

MassDEP/DWM/Watershed Planning Program

Crew Lead (initial): _____

RIVERS FIELD SHEET (2025)

STATION INFORMATION <i>(fill out prior to departure)</i>		
Field Sheet Login #:	Unique ID:	Registered Lat/Long:
Project:	Site Name (STAID):	
Waterbody Name:		Town:
GENERAL SITE INFORMATION		
Alternate Station Description (Does site match description?) <input type="checkbox"/> YES <input type="checkbox"/> NO <i>If not, describe below:</i>		
Alt. Field Lat/Long _____ / _____		Lat/Long Method <input type="checkbox"/> GETAC F110 Tablet <input type="checkbox"/> Handheld GPS <input type="checkbox"/> Other
Survey Crew Lead:		Other Crew:
Date:		Time: <input type="checkbox"/> EST <input type="checkbox"/> EDT
Weather Conditions <input type="checkbox"/> Clear <input type="checkbox"/> Mostly sun <input type="checkbox"/> Mostly cloud <input type="checkbox"/> Overcast <input type="checkbox"/> Fog <input type="checkbox"/> Drizzle <input type="checkbox"/> Rain <input type="checkbox"/> Sleet <input type="checkbox"/> Snow		
Air Temperature <input type="checkbox"/> < 20 °F <input type="checkbox"/> 21-30 °F <input type="checkbox"/> 31-40 °F <input type="checkbox"/> 41-50 °F <input type="checkbox"/> 51-60 °F <input type="checkbox"/> 61-70 °F <input type="checkbox"/> 71-80 °F <input type="checkbox"/> 81-90 °F <input type="checkbox"/> 91-100 °F		
Water Odor <input type="checkbox"/> None <input type="checkbox"/> Musty <input type="checkbox"/> Petrol <input type="checkbox"/> Sewage <input type="checkbox"/> Effluent <input type="checkbox"/> Sulfide <input type="checkbox"/> Fishy <input type="checkbox"/> Chlorine <input type="checkbox"/> Rotten Veg. <input type="checkbox"/> Other <input type="checkbox"/> Unobservable		
Turbidity <input type="checkbox"/> None <input type="checkbox"/> Slightly Turbid <input type="checkbox"/> Highly Turbid <input type="checkbox"/> Unobservable		
Water Color <input type="checkbox"/> None <input type="checkbox"/> Brownish <input type="checkbox"/> Blackish <input type="checkbox"/> Greenish <input type="checkbox"/> Greyish <input type="checkbox"/> Reddish <input type="checkbox"/> Yellowish <input type="checkbox"/> Other <input type="checkbox"/> Unobservable		
Floating Scum <input type="checkbox"/> None <input type="checkbox"/> Algal mat <input type="checkbox"/> Foam <input type="checkbox"/> Oily sheens <input type="checkbox"/> Pollen blankets <input type="checkbox"/> Sewage <input type="checkbox"/> Other <input type="checkbox"/> Unobservable <u>Description:</u>		
General Notes:		
OBSERVATIONS (RIVER ONLY)		
Flow Condition <input type="checkbox"/> Flowing <input type="checkbox"/> No Water <input type="checkbox"/> Stagnant <input type="checkbox"/> Ice Covered <input type="checkbox"/> No Access		
Est. Flow Velocity <input type="checkbox"/> ~0 fps <input type="checkbox"/> < 1 fps <input type="checkbox"/> 1-3 fps <input type="checkbox"/> 3-5 fps <input type="checkbox"/> > 5 fps		
Tidal Condition <input type="checkbox"/> Not Applicable <input type="checkbox"/> Ebb (outgoing tide) <input type="checkbox"/> Flood (incoming tide) <input type="checkbox"/> Slack <input type="checkbox"/> Indeterminate		
% Open Sky: _____ % (e.g., total shade=0%, total sun = 100%)		
Dominant Substrates <input type="checkbox"/> Bedrock <input type="checkbox"/> Boulder <input type="checkbox"/> Cobble <input type="checkbox"/> Coarse gravel <input type="checkbox"/> Sand <input type="checkbox"/> Silt/Mud/Clay <input type="checkbox"/> Unobservable		
Staff Gage Reading (in feet to the 1/100 th): _____ ft		
Discharge (Reference) <input type="checkbox"/> Upstream of a discharge <input type="checkbox"/> Adjacent to a discharge <input type="checkbox"/> Downstream of a discharge <input type="checkbox"/> Unknown		
OBSERVATIONS (RIVER AND LAKE)		
Objectionable Deposits <input type="checkbox"/> None <input type="checkbox"/> Trash <input type="checkbox"/> Flocculent mass <input type="checkbox"/> Other <input type="checkbox"/> Unobservable <u>Description:</u>		
Active Shoreline Erosion <input type="checkbox"/> None <input type="checkbox"/> Slight <input type="checkbox"/> Moderate <input type="checkbox"/> Severe <input type="checkbox"/> Unobservable <u>Description:</u>		
Wildlife <input type="checkbox"/> None <input type="checkbox"/> Fish <input type="checkbox"/> Mammals <input type="checkbox"/> Birds <input type="checkbox"/> Amphibians <input type="checkbox"/> Other <u>Description:</u>		
Beneficial Uses <input type="checkbox"/> None <input type="checkbox"/> Swimming <input type="checkbox"/> Boating <input type="checkbox"/> Water intake <input type="checkbox"/> Fishing <input type="checkbox"/> Other <u>Description:</u>		
Pollution Sources <input type="checkbox"/> None <input type="checkbox"/> Outfalls <input type="checkbox"/> Garbage <input type="checkbox"/> Road runoff <input type="checkbox"/> Waterfowl <input type="checkbox"/> Land clearing <input type="checkbox"/> Lawns		
Aesthetics Impaired? <input type="checkbox"/> YES <input type="checkbox"/> NO <i>Based on water odor, clarity, unnatural color, growths, scum and/or deposits, is the site impaired?</i>		
Water Level <input type="checkbox"/> Low <input type="checkbox"/> Normal <input type="checkbox"/> High Water level, ft above/below _____ ft		

STATION SPECIFIC PLANT DENSITY									
<div>None 0% Sparse 1-25% Moderate 25-50% Dense 50-75% <u>Very Dense</u> 75-100% Unobservable</div>									
Overall Aquatic Plants		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U		
Floating Aquatic Plants		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U	Species:	
Emergent Aquatic Plants		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U	Species:	
Submerged Aquatic Plants		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U	Species:	
Duckweed		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U		
Free-floating algae		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U		
ALGAL BLOOM									
Algal Bloom Present <input type="checkbox"/> YES <input type="checkbox"/> NO									
Bloom Type <input type="checkbox"/> Cyanobacteria <input type="checkbox"/> Green Algae <input type="checkbox"/> Other <input type="checkbox"/> Unknown									
Evidence of Bloom (check all that apply) <input type="checkbox"/> Scum <input type="checkbox"/> Color <input type="checkbox"/> Turbidity <input type="checkbox"/> Odor <input type="checkbox"/> Other									
Lakeward Width (in meters) <input type="checkbox"/> <1 m <input type="checkbox"/> 1-5 m <input type="checkbox"/> 5-10 m <input type="checkbox"/> 10-15 m <input type="checkbox"/> >15 m									
Shoreline Length (in meters) <input type="checkbox"/> <1 m <input type="checkbox"/> 1-5 m <input type="checkbox"/> 5-10 m <input type="checkbox"/> 10-15 m <input type="checkbox"/> >15 m									
Bloom specific notes:									
SITE SPECIFIC PERIPHYTON <u>None: 0%</u> <u>Sparse: 1-25%</u> <u>Moderate: 25-50%</u> <u>Dense: 50-75%</u> <u>Very Dense: 75-100%</u> <u>Unobservable</u>									
Filamentous		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	Color: <input type="checkbox"/> Black <input type="checkbox"/> Brown <input type="checkbox"/> Green <input type="checkbox"/> Grey <input type="checkbox"/> Other				
		<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U	Location: <input type="checkbox"/> On plants <input type="checkbox"/> On rocks <input type="checkbox"/> On bottom Location Type: <input type="checkbox"/> Riffle <input type="checkbox"/> Run <input type="checkbox"/> Pool				
Film		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	Color: <input type="checkbox"/> Black <input type="checkbox"/> Brown <input type="checkbox"/> Green <input type="checkbox"/> Grey <input type="checkbox"/> Other				
		<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U	Location: <input type="checkbox"/> On plants <input type="checkbox"/> On rocks <input type="checkbox"/> On bottom Location Type: <input type="checkbox"/> Riffle <input type="checkbox"/> Run <input type="checkbox"/> Pool				
Loose Floc		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	Color: <input type="checkbox"/> Black <input type="checkbox"/> Brown <input type="checkbox"/> Green <input type="checkbox"/> Grey <input type="checkbox"/> Orange <input type="checkbox"/> White <input type="checkbox"/> Other				
		<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U	Location: <input type="checkbox"/> On plants <input type="checkbox"/> On rocks <input type="checkbox"/> On bottom Location Type: <input type="checkbox"/> Riffle <input type="checkbox"/> Run <input type="checkbox"/> Pool				
Moss <i>(enter in Rivers section)</i>		<input type="checkbox"/> N	<input type="checkbox"/> S	<input type="checkbox"/> M	Color: <input type="checkbox"/> Black <input type="checkbox"/> Brown <input type="checkbox"/> Green <input type="checkbox"/> Grey <input type="checkbox"/> Other				
		<input type="checkbox"/> D	<input type="checkbox"/> VD	<input type="checkbox"/> U	Location: <input type="checkbox"/> On plants <input type="checkbox"/> On rocks <input type="checkbox"/> On bottom Location Type: <input type="checkbox"/> Riffle <input type="checkbox"/> Run <input type="checkbox"/> Pool				

SAMPLE - GENERAL	
Samples taken from <input type="checkbox"/> From shore/left bank <input type="checkbox"/> From shore/center stream <input type="checkbox"/> From shore/right bank	
<input type="checkbox"/> Wade in/left bank <input type="checkbox"/> Wade in/center stream <input type="checkbox"/> Wade in/right bank	
<input type="checkbox"/> Bridge upstream <input type="checkbox"/> Bridge downstream	
<input type="checkbox"/> Boat <input type="checkbox"/> Shore (Lake) <input type="checkbox"/> Wading (Lake) <input type="checkbox"/> Dock	
<input type="checkbox"/> Pipe	
<input type="checkbox"/> Other (describe): _____	
Samples taken from description:	

Sample-Lab	<Place OWMID Label here>				<Place OWMID Label here>				<Place OWMID Label here>			
Sample Type	<input type="checkbox"/> FQC_BLANK (Blank) <input type="checkbox"/> FQC_BLANKRINS (Equipment Blank) <input type="checkbox"/> FQC_REP (Field Duplicate) <input type="checkbox"/> FS_IVP (Integrated Vertical Profile) <input type="checkbox"/> FS_ROUTINE (Routine Sample) <input type="checkbox"/> Other:				<input type="checkbox"/> FQC_BLANK (Blank) <input type="checkbox"/> FQC_BLANKRINS (Equipment Blank) <input type="checkbox"/> FQC_REP (Field Duplicate) <input type="checkbox"/> FS_IVP (Integrated Vertical Profile) <input type="checkbox"/> FS_ROUTINE (Routine Sample) <input type="checkbox"/> Other:				<input type="checkbox"/> FQC_BLANK (Blank) <input type="checkbox"/> FQC_BLANKRINS (Equipment Blank) <input type="checkbox"/> FQC_REP (Field Duplicate) <input type="checkbox"/> FS_IVP (Integrated Vertical Profile) <input type="checkbox"/> FS_ROUTINE (Routine Sample) <input type="checkbox"/> Other:			
OWMID Parent												
Medium	<input type="checkbox"/> Water <input type="checkbox"/> Sediment <input type="checkbox"/> Other				<input type="checkbox"/> Water <input type="checkbox"/> Sediment <input type="checkbox"/> Other				<input type="checkbox"/> Water <input type="checkbox"/> Sediment <input type="checkbox"/> Other			
Medium (Subdivision)	<input type="checkbox"/> SW (Surface Water) <input type="checkbox"/> MunSewEff (Muni. Sewage Effluent) <input type="checkbox"/> StmW (Stormwater) <input type="checkbox"/> Unknown				<input type="checkbox"/> SW (Surface Water) <input type="checkbox"/> MunSewEff (Muni. Sewage Effluent) <input type="checkbox"/> StmW (Stormwater) <input type="checkbox"/> Unknown				<input type="checkbox"/> SW (Surface Water) <input type="checkbox"/> MunSewEff (Muni. Sewage Effluent) <input type="checkbox"/> StmW (Stormwater) <input type="checkbox"/> Unknown			
Relative Depth	<input type="checkbox"/> Surface <input type="checkbox"/> Mid-Water <input type="checkbox"/> Near Bottom				<input type="checkbox"/> Surface <input type="checkbox"/> Mid-Water <input type="checkbox"/> Near Bottom				<input type="checkbox"/> Surface <input type="checkbox"/> Mid-Water <input type="checkbox"/> Near Bottom			
Start/End Depth	/				/				/			
Start Date/Time	<input type="checkbox"/> EDT <input type="checkbox"/> EST				<input type="checkbox"/> EDT <input type="checkbox"/> EST				<input type="checkbox"/> EDT <input type="checkbox"/> EST			
End Date/Time	<input type="checkbox"/> EDT <input type="checkbox"/> EST				<input type="checkbox"/> EDT <input type="checkbox"/> EST				<input type="checkbox"/> EDT <input type="checkbox"/> EST			
Gear Type	<input type="checkbox"/> Water Bottle <input type="checkbox"/> Tygon Tube <input type="checkbox"/> Sampling Pole <input type="checkbox"/> Auto Sampler <input type="checkbox"/> Van Dorn <input type="checkbox"/> Other <input type="checkbox"/> Basket <input type="checkbox"/> N/A				<input type="checkbox"/> Water Bottle <input type="checkbox"/> Tygon Tube <input type="checkbox"/> Sampling Pole <input type="checkbox"/> Auto Sampler <input type="checkbox"/> Van Dorn <input type="checkbox"/> Other <input type="checkbox"/> Basket <input type="checkbox"/> N/A				<input type="checkbox"/> Water Bottle <input type="checkbox"/> Tygon Tube <input type="checkbox"/> Sampling Pole <input type="checkbox"/> Auto Sampler <input type="checkbox"/> Van Dorn <input type="checkbox"/> Other <input type="checkbox"/> Basket <input type="checkbox"/> N/A			
Gear Serial #												
Composite (Type)	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Flow <input type="checkbox"/> Time <input type="checkbox"/> Depth				<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Flow <input type="checkbox"/> Time <input type="checkbox"/> Depth				<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Flow <input type="checkbox"/> Time <input type="checkbox"/> Depth			
Field Lat/Long	/				/				/			
Field Lat/Long Method	<input type="checkbox"/> GETAC F110 Tablet <input type="checkbox"/> Other: <input type="checkbox"/> Handheld GPS				<input type="checkbox"/> GETAC F110 Tablet <input type="checkbox"/> Other: <input type="checkbox"/> Handheld GPS				<input type="checkbox"/> GETAC F110 Tablet <input type="checkbox"/> Other: <input type="checkbox"/> Handheld GPS			
Sample Notes												
Bottle Group	Planned	Collected	Preserved In Field	Filtered In Field	Planned	Collected	Preserved In Field	Filtered In Field	Planned	Collected	Preserved In Field	Filtered In Field
Bacteria (B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Na ₂ S ₂ O ₃	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Na ₂ S ₂ O ₃	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Na ₂ S ₂ O ₃	<input type="checkbox"/> Y <input type="checkbox"/> N
Nutrient (N)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₂ SO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₂ SO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₂ SO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N
Nutrient (N2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₂ SO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₂ SO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₂ SO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N
Metals (M)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> HNO ₃	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> HNO ₃	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> HNO ₃	<input type="checkbox"/> Y <input type="checkbox"/> N
Chloride (CL)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N
OrgCarb (OC)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₃ PO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₃ PO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> H ₃ PO ₄	<input type="checkbox"/> Y <input type="checkbox"/> N
Nutrient (N3)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N
Solids (S)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N
Chl a (I)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N
Color/Turb (R)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Y <input type="checkbox"/> N

