Mississippi Water Stewards: Water Monitoring Data Form

Step 1: Select the appropriate site location, then Enter observation details, please be as detailed as possible in notes sections! Information is listed as you will enter to Water Rangers.

| Observation Details | | | | | | | | | |
|------------------------------|-------------------------------|-----------------|----------|--------|-----------|--|--|--|--|
| MSWS Site Code: Group Name: | | | | | | | | | |
| Observer Name: | | | | | | | | | |
| Observation Date: | Date:Observation Time (24hr): | | | | | | | | |
| Other Testers: | | | | | | | | | |
| Current Weather Conditions | s: Sunny | Cloudy | Rainy | | Windy | | | | |
| Weather Details: | | | | | | | | | |
| Weather previous 24-hr: | Sunny | Cloudy | Rainy | | Windy | | | | |
| Weather Details: | | | | | | | | | |
| Waterbody Condition: | Adequate Depth | Inadequate | Depth | Dry | No Access | | | | |
| | | | | | | | | | |
| Tidally Influenced Rivers: I | Rising Tide | Falling Tide Un | ncertain | Not Ap | pplicable | | | | |
| | | | | _ | | | | | |

Step 2: Enter water observation data & associated bacteriological monitoring parameters if you are monitoring bacteriological parameters.

| Observation Data | | | | | | | |
|---------------------------|-------|----------------|---|--|--|--|--|
| Variable | Value | | Important Tips | | | | |
| Temperature (°C) | Air: | Water: | Measure air temp before water temp. Read with bulb submerged if possible. Don't touch bulb. | | | | |
| Sample Volume | | mL | Use same volume for all replicates | | | | |
| Plating Time | | (24-hr format) | Incubation begins when samples are plated. | | | | |
| Incubation Temperature | | °C | Keep incubation temperature between 29 and 37 °C | | | | |
| Incubation Periods | | hrs | Count bacteria within 30-48 hours of incubation. | | | | |
| Media Expiration Date | | | Use this date format: Jul/2019 (from media box) | | | | |
| Plated onsite | Yes | No | If not plated at sampling site, always transport on ice and plate within 3 hours. | | | | |

*Note: If colonies are too numerous to count (>200), report as 250.

| Replicate | No. of E. | E. Coli per | No. of other | Other | Total | Total |
|-----------|----------------|-------------|--------------|------------|---------------|------------|
| No. | Coli colonies | 100mL | coliforms on | coliforms | Coliforms | Coliforms |
| | on plate (blue | | plate (pink | per 100 mL | (all colonies | per 100 mL |
| | to purple) | | to dark red) | | on plate) | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |

Step 3: Enter any additional water quality information, wildlife sightings, <u>photos taken</u> <u>during sampling</u>, and add any additional pertinent information! Underlined information is required.



By clicking submit, you are declaring that you are currently a certified MSWS monitor and that you accurately followed all sampling and testing protocols.

