

Lab use only

Date sampled: _____ / _____ / _____
month day year

Date received: _____ / _____ / _____
month day year

Lab #: _____

Name: _____

Firm submitting: _____

Address: _____

Address: _____

City/state/ZIP: _____ / _____ / _____

City/state/ZIP: _____ / _____ / _____

Phone: _____ Fax: _____

Phone: _____ Fax: _____

Email: _____

Email: _____

County to be billed: _____ County code: _____

Firm #: _____ Outlet #: _____

Number of samples	Cost	Total cost
Total kjeldhal nitrogen (TKN)	\$10	
Inorganic – nitrogen (NO3-N and NH4-N)	\$10	
TKN and inorganic N and organic N	\$20	
Nitrate–N (NO3-N)	\$5	
Ammonium-N (NH4-N)	\$5	
Total phosphorus (TP)	\$10	
Total potassium (TK)	\$10	
Sodium absorption ratio (SAR) - Saturated Paste	\$15	
Exchangeable sodium percentage (ESP)	\$15	
Electrical conductivity	\$6	
Particle size analysis (percent sand, silt, clay) and soil texture	\$15	
Exchangeable cations & base saturation percentage	\$15	
Cation exchange capacity (addition method)	\$15	
Cation exchange capacity (NH4OAc-distillation method)	\$20	
Total carbon (TC) by combustion	\$10	
Total nitrogen (TN) by combustion	\$10	
Total sulfur (TS) by combustion	\$10	
Total C and N by combustion	\$18	
Total C, N and S by combustion	\$27	
Potentially mineralizable N	\$16	
Saturated hydraulic conductivity (constant head permeability)	\$250	

Total due: _____

To pay by check: Make checks payable to MU Soil Testing for the total amount due. The check must be sent along with the sample unless you have an account set up with the lab. The lab also accepts purchase orders; contact the lab to discuss this process. Samples will be discarded after 30 days.

When submitting samples directly to the lab, send a duly filled sample information form.