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Approach

1. Evaluate water and immediate shoreline. Refrain from including anything on land in your assessment.

Steps – Fieldslip header

2. **Station ID-** Obtain an ID from the coordinator that geospatially links your data to your station in the DNR database, Surface Water Integrated Monitoring Systems (SWIMS).
3. **Station Name/Location-** If you have been provided a station name, please record here. If not, please describe your location.
4. **SWIMS Data Entered By-** If you will be entering data into the DNR database, please identify one person in your team that will enter for the group. Try to enter data after each monthly field visit.

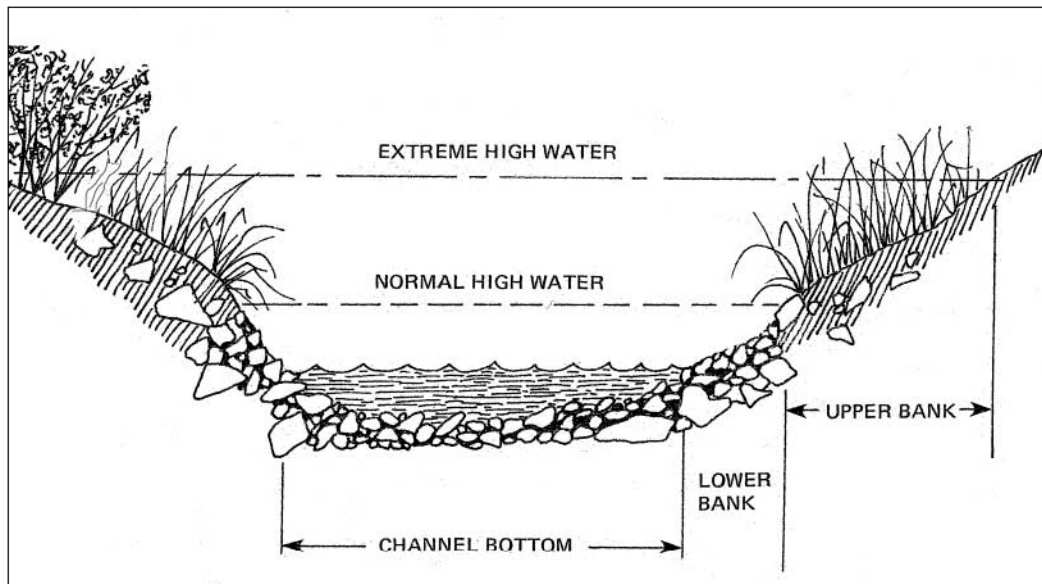
Conditions at site

5. **Monitoring Date-** The date of the field event.
6. **Start Time-** The time you arrived at the station.
7. **Data Collector-** The name or initials of the team member filling out the datasheet.
NOTE: Because of the subjectivity of most of the questions, we ask that only one person fill out the datasheet. If there are multiple people present during field event, please fill out separate datasheets.
8. **Describe water conditions-** Choose Flat/Calm, Slight Movement, Moderate Flow/Waves, Rough/Fast Flowing
9. **Water Level-** Record the water level of the area. Choose from the following: Don't Know, High, Low, Normal.

Describe water level

10. How to describe water level: This is something that you will feel more comfortable with assessing the more you visit your stream site.
 - a) Look to see if terrestrial vegetation along banks is submerged. The terrestrial vegetation will end at the normal high water mark.

- b) Look for water stains on rocks or bridge abutments. Water will stain rocks if it flows over or by them for an extended period of time. If you see stains above the level of water in the stream during your visit, the



This diagram shows a cross section of a typical streambank, demarcating the upper and lower banks.

level is likely low.

Photos of Site

11. **Did You Take Any Pictures? Please Describe-** Number your pictures in order and describe what you are photographing. Example: Photo 1 on 7/15/11, From east shoreline looking upstream. Photo 2 on 7/15/11, garbage on the beach is aesthetically displeasing. Take pictures to show why you think the station is pleasing or displeasing. Feel free to submit as many pictures as you would like.

Overall aesthetic impression of the site

12. **Overall, Do You Find the Station Aesthetically Pleasing? Please Describe Why-** Please choose from the following: Very Pleasing, Somewhat Pleasing, Neutral; neither pleasing nor displeasing, Somewhat Displeasing, Very Displeasing. Please follow up your response with an explanation.
13. **Have You Previously Evaluated This Station?** -Y/N
14. **If you have previously evaluated this station, have you noticed any changes in aesthetic quality of the water or along the shoreline since your last visit?** - Describe any changes in the space provided on the datasheet.

Materials producing color, odor, or unsightliness

15. **Are any materials detectable to you such that they produce color, odor or unsightliness present to the extent that they make the area unpleasant or block your ability to access or use the water? Y/N Please describe.** – Look around your station and describe in the provided space if there is anything that fits the description above.
16. **Water Color** - Describe the color of the water from where you are standing. Please choose from the following: Clear, Red Stained, Green Stained (Pea Soup), Brown (Turbid). Please leave this section blank if you are colorblind.
17. **Odor of Water** - Please describe the smell, if any, coming from the water. It may be useful to fill the transparency tube for question 12 to get a more accurate description of odor. Be sure not to describe odors from other areas, such as, a nearby garbage can or the city. Choose from the following: No Smell, Fishy, Sulfur/Rotting Eggs, Algae/Decaying Plants, Musty/Wet Soil, Chlorine, Other (Please Describe).

18. **Transparency Tube** - How to measure transparency: Collect the sample away from the bay or stream bank in the main flow (well-mixed) area. Be careful not to disturb the bottom when you collect the water sample. If you get sediment from bottom disturbances, dump out the sample, move upstream away from the disturbed area and try again or filter through the provided nylon. For the observer, consistency is the key. If you initially wear your eyeglasses when you take the reading, then always wear your eyeglasses to take this measurement. Never wear sunglasses when you take this reading. To collect a sample while standing on the shore, use a bucket or sample bottle attached to a pole so that you can reach off-shore. Scoop from below the surface in the upstream direction. Be careful not to stir up the sediment upstream of your sample.

Reading the Transparency Tube

1. Remove large objects from the water sample. (Filter through nylon stocking if necessary.)
2. If the sample has settled, use a stirring stick to stir the sample, or pour the sample into a clean bucket and back into the transparency tube to suspend all materials.
3. Stand out of direct sunlight. If you cannot get to a shady place, use your body to cast a shadow on the tube (Figure 1).
4. If you are wearing sunglasses, remove them. Then look for the target (black and white) disc on the bottom of tube. If disc is visible, record the length of the tube (e.g., 120 cm) on the data sheet.
5. If target disc is not visible, have your partner let water out a little at a time using the valve at the bottom until disc is just visible (Figure 2). Have them stop letting water out immediately when you can just see the contrast between black and white on the disc.
6. Read the level of water in the tube in cm using the measuring tape on the side of the tube.
7. Record the measurement on your data sheet in cm.
8. Dump contents of tube on ground.
9. Collect a new sample then repeat steps 1 through 8.
10. Record the second measurement in cm on your data sheet.



Figure 1: Transparency tube shaded by observer.



Figure 2: Slowly releasing water until the disk is just visible.

Substances causing objectionable deposits on shore or in bed of River/Bay

19. Are any of the following visible to you on the shoreline or bottom of River/Bay to the extent that they make the area unpleasant or block your ability to access, enjoy, or use the water? – Please answer for the following categories:

a. **Submerged Garbage** – Y/N

If Yes, list visible item(s) – If you are able to see what the submerged item is, please identify. If you are unable to identify item, do your best to describe. It's our hope that with this information, we would be able to help get these large items removed.

b. **Shoreline Garbage** – Y/N

If Yes, circle type(s) -- Use the chart below and circle the Type of garbage present. You can select more than one. If you circle 'Other', please describe.

Type	Street litter	Food-related litter	Medical items	Resin	Sewage-related	Building materials	Fishing related	Household waste	Other
Example	Cigarette filters	Food packing, beverage containers	Syringes	Tiny plastic pellets	Condoms, tampons	Pieces of wood, siding	Fishing line, nets, lures	House-trash, plastic bags	Anything else not represented here

c. **Animals (geese, gulls, dogs, etc)** – Y/N

If Yes, list type(s) and reason for problem (droppings, aggressive, etc)

d. **Dead Animals** – Y/N

If Yes, list type(s) and amount – Please record amount using a whole number. Avoid using ranges (12 instead of 10-15).

e. **Invasive Species (Phragmites, zebra/quagga mussels, other)** – Y/N

If Yes, list type(s) and amount – If you are able to identify invasive species located at the station, please record the species and amount.

f. **Other** – Y/N Is there anything else that does not fit in the categories above that is present along the shoreline or bottom of River/Bay to the extent that they make the area unpleasant or block your ability to enjoy the water? If so, please describe in the space provided.

20. Are any of the following visible to you in the water to the extent that they make the area unpleasant or block your ability to access, enjoy, or use the water – Please answer for the following categories:

a. **Floating Garbage** – Y/N

If Yes, estimate percent of floating garbage on water surface - Please estimate the percent of garbage floating on the surface of the water, if any. Use the attached figure to help you estimate percentages. Please use an exact number rather than a range.

If Yes, please circle type(s) – Use the chart in question 13-B and circle the Type of garbage present. You can select more than one. If you circle ‘Other’, please describe.

b. Surface Water Description – Describe the condition of the surface of the water body. Please choose from the following: Normal, Oily Sheen, Neon Green Sheen, Foamy, Floating Aquatic Plants, Natural Debris (Example: sticks, leaves), Other (please describe).

c. Algae – Y/N

If Yes, estimate percent of algae on water surface - Please estimate the percent of algae present (if any) using the attached figure. Please use an exact number rather than a range.

If Yes, circle type(s) – Please describe the type of algae present, if any. Choose from the following: Blobs of Floating Material, Green Soupy, Attached to Rocks/Stringy, Matted, Other (please describe). You may record more than one type of algae if present.

If Yes, circle color – Please record the color of algae present, if any. Choose from the following: Light Green, Blue Green, Dark Green, Brown, Red, Yellow, Other (please describe). You may record more than one color of algae if present. Please leave this section blank if you are colorblind.

d. Other – Y/N Is there anything else that does not fit in the categories above that is present in the water to the extent that they make the area unpleasant or block your ability to access the water? If so, please describe in the space provided.

Survey End

21. **While filling out this survey, please describe the most difficult task (if any)** – Did you find a particular question difficult to answer or task difficult to complete? Please record that here.
22. **Comments** – Record any additional comments in the space provided. Consider things that you thought should be reported but were not asked.
23. **End Time** – Please record the time the field was completed.
24. **Date the data were entered in SWIMS** – Please record the date you entered your data into SWIMS.