



## Physical & Chemical Tests Record Sheet

(To be completed monthly)

Site Name: <u>BARWON RIVER, BREAKWATER RA</u>		Site Code: <u>BAR-161</u>
Name of Monitoring Group: <u>BARWON RIVER INDIVIDUALS</u>		
Person(s) Conducting the test: <u>NORMAN LUGG</u>		
Date of test: <u>15-2-2024</u>	Time of test: <u>11.45</u> am/pm	
Site Risk Assessment Completed: <input checked="" type="checkbox"/> signature please: Site risk and management assessment at rear of book. Please note circumstantial hazards and additional risks in the box below		
Test	Result (units)	Calculations, dilutions and comments
Dissolved Oxygen	<u>3-5</u> mg/L	<u>42</u> % sat.
Water Temperature		<u>23</u> °C
Air Temperature		<u>22</u> °C
pH	Meter calibrated to <input checked="" type="checkbox"/> pH 7 & <input checked="" type="checkbox"/> pH <del>14</del>	<u>7.2</u> pH units
Electrical Conductivity (Salinity)	Meter calibrated to <input checked="" type="checkbox"/> 1413, <input type="checkbox"/> 2,000 or <input checked="" type="checkbox"/> 12,880EC	<u>1553</u> µS/cm.
Reactive Phosphorus		<u>0.10</u> mg/L P
Turbidity		<u>48</u> N.T.U./F.T.U.
<b>Weather conditions at the time of sampling:</b>		
<input checked="" type="checkbox"/> sunny <input type="checkbox"/> cloudy <input type="checkbox"/> overcast <input type="checkbox"/> raining <input type="checkbox"/> windy		
<b>Rainfall:</b>		
Last rainfall: <input type="checkbox"/> More than week ago <input checked="" type="checkbox"/> During the last week <input type="checkbox"/> During the last 24 hours <input type="checkbox"/> Raining now		
Amount of rain (mm) _____		
<b>Water flow</b>		<b>Water appearance</b>
Flow indicator (if available) _____ ML/day		<input type="checkbox"/> Clear <input type="checkbox"/> Milky <input type="checkbox"/> Foamy /frothy <input type="checkbox"/> Muddy <input type="checkbox"/> Smelly <input type="checkbox"/> Stained green <input type="checkbox"/> Scummy <input type="checkbox"/> Oily <input type="checkbox"/> Stained brown <input type="checkbox"/> Other (description)
<b>Estimate of flow</b> <input type="checkbox"/> Not flowing (still)		
<input type="checkbox"/> Not flowing (pool)	<input type="checkbox"/> Low (minimum)	
<input type="checkbox"/> Medium (average)	<input type="checkbox"/> High (but below bankfull)	
<input type="checkbox"/> Flood (over bank)	<input type="checkbox"/> Permanent (lakes & wetlands)	
<b>Stream depth</b>		
Depth indicator _____ m <input type="checkbox"/> 0 - 50 cm deep <input type="checkbox"/> 51cm-1m deep <input type="checkbox"/> 1 to 2 m deep <input type="checkbox"/> Unknown depth		
<b>Stream width</b>		
Average width of stream: <u>50</u> m <input type="checkbox"/> < 2 m wide <input type="checkbox"/> 2 to 5 m wide <input type="checkbox"/> >5 m wide		
Drain present at site: <input type="checkbox"/> no <input type="checkbox"/> yes            Water flowing from drain: <input type="checkbox"/> yes            Color _____            Odour _____		
<b>Litter pollutants: (Tick type found)</b>		
<input type="checkbox"/> paper	<input type="checkbox"/> bottles	<input type="checkbox"/> plastic <input type="checkbox"/> clothing <input type="checkbox"/> car bodies
<input type="checkbox"/> packets	<input type="checkbox"/> cans	<input type="checkbox"/> polystyrene <input type="checkbox"/> oil <input type="checkbox"/> petrol/diesel
		<input type="checkbox"/> waxed cardboard <input type="checkbox"/> other
<b>Circumstantial hazards and additional risks</b>		<b>Waterwatch Data Management System: Data entry</b>
Hazard: <u>  /  </u>	Risk: _____	Person entering site visit information
Risk Control Measures: _____		Date of entry
		Site visit approved by Coordinator (initial and date)

