

LAKE: _____ STATION: _____ TOWN: _____ COUNTY: _____
 (use words to describe physical location, e.g. deep hole, south station)

INSTRUCTIONS: Obtain a minimum of two readings each month for five months. Use more than one line to record multiple readings obtained on the same day (e.g., more than one monitor, QA readings). Please fill out the form completely. Refer to codes at bottom for wind information and scope type.

| | | | | |
|--|---|-----------------------------------|--|---|
| LAKE | MIDAS | STATION | CERTIFIED MONITORS (Last name; First name) | PROJECT |
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| Reading Date | | | Military Time | Wind Veloc. (table below) | Wind Dir. | Circle one: <u>B</u> right (shadows) <u>C</u> loudy bright (no shadows) <u>O</u> vercast | | | Secchi Depth (m) | Scope Type | Did disk hit bottom (Y/N) | QA Cert. # of person taking reading* | Reading Number | Total Phos Surface Grab (ppb) | Gloeco Cat. 0-6 (See Visual Aid) | Date Entered into Survey 123 Data Entry App |
|--------------|-----|------|---------------|------------------------------|-----------|---|---|---|------------------|------------|---------------------------|--------------------------------------|----------------|-------------------------------|----------------------------------|---|
| Month | Day | Year | | | | | | | | | | | | | | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |
| | | 20 | | | | B | C | O | . | | | - | | | . | |

* QA Certification number is first 2 letters of last name you had when joining LSM-VLMP plus assigned 4-digit number.

** On two dates each year, take two readings and record as #1 & #2

WIND VELOCITY ESTIMATES

Please enter a SINGLE/DISCRETE number for wind speed, do not enter the range of wind speed.

EFFECTS OF WIND ON WATER

Smooth/small wavelets
 Large wavelets, scattered whitecaps
 Small waves, frequent whitecaps
 Mod. Crested waves, many whitecaps
 Large waves, foam, blown spray

EFFECTS OF WIND ON LAND

Leaves rustle, wind on face
 Leaves and twigs in constant motion, flag waving
 Raises dust & loose paper, small branches moving
 Small trees begin to sway
 Whole trees in motion

Choose one number between these two

1 mph – 7 mph
 8 mph – 11 mph
 12 mph – 16 mph
 17 mph – 24 mph
 25 mph – 35 mph

WIND DIRECTION

No wind = 0
 N = 1 SE = 4 W = 7
 NE = 2 S = 5 NW = 8
 E = 3 SW = 6

SCOPE TYPE

1 = No scope used
 2 = Flat glass, no mask
 3 = Slant glass, no mask
 4 = Slant glass & mask
 5 = Flat glass & mask
 6 = 6" diameter slant glass & mask
 7 = 12" diameter flat glass

Indicate TP Lab Used: HETL: _____ Other: _____
 Indicate any dates with missing TP results: _____

COMMENTS:

Signature(s): _____

DATA PROCESSING STAFF ONLY

Please Enter Date & Initials
 When Task is Complete.

| Task | Date | Initials |
|---------|------|----------|
| Checked | - - | |
| Entered | - - | |
| Proofed | - - | |