DEPARTMENT OF ENVIRONMENT
AND NATURAL RESOURCES
DIVISION OF ENVIRONMENTAL HEALTH

SOIL/SITE EVALUATION

(Continuation Sheet)

Sheet ____ of ____

PROPERTY ID #: ____
DATE OF EVALUATION: ____
COUNTY: ____

Bells Crossing

PROFILE #	.1940 LANDSCAPE POSITION/ SLOPE %	HORIZON DEPTH (IN.)	SOIL MORPHOLOGY (.1941) .1941 STRUCTURE/ TEXTURE	SOIL MORPHOLOGY (.1941) .1941 CONSISTENCE/ MINERALOGY	OTHER PROFILE FACTORS .1942 SOIL WETNESS/ COLOR	.1943 SOIL DEPTH	.1956 SAPRO CLASS	.1944 RESTR HORIZ	PROFILE CLASS & LTAR
P1 98A	L/G 10%	0-36	RB c wf lbk/sbk	Fr ss sp SEXP	-f sap -f YB's	48	-	-	PS .275
		36-48	RY cl wf sbk	" " " "	-c sap				
P1 98B	L/G 10	0-10	B scl w sbk	Fr SS SP SEXP	-	48	-	-	PS .275- .3
		10-34	BR c wm sbk/abk	" " " "					
		34-48	R sc wm sbk	" " " "	-f sap				
P1 98C	L/G 10%	0-12	B scl cl ws bk	Fr SS SP SEXP	-f-c YB's -f sap	57	-	-	PS 0.25
		12-57	RB C wm/mk/sbk	Fr ss p SEXP					
P1 98D	L/0-5	0-15	BR scl wf sbk	Fr ss sp SEXP	f-c mn	50	-	-	PS 0.25
		15-38	RBC mf/f lbk/sbk	" " p "	-f-mn -f YB's				
		38-50	RY sc l ws bk	Fr " sp "	-c sap				

COMMENTS: ____