

Please provide information for four **SOYBEAN** fields on your farm in **2015**. If you have questions, contact **Dr. Laura Lindsey** (Phone: 614-905-1039 / e-mail: [lindsey.233@osu.edu](mailto:lindsey.233@osu.edu)). Note that all provided info will be kept confidential! **An EXAMPLE is shown in red.**

	<b>EXAMPLE:</b>	<b>2015 Soybean</b>	<b>2015 Soybean</b>	<b>2015 Soybean</b>	<b>2015 Soybean</b>
GPS coordinates of field center: OR County & field location relative to Rd Intersection:	<b>40.972, -82.666</b> <b>Richland Co., N of</b> <b>Opdyke Rd. and E</b> <b>of Plymouth St.</b>				
Indicate field size (acres)	<b>90 ac</b>				
Does this field have drainage? (no, old clay tile, new systematic tile, surface drainage, other)	<b>No</b>				
AVE. SOYBEAN YIELD (bushels/acre) for this FIELD:	<b>55</b>				
Lowest   Highest Yield (bu/ac) of your soy fields in <u>2015</u>	<b>Low:</b> <b>40</b> <b>High:</b> <b>62</b>	<b>Low:</b>	<b>High:</b>	-----	
Planting Date in this FIELD (Month/Day/Year):	<b>5/10/2015</b>				
Variety Name (Brand & Number):	<b>Pioneer P93M11</b>				
Seeding Rate (seeds/ac):	<b>125,000</b>				
Row spacing (inches):	<b>30</b>				
Seed Treated (Yes/No)? What Brand Name Product(s)?	<b>Yes (Cruiser-Max)</b>				
Prior Crop in this FIELD? Residue harvested or grazed?	<b>Corn - Harvested</b>				
Tillage after prior crop? No-Till (NT); Ridge (RT); Strip (ST); Disk (D); Chisel (C); Vertical (V) – Indicate timing (month-year)	<b>ST (March-2015)</b>				
Any (non-starter) fertilizer after previous crop, but before this crop? Specify rate (pounds NUTRIENT/ac) and timing (month-year)	<b>P<sub>2</sub>O<sub>5</sub>: 70    K<sub>2</sub>O: 30</b> <b>Other: S (11 lbs)</b> <b>Time: March-2015</b>	<b>P<sub>2</sub>O<sub>5</sub>:</b> <b>K<sub>2</sub>O:</b>	<b>Other:</b>	<b>P<sub>2</sub>O<sub>5</sub>:</b> <b>K<sub>2</sub>O:</b>	<b>Other:</b>
Any STARTER fertilizer (Yes/No)? If Yes, specify nutrients	<b>Yes (N, P, Zn)</b>				
Any Lime (L) or Manure (M)? If yes, specify timing (mm-yy)	<b>Lime (April-2015)</b>				
PRE- or POST-emergence herbicide program or BOTH?	<b>Both</b>				
Any in-season foliar fungicide (F) / insecticide (I)?	<b>F and I</b>				
Soy Cyst Nematodes (Yes/No/I don't know/never tested)?	<b>No</b>				
Any significant yield loss due to Insects, Diseases, Weeds, Frost, Hail, Flood, Lodging? Specify problem	<b>Sudden death</b> <b>Hail (July-2015)</b>				



Please provide information for four **SOYBEAN** fields on your farm in **2014**. If you have questions, contact **Dr. Laura Lindsey** (Phone: 614-905-1039 / e-mail: [lindsey.233@osu.edu](mailto:lindsey.233@osu.edu)). Note that all provided info will be kept confidential! **An EXAMPLE is shown in red.**

	<b>EXAMPLE:</b>	<b>2014 Soybean</b>	<b>2014 Soybean</b>	<b>2014 Soybean</b>	<b>2014 Soybean</b>
GPS coordinates of field center: OR County & field location relative to Rd Intersection:	<b>40.972, -82.666 Richland Co., N of Opdyke Rd. and E of Plymouth St.</b>				
Indicate field size (acres)	<b>90 ac</b>				
Does this field have drainage? (no, old clay tile, new systematic tile, surface drainage, other)	<b>New systematic tile</b>				
SOYBEAN YIELD (bushels/acre) for this FIELD:	<b>55</b>				
Lowest   Highest Yield (bu/ac) of your soy fields in <u>2014</u>	<b>Low: 40    High: 62</b>	<b>Low:</b>	<b>High:</b>	-----	
Planting Date in this FIELD (Month/Day/Year):	<b>5/10/2014</b>				
Variety Name (Brand & Number):	<b>Pioneer P93M11</b>				
Seeding Rate (seeds/ac):	<b>125,000</b>				
Row spacing (inches):	<b>30</b>				
Seed Treated (Yes/No)? What Brand Name Product(s)?	<b>Yes (Cruiser-Max)</b>				
Prior Crop in this FIELD? Residue harvested or grazed?	<b>Corn - Harvested</b>				
Tillage after prior crop? No-Till (NT); Ridge (RT); Strip (ST); Disk (D); Chisel (C); Vertical (V) – Indicate timing (month-year)	<b>ST (March-2014)</b>				
Any (non-starter) fertilizer after previous crop, but before this crop? Specify rate (pounds NUTRIENT/ac) and timing (month-year)	<b>P<sub>2</sub>O<sub>5</sub>: 70    K<sub>2</sub>O: 30</b>	<b>P<sub>2</sub>O<sub>5</sub>:</b>	<b>K<sub>2</sub>O:</b>	<b>P<sub>2</sub>O<sub>5</sub>:</b>	<b>K<sub>2</sub>O:</b>
	<b>Other: S (11 lbs)</b>	<b>Other:</b>	<b>Other:</b>	<b>Other:</b>	<b>Other:</b>
	<b>Time: March-2014</b>	<b>Time:</b>	<b>Time:</b>	<b>Time:</b>	<b>Time:</b>
Any STARTER fertilizer (Yes/No)? If Yes, specify nutrients	<b>Yes (N, P, Zn)</b>				
Any Lime (L) or Manure (M)? If yes, specify timing (mm-yy)	<b>Lime (April-2014)</b>				
PRE- or POST-emergence herbicide program or BOTH?	<b>Both</b>				
Any in-season foliar fungicide (F) / insecticide (I)?	<b>F and I</b>				
Soy Cyst Nematodes (Yes/No/I don't know)?	<b>No</b>				
Any significant yield loss due to Insects, Diseases, Weeds, Frost, Hail, Flood, Lodging? Specify problem	<b>Early frost (September- 2015)</b>				

