calm

Visual Observations

1) WATER ODOR *(circle all that apply)*

None Sewage/Manure Rotten Eggs Petroleum Musky

2) WATER COLOR *(circle all that apply)*

Clear Brown Green Oily Sheen Reddish Blackish Milky Gray

3) Are there animals in the water upstream (i.e., cows, ducks, geese)? Yes / No

If yes, what type and how many? _____

4) Are there any tile lines or pipes of any sort that are visible along the river upstream?

Yes / No If yes, how many? _____ Are the tiles flowing? Yes / No

5) Stream Banks – using the categories below, check those that best describe the condition of the stream banks. *(check all that apply)*

Left Bank *(facing upstream)*

- _____ Cut Bank – Eroding
- _____ Cut Bank – Vegetated
- _____ Sloping Bank
- _____ Sand/Gravel Bar
- _____ Rip/Rap
- _____ Constructed Bank (i.e., drainage ditch)
- _____ Other: _____

Right Bank *(facing upstream)*

- _____ Cut Bank - Eroding
- _____ Cut Bank – Vegetated
- _____ Sloping Bank
- _____ Sand/Gravel Bar
- _____ Rip/Rap
- _____ Constructed Bank (i.e., drainage ditch)
- _____ Other: _____

Other comments: _____

Adjacent Land Use (along stream reach – check all that apply)

- | | | | |
|-------------------------------------|-------------------------------------|---|---|
| <input type="checkbox"/> Row Crop | <input type="checkbox"/> Wetland | <input type="checkbox"/> Boating Access | <input type="checkbox"/> Rural Residential |
| <input type="checkbox"/> Pasture | <input type="checkbox"/> Prairie | <input type="checkbox"/> Nature Trails | <input type="checkbox"/> Conservation Lands |
| <input type="checkbox"/> Urban | <input type="checkbox"/> Park | <input type="checkbox"/> Fence | <input type="checkbox"/> Animal Feeding |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Playground | <input type="checkbox"/> Steep Slopes | <input type="checkbox"/> Operations/Lots |
| <input type="checkbox"/> Timber | <input type="checkbox"/> Campground | <input type="checkbox"/> Stairs/Walkway | <input type="checkbox"/> Other _____ |

Record all other land use practices that potentially could affect the stream:

Human Use Activities (along stream reach – check all that apply) **None observed** _____

Please check activities you've participated in or witnessed at this site.

- | | | | |
|---------------------------------------|--|---|---------------------------------------|
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Wind Surfing | <input type="checkbox"/> Wading | <input type="checkbox"/> Fishing |
| <input type="checkbox"/> Tubing | <input type="checkbox"/> Canoeing/Kayaking | <input type="checkbox"/> Rafting | <input type="checkbox"/> Kids Playing |
| <input type="checkbox"/> Water Skiing | <input type="checkbox"/> Boating | <input type="checkbox"/> Hunting/Trapping | <input type="checkbox"/> Other _____ |

Evidence of Human Use (along stream reach – check all that apply) **None observed** _____

Please check evidence of human use you've witnessed at this site.

- | | | | |
|--|---|---|--------------------------------------|
| <input type="checkbox"/> Streamside Roads | <input type="checkbox"/> Livestock Watering | <input type="checkbox"/> Camping Sites | <input type="checkbox"/> Evidence of |
| <input type="checkbox"/> Footprints or Paths | <input type="checkbox"/> ATV/ORV Tracks | <input type="checkbox"/> Fire Pit/Ring | <input type="checkbox"/> Kid's Play |
| <input type="checkbox"/> Dock/Platform | <input type="checkbox"/> Rope Swings | <input type="checkbox"/> Fishing Tackle | <input type="checkbox"/> Other _____ |

Transparency (record whole numbers only – no tenths) _____ centimeters

Water Temperature _____ °Fahrenheit

pH (check one) 4 _____ 5 _____ 6 _____ 7 _____ 8 _____ 9 _____

Nitrite-N (mg/l; check one) 0 _____ 0.15 _____ 0.3 _____ 1.0 _____ 1.5 _____ 3 _____

Nitrate-N (mg/l; check one) 0 _____ 1 _____ 2 _____ 5 _____ 10 _____ 20 _____ 50 _____

Dissolved Oxygen (mg/l; check one)

1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 8 _____ 10 _____ 12 _____

Phosphate (mg/l; check one) 0 _____ 0.1 _____ 0.2 _____ 0.3 _____ 0.4 _____ 0.6 _____ 0.8 _____

1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 _____ 10 _____

Chloride _____ mg/l - Convert Quantab Units using the chart provided on the bottle

Where did you collect the water samples? (check one)

Directly from the Stream _____ From a bridge _____ Other (describe) _____

Please comment on safety of this site – is it in area of high traffic/was access a safety concern? _____