

On-Farm CWRS Management Survey	1			
	2019	2019	2020	2020
Name				
Mailing address				
Phone				
Specify field location by Section: Township: Range.				
OR GPS coordinates of field:				
OR County & field location relative to Rd Intersection:				
Field size (minimum 50 acres)				
Was the field grown for grain? (Fields for seed multiplication will not be used)				
Conventional or Organic Production? (If organic field does not qualify)				
Irrigated or dryland?				
Tile drainage (Yes/No)				
Soil Type				
Organic Matter (OM %)				
Yield Target used for Fertilizer Recommendations (bu/ac)				
Actual Wheat yield harvested (bu/ac)				
Bushel weight or test weight (lbs/bu or kg/ha)				
Wheat protein concentration (%)				
Grade (if available) list cause of downgrading				
Planting Date in this FIELD (Month/Day/Year):				
Variety Name (see "CWRS cutlivars" tab):				
Seeding Rate (seeds/m ²). Need to record units (bu/ac; lbs/ac; TKW; germ)				
TKW				
Germ				
Row spacing (inches):				
Insecticide seed treatment (Yes/No) i.e. Cruiser 5FS; Cruiser Maxx Vibrance Cereals; Cruiser Vibrance Quattro; Lumivia CPL; NipsIt; Raxil PRO Shield; Stress Shield; Sombrero;				
Fungicide seed treatment (No/Single/Dual+) i.e. Allegiance/Belmont; Crusier Maxx Vibrance Cereals; Cruiser Vibrance Quattro; Deflect; Insure Cereal; Insure Cereal FX4; INTEGGO Solo; METLOCK CT; NipsIt SUITE; Rancona; Raxil PRO; Vibrance Quattro/XL; Vitaflo				
Seed certification (certified, certified-1, or farmer saved)				
Prior Crop in this FIELD? Yield of prior crop				

Crop rotation used on this FIELD in last 4 years				
Residue management of previous crop: baled or chopped and spread?				
Tillage after prior crop? No-Till (NT) or Tilled (T, indicate method) or Heavy Harrowed (HH).				
Any soil amendments? i.e. Lime (L) or Manure (M)? If yes, specify timing (mm-yy) and rate. If manure specify type: poultry, pigs, beef, dairy				
Method for determining fertilizer rates: Based on soil sample recommendations - OR - expected crop removal				
Fertilizer Method: Variable rate (VR) - OR - consistent rate across entire field?				
Pre-plant fertilizer (Yes/No)? If Yes, specify product name, rate, and date (i.e. December, early November, etc); list application method (banded or broadcast); if broadcast, was it incorporated? If yes, list time from spreading to incorporation; If no incorporation, was enhanced efficiency fertilizer used? If so which one?				
Fertilizer at planting (Yes/No)? If Yes, specify product name (urea; 11-52; 0-0-60. Include enhanced efficiency fertilizers - i.e. Agrotain, ESN, SuperU) and rate; If yes, specify Seed Row (SR), Mid-Row Banded (MR) or Side Banded (SB).				
In-season fertilizer (Yes/No)? If yes, specify product name, rate, and timing (growth stage)				
Herbicide program (pre emergent, post emergent/in-crop, or both)				
Plant growth regulators (Yes/No)?				
Any in-season foliar fungicide (F) ? Timing (herbicide, flag leaf, anthesis)				
Any in-season insecticide (I)? Targeting which insect pest? (i.e. armyworm, cutworms, grasshoppers, wheat midge)				
Insect pests leading to significant yield loss (Yes/No)? If yes, which insect? (i.e. armyworm, cutworms, grasshoppers, wheat midge)				
Was a pre-harvest glyphosate or pre-harvest herbicide such as Heat (Yes/No)?				
Any significant yield loss due to Insects, Diseases, Weeds, Frost, Hail, Flood, Lodging?				
Harvest Date (MM/DD/YYYY)				