

2010 CORN PLANTING AND HARVEST REPORT



For help finding Latitude and Longitude Information Click here

Requirements	Retail and Grower Information															Corn Price/Bu.			3.5		For Gross Income Potential	
	*Retail Account #															Drying Cost/Pt.			0.06			
	*Retail Location Name:															Pesticide Information						
	*Retailer City:		*Retailer State:					Prior Yr Herbicide(s)														
	*Grower Name:		David Fehr		*SAA:				*Latitude:				Pre Herbicide 1		Rate		Date					
	*Grower City:							*Longitude:				Pre Herbicide 2		Rate		Date						
	*Grower State:		MN		*Zip Code:				Latitude Format Example: XX.XXXXXX		Post Herbicide 1		Rate		Date							
	*County:							Longitude Format Example: -XX.XXXXXX		Post Herbicide 2		Rate		Date								
	General Plot Information										Soil Insecticide		Rate		Date							
	*Planting Date:				*Prev. Crop:				Planting Pop				Foliar Insecticide		Rate		Date					
*Time of Planting:				*Row Length:				Soil Drainage				Fungicide		Rate		Date						
*Plot Type:				*Row Width:				Tillage Type				Soil Analysis		Manure Type		Applied:Tn/GI/Ac						
Crop:		CORN		*#of Rows:				Irrigation				*Soil Type		N-P-K (lb/ac)								
# of Buffer Rows				Direction In Field Plot Begins On								pH		P (ppm)								
Insect, Diseases and Cultural Information										%Organic Matter		K (ppm)										
CRW Pressure:				Drought Condition																		
ECB Pressure:																						
*Harvest Date:		10/25/10		*If not Harvested indicate here:																		

Entry	Check	*Brand	*Hybrid	*Trait	Seed Treatment	Soil Insecticide	Foliar Fungicide	*Harvest Weight	*Harvest Moist %	*Row Width (inch)	*Row Length (feet)	No of Rows	Harvest Population	*Test Wt	Adjusted Yield 15%	Gross Income Potential	Yield Rank	Gross Income Rank
1		NK_Brand	N39-23 3000			<input type="checkbox"/>	<input type="checkbox"/>	1988	14.7	30	878	6		56.3	118.53	\$420.54	3	2
2		NK_Brand	N39-Z 3000 Avicta			<input type="checkbox"/>	<input type="checkbox"/>	2410	14.3	30	866	6		57.3	146.36	\$522.81	1	1
3						<input type="checkbox"/>	<input type="checkbox"/>									0		
4						<input type="checkbox"/>	<input type="checkbox"/>									0		
5						<input type="checkbox"/>	<input type="checkbox"/>									0		
6						<input type="checkbox"/>	<input type="checkbox"/>									0		
7						<input type="checkbox"/>	<input type="checkbox"/>									0		
8						<input type="checkbox"/>	<input type="checkbox"/>									0		
9						<input type="checkbox"/>	<input type="checkbox"/>									0		
10						<input type="checkbox"/>	<input type="checkbox"/>									0		
11						<input type="checkbox"/>	<input type="checkbox"/>									0		
12						<input type="checkbox"/>	<input type="checkbox"/>									0		
13						<input type="checkbox"/>	<input type="checkbox"/>									0		
14						<input type="checkbox"/>	<input type="checkbox"/>									0		
15						<input type="checkbox"/>	<input type="checkbox"/>									0		
16						<input type="checkbox"/>	<input type="checkbox"/>									0		
17						<input type="checkbox"/>	<input type="checkbox"/>									0		
18						<input type="checkbox"/>	<input type="checkbox"/>									0		
19						<input type="checkbox"/>	<input type="checkbox"/>									0		
20						<input type="checkbox"/>	<input type="checkbox"/>									0		
21						<input type="checkbox"/>	<input type="checkbox"/>									0		
22						<input type="checkbox"/>	<input type="checkbox"/>									0		
23						<input type="checkbox"/>	<input type="checkbox"/>									0		