

INSTRUCTIONS FOR SOIL TEST INFORMATION SHEET

Please fill out information sheet carefully and as completely as possible. The more information provided, the better the fertilizer recommendation. *Use one information sheet per sample* and include all information on each sheet.

1. **Names and Addresses** — *Clearly print* grower's name, address and zip code in first box. Second box is for commercial representatives, ASCS offices or others who should receive a report copy.
2. **Sample and Field Identification** — FIELD NAME is your field identification (can be name, numbers, or both). Record field size to nearest acre. Enter county in which field is located and date field is sampled.
3. **Soil Identification and Information** — From a county soil survey or farm conservation plan, obtain SOIL NAME or map unit symbol for soil occupying largest portion of field. If both are available, the map unit symbol is preferred. Two or more contrasting soil types occupying large, distinct areas should be sampled separately. Judge SOIL DRAINAGE, TEXTURE and COLOR as accurately as possible and check appropriate box. Under SAMPLE DEPTH, indicate starting and ending depths, e.g., 0" to 8", 8" to 16", etc. If sample is a surface 2" sample for assessing herbicide activity problems in no-till, check no-till box.
4. **Crops Grown** — Enter 3-letter CROP CODE for LAST CROP and CROP TO BE GROWN in blocks; e.g., /C/O/C/ for conventional tillage field corn. See crop code list below. If other additional crops are being considered, request alternative recommendation by filling 3-letter boxes under CROP TO BE GROWN. Enter estimated YIELD OF LAST CROP where indicated. Check box indicating units (bushels, boxes, etc.).
5. **Tillage and Cover** — Check box under TILLAGE which best describes plans for tilling NEXT CROP. Enter 3-letter COVER CODE for CURRENT COVER in blocks. This is especially important for no-till recommendations.
6. **Irrigation** — Check boxes to indicate if crop is to be irrigated, and what type of system will be used. *This extremely important information markedly affects yield potential and thus fertilizer recommendations. Indicate if injection pump will be used for fertilizer applications.*
7. **Manure** — If manure was, or will be, applied indicate type (poultry, swine, etc.), time of application and estimate rate in tons/acre. Only general recommendations can be made by this laboratory. For more precise recommendations for different handling systems and application methods, and for information regarding analysis of manure samples, contact your county Extension office.
8. **Last Fertilizer Use** — Record rate of N, P₂O₅ and K₂O applied most recently to field and when applied. Generally, this should represent total fertilizer applied to the previous crop. However, for double-cropped small grains and soybeans sampled in winter, record amount of fertilizer applied to small grains in fall.
9. **Previous Lime Use** — Indicate when lime was applied to field, as well as rate and type. *This is important* because your current need for lime can be reduced if lime was recently applied.

10. **Fertilizer Application Methods** — Indicate how fertilizer will be applied at planting. If crop will be sidedressed (primarily with nitrogen), check box describing method of application. Check more than one box if necessary.
11. **Soil Tests Desired** — Be sure that the tests desired are checked in this section. If special tests are needed, purchase them in advance at county Extension office, which will issue a receipt for amount required. Copy of receipt must be placed in envelope along with this information sheet.
12. **Comments** — If sample comes from problem area, describe problems including plant appearance and color, yield, etc. Also include information you feel is important that is not covered on the information sheet.

Taking Soil Samples

A pamphlet describing proper sampling techniques is provided with each purchase of soil testing bags at county Extension offices.

Submitting Samples

It is preferred that samples be submitted in the soil test kits provided by the UD Soil Testing Program, however, samples may be submitted in other containers (e.g., ziplock bags, kits from other labs, etc) so long as they 1) are clearly labeled, 2) are accompanied by an information sheet with your contact information, 3) contain enough sample (1-2 cups) and 4) are accompanied by payment or payment instructions. Completed kits may be returned to the laboratory by dropping them at the Program office, any Delaware Cooperative Extension Office (see below), by US mail or by any other delivery service (e.g., Fedex, UPS, etc).

Return of Results and Suggested Fertilizer Program

Soil test results and fertilizer program suggestions are returned directly to grower. A copy is also mailed to local ASCS office or company representative when requested. A copy is automatically mailed to your county Extension agent. Normally, the soil test report should be received within 14-18 days of submission of samples. However, allow more time in November, December, March and April. These are especially busy months for the soil testing lab.

Inquiries About Samples

Address inquiries about sample results and recommendations to local county Extension office. Providing the Bag Number of submitted samples is often helpful.

County Extension Offices

New Castle County: 501 South College Ave, Newark, DE 19716, (302) 831-2506. **Kent County:** 69 Transportation Circle, Dover, DE 19901, (302) 730-4000. **Sussex County:** Carvel Research and Education Center, 16483 County Seat Highway, Georgetown, DE 19947, (302) 856-7303.

CROP CODE LIST

Code	Name	Code	Name	Code	Name
GRAIN CROPS		VEGETABLE CROPS		PES	Peas/Snap Beans, doublecropped
BAR	Barley	ASN	Asparagus, new beds	PEP	Peppers
BRS	Barley-Soybeans, doublecropped	ACN	Asparagus, cutting non-hybrid	POS	Potatoes, White, scab resistant
COC	Corn, conventional tillage	ACH	Asparagus, cutting hybrid	PON	Potatoes, White, non-scab resistant
CON	Corn, no-till	BEL	Beans, Lima	POR	Potatoes, Russet
OAT	Oats	BEN	Beans, Snap	PSW	Potatoes, Sweet
RYE	Rye	BEE	Beets	PUM	Pumpkins
SOC	Soybeans, conventional tillage	BRO	Broccoli	RAD	Radishes
SON	Soybeans, full season no-till	BSP	Brussels Sprouts	RUT	Rutabaga
SOG	Grain Sorghum	CAB	Cabbage	SPN	Spinach
SFL	Sunflowers	CRT	Carrots	SQU	Squash
WHT	Wheat	CAU	Cauliflower	SWC	Sweet Corn
WTS	Wheat-Soybeans, doublecropped	CEL	Celery	TOM	Tomatoes
HAY, FORAGE, AND PASTURE CROPS		COL	Collards	TUR	Turnips
ALS	Alfalfa, seeding	CUC	Cucumbers	WMN	Watermelon
ALT	Alfalfa, topdressing	EGG	Eggplant	FRUIT CROPS	
CSI	Corn Silage	ESH	Horseradish	APL	Apples
GCS	Grass or Grass/Clover Pasture, seeding	KAL	Kale	BLU	Blueberries
GCT	Grass or Grass/Clover Pasture, topdressing	LEE	Leeks	BRM	Brambles
SOS	Sorghum Silage	LET	Lettuce	CHR	Cherries
SUM	Sudan or Millet	MXV	Mixed Vegetables	GRA	Grapes
WCB	White Clover/Bluegrass Pasture, topdressing	MEL	Muskmelons	PER	Pears
		ONB	Onions, Bulb	PLU	Plums
		ONS	Onions, Scallion	PNC	Peaches, Nectarines
		PAR	Parsley	STR	Strawberries
		PSP	Parsnips		
		PEA	Peas		
		PEL	Peas/Lima Beans, doublecropped		

NURSERY CROPS-FIELD GROWN

Code	Name
DSB	Deciduous Shrubs
EVB	Broadleaf Evergreens
EVN	Needle Evergreens
TRS	Deciduous Trees
XMS	Christmas Trees

COVER CODE LIST

Code	Name
FAL	Fallow
CST	Corn or Sorghum Stubble
BST	Soybean Stubble
SGS	Small Grain Stubble
VET	Hairy Vetch
AWP	Austrian Peas
CCL	Crimson Clover
OAT	Oats
RYE	Rye
RYG	Ryegrass
ASD	Alfalfa Sod
GLS	Grass/Clover Sod, greater than 50% clover
GSD	Grass/Clover Sod, less than 50% clover



— Read instructions before filling in information below. —

INFORMATION SHEET — COMMERCIAL CROPS

SOIL TESTING LABORATORY — UNIVERSITY OF DELAWARE — NEWARK, DE 19716-2170

1. NAME AND ADDRESSES				LAB USE ONLY	
NAME (Print)		SEND ADDITIONAL REPORT TO: (Print)		LAB # _____	
ADDRESS		COMPANY NAME		BAG # _____	
CITY	STATE	ZIP	ADDRESS	REC'D _____	
TEL NO.	E-MAIL	CITY	STATE	ZIP	
2. SAMPLE AND FIELD IDENTIFICATION					
<div style="border: 1px solid black; display: flex; justify-content: space-between; width: 100%; height: 20px;"> FIELD NAME OR NUMBER (Up to 15 characters) </div>			<div style="border: 1px solid black; display: flex; justify-content: space-between; width: 40px; height: 20px;"> ACRES (to nearest acre) </div>	FIELD LOCATION COUNTY _____	DATE SAMPLED (month/day/year) _____
3. SOIL IDENTIFICATION AND INFORMATION					
SOIL NAME From soil survey or conservation plan, obtain soil name (e.g., Woodstown sandy loam) OR map unit symbol (e.g., Wo) for soil occupying largest area of field.		SOIL DRAINAGE (X) <input type="checkbox"/> Well <input type="checkbox"/> Moderately Well <input type="checkbox"/> Somewhat Poorly <input type="checkbox"/> Poorly	TEXTURE (X) <input type="checkbox"/> Loamy Sand <input type="checkbox"/> Sandy Loam <input type="checkbox"/> Loam <input type="checkbox"/> Silt Loam	COLOR (X) <input type="checkbox"/> Normal (light brown) <input type="checkbox"/> Gray <input type="checkbox"/> Black	SAMPLE DEPTH to (inches) (inches) <input type="checkbox"/> Surface 2 inches for herbicide activity in no-till.
4. CROPS GROWN		5. TILLAGE AND COVER		6. IRRIGATION	
Enter crop codes from back of sheet in blocks below.		TILLAGE (X) <input type="checkbox"/> Conventional plow <input type="checkbox"/> Chisel plow <input type="checkbox"/> Disk only <input type="checkbox"/> No-till		Is this crop TO BE IRRIGATED?(X) <input type="checkbox"/> Yes <input type="checkbox"/> No	
LAST CROP <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px;"></div>	CROP TO BE GROWN <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px;"></div>	Place COVER CODE from back of sheet in blocks below. <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px;"></div>		TYPE OF SYSTEM (X) <input type="checkbox"/> Pivot <input type="checkbox"/> Gun <input type="checkbox"/> Trickle <input type="checkbox"/> Other	
Estimate YIELD OF LAST CROP (X) <input type="checkbox"/> Bushels <input type="checkbox"/> Boxes Yield (per acre) <input type="checkbox"/> Cwt. <input type="checkbox"/> Pounds <input type="checkbox"/> Tons	Enter additional crop code if an alternative recommendation is needed. 1. <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px;"></div> 2. <div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px;"></div>	INJECTION PUMP? <input type="checkbox"/> Yes <input type="checkbox"/> No		TIME OF MANURE APPLICATION (X) <input type="checkbox"/> None <input type="checkbox"/> Fall <input type="checkbox"/> Spring RATE (tons/acre)	
8. LAST FERTILIZER USE		9. PREVIOUS LIME USE		10. FERTILIZER APPLICATION METHODS	
<div style="border: 1px solid black; display: flex; justify-content: space-around; width: 100%; height: 20px;"> N P₂O₅ K₂O </div> (lbs/acre) When Applied		MONTHS since lime was last applied (X) <input type="checkbox"/> 0-6 months <input type="checkbox"/> 7-12 months <input type="checkbox"/> 13-18 months <input type="checkbox"/> 18 + months <input type="checkbox"/> Never <input type="checkbox"/> Unknown		RATE of last application TONS/A to nearest half ton TYPE of lime used (X) <input type="checkbox"/> High magnesium <input type="checkbox"/> High calcium other	
OTHER NUTRIENTS applied (X) <input type="checkbox"/> Sulfur <input type="checkbox"/> Boron <input type="checkbox"/> Manganese <input type="checkbox"/> Zinc		Fertilizer will be applied AT OR BEFORE PLANTING (X) <input type="checkbox"/> Broadcast <input type="checkbox"/> Preemergence spray <input type="checkbox"/> Banded, dry <input type="checkbox"/> Banded, liquid		If SIDEDRESSING , give method (X) <input type="checkbox"/> Dry, between rows <input type="checkbox"/> Dribble <input type="checkbox"/> Through irrigation system other	
11. SOIL TESTS DESIRED — Enclose Proof of Purchase				12. COMMENTS (see item 12 on back of sheet)	
<input type="checkbox"/> Routine \$18.00 (pH, Buffer pH, P, K, Mg, Ca, Mn, Zn, B, S, PSR, Organic Matter)				_____ _____ _____	
<input type="checkbox"/> Soluble Salts \$10.00					
<input type="checkbox"/> Lead Screening \$4.50					