

KSI Laboratories

202 S. Dacey Drive
Shelbyville, IL 62565

SHELBYVILLE (Main Office & Laboratory)
Ph: (217) 774-2421 Fax: (217) 774-2866
E-Mail: ksilab@consolidated.net
Website: www.ksilab.com

SOIL SAMPLE INFORMATION SHEET

FOR CUSTOMER-PULLED SAMPLES ONLY

Date: _____

Send Results To: _____

Operator/Grower: _____

Address: _____

<u>Field I.D.</u>	<u>Acres</u>	<u># of Samples</u>	<u>For Lab Use Only</u>
1.			
2.			
3.			
4.			

Recommendations / Expected Yields:

_____ Yes _____ No

If Yes, please fill in yield goals:

Corn _____ (bu/ac.)

Beans _____ (bu/ac.)

Wheat _____ (bu/ac.)

Alfalfa _____ (ton/ac.)

Grass/ Legume _____ (ton/ac.)

10 yr/ CRP _____

Lawn _____

Garden _____

Wildlife Food Plot _____

Other _____ (bu/ton/ac.)

Field Map

N

TEST DESIRED:

<u>STANDARD ANALYSIS</u>	<u>MICRONUTRIENTS</u>	<u>SOYBEAN CYST NEMATODE</u>
<p>_____ <u>Test #1:</u> pH, Phosphorus, Potassium, Organic Matter</p> <p>_____ <u>Test #2:</u> pH, Phosphorus, Potassium, Organic Matter, Calcium, Magnesium, % Base Saturation, CEC</p> <p>Special Instructions: _____</p> <p>_____</p> <p>_____</p>	<p>_____ <u>Test #3:</u> Sulfur, Boron, Zinc, Iron, Manganese, Copper</p> <p>_____ Micros on <u>each</u> sample?</p> <p>Make a <u>composite</u> micro from the following samples:</p> <p>_____</p> <p><u>Individual Analysis:</u> Sulfur Iron Zinc</p> <p>Manganese Copper Boron Sodium</p> <p>Soluable Salt 12" Nitrate Residual</p>	<p>_____ Screen <u>each</u> sample for Soybean Cyst Nematode</p> <p>_____ Screen a <u>composite</u> sample for Soybean Cyst Nematode</p> <p>Make a <u>composite</u> SCN from the following samples:</p> <p>_____</p> <p>_____</p> <p>_____</p>

FIELD OFFICE INFO

WOODSON: Ph: 217-673-6601 Fax: 217-673-4178

LOUISVILLE: Ph: 618-665-4574 Fax: 618-665-4575

RUSHVILLE: Ph: 217-322-4242 Fax: 217-322-4245