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| **ARS RESIDUE & BIOMASS FIELD SURVEY – 2012 PILOT** | | | | | |
|  | | | OMB No. 0535-0248  Approval Expires: 8/31/2014  Project Code: 516 QID: 248010 | | |
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| **SURVEY_LOGO_1:USDA_logo_bw.gif** | **new_nass_logo_bw** | **NATIONAL**  **AGRICULTURAL**  **STATISTICS**  **SERVICE** |
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|  |  |  |  |  |  | National Agricultural Statistics Service  U.S Department of Agriculture  Iowa Field Office  210 Walnut St., Room 833Des Moines, IA 50309  Phone: 1-800-772-0825  Fax: 1-800-719-1794  Email: nass-ia@nass.usda.gov |

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| We are collecting information on cost and returns and need your help to make the information as accurate as possible. Under Title 7 of the U.S. Code and CIPSEA (Public Law 107-347), facts about your operation are kept **confidential** and used only for statistical purposes. Response is **voluntary.**  You may skip any question(s) you prefer not to answer. Thank you for your help. |
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| **SECTION 1 – LOCATION** |  |

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| The enumerator will review which field was selected for the previous 2 surveys in May and September, please describe the location by answering one of the following 2 questions. |
| a. What is the latitude/longitude of this field?  (*Record and go to Section 2)*    b. What is the closest road intersection to this field? |

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| **SECTION 2 – 2011 CROPS** |  |

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| In the selected field, report production practices that occurred in 2011. | |
| 1. What crop was grown in 2011? | |
| **Corn for grain**  **Soybeans**  **Other** *(please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)* | |
|  | |
| 2. Was MANURE applied in the fall of 2011? | |
| **YES** - [*continue*]  **NO** - [*Go to item 3*] | |
|  | |
| 1. What date was the manure applied? *(mm/dd/yyyy)* | |
|  | |
| 1. What type of manure was applied? | |
|  | |
| 1. What was the application method? | |
|  | |
| Lbs/acre | |
| 1. What was the application rate? Gal/acre | |
| (*Record and circle rate)* Lbs actual nutrients | |
| According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0535-0218. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. | |
| 3. Was commercial FERTILIZER applied in the fall of 2011? | |
| **YES** - [*continue*]  **NO** - [*Go to item 4*] | |
|  | |
| 1. What date was the fertilizer applied? *(mm/dd/yyyy)* | |
|  | |
| 1. What type of fertilizer was used? (name or N-P-K values) | |
|  | |
| Lbs/acre | |
| 1. What was the application rate? Gal/acre | |
| (*Record and circle rate)* Lbs actual nutrients | |
|  | |
| 4. Was TILLAGE performed in the fall of 2011? | |
| **YES** - [*continue*]  **NO** - [*Go to Section 3*] | |
|  | |
| 1. What date was the tillage completed? *(mm/dd/yyyy)* | |
|  | |
| 1. For the 2 most common tillage implements, report the implement, depth, and number of passes | |
|  | |
| 1. What was the most frequently used implement? | |
|  | |
| 1. What was the depth tilled per pass? *(inches)* | |
|  | |
| 1. How many passes over the field with this implement? | |
|  | |
| 1. What was the next most frequently used implement? | |
|  | |
| 1. What was the depth tilled per pass? *(inches)* | |
|  | |
| 1. How many passes over the field with this implement? | |
|  | |
| **SECTION 3 – SPRING** **2012 ACTIVITIES** |  |
| In the selected field, report production practices that occurred in spring, 2012. | |
| 1. What crop was grown in 2012? | |
| **Corn for grain**  **Soybeans**  **Other** *(please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)* | |
|  | |
| 2. What was the amount of residue remaining on the soil immediately before spring operations? | |
| **Greater than or equal to 30 percent**  **Less than 30 percent** | |
|  | |
| 3. Was MANURE applied in the spring of 2012? | |
| **YES** - [*continue*]  **NO** - [*Go to item 3*] | |
|  | |
| 1. What date was the manure applied? *(mm/dd/yyyy)* | |
|  | |
| 1. What type of manure was applied? | |
|  | |
| 1. What was the application method? | |
|  | |
| Lbs/acre | |
| 1. What was the application rate? Gal/acre | |
| (*Record and circle rate)* Lbs actual nutrients | |
|  | |
| 4. Was commercial FERTILIZER applied in the spring of 2012? | |
| **YES** - [*continue*]  **NO** - [*Go to item 5*] | |
|  | |
| 1. What date was the manure applied? *(mm/dd/yyyy)* | |
|  | |
| 1. What type of fertilizer was used? (name or N-P-K values) | |
|  | |
| Lbs/acre | |
| 1. What was the application rate? Gal/acre | |
| (*Record and circle rate)* Lbs actual nutrients | |

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| 5. Was TILLAGE performed in the spring of 2012? |
| **YES** - [*continue*]  **NO** - [*Go to Item 6*] |
|  |
| 1. What date was the tillage completed? *(mm/dd/yyyy)* |
|  |
| 1. For the 2 most common tillage implements, report the implement, depth, and number of passes |
|  |
| 1. What was the most frequently used implement? |
|  |
| 1. What was the depth tilled per pass? *(inches)* |
|  |
| 1. How many passes over the field with this implement? |
|  |
| 1. What was the next most frequently used implement? |
|  |
| 1. What was the depth tilled per pass? *(inches)* |
|  |
| 1. How many passes over the field with this implement? |
|  |
| 6. What was the amount of residue remaining on the soil surface just before planting? |
| **Greater than or equal to 30 percent**  **Less than 30 percent** |
|  |
| 7. What was the planting date (mm/dd/yyyy) |
|  |
| **SECTION 4 – FALL 2012 ACTIVITIES** |  |
| In the selected field, report production practices that occurred in the fall, 2012. |  |
| 1. What was the harvest date? *(mm/dd/yyyy)* |  |
|  |  |
| 2. What was the average yield in this field this year? Bu/acre |  |
| (*Record and circle rate)* Other *(specify)* |  |
|  |  |
| 3. If a yield map was available to the operator, will you provide a yield monitor map to assist in ARS Research on |  |
| this topic? |  |
| **YES** - [*continue*]  **NO** - [*Go to Item 4*] |  |
|  |  |
| 1. If a yield map can be provided, Will the map be electronic or a color print? |  |
| **YES**   **NO** |  |
|  |  |
| 4. Was crop residue removed |  |
| **YES** - [*continue*]  **NO** - [*Go to Item 5*] |  |
|  |  |
| 1. What percent of crop residue was removed? |  |
|  |  |
| 1. On what date was the crop residue removed? *(mm/dd/yyyy)* |  |
|  |  |
| 5. Was MANURE applied in the fall of 2012? |  |
| **YES** - [*continue*]  **NO** - [*Go to item 6*] |  |
|  |  |
| 1. What date was the manure applied? *(mm/dd/yyyy)* |  |
|  |  |
| 1. What type of manure was applied? |  |
|  |  |
| 1. What was the application method? |  |
|  |  |
| Lbs/acre |  |
| 1. What was the application rate? Gal/acre |  |
| (*Record and circle rate)* Lbs actual nutrients |  |
|  |  |
| 6. Was commercial FERTILIZER applied in the fall of 2012? |  |
| **YES** - [*continue*]  **NO** - [*Go to item 7*] |  |
|  |  |
| 1. What date was the fertilizer applied? *(mm/dd/yyyy)* |  |
|  |  |
| 1. What type of fertilizer was used? (name or N-P-K values) |  |
|  |  |
| Lbs/acre |  |
| 1. What was the application rate? Gal/acre |  |
| (*Record and circle rate)* Lbs actual nutrients |  |
|  |  |
| 7. Was TILLAGE performed in the fall of 2012? |  |
| **YES** - [*continue*]  **NO** - [*Go to Item 8*] |  |
|  |  |
| 1. What date was the tillage completed? *(mm/dd/yyyy)* |  |
|  |  |
| 1. For the 2 most common tillage implements, report the implement, depth, and number of passes |  |
|  |  |
| 1. What was the most frequently used implement? |  |
|  |  |
| 1. What was the depth tilled per pass? *(inches)* |  |
|  |  |
| 1. How many passes over the field with this implement? |  |
|  |  |
| 1. What was the next most frequently used implement? |  |
|  |  |
| 1. What was the depth tilled per pass? *(inches)* |  |
|  |  |
| 1. How many passes over the field with this implement? |  |
|  |  |
| 8. What was the amount of residue remaining on the soil surface after all operations? |  |
| **Greater than or equal to 30 percent**  **Less than 30 percent** |  |
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| 9. Are there any additional comments? (For example, unusual practices, weather conditions, tiles installed, change in rotations, |  |
| comments on the survey, etc. |  |
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| **SECTION 4 – PERMISSION TO RELEASE INFORMATION TO ARS** |  |
|  |  |
| I give my permission for USDA’s National Agricultural Statistics Service’s Iowa Field Office to release this information to |  |
| USDA’s Agricultural Research Service for use in their field research. |  |
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|  |  |
| Signature Date |  |
|  |  |

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| --- |
| **This completes the survey. Thank you for your help.** |