

EXHIBIT B

TURF MANAGEMENT SCOUTING REPORT

FIELD NAME Black Point

DATE 5/3/13

DATE OF LAST SOIL TEST _____

FIELD PH _____

OTHER SOIL TEST RECOMMENDATIONS _____

SITE CONDITIONS: Soil Type Field Compaction: Yes No _____

Drainage: Dry Often Wet (W) _____ Low Spots (L) _____

Light: All Sun Some Shade (S) _____ Trees Present (T) _____

IRRIGATION: Yes _____ No

If Yes, Type of Irrigation System _____

Frequency _____ Duration per Application _____

Amount/Application _____ Time of Day of Application _____

VISUAL CHARACTERISTICS OF TURF

Color (C)	<u>Good</u>	Fair	Poor
Density	Low	High	<u>Combination</u>
Smoothness (SM)	<u>Good</u>	Poor	
Turf Surface (TS)	<u>Smooth</u>	Clumps	Combination
Holes/Divots (H)	None	<u>Few</u>	Many
Bare Areas (B)	None	<u>Few</u>	Many

PESTS DICOT WEEDS

Dandelions (DL)	None	<u>Few</u>	Many
Plantain (PL)	None	<u>Few</u>	Many
Clover (CL)	None	<u>Few</u>	Many
Knotweed (KN)	None	Few	Many
Other (O)			Many

Identify "**Others**" by name if possible _____

Weedgrass (WD): None _____ Some _____ Many _____ Crabgrass, Witchgrass, Barnyard Grass, etc.

Insects (I) Minor Crab Grass

Disease _____

Comments (Field Problems) Looks Good. Needs water