

Phase II Groundwater Quality Management Area Reporting Form

Please submit to the Upper Elkhorn NRD Office by February 1

Name (Certified Operator) _____		
Address _____		
City _____	State _____	Zip _____
Nitrogen Certification # _____	Exp. Date _____	



Upper Elkhorn
Natural Resources District

Field Information

FSA Tract # _____	<i>(Obtain number from FSA Office)</i>	
Legal Description _____	1/4 _____	<i>(Sub-Qtr: NE, NW, SW, SE)</i>
_____	1/4 _____	<i>(Qtr Section: NE, NW, SW, SE)</i>
_____	Sec. _____	<i>(Section number: 1-36)</i>
_____	Township _____	<i>(Township number: 23-32)</i>
_____	Range _____	<i>(Range number: 5-16)</i>
County _____		
Field Description _____ <i>(Common field description)</i>		
Crop _____ <i>(If multiple Crops are Planted on one field, list each crop (e.g., corn/soybean))</i>		
Crop Year _____		

Irrigation Applications

Well Registration # _____	<i>(See link at www.uenrd.org)</i>	
Acres Irrigated _____		
Crop Water Use _____	inch	<i>(See link at www.uenrd.org)</i>
Flow Rate _____		
Total Hours _____		
<i>(Total hours of irrigation)</i>		
Irrigation Type _____		
<i>(Enter type of irrigation system. (e.g., High pressure, low pressure, ect.))</i>		
Total Rainfall _____	inch	<i>(Enter Total rainfall during the growing season)</i>
Flowmeter Reading _____		
<i>(If Available)</i>		
Check here <input type="checkbox"/> if dryland		

Nitrogen Applications

Acre _____	<i>(Total number of acres in field)</i>	
Average Soil Nitrate _____	ppm	<i>(Residual soil nitrates from deep soil sample results)</i>
Soil Sample Depth _____	inch	<i>(Average depth of soil samples)</i>
Irrigation Water Nitrates _____	ppm	<i>(Nitrate Concentration in irrigation water)</i>
Inches of Water Applied _____	inch	<i>(Inches of irrigation water applied for nitrogen credit)</i>
Legume Credit _____	<i>lb N/acre</i>	
Other N Credit _____	<i>lb N/acre</i>	
Organic Matter _____	%	<i>(Percent soil organic matter from soil sample analysis. Range from 1% - 3%)</i>
Yield Goal _____	bu/acre	<i>(Average of previous 5 years yield plus an additional 5%)</i>
Actual N Applied _____		
<i>lb N/acre</i>		
Actual Yield _____		
<i>bu/acre</i>		

Pesticide Applications

Pesticide Name _____	_____		
Application Rate _____	<input type="checkbox"/> oz/acre	<input type="checkbox"/> pt/acre	<input type="checkbox"/> qt/acre

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