**WEST VIRGINIA UNIVERSITY**
**COLLEGE OF AGRICULTURE & FORESTRY**
**SOIL TESTING LABORATORY**
**MORGANTOWN, WV 26506-6108**

**SOIL TEST QUESTIONNAIRE**

WVU LABORATORY NUMBER (To be filled in at the laboratory)

YOUR SAMPLE IDENTIFICATION

COUNTY SERIAL NUMBER (Filled in by county agent)

NAME

ADDRESS

(INCLUDE ZIP CODE)

COUNTY NAME

PHONE

FSA COST SHARING? (YES/NO)

ORGANIC GROWER? (YES/NO)

/ / DATE SOIL WAS SAMPLED (MONTH/DAY/YEAR)

ACRES (OR SQUARE FT.) THAT THIS SOIL SAMPLE REPRESENTS

PREVIOUS CROP

SOIL NAME (SERIES)

SOIL TEXTURE: (EX: LOAM, SAND, CLAY, SANDY-LOAM)

TILLAGE METHOD (EX: CONVENTIONAL, NO-TILL)

WAS THE SOIL LIMED WITHIN THE LAST 12 MONTHS? (YES/NO)

CROP CODE (SELECT ONLY ONE FROM LIST BELOW)

01 — TALL GRASS HAY OR PASTURE (less than 30% legume)
02 — TALL GRASS AND LEGUME HAY (more than 30% legume)
03 — TALL GRASS AND LEGUME PASTURE (more than 30% legume)
04 — BLUEGRASS AND WHITE CLOVER PASTURE (more than 30% legume)
05 — GRASS PASTURE (less than 30% legume)
06 — ALFALFA OR ALFALFA AND GRASS HAY
07 — GRASS OR GRASS AND LEGUME SEEDING
08 — ALFALFA OR CLOVER SEEDINGS
09 — CORN GRAIN
10 — CORN SILAGE
11 — STRAWBERRIES
12 — ORCHARD, GRAPES, AND NUT CROPS
13 — SMALL GRAINS (not interseeded)
14 — SOYBEANS
15 — BURLEY TOBACCO
16 — HOME GARDENS (please list crops in box)
17 — NEW LAWN SEEDINGS
18 — ESTABLISHED LAWNS OR TURF
99 — OTHER (Please specify) _____

Give details about kind of crop(s) grown and past soil treatment. Any questions or special problems?