Name:

Soil Sample Sheet (not a P:1- turn this into your folder when finished!)

|  |  |
| --- | --- |
| Location of soil sample: |  |
| Color of soil sample: |  |
| Smell of soil sample: |  |
| Using the ribbon test, what is your soil sample’s texture? |  |
| Using the soil particle distribution test and the soil triangle fill in the following information: |  |
| \*\*\*\*\* % Sand |  |
| \*\*\*\*\* % Silt |  |
| \*\*\*\*\* % Clay |  |
| What is the soil sample’s texture using soil particle distribution? |  |

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