

Questionnaires (click link below to view)				
CPAMS - Crop Practices	<a href="#">(all states have the same questionnaire)</a>			
CPAMS - Confined Livestock	<a href="#">(all states have the same questionnaire)</a>			
Sept. Crops APS	<a href="#">Kansas</a>	<a href="#">Nebraska</a>	<a href="#">South Dakota</a>	<a href="#">North Dakota</a>
Sept. Ag Yield	<a href="#">Kansas</a>	<a href="#">Nebraska</a>	<a href="#">South Dakota</a>	<a href="#">North Dakota</a>
Oct. Ag Yield	<i>Not Available yet</i>			
Nov. Ag Yield	<i>Not Available yet</i>			
Chickpeas Survey				<a href="#">North Dakota</a>
CAPS - Small Grains	<a href="#">Kansas</a>	<a href="#">Nebraska</a>	<a href="#">South Dakota</a>	<a href="#">North Dakota</a>
CAPS - Row Crops	<a href="#">Kansas</a>	<a href="#">Nebraska</a>	<a href="#">South Dakota</a>	<a href="#">North Dakota</a>
Sept. Hogs Report	<a href="#">(all states have the same questionnaire)</a>			
Turkeys Raised	<a href="#">Kansas</a>	<a href="#">Nebraska</a>	<a href="#">South Dakota</a>	<a href="#">North Dakota</a>
COY - Form A	<a href="#">(KS, NE, SD have the same questionnaire)</a>			
COY - Form B	<a href="#">(KS, NE, SD have the same questionnaire)</a>			
COY - Form E	<a href="#">(KS, NE, SD have the same questionnaire)</a>			
SOY - Form A	<a href="#">(all states have the same questionnaire)</a>			
SOY - Form B	<a href="#">(all states have the same questionnaire)</a>			
SOY - Form E	<a href="#">(all states have the same questionnaire)</a>			
Cattle on Feed Inquiry	<a href="#">Kansas</a>	<a href="#">Nebraska</a>	<a href="#">South Dakota</a>	
Oct. Milk Production	<a href="#">(all states have the same questionnaire)</a>			
Oct. Colony Loss	<a href="#">(all states have the same questionnaire)</a>			
Oct. Ag Labor	<a href="#">(all states have the same questionnaire)</a>			
Cost of Pollination	<i>Not Available yet</i>			
ARMS 2	<i>Not Available yet</i>			

# CONSERVATION PRACTICE ADOPTION MOTIVATIONS SURVEY - VERSION 1

## CROP PRACTICES

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OMB No.0535-0272  
Approval Expires: 12/31/2024  
Project Code: 943  
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Version 1



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

### USDA/NASS

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Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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1. During 2021, did you operate a farm or ranch in which any crops were harvested?

INCLUDE all field crops (such as corn, wheat, cotton, barley, sorghum, oil seeds, dry beans), hay, silage, vegetables, fruit, nuts, sugarcane/beets, and other harvested crops

2100 1 ☐ Yes - Go to Section 1 - Land Use and Livestock, page 2 3 ☐ No - Complete Item 1a, then go to Section 16 - Conclusion, page 48

a. What is the current status of any cropland that you previously operated?

- 2101 1 ☐ Sold
- 2 ☐ Rented Out
- 3 ☐ Idle
- 4 ☐ Enrolled in a conservation program (CRP, WRP, etc.)

**After completing Item 1a above, Go to Section 16 - Conclusion, page 48**

## Section 1 - Land Use and Livestock

Please report farm/ranch land owned, rented, or used in your operation.

INCLUDE all cropland, idle land, Conservation Reserve Program (CRP), pastureland, woodland, wasteland, farmstead, acres used for crop/livestock production facilities, and all other building sites associated with this operation, etc.

1. For 2021, how many acres did this operation:

	Acres
a. Own?.....	901
b. Rent or Lease from others or use Rent Free? INCLUDE any short term leases or land used on an animal unit month (AUM) basis .....	132
c. Rent to others? .....	905
	900

2. Calculate Item 1a + 1b - 1c. Then the total acres operated in 2021 was: .....

3. Of the total acres operated, how many acres are considered:

	Acres
a. Cropland, including land in hay, summer fallow, tree farms, orchards, vineyards, nurseries, and cropland idle? .....	101
i. How many acres were under an easement against development for non-agricultural uses in 2021? .....	2400
b. Grazing land, including permanent pasture and rangeland, woodland pastured, and other pasture and grazing land (including rotational pasture) that could have been used for crops without additional improvements? .....	102
i. How many acres were under an easement against conversion to crop production or non-agricultural use in 2021? .....	2401
c. Woodland, not pastured? .....	103
d. Other land? .....	104
4. Of the total acres operated, how many acres were under a permanent or long-term easement or enrolled in a land retirement program in 2021? .....	107

INCLUDE any other land enrolled in the Conservation Reserve Program (CRP), Wetland Reserve Program (WRP), Farmable Wetlands Program (FWP), Conservation Reserve Enhancement Program (CREP), Agricultural Conservation Easements Program (ACEP) or any other state, federal or local program

EXCLUDE land included in 3ai or 3bi

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**Section 1 - Land Use and Livestock (continued)**


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5. Report the total number of livestock and poultry, by type, on your operation on December 31, 2021.

	Number
a. Beef cows .....	108
b. Milk cows, including any dry cows .....	109
c. Other cattle and calves ..... INCLUDE fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.	110
d. All hogs and pigs .....	111
e. All Poultry ..... INCLUDE layers and pullets, including table and hatching, turkeys, broilers, other chickens, ducks, etc.	112
f. All other livestock ..... INCLUDE goats, sheep, etc.	2402

6. During 2021, did this operation produce organic products according to USDA's National Organic Program (NOP) standards or have acres transitioning into USDA NOP Production?

EXCLUDE processing and handling

106

<sub>1</sub> ☐ Yes

<sub>3</sub> ☐ No

7. During 2021, did this operation participate in a sustainable sourcing contract that requires specific farming practices?

2403

<sub>1</sub> ☐ Yes

<sub>3</sub> ☐ No



## Section 2 - General Approach to Conservation

1. In this survey, conservation practices refer to actions taken or new technologies adopted to conserve soil, water, and wildlife habitat on your farm or improve environmental quality such as water quality, off the farm. Report your agreement or disagreement with the following statements about your approach to using conservation practices.

	Agree	Neither Agree nor Disagree	Disagree
I seek out information about conservation practices and their implementation. .... 2404	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I generally adopt new conservation practices before other farmers in my local area. .... 2405	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I experiment with new conservation practices on my farm. .... 2406	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I do not implement new conservation practices unless I know that they will increase my profits or reduce my workload. .... 2407	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that improve environmental quality, even if they do not increase my profit or reduce my workload. .... 2408	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that protect my investment in the land, even if they do not increase my profit or reduce my workload. .... 2409	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that preserve land for the next generation, even if they do not increase my profit or reduce my workload. .... 2410	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

2. Thinking in general about the conservation practices that you have used in your farm operation, what are your objectives when deciding to use conservation practices? Check all that apply.

2411

☐ Maintaining or enhancing productivity

2412

☐ Improving water quality (e.g. avoiding polluting streams, rivers, and lakes)

2413

☐ Enhancing soil health or soil quality

2414

☐ Reducing erosion

2415

☐ Keeping chemicals and nutrients on the farm

2416

☐ Mitigating the effects of drought

2417

☐ Increasing the efficiency of my irrigation system

2418

☐ Supporting wildlife habitat

2419

☐ Managing dust, odors, or other air quality issues

2420

☐ Other, please specify: 2421

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### Section 3 - Technical Assistance

1. In this survey, conservation refers to actions taken to improve and preserve natural resources such as soil, water, and wildlife habitat on your operation.

Have you ever received technical assistance (expertise or information) for conservation on cropland you operate from any federal, state, local university, or other source that was not financial? Report on technical assistance you received regardless of whether you received financial assistance to help defray the cost of installing or implementing conservation practices.

#### INCLUDE

- Expertise or information provided for planning or implementing conservation practice or designing, laying out, or installing conservation structures
- Expertise or information from private technical service providers (TSPs) that is reimbursed by federal, state, or local governments
- Expertise or information from your CCA, seed dealer, agronomist, or co-op, that may be free or a paid service

150

☐ Yes - Continue

☐ No - Go to Item 1b

- a. Have you received technical assistance for conservation from any of these sources? Check all that apply.

151

☐ Federal agencies (typically free)

152

☐ State or local agencies (typically free)

153

☐ Private sources (free or paid)

- b. Report your agreement or disagreement with the following statements about technical assistance on your cropland from a government, university, or other source.

	NA	Agree	Neither Agree nor Disagree	Disagree
Technical assistance is available to me. .... 160		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I am comfortable using free technical assistance from federal government employees. .... 167		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I am comfortable using free technical assistance from non-federal government sources. .... 168		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I have never sought any form of technical assistance. .... 163		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I tried to get free technical assistance from the federal government but could not. .... 2422	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I tried to get free technical assistance from a non-federal government source but could not. .... 2423	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I received technical assistance and it was beneficial. .... 165	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I received technical assistance but it took too long. .... 2424	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I received technical assistance but it did not meet my needs. .... 2425	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

## Section 4 - Cover Crops

1. Cover crops are non-cash crops planted primarily for managing soil fertility, soil quality, and controlling weeds, pests and diseases.

Based on the definition above, have you ever used cover crops at any time?

EXCLUDE Conservation Reserve Program acres

	Land Owned	Land Leased
Cover Crops .....	2426 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	2427 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If you checked "Yes" in any box above, go to Item 2. If you checked "No" for all boxes above, complete Items 1a and 1b below, then go to Section 5 - Nutrient Management, page 10.**

- a. Please report your agreement or disagreement with the following statements.

I have never used cover crops because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 202	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about cover crops would help me decide whether to use them. .... 2428	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been unsuccessful. .... 203	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated cost greater than the benefits. .... 204	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 205	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 206	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 207	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 208	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I cannot fit cover crops into my rotation. .... 209	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you never used cover crops.

210

Other reason, specify: \_\_\_\_\_

**After completing Items 1a and 1b above, go to Section 5 - Nutrient Management, page 10.**

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**Section 4 - Cover Crops (continued)**


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2. Did you use cover crops in 2021? ..... <sup>211</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to Item 3

a. What percentage of your cropland had cover crops in 2021? (0-100%) ..... 212 %

- i. What type of cover crop was used in 2021? Select all that apply.

- <sup>213</sup> ☐ Single species or seed type  
<sup>214</sup> ☐ Mix of 2 to 5 seed species  
<sup>215</sup> ☐ Mix of more than 5 seed species  
<sup>216</sup> ☐ Other

- ii. What crops were planted before and after the 2021 cover crop?  
 INCLUDE every crop planted before or after a cover crop

<sup>217</sup>  
 Before \_\_\_\_\_  
<sup>218</sup>  
 After \_\_\_\_\_

- iii. Which of the following were used to terminate the 2021 cover crop? Check all that apply.

- <sup>219</sup> ☐ Herbicide  
<sup>220</sup> ☐ Tillage  
<sup>221</sup> ☐ Roller/Crimper or other rolling method  
<sup>222</sup> ☐ Winter kill

- iv. Did you use any cover crops for grazing, forage or other on farm use in 2021? ..... <sup>223</sup> 1 ☐ Yes 3 ☐ No

- v. Did you harvest any cover crops for grain in 2021? ..... <sup>224</sup> 1 ☐ Yes 3 ☐ No

3. What year did you first use cover crops? ..... year 261

a. For the first year of cover crops, on what proportion of cropland were cover crops used? (0-100%) .... 225 %

- i. In the first year you planted cover crops, were they used to address a highly erodible land conservation need?

Cropland identified as highly erodible is subject to highly erodible land conservation (HELC) or "conservation compliance" requirements. Producers who receive farm program payments are required to have (and apply) a written soil conservation plan, prepared in accordance with Federal standards.

- <sup>226</sup> 1 ☐ Yes 3 ☐ No

**Section 4 - Cover Crops (continued)**

b. For the first year, did you receive either of the following?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Cover crops .....	227 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	228 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	229	230 %

i. What portion of financial assistance to begin this practice was from federal sources?  
Enter 0 if no financial assistance was received. ....

231 %
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c. Please report your agreement or disagreement with the following statements.

I chose to use cover crops on my operation because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... 232	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been successful using cover crops. .... 233	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cover crops were recommended to me by a trusted advisor. .... 2429	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could use cover crops successfully. .... 2430	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 234	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 235	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 236	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 237	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 238	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

d. Please specify any additional reason why you started using cover crops.

Other reason, specify: <sup>260</sup> \_\_\_\_\_

4. Since the first year of cover crop use, have you expanded the percent of cropland in which cover crops are used?

	Land Owned	Land Leased
Expanded use of cover crops .....	2431 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	2432 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If you checked "Yes" in either of the boxes above, go to Item 4a. If you checked "No" in both boxes above, go to Item 5.**

**Section 4 - Cover Crops (continued)**

- a. Did you receive the following for expanding the use of cover crops?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Cover crops .....	240 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	241 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	242	243 %

- i. What portion of financial assistance to expand this practice was from federal sources?

Enter 0 if no financial assistance was received. ....

244 %
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- b. Please report your agreement or disagreement with the following statements about cover crops?

I chose to expand the use of cover crops on my operation because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting additional on-farm conservation need. .... 245	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
The practice was working well for me elsewhere. .... 2433	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 246	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 247	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 248	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 249	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 250	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

5. Have you stopped using cover crops?

2434

1 ☐ Yes - Continue

3 ☐ No - Go to Section 5 - Nutrient Management, page 10

- a. What year did you last use cover crops? ..... year

251
-----

- b. Please report your agreement or disagreement with the following statements.

I chose to stop using cover crops because:

	Agree	Neither Agree nor Disagree	Disagree
Did not meet my conservation need. .... 252	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Costs were greater than benefits. .... 253	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Too much time or effort. .... 254	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Technical assistance ended. .... 255	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance ended. .... 256	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance did not cover enough of the cost. .... 257	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

## Section 5 - Nutrient Management

1. Which of the following nutrient or fertility management practices did you use in 2021? Check all that apply.

- 301 ☐ Follow recommendations from a soil test or tissue test
- 302 ☐ Incorporate nutrients through tillage or injection
- 303 ☐ Apply nutrients no more than 30 days in advance of planting
- 304 ☐ Split application (applying nutrients after the crop is already growing)
- 305 ☐ Precision nutrient management (applying nutrients according to site specific recommendations for GPS-referenced sampling points)
- 306 ☐ Precision lime application
- 307 ☐ Adaptive nutrient management (using test plots and consulting with a nutrient management expert to adapt nutrient applications (rate, source, timing, placement) based on nutrient use efficiencies)

2. A nutrient management plan guides the amount, source, placement, and timing of the application of plant nutrients and soil amendments (including manure) to meet crop yield goals while minimizing the loss of nutrients to surface and groundwater, reduce nitrogen emissions to air, and maintain physical, chemical, and biological condition of the soil.

Based on the definition above, have you ever followed a written nutrient management plan developed with assistance from a government agency, private consultant, or other technical expert?

1731 1 ☐ Yes - Go to Item 3

3 ☐ No - Complete Items 2a and 2b below, then go to Section 6 - Pest Management, page 14

- a. Please report your agreement or disagreement with the following statements.

I have never followed a written nutrient management plan because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 308	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about nutrient management plans would help me decide whether to use them. .... 2435	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been unsuccessful. .... 309	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated cost greater than benefits. .... 310	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 311	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 312	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive financial assistance. .... 313	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 314	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you never followed a written nutrient management plan.

Other reason, specify: <sup>315</sup> \_\_\_\_\_

**After completing Items 2a and 2b above, Go to Section 6 - Pest Management, page 14.**

**Section 5 - Nutrient Management (continued)**

3. Did you follow a written nutrient management plan in 2021? ..... <sup>316</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to Item 4

a. Are you implementing your nutrient management plan as a component of a comprehensive soil health management system? ..... <sup>317</sup> 1 ☐ Yes 3 ☐ No

b. Are you required to follow a written nutrient management plan by regulation? <sup>318</sup>  
INCLUDE regulation from Federal, State, or local governments ..... 1 ☐ Yes 3 ☐ No

c. On what percentage of your cropland did you follow a written nutrient management plan in 2021? ..... <sup>319</sup> %

4. What year did you start following a written nutrient management plan? ..... year <sup>320</sup>

a. In the first year of implementation, what percentage of your cropland did your nutrient management plan cover? (0-100%) ..... <sup>321</sup> %

b. For the first year, did you receive either of the following?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Nutrient Management Plan ...	<sup>322</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>323</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>324</sup>	<sup>325</sup> %

i. What portion of financial assistance to begin this practice was from federal sources? <sup>326</sup>  
Enter 0 if no financial assistance was received. .... %

c. Please report your agreement or disagreement with the following statements.

I began following a written nutrient management plan because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... <sup>327</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been successful. .... <sup>328</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It was recommended to me by a trusted advisor. .... <sup>2436</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could follow the plan successfully. .... <sup>2437</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... <sup>329</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... <sup>330</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... <sup>331</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... <sup>332</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... <sup>333</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

d. Please specify any additional reason why you started following a written nutrient management plan.

Other reason, specify: <sup>354</sup> \_\_\_\_\_



**Section 5 - Nutrient Management (continued)**

5. Since the first year of following a written nutrient management plan, 334  
 have you expanded the percent of cropland covered by a written  
 plan? ..... 1 ☐ Yes - Continue 3 ☐ No - Go to Item 6,  
 page 13

- a. Did you receive the following for expanding the use of nutrient management?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Nutrient Management Plan....	335 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	336 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	337	338 %

- i. What portion of financial assistance to expand this practice was from federal sources?  
 Enter 0 if no financial assistance was received. ....

339 %
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- b. Please report your agreement or disagreement with the following statements.

I chose to expand the scope of my written nutrient management plan because:

	Agree	Neither Agree nor Disagree	Disagree
340 Anticipated meeting additional on-farm conservation needs. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
2438 The practice was working well for me elsewhere. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
341 Anticipated benefits greater than cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
342 Anticipated saving time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
343 I received technical assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
344 I received financial assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
345 Anticipated off-farm environmental benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

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**Section 5 - Nutrient Management (continued)**


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6. Have you stopped following a written nutrient management plan?

2439

1 ☐ Yes - Continue

3 ☐ No - Go to Section 6 - Pest Management, page 14

a. What year did you last follow a written nutrient management plan? ..... year

346

b. Please report your agreement or disagreement with the following statements.

I chose to stop following a written nutrient management plan because:

	Agree	Neither Agree nor Disagree	Disagree
347 Did not meet my conservation need. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
348 Costs were greater than benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
349 It took too much time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
350 Technical assistance ended. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
351 Financial assistance ended. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
352 Financial assistance did not cover enough of the cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

## Section 6 - Pest Management

1. Which of the following pest management practices did you use in 2021? Check all that apply.

- 401 ☐ Activities to reduce potential drift, runoff, leaching, etc.
- 402 ☐ Scouting for pests and using economic thresholds to decide when to apply pesticides
- 403 ☐ Use of precision technology such as GPS, variable rate application, or smart sprayers
- 404 ☐ Artificial intelligence techniques such as weed sensing or autonomous robotics
- 405 ☐ Measures to reduce injury to beneficial organisms and pollinators
- 406 ☐ Prevention and avoidance techniques such as planting resistant varieties/cultivars, cleaning equipment, mulching, creating beneficial insect habitat

2. A written pest management plan is a site-specific combination of pest prevention, avoidance, monitoring, and suppression strategies to reduce plant pest pressure while mitigating risks to soil, water, air, plants, animal, and humans. A pest can include weeds, invertebrates (insects, mites, slugs, nematodes), or disease.

Based on the definition above, have you ever followed a written pest management plan developed with assistance from a government agency, private consultant, or other technical expert?

- 407 ☐ Yes - Go to Item 3 ☐ No - Complete Items 2a and 2b below, then go to Section 7 - Tillage Practices, page 18

- a. Please report your agreement or disagreement with the following statements about a written pest management plan.

I have never followed a written pest management plan because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 408	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about pest management plans would help me decide whether to use them. .... 2440	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been unsuccessful. .... 409	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated costs greater than benefits. .... 410	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 411	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 412	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 413	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 414	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you never followed a written pest management plan.

Other reason, specify: <sup>415</sup> \_\_\_\_\_

**After completing Items 2a and 2b above, Go to Section 7 - Tillage Practices, page 18.**

**Section 6 - Pest Management (continued)**

3. Did you follow a written pest management plan in 2021? ..... <sup>416</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to Item 4

a. On what percentage of your cropland did you follow a pest management plan in 2021? (0-100%) ..... <sup>417</sup> %

4. What year did you first follow a written pest management plan? ..... year <sup>418</sup>

a. For the first year of pest management, on what proportion of cropland was the pest management plan followed? (0-100%) ..... <sup>419</sup> %

- b. For the first year, did you receive either of the following?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Pest Management Plan ....	<sup>420</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>421</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>422</sup>	<sup>423</sup> %

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received. .... <sup>424</sup> %

- c. Please report your agreement or disagreement with the following statements.

I chose to start following a written pest management plan because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... <sup>426</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been successful. .... <sup>427</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It was recommended to me by a trusted advisor. .... <sup>2441</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could follow the plan successfully. .... <sup>2442</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... <sup>428</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... <sup>429</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... <sup>430</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... <sup>431</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... <sup>432</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- d. Please specify any additional reason why you started following a written pest management plan.

Other reason, specify: <sup>425</sup> \_\_\_\_\_

**Section 6 - Pest Management (continued)**

5. Since the first year of following a pest management plan, have you expanded the percent of cropland in which the pest management plan is used?

433

1 ☐ Yes - Continue3 ☐ No - Go to Item 6, page 17

- a. Did you receive the following for expanding the pest management plan?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Pest Management Plan .....	434 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	435 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	436	437 %

- i. What portion of financial assistance to expand this practice was from federal sources?  
Enter 0 if no financial assistance was received. ....

438

%

- b. Please report your agreement or disagreement with the following statements.

I chose to expand the scope of my written pest management plan because:

	Agree	Neither Agree nor Disagree	Disagree
2443 Anticipated meeting an on-farm conservation need. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
2444 The practice was working well for me elsewhere. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
440 Anticipated benefits greater than cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
441 Anticipated saving time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
442 I received technical assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
443 I received financial assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
2445 Anticipated off-farm environmental benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

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**Section 6 - Pest Management (continued)**


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6. Have you stopped following a written pest management plan?

452

1 ☐ Yes - Continue

3 ☐ No - Go to Section 7 - Tillage Practices, page 18

a. What year did you last follow a written pest management plan? ..... year

445

b. Please report your agreement or disagreement with the following statements.

I chose to stop following a written pest management plan because:

	Agree	Neither Agree nor Disagree	Disagree
446 Did not meet my conservation need. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
447 Costs were greater than benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
448 It took too much time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
449 Technical assistance ended. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
450 Financial assistance ended. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
451 Financial assistance did not cover enough of the cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

## Section 7 - Tillage Practices

1. Tillage practices such as no-till, strip-till, and reduced tillage (mulch till or ridge-till) manage crop and other plant residue on the soil surface year-round by limiting soil-disturbing activities used to grow and harvest crops.

No-till is planting crops without tilling the soil. Note that knifing in fertilizer is not considered a tillage operation. Strip-till means limiting tillage to only in-row narrow tillage prior to planting and during planting. Reduced tillage means reducing the number and type of yearly tillage operations. In all cases, plant residue is managed to provide cover on the soil surface throughout the year.

Based on the description above, have you ever used no-till, strip-till, or reduced tillage (e.g., mulch till, ridge-till, etc.) at any time on any portion of your operation?

2446 ☐ Yes - Complete Item 1a, then go to Item 2,  
page 19

☐ No - Complete Items 1b and 1c, then go to  
Section 8 - Drainage Water Management, page 23

a.

	Land Owned	Land Leased
No-Till or Strip-Till .....	2447 <input type="checkbox"/> Yes <input type="checkbox"/> No	2448 <input type="checkbox"/> Yes <input type="checkbox"/> No
Reduced tillage .....	2450 <input type="checkbox"/> Yes <input type="checkbox"/> No	2451 <input type="checkbox"/> Yes <input type="checkbox"/> No

**If you checked "Yes" in any box above, go to Item 2, page 19. If you checked "No" for all boxes above, complete Items 1b and 1c below, then go to Section 8 - Drainage Water Management, page 23.**

- b. Please report your agreement or disagreement with the following statements about tillage practices.

I have never used no-till, strip-till, or reduced tillage practices because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 501	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have a conservation need, but more information about tillage practices would help me decide whether to use them. .... 2452	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other farmers I know have been unsuccessful. .... 502	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anticipated cost greater than benefits. .... 503	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It would take too much time or effort. .... 504	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 505	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I applied for but did not receive financial assistance. .... 506	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 2453	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- c. Please specify any additional reason why you never used no-till, strip-till, or reduced tillage practices.

Other reason, specify: <sup>507</sup> \_\_\_\_\_

**After completing Items 1a and 1b above, Go to Section 8 - Drainage Water Management, page 23.**

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**Section 7 - Tillage Practices (continued)**


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2. Did you use no-till, strip-till, or reduced tillage (e.g., mulch till, ridge-till, etc.), in 2021?

509

1 ☐ Yes - Continue

3 ☐ No - Go to Item 3

a. In 2021, what percentage of your cropland did you use each of the following?

	Percent of Cropland Acres	
No-till (knifing in fertilizer is not considered a tillage operation) .....	510	%
Strip-till .....	511	%
Reduced tillage (mulch till, ridge-till, etc.) .....	512	%
Conventional tillage .....	513	%

3. What year did you first use no-till, strip-till or reduced tillage practices? ..... year

514

a. For the first year of no-till, strip-till or reduced tillage, on what proportion of cropland were no-till, strip-till or reduced tillage used? (0-100%) .....

515

%

i. Were no-till, strip-till, or reduced tillage needed to meet a conservation compliance need? ..... 516

1 ☐ Yes 3 ☐ No

b. For the first year, did you receive either of the following?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
No-Till or Strip-Till .....	517 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	518 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	519	520 %
Reduced tillage .....	521 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	522 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	523	524 %

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received. ....

525

%



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**Section 7 - Tillage Practices (continued)**


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- c. Please report your agreement or disagreement with the following statements.

I chose to start using no-till, strip-till, or reduced tillage because:

	Agree	Neither Agree nor Disagree	Disagree
526 Anticipated meeting an on-farm conservation need. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
527 Other farmers I know have been successful. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
2454 It was recommended to me by a trusted advisor. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
2455 I was confident I could use the practice successfully. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
528 Anticipated benefits greater than cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
529 Anticipated saving time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
530 I received technical assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
531 I received financial assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
532 Anticipated off-farm environmental benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- d. Please specify any additional reason why you started using no-till, strip-till, or reduced tillage practices.

Other reason, specify: <sup>557</sup> \_\_\_\_\_

**Section 7 - Tillage Practices (continued)**

4. Since your first year of using conservation tillage practices, have you expanded the percent of cropland in which no-till, strip-till, or reduced tillage was used?

533

1 ☐ Yes - Continue3 ☐ No - Go to Item 5, page 22

	Land Owned	Land Leased
No-Till or Strip-Till .....	2456 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	2457 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Reduced tillage .....	2458 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	2459 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If you checked "Yes" in any box above, continue to 4a. If you checked "No" in all boxes above, go to Item 5, page 22.**

- a. Did you receive the following for expanding the use of no-till, strip-till, reduced tillage practices?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
No-Till or Strip-Till .....	534 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	535 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	536	537 %
Reduced tillage .....	538 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	539 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	540	541 %

- i. What portion of financial assistance to expand this practice was from federal sources?

Enter 0 if no financial assistance was received. ....

542

%

- b. Please report your agreement or disagreement with the following statements.

I chose to expand the no-till, strip-till, or reduced tillage practices because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting additional on-farm conservation needs. .... 543	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
The practice was working well for me elsewhere. .... 2460	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 544	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 545	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 546	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 547	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 548	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

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**Section 7 - Tillage Practices (continued)**


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5. Have you stopped using no-till, strip-till, or reduced tillage techniques?

2505

<sub>1</sub> ☐ Yes - Continue

<sub>3</sub> ☐ No - Go to Section 8 - Drainage Water Management, page 23

a. What year did you last use any no-till, strip-till, or reduced tillage technique? ..... year

549

b. If you did not use any no-till, strip-till, or reduced tillage in 2021, do you plan to do so again within 3 years?

556

<sub>1</sub> ☐ Yes - Go to Section 8 - Drainage Water Management, page 23

<sub>3</sub> ☐ No - Continue

c. Please report your agreement or disagreement with the following statements?

I chose to stop using no-till, strip-till, or reduced tillage because:

	Agree	Neither Agree Nor Disagree	Disagree
550 Did not meet my conservation need. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
551 Costs were greater than benefits. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
552 It took too much time or effort. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
553 Technical assistance ended. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
554 Financial assistance ended. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
555 Financial assistance did not cover enough of the cost. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>

## Section 8 - Drainage Water Management

### 1. Do you have a drainage system (tile, ditch, etc.)?

600

1 ☐ Yes - Continue3 ☐ No - Go to Section 9 - Runoff Management Practices, page 28

a. What proportion of your cropland has drainage? .....

b. In what year was the current drainage system installed or last upgraded? ..... year

c. Have you ever received financial assistance from the federal government, state government, or drainage district to improve your drainage system? ..... 2462  
1 ☐ Yes      3 ☐ No

d. Is your drainage system regulated by your state or local government? ..... 2463  
1 ☐ Yes      3 ☐ No

e. Does this drainage system have surface inlets? ..... 2464  
1 ☐ Yes      3 ☐ No

#### f. Where does this system empty?

2465

1 ☐ An open, single stage ditch2 ☐ A natural waterbody3 ☐ A saturated buffer4 ☐ A retention pond5 ☐ Another type of receiving system

#### g. Water control structures can be used to manage the direction or rate of flow, maintain a desired water surface elevation, or measure water. These may include stop logs, flashboard risers, float mechanisms, check dams, division boxes, pipe drop inlets, etc.

Based on the definition above, please report the percent for each of the following:

i. Percentage of cropland acres that used manually operated water control structures. ....

ii. Percentage of cropland acres that used automated or remotely operated water control structures. ....

iii. Percentage of cropland acres that did not use any water control structure (s). ....

**If you answered 100 percent cropland acres that did not use any water control structures for Item 1giii above, go to Section 9 - Runoff Management Practices, page 28. Otherwise, continue to Item 1h.**

h. Do you use the water control structure(s) to keep water and nutrients in the plant root zone during the growing season? ..... 602  
1 ☐ Yes      3 ☐ No

i. Do you store your drainage water (such as in a pond) for use in irrigation or livestock watering? ..... 603  
1 ☐ Yes      3 ☐ No

## Section 8 - Drainage Water Management (continued)

2. A drainage water management plan guides the process of managing the drainage volume and water table elevation by regulating the flow from a surface or subsurface agricultural drainage system.

Based on the definition above, have you ever followed a written drainage water management plan developed with assistance from a government agency, private consultant, or other technical expert?

611 <sup>1</sup> ☐ Yes - Go to Item 3

<sup>3</sup> ☐ No - Complete Items 2a and 2b below, then go to  
Section 9 - Runoff Management Practices, page 28

- a. Please report your agreement or disagreement with the following statements about a drainage water management plan.

I have never followed a written drainage water management plan because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 612	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about drainage water management plans would help me decide whether to use them. .... 2468	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been unsuccessful. .... 613	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated cost greater than benefit. .... 614	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 615	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 616	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 617	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 618	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you never followed a drainage water management plan.

Other reason, specify: <sup>619</sup> \_\_\_\_\_

**After completing Items 2a and 2b above, Go to Section 9 - Runoff Management Practices, page 28.**

**Section 8 - Drainage Water Management (continued)**

3. Did you follow a written drainage water management plan in 2021? ..... <sup>621</sup> 1 ☐ Yes 3 ☐ No

4. What year did you start following a written drainage water management plan? ..... year 622

a. In the first year of implementation, what percentage of your drained cropland did your drainage water management plan cover? (0-100%) ..... 623 %

b. For the first year, did you receive either of the following?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Drainage Water Management Plan .....	<sup>624</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>625</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>626</sup>	<sup>627</sup> %

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received. .... 657 %

c. Please report your agreement or disagreement with the following statements.

I chose to start following a drainage water management plan on my operation because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... <sup>628</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been successful. .... <sup>629</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It was recommended to me by a trusted advisor. .... <sup>2469</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could follow the plan successfully. .... <sup>2470</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... <sup>630</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... <sup>631</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... <sup>632</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... <sup>633</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... <sup>634</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

d. Please specify any additional reason why you started following a written drainage water management plan.

Other reason, specify: <sup>655</sup> \_\_\_\_\_

5. On what percentage of your drained cropland did you follow drainage water management in 2021? ..... 635 %

**Section 8 - Drainage Water Management (continued)**

6. Since the first implementation of a drainage water management plan, have you expanded the percent of drained cropland in which a drainage water management plan is used?

636

1 ☐ Yes - Continue3 ☐ No - Go to Item 7, page 27

- a. Did you receive the following for expanding the use of drainage water management?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Drainage Water Management Plan .....	637 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	638 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	639	640 %

- i. What portion of financial assistance to expand this practice was from federal sources?

Enter 0 if no financial assistance was received. ....

641

%

- b. Please report your agreement or disagreement with the following statements.

I chose to expand the scope of my drainage water management plan because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting additional on-farm conservation need. .... 642	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
The practice was working well for me elsewhere. .... 2471	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 643	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 644	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 645	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 646	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 647	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

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**Section 8 - Drainage Water Management (continued)**


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7. Have you stopped following a written drainage water management plan?

2472

1 ☐ Yes - Continue

3 ☐ No - Go to Section 9 - Runoff Management Practices, page 28

a. What year did you last follow a written drainage water management plan? ..... year

648

b. Please report your agreement or disagreement with the following statements.

I chose to stop following a written drainage water management plan because:

	Agree	Neither Agree Nor Disagree	Disagree
649 Did not meet my conservation need. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
650 Costs were greater than benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
651 It took too much time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
652 Technical assistance ended. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
653 Financial assistance ended. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
654 Financial assistance did not cover enough of the cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>



## Section 9 - Runoff Management Practices

1. Runoff management practices slow the movement of water over land, reduce erosion, protect or improve water quality, or store runoff for moisture conservation.

Based on the definition above, in 2021, were any of the following structural practices for runoff management in use on land owned or leased by this operation?

Complete the table below, then follow the instructions at the end of the table.

	Land Owned	Land Leased
Terraces .....	700 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	701 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Grassed Waterway .....	702 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	703 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Grade Stabilization .....	704 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	705 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Water and Sediment Basin .....	706 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	707 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Contour Farming .....	708 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	709 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If you answered "No" to all of the questions in Item 1 above, continue. If you answered "Yes" to any of the questions in Item 1 above, go to Item 2, page 29**

- a. Please report your agreement or disagreement with the following statements about runoff management structures or practices. Complete Items 1a and 1b below, then go to Section 10 - Edge of Field Structures, page 30.

I have never used runoff management structures or practices because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 710	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about runoff management plans would help me decide whether to use them. .... 2473	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been unsuccessful. .... 2474	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated cost greater than benefit. .... 711	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 2475	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would interfere with field operations. .... 712	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 713	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 714	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 715	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you never used runoff management structures or practices.

Other reason, specify: <sup>716</sup> \_\_\_\_\_

**After completing Items 1a and 1b above, Go to Section 10 - Edge of Field Structures, page 30.**

**Section 9 - Runoff Management Practices (continued)**

2. Were any runoff management practices or improvements still in use on leased land in 2021? ..... 717  
 1 ☐ Yes - Continue 3 ☐ No - Go to Item 3
- a. Do any of your lease agreements require maintenance of the runoff management structure? ..... 718  
 1 ☐ Yes 3 ☐ No
3. Did you use terraces, grassed waterway, grade stabilization, water and sediment basin or contour farming structures on land you owned in 2021? ..... 2476 1 ☐ Yes - Continue 3 ☐ No - Go to Section 10 - Edge of Field Structures, page 30

a. For the runoff management structures in use in 2021 on land you own:

	Did this operation install, rebuild, or upgrade any of these structures?	Did you receive technical assistance for installation?	Did you receive financial assistance for installation?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Terraces .....	719 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	720 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	721 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	722	723 %
Grassed Waterway .....	724 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	725 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	726 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	727	728 %
Grade Stabilization .....	729 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	730 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	731 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	732	733 %
Water and Sediment Basin ...	734 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	735 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	736 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	737	738 %
Contour Farming .....	739 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	740 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	741 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	742	743 %

- i. What portion of financial assistance to install, rebuild, or upgrade runoff management practices was from federal sources? Enter 0 if no financial assistance was received. ....

744	%
-----	---

- b. Please report your agreement or disagreement with the following statements.

I chose to install, rebuild or upgrade runoff management structures on my operation because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... 745	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been successful. .... 746	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It was recommended to me by a trusted advisor. .... 2477	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could implement the practice successfully. .... 2478	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 747	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 2479	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 748	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 749	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 2480	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- c. Please specify any additional reason why you decided to install, rebuild or upgrade any runoff management structures.

Other reason, specify: 751

## Section 10 - Edge of Field Structures

1. Edge of field structures establish permanent vegetation at field borders, adjacent to waterways, or in sensitive areas to reduce erosion, improve water or air quality, manage pests, or provide wildlife habitat.

Based on the above definition, in 2021, were any of the following edge of field structures in use on land owned or leased by this operation? Complete the table below, then follow the instructions at the end of the table.

	Land Owned	Land Leased
Field Border .....	800 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	801 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Filter Strip .....	802 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	803 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Riparian Buffer (trees, grasses, or other vegetation intentionally planted along a waterway) .....	804 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	805 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If you answered "No" to all of the questions in Item 1 above, continue. If you answered "Yes" to any of the questions in Item 1 above, go to Item 2, page 31.**

- a. Please report your agreement or disagreement with the following statements about edge of field structures. Complete Items 1a and 1b below, then go to Section 11 - Wetland Conservation Practices, page 32.

I have never used edge of field structures because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 806	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about edge of field structures would help me decide whether to use them. .... 2481	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been unsuccessful. .... 2482	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated cost greater than benefits. .... 808	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 809	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take land out of production. .... 807	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 810	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 811	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 812	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you never used edge of field structures.

Other reason, specify: <sup>813</sup> \_\_\_\_\_

**After completing Items 1a and 1b above, Go to Section 11 - Wetland Conservation Practices, page 32.**

**Section 10 - Edge of Field Structures (continued)**

2. Were any edge of field structures still in use on leased land in 2021? ..... 814 1 ☐ Yes 3 ☐ No
- a. Do any of your lease agreements require maintenance of edge of field structures? ..... 840 1 ☐ Yes 3 ☐ No

3. Did you use field border, filter strip or riparian buffer structures on land you owned in 2021?

2483

1 ☐ Yes - Continue3 ☐ No - Go to Section 11 - Wetland Conservation Practices, page 32

- a. For the edge of field structures in use in 2021 on land you own:

	Did this operation install, rebuild, or upgrade any of these structures?	Did you receive technical assistance for installation?	Did you receive financial assistance for installation?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Field Border .....	815 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	816 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	817 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	818	819 %
Filter Strip .....	820 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	821 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	822 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	823	824 %
Riparian Buffer ....	825 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	826 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	827 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	828	829 %

- i. What portion of financial assistance to install, rebuild, or upgrade edge of field structures was from federal sources? Enter 0 if no financial assistance was received. ....

830

%

- b. Please report your agreement or disagreement with the following statements.

I chose to install, rebuild, or upgrade edge of field structures on land I own because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... 831	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been successful. .... 832	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It was recommended to me by a trusted advisor. .... 2484	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could implement the practice successfully. .... 2485	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 833	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 834	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 835	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 836	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 2486	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- c. Please specify any additional reason why you decided to install edge of field structures.

838

Other reason, specify: \_\_\_\_\_

## Section 11 - Wetland Conservation Practices

1. Is any portion of your operation (owned or leased) subject to any of the following easements or contracts to protect wetlands? Check all that apply.

- 906 ☐ Permanent wetlands reserve easement
- 907 ☐ 30 year wetlands reserve easement
- 908 ☐ Conservation Reserve Program (CRP) contract
- 909 ☐ EQIP Contract
- 960 ☐ Wetland mitigation bank
- 961 ☐ Other state or local wetland program

2. Have either of the following practices ever been installed on your operation to conserve or increase wetlands? Complete the table below, then follow the instructions at the end of the table.

	Land Owned	Land Leased
Restored or enhanced existing wetlands .....	962 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	963 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Created new wetlands .....	964 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	965 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If you answered "No" to all of the questions in Item 2 above, continue. If you answered "Yes" to any of the questions in Item 2 above, go to Item 3, page 34.**

- a. Please report your agreement or disagreement with the following statements about wetland conservation practices. Complete Items 2a and 2b below, then go to Section 12 - Irrigation Management and System Improvements, page 35.

I have never used wetland conservation practices because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 966	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about wetland practices would help me decide whether to use them. .... 2487	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated costs greater than benefits. .... 968	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take land out of production. .... 967	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would interfere with field operations. .... 970	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 969	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 971	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 972	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 973	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

**Section 11 - Wetland Conservation Practices (continued)**

- b. Please specify any additional reason why you never used wetland conservation practices.

Other reason, specify: <sup>974</sup> \_\_\_\_\_

**After completing Items 2a and 2b, Go to Section 12 - Irrigation Management and System Improvements, page 35.**

3. Were any wetland conservation practices still in use on leased land <sup>975</sup>  
in 2021? ..... 1 ☐ Yes - Continue 3 ☐ No - Go to Item 4

- a. Do any of your lease agreements require maintenance of the <sup>976</sup>  
wetland conservation practices? ..... 1 ☐ Yes 3 ☐ No

4. Did you restore or enhance existing wetlands or create new wetlands on land you owned in 2021?

<sup>2488</sup> 1 ☐ Yes - Continue 3 ☐ No - Section 12 - Irrigation Management and System Improvements,  
page 35

- a. For the wetland conservation practices in use in 2021 on land you own:

	Did this operation install, rebuild, or upgrade any of these structures?	Met a Conservation Compliance Need	Did you receive technical assistance for installation?	Did you receive financial assistance for installation?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Restored or enhanced existing wetlands .....	<sup>977</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>978</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>979</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>980</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>931</sup>	<sup>932</sup> %
Created new wetlands .....	<sup>933</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>934</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>935</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>936</sup> 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	<sup>937</sup>	<sup>938</sup> %

- b. What portion of financial assistance to install, rebuild, or upgrade wetland practices was from  
federal sources? Enter 0 if no financial assistance was received. ....

<sup>939</sup> %

- c. Please report your agreement or disagreement with the following statements.

I chose to install, rebuild, or upgrade a wetland conservation practice because?

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... <sup>940</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It was recommended to me by a trusted advisor. .... <sup>2489</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could implement the practice successfully. .... <sup>2490</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... <sup>942</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... <sup>943</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... <sup>944</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... <sup>945</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... <sup>2491</sup>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- d. Please specify any additional reason why you decided to install or upgrade wetland conservation practices.

Other reason, specify: <sup>956</sup> \_\_\_\_\_

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**Section 11 - Wetland Conservation Practices (continued)**


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5. Have you ever had a wetland practice in place where the contract or easement covering it expired?

947

1 ☐ Yes - Continue

3 ☐ No - Go to Item 6

- a. For these wetland practices, did you choose to:

948

1 ☐ Maintain the wetland structures or practices - Go to Item 6

2 ☐ Remove the wetland structures or practices - Continue

- b. If you chose to remove the wetland structures or practices, please report your agreement or disagreement with the following statements.

I chose to remove the wetland structures or practices because:

	Agree	Neither Agree nor Disagree	Disagree
It took too much land out of production. .... 952	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It interfered with field operations. .... 951	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It took too much time or effort. .... 950	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

6. What year was the first installation or upgrade of a wetland conservation practice? ..... year

954

- a. For the first year that wetland conservation practices were used, what proportion of cropland was designated for the wetland conservation practice? (0-100%) .....

955

%

## Section 12 - Irrigation Management and System Improvements

1. Have you used any irrigation equipment to irrigate any portion of your land at any time?

1001

1 ☐ Yes - Continue3 ☐ No - Go to Section 13 - Conservation Stewardship Program, page 41

- a. What proportion of your total cropland was irrigated during 2021? .....

1002	%
------	---

- b. Which of the following irrigation management practices do you use? Check all that apply.

1003

☐ Soil moisture sensing devices (moisture block, tensiometers, capacitance or other electronic sensors)

1150

☐ Plant moisture-sensing devices such as pressure (chamber) bombs or infrared (IR) thermometer

1005

☐ Irrigation scheduling service, including commercial and government

1006

☐ Consulting reports on daily crop-water evapo-transpiration (ET) use (Internet, newspapers, radio, TV, fax or email)

1151

☐ Computer simulation models (not from a commercial service)

2. Which of the following irrigation systems are in use on your cropland?

Complete the table below, then follow the instructions at the end of the table.

	Land Owned	Land Leased	Installed New by this operation in the last 15 years	Upgraded by this operation in the last 15 years
Micro or Drip .....	1055 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1056 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1057 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1058 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Sprinkler .....	1059 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1060 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1061 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1062 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Gravity or Flood .....	1063 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1064 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1065 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1066 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Sub Irrigation .....	1067 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1068 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1069 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1070 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If no irrigation systems have been installed or upgraded in the last 15 years, go to Item 8, page 40; otherwise continue.**

- a. For any new installations of irrigation systems or upgrades in the last 15 years, what assistance did you receive?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Micro or Drip	1071 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1072 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1073	1074 %
Sprinkler	1075 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1076 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1077	1078 %
Gravity or Flood	1079 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1080 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1081	1082 %
Sub Irrigation	1083 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1084 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1085	1154 %

- i. What portion of financial assistance to install this practice was from federal sources?

Enter 0 if no financial assistance was received. ....

1087	%
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**Section 12 - Irrigation Management and System Improvements (continued)**

3. Did you install new or upgrade any of the following water supply systems within your irrigation systems in the last 15 years?

	New Irrigation System (Including changing the application technology in an existing irrigated field)	System Upgrade (Improvement of the same application technology)	Independent of New Installation or Upgrade (Maintenance, repair or improvement with current application technology)
Irrigation pipeline .....	1155 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1156 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1157 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Water conveyance structure .....	1191 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1158 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1093 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Pumping plant .....	1159 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1096 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1097 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Water control structure .....	1098 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1099 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1100 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

**If no new irrigation systems have been installed or upgraded in the last 15 years, go to Item 4, page 37; otherwise continue.**

- a. For any new installations of irrigation water supply systems or upgrades in the last 15 years, what assistance did you receive?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Irrigation pipeline .....	1101 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1102 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1103	1104 %
Water conveyance structure .....	1105 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1106 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1107	1108 %
Pumping plant .....	1109 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1110 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1111	1112 %
Water control structure .....	1113 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1114 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1115	1116 %

- i. What portion of financial assistance to install or upgrade this practice was from federal sources?  
Enter 0 if no financial assistance was received. ....

1117	%
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**Section 12 - Irrigation Management and System Improvements (continued)**

4. A written irrigation water management plan lays out the process of determining and controlling the volume, frequency and application rate of irrigation water in a planned, efficient manner to improve irrigation water use efficiency, minimize soil erosion, protect surface and groundwater resources, manage salts in the crop root zone, manage air, soil, or plant micro-climate, or reduce energy use.

Based on the definition above, have you ever followed a written irrigation water management plan developed with assistance from a government agency, private consultant, or other technical expert?

1008 1 ☐ Yes - Go to Item 5

3 ☐ No - Complete Items 4a and 4b below, then go to Section 13 - Conservation Stewardship Program, page 41

- a. Please report your agreement or disagreement with the following statements about a written irrigation water management plan.

I have never followed a written irrigation water management plan because:

	Agree	Neither Agree nor Disagree	Disagree
I have no conservation need. .... 1009	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I have a conservation need, but more information about irrigation water management plans would help me decide whether to use them. .... 2492	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would not impact my decisions about when to irrigate. .... 1152	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated cost greater than benefits. .... 1011	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 1012	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 1153	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 1014	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 1015	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you never followed a written irrigation water management plan.

Other reason, specify: 1016 \_\_\_\_\_

**After completing Items 4a and 4b above, Go to Section 13 - Conservation Stewardship Program, page 41.**

5. Did you follow a written irrigation water management plan in 2021? .... 1017 1 ☐ Yes - Continue 3 ☐ No - Go to Item 6, page 38

- a. On what percentage of your irrigated cropland did you follow an irrigation water management plan in 2021? (0-100%) ..... 1018 %

**Section 12 - Irrigation Management and System Improvements (continued)**

6. What year did you first follow an irrigation water management plan? ..... year

1019

a. For the first year using a written irrigation water management plan, on what proportion of total cropland was the written plan used? (0-100%) .....

1020

%

b. For the first year, did you receive either of the following?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Irrigation Management Plan .....	1021 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1022 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1023	1024 %

i. What portion of financial assistance to begin this practice was from federal sources?  
Enter 0 if no financial assistance was received. ....

1025

%

c. Please report your agreement or disagreement with the following statements.

I chose to begin following a written irrigation water management plan because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting an on-farm conservation need. .... 1026	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Other farmers I know have been successful. .... 1027	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It was recommended to me by a trusted advisor. .... 2493	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I was confident I could follow the plan successfully. .... 2494	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 1028	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 1029	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1030	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1031	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 1032	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Required by water supplier or water control district. .... 1033	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
To reduce water application amounts due to drought. .... 1034	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
To reduce water application due to a loss of access to a water supply. .... 1035	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

d. Please specify any additional reason why you started following a written irrigation water management plan.

1140

Other reason, specify: \_\_\_\_\_

**Section 12 - Irrigation Management and System Improvements (continued)**

7. Since the first year following an irrigation water management plan, have you expanded the percent of total land in which an irrigation water management plan is used? ..... 1036 1 ☐ Yes - Continue 3 ☐ No - Go to Item 8, page 40

- a. Did you receive the following for expanding your irrigation water management plan?

	Did you receive technical assistance?	Did you receive financial assistance?	How many acres had financial assistance?	Portion of total cost covered by financial assistance
Irrigation Management Plan .....	1037 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1038 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1039	1040 %

- i. What portion of financial assistance to expand this practice was from federal sources?  
Enter 0 if no financial assistance was received. ....

1041 %

- b. Please report your agreement or disagreement with the following statements.

I chose to expand the scope of my irrigation water management plan because:

	Agree	Neither Agree nor Disagree	Disagree
Anticipated meeting additional on-farm conservation need. .... 1042	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
The practice was working well for me elsewhere. .... 2495	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated benefits greater than cost. .... 1043	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated saving time or effort. .... 1044	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1045	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1046	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 1047	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

---

**Section 12 - Irrigation Management and System Improvements (continued)**


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8. Have you stopped following a written irrigation water management plan?

2496

<sub>1</sub> ☐ Yes - Continue

<sub>3</sub> ☐ No - Go to Section 13 - Conservation Stewardship Program, page 41

a. What year did you last follow an irrigation water management plan? ..... year

1048

b. Please report your agreement or disagreement with the following statements.

I chose to stop following an irrigation water management plan because:

	Agree	Neither Agree Nor Disagree	Disagree
Did not meet my conservation need. .... 1049	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
Costs were greater than benefits. .... 1050	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
It took too much time or effort. .... 1051	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
Technical assistance ended. .... 1052	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
Financial assistance ended. .... 1053	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
Financial assistance did not cover enough of the cost. .... 1054	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>

---

**Section 13 - Conservation Stewardship Program**


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1. Are you or have you ever been enrolled in the Conservation Stewardship Program (CSP)?

1120

☐ Yes - Continue

☐ No - Go to Section 14 - Demographics, page 42

- a. Have you received financial assistance through the CSP for the enhancement of a practice?

1121

☐ Yes - Continue

☐ No - Go to Section 14 - Demographics, page 42

- b. Please fill out the table for the number of acres where you received financial assistance through CSP for applying an enhancement on any of the following practices.

	Acres	Percent of Cost Covered by CSP Payment
Cover Crops .....	1122	1123 %
Nutrient Management .....	1124	1125 %
Pest Management Conservation System .....	1126	1127 %
No-Till .....	1128	1129 %
Reduced Tillage .....	1130	1131 %
Irrigation Water Management .....	1132	1133 %
Field Border .....	1134	1135 %
Filter Strip .....	1136	1137 %
Riparian Buffers .....	1138	1139 %

---

**Section 14 - Demographics**


---

1. Please answer the following for the operator:

a. What is the operator's sex?

910

1 ☐ Male

2 ☐ Female

b. What was the operator's age on January, 1, 2022? .....

911

912

c. Is the operator of Hispanic, Latino or Spanish origin? .....

1 ☐ Yes

3 ☐ No

d. What is the operator's race? Check all that apply.

913

☐ White

914

☐ Black or African American

915

☐ American Indian or Alaska Native

916

☐ Asian

917

☐ Native Hawaiian or Other Pacific Islander

e. Has the operator ever served on active duty in the U.S. Armed Forces, Reserves or National Guard?

918

1 ☐ Never served in the military

2 ☐ Only on active duty for training in the Reserves or National Guard

3 ☐ Now on active duty

4 ☐ On active duty in the past, but not now

2. How many years have you been continuously managing a forest, farm or ranch operation? ..... years

919

3. At which occupation did the operator spend the majority (50 percent or more) of his/her time in 2021?

920

1 ☐ Forestry, farm or ranch work

2 ☐ Work other than forestry, farming or ranching

1212

4. Is the operator retired from forestry, farming or ranching? .....

1 ☐ Yes

3 ☐ No

---

**Section 14 - Demographics (continued)**


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5. What is the highest level of formal education the operator has achieved?

922

- 1 ☐ Less than high school diploma
- 2 ☐ High school
- 3 ☐ Some college (include associates degree)
- 4 ☐ Four-year college graduate and beyond

6. In 2021, what was this operation's legal status for tax purposes? Check one answer only.

923

1	Family or individual operation - EXCLUDE partnerships and corporations		
2	Partnership operation - INCLUDE family partnerships - If option 2 is selected:		
	924		
	Is this partnership registered under state law? .....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
3	Incorporated under state law - If option 3 is selected:		
	925		
	Is this a family held corporation? .....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
	926		
	Are there more than 10 stockholders? .....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
4	Other - If option 4 is selected:		
	927		
	Estate or trust .....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
	928		
	Grazing association, government facility or American Indian reservation .....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
	929		
	Other, specify type: .....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
	930		



## Section 15 - Value of Sales

### Farm Producer Value Codes

Dollar Range	Code	Dollar Range	Code	Dollar Range	Code
0 - \$999 .....	1	\$30,000 - \$39,999 .....	8	\$180,000 - \$249,999 .....	15
\$1,000 - \$2,499 .....	2	\$40,000 - \$49,999 .....	9	\$250,000 - \$499,999 .....	16
\$2,500 - \$4,999 .....	3	\$50,000 - \$59,999 .....	10	\$500,000 - \$999,999 .....	17
\$5,000 - \$9,999 .....	4	\$60,000 - \$69,999 .....	11	\$1,000,000 - \$4,999,999 ....	18
\$10,000 - \$14,999 .....	5	\$70,000 - \$79,999 .....	12	\$5,000,000 and over .....	19
\$15,000 - \$19,999 .....	6	\$80,000 - \$99,999 .....	13		
\$20,000 - \$29,999 .....	7	\$100,000 - \$179,999 .....	14		

1. Which value code represents this operation in terms of the gross value of sales and government agricultural payments? .....
- | 2020 | 2021 |
|------|------|
| 2497 | 2498 |

#### INCLUDE

- Sales of all the crops, livestock, poultry, and livestock products (milk, eggs, etc.)
- The value of hay, silage, and other crops harvested, but not sold
- The value of all crops, livestock and poultry produced under contract
- Landlord's share of government payments and crops sold

#### EXCLUDE

- Dollars received on land rented to others

2. Which value code represents the net operating income for this operation? .....
- | 2020 | 2021 |
|------|------|
| 2499 | 2500 |
- (Cash income from all farm sourced minus production costs and depreciation; if negative, please indicate with a negative sign before the value code.)

3. Which value code represents your total off-farm income? .....
- | 2020 | 2021 |
|------|------|
| 2501 | 2502 |
- (wages, salaries, tips, interest, dividends, other public sources, etc., before taxes, income from operating another farm, income from operating any other business; if negative, please indicate with a negative sign before the value code.)

4. How many people lived in your household? .....
- | 2020 | 2021 |
|------|------|
| 2503 | 2504 |

**Section 15 - Value of Sales (continued)**

5. Of the farm or ranch income reported, which of these categories represents the largest portion of the gross income from the operation?

## Code

- |   |                             |
|---|-----------------------------|
| 1 – Grains, Oilseeds, Dry Beans, and Dry Peas .....<br>(corn, flaxseed, grain silage and forage, grains and oilseeds, popcorn, rice,<br>small grains, sorghum, soybeans, sunflowers, straw, etc.) | 1 <input type="checkbox"/>  |
| 2 – Tobacco .....   | 2 <input type="checkbox"/>  |
| 3 – Cotton and Cottonseed .....   | 3 <input type="checkbox"/>  |
| 4 – Vegetables, Melons, Potatoes and Sweet Potatoes .....<br>(beets, cabbage, cantaloupes, pumpkins, sweet corn,<br>tomatoes, watermelons, vegetable seeds, etc.)                                 | 4 <input type="checkbox"/>  |
| 5 – Fruit, Tree Nuts and Berries .....<br>(almonds, apples, blueberries, cherries, grapes, hazelnuts, kiwifruit,<br>oranges, pears, pecans, strawberries, walnuts, etc.)                          | 5 <input type="checkbox"/>  |
| 6 – Nursery, Greenhouse, Floriculture and Sod .....<br>(bedding plants, bulbs, cut flowers, flower seeds, foliage plants,<br>mushrooms, nursery potted plants, shrubbery, sod, etc.)              | 6 <input type="checkbox"/>  |
| 7 – Cut Christmas Trees and Short Rotation Woody Crops .....  | 7 <input type="checkbox"/>  |
| 8 – Other Crops and Hay, CRP and Pasture .....<br>(grass seed, hay and grass silage, hops, maple syrup, mint,<br>peanuts, sugarcane, sugarbeets, CRP, etc.)                                       | 8 <input type="checkbox"/>  |
| 9 – Hogs and Pigs .....   | 9 <input type="checkbox"/>  |
| 10 – Milk and Other Dairy Products from Cows .....  | 10 <input type="checkbox"/> |
| 11 – Cattle and Calves .....<br>(beef and dairy cattle for breeding stock, fed cattle, beef and dairy cull animals,<br>stockers and feeders, veal calves, etc.)                                   | 11 <input type="checkbox"/> |
| 12 – Sheep, Goats, and their Products .....<br>(wool, mohair, milk and cheese)  | 12 <input type="checkbox"/> |
| 13 – Horses, Ponies, and Mules .....<br>(burros and donkeys)  | 13 <input type="checkbox"/> |
| 14 – Poultry and Eggs .....<br>(broilers, chickens, turkeys, ducks, eggs, emus, geese, hatchlings,<br>ostriches, pigeons, pheasants, quail, poultry products, etc.)                               | 14 <input type="checkbox"/> |
| 15 – Aquaculture .....<br>(catfish, trout, ornamental and other fish, mollusks, crustaceans, etc.)  | 15 <input type="checkbox"/> |
| 16 – Other Animals and Other Animal Products .....<br>(honey bees, honey, rabbits, fur-bearing animals, semen, manure,<br>other animal specialties, etc.)   | 16 <input type="checkbox"/> |

Farm Type  
Code

862

Use this Space for Notes and Comments.

Use this Space for Notes and Comments.

## Section 16 - Conclusion

1. Has this operation (name on label) been sold, or turned over to someone else?

1 ☐ Yes - Identify the new operator(s) below      3 ☐ No - Go to Item 2

Operation Name: _____		
Operator Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: (____) _____		<input type="checkbox"/> Check if cell phone

a. Did this person operate land individually on June 1, 2021? ..... 1 ☐ Yes      ☐ No

1511

2. Comments related to the information you reported:

### Contact Information:

Operation Email:		Operation Phone:	
9937		9936	
( ) - _____		check if cell phone <input type="checkbox"/>	

Respondent Name:		Respondent Phone (if different from above)			
9912		9911		check if cell phone <input type="checkbox"/>	9910    MM    DD    YY
( ) - _____		( ) - _____		Date:    _    _    _    _	

This completes the survey. Thank you for your help.

### OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	R. Unit	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Spouse 3-Acct/Bkpr 4-Partner 9-Other	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9921	9985	9989			
										Optional Use			
										9907	9908	9906	9916
S/E Name													

# CONSERVATION PRACTICE ADOPTION MOTIVATIONS SURVEY - VERSION 2

## CONFINED LIVESTOCK PRACTICES

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OMB No.0535-0272  
Approval Expires: 12/31/2024  
Project Code: 943  
Survey ID: 9025  
Version 2



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

### **USDA/NASS**

National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@usda.gov](mailto:nass@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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1. Did you, regardless of ownership, raise any swine, poultry, milk cows, veal calves, or feeder cattle (including backgrounders) on your operation during 2021?

1101 ☐ Yes - Go to Section 1 - Land Use and Livestock, page 2 ☐ No - Continue to Item 1a, then Go to Section 13 - Conclusion, page 32

- a. What is the current status of your livestock operation?

1102

- ☐ Sold  
☐ Rented out  
☐ Idle for more than a year

**After answering Item 1a above, Go to Section 13 - Conclusion, page 32.**

## Section 1 - Land Use and Livestock

Please report farm/ranch land owned, rented, or used in your operation.

INCLUDE all cropland, Conservation Reserve Program (CRP), pastureland, woodland, wasteland, farmstead, acres used for crop/livestock production facilities, and all other building sites associated with this operation, etc.

1. For 2021, how many acres did this operation:

a. Own?.....

b. Rent or Lease from others or use Rent Free?

INCLUDE any short term leases or land used on an animal unit month (AUM) basis .....

c. Rent to others? .....

2. Calculate Item 1a + 1b - 1c. Then the total acres operated in 2021 was: .....

3. Of the total acres operated, how many acres are considered:

a. Cropland, including land in hay, summer fallow, cropland idle, and cropland in government programs? .....

i. How many acres were under an easement against development for non-agricultural uses in 2021? .....

b. Grazing land, including permanent pasture and rangeland, woodland pastured, and other pasture and grazing land (including rotational pasture) that could have been used for crops without additional improvements? .....

i. How many acres were under an easement against conversion to crop production or non-agricultural use in 2021? .....

c. Woodland, not pastured? .....

d. Other land? .....

4. Of the total acres operated, how many acres were under a permanent or long-term easement or enrolled in a land retirement program in 2021? .....

INCLUDE any other land enrolled in the Conservation Reserve Program (CRP), Wetland Reserve Program (WRP), Farmable Wetlands Program (FWP), Conservation Reserve Enhancement Program (CREP), Agricultural Conservation Easements Program (ACEP) and the Forest Stewardship Program or any other state, federal or local program

EXCLUDE land included in 3ai or 3bi

Acres
901
+
132
+
905
-
900
=

Acres
101
2600

102
2601
103
104
107

---

**Section 1 - Land Use and Livestock (continued)**


---

5. Report the total number of livestock and poultry, by type, on your operation on December 31, 2021.

- | Number |
|--------|
| 108    |
| 109    |
| 110    |
| 111    |
| 112    |
| 2603   |
- a. Beef cows .....  
 b. Milk cows, including any dry cows .....  
 c. Other cattle and calves .....  
 INCLUDE fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.  
 d. All hogs and pigs .....  
 e. All Poultry .....  
 INCLUDE layers and pullets, including table and hatching, turkeys, broilers, other chickens, ducks, etc.  
 f. All other livestock, please specify 2602 .....  
 INCLUDE goats, sheep, etc.

6. During 2021, did this operation produce organic products according to USDA's National Organic Program (NOP) standards or have acres transitioning into USDA NOP Production?

EXCLUDE processing and handling

106

☐ Yes

☐ No

7. During 2021, did this operation participate in a sustainable sourcing contract that requires specific farming practices?

2604

☐ Yes

☐ No



## Section 2 - General Conservation

1. Report your agreement or disagreement with the following statements about conservation practices and technology.

	Agree	Neither Agree nor Disagree	Disagree
I seek out information about conservation practices and their implementation. .... 2605	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I generally adopt new technologies or conservation practices before other farmers in my local area. .... 2606	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I experiment with new conservation practices on my farm. .... 2607	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I do not implement new conservation practices unless I know that they will increase my profits or reduce my workload. .... 2608	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that improve environmental quality, even if they do not increase my profit or reduce my workload. .... 2609	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that protect my investment in the land, even if they do not increase my profit or reduce my workload. .... 2610	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that preserve my land for the next generation, even if they do not increase my profit or reduce my workload. .... 2611	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

2. Thinking in general about the practices in use on your farming operation, what are your objectives when deciding to use manure management or conservation? Check all that apply.

2612 ☐ Improving water quality (e.g., avoid polluting streams, rivers, and lakes)

2613 ☐ Enhancing soil health or soil quality

2614 ☐ Reducing erosion

2615 ☐ Ensuring compliance with regulations

2616 ☐ Reducing the cost of manure handling and management

2617 ☐ Facilitating (a) better use of nutrients on my farm or (b) export to other farms

2618 ☐ Improving animal health

2619 ☐ Reducing the need for repetitive maintenance

2620 ☐ Managing dust, odors, or other air quality issues

2621 ☐ Other, please specify: 2622 \_\_\_\_\_

### Section 3 - Technical Assistance

1. Have you ever received technical assistance (expertise or information) for manure management or conservation practices associated with your livestock operation from any federal, state, local university, or other source?

In this survey, conservation refers to actions taken to improve and preserve natural resources such as soil, water, and wildlife habitat on your operation.

Report on technical assistance you received regardless of whether you received financial assistance to help defray the cost of installing or implementing conservation practices.

**INCLUDE**

- Expertise or information provided for planning or implementing a conservation practice or designing, laying out or installing conservation structures
- Expertise or information from private technical service providers (TSPs) that is reimbursed by federal, state, or local governments
- Expertise or information from your CCA, seed dealer, agronomist, co-op, nutritionist, integrator, technical service provider, or nutrient management specialist that may be free or a paid service

1201

☐ Yes - Continue

☐ No - Go to Item 1b

- a. Have you received technical assistance for conservation from any of these sources? Check all that apply.

1202

☐ Federal agencies (typically free)

1203

☐ State or local agencies (typically free)

1204

☐ Private sources (free or paid)

- b. Report your agreement or disagreement with the following statements about technical assistance on your cropland from a government, university, or other source.

	NA	Agree	Neither Agree nor Disagree	Disagree
Technical assistance is available to me. .... 1205		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I am comfortable using free technical assistance from federal government sources. .... 1215		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I am comfortable using free technical assistance from non-federal government sources. .... 1213		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I have never sought any form of technical assistance. .... 1208		2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I tried to get free technical assistance from the federal government but could not. .... 2623	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I tried to get free technical assistance from a non-federal government source but could not. .... 2624	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I have received technical assistance at some time. .... 1207	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I received technical assistance and it was beneficial. .... 1210	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I received technical assistance but it took too long. .... 2625	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
I received technical assistance but it did not meet my needs. .... 2626	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

## Section 4 - Waste (Manure) Storage Facilities

1. Are the following waste (manure) storage facilities currently in use on your livestock operation?  
EXCLUDE facilities designed to treat manure (e.g., water treatment lagoons and vegetated treatment areas)

Complete the table below and follow the instructions at the bottom of the table below.

	Are any of these waste storage facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
Buildings for solid waste .....	1301 <sub>1</sub> <input type="checkbox"/> Yes <sub>3</sub> <input type="checkbox"/> No	1303	1304	1302
Impoundments, compacted soil lining .....	1305 <sub>1</sub> <input type="checkbox"/> Yes <sub>3</sub> <input type="checkbox"/> No	1307	1308	1306
Impoundments, concrete lining .....	1309 <sub>1</sub> <input type="checkbox"/> Yes <sub>3</sub> <input type="checkbox"/> No	1311	1312	1310
Impoundments, geomembrane or geosynthetic clay lining .....	1313 <sub>1</sub> <input type="checkbox"/> Yes <sub>3</sub> <input type="checkbox"/> No	1315	1316	1314
Tank, steel lined .....	1317 <sub>1</sub> <input type="checkbox"/> Yes <sub>3</sub> <input type="checkbox"/> No	1319	1320	1318

**If you answered "No" to all facility types in Item 1, Column 2 above, continue. If you answered "Yes" for any facility type in Item 1, Column 2 above, Go to Item 3, page 7.**

2. Please report your agreement or disagreement with the following statements regarding waste storage facilities.  
Complete the table and Item 2a below, then go to Section 5 - Animal Mortality Facilities, page 9.

I chose not to install waste storage facilities, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
1321 They are not needed on my operation. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
1322 Anticipated costs greater than benefits. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
1323 It would take too much time or effort. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
1324 I tried to get but did not receive technical assistance. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
1325 I applied for but did not receive financial assistance. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
1326 Financial assistance would not cover enough of the cost. ....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>
1327 Cost of meeting government standards for financial assistance is too high .....	<sub>1</sub> <input type="checkbox"/>	<sub>2</sub> <input type="checkbox"/>	<sub>3</sub> <input type="checkbox"/>

- a. Please specify any additional reason why you have not installed waste storage facilities.

Other reason, specify: <sup>1328</sup> \_\_\_\_\_

**After completing Item 2 and 2a above, Go to Section 5 - Animal Mortality Facilities, page 9.**

---

**Section 4 - Waste (Manure) Storage Facilities (continued)**


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3. Are the waste storage facilities on your operation required by regulation?

INCLUDE regulation from Federal, State or local governments

1329

1 ☐ Yes

3 ☐ No

4. At any point during the calendar year are your waste storage facilities completely full?

1330

1 ☐ Yes - Complete Item 4a, 4ai and 4aii below, then go to Item 5

3 ☐ No - Go to Item 4b

- a. What do you do with the manure that cannot be stored on your operation?

i. Do you sell or give away excess manure to other operations? ..... 1331 1 ☐ Yes 3 ☐ No

ii. Do you spread excess manure on your own fields? ..... 1332 1 ☐ Yes 3 ☐ No

**After completing Item 4a, 4ai and 4aii above, Go to Item 5**

b. Are you required, by regulation, to maintain more storage than needed? ..... 1333 1 ☐ Yes 3 ☐ No

c. Did you build more storage than you need to meet requirements for receiving financial assistance? ..... 1334 1 ☐ Yes 3 ☐ No

d. Other reasons? ..... 2627 1 ☐ Yes 3 ☐ No

5. Have changes in weather affected your management of waste storage?

1335

1 ☐ Yes - Continue

3 ☐ No - Go to Item 6

- a. Have any of the following changes affected your management of waste storage?

i. Increased precipitation ..... 1336 1 ☐ Yes 3 ☐ No

ii. Decreased precipitation ..... 1337 1 ☐ Yes 3 ☐ No

iii. Seasonal change in precipitation ..... 1338 1 ☐ Yes 3 ☐ No

6. Did you install any of the waste storage facilities on your operation (as opposed to taking them over from another operation by purchase or lease)?

1339

1 ☐ Yes - Continue

3 ☐ No - Go to Section 5 - Animal Mortality Facilities, page 9

- a. Were the waste storage facilities you installed:

i. New (no prior facility on the same location)? ..... 1340 1 ☐ Yes 3 ☐ No

ii. Renovation of existing facilities? ..... 1341 1 ☐ Yes 3 ☐ No

b. Did the facilities you installed result in an overall increase in waste storage capacity? ..... 1342 1 ☐ Yes 3 ☐ No

**Section 4 - Waste (Manure) Storage Facilities (continued)**

c. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Buildings for solid waste .....	1343 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1344 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1345
Impoundment, compacted soil lining .....	1348 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1349 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1350
Impoundment, concrete lining .....	1353 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1354 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1355
Impoundment, geomembrane or geosynthetic clay lining .....	1358 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1359 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1360
Tank, concrete or steel lined .....	1363 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1364 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1365

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received.) .....

1368	%
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d. I decided to install waste storage facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
More storage was required to expand my operation. .... 1369	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Changing weather required a change in storage. .... 1370	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. .... 1371	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1372	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1373	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. .... 1374	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

e. Did you select the type of storage based on? Check all that apply.

1375 ☐ Cost

1376 ☐ Management time or effort

1377 ☐ Other criteria, specify: 1378 \_\_\_\_\_

f. Please specify any additional reason why you have installed waste storage facilities.

Other reason, specify: 1380 \_\_\_\_\_

## Section 5 - Animal Mortality Facilities

### 1. Do you have animal mortality facilities on your operation?

Complete the table below and follow the instructions at the bottom of the table below.

	Are animal mortality facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
Animal mortality facilities INCLUDE structures for the treatment or disposal of carcasses from day-to-day operations EXCLUDE emergency mortality events	1409 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1411	1412	1410

**If you answered "Yes" in Column 2 above, Go to Item 3, page 10. If you answered "No" in Column 2 above, continue.**

### 2. Please report your agreement or disagreement with the following statements regarding animal mortality facilities.

Complete the table and Item 2a below, then go to Section 6 - Waste (manure) Separation Facilities, page 12.

I chose not to install animal mortality facilities because:

	Agree	Neither Agree nor Disagree	Disagree
1417 They are not needed on my operation. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1418 I anticipated costs greater than benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1419 It would take too much time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1420 I tried to get but did not receive technical assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1421 I applied for but did not receive financial assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1422 Financial assistance would not cover enough of the cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1423 Cost of meeting government standards for financial assistance is too high. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

#### a. Please specify any additional reason why you have not installed animal mortality facilities.

Other reason, specify: <sup>1424</sup> \_\_\_\_\_

**After completing Items 2 and 2a above, Go to Section 6 - Waste (Manure) Separation Facilities, page 12.**

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**Section 5 - Animal Mortality Facilities (continued)**


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3. Are the animal mortality facilities on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments.

1425

☐ Yes

☐ No

4. What type of day-to-day animal mortality management do you implement on your operation? Check all that apply.

1441

☐ Rendering

1442

☐ Composting

1443

☐ Burial

1444

☐ Freezer

1445

☐ Incineration

1446

☐ Gasification

5. Did you install the animal mortality facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1451

☐ Yes - Continue

☐ No - Go to Section 6 - Waste (Manure) Separation Facilities, page 12

- a. Were the animal mortality facilities you installed:

i. New (no prior facility on the same location)? .....

1452

☐ Yes

☐ No

ii. Renovation of existing facilities? .....

1453

☐ Yes

☐ No

- b. Did the facilities you installed result in an overall increase in capacity? .....

1454

☐ Yes

☐ No

- c. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Animal mortality facility .....	1465 <input type="checkbox"/> Yes <input type="checkbox"/> No	1466 <input type="checkbox"/> Yes <input type="checkbox"/> No	1467

- i. What portion of financial assistance to begin this practice was from federal sources?

Enter 0 if no financial assistance was received. ....

1470

%

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**Section 5 - Animal Mortality Facilities (continued)**


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d. I decided to install animal mortality facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
An upgrade was required to be eligible for financial assistance for other facilities. .... 1473	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than cost. .... 1474	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. .... 1475	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1476	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1477	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. .... 1478	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

e. Please specify any additional reason why you have installed animal mortality facilities.

1479

Other reason, specify: \_\_\_\_\_



## Section 6 - Waste (Manure) Separation Facilities

1. Do you have waste (manure) separation facilities on your operation?

**INCLUDE**

- filters or screens
- settling tanks
- settling basins
- settling channels used to separate manure solids from liquids

Complete the table below and follow the instructions at the end of the table.

	Are waste separation facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
Waste (Manure) Separation Facilities .....	1501 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1503	1504	1502

**If you answered "Yes" in Column 2 above, Go to Item 3, page 13. If you answered "No" in Column 2 above, continue.**

2. Please report your agreement or disagreement with the following statements regarding waste separation facilities.

Complete the table and 2a below, then go to Section 7 - Comprehensive Nutrient Management, page 15.

I chose not to install waste (manure) separation facilities because:

	Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. .... 1509	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. .... 1510	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 1550	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 1512	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 1513	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 1514	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. .... 1515	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- a. Please specify any additional reason why you have not installed waste separation facilities.

Other reason, specify: 1516 \_\_\_\_\_

**After completing Items 2 and 2a above, Go to Section 7 - Comprehensive Nutrient Management, page 15.**

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**Section 6 - Waste (Manure) Separation Facilities (continued)**


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3. What types of waste separators have you implemented? Check all that apply.

1431

☐ Inclined screen

1432

☐ Screw press

1433

☐ Roller press

1434

☐ Belt press

1435

☐ Settling basin

1436

☐ Weeping wall

1437

☐ Vibratory screen

1438

☐ Rotating screen

1439

☐ Centrifuge

1440

☐ Geotextile container

4. Have changes in weather affected your management of waste separation facilities?

1447

☐ Yes - Continue

☐ No - Go to Item 5, page 14

a. Have any of the following changes affected your management of waste separation facilities?

i. Increased precipitation .....

1448

☐ Yes

☐ No

ii. Decreased precipitation .....

1449

☐ Yes

☐ No

iii. Seasonal change in precipitation .....

1450

☐ Yes

☐ No

**Section 6 - Waste (Manure) Separation Facilities (continued)**

5. Did you install any of the waste separation facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1520 ☐ Yes - Continue

☐ No - Go to Section 7 - Comprehensive Nutrient Management, page 15

- a. Were the waste separation facilities you installed:

- i. New (no prior facility on the same location)? ..... 1521 ☐ Yes ☐ No
- ii. Renovation of existing facilities? ..... 1522 ☐ Yes ☐ No

- b. Did the facilities you installed result in an overall increase in waste separation capacity? ..... 1523 ☐ Yes ☐ No

- c. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0.
Waste separation facility .....	1524 <input type="checkbox"/> Yes <input type="checkbox"/> No	1525 <input type="checkbox"/> Yes <input type="checkbox"/> No	1526

- i. What portion of financial assistance to begin this practice was from federal sources?

Enter 0 if no financial assistance was received. .... 1534 %

- d. I decided to install waste separation facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
They addressed a waste management or storage problem. .... 1535	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
They facilitate better use of nutrients or export to other farms. .... 1536	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. .... 1537	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I anticipated benefits greater than cost. .... 1538	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I anticipated saving time or effort. .... 1539	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I received technical assistance. .... 1540	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I received financial assistance. .... 1541	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I anticipated off-farm environmental benefits. .... 1542	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- e. Please specify any additional reason why you have installed waste separation facilities.

Other reason, specify: 1543 \_\_\_\_\_

## Section 7 - Comprehensive Nutrient Management

A Comprehensive Nutrient Management Plan (CNMP) is a management plan to utilize nutrients and to manage the collection, handling, storage, application, and utilization of animal waste (manure).

1. Do you have a written comprehensive nutrient management plan (CNMP), developed with assistance from a government agency, private consultant, or other technical expert, to manage manure and other nutrients?

1601 1 ☐ Yes - Go to Item 2

3 ☐ No - Complete Items 1a and 1b below, then go to Section 8 - Waste Utilization, page 18

- a. Please report your agreement or disagreement with the following statements regarding a written comprehensive nutrient management plan.

I chose not to develop and implement a written comprehensive nutrient management plan, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
It would require changing crops. .... 1602	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would require export of waste to other farms. .... 1603	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. .... 2628	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 1604	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I need more information to make a good decision about whether to use a CNMP. .... 2629	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 1605	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 1606	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 1607	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- b. Please specify any additional reason why you have not implemented a written comprehensive nutrient management plan.

Other reason, specify: 1608 \_\_\_\_\_

**After completing Items 1a and 1b above, Go to Section 8 - Waste Utilization, page 18.**

2. Have you had to modify your CNMP? ..... 1609 1 ☐ Yes 3 ☐ No
3. Is a CNMP for your operation required by regulation? ..... 1610 1 ☐ Yes 3 ☐ No

**Section 7 - Comprehensive Nutrient Management (continued)**

4. Is spreading of waste on frozen ground limited or prohibited by your CNMP? ..... 1611 1 ☐ Yes 3 ☐ No
5. Have changes in weather affected your CNMP or how you implement it?  
1612 1 ☐ Yes - Continue 3 ☐ No - Go to Item 6
- a. Have any of the following changes affected your CNMP or how you implement it?
- i. Increased precipitation ..... 1613 1 ☐ Yes 3 ☐ No
- ii. Decreased precipitation ..... 1614 1 ☐ Yes 3 ☐ No
- iii. Seasonal change in precipitation ..... 1615 1 ☐ Yes 3 ☐ No
6. Did you manage in accordance with your comprehensive nutrient management plan in 2021? ..... 1645 1 ☐ Yes 3 ☐ No
7. What year did you first manage in accordance with your comprehensive nutrient management plan? ..... year 1616

- a. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of the cost was covered by financial assistance?
Developing or writing a Comprehensive Nutrient Management Plan (CNMP) .....	1617 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1618 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1619 %
Implementing CNMP .....	1620 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1621 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1622 %

- i. What portion of financial assistance to begin this practice was from federal sources? (Enter 0 if no financial assistance was received.) ..... 1623 %

**Section 7 - Comprehensive Nutrient Management (continued)**

b. I chose to develop and implement a written CNMP, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
It was required to be eligible for financial assistance on other facilities. .... 1624	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It facilitates better use of livestock waste nutrients in crop production. .... 1625	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than costs. .... 1626	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. .... 1627	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1628	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1629	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. .... 1630	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

c. Please specify any additional reason why you have implemented a CNMP.

Other reason, specify: <sup>1631</sup> \_\_\_\_\_

8. Have you stopped managing in accordance with your CNMP?

<sup>2630</sup>

1 ☐ Yes - Continue

3 ☐ No - Go to Section 8 - Waste Utilization, page 18

a. What year did you last manage in accordance with your CNMP? ..... year

<sup>1632</sup>

b. If you did not manage in accordance with your CNMP in 2021, do you plan to do so again within 3 years?

<sup>1633</sup>

1 ☐ Yes - Go to Section 8 - Waste Utilization, page 18

3 ☐ No - Continue

c. I decided to stop managing in accordance with my CNMP, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
It required changing crops. .... 1634	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It required export of waste to other farms. .... 1635	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Costs were greater than benefits. .... 1636	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It took too much time or effort. .... 1637	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Technical assistance ended. .... 1638	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance ended. .... 1639	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance did not cover enough of the cost. .... 1640	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

## Section 8 - Waste Utilization

### 1. Does your livestock operation produce liquid waste?

2631

1 ☐ Yes - Continue3 ☐ No - Go to Item 6, page 20

#### a. What type of equipment do you use for in-field application of liquid manure? Check all that apply. If you use a contractor to apply manure, please note the types of equipment used by the contractor.

2632

☐ Tractor-pulled spreader with tank (places manure on surface)

2633

☐ Tractor-pulled injector with tank (places manure under the surface)

2634

☐ Tractor-pulled injector with hose (places manure under the surface)

2635

☐ Truck-mounted spreader with tank (places manure on surface)

2636

☐ Irrigation equipment

2637

b. Do you use a contractor to apply liquid manure? ..... 1 ☐ Yes 3 ☐ No

#### c. How is liquid manure incorporated into the soil?

2638

1 ☐ Manure spreading and incorporation are done in a single field operation2 ☐ Tillage within 24 hours of manure application3 ☐ Tillage, but not necessarily within 24 hours

2639

d. Do you export liquid manure to other farms? ..... 1 ☐ Yes 3 ☐ No

### 2. Do you use pipelines, pumping plants, or irrigation equipment to facilitate land application of manure?

Complete the table below and follow the instructions at the end of the table.

	Are any of these waste utilization facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
<b>Pipeline</b> A pipeline (and other parts necessary for a functioning pipeline) installed to convey liquid manure for land application.	1701 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1703	1704	1702
<b>Pumping plant</b> A pump used to apply waste to the field. INCLUDE pump(s), power unit(s), and all other parts necessary to the pumping plant that conveys liquid manure for land application	1705 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1707	1708	1706
<b>Sprinkler Irrigation</b> A distribution system that applies liquid waste through nozzles under pressure.	1709 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1711	1712	1710

**If you answered "No" to all facility types in Column 2 above, Go to Item 3, page 19. If you answered "Yes" for any facility type in Column 2 above, Go to Item 4, page 19.**

**Section 8 - Waste Utilization (continued)**

3. Please report your agreement or disagreement with the following statements regarding waste utilization facilities. Complete the table below, then go to Item 7, page 21.

I chose not to install waste utilization facilities, at least in part, because:

		Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. ....	1713	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. ....	1714	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. ....	1715	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. ....	1716	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. ....	1717	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. ....	1718	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. ....	1719	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- a. Please specify any additional reason why you have not installed waste utilization facilities.

Other reason, specify: <sup>1720</sup> \_\_\_\_\_

**After completing Item 3 and 3a above, Go to Item 7, page 21.**

4. Are the waste utilization facilities on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

<sup>1721</sup> 1 ☐ Yes 3 ☐ No

5. Have changes in weather affected your waste utilization?

<sup>1722</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to Item 6, page 20

- a. Have any of the following changes affected your waste utilization?

i. Increased precipitation .....	<sup>1723</sup>	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
ii. Decreased precipitation .....	<sup>1724</sup>	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No
iii. Seasonal change in precipitation .....	<sup>1725</sup>	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No



**Section 8 - Waste Utilization (continued)**

6. Did you install any of the waste utilization facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1726

1 ☐ Yes - Continue3 ☐ No - Go to Item 7, page 21

- a. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Pipeline .....	1727 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1728 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1729
Pumping plant .....	1732 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1733 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1734
Sprinkler Irrigation .....	1737 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1738 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1739

- i. What portion of financial assistance to begin this practice was from federal sources?  
Enter 0 if no financial assistance was received. ....

1760

%

- b. I chose to develop and implement waste utilization facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
It addressed a waste management problem. .... 1742	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It facilitated better use of manure nutrients. .... 1743	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance on other facilities. .... 1744	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than cost. .... 1745	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. .... 1746	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1747	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1748	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. .... 1749	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- c. Please specify any additional reason why you have installed waste utilization facilities.

Other reason, specify: 1750

\_\_\_\_\_

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**Section 8 - Waste Utilization (continued)**


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## 7. Does your livestock operation produce solid waste?

2640

1 ☐ Yes - Continue3 ☐ No - Go to Section 9 - Diversion of Runoff, page 22

## a. What type of equipment do you use to handle solid waste? Check all that apply.

If you use a contractor to apply manure, please note the types of equipment used by the contractor(s).

2641

☐ Tractor equipped with manure loader

2642

☐ High loader

2643

☐ Tractor-pulled litter housekeeper

2644

☐ Low profile loader

2645

☐ Other equipment for collecting manure

2646

☐ Tractor-pulled manure or litter spreader

2647

☐ Truck-mounted manure or litter spreader

2648

## b. Do you use a contractor to apply solid manure? .....

1 ☐ Yes3 ☐ No

## c. How is solid manure incorporated into the soil?

2649

1 ☐ Manure spreading and incorporation are done in a single field operation2 ☐ Tillage within 24 hours of manure application3 ☐ Tillage, but not necessarily within 24 hours

2650

## d. Do you export solid manure to other farms? .....

1 ☐ Yes3 ☐ No

## Section 9 - Diversion of Runoff

1. What type of runoff control and diversion structures (designed to "keep the clean water clean") are currently in use on your livestock operation?

Complete the table below and follow the instructions at the end of the table.

	Are any of these diversion facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
<b>Roofs and covers</b> INCLUDE roofs or covers over waste storage facilities, lagoons, animal mortality facilities or waste separation facilities	1801 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1803	1804	1802
<b>Roof runoff structure</b> INCLUDE gutters, downspout pipes and drains that collect, control or transport rainfall from roofs and covers	1805 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1807	1808	1806
<b>Diversion</b> INCLUDE channels constructed on a slope to divert water away from agricultural waste systems	1809 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1811	1812	1810

**If you answered "No" to all practices in Column 2 above, Go to Item 2, page 23. If you answered "Yes" for any practice in Column 2 above, Go to Item 3, page 23.**

**Section 9 - Diversion of Runoff (continued)**

2. Please report your agreement or disagreement with the following statements regarding runoff control and diversion structures. Complete the table below, then go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26.

I chose not to install runoff control and diversion structures, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. .... 1817	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. .... 1818	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 1819	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 1820	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 1821	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 1822	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. .... 1823	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

**After completing Item 2 above, Go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26.**

3. Are the runoff control and diversion structures on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

1825 1 ☐ Yes 3 ☐ No

4. Have changes in weather affected your use of runoff control and diversion structures?

This would include more than just diversions, which is only one structure listed.

1826 1 ☐ Yes - Continue 3 ☐ No - Go to Item 5, page 24

- a. Have any of the following changes affected your use of runoff control and diversion structures?

- i. Increased precipitation ..... 1827 1 ☐ Yes 3 ☐ No
- ii. Decreased precipitation ..... 1828 1 ☐ Yes 3 ☐ No
- iii. Seasonal change in precipitation ..... 1829 1 ☐ Yes 3 ☐ No

**Section 9 - Diversion of Runoff (continued)**

5. Did you install any of the runoff control and diversion facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1830

1 ☐ Yes - Continue3 ☐ No - Go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26

- a. Did the runoff diversion facilities you installed:

- i. Replace existing runoff management structures? ..... 1831 1 ☐ Yes 3 ☐ No
- ii. Expand existing runoff diversion capacity? ..... 1832 1 ☐ Yes 3 ☐ No
- iii. Divert runoff to waste storage facilities? ..... 1833 1 ☐ Yes 3 ☐ No
- iv. Divert runoff away from your waste storage facilities? ..... 1834 1 ☐ Yes 3 ☐ No

- b. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Roofs and covers .....	1835 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1836 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1837
Roof runoff structures .....	1840 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1841 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1842
Diversion .....	1845 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1846 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1847

- i. What portion of financial assistance to begin this practice was from federal sources?  
Enter 0 if no financial assistance was received. ....

1855

%

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**Section 9 - Diversion of Runoff (continued)**


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c. I chose to implement runoff control and diversion practices, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
I anticipated benefits greater than cost. .... 1856	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. .... 1857	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. .... 1858	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1859	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1860	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. .... 1861	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

d. Please specify any additional reason why you have installed runoff control and diversion structures.

Other reason, specify: <sup>1862</sup> \_\_\_\_\_

## Section 10 - Stabilization or Protection of Heavily Used Areas

1. Do you have vegetative cover, surfacing, or structures to stabilize or protect areas that are frequently and intensively used by people, animals or vehicles?

1901

☐ Yes - Complete Items 1a, 1b, and 1c below, then go to Item 3, page 27      ☐ No - Go to Item 2

a. Number taken over from another operation .....	1902
b. Number installed by you .....	1903
c. Total number in use (Item 1c = Item 1a + 1b) .....	2651

**After completing Item 1a, 1b, and 1c above, Go to Item 3, page 27.**

2. Please report your agreement or disagreement with the following statements about vegetative cover, surfacing or structures to stabilize or protect areas that are frequently and intensively used. Complete the table below and Item 2a, then go to Section 11 - Demographics, page 28.

I chose not to install vegetative cover, surfacing or structures to protect heavily used areas, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
1904 They are not needed on my operation. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1905 I anticipated costs greater than benefits. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1906 It takes too much time or effort. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1907 I tried to get but did not receive technical assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1908 I applied for but did not receive financial assistance. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1909 Financial assistance would not cover enough of the cost. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1910 Cost of meeting government standards for financial assistance is too high. ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- a. Please specify any additional reason why you have not installed vegetative cover, surfacing or structures to protect heavy use areas.

1911

Other reason, specify: \_\_\_\_\_

**After completing Item 2 and 2a above, Go to Section 11 - Demographics, page 28.**

**Section 10 - Stabilization or Protection of Heavily Used Areas (continued)**

3. Are the heavy use protection areas on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

1912

1 ☐ Yes

3 ☐ No

4. For areas of heavy use that were stabilized on your operation, did your operation do the stabilization for at least some of these areas?

1913

1 ☐ Yes - Continue

3 ☐ No - Go to Section 11 - Demographics, page 28

- a. Did you receive technical assistance or financial assistance?

		What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Technical assistance .....	1914 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	
Financial assistance .....	1915 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1916

- i. What portion of financial assistance to begin this practice was from federal sources?

Enter 0 if no financial assistance was received. ....

1919	%
------	---

- b. I chose to install vegetative cover, surfacing or structures to protect heavily used areas, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
They reduce animal health problems. .... 1920	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
They reduce repetitive maintenance activities. .... 1921	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
They make waste collection easier. .... 1922	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. .... 1923	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than costs. .... 1924	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. .... 1925	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. .... 1926	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. .... 1927	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. .... 1928	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- c. Please specify any additional reason why you decided to stabilize heavy use areas.

Other reason, specify: 1929

\_\_\_\_\_



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**Section 11 - Demographics**


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1. Please answer the following for the operator:

a. What is the operator's sex?

910

1 ☐ Male

2 ☐ Female

b. What was the operator's age on January 1, 2022? .....

911

912

c. Is the operator of Hispanic, Latino or Spanish origin? .....

1 ☐ Yes

3 ☐ No

d. What is the operator's race? Check all that apply.

913

☐ White

914

☐ Black or African American

915

☐ American Indian or Alaska Native

916

☐ Asian

917

☐ Native Hawaiian or Other Pacific Islander

e. Has the operator ever served on active duty in the U.S. Armed Forces, Reserves or National Guard?

918

1 ☐ Never served in the military

2 ☐ Only on active duty for training in the Reserves or National Guard

3 ☐ Now on active duty

4 ☐ On active duty in the past, but not now

919

2. How many years have you been continuously managing a forest, farm or ranch operation? ..... years

3. At which occupation did the operator spend the majority (50 percent or more) of his/her time in 2021?

920

1 ☐ Forestry, farm or ranch work

2 ☐ Work other than forestry, farming or ranching

1212

4. Is the operator retired from forestry, farming or ranching? .....

1 ☐ Yes

3 ☐ No

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**Section 11 - Demographics (continued)**


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5. What is the highest level of formal education the operator has achieved?

922

- 1 ☐ Less than high school diploma
- 2 ☐ High school
- 3 ☐ Some college (include associates degree)
- 4 ☐ Four-year college graduate and beyond

6. In 2021, what was this operation's legal status for tax purposes? Check one answer only.

923

1	<input type="checkbox"/> Family or individual operation - EXCLUDE partnerships and corporations	
2	<input type="checkbox"/> Partnership operation - INCLUDE family partnerships - If option 2 is selected: <div style="text-align: right; margin-right: 20px;">924</div> Is this partnership registered under state law? .....	<div style="display: flex; justify-content: space-between;"> <span>1 <input type="checkbox"/> Yes</span> <span>3 <input type="checkbox"/> No</span> </div>
3	<input type="checkbox"/> Incorporated under state law - If option 3 is selected: <div style="text-align: right; margin-right: 20px;">925</div> Is this a family held corporation? .....	<div style="display: flex; justify-content: space-between;"> <span>1 <input type="checkbox"/> Yes</span> <span>3 <input type="checkbox"/> No</span> </div>
	<div style="text-align: right; margin-right: 20px;">926</div> Are there more than 10 stockholders? .....	<div style="display: flex; justify-content: space-between;"> <span>1 <input type="checkbox"/> Yes</span> <span>3 <input type="checkbox"/> No</span> </div>
4	<input type="checkbox"/> Other - If option 4 is selected: <div style="text-align: right; margin-right: 20px;">927</div> Estate or trust .....	<div style="display: flex; justify-content: space-between;"> <span>1 <input type="checkbox"/> Yes</span> <span>3 <input type="checkbox"/> No</span> </div>
	<div style="text-align: right; margin-right: 20px;">928</div> Grazing association, government facility or American Indian reservation .....	<div style="display: flex; justify-content: space-between;"> <span>1 <input type="checkbox"/> Yes</span> <span>3 <input type="checkbox"/> No</span> </div>
	<div style="display: flex; justify-content: space-between;"> <span>Other, specify      929</span> <span>930</span> </div> type: .....	<div style="display: flex; justify-content: space-between;"> <span>1 <input type="checkbox"/> Yes</span> <span>3 <input type="checkbox"/> No</span> </div>

**Section 12 - Value of Sales**

## Farm Producer Value Codes

Dollar Range	Code	Dollar Range	Code	Dollar Range	Code
0 - \$999 .....	1	\$30,000 - \$39,999 .....	8	\$180,000 - \$249,999 .....	15
\$1,000 - \$2,499 .....	2	\$40,000 - \$49,999 .....	9	\$250,000 - \$499,999 .....	16
\$2,500 - \$4,999 .....	3	\$50,000 - \$59,999 .....	10	\$500,000 - \$999,999 .....	17
\$5,000 - \$9,999 .....	4	\$60,000 - \$69,999 .....	11	\$1,000,000 - \$4,999,999 ....	18
\$10,000 - \$14,999 .....	5	\$70,000 - \$79,999 .....	12	\$5,000,000 and over .....	19
\$15,000 - \$19,999 .....	6	\$80,000 - \$99,999 .....	13		
\$20,000 - \$29,999 .....	7	\$100,000 - \$179,999 .....	14		

1. Which value code represents this operation in terms of the gross value of sales and government agricultural payments? .....
- | 2020 | 2021 |
|------|------|
| 2497 | 2498 |

## INCLUDE

- Sales of all the crops, livestock, poultry, and livestock products (milk, eggs, etc.)
- The value of hay, silage, and other crops harvested, but not sold
- The value of all crops, livestock and poultry produced under contract
- Landlord's share of government payments and crops sold

## EXCLUDE

- Dollars received on land rented to others

2. Which value code represents the net operating income for this operation? .....
- | 2020 | 2021 |
|------|------|
| 2499 | 2500 |
- (Cash income from all farm sourced sources minus production costs and depreciation; if negative, please indicate with a negative sign before the value code.)

3. Which value code represents your total off-farm income? .....
- | 2020 | 2021 |
|------|------|
| 2501 | 2502 |
- (wages, salaries, tips, interest, dividends, other public sources, etc., before taxes, income from operating another farm, income from operating any other business; if negative, please indicate with a negative sign before the value code.)

4. How many people lived in your household? .....
- | 2020 | 2021 |
|------|------|
| 2503 | 2504 |

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**Section 12 - Value of Sales (continued)**


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5. Of the farm or ranch income reported, which of these categories represents the largest portion of the gross income from the operation?

Code

- |   |                             |
|---|-----------------------------|
| 1 – Grains, Oilseeds, Dry Beans, and Dry Peas .....<br>(corn, flaxseed, grain silage and forage, grains and oilseeds, popcorn, rice,<br>small grains, sorghum, soybeans, sunflowers, straw, etc.) | 1 <input type="checkbox"/>  |
| 2 – Tobacco .....   | 2 <input type="checkbox"/>  |
| 3 – Cotton and Cottonseed .....   | 3 <input type="checkbox"/>  |
| 4 – Vegetables, Melons, Potatoes and Sweet Potatoes .....<br>(beets, cabbage, cantaloupes, pumpkins, sweet corn,<br>tomatoes, watermelons, vegetable seeds, etc.)                                 | 4 <input type="checkbox"/>  |
| 5 – Fruit, Tree Nuts and Berries .....<br>(almonds, apples, blueberries, cherries, grapes, hazelnuts, kiwifruit,<br>oranges, pears, pecans, strawberries, walnuts, etc.)                          | 5 <input type="checkbox"/>  |
| 6 – Nursery, Greenhouse, Floriculture and Sod .....<br>(bedding plants, bulbs, cut flowers, flower seeds, foliage plants,<br>mushrooms, nursery potted plants, shrubbery, sod, etc.)              | 6 <input type="checkbox"/>  |
| 7 – Cut Christmas Trees and Short Rotation Woody Crops .....  | 7 <input type="checkbox"/>  |
| 8 – Other Crops and Hay, CRP and Pasture .....<br>(grass seed, hay and grass silage, hops, maple syrup, mint,<br>peanuts, sugarcane, sugarbeets, CRP, etc.)                                       | 8 <input type="checkbox"/>  |
| 9 – Hogs and Pigs .....   | 9 <input type="checkbox"/>  |
| 10 – Milk and Other Dairy Products from Cows .....  | 10 <input type="checkbox"/> |
| 11 – Cattle and Calves .....<br>(beef and dairy cattle for breeding stock, fed cattle, beef and dairy cull animals,<br>stockers and feeders, veal calves, etc.)                                   | 11 <input type="checkbox"/> |
| 12 – Sheep, Goats, and their Products .....<br>(wool, mohair, milk and cheese)  | 12 <input type="checkbox"/> |
| 13 – Horses, Ponies, and Mules .....<br>(burros and donkeys)  | 13 <input type="checkbox"/> |
| 14 – Poultry and Eggs .....<br>(broilers, chickens, turkeys, ducks, eggs, emus, geese, hatchlings,<br>ostriches, pigeons, pheasants, quail, poultry products, etc.)                               | 14 <input type="checkbox"/> |
| 15 – Aquaculture .....<br>(catfish, trout, ornamental and other fish, mollusks, crustaceans, etc.)  | 15 <input type="checkbox"/> |
| 16 – Other Animals and Other Animal Products .....<br>(honey bees, honey, rabbits, fur-bearing animals, semen, manure,<br>other animal specialties, etc.)   | 16 <input type="checkbox"/> |

Farm Type  
Code

862

### Section 13 - Conclusion

1. Has this operation (name on label) been sold, or turned over to someone else?

1 ☐ Yes - Identify the new operator(s) below      3 ☐ No - Go to Item 2

Operation Name: _____		
Operator Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: (____) _____		<input type="checkbox"/> Check if cell phone

a. Did this person operate land individually on June 1, 2021? ..... 1 ☐ Yes      ☐ No

1511

2. Comments related to the information you reported:

#### Contact Information:

Operation Email:		Operation Phone:	
9937		9936	
( ) - _____		check if cell phone <input type="checkbox"/>	

Respondent Name:		Respondent Phone (if different from above)			
9912		9911		check if cell phone <input type="checkbox"/>	9910    MM    DD    YY
( ) - _____		Date:    _ _    _ _    _ _			

This completes the survey. Thank you for your help.

#### OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	R. Unit	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Spouse 3-Acct/Bkpr 4-Partner 9-Other	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9921	9985	9989			
										_____ - _____ - _____			
										Optional Use			
										9907	9908	9906	9916
S/E Name													

# AGRICULTURAL SURVEY - SEPTEMBER 1, 2022

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OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 126  
Survey ID: 2349  
Version 20



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Department of  
Agriculture**



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Please make corrections to name, address, and ZIP Code, if necessary.

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Office Use Only	FIPS	POID	Tract	Subtr.

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. On September 1, did you have any whole grains, oilseeds, or hay stored on this operation?.. ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains, or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. On September 1, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions in Item 2 (2a - 2f)?..... ☐ Yes - Continue ☐ No - Go to Section 4

4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

<b>For Office Use Only</b>	R. Unit
	9921
	SUB
	9941
	JUNE 1
	9930

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

<b>For Office Use Only</b>
<b>Stratum</b>
9922
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9923
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9927
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9928
<b>Ind. Op.</b>
9924

**Section 1 - Acres Operated****A**

Please report total acres operated under this land arrangement.

1. On September 1, how many acres did this operation:

a. Own?.....

b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, Bureau of Land Management  
(BLM) and Forest Service land.).....

c. Rent to others?.....

2. Calculate item 1a + 1b - 1c. Then the total acres operated on September 1 was:.....

a. Does this include the farmstead, all cropland, woodland, pastureland,  
wasteland, and government program land?☐ Yes - Continue☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (item 2).

3 Of the total acres operated, how many acres are considered cropland, including land in hay,  
summer fallow, cropland idle, cropland used for pasture and cropland in government programs? .....

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres In Principal County
0056

Acres
901
902
905
900

802
-----

OFFICE USE
0060
0055



## Section 2 - Crops

For the following crops, please report acres planted for all purposes, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

## 1. Winter Wheat

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR

- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

## Hard Red Winter Wheat

- f. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard Red Winter Wheat?.....
- g. Of the total production of Winter Wheat (item 1c), how much was Hard Red Winter Wheat for grain or seed?.....  
OR
- h. Yield per acre of Hard Red Winter Wheat harvested for grain and seed?.....

## Soft Red Winter Wheat

- i. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft Red Winter Wheat?.....
- j. Of the total production of Winter Wheat (item 1c), how much was Soft Red Winter Wheat for grain or seed?.....  
OR
- k. Yield per acre of Soft Red Winter Wheat harvested for grain and seed?.....

## Hard White Winter Wheat

- l. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard White Winter Wheat?.....
- m. Of the total production of Winter Wheat (item 1c), how much was Hard White Winter Wheat for grain or seed?.....  
OR
- n. Yield per acre of Hard White Winter Wheat harvested for grain and seed?.....

## Soft White Winter Wheat

- o. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft White Winter Wheat?.....
- p. Of the total production of Winter Wheat (item 1c), how much was Soft White Winter Wheat for grain or seed?.....  
OR
- q. Yield per acre of Soft White Winter Wheat harvested for grain and seed?.....

	Winter Wheat
Ac	540
Ac	541
Bu	482
Bu/Ac	151
Ac	487
	Hard Red Winter Wheat
Ac	346
Bu	347
Bu/Ac	348
	Soft Red Winter Wheat
Ac	349
Bu	350
Bu/Ac	351
	Hard White Winter Wheat
Ac	2346
Bu	2347
Bu/Ac	2348
	Soft White Winter Wheat
Ac	2349
Bu	2350
Bu/Ac	2351

## Section 2 - Crops (Continued)

## 2. Barley

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Barley for all other purposes? (INCLUDE hay, silage, pasture, cover crop on diverted acres, abandoned, or any other purpose than grain or seed.).....

Barley	
Ac	535
Ac	536
Bu	512
Bu/Ac	163
Ac	516

## 3. Oats

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Oats	
Ac	533
Ac	534
Bu	596
Bu/Ac	153
Ac	599

## 4. Rye (EXCLUDE ryegrass)

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Rye for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Rye	
Ac	547
Ac	548
Bu	669
Bu/Ac	858
Ac	694

## 5. Canola

- a. Acres planted?.....
- b. Acres harvested and to be harvested?.....
- c. Total production?.....  
OR
- d. Yield per acre?.....

Canola	
Acs	684
Ac	177
Lbs	675
Lbs/Ac	736

## For Office Use Only: Completion Code for Crops in This Section

- 1 – Incomplete, has crops listed above  
2 – Incomplete, presence of crops listed above is unknown  
3 – Valid Zero

138

## Section 3 - Storage Capacity and Crops Stored On This Operation

20

1. On September 1, what was the Storage Capacity of all structures normally used to store Whole Grains or Oilseeds on the total acres operated?	No Storage Capacity	Bushels	Capacity
	<input type="checkbox"/>		808

2. Please account for whole grains and oilseeds stored September 1 on this operation, whether for feed, seed, or sale. They may have belonged to you or someone else, or been stored under a government program (loan, farmer owned reserve, or CCC).

## Old Crop Whole Grains and Oilseeds Stored

3. On September 1, were any of the following crops on hand or stored on this operation from 2021 and earlier crop years:	No	Yes	Amount on Hand September 1 from 2021 and Earlier Crop Years
a. Old Crop Whole Grain Corn?.....	<input type="checkbox"/>	<input type="checkbox"/>	121
b. Old Crop Soybeans?.....	<input type="checkbox"/>	<input type="checkbox"/>	125
c. Old Crop Sorghum Grain (Milo)?.....	<input type="checkbox"/>	<input type="checkbox"/>	122
d. Old Crop Sunflower - Oil Varieties? (Black seed for crushing, birdseed, or other uses.)....	<input type="checkbox"/>	<input type="checkbox"/>	131
e. Old Crop Sunflower - Non-Oil Varieties? (Striped Seed. INCLUDE Con-oil varieties.).....	<input type="checkbox"/>	<input type="checkbox"/>	132
4. Were any of the stocks on hand reported in Item 3 (above), new crop from the 2022 harvest?			
<div> <input type="checkbox"/> 1 Yes - Correct Item 3 to EXCLUDE all 2022 crop stocks         <input type="checkbox"/> 3 No - Continue       </div>			

## Whole Grains Stored

5. On September 1, were any of the following crops on hand or stored on this operation from any crop year, including 2022 and earlier crop years:	No	Yes	Amount on Hand September 1 from 2022 and Earlier Crop Years
a. Wheat, INCLUDE all types (Winter, Durum, and Spring)?.....	<input type="checkbox"/>	<input type="checkbox"/>	126
b. Barley?.....	<input type="checkbox"/>	<input type="checkbox"/>	124
c. Oats?.....	<input type="checkbox"/>	<input type="checkbox"/>	123

## For Office Use Only: Completion Code for Stocks

1 – Incomplete, has stocks  
 2 – Incomplete, stocks presence unknown  
 3 – Valid Zero

141

## Section 4 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? Include growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ Don't Know      ☐ No

(Regardless of answer to above, write a note to explain the situation, then go to Section 5.)

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2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

check if  
cell phone

☐

4. Was the (item 3) new operation in business before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

5. Is the (item 3) operation managed?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

6. Were any of the individuals associated with the (item 3) new operation operating land individually before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Go to Section 5

## Section 5 - Conclusion

20

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue      3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue      3 ☐ No - Continue

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address.

1095

## Section 6 - Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if cell phone

(\_\_\_\_) \_\_\_\_\_ ☐

This completes the survey. Thank you for your help.

Respondent Name:

Respondent Phone: (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
_____	(____) _____	<input type="checkbox"/>	Date: ____	____	____	____

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R -- Est 6-Inac --Est 7-Off Hold --Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989			
									Optional Use			
									9907	9908	9906	9916

S/E Name:

# AGRICULTURAL SURVEY - SEPTEMBER 1, 2022

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List of Surveys](#)

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 126  
Survey ID: 2349  
Version 31



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

**USDA/NASS - Nebraska**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0213. The time required to complete this information collection is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	___	___	___	___

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. On September 1, did you have any whole grains, pulse crops, oilseeds, or hay stored on this operation?..... ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. On September 1, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions in Item 2 (2a - 2f)?..... ☐ Yes - Continue ☐ No - Go to Section 4

4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

<b>For Office Use Only</b>	R. Unit
	9921
	SUB
	9941
	JUNE 1
	9930

Number

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3. (Verify partners' names and make necessary corrections if names have already been entered.)

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

<b>For Office Use Only</b>
<b>Stratum</b>
9922
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9923
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9927
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9928
<b>Ind. Op.</b>
9924

**Section 1 - Acres Operated****A**

Please report total acres operated under this land arrangement.

1. On September 1, how many acres did this operation:

a. Own?.....

b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, Bureau of Land Management  
(BLM) and Forest Service land.).....

c. Rent to others?.....

2. Calculate item 1a + 1b - 1c. Then the total acres operated on September 1 was:.....

a. Does this include the farmstead, all cropland, woodland, pastureland,  
wasteland, and government program land?☐ Yes - Continue☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (item 2).

3 Of the total acres operated, how many acres are considered cropland, including land in hay,  
summer fallow, cropland idle, cropland used for pasture and cropland in government programs? .....

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres In Principal County
0056

Acres
901
902
905
900

802
-----

OFFICE USE
0060
0055



## Section 2 - Crops

For the following small grains crops, please report acres planted for all purposes, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

## 1. Winter Wheat

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

## Hard Red Winter Wheat

- f. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard Red Winter Wheat?.....
- g. Of the total production of Winter Wheat (item 1c), how much was Hard Red Winter Wheat for grain or seed?.....  
OR
- h. Yield per acre of Hard Red Winter Wheat harvested for grain and seed?.....

## Soft Red Winter Wheat

- i. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft Red Winter Wheat?.....
- j. Of the total production of Winter Wheat (item 1c), how much was Soft Red Winter Wheat for grain or seed?.....  
OR
- k. Yield per acre of Soft Red Winter Wheat harvested for grain and seed?.....

## Hard White Winter Wheat

- l. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard White Winter Wheat?.....
- m. Of the total production of Winter Wheat (item 1c), how much was Hard White Winter Wheat for grain or seed?.....  
OR
- n. Yield per acre of Hard White Winter Wheat harvested for grain and seed?.....

## Soft White Winter Wheat

- o. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft White Winter Wheat?.....
- p. Of the total production of Winter Wheat (item 1c), how much was Soft White Winter Wheat for grain or seed?.....  
OR
- q. Yield per acre of Soft White Winter Wheat harvested for grain and seed?.....

Winter Wheat	
Ac	540
Ac	541
Bu	482
Bu/Ac	151
Ac	487
Hard Red Winter Wheat	
Ac	346
Bu	347
Bu/Ac	348
Soft Red Winter Wheat	
Ac	349
Bu	350
Bu/Ac	351
Hard White Winter Wheat	
Ac	2346
Bu	2347
Bu/Ac	2348
Soft White Winter Wheat	
Ac	2349
Bu	2350
Bu/Ac	2351

## Section 2 - Crops (Continued)

31

## 2. Oats

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Oats	
Ac	533
Ac	534
Bu	596
Bu/Ac	153
Ac	599

## 3. Rye (EXCLUDE ryegrass)

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Rye for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Rye	
Ac	547
Ac	548
Bu	669
Bu/Ac	858
Ac	694

## For Office Use Only: Completion Code for Crops in This Section

- 1 – Incomplete, has crops listed above  
 2 – Incomplete, presence of crops listed above is unknown  
 3 – Valid Zero

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## Section 3 - Storage Capacity and Crops Stored On This Operation

31

1. On September 1, what was the Storage Capacity of all structures normally used to store Whole Grains or Oilseeds on the total acres operated?	No Storage Capacity <input type="checkbox"/>	Bushels	Capacity
			808

2. Please account for whole grains and oilseeds stored September 1 on this operation, whether for feed, seed, or sale. They may have belonged to you or someone else, or been stored under a government program (loan, farmer owned reserve, or CCC).

## Old Crop Whole Grains and Oilseeds Stored

3. On September 1, were any of the following crops on hand or stored on this operation from 2021 and earlier crop years:	No	Yes	Amount on Hand September 1 from 2021 and Earlier Crop Years
a. Old Crop Whole Grain Corn?.....	<input type="checkbox"/>	<input type="checkbox"/>	121
b. Old Crop Soybeans?.....	<input type="checkbox"/>	<input type="checkbox"/>	125
c. Old Crop Sorghum Grain (Milo)?.....	<input type="checkbox"/>	<input type="checkbox"/>	122
d. Old Crop Sunflower - Oil Varieties? (Black seed for crushing, birdseed, or other uses.).....	<input type="checkbox"/>	<input type="checkbox"/>	131
e. Old Crop Sunflower - Non-Oil Varieties? (Striped Seed. INCLUDE Con-oil varieties.).....	<input type="checkbox"/>	<input type="checkbox"/>	132
4. Were any of the stocks on hand reported in Item 3 (above), new crop from the 2022 harvest?			
1 <input type="checkbox"/> Yes - Correct Item 3 to EXCLUDE all 2022 crop stocks		3 <input type="checkbox"/> No - Continue	

## Whole Grains Stored

5. On September 1, were any of the following crops on hand or stored on this operation from any crop year, including 2022 and earlier crop years:	No	Yes	Amount on Hand September 1 from 2022 and Earlier Crop Years
a. Wheat, INCLUDE all types (Winter, Durum, and Spring)?.....	<input type="checkbox"/>	<input type="checkbox"/>	126
b. Oats?.....	<input type="checkbox"/>	<input type="checkbox"/>	123

## For Office Use Only: Completion Code for Stocks

1 - Incomplete, has stocks  
2 - Incomplete, stocks presence unknown  
3 - Valid Zero

141

## Section 4 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? Include growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ Don't Know      ☐ No

(Regardless of answer to above, write a note to explain the situation, then go to Section 5.)

---



---



---

2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

check if  
cell phone

☐

4. Was the (item 3) new operation in business before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

5. Is the (item 3) operation managed?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

6. Were any of the individuals associated with the (item 3) new operation operating land individually before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Go to Section 5

## Section 5 - Conclusion

31

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue      3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue      3 ☐ No - Continue

Operation Name: _____
Address: _____
City: _____ State _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address.

1095

## Section 6 - Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if cell phone

(\_\_\_\_) \_\_\_\_\_

☐

This completes the survey. Thank you for your help.

Respondent Name:

Respondent Phone: (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
_____	(____) _____	<input type="checkbox"/>	Date: ____	____	____	____

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R -- Est 6-Inac --Est 7-Off Hold --Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989			
									Optional Use			
									9907	9908	9906	9916

S/E Name:

# AGRICULTURAL SURVEY - SEPTEMBER 1, 2022

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List of Surveys](#)

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 126  
Survey ID: 2349  
Version 46



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

**USDA/NASS - South Dakota**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: [NASSRFONPR@usda.gov](mailto:NASSRFONPR@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0213. The time required to complete this information collection is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	___	___	___	___

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. On September 1, did you have any whole grains, pulse crops, oilseeds, or hay stored on this operation?..... ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. On September 1, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions in Item 2 (2a - 2f)?..... ☐ Yes - Continue ☐ No - Go to Section 4

4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

<b>For Office Use Only</b>	R. Unit
	9921
	SUB
	9941
	JUNE 1
	9930

Number

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3. (Verify partners' names and make necessary corrections if names have already been entered.)

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

<b>For Office Use Only</b>
<b>Stratum</b>
9922
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9923
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9927
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9928
<b>Ind. Op.</b>
9924

**Section 1 - Acres Operated****A**

Please report total acres operated under this land arrangement.

1. On September 1, how many acres did this operation:

a. Own?.....

b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, Bureau of Land Management  
(BLM) and Forest Service land.).....

c. Rent to others?.....

2. Calculate item 1a + 1b - 1c. Then the total acres operated on September 1 was:.....

a. Does this include the farmstead, all cropland, woodland, pastureland,  
wasteland, and government program land?☐ Yes - Continue☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (item 2).

3 Of the total acres operated, how many acres are considered cropland, including land in hay,  
summer fallow, cropland idle, cropland used for pasture and cropland in government programs? .....

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres In Principal County
0056

Acres
901
902
905
900

802
-----

OFFICE USE
0060
0055



## Section 2 - Crops

For the following small grains crops, please report acres planted for all purposes, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

### 1. Winter Wheat

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

#### Hard Red Winter Wheat

- f. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard Red Winter Wheat?.....
- g. Of the total production of Winter Wheat (item 1c), how much was Hard Red Winter Wheat for grain or seed?.....  
OR
- h. Yield per acre of Hard Red Winter Wheat harvested for grain and seed?.....

#### Soft Red Winter Wheat

- i. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft Red Winter Wheat?.....
- j. Of the total production of Winter Wheat (item 1c), how much was Soft Red Winter Wheat for grain or seed?.....  
OR
- k. Yield per acre of Soft Red Winter Wheat harvested for grain and seed?.....

#### Hard White Winter Wheat

- l. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard White Winter Wheat?.....
- m. Of the total production of Winter Wheat (item 1c), how much was Hard White Winter Wheat for grain or seed?.....  
OR
- n. Yield per acre of Hard White Winter Wheat harvested for grain and seed?.....

#### Soft White Winter Wheat

- o. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft White Winter Wheat?.....
- p. Of the total production of Winter Wheat (item 1c), how much was Soft White Winter Wheat for grain or seed?.....  
OR
- q. Yield per acre of Soft White Winter Wheat harvested for grain and seed?.....

	Winter Wheat
Ac	540
Ac	541
Bu	482
Bu/Ac	151
Ac	487
	Hard Red Winter Wheat
Ac	346
Bu	347
Bu/Ac	348
	Soft Red Winter Wheat
Ac	349
Bu	350
Bu/Ac	351
	Hard White Winter Wheat
Ac	2346
Bu	2347
Bu/Ac	2348
	Soft White Winter Wheat
Ac	2349
Bu	2350
Bu/Ac	2351

## 2. Other Spring Wheat

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Spring Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

## Hard Red Spring Wheat

- f. Of the total acres of Spring Wheat harvested and to be harvested for grain or seed (item 2b), how many acres were Hard Red Spring Wheat?.....
- g. Of the total production of Spring Wheat (item 2c), how much was Hard Red Spring Wheat for grain or seed?.....  
OR
- h. Yield per acre of Hard Red Spring Wheat harvested for grain and seed?.....

## Hard White Spring Wheat

- i. Of the total acres of Spring Wheat harvested and to be harvested for grain or seed (item 2b), how many acres were Hard White Spring Wheat?.....
- j. Of the total production of Spring Wheat (item 2c), how much was Hard White Spring Wheat for grain or seed?.....  
OR
- k. Yield per acre of Hard White Spring Wheat harvested for grain and seed?.....

## Soft White Spring Wheat

- l. Of the total acres of Spring Wheat harvested and to be harvested for grain or seed (item 2b), how many acres were Soft White Spring Wheat?.....
- m. Of the total production of Spring Wheat (item 2c), how much was Soft White Spring Wheat for grain or seed?.....  
OR
- n. Yield per acre of Soft White Spring Wheat harvested for grain and seed?.....

Other Spring Wheat	
Ac	550
Ac	768
Bu	773
Bu/Ac	452
Ac	777
Hard Red Spring Wheat	
Ac	375
Bu	376
Bu/Ac	377
Hard White Spring Wheat	
Ac	2375
Bu	2376
Bu/Ac	2377
Soft White Spring Wheat	
Ac	2378
Bu	2379
Bu/Ac	2380

## Section 2 - Crops (Continued)

46

## 3. Barley

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Barley for all other purposes? (INCLUDE hay, silage, pasture, cover crop on diverted acres, abandoned, or any other purpose than grain or seed.).....

Barley	
Ac	535
Ac	536
Bu	512
Bu/Ac	163
Ac	516

## 4. Oats

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Oats	
Ac	533
Ac	534
Bu	596
Bu/Ac	153
Ac	599

## 5. Rye (EXCLUDE ryegrass)

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Rye for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Rye	
Ac	547
Ac	548
Bu	669
Bu/Ac	858
Ac	694

## For Office Use Only: Completion Code for Crops in This Section

1 – Incomplete, has crops listed above  
 2 – Incomplete, presence of crops listed above is unknown  
 3 – Valid Zero

138

## Section 3 - Storage Capacity and Crops Stored On This Operation

46

		Capacity
1. On September 1, what was the Storage Capacity of all structures normally used to store Whole Grains or Oilseeds on the total acres operated?	No Storage Capacity <input type="checkbox"/> Bushels	808

2. Please account for whole grains and oilseeds stored September 1 on this operation, whether for feed, seed, or sale. They may have belonged to you or someone else, or been stored under a government program (loan, farmer owned reserve, or CCC).

## Old Crop Whole Grains and Oilseeds Stored

	No	Yes	Amount on Hand September 1 from 2021 and Earlier Crop Years
3. On September 1, were any of the following crops on hand or stored on this operation from 2021 and earlier crop years:			
a. Old Crop Whole Grain Corn?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	121
b. Old Crop Soybeans?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	125
c. Old Crop Sorghum Grain (Milo)?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	122
d. Old Crop Sunflower - Oil Varieties? (Black seed for crushing, birdseed, or other uses.)....	<input type="checkbox"/>	<input type="checkbox"/> How many pounds?.....	131
e. Old Crop Sunflower - Non-Oil Varieties? (Striped Seed. INCLUDE Con-oil varieties.).....	<input type="checkbox"/>	<input type="checkbox"/> How many pounds?.....	132
f. Old Crop Safflower?.....	<input type="checkbox"/>	<input type="checkbox"/> How many pounds?.....	648

4. Were any of the stocks on hand reported in Item 3 (above), new crop from the 2022 harvest?

<sub>1</sub> ☐ Yes - Correct Item 3 to EXCLUDE all 2022 crop stocks

<sub>3</sub> ☐ No - Continue

## Whole Grains Stored

	No	Yes	Amount on Hand September 1 from 2022 and Earlier Crop Years
5. On September 1, were any of the following crops on hand or stored on this operation from any crop year, including 2022 and earlier crop years:			
a. Winter Wheat?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	129
b. Other Spring Wheat?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	128
c. Barley?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	124
d. Oats?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	123

## For Office Use Only: Completion Code for Stocks

1 - Incomplete, has stocks	141
2 - Incomplete, stocks presence unknown	
3 - Valid Zero	

## Section 3 - Unharvested Small Grains

46

6. On September 1, did you have any small grains still in the field that you intend to harvest for either grain or seed?

1 ☐ Yes - Continue

3 ☐ No - Go to Section 5 on back page

7. Please report acres and expected yield for small grains remaining to be harvested for either grain or seed.

Acres Remaining to be Harvested for Grain or Seed	Expected Yield per acre
Acres	Bu/Ac
445	446
457	458
449	450
592	593

a. Winter Wheat?.....

b. Other Spring Wheat?.....

c. Barley?.....

d. Oats?.....

8. Did you include the unharvested production of small grains in the (item 4) stocks on hand?

Code

1 ☐ Yes - Enter Code 1

3 ☐ No - Enter Code 3

460

**Skip to next page**

**OR**

**Space for Notes and Comments**

**Skip to next page**

**OR**

**Space for Notes and Comments**

## Section 4 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? Include growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ Don't Know      ☐ No

(Regardless of answer to above, write a note to explain the situation, then go to Section 5.)

---



---



---

2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

check if  
cell phone

☐

4. Was the (item 3) new operation in business before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

5. Is the (item 3) operation managed?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

6. Were any of the individuals associated with the (item 3) new operation operating land individually before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Go to Section 5



## Section 5 - Conclusion

46

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue      3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue      3 ☐ No - Continue

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address.

1095

## Section 6 - Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if cell phone

(\_\_\_\_) \_\_\_\_\_ ☐

This completes the survey. Thank you for your help.

Respondent Name:

Respondent Phone: (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
_____	(____) _____	<input type="checkbox"/>	Date: ____	____	____	____

Response	Respondent	Mode	Enum.	Eval.	Change	Office Use for POID
1-Comp 2-R 3-Inac 4-Office Hold 5-R -- Est 6-Inac --Est 7-Off Hold --Est	9901 1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902 1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985
						9989
						Optional Use
						9907 9908 9906 9916
S/E Name: _____						

# AGRICULTURAL SURVEY - SEPTEMBER 1, 2022

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OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 126  
Survey ID: 2349  
Version 38



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

## **USDA/NASS - North Dakota**

Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: [NASSRFONPR@usda.gov](mailto:NASSRFONPR@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0213. The time required to complete this information collection is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	___	___	___	___

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. On September 1, did you have any whole grains, pulse crops, oilseeds, or hay stored on this operation?..... ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. On September 1, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions in Item 2 (2a - 2f)?..... ☐ Yes - Continue ☐ No - Go to Section 4

4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

<b>For Office Use Only</b>	R. Unit
	9921
	SUB
	9941
	JUNE 1
	9930

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on June 1, 2022?

☐ Yes ☐ No

<b>For Office Use Only</b>
<b>Stratum</b>
9922
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9923
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9927
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9928
<b>Ind. Op.</b>
9924

**Section 1 - Acres Operated****A**

Please report total acres operated under this land arrangement.

1. On September 1, how many acres did this operation:

a. Own?.....

b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, Bureau of Land Management  
(BLM) and Forest Service land.).....

c. Rent to others?.....

2. Calculate item 1a + 1b - 1c. Then the total acres operated on September 1 was:.....

a. Does this include the farmstead, all cropland, woodland, pastureland,  
wasteland, and government program land?☐ Yes - Continue☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (item 2).

3 Of the total acres operated, how many acres are considered cropland, including land in hay,  
summer fallow, cropland idle, cropland used for pasture and cropland in government programs? .....

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres In Principal County
0056

Acres
901
902
905
900

802
-----

OFFICE USE
0060
0055

## Section 2 - Crops

For the following small grains crops, please report acres planted for all purposes, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

## 1. Winter Wheat

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

## Hard Red Winter Wheat

- f. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard Red Winter Wheat?.....
- g. Of the total production of Winter Wheat (item 1c), how much was Hard Red Winter Wheat for grain or seed?.....  
OR
- h. Yield per acre of Hard Red Winter Wheat harvested for grain and seed?.....

## Soft Red Winter Wheat

- i. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft Red Winter Wheat?.....
- j. Of the total production of Winter Wheat (item 1c), how much was Soft Red Winter Wheat for grain or seed?.....  
OR
- k. Yield per acre of Soft Red Winter Wheat harvested for grain and seed?.....

## Hard White Winter Wheat

- l. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Hard White Winter Wheat?.....
- m. Of the total production of Winter Wheat (item 1c), how much was Hard White Winter Wheat for grain or seed?.....  
OR
- n. Yield per acre of Hard White Winter Wheat harvested for grain and seed?.....

## Soft White Winter Wheat

- o. Of the total acres of Winter Wheat harvested and to be harvested for grain or seed (item 1b), how many acres were Soft White Winter Wheat?.....
- p. Of the total production of Winter Wheat (item 1c), how much was Soft White Winter Wheat for grain or seed?.....  
OR
- q. Yield per acre of Soft White Winter Wheat harvested for grain and seed?.....

	Winter Wheat
Ac	540
Ac	541
Bu	482
Bu/Ac	151
Ac	487
	Hard Red Winter Wheat
Ac	346
Bu	347
Bu/Ac	348
	Soft Red Winter Wheat
Ac	349
Bu	350
Bu/Ac	351
	Hard White Winter Wheat
Ac	2346
Bu	2347
Bu/Ac	2348
	Soft White Winter Wheat
Ac	2349
Bu	2350
Bu/Ac	2351

## Section 2 - Crops (Continued)

## 2. Durum

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Durum for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

	Durum
Ac	553
Ac	554
Bu	753
Bu/Ac	451
Ac	757

## 3. Other Spring Wheat

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Spring Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

	Other Spring Wheat
Ac	550
Ac	768
Bu	773
Bu/Ac	452
Ac	777

## Hard Red Spring Wheat

- f. Of the total acres of Spring Wheat harvested and to be harvested for grain or seed (item 3b), how many acres were Hard Red Spring Wheat?.....
- g. Of the total production of Spring Wheat (item 3c), how much was Hard Red Spring Wheat for grain or seed?.....  
OR
- h. Yield per acre of Hard Red Spring Wheat harvested for grain and seed?.....

	Hard Red Spring Wheat
Ac	375
Bu	376
Bu/Ac	377

## Hard White Spring Wheat

- i. Of the total acres of Spring Wheat harvested and to be harvested for grain or seed (item 3b), how many acres were Hard White Spring Wheat?.....
- j. Of the total production of Spring Wheat (item 3c), how much was Hard White Spring Wheat for grain or seed?.....  
OR
- k. Yield per acre of Hard White Spring Wheat harvested for grain and seed?.....

	Hard White Spring Wheat
Ac	2375
Bu	2376
Bu/Ac	2377

## Soft White Spring Wheat

- l. Of the total acres of Spring Wheat harvested and to be harvested for grain or seed (item 3b), how many acres were Soft White Spring Wheat?.....
- m. Of the total production of Spring Wheat (item 3c), how much was Soft White Spring Wheat for grain or seed?.....  
OR
- n. Yield per acre of Soft White Spring Wheat harvested for grain and seed?.....

	Soft White Spring Wheat
Ac	2378
Bu	2379
Bu/Ac	2380

## Section 2 - Crops (Continued)

38

## 4. Barley

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Barley for all other purposes? (INCLUDE hay, silage, pasture, cover crop on diverted acres, abandoned, or any other purpose than grain or seed.).....

Barley	
Ac	535
Ac	536
Bu	512
Bu/Ac	163
Ac	516

## 5. Oats

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Oats	
Ac	533
Ac	534
Bu	596
Bu/Ac	153
Ac	599

## 6. Rye (EXCLUDE ryegrass)

- a. Acres planted for all purposes? (Including acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned.).....
- b. Acres harvested and to be harvested for either grain or seed?.....
- c. Total grain and seed production? (INCLUDE landlord's share.).....  
OR
- d. Yield per acre of grain and seed harvested?.....
- e. Acres of Rye for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....

Rye	
Ac	547
Ac	548
Bu	669
Bu/Ac	858
Ac	694

## For Office Use Only: Completion Code for Crops in This Section

1 – Incomplete, has crops listed above  
 2 – Incomplete, presence of crops listed above is unknown  
 3 – Valid Zero

138

## Section 3 - Storage Capacity and Crops Stored On This Operation

38

		Capacity
1. On September 1, what was the Storage Capacity of all structures normally used to store Whole Grains or Oilseeds on the total acres operated?	No Storage Capacity <input type="checkbox"/> Bushels	808

2. Please account for whole grains and oilseeds stored September 1 on this operation, whether for feed, seed, or sale. They may have belonged to you or someone else, or been stored under a government program (loan, farmer owned reserve, or CCC).

## Old Crop Whole Grains and Oilseeds Stored

	No	Yes	Amount on Hand September 1 from 2021 and Earlier Crop Years
3. On September 1, were any of the following crops on hand or stored on this operation from 2021 and earlier crop years:			
a. Old Crop Whole Grain Corn?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	121
b. Old Crop Soybeans?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	125
c. Old Crop Sunflower - Oil Varieties? (Black seed for crushing, birdseed, or other uses.)....	<input type="checkbox"/>	<input type="checkbox"/> How many pounds?.....	131
d. Old Crop Sunflower - Non-Oil Varieties? (Striped Seed. INCLUDE Con-oil varieties.).....	<input type="checkbox"/>	<input type="checkbox"/> How many pounds?.....	132
e. Old Crop Mustard Seed?.....	<input type="checkbox"/>	<input type="checkbox"/> How many pounds?.....	649

4. Were any of the stocks on hand reported in Item 3 (above), new crop from the 2022 harvest?

1 ☐ Yes - Correct Item 3 to EXCLUDE all 2022 crop stocks

3 ☐ No - Continue

## Whole Grains Stored

	No	Yes	Amount on Hand September 1 from 2022 and Earlier Crop Years
5. On September 1, were any of the following crops on hand or stored on this operation from any crop year, including 2022 and earlier crop years:			
a. Winter Wheat?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	129
b. Durum Wheat?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	127
c. Other Spring Wheat?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	128
d. Barley?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	124
e. Oats?.....	<input type="checkbox"/>	<input type="checkbox"/> How many bushels?.....	123

## For Office Use Only: Completion Code for Stocks

1 - Incomplete, has stocks  
2 - Incomplete, stocks presence unknown  
3 - Valid Zero

141



## Section 3 - Unharvested Small Grains

38

6. On September 1, did you have any small grains still in the field that you intend to harvest for either grain or seed?

1 ☐ Yes - Continue

3 ☐ No - Go to Section 5 on back page

7. Please report acres and expected yield for small grains remaining to be harvested for either grain or seed.

Acres Remaining to be Harvested for Grain or Seed	Expected Yield per acre
Acres	Bu/Ac
445	446
454	455
457	458
449	450
592	593

a. Winter Wheat?.....

b. Durum Wheat?.....

c. Other Spring Wheat?.....

d. Barley?.....

e. Oats?.....

8. Did you include the unharvested production of small grains in the (item 4) stocks on hand?

Code

1 ☐ Yes - Enter Code 1

3 ☐ No - Enter Code 3

460

**Skip to next page**

**OR**

**Space for Notes and Comments**

**Skip to next page**

**OR**

**Space for Notes and Comments**

## Section 4 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? Include growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ Don't Know      ☐ No

(Regardless of answer to above, write a note to explain the situation, then go to Section 5.)

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2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

check if  
cell phone

☐

4. Was the (item 3) new operation in business before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

5. Is the (item 3) operation managed?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Continue

6. Were any of the individuals associated with the (item 3) new operation operating land individually before June 1, 2022?

<sub>1</sub> ☐ Yes - Go to Section 5      <sub>3</sub> ☐ No - Go to Section 5

## Section 5 - Conclusion

38

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue      3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue      3 ☐ No - Continue

Operation Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address.

1095

## Section 6 - Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if cell phone

(\_\_\_\_) \_\_\_\_\_

☐

This completes the survey. Thank you for your help.

Respondent Name:

Respondent Phone: (if different from above)

9912

9911

check if cell phone

9910 MM DD YY

(\_\_\_\_) \_\_\_\_\_

☐

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R -- Est 6-Inac --Est 7-Off Hold --Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989 ____ - ____ - ____			
									Optional Use			
									9907	9908	9906	9916
S/E Name:												

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AG YIELD SURVEY - SEPTEMBER 2022

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 128  
SurveyId:3652 Version 20



USDA/NASS - Kansas  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0213. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — — — — — — —	— —	— —

If you no longer operate this farm or ranch go to Section 2.

SECTION 1 - CROP ACREAGE and YIELD

Please report the acres planted, acres for harvest and yield per acre you expect to harvest from the total acres you operate for the following crops. If harvest is not complete, make your best estimate of the final yield for all acres harvested and to be harvested. EXCLUDE information for land rented to others.

1. CORN

TOTAL CROP

a. Harvested and to be harvested (grain and seed only).....

Acres

531

b. Expected yield for grain and seed.....

Bu. per Acre

154

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

950

2. SORGHUM

TOTAL CROP

a. Harvested and to be harvested (grain and seed only).....

Acres

571

b. Expected yield for grain and seed.....

Bu. per Acre

747

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

951

3. SOYBEANS

TOTAL CROP

a. Harvested and to be harvested for beans or seed.....

Acres

599

b. Expected yield for beans or seed.....

Bu. per Acre

157

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

955

CONTINUE ON BACK

4. UPLAND COTTON

TOTAL CROP

a. Harvested and to be harvested.....	Acres	668
b. Expected yield (lint).....	Lbs. per Acre	576
c. Has harvest been completed?..... 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No		957

SECTION 2 - CONCLUSION

1. If you no longer operate this farm or ranch, please provide the name and address of the new operator.

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ Check if cell phone.

2. **SURVEY RESULTS:** To review the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone
	( )	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
	( )	<input type="checkbox"/>	Date:			

This completes the survey. Thank you for your help.

OFFICE USE ONLY										
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID	
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989 _____ - _____ - _____	
							R. Unit		Optional Use	
							9921		9907	9908
S/E Name										

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AG YIELD SURVEY - SEPTEMBER 2022

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 128  
SurveyId:3652 Version 31



USDA/NASS - Nebraska  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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Office Use Only	FIPS	POID	Tract	Subtr.
	___	___	___	___

If you no longer operate this farm or ranch go to Section 2.

SECTION 1 - CROP ACREAGE and YIELD

Please report the acres planted, acres for harvest and yield per acre you expect to harvest from the total acres you operate for the following crops. If harvest is not complete, make your best estimate of the final yield for all acres harvested and to be harvested. EXCLUDE information for land rented to others.

1. CORN

TOTAL CROP

a. Harvested and to be harvested (grain and seed only).....

Acres

531

b. Expected yield for grain and seed.....

Bu. per Acre

154

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

950

2. SORGHUM

TOTAL CROP

a. Harvested and to be harvested (grain and seed only).....

Acres

571

b. Expected yield for grain and seed.....

Bu. per Acre

747

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

951

3. DRY EDIBLE PEAS (INCLUDE Austrian winter peas and wrinkled seed peas)

TOTAL CROP

a. Planted for all purposes.....

Acres

714

b. Harvested and to be harvested.....

Acres

720

c. Yield per acre - clean basis.....

Lbs. per Acre

167

CONTINUE ON BACK



4. SOYBEANS

TOTAL CROP

a. Harvested and to be harvested for beans or seed.....	Acres	599
b. Expected yield for beans or seed.....	Bu. per Acre	157
c. Has harvest been completed?..... 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No		955

SECTION 2 - CONCLUSION

1. If you no longer operate this farm or ranch, please provide the name and address of the new operator.

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ Check if cell phone.

2. **SURVEY RESULTS:** To review the complete results of this survey on the release date, go to: [nass.usda.gov/results](https://nass.usda.gov/results)

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1095

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone
	( )	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
	( )	<input type="checkbox"/>	Date:			

This completes the survey. Thank you for your help.

OFFICE USE ONLY													
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID				
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989				
									- - - - - - - - - -				
							Optional Use						
							R. Unit		9907	9908	9906	9916	
S/E Name													

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AG YIELD SURVEY - SEPTEMBER 2022

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 128  
SurveyId:3652 Version 46



USDA/NASS - South Dakota  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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Office Use Only	FIPS	POID	Tract	Subtr.
	___	___	___	___

If you no longer operate this farm or ranch go to Section 2.

SECTION 1 - CROP ACREAGE and YIELD

Please report the acres planted, acres for harvest and yield per acre you expect to harvest from the total acres you operate for the following crops. If harvest is not complete, make your best estimate of the final yield for all acres harvested and to be harvested. EXCLUDE information for land rented to others.

1. CORN

TOTAL CROP

a. Harvested and to be harvested (grain and seed only).....

Acres

531

b. Expected yield for grain and seed.....

Bu. per Acre

154

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

950

2. SORGHUM

TOTAL CROP

a. Harvested and to be harvested (grain and seed only).....

Acres

571

b. Expected yield for grain and seed.....

Bu. per Acre

747

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

951

3. DRY EDIBLE PEAS (INCLUDE Austrian winter peas and wrinkled seed peas)

TOTAL CROP

a. Planted for all purposes.....

Acres

714

b. Harvested and to be harvested.....

Acres

720

c. Yield per acre - clean basis.....

Lbs. per Acre

167

CONTINUE ON BACK

4. SOYBEANS

TOTAL CROP

a. Harvested and to be harvested for beans or seed.....	Acres	599
b. Expected yield for beans or seed.....	Bu. per Acre	157
c. Has harvest been completed?..... 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No		955

SECTION 2 - CONCLUSION

1. If you no longer operate this farm or ranch, please provide the name and address of the new operator.

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ Check if cell phone.

2. **SURVEY RESULTS:** To review the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone
	( )	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
	( )	<input type="checkbox"/>	Date:			

This completes the survey. Thank you for your help.

OFFICE USE ONLY													
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID				
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989				
									- - - - - - - - - -				
							R. Unit		Optional Use				
						9921			9907	9908	9906	9916	
S/E Name													

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List of Surveys

AG YIELD SURVEY - SEPTEMBER 2022

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 128  
SurveyId:3652 Version 38



USDA/NASS - North Dakota  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

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Office Use Only	FIPS	POID	Tract	Subtr.
	___	___	___	___

If you no longer operate this farm or ranch go to Section 2.

SECTION 1 - CROP ACREAGE and YIELD

Please report the acres planted, acres for harvest and yield per acre you expect to harvest from the total acres you operate for the following crops. If harvest is not complete, make your best estimate of the final yield for all acres harvested and to be harvested. EXCLUDE information for land rented to others.

1. CORN

TOTAL CROP

a. Harvested and to be harvested (grain and seed only).....

Acres

531

b. Expected yield for grain and seed.....

Bu. per Acre

154

c. Has harvest been completed?.....

1 ☐ Yes

3 ☐ No

950

2. DRY EDIBLE PEAS (INCLUDE Austrian winter peas and wrinkled seed peas)

TOTAL CROP

a. Planted for all purposes.....

Acres

714

b. Harvested and to be harvested.....

Acres

720

c. Yield per acre - clean basis.....

Lbs. per Acre

167

3. LENTILS

TOTAL CROP

a. Planted for all purposes.....

Acres

715

b. Harvested and to be harvested.....

Acres

781

c. Yield per acre - clean basis.....

Lbs. per Acre

166

CONTINUE ON BACK

4. SOYBEANS

TOTAL CROP

a. Harvested and to be harvested for beans or seed.....	Acres	599
b. Expected yield for beans or seed.....	Bu. per Acre	157
c. Has harvest been completed?..... 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No		955

SECTION 2 - CONCLUSION

1. If you no longer operate this farm or ranch, please provide the name and address of the new operator.

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ Check if cell phone.

2. **SURVEY RESULTS:** To review the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

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1095

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone
	( )	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
	( )	<input type="checkbox"/>	Date:			

This completes the survey. Thank you for your help.

OFFICE USE ONLY													
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									- - - - - - - - - -				
							R. Unit		Optional Use				
						9921			9907	9908	9906	9916	
S/E Name													

# CHICKPEAS SURVEY - September 1, 2022

[Click Here to  
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List of Surveys](#)

OMB No. 0535-0002  
Approval Expires: 12/31/2023  
Project Code: 191  
SurveyId: 9012



**USDA/NASS**  
National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@usda.gov](mailto:nass@usda.gov)

Please make corrections to name, address and ZIP Code, if necessary.

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## Section 1 - Chickpea Acreage and Production

1. Did this operation (shown on the label) grow any chickpeas in 2022?

- INCLUDE only peas dried in the field
- EXCLUDE:
  - Dry edible peas, Austrian winter peas, wrinkled seed peas, and lentils
  - Crops grown on land rented to others

099 1 ☐ Yes - Continue 3 ☐ No - Go to Section 2

2. How many total acres of small chickpeas (pass through a 20/64 inch round screen) were planted for all purposes on this operation in 2022?..... acres

401
402

a. Of these (item 2) acres, how many acres were or will be harvested?..... acres

Pounds per Acre

b. What is the expected yield (clean basis)? (If harvest is not complete, make your best estimate of the yield.).....

404
-----

3. How many total acres of large chickpeas (larger than the 20/64 inch round screen) were planted for all purposes on this operation in 2022?..... acres

501
502

a. Of these (item 3) acres, how many acres were or will be harvested?..... acres

Pounds per Acre

b. What is the expected yield (clean basis)? (If harvest is not complete, make your best estimate of the yield.).....

504
-----

Continue on back

## Section 2 - CONCLUSION

1. If you no longer operate this farm or ranch, please provide the following information for the new operator:

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) - \_\_\_\_\_

COMMENTS:

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To have a brief summary emailed to you, please enter your email address:
1095

Operation Email: (if different from above)		Operation Phone:	
9937	9936 ( ) - _____	check if cell phone <input type="checkbox"/>	
Respondent Name:		Respondent Phone (if different from above)	
9912	9911 ( ) - _____	check if cell phone <input type="checkbox"/>	9910   MM   DD   YY  Date:   _ _   _ _   _ _

This completes the survey. Thank you for your help.

OFFICE USE ONLY												
Response	Respondent	Mode	Enum.	Eval.	Change	Office Use for POID						
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Spouse 3-Acct/Bkpr 4-Partner 9-Other	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989 _ _ _ - _ _ _ - _ _ _			
								<b>R. Unit</b>	Optional Use			
								9921	9907	9908	9906	9916
S/E Name												

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Small Grains

[Click Here to  
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OMB No.0535-0002  
Approval Expires: 12/31/2022  
Project Code: 189  
Survey ID: 2950  
Version 20



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

**USDA/NASS - Kansas**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

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Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. In 2022, did you have any whole grains, oilseeds, or hay stored on this operation?..... ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

20

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

Acres
901
902
905
900

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802
-----

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

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0060
0055

**Section 2 - Crops****20**

For the following small grains crops, please report acres planted for all purposes last fall or this spring, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

**1. Winter Wheat**

- |    |   | Winter Wheat |
|----|---|--------------|
| a. | Winter Wheat acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... Acres | 540          |
| b. | Winter Wheat acres harvested and to be harvested for either grain or seed?..... Acres   | 541          |
| c. | Total production of Winter Wheat for grain and seed? (INCLUDE landlord's share.)..... Bushels   | 482          |
|    | or  | 151          |
| d. | Yield per acre of Winter Wheat harvested for grain and seed?..... Bu/Ac   |              |
| e. | Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.)..... Acres   | 487          |

**Section 2 - Crops (Continued)**

20

## 2. Oats

- |  |         | Oats |
|--|---------|------|
| a. Oats acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... | Acres   | 533  |
| b. Oats acres harvested and to be harvested for either grain or seed?.....   | Acres   | 534  |
| c. Total production of Oats for grain and seed? (INCLUDE landlord's share.).....   | Bushels | 596  |
| or   |         | 153  |
| d. Yield per acre of Oats harvested for grain and seed?.....   | Bu/Ac   | 599  |
| e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....  | Acres   |      |

**For Office Use Only: Completion Code for Crops in This Section**

- |   |     |
|---|-----|
| 1 – Incomplete, has crops listed above<br>2 – Incomplete, presence of crops listed above is unknown<br>3 – Valid Zero | 138 |
|---|-----|

---

Skip to next page

OR

Space for Notes and Comments

**Section 3 - Change in Operator**

20

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

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2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

**Section 4 - Conclusion**

20

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

☐ Yes - Continue

☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022?

☐ Yes - Continue

☐ No - Continue

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

check if  
cell phone

Phone: (\_\_\_\_) \_\_\_\_\_ ☐

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

**Section 5 - Contact Information**

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone

(\_\_\_\_) \_\_\_\_\_

☐

Respondent Name:

Respondent Phone (if different from above):

9912

9911

check if  
cell phone

9910 MM DD YY

(\_\_\_\_) \_\_\_\_\_

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

This completes the survey. Thank you for your help.

**OFFICE USE ONLY**

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989 _____			
2-R		2-Spouse		2-PATI (Tel)					_____			
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					_____			
4-Office Hold		4-Partner		6-Email					Optional Use			
5-R - Est		9-Other		7-Fax					9907	9908	9906	9916
6-Inac - Est				19-Other								
7-Off Hold - Est												
S/E Name												

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Small Grains

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OMB No.0535-0002  
Approval Expires: 12/31/2022  
Project Code: 189  
Survey ID: 2950  
Version 31



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

**USDA/NASS - Nebraska**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: [NASSRFONPR@usda.gov](mailto:NASSRFONPR@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

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Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. In 2022, did you have any whole grains, pulse crops, oilseeds, or hay stored on this operation?..... ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

31

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

Acres
901
902
905
900

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802
-----

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

For Office Use Only
0060
0055

**Section 2 - Crops**

31

For the following small grains crops, please report acres planted for all purposes last fall or this spring, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

## 1. Winter Wheat

- |    |   | Winter Wheat |
|----|---|--------------|
| a. | Winter Wheat acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... Acres | 540          |
| b. | Winter Wheat acres harvested and to be harvested for either grain or seed?..... Acres   | 541          |
| c. | Total production of Winter Wheat for grain and seed? (INCLUDE landlord's share.)..... Bushels   | 482          |
|    | or  | 151          |
| d. | Yield per acre of Winter Wheat harvested for grain and seed?..... Bu/Ac   |              |
| e. | Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.)..... Acres   | 487          |

**Section 2 - Crops (Continued)**

31

## 2. Oats

- |  |         | Oats |
|--|---------|------|
| a. Oats acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... | Acres   | 533  |
| b. Oats acres harvested and to be harvested for either grain or seed?.....   | Acres   | 534  |
| c. Total production of Oats for grain and seed? (INCLUDE landlord's share.).....   | Bushels | 596  |
| or   |         | 153  |
| d. Yield per acre of Oats harvested for grain and seed?.....   | Bu/Ac   |      |
| e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....  | Acres   | 599  |

**For Office Use Only: Completion Code for Crops in This Section**

- |   |     |
|---|-----|
| 1 – Incomplete, has crops listed above<br>2 – Incomplete, presence of crops listed above is unknown<br>3 – Valid Zero | 138 |
|---|-----|

---

Skip to next page

OR

Space for Notes and Comments

**Section 3 - Change in Operator**

31

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

---



---



---

2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

**Section 4 - Conclusion**

31

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

☐ Yes - Continue

☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022?

☐ Yes - Continue

☐ No - Continue

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

check if  
cell phone

Phone: (\_\_\_\_) \_\_\_\_\_ ☐

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

**Section 5 - Contact Information**

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone

(\_\_\_\_) \_\_\_\_\_

☐

Respondent Name:

Respondent Phone (if different from above):

9912

9911

check if  
cell phone

9910 MM DD YY

\_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_

☐

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

This completes the survey. Thank you for your help.

**OFFICE USE ONLY**

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Spouse 3-Acct/Bkpr 4-Partner 9-Other	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989 _____			
									_____			
									Optional Use			
									9907	9908	9906	9916
S/E Name												

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Small Grains

[Click Here to  
return to  
List of Surveys](#)

OMB No.0535-0002  
Approval Expires: 12/31/2022  
Project Code: 189  
Survey ID: 2950  
Version 46



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

**USDA/NASS - South Dakota**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: [NASSRFONPR@usda.gov](mailto:NASSRFONPR@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0002. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. In 2022, did you have any whole grains, pulse crops, oilseeds, or hay stored on this operation?..... ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Do not include landlords and tenants as partners.

Number

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

Acres
901
902
905
900

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802
-----

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

For Office Use Only
0060
0055

## Section 2 - Crops

For the following small grains crops, please report acres planted for all purposes last fall or this spring, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

## 1. Winter Wheat

		Winter Wheat
a. Winter Wheat acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.).....	Acres	540
		541
b. Winter Wheat acres harvested and to be harvested for either grain or seed?.....	Acres	482
c. Total production of Winter Wheat for grain and seed? (INCLUDE landlord's share.).....	Bushels	151
or		
d. Yield per acre of Winter Wheat harvested for grain and seed?.....	Bu/Ac	487
e. Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....	Acres	

## 2. Other Spring Wheat

		Other Spring Wheat
a. Spring Wheat acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.).....	Acres	550
		768
b. Spring Wheat acres harvested and to be harvested for either grain or seed?.....	Acres	773
c. Total production of Spring Wheat for grain and seed? (INCLUDE landlord's share.).....	Bushels	452
or		
d. Yield per acre of Spring Wheat harvested for grain and seed?.....	Bu/Ac	777
e. Acres of Spring Wheat for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....	Acres	

**Section 2 - Crops (Continued)**

46

## 3. Oats

- |  |         | Oats |
|--|---------|------|
| a. Oats acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... | Acres   | 533  |
| b. Oats acres harvested and to be harvested for either grain or seed?.....   | Acres   | 534  |
| c. Total production of Oats for grain and seed? (INCLUDE landlord's share.).....   | Bushels | 596  |
| or   |         | 153  |
| d. Yield per acre of Oats harvested for grain and seed?.....   | Bu/Ac   |      |
| e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....  | Acres   | 599  |

**For Office Use Only: Completion Code for Crops in This Section**

- |   |     |
|---|-----|
| 1 – Incomplete, has crops listed above<br>2 – Incomplete, presence of crops listed above is unknown<br>3 – Valid Zero | 138 |
|---|-----|

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Skip to next page

OR

Space for Notes and Comments

**Section 3 - Change in Operator**

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

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---

2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

**Section 4 - Conclusion**

46

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

☐ Yes - Continue

☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

check if  
cell phone

Phone: (\_\_\_\_) \_\_\_\_\_ ☐

b. Was this additional operation in business before June 1, 2022?

☐ Yes - Continue

☐ No - Continue

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

**Section 5 - Contact Information**

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone

(\_\_\_\_) \_\_\_\_\_

☐

Respondent Name:

Respondent Phone (if different from above):

9912

9911

check if  
cell phone

9910 MM DD YY

\_\_\_\_\_

(\_\_\_\_) \_\_\_\_\_

☐

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

This completes the survey. Thank you for your help.

**OFFICE USE ONLY**

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989 _____			
2-R		2-Spouse		2-PATI (Tel)					_____			
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					_____			
4-Office Hold		4-Partner		6-Email					Optional Use			
5-R - Est		9-Other		7-Fax					9907	9908	9906	9916
6-Inac - Est				19-Other								
7-Off Hold - Est												
S/E Name												

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Small Grains

[Click Here to  
return to  
List of Surveys](#)

OMB No.0535-0002  
Approval Expires: 12/31/2022  
Project Code: 189  
Survey ID: 2950  
Version 38



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

**USDA/NASS - North Dakota**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0002. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Will you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. In 2022, did you have any whole grains, pulse crops, oilseeds, or hay stored on this operation?..... ☐ Yes ☐ No
  - d. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - e. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - f. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Do not include landlords and tenants as partners.

Number

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

38

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

Acres
901
902
905
900

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802
-----

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

For Office Use Only
0060
0055

## Section 2 - Crops

For the following small grains crops, please report acres planted for all purposes last fall or this spring, harvested and to be harvested for either grain or seed in the 2022 crop year, and the total production or yield of grain and seed for this operation. (INCLUDE cover crops planted on government program land.)

If harvest is not complete, make your best estimate of acres and total production.

## 1. Winter Wheat

Winter Wheat	
a. Winter Wheat acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.).....	Acres
	540
b. Winter Wheat acres harvested and to be harvested for either grain or seed?.....	Acres
	541
c. Total production of Winter Wheat for grain and seed? (INCLUDE landlord's share.).....	Bushels
or	
d. Yield per acre of Winter Wheat harvested for grain and seed?.....	Bu/Ac
e. Acres of Winter Wheat for all other purposes? (INCLUDE hay, haylage, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....	Acres
	482
	151
	487

## 2. Durum

Durum	
a. Durum acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.).....	Acres
	553
b. Durum acres harvested and to be harvested for either grain or seed?.....	Acres
	554
c. Total production of Durum for grain and seed? (INCLUDE landlord's share.).....	Bushels
or	
d. Yield per acre of Durum harvested for grain and seed?.....	Bu/Ac
e. Acres of Durum for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....	Acres
	753
	451
	757

## Section 2 - Crops (Continued)

38

## 3. Other Spring Wheat

- |    |   | Other Spring Wheat |
|----|---|--------------------|
| a. | Spring Wheat acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... | 550                |
|    | Acres   | 768                |
| b. | Spring Wheat acres harvested and to be harvested for either grain or seed?.....   | 773                |
|    | Acres   | 452                |
| c. | Total production of Spring Wheat for grain and seed? (INCLUDE landlord's share.).....   | 777                |
|    | Bushels   |                    |
|    | or  |                    |
| d. | Yield per acre of Spring Wheat harvested for grain and seed?.....   |                    |
|    | Bu/Ac   |                    |
| e. | Acres of Spring Wheat for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....  |                    |
|    | Acres   |                    |

## 4. Barley

- |    |   | Barley |
|----|---|--------|
| a. | Barley acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... | 535    |
|    | Acres   | 536    |
| b. | Barley acres harvested and to be harvested for either grain or seed?.....   | 512    |
|    | Acres   | 163    |
| c. | Total production of Barley for grain and seed? (INCLUDE landlord's share.).....   | 516    |
|    | Bushels   |        |
|    | or  |        |
| d. | Yield per acre of Barley harvested for grain and seed?.....   |        |
|    | Bu/Ac   |        |
| e. | Acres of Barley for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....  |        |
|    | Acres   |        |

**Section 2 - Crops (Continued)**

38

## 5. Oats

- |  |         | Oats |
|--|---------|------|
| a. Oats acres planted for all purposes? (INCLUDE acres planted as a cover crop, grazed off, cut for hay/haylage/silage, or abandoned. EXCLUDE mixtures of wheat, oats, barley, and other grains planted on the same acreage.)..... | Acres   | 533  |
| b. Oats acres harvested and to be harvested for either grain or seed?.....   | Acres   | 534  |
| c. Total production of Oats for grain and seed? (INCLUDE landlord's share.).....   | Bushels | 596  |
| or   |         | 153  |
| d. Yield per acre of Oats harvested for grain and seed?.....   | Bu/Ac   |      |
| e. Acres of Oats for all other purposes? (INCLUDE hay, silage, pasture, cover crop, abandoned, or any other purpose than grain or seed.).....  | Acres   | 599  |

**For Office Use Only: Completion Code for Crops in This Section**

- |   |     |
|---|-----|
| 1 – Incomplete, has crops listed above<br>2 – Incomplete, presence of crops listed above is unknown<br>3 – Valid Zero | 138 |
|---|-----|

**Section 3 - Change in Operator**

38

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

---



---



---

2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

**Section 4 - Conclusion**

38

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

☐ Yes - Continue

☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022?

☐ Yes - Continue

☐ No - Continue

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

check if  
cell phone

Phone: (\_\_\_\_) \_\_\_\_\_ ☐

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

**Section 5 - Contact Information**

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone

(\_\_\_\_) \_\_\_\_\_

☐

Respondent Name:

Respondent Phone (if different from above):

9912

9911

check if  
cell phone

9910 MM DD YY

(\_\_\_\_) \_\_\_\_\_

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

This completes the survey. Thank you for your help.

**OFFICE USE ONLY**

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989 _____			
2-R		2-Spouse		2-PATI (Tel)					_____			
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					_____			
4-Office Hold		4-Partner		6-Email					Optional Use			
5-R - Est		9-Other		7-Fax					9907	9908	9906	9916
6-Inac - Est				19-Other								
7-Off Hold - Est												
S/E Name												

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Row Crops

Click Here to  
return to  
List of Surveys

OMB No.0535-0002  
Approval Expires: 12/31/2023  
Project Code: 190  
Survey ID: 3277  
Version 20

# DRAFT



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

**USDA/NASS - Kansas**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0002. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Did you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. Do you have facilities for storing whole grains or oilseeds?..... ☐ Yes ☐ No
  - d. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - e. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

20

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

Acres
901
902
905
900

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

For Office Use Only
0060
0055

## Section 2 - Crops

Now I would like to ask about crops grown during the 2022 crop year.

- Please report for all land you operate, including land you rent from others.
- If harvest is not complete, make your best estimate of acres and total production.
- Report crops grown for any purpose for the 2022 crop year, even if the crop has been grazed off, plowed under, or abandoned.
- Corn: Please distinguish between corn harvested for grain, corn harvested for seed, and corn cut for silage.
- Acres for all other purposes: Acres of the crop used for hay, pasture, cover crops, abandoned, etc.

1. Corn (Exclude popcorn and sweet corn.)

		Corn
a. Corn acres planted for all purposes?.....	Acres	530
b. Corn acres harvested and to be harvested for grain? (Exclude seed corn.).....	Acres	400
		401
c. Total production of Corn for grain? (Exclude seed corn.).....	Bushels	
or		704
d. Yield per acre of Corn harvested for grain?.....	Bu/Ac	
e. Corn acres harvested and to be harvested for seed?.....	Acres	398
f. Total production of Corn for seed? (Report the actual total production. Do not report the settlement account bushels.).....	Bushels	399
or		391
g. Yield per acre of Corn harvested for seed? (Report the actual yield per acre. Do not report the payment yield.).....	Bu/Ac	
h. Corn acres cut for silage?.....	Acres	373
i. Total production of Corn cut for silage?.....	Tons	376
or		393
j. Yield per acre of Corn cut for silage?.....	Tons/Ac	_____
k. Acres of Corn for all other purposes?.....	Acres	379

**Section 2 - Crops (Continued)****20**

2. Sorghum (Include milo, other grain, and forage sorghum.) (Exclude sorghum x sudan crosses.)		Sorghum
a. Sorghum acres planted for all purposes?.....	Acres	570
b. Sorghum acres harvested and to be harvested for grain or seed?.....	Acres	571
		420
c. Total production of Sorghum for grain and seed?.....	Bushels	747
or		
d. Yield per acre of Sorghum harvested for grain and seed?.....	Bu/Ac	423
e. Sorghum acres cut for silage or greenchop?.....	Acres	426
f. Total production of Sorghum for silage and greenchop?.....	Tons	395
or		
g. Yield per acre of Sorghum for silage and greenchop cut?.....	Tons/Ac	_____
h. Acres of Sorghum for all other purposes?.....	Acres	429
3. Sudan and Sorghum X Sudan Crosses		Sudan/Sorghum
a. Acres planted for hay, pasture, or other purposes?.....	Acres	111
4. Soybeans		Soybeans
a. Soybeans acres planted for all purposes?.....	Acres	600
b. Soybeans acres harvested and to be harvested for beans or seed?.....	Acres	763
		227
c. Total production of Soybeans for beans and seed?.....	Bushels	764
or		
d. Yield per acre of Soybeans harvested for beans or seed?.....	Bu/Ac	
e. Acres of Soybeans for all other purposes?.....	Acres	236

**Section 2 - Crops (Continued)****20**

5. Upland Cotton (Net acres if skip row)

a. Upland Cotton acres planted?..... Acres

b. Upland Cotton acres harvested and to be harvested?..... Acres

c. Total production of Upland Cotton?..... Bales

or

d. Yield of lint per acre?..... Lbs/Ac

Upland Cotton

524

668

336

348

**For Office Use Only: Completion Code for Crops in This Section**

1 – Incomplete, has crops listed above  
 2 – Incomplete, presence of crops listed above is unknown  
 3 – Valid Zero

138

**Section 3 - Change in Operator**

20

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

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2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

## Section 4 - Conclusion

20

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue

3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue

3 ☐ No - Continue

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ ZIP: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

check  
if cell phone

☐

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

## Section 5 - Contact Information

20

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone

☐

Respondent Name:

Respondent Phone (if different from above):

9912

9911

check if  
cell phone

9910

MM

DD

YY

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

This completes the survey. Thank you for your help.

## OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989			
2-R		2-Spouse		2-PATI (Tel)					_____			
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					_____			
4-Office Hold		4-Partner		6-Email					Optional Use			
5-R - Est		9-Other		7-Fax					9907	9908	9906	9916
6-Inac - Est				19-Other								
7-Off Hold - Est												
S/E Name												

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Row Crops

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List of Surveys

OMB No.0535-0002  
Approval Expires: 12/31/2023  
Project Code: 190  
Survey ID: 3277  
Version 31



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

# DRAFT

**USDA/NASS - Nebraska**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0002. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Did you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - d. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - e. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

31

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

Acres
901
902
905
900

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802
-----

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

For Office Use Only
0060
0055

## Section 2 - Crops

Now I would like to ask about crops grown during the 2022 crop year.

- Please report for all land you operate, including land you rent from others.
- If harvest is not complete, make your best estimate of acres and total production.
- Report crops grown for any purpose for the 2022 crop year, even if the crop has been grazed off, plowed under, or abandoned.
- Corn: Please distinguish between corn harvested for grain, corn harvested for seed, and corn cut for silage.
- Acres for all other purposes: Acres of the crop used for hay, pasture, cover crops, abandoned, etc.

		Corn
1. Corn (Exclude popcorn and sweet corn.)		
a. Corn acres planted for all purposes?.....	Acres	530
b. Corn acres harvested and to be harvested for grain? (Exclude seed corn.).....	Acres	400
		401
c. Total production of Corn for grain? (Exclude seed corn.).....	Bushels	
or		704
d. Yield per acre of Corn harvested for grain?.....	Bu/Ac	
e. Corn acres harvested and to be harvested for seed?.....	Acres	398
f. Total production of Corn for seed? (Report the actual total production. Do not report the settlement account bushels.).....	Bushels	399
or		391
g. Yield per acre of Corn harvested for seed? (Report the actual yield per acre. Do not report the payment yield.).....	Bu/Ac	
h. Corn acres cut for silage?.....	Acres	373
i. Total production of Corn cut for silage?.....	Tons	376
or		393
j. Yield per acre of Corn cut for silage?.....	Tons/Ac	. ____
k. Acres of Corn for all other purposes?.....	Acres	379

**Section 2 - Crops (Continued)**

31

2. Sorghum (Include milo, other grain, and forage sorghum.) (Exclude sorghum x sudan crosses.)		Sorghum
a. Sorghum acres planted for all purposes?.....	Acres	570
b. Sorghum acres harvested and to be harvested for grain or seed?.....	Acres	571
		420
c. Total production of Sorghum for grain and seed?.....	Bushels	747
or		
d. Yield per acre of Sorghum harvested for grain and seed?.....	Bu/Ac	423
e. Sorghum acres cut for silage or greenchop?.....	Acres	426
f. Total production of Sorghum for silage and greenchop?.....	Tons	395
or		
g. Yield per acre of Sorghum for silage and greenchop cut?.....	Tons/Ac	_____
h. Acres of Sorghum for all other purposes?.....	Acres	429
3. Soybeans		Soybeans
a. Soybeans acres planted for all purposes?.....	Acres	600
b. Soybeans acres harvested and to be harvested for beans or seed?.....	Acres	763
		227
c. Total production of Soybeans for beans and seed?.....	Bushels	764
or		
d. Yield per acre of Soybeans harvested for beans or seed?.....	Bu/Ac	
e. Acres of Soybeans for all other purposes?.....	Acres	236

**For Office Use Only: Completion Code for Crops in This Section**

1 – Incomplete, has crops listed above  
 2 – Incomplete, presence of crops listed above is unknown  
 3 – Valid Zero

138

---

Skip to next page

OR

Space for Notes and Comments

**Section 3 - Change in Operator**

31

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

---



---



---

2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

## Section 4 - Conclusion

31

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue

3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue

3 ☐ No - Continue

Operation Name: _____			
Address: _____			
City: _____		State: ____	ZIP: _____
Phone: (____) _____			check if cell phone <input type="checkbox"/>

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

## Section 5 - Contact Information

31

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone <input type="checkbox"/>
	(____) _____	

Respondent Name:

Respondent Phone (if different from above):

9912	9911	check if cell phone <input type="checkbox"/>	9910	MM	DD	YY
	(____) _____		Date: ____	____	____	____

This completes the survey. Thank you for your help.

OFFICE USE ONLY									
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989
2-R		2-Spouse		2-PATI (Tel)					_____
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					
4-Office Hold		4-Partner		6-Email					
5-R - Est		9-Other		7-Fax					
6-Inac - Est				19-Other					
7-Off Hold - Est									
S/E Name									

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Row Crops

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return to  
List of Surveys

OMB No.0535-0002  
Approval Expires: 12/31/2023  
Project Code: 190  
Survey ID: 3277  
Version 46



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

# DRAFT

**USDA/NASS - South Dakota**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0002. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Did you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - d. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - e. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

Acres
901
902
905
900

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802
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4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

For Office Use Only
0060
0055

## Section 2 - Crops

Now I would like to ask about crops grown during the 2022 crop year.

- Please report for all land you operate, including land you rent from others.
- If harvest is not complete, make your best estimate of acres and total production.
- Report crops grown for any purpose for the 2022 crop year, even if the crop has been grazed off, plowed under, or abandoned.
- Corn: Please distinguish between corn harvested for grain, corn harvested for seed, and corn cut for silage.
- Acres for all other purposes: Acres of the crop used for hay, pasture, cover crops, abandoned, etc.

1. Corn (Exclude popcorn and sweet corn.)

Corn		
a. Corn acres planted for all purposes?.....	Acres	530
b. Corn acres harvested and to be harvested for grain? (Exclude seed corn.).....	Acres	400
		401
c. Total production of Corn for grain? (Exclude seed corn.).....	Bushels	
or		704
d. Yield per acre of Corn harvested for grain?.....	Bu/Ac	
e. Corn acres harvested and to be harvested for seed?.....	Acres	398
f. Total production of Corn for seed? (Report the actual total production. Do not report the settlement account bushels.).....	Bushels	399
or		391
g. Yield per acre of Corn harvested for seed? (Report the actual yield per acre. Do not report the payment yield.).....	Bu/Ac	
h. Corn acres cut for silage?.....	Acres	373
i. Total production of Corn cut for silage?.....	Tons	376
or		393
j. Yield per acre of Corn cut for silage?.....	Tons/Ac	_____
k. Acres of Corn for all other purposes?.....	Acres	379

**Section 2 - Crops (Continued)**

46

2. Sorghum (Include milo, other grain, and forage sorghum.) (Exclude sorghum x sudan crosses.)		Sorghum
a. Sorghum acres planted for all purposes?.....	Acres	570
b. Sorghum acres harvested and to be harvested for grain or seed?.....	Acres	571
		420
c. Total production of Sorghum for grain and seed?.....	Bushels	747
or		
d. Yield per acre of Sorghum harvested for grain and seed?.....	Bu/Ac	423
e. Sorghum acres cut for silage or greenchop?.....	Acres	426
f. Total production of Sorghum for silage and greenchop?.....	Tons	395
or		
g. Yield per acre of Sorghum for silage and greenchop cut?.....	Tons/Ac	_____
h. Acres of Sorghum for all other purposes?.....	Acres	429
3. Soybeans		Soybeans
a. Soybeans acres planted for all purposes?.....	Acres	600
b. Soybeans acres harvested and to be harvested for beans or seed?.....	Acres	763
		227
c. Total production of Soybeans for beans and seed?.....	Bushels	764
or		
d. Yield per acre of Soybeans harvested for beans or seed?.....	Bu/Ac	
e. Acres of Soybeans for all other purposes?.....	Acres	236

**For Office Use Only: Completion Code for Crops in This Section**

1 – Incomplete, has crops listed above  
 2 – Incomplete, presence of crops listed above is unknown  
 3 – Valid Zero

138

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Skip to next page

OR

Space for Notes and Comments

### Section 3 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

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2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

## Section 4 - Conclusion

46

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue

3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue

3 ☐ No - Continue

Operation Name: _____			
Address: _____			
City: _____	State: ____	ZIP: _____	
Phone: (____) _____			check if cell phone <input type="checkbox"/>

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

## Section 5 - Contact Information

46

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone <input type="checkbox"/>
	(____) _____	

Respondent Name:

Respondent Phone (if different from above):

9912	9911	check if cell phone <input type="checkbox"/>	9910	MM	DD	YY
	(____) _____		Date: ____	____	____	____

This completes the survey. Thank you for your help.

OFFICE USE ONLY									
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989
2-R		2-Spouse		2-PATI (Tel)					_____
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					
4-Office Hold		4-Partner		6-Email					
5-R - Est		9-Other		7-Fax					
6-Inac - Est				19-Other					
7-Off Hold - Est									
S/E Name									

# COUNTY AGRICULTURAL PRODUCTION SURVEY - 2022 Row Crops

Click Here to  
return to  
List of Surveys

OMB No.0535-0002  
Approval Expires: 12/31/2023  
Project Code: 190  
Survey ID: 3277  
Version 38

# DRAFT



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

**USDA/NASS - North Dakota**  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0002. The time required to complete this information collection is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
	— —	— — — — —	— —	— —

1. Please verify name and mailing address of this operation.  
Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
  - a. Did you grow any crops or cut hay in 2022?..... ☐ Yes ☐ No
  - b. Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... ☐ Yes ☐ No
  - c. Do you have facilities for storing whole grains, pulse crops, or oilseeds?..... ☐ Yes ☐ No
  - d. Do you own or raise any livestock, poultry, or bees?..... ☐ Yes ☐ No
  - e. In 2022, did this operation have more than 99 acres of pasture?..... ☐ Yes ☐ No
3. Did you answer Yes to any of the questions above?.... ☐ Yes - Continue ☐ No - Go to Section 3



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

For Office Use Only	R. Unit
	9921

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922

For Office Use Only
Stratum
9923

For Office Use Only
Stratum
9927

For Office Use Only
Stratum
9928

## Section 1 - Acres Operated

38

Please report total acres operated under this land arrangement.

1. In 2022, how many acres did this operation:

a. Own?.....

b. Rent or Lease from others or use Rent Free?  
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....

c. Rent to others?.....

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2022 was:.....

a. Does this include the farmstead, all cropland, woodland, pasture land,  
wasteland, and government program land?

☐ Yes - Continue

☐ No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

802

4. In what state and county was the largest value of your agricultural products raised or produced?

State

Principal County Name

Number of Acres in Principal County
0056

For Office Use Only
0060
0055

Acres
901
902
905
900

## Section 2 - Crops

Now I would like to ask about crops grown during the 2022 crop year.

- Please report for all land you operate, including land you rent from others.
- If harvest is not complete, make your best estimate of acres and total production.
- Report crops grown for any purpose for the 2022 crop year, even if the crop has been grazed off, plowed under, or abandoned.
- Corn: Please distinguish between corn harvested for grain, corn harvested for seed, and corn cut for silage.
- Acres for all other purposes: Acres of the crop used for hay, pasture, cover crops, abandoned, etc.

### 1. Corn (Exclude popcorn and sweet corn.)

Corn		
a. Corn acres planted for all purposes?.....	Acres	530
b. Corn acres harvested and to be harvested for grain? (Exclude seed corn.).....	Acres	400
		401
c. Total production of Corn for grain? (Exclude seed corn.).....	Bushels	
or		704
d. Yield per acre of Corn harvested for grain?.....	Bu/Ac	
e. Corn acres harvested and to be harvested for seed?.....	Acres	398
f. Total production of Corn for seed? (Report the actual total production. Do not report the settlement account bushels.).....	Bushels	399
or		391
g. Yield per acre of Corn harvested for seed? (Report the actual yield per acre. Do not report the payment yield.).....	Bu/Ac	
h. Corn acres cut for silage?.....	Acres	373
i. Total production of Corn cut for silage?.....	Tons	376
or		393
j. Yield per acre of Corn cut for silage?.....	Tons/Ac	_____
k. Acres of Corn for all other purposes?.....	Acres	379

### 2. Soybeans

Soybeans		
a. Soybeans acres planted for all purposes?.....	Acres	600
b. Soybeans acres harvested and to be harvested for beans or seed?.....	Acres	763
		227
c. Total production of Soybeans for beans and seed?.....	Bushels	
or		764
d. Yield per acre of Soybeans harvested for beans or seed?.....	Bu/Ac	
e. Acres of Soybeans for all other purposes?.....	Acres	236

**Section 2 - Crops (Continued)****38****3. Dry Edible Beans, all classes? (Excluding chickpeas)**

- |  |        |
|--|--------|
| a. Dry Edible Beans, all classes, acres planted?.....                    | Acres  |
| b. Dry Edible Beans, all classes, acres harvested?.....                  | Acres  |
| c. Total production of Dry Edible Beans, all classes? (clean basis)..... | Cwt    |
| or   |        |
| d. Yield per acre of Dry Edible Beans, all classes? (clean basis).....   | Lbs/Ac |

Dry Edible Beans	
607	
863	
866	
608	

**4. Dry Edible Peas? (Including Austrian winter peas and wrinkled seed peas)**

- |  |        |
|--|--------|
| a. Dry Edible Peas acres planted?.....                     | Acres  |
| b. Dry Edible Peas acres harvested?.....                   | Acres  |
| c. Total production of Dry Edible Peas? (clean basis)..... | Cwt    |
| or   |        |
| d. Yield per acre of Dry Edible Peas? (clean basis).....   | Lbs/Ac |

Dry Edible Peas	
714	
720	
721	
165	

**5. Lentils**

- |  |        |
|--|--------|
| a. Lentils acres planted?.....                     | Acres  |
| b. Lentils acres harvested?.....                   | Acres  |
| c. Total production of Lentils? (clean basis)..... | Cwt    |
| or   |        |
| d. Yield per acre of Lentils? (clean basis).....   | Lbs/Ac |

Lentils	
715	
781	
782	
166	

**Section 2 - Crops (Continued)****38**

## 6. Sunflower Oil Varieties (Black seed for crushing, birdseed or other uses)

- |  |        |
|--|--------|
| a. Sunflower Oil Varieties acres planted?.....                       | Acres  |
| b. Sunflower Oil Varieties acres harvested and to be harvested?..... | Acres  |
| c. Total production of Sunflower Oil Varieties?.....                 | Pounds |
| or   |        |
| d. Yield per acre of Sunflower Oil Varieties?.....                   | Lbs/Ac |

Sunflower, Oil
680
260
261
492

## 7. Flaxseed

- |   |         |
|---|---------|
| a. Flaxseed acres planted?.....                       | Acres   |
| b. Flaxseed acres harvested and to be harvested?..... | Acres   |
| c. Total production of Flaxseed?.....                 | Bushels |
| or  |         |
| d. Yield per acre of Flaxseed?.....                   | Bu/Ac   |

Flaxseed
682
159
160
498

## 8. Canola

- |   |        |
|---|--------|
| a. Canola acres planted?.....                       | Acres  |
| b. Canola acres harvested and to be harvested?..... | Acres  |
| c. Total production of Canola?.....                 | Pounds |
| or  |        |
| d. Yield per acre of Canola?.....                   | Lbs/Ac |

Canola
684
177
675
736

## Section 2 - Crops (Continued)

38

## Instructions for Dry Hay Crops:

- Report by type of hay.
- Report all dry hay harvested during 2022.
- Include acres cut for dry hay that are enrolled in government programs. (For example: Conservation Reserve Program (CRP)).
- Count each acre only once, regardless of the number of cuttings or different uses.
- Report the total production from all cuttings for dry hay, including the dry weight of any dehydrated hay.
- Exclude, from dry hay, acres cut only for straw, haylage, or greenchop.

## 9. Alfalfa and Alfalfa Mixtures

- a. How many acres of alfalfa and alfalfa mixtures were cut for dry hay?..... Acres

Alfalfa
653

Report quantity harvested in one of the following ways: total production, yield, or bales.

- b. What was the total production of dry hay from all cuttings?..... Tons

or

- c. Yield per acre of dry hay?..... Tons/Ac

or

- d. Total bales of dry hay harvested from all cuttings?

Total Production:

or

Bales per Acre:

Number of bales	Average weight per bale (Pounds)
080	081
082	083
_____	

344

344
444
_____

## 10. Small Grain Hay

- a. How many acres of small grain hay were cut for dry hay?..... Acres

Small Grain Hay
656

Report quantity harvested in one of the following ways: total production, yield, or bales.

- b. What was the total production of dry hay from all cuttings?..... Tons

or

- c. Yield per acre of dry hay?..... Tons/Ac

or

- d. Total bales of dry hay harvested from all cuttings?

Total Production:

or

Bales per Acre:

Number of bales	Average weight per bale (Pounds)
084	085
086	087
_____	

655

655
445
_____

**Section 2 - Crops (Continued)**

38

11. All Other Hay (Include clover, clover and grass mixtures, brome, sudan, sudan crosses, other tame, and wild or prairie hay.)

a. How many acres of all other hay were cut for dry hay?..... Acres

Other Hay

654

Report quantity harvested in one of the following ways: total production, yield, or bales.

b. What was the total production of dry hay from all cuttings?..... Tons

740

or

c. Yield per acre of dry hay?..... Tons/Ac

446

or

d. Total bales of dry hay harvested from all cuttings?

Total Production:

Number of bales	Average weight per bale (Pounds)
088	089
090	091
Bales per Acre: _____	

or

Bales per Acre:

**For Office Use Only: Completion Code for Crops in This Section**

1 – Incomplete, has crops listed above  
 2 – Incomplete, presence of crops listed above is unknown  
 3 – Valid Zero

138

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Skip to next page

OR

Space for Notes and Comments



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Skip to next page

OR

Space for Notes and Comments

**Section 3 - Change in Operator**

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2      ☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes      ☐ No      ☐ Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

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2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue      ☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if cell phone

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐

4. Was the (Item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Continue

5. Is the (Item 3) operation managed?

☐ Yes - Go to Section 4      ☐ No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 4      ☐ No - Go to Section 4

**Section 4 - Conclusion**

38

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 ☐ Yes - Continue

3 ☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022?

1 ☐ Yes - Continue

3 ☐ No - Continue

Operation Name: _____			
Address: _____			
City: _____	State: ____	ZIP: _____	
Phone: (____) _____			check if cell phone <input type="checkbox"/>

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

**Section 5 - Contact Information**

38

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone <input type="checkbox"/>
	(____) _____	

Respondent Name:

Respondent Phone (if different from above):

9912	9911	check if cell phone <input type="checkbox"/>	9910	MM	DD	YY
	(____) _____		Date: ____	____	____	____

This completes the survey. Thank you for your help.

OFFICE USE ONLY									
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989
2-R		2-Spouse		2-PATI (Tel)					_____
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					
4-Office Hold		4-Partner		6-Email					
5-R - Est		9-Other		7-Fax					
6-Inac - Est				19-Other					
7-Off Hold - Est									
S/E Name									

## HOG REPORT - September 1, 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 163  
Survey ID: 1209  
Version: 1



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

### **USDA/NASS**

National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@usda.gov](mailto:nass@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number is 0535-0213. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

For Office Use Only			
FIPS	POID	Tract	Subtr.
__	_____	__	__

1. Verify name and mailing address of this operation. Make any corrections necessary (including the correct operation name) on the label and continue.

2. Has this operation owned or raised hogs or pigs at any time since June 1, 2022?  
(INCLUDE hogs and pigs raised under contract.)

☐ Yes - Go to item 3 on page 2

☐ No - Were any hogs or pigs owned by someone else on this operation on September 1, 2022?

☐ Yes - Go to item 10 on page 5

☐ No - Go to Section 2 on page 6

3. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

<b>For Office Use Only</b>	R. Unit
	9921
	SUB
	9941
	DEC 1
	9931

4. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Number

Do not include landlords and tenants as partners

5. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on December 1, 2021?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on December 1, 2021?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on December 1, 2021?

☐ Yes ☐ No

☐ Check if verified

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

Did this partner also operate land individually on December 1, 2021?

☐ Yes ☐ No

<b>For Office Use Only</b>
<b>Stratum</b>
9922
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9923
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9927
<b>Ind. Op.</b>
9924

<b>For Office Use Only</b>
<b>Stratum</b>
9928
<b>Ind. Op.</b>
9924

## Section 1 - Hogs and Pigs Owned

1. On September 1, did this operation (named on label) own any hogs or pigs, regardless of location?  
(INCLUDE hogs or pigs being raised under contract for you by someone else.)

- ☐ Yes - Go to item 2 and EXCLUDE out-of-state hogs in items 2 through 10
- ☐ No - Did this operation own hogs or pigs at any time from June 1 through August 31, 2022?
- ☐ Yes - Go to item 7 on page 4
- ☐ No - Were any hogs or pigs owned by someone else on this operation on September 1, 2022?
- ☐ Yes - Go to item 10 on page 5
- ☐ No - Go to Section 2 on page 6

2. How many sows and gilts for breeding were owned by this operation on September 1?

(INCLUDE unweaned gilts intended for breeding.)..... +

Number Owned September 1

301

- a. How many of the (item 2) sows and gilts are expected to farrow during September, October or November 2022?.....

331

- b. How many of the (item 2) sows and gilts are expected to farrow during December 2022, January or February 2023?.....

332

3. How many boars and young males for breeding were owned by this operation on September 1? (INCLUDE unweaned boar pigs intended for breeding.)..... +

302

4. Of the hogs and pigs for market or home use owned by this operation on September 1, how many were in each of the following four weight groups?  
(EXCLUDE breeding hogs and pigs reported in item 2 or item 3.)

- a. Under 50 pounds? (INCLUDE unweaned pigs intended for market or home use.)... +

315

- b. 50 - 119 pounds?..... +

316

- c. 120 - 179 pounds?..... +

313

- d. 180 pounds and over? (INCLUDE sows and boars no longer used for breeding.).. +

314

5. Add Items 2 + 3 + 4a + 4b + 4c + 4d and verify the total. If necessary, make corrections before continuing.

Then the total hogs and pigs owned by this operation on September 1 was:..... =

300

## Out-of-State Hogs and Pigs

6. Did this operation own any hogs or pigs in another State on September 1?

Code

- <sup>1</sup> ☐ Yes - Continue to item 7. EXCLUDE out-of-state hogs in items 2 through 10.

- <sup>3</sup> ☐ No - Continue to item 7

321

## Section 1 - Hogs and Pigs Owned (continued)

Farrowings and pig crop from June 2022 through August 2022

7. Did any sows or gilts owned by this operation farrow during the last three months?  
(June - August)

☐ Yes - Complete the following for each month starting with the most recent month

a. How many sows and gilts owned by this operation farrowed during (month)?.....

Farrowings		
August Sows	July Sows	June Sows
888	891	894

b. How many of the pigs from these (item 7a) litters were:

i. owned by this operation on September 1?.....

ii. sold or slaughtered before September 1?.....

Pig Crop		
August Pig Crop	July Pig Crop	June Pig Crop
889	892	895
890	893	896

☐ No - Continue

Death Loss from June 2022 through August 2022

8. What number or percent of weaned pigs and older hogs owned by this operation died during June, July and August?.....

Number Died	OR	Percent Died (tenths)
335		340
		· ____

## Section 1 - Hogs and Pigs Owned (continued)

## Contract Hog and Pig Production

9. Were any hogs or pigs owned by this operation being raised under contract by another person or firm on September 1?

1 ☐ Yes - Continue      3 ☐ No - Go to item 10

336

- a. How many producers were raising hogs or pigs for you under contract on September 1?.....
- b. How many hogs and pigs (owned by this operation) were these (item 9a) producers raising for you under contract on September 1?.....

317

333

(Verify that these hogs and pigs ARE included in the total (items 2 - 5 on page 3), then continue.)

10. Were any hogs or pigs owned by someone else on this operation on September 1?

1 ☐ Yes - Continue      3 ☐ No - Go to Section 3 on page 8

323

- a. How many hogs and pigs owned by someone else were on this operation on September 1?.....

322

- b. Who owns the hogs and pigs?.....

- c. Is this hog owner a contractor?

☐ Yes      ☐ No

(Verify that these hogs and pigs ARE NOT included in items 2 - 5 on page 3.)

(Owner's Name, Address, & Phone Number)

Name

Address

City, St., ZIP

Phone

check if cell  
phone



- d. Will the operator on the label own hogs or pigs at any time between now and December 1, 2022?

1 ☐ Yes      3 ☐ No

324

Go to Section 3 on page 8. Complete Section 2 on page 6 only if the operation shown on the label DOES NOT own hogs or raise hogs under contract.

Office Use - Completion Code - Hog Presence

1 - Incomplete, Hogs Present  
2 - Incomplete, Unknown Presence  
3 - Valid Zero

499



## Section 2 - Intentions to Own or Raise Hogs

Complete Section 2 only if the operation shown on the label DOES NOT own hogs or raise hogs under contract, otherwise go to Section 3 on page 8.

1. Will the operator on the label raise hogs or pigs on this operation at any time between now and December 1, 2022? (Check one.)

492

- 1 ☐ Yes - Go to Section 3 on page 8
- 2 ☐ Don't Know - Continue with item 2
- 3 ☐ No - Continue with item 2

2. Does this operation (named on the label) own and operate any buildings, structures, or facilities for raising hogs or pigs? (such as buildings used for breeding, farrowing, finishing, etc.) (Check one.)

488

- 1 ☐ Yes
- 3 ☐ No

3. Has this operation sold, rented, or turned over any hog facilities to someone else?

☐ Yes - Continue

☐ No - Go to item 5

4. Who is using the hog facilities now?.....

(Enter the name and address of the person or firm now using the facilities.)

5. Was the operator (name on label) operating a farm or ranch on December 1, 2021? (INCLUDE growing crops or raising livestock.)

☐ Yes

☐ Don't Know

☐ No

Operation Name \_\_\_\_\_

Operator Name \_\_\_\_\_

Address \_\_\_\_\_

City, St., ZIP \_\_\_\_\_

Phone \_\_\_\_\_

check if cell  
phone

☐

(Write a note to describe the current status of this operation, then continue with Section 3 on page 8.)

**Skip to next page**

**Or**

**Space for Notes and Comments**

## Section 3 - Conclusion

1. Do you (the operator named on the label) make any day-to-day decisions for another hog operation?

☐ Yes - Continue

☐ No - Go to Comments

a. What is the name of the other hog operation(s)? ..

Operation Name: _____			
Address: _____			
City: _____	State: _____	ZIP: _____	
Phone: (____) _____			check if cell phone <input type="checkbox"/>

Comments:

2. To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:
1095

Operation Email: (if different from above)	Operation Phone:	
9937	9936	check if cell phone <input type="checkbox"/>
	(____) - _____	

Respondent Name:	Respondent Phone (if different from above)				
9912	9911	check if cell phone <input type="checkbox"/>	9910	MM	DD YY
_____	(____) - _____		Date:	____	____

This completes the survey. Thank you for your help.

OFFICE USE ONLY									
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989
2-R		2-Spouse		2-PATI (Tel)					_____
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)					
4-Office Hold		4-Partner		6-Email					
5-R – Est		9-Other		7-Fax					
6-Inac – Est				19-Other					
7-Off Hold – Est									
S/E Name									

# TURKEYS RAISED - September 1, 2022

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OMB No. 0535-0004  
Approval Expires: 1/31/2025  
Project Code: 153  
SurveyID: 2973



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

## USDA/NASS

National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@nass.usda.gov](mailto:nass@nass.usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0004. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**Instructions:** If you had any turkeys in 2022, please answer the questions below and on the back page. Please enter a dash when the answer is "none". Report young turkeys for meat production raised for slaughter during September 1, 2021 to August 31, 2022 plus breeder hens and toms reaching the age of 5 months during 2022.

1. Did you (or this firm) own turkeys that were raised during September 1, 2021 to August 31, 2022?

<sup>101</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to question 1b

a. Were any of the turkeys you owned raised by contractees during September 1, 2021 to August 31, 2022?

<sup>102</sup> 1 ☐ Yes - Go to question 2 3 ☐ No - Go to question 2

b. Were any turkeys placed on your operation owned by another person or firm during September 1, 2021 to August 31, 2022?

<sup>104</sup> 1 ☐ Yes - Go to question 3 3 ☐ No - Continue

c. Do you plan to raise any turkeys in the future?

<sup>105</sup> 1 ☐ Yes - Go to Survey Results 3 ☐ No - Go to Survey Results 2 ☐ Don't know - Go to Survey Results

## OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID				
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989				
2-R		2-Spouse		2-PATI (Tel)					_____				
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)									
4-Office Hold		4-Partner		6-Email									
5-R - Est		9-Other		7-Fax									
6-Inac - Est				19-Other									
7-Off Hold - Est									9921	9907	9908	9906	9916
S/E Name													

## Poults Placed

2. How many TOTAL poults placed in all flocks were owned by you between September 1, 2021 to August 31, 2022? INCLUDE poults owned by you that were raised by contractees as well as breeder hens and toms raised to the age of 5 months or more.....

Number Placed

106

Number Placed with  
Contractees

111

- a. Of the total poults placed, how many were placed under a production contract for this operation during September 1, 2021 to August 31, 2022?.....

- b. Of the total poults placed, how many were placed in Kansas and what percent were lost? .....

Number Placed

AND

Percent Lost

200

211

- c. Of the total poults placed, how many were placed in other States and what percent were lost? Only list states other than your home

120

121

220

120

121

220

120

121

220

120

121

220

120

121

220

120

121

220

120

121

220

120

121

220

120

121

220

120

121

220

## Contract Turkey Production

3. How many turkeys were placed on your operation during September 1, 2021 to August 31, 2022 that were owned by another person or firm? .....

Number

107

Please list the name and address of the company or individual that owned the turkeys to avoid duplication.

Name		
Address		
City	State	Zip
Phone	<input type="checkbox"/> Check if cell phone	

OFFICE USE POID

943

**Survey Results:** To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](https://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

## Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone  
☐

Respondent Name:

Respondent Phone: (if different from above)

9912

9911

check if  
cell phone  
☐

9910

MM

DD

YY

Date:

This completes the survey. Thank you for your help.

# TURKEYS RAISED - September 1, 2022

[Click Here to  
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List of Surveys](#)

OMB No. 0535-0004  
Approval Expires: 1/31/2025  
Project Code: 153  
SurveyID: 2973



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

## USDA/NASS

National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@nass.usda.gov](mailto:nass@nass.usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0004. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**Instructions:** If you had any turkeys in 2022, please answer the questions below and on the back page. Please enter a dash when the answer is "none". Report young turkeys for meat production raised for slaughter during September 1, 2021 to August 31, 2022 plus breeder hens and toms reaching the age of 5 months during 2022.

1. Did you (or this firm) own turkeys that were raised during September 1, 2021 to August 31, 2022?

<sup>101</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to question 1b

a. Were any of the turkeys you owned raised by contractees during September 1, 2021 to August 31, 2022?

<sup>102</sup> 1 ☐ Yes - Go to question 2 3 ☐ No - Go to question 2

b. Were any turkeys placed on your operation owned by another person or firm during September 1, 2021 to August 31, 2022?

<sup>104</sup> 1 ☐ Yes - Go to question 3 3 ☐ No - Continue

c. Do you plan to raise any turkeys in the future?

<sup>105</sup> 1 ☐ Yes - Go to Survey Results 3 ☐ No - Go to Survey Results 2 ☐ Don't know - Go to Survey Results

## OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID				
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989				
2-R		2-Spouse		2-PATI (Tel)					_____ - _____ - _____				
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)									
4-Office Hold		4-Partner		6-Email									
5-R - Est		9-Other		7-Fax									
6-Inac - Est				19-Other									
7-Off Hold - Est									9921	9907	9908	9906	9916
S/E Name													

## Poults Placed

2. How many TOTAL poults placed in all flocks were owned by you between September 1, 2021 to August 31, 2022? INCLUDE poults owned by you that were raised by contractees as well as breeder hens and toms raised to the age of 5 months or more.....

Number Placed

106

Number Placed with  
Contractees

111

- a. Of the total poults placed, how many were placed under a production contract for this operation during September 1, 2021 to August 31, 2022?.....

- b. Of the total poults placed, how many were placed in Nebraska and what percent were lost? .....

Number Placed

AND

Percent Lost

200

211

- c. Of the total poults placed, how many were placed in other States and what percent were lost? Only list states other than your home

120

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## Contract Turkey Production

3. How many turkeys were placed on your operation during September 1, 2021 to August 31, 2022 that were owned by another person or firm? .....

Number

107

Please list the name and address of the company or individual that owned the turkeys to avoid duplication.

Name		
Address		
City	State	Zip
Phone	<input type="checkbox"/> Check if cell phone	

OFFICE USE POID

943

**Survey Results:** To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](https://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

## Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone  
☐

Respondent Name:

Respondent Phone: (if different from above)

9912

9911

check if  
cell phone  
☐

9910

MM

DD

YY

Date:

This completes the survey. Thank you for your help.

# TURKEYS RAISED - September 1, 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No. 0535-0004  
Approval Expires: 1/31/2025  
Project Code: 153  
SurveyID: 2973



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

## USDA/NASS

National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@nass.usda.gov](mailto:nass@nass.usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0004. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

**Instructions:** If you had any turkeys in 2022, please answer the questions below and on the back page. Please enter a dash when the answer is "none". Report young turkeys for meat production raised for slaughter during September 1, 2021 to August 31, 2022 plus breeder hens and toms reaching the age of 5 months during 2022.

1. Did you (or this firm) own turkeys that were raised during September 1, 2021 to August 31, 2022?

<sup>101</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to question 1b

a. Were any of the turkeys you owned raised by contractees during September 1, 2021 to August 31, 2022?

<sup>102</sup> 1 ☐ Yes - Go to question 2 3 ☐ No - Go to question 2

b. Were any turkeys placed on your operation owned by another person or firm during September 1, 2021 to August 31, 2022?

<sup>104</sup> 1 ☐ Yes - Go to question 3 3 ☐ No - Continue

c. Do you plan to raise any turkeys in the future?

<sup>105</sup> 1 ☐ Yes - Go to Survey Results 3 ☐ No - Go to Survey Results 2 ☐ Don't know - Go to Survey Results

## OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID				
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989				
2-R		2-Spouse		2-PATI (Tel)					_____				
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)									
4-Office Hold		4-Partner		6-Email									
5-R - Est		9-Other		7-Fax									
6-Inac - Est				19-Other									
7-Off Hold - Est									9921	9907	9908	9906	9916
S/E Name													



## Poults Placed

2. How many TOTAL poults placed in all flocks were owned by you between September 1, 2021 to August 31, 2022? INCLUDE poults owned by you that were raised by contractees as well as breeder hens and toms raised to the age of 5 months or more.....

Number Placed

106

Number Placed with  
Contractees

111

- a. Of the total poults placed, how many were placed under a production contract for this operation during September 1, 2021 to August 31, 2022?.....

- b. Of the total poults placed, how many were placed in South Dakota and what percent were lost? .....

Number Placed

AND

Percent Lost

200

211

- c. Of the total poults placed, how many were placed in other States and what percent were lost? Only list states other than your home

120

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## Contract Turkey Production

3. How many turkeys were placed on your operation during September 1, 2021 to August 31, 2022 that were owned by another person or firm? .....

Number

107

Please list the name and address of the company or individual that owned the turkeys to avoid duplication.

Name		
Address		
City	State	Zip
Phone	<input type="checkbox"/> Check if cell phone	

OFFICE USE POID

943

**Survey Results:** To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](https://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

## Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone  
☐

Respondent Name:

Respondent Phone: (if different from above)

9912

9911

check if  
cell phone  
☐

9910 MM DD YY  
Date: \_ \_ \_ \_ \_

This completes the survey. Thank you for your help.

# TURKEYS RAISED - September 1, 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No. 0535-0004  
Approval Expires: 1/31/2025  
Project Code: 153  
SurveyID: 2973



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

## USDA/NASS

National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@nass.usda.gov](mailto:nass@nass.usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

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**Instructions:** If you had any turkeys in 2022, please answer the questions below and on the back page. Please enter a dash when the answer is "none". Report young turkeys for meat production raised for slaughter during September 1, 2021 to August 31, 2022 plus breeder hens and toms reaching the age of 5 months during 2022.

1. Did you (or this firm) own turkeys that were raised during September 1, 2021 to August 31, 2022?

<sup>101</sup> 1 ☐ Yes - Continue 3 ☐ No - Go to question 1b

a. Were any of the turkeys you owned raised by contractees during September 1, 2021 to August 31, 2022?

<sup>102</sup> 1 ☐ Yes - Go to question 2 3 ☐ No - Go to question 2

b. Were any turkeys placed on your operation owned by another person or firm during September 1, 2021 to August 31, 2022?

<sup>104</sup> 1 ☐ Yes - Go to question 3 3 ☐ No - Continue

c. Do you plan to raise any turkeys in the future?

<sup>105</sup> 1 ☐ Yes - Go to Survey Results 3 ☐ No - Go to Survey Results 2 ☐ Don't know - Go to Survey Results

## OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID				
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2-R		2-Spouse		2-PATI (Tel)					_____ - _____ - _____				
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)									
4-Office Hold		4-Partner		6-Email									
5-R - Est		9-Other		7-Fax									
6-Inac - Est				19-Other									
7-Off Hold - Est									9921	9907	9908	9906	9916
S/E Name													

## Poults Placed

2. How many TOTAL poults placed in all flocks were owned by you between September 1, 2021 to August 31, 2022? INCLUDE poults owned by you that were raised by contractees as well as breeder hens and toms raised to the age of 5 months or more.....

Number Placed

106

Number Placed with  
Contractees

111

- a. Of the total poults placed, how many were placed under a production contract for this operation during September 1, 2021 to August 31, 2022?.....

- b. Of the total poults placed, how many were placed in North Dakota and what percent were lost? .....

Number Placed

AND

Percent Lost

200

211

- c. Of the total poults placed, how many were placed in other States and what percent were lost? Only list states other than your home

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## Contract Turkey Production

3. How many turkeys were placed on your operation during September 1, 2021 to August 31, 2022 that were owned by another person or firm? .....

Number

107

Please list the name and address of the company or individual that owned the turkeys to avoid duplication.

Name		
Address		
City	State	Zip
Phone	<input type="checkbox"/> Check if cell phone	

OFFICE USE POID

943

**Survey Results:** To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](https://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

## Contact Information

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone  
☐

Respondent Name:

Respondent Phone: (if different from above)

9912

9911

check if  
cell phone  
☐

9910 MM DD YY  
Date: \_ \_ \_ \_ \_

This completes the survey. Thank you for your help.

# FORM A CORN YIELD SURVEY - 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No.: 0535-0088  
Approval Expires: 3/31/2023  
Project Code: 104  
Survey ID: 1964



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

Please make corrections to name, address and ZIP Code, if necessary.

Date: \_\_\_\_\_

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response to this survey is voluntary.

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Earlier this season you gave a representative from our office information about the corn acreage on your farming operation. We are now collecting information to help determine corn production in (Your State) and the United States.

\_\_\_\_\_\*

1. Now I want to update this corn acreage information. What is the current number of corn acres you planted for all purposes on all the land you operate in the tract?..... **ACRES**
2. What are the total acres of corn to be harvested for grain or seed on all the land you operate in the tract? (If total equals zero, end interview)..... **ACRES**

105	_____
102	_____

Notes:

- For the Sample Field(s) in the tract, complete Table A for the corn field(s) based off the cardinal directions indicated on the label (e.g., northern most field)
- Select corn field regardless if the field is intended to be harvested for grain/seed or other use.

[illegible]

FORM A: CORN - Continued

All questions below apply to this SAMPLE.

3. For the Sample Field, subtract Column 4 from Column 2 for the total acres of corn to be harvested for grain or seed. Report these acres here:..... **ACRES**

103
-----
4. What was the planter row width setting?..... **INCHES**

107
-----

5. On what date was planting completed in this corn field?..... **MM DD**

109
-----

**Kansas and Nebraska Only for Item 6**

6. Has this field been (or will it be) irrigated?    1 ☐ Yes    3 ☐ No    2 ☐ Don't Know    **CODE**

104
-----

7. With your permission I will go out to the field and mark off two small plots to be used in making stalk and ear counts. I will return to the plots each month until harvest to make counts and measurements, and harvest and weigh a few ears. Would that be all right?

☐ Yes - Continue. (Inform respondent what day/approximate time you intend mark off two small plots to be used in making stalk and ear counts)

☐ No - Conclude interview, enter data in to CAPI, and return all forms.

8. Have you or will you apply pesticides with organophosphorus content to the sample field?

☐ Yes

☐ No

☐ Don't know

If yes, enter latest application date \_\_\_\_\_ and name of pesticide \_\_\_\_\_.

9. Where should I leave the corn picked from the units? \_\_\_\_\_

(Copy to the sample kit envelope the location where the operator wishes you to leave the corn.)

10. Do you intend to harvest this field as high moisture corn?  
(High moisture corn is defined as corn with moisture content of 30 percent or more.)

☐ Yes

☐ No

☐ Don't know

NOTE: If this is a gleaning sample, tell the operator "After harvest, I will also lay out two small plots to determine harvest loss."

11. Respondent Name: \_\_\_\_\_

**PLEASE CHECK THE FOLLOWING:**

- Review the form for completeness
- Sign name
- On the kit envelope, record operator's
  - Telephone number
  - Expected harvest date
  - Pesticide intentions (Item 8), and
  - Location to leave corn (Item 9)

**Enumerator Number**

190
-----

**Supervisor Number**

191
-----

**Evaluation**

193
-----

12. Enumerator Name: \_\_\_\_\_

**STATUS CODE**

180
-----

---

NOTES:

**Survey Results:** To receive the complete results of this survey on the release date, go to:  
[www.nass.usda.gov/results](http://www.nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:
1095

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone
	(      ) - _____	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
_____	(      ) - _____	<input type="checkbox"/>	Date:	__	__	__

**This completes the survey. Thank you for your help.**

# FORM B CORN YIELD COUNTS - 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No.: 0535-0088  
Approval Expires: 3/31/2023  
Project Code: 104  
Survey ID: 3224



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

Date: \_\_\_\_\_

## UNIT LOCATION

1. Number of paces along edge of field.....

UNIT 1		UNIT 2
	+ 30	
	+ 30	

2. Number of paces into field.....

3. Has operator applied pesticides with organophosphorus content to the sample field?

☐

Yes

☐

No

If YES, enter latest application date \_\_\_\_\_ and name of pesticide \_\_\_\_\_

4. UNIT LOCATION CODE.....

- 1 First visit to lay out unit  
2 Unit relocated this month  
3 Sample unit laid out previously

UNIT 1	UNIT 2
302	307

Enter Code

If code = 3, skip to Item 6

## 5. ROW SPACE MEASUREMENTS

a. Measure distance from stalks in Row 1 to stalks in Row 2.....

Feet & Tenths

UNIT 1
303 .
305 .

UNIT 2

304 .
306 .

b. Measure distance from stalks in Row 1 to stalks in Row 5.....

Feet & Tenths

## Designated Measurement Areas:

MATURITY CODES FOR ITEM 6			
For Month	Use Area Beyond	Maturity Code	
Sept. 1	Unit 1, Row 1	2 = Pre-Blister	5 = Dough
Oct. 1	Unit 1, Row 2	3 = Blister	6 = Dent
Nov. 1	Unit 2, Row 1	4 = Milk	7 = Mature

Husk the first 5 ears or silked ear shoots beyond the unit in the designated measurement area and examine for maturity. Enter the maturity code in the box for the corresponding ear, sum the five maturity codes and enter the total in cell 301.

If ears or silked ear shoots are not yet present, Check ☐ and complete Item 11 only.

EAR NUMBER					TOTAL OF 5 EARS
1	2	3	4	5	
					301

## 6. MATURITY CODE of first 5 ears or silked ear shoots

a. Will harvest occur within 3 days?

☐

No - Go to Item 6b

☐

Yes - Complete Items 11, 14, 15, 16 & 17

c. Does Item 301 equal 23 or more?

☐

No - Go to Item 6d

☐

Yes - Complete Items 7, 8, 9, 10, 11 & 14

b. Are three or more ears in maturity code 7?

☐

No - Go to Item 6c

☐

Yes - Complete Items 11, 14, 15, 16 & 17

d. Does Item 301 equal 13 to 22?

☐

No - Complete Items 11, 12, 13 & 14

☐

Yes - Complete Items 7, 8, 9, 10, 11, 12, 13 & 14



# EAR NUMBER

7. Maturity code of each of the first 5 ears Code 3 or higher (*copy maturity from Item 6. Replace Code 2 ears with next code 3 or higher.*)..... Code
8. Average length of kernel rows (*Item 7 ears*)..... Inches & Tenths
9. Diameter of the ear one inch from the butt of the cob (*Item 7 ears*)..... Millimeters & Tenths
10. Are 3 or more ears (*Item 7*) in maturity code 6 or 7?

1	2	3	4	5
320	321	322	323	324
326	327	328	329	330
336	337	338	339	340

- ☐ No - Continue to Item 11
- ☐ Yes -
1. Harvest the first 5 ears beyond the unit which are coded 6 or 7.
  2. Place the third and fourth ears in a cloth bag and attach a completed ID tag to the outside.
  3. Place the other three (*first, second and fifth*) ears in a Tyvek envelope.
  4. Place the cloth bag containing the third and fourth ears in the envelope with the other three ears.
  5. Ship the sealed Tyvek envelope with all 5 ears to the National Lab.
  6. Check Here ☐ when complete.

## COUNTS WITHIN 15 FOOT UNITS

11. Number of stalks .....
12. Number of stalks with ears or silked ear shoots (*Item 12 cannot exceed Item 11 for any row.*).....
13. Number of ears and silked ear shoots (*Item 13 MUST equal or exceed Item 12 for any row.*).....
14. Number of ears with evidence of kernel formation (*Item 14 cannot exceed Item 13 for any row.*).....

UNIT 1		UNIT 2	
ROW 1	ROW 2	ROW 1	ROW 2
331	332	333	334
341	342	343	344
351	352	353	354
361	362	363	364

## HARVESTING SAMPLE UNITS

15. HUSK and TAG the 3rd and the 4th ears in Row 1 of both units. Husk remaining ears and weigh ALL ears with grain in Row 1 of each unit regardless of maturity stage.  
**Number of ears husked** with grain (*include 3rd and 4th ears*).....  
**Verify:** Cell 312 equals Item 14 cell 361 and cell 313 equals Item 14 cell 363

UNIT 1, ROW 1	UNIT 2, ROW 1
312	313

16. Weight of ears with grain and any accidentally shelled kernels from Row 1 of each unit (*include 3rd and 4th ears, exclude weight of containers*).....  
 Pound & Hundredths

314	315
-----	-----

17. Place 3rd and 4th ears of Row 1 in separate plastic bags for each unit. After completing Items 15 and 16, send 3rd and 4th ears to the National Lab.

18. Did you leave the ears of corn where the operator requested?

☐ Yes ☐ No

ENUMERATOR COMMENTS:

ENUMERATOR:

19. Did a supervisor assist you in working a sample? ☐ Yes ☐ No

UPS Tracking Number:

(For samples sent to National Laboratory)

Enumerator Number	390
Supervisor Number	391
Evaluation	393

STATUS CODE

380

# FORM E CORN OBJECTIVE YIELD - 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No.: 0535-0088  
Approval Expires: 3/31/2023  
Project Code: 104  
Survey ID: 3227



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

Please make corrections to name, address and ZIP Code, if necessary.

Date: \_\_\_\_\_

**NOTE:** The post-harvest field gleanings should be completed as soon after harvest as possible, and must be done within 3 days after harvest. If the sample field has been plowed, disked, or pastured since harvest, select an alternate field for gleanings if one is available in the tract.

## UNIT LOCATION

1. Number of paces along edge of field.....
2. Number of paces into field.....

UNIT 1	UNIT 2
+ 5	+ 5
+ 5	+ 5

## FIELD OBSERVATIONS

3. Measure distance from stalks in Row 1 to stalks in Row 2..... Feet and Tenths
4. Measure distance from stalks in Row 1 to stalks in Row 5..... Feet and Tenths

UNIT 1	UNIT 2
701 .	702 .
703 .	704 .

## GLEANINGS IN 15-FOOT UNITS

CHECK EACH BOX AS COMPLETED

5. Pick up all ears attached to stalks, all ears, and pieces of ears with kernels in each row middle. Shell and deposit all grain in paper bag. Identify bag as "shelled grain".....
6. Pick up loose grain in the middle of the first row of each unit. Deposit in separate paper bag. Identify bag as "loose grain".....

ROW 1	ROW 2	ROW 1	ROW 2
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>		<input type="checkbox"/>	

Check

Check

7. Was an alternate field used for making post-harvest observations?

☐ Yes - (Indicate in Field Notes) ☐ No

**FIELD NOTES:** If post-harvest observations cannot be made, give reasons

---



---

8. Did a supervisor assist you in working this sample? ☐ Yes ☐ No

**SHIPPING INSTRUCTIONS:**

- a. Attach completed ID tag to the paper bag(s) containing gleanings.
- b. Place bag(s) and this Form E in a Tyvek envelope.
- c. Ship Tyvek envelope to National Lab.

Enumerator Number

790

Supervisor Number

791

ENUMERATOR: \_\_\_\_\_

STATUS CODE

780

**NATIONAL LABORATORY DETERMINATIONS**

Date sample received in lab (MM DD) \_\_\_\_\_

9. Weight of grain from ears.....

Grams to Hundredths

707

10. Weight of loose grain from ground.....

Grams to Hundredths

708

11. Moisture <sup>1/</sup>.....

Percent (One Decimal)

709

*<sup>1/</sup>If sample weight is too small for moisture test, sufficient grains of known moisture content will be added to the sample so that a moisture test can be made. The moisture content of the sample can then be derived using the following formula:*

$$E = \frac{(A + B) D - (B \times C)}{A}$$

Where A = Weight of small corn sample (item 7 & 8) .....

. \_\_\_\_ Grams

B = Weight of additional grains required for moisture test .....

. \_\_\_\_ Grams

C = Moisture percent of B .....

. \_\_\_\_ Percent

D = Moisture percent of A + B combined .....

. \_\_\_\_ Percent

E = Result: Moisture percent of small sample (enter in item 9) .....

. \_\_\_\_ Percent

Lab Technician(s) \_\_\_\_\_

Date Analysis Completed \_\_\_\_\_

MM DD

# FORM A SOYBEAN YIELD SURVEY - 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No.: 0535-0088  
Approval Expires: 3/31/2023  
Project Code: 102  
Survey ID: 1965



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

Please make corrections to name, address and ZIP Code, if necessary.

Date: \_\_\_\_\_

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Earlier this season you gave a representative from our office information about the soybean acreage on your farming operation. We are now collecting information to help determine soybean production in (*Your State*) and the United States.

\_\_\_\_\_\*

1. Now I want to update this soybean acreage information. What is the current number of soybean acres you planted for all purposes on all the land you operate in the tract?..... **ACRES**
2. What are the total acres of soybeans to be harvested for beans on all the land you operate in the tract? (If total equals zero, end interview.)..... **ACRES**

112

102 \_\_\_\_\_

Notes:

- For the Sample Field(s) in the tract, complete Table A for the soybean field(s) based off the cardinal directions indicated on the label (e.g., northern most field)

## Table A

[illegible]

All questions below apply to this SAMPLE.

3. For the Sample Field, subtract Column 4 from Column 2 for the total acres of soybeans harvested for beans. Report these acres here:..... **ACRES** 103
4. What was the row width (planter setting) for the soybeans in the sample field?..... **INCHES** 110
5. On what date was planting completed in this soybean field?..... **MM DD** 107

### Kansas and Nebraska Only for Item 6

6. Has this field been (or will it be) irrigated? 1 ☐ Yes 3 ☐ No 2 ☐ Don't Know **CODE** 114

### Arkansas Only for Item 7

7. What Maturity Group are the soybeans in the selected field?..... 2=Group II  
3=Group III  
4=Group IV  
5=Group V  
6=Group VI  
7=Group VII  
8=Don't Know **CODE** 108

8. With your permission I will go out to the field and mark off two small plots to be used in making plant and fruit counts. I will return to the plots each month until harvest to make counts and measurements, and harvest and weigh a few beans. Would that be all right?

☐ Yes - Continue.(Inform respondent what day/approximate time you intend mark off two small plots to be used in making plant and fruit counts.)

☐ No - Conclude interview, enter data in to CAPI, and then go to Item 10.Return all forms after item 10.

- a. The United Soybean Board (USB) has requested permission to use the soybean samples for compositional traits and disease analysis. **Do we have your permission** to provide your soybean sample to USB?

1 ☐ Yes 3 ☐ No **CODE** 131

9. Have you or will you apply pesticides with organophosphorus content to the sample field?

☐ Yes ☐ No ☐ Don't Know

If yes, enter latest application date \_\_\_\_\_ and name of pesticide \_\_\_\_\_.

NOTE: If this is a gleaning sample, tell the operator,  
"After harvest, I will also lay out two small plots to determine harvest loss."

10. Respondent Name: \_\_\_\_\_

### PLEASE CHECK THE FOLLOWING:

- Review the form for completeness
- Sign name
- On the kit envelope, record operator's  
Telephone number.  
Expected harvest date.  
Pesticide intentions (Item 9).

Enumerator Number 190

Supervisor Number 191

Evaluation 193

11. Enumerator Name: \_\_\_\_\_

**STATUS CODE** 180

---

NOTES:

**Survey Results:** To receive the complete results of this survey on the release date, go to:  
[www.nass.usda.gov/results](http://www.nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:
1095

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone
	(      ) - _____	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
_____	(      ) - _____	<input type="checkbox"/>	Date:	__	__	__

**This completes the survey. Thank you for your help.**

# FORM B SOYBEAN YIELD COUNTS - 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No.: 0535-0088  
Approval Expires: 3/31/2023  
Project Code: 102  
Survey ID: 3228



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

Date: \_\_\_\_\_

## UNIT LOCATION

1. Number of paces along edge of field.....
2. Number of paces into field.....
3. Has operator applied pesticides with organophosphorus content to the sample field?

☐ Yes

☐ No

If YES, enter latest application date \_\_\_\_\_ and name of pesticide \_\_\_\_\_

4. UNIT LOCATION CODE.....

1 First visit to lay out unit  
2 Unit relocated this month  
3 Sample unit laid out previously

Enter Code

UNIT 1

UNIT 2

	+ 30
	+ 30


UNIT 1

UNIT 2

350
-----

351
-----

If code = 3, skip to Item 6

5. ROW SPACE MEASUREMENTS

UNIT 1

UNIT 2

- a. Measure distance from plants in Row 1 to plants in Row 2..... Feet & Tenths

301	_____
304	_____

303	_____
305	_____

- b. Measure distance from plants in Row 1 to plants in Row 5..... Feet & Tenths

## OBSERVATIONS WITHIN 3-FOOT UNITS

UNIT 1

UNIT 2

ROW 1	ROW 2
306	307

ROW 1	ROW 2
308	309

6. Number of plants in row.....

7. Stage of maturity. Circle the Maturity Code for each unit.

When in doubt, classify the unit in the lower stage of maturity.

	Pods Set, Leaves Still Green or Earlier	Pods Filled, Leaves Turning Yellow	Pods Turning Color, Leaves Shedding	Pods Brown, Almost Mature or Mature
UNIT 1	300 2	300 3	300 4	300 5
UNIT 2	302 2	302 3	302 4	302 5

For each unit in Stage 2,  
complete items 8, 9, 10, 11  
and 12 only

For each unit in Stage 3 or 4,  
complete items 8 and 12 only.

For each unit in Stage 5, complete  
items 8, 12, 13 and 14 only



**FORM B: SOYBEANS** - *continued***COUNTS for 6-INCH ROW SECTIONS** (in front of 3-foot units)

If no plants are present, enter dashes (-) for items 8 thru 12. In each unit, complete all items for Row 1 before starting on Row 2. Perform the check after completing item 12.

8. Number of plants
9. Number of nodes on main stem of plants
10. Number of lateral branches with blooms, dried flowers, or pods
11. Number of blooms, dried flowers, and pods
12. Number of pods with beans (include all pods in which beans have begun to form regardless of size or condition of beans)

UNIT 1		UNIT 2	
ROW 1	ROW 2	ROW 1	ROW 2
310	311	312	313
314	315	316	317
318	319	320	321
326	327	328	329
346	347	348	349

FOR ANY ROW, if item 12 is greater than item 11, recount 11 and 12.

**STAGE 5 MATURITY OR FARMER HARVEST WITHIN 3 DAYS**

13. When MATURITY is in Stage 5 Only:

- Harvest all pods (all sizes with or without beans) from all plants in the 3-foot section of Row 1 for each unit in Stage 5. **NOTE:** Special care should be taken so that pods are not damaged to ensure an accurate count of pods at the National Lab.
- Pick up all beans and loose pods in Row 1 middle
- Deposit the pods and beans from each unit in separate paper bags.
- Always complete and SHIP TWO ID TAGS even if ONE UNIT is not mature enough or has no pods
- Attach ID tags and ship soybeans to the National Lab.

14. Did you pick ANY pods or beans from Row 1 and send them to the National Lab? (Maturity Code must be Stage 5, or farmer harvest is expected within three days, to be picked.)

UNIT 1		UNIT 2	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If counts were NOT completed for one or both units, give reason in comments.

ENUMERATOR COMMENTS:

ENUMERATOR:

15. Did a supervisor assist you in working this sample?

☐ Yes ☐ No

Enumerator Number	390
Supervisor Number	391
Evaluation	393

**UPS TRACKING NUMBER:**

(For soybean samples sent to National Laboratory)

UNIT 1		UNIT 2	
STATUS CODE	380	STATUS CODE	381

# FORM E SOYBEAN YIELD SURVEY - 2022

[Click Here to  
return to  
List of Surveys](#)

OMB No.: 0535-0088  
Approval Expires: 3/31/2023  
Project Code: 102  
Survey ID: 3229



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

Please make corrections to name, address and ZIP Code, if necessary.

Date: \_\_\_\_\_

## UNIT LOCATION

1. Number of paces along edge of field.....
2. Number of paces into field.....

UNIT 1	UNIT 2
+ 5	+ 5
+ 5	+ 5

## FIELD OBSERVATIONS

3. Measure distance from plants in Row 1 to plants in Row 2..... Feet and Tenths
4. Measure distance from plants in Row 1 to plants in Row 5..... Feet and Tenths

UNIT 1	UNIT 2
701 _____	702 _____
703 _____	704 _____

## GLEANINGS IN 3-FOOT UNITS

*Put all pods from both units and all whole beans and pieces from both units in the same paper bag*

5. Pick all pods with beans attached to plants, and loose pods with beans in each row middle and deposit in a paper bag .....
6. Pick up all whole beans and pieces of beans in each row middle and deposit in the same paper bag used for above item..
7. Was an alternate field used for making post-harvest observations?

CHECK EACH BOX AS COMPLETED

	UNIT 1		UNIT 2	
	ROW 1	ROW 2	ROW 1	ROW 2
Check	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Yes - (Indicate in Field Notes)    ☐ No

FIELD NOTES: If post-harvest observations cannot be made, given reasons here.

---



---

## FORM E: SOYBEANS - continued

8. Did a supervisor assist you in working this sample? ☐ Yes ☐ No

ENUMERATOR: \_\_\_\_\_

Enumerator Number

790

Supervisor Number

791

**SHIPPING INSTRUCTIONS:**

- Attach completed ID tag to the paper bag(s) containing gleanings.
- Place bag(s) and this Form E in a Tyvek envelope.
- Ship Tyvek envelope to the National Lab.

STATUS CODE

780

**NATIONAL LABORATORY DETERMINATIONS**

Date sample received in lab (MM DD) \_\_\_\_\_

*Discard any pods with undeveloped beans. Thresh and hull all other pods from bag; combine with loose whole beans and pieces of beans.*

9. Total weight of threshed and loose beans immediately before moisture test.. Grams to Hundredths

714

10. Moisture content of beans, rounded to tenths <sup>1/</sup>..... Percent

715

<sup>1/</sup>If sample weight is too small for moisture test, sufficient beans of known moisture content will be added to the sample so that a moisture test can be made. The moisture content of the sample can then be derived using the following formula.

$$E = \frac{(A + B) D - (B \times C)}{A}$$

Where A = Weight of small sample (item 7) ..... . \_\_\_\_ Grams

B = Weight of additional beans required for moisture test ..... . \_\_\_\_ Grams

C = Moisture percent of B ..... . \_\_\_\_ Percent

D = Moisture percent of A + B combined ..... . \_\_\_\_ Percent

E = Result: Moisture percent of small sample (enter in item 8) ..... . \_\_\_\_ Percent

Lab Technician(s) \_\_\_\_\_

Date Analysis Completed \_\_\_\_\_

MM DD

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 154  
SurveyId:3991 Version 20



USDA/NASS - Kansas  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response to this survey is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0535-0213. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

We need to know about all cattle and calves on feed for the slaughter market, regardless of ownership, on the total acres operated.

- INCLUDE cattle being fed by you for others.
- EXCLUDE any of your cattle being custom fed in feedlots operated by others.
- EXCLUDE cattle being "backgrounded only" for sale as feeders, for later placement on feed in another feedlot, or to be returned to pasture.
- EXCLUDE "cows and bulls" on feed.

		NUMBER
1. How many cattle and calves were on feed September 1, that will go directly from this operation to the slaughter market?.....		652
2. During August, how many cattle and calves:		
a. were placed on feed in your feedlot(s)?.....		653
b. were shipped to slaughter market from your feedlot(s)?.....		654
c. were shipped to someone else's feedlot(s)?.....		655
d. were returned to grazing?.....		656
e. died?.....		657
3. Of the number placed [Item 2a], how many or what percent weighed:		
a. Less than 600 pounds?.....	PERCENT	HEAD
b. 600 - 699 pounds?.....	661	671
c. 700 - 799 pounds?.....	662	672
d. 800 - 899 pounds?.....	663	673
e. 900 - 999 pounds?.....	682	692
f. 1,000 pounds and over?.....	683	693
	684	694
	100%	(Total must equal Item 2a)
TOTAL		

OVER PLEASE

HAY PRICES

- INCLUDE any size or type of dry hay bale but exclude hay bought as standing hay.
- EXCLUDE all hay purchased from dealers or any source other than farmers.
- EXCLUDE straw, haylage, greenchop, and baleage.

4. How many tons of baled alfalfa hay and alfalfa hay mixtures did you purchase from other farmers in August?.....

TONS289

5. What was the total amount you paid for the alfalfa hay and alfalfa hay mixtures purchased from other farmers in August?.....

DOLLARS181

6. How many tons of other baled hay, including fescue, clover, bermuda, sudan, sudan crosses, lespedeza, bahia, timothy, grain, ryegrass, other grass, other tame, and wild hays did you purchase from other farmers in August?.....

TONS319

7. What was the total amount you paid for the other baled hay purchased from other farmers in August?...

DOLLARS187

8. Has this operation (name on label) been sold, or turned over to someone else?

1 ☐ Yes - Identify the new operator(s) 3 ☐ No - Go to Item 9

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐ Check if cell phone.

a. Did this person operate land individually on June 1, 2022? 1 ☐ Yes 3 ☐ No

9. Survey Results: To receive the complete results of this survey on the release date, go to:  
[www.nass.usda.gov/results](http://www.nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address.

1095

Operation Email: (if different from above)9937

Operation Phone:9936

( \_\_\_\_\_ ) \_\_\_\_\_

check if cell phone ☐

Respondent Name:9912

Respondent Phone (if different from above):9911

( \_\_\_\_\_ ) \_\_\_\_\_

check if cell phone ☐

9910 MM DD YY

Date: \_\_\_\_\_

Office Use9909916

OFFICE USE ONLY									
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989
							R. Unit		
							9921		9907990899069916
S/E Name									

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 154  
SurveyId:3991 Version 31



USDA/NASS - Nebraska  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response to this survey is voluntary.

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• EXCLUDE any of your cattle being custom fed in feedlots operated by others.

• EXCLUDE cattle being "backgrounded only" for sale as feeders, for later placement on feed in another feedlot, or to be returned to pasture.

• EXCLUDE "cows and bulls" on feed.

1. How many cattle and calves were on feed September 1, that will go directly from this operation to the slaughter market?.....

2. During August, how many cattle and calves:

a. were placed on feed in your feedlot(s)?.....

b. were shipped to slaughter market from your feedlot(s)?.....

c. were shipped to someone else's feedlot(s)?.....

d. were returned to grazing?.....

e. died?.....

3. Of the number placed [Item 2a], how many or what percent weighed:

a. Less than 600 pounds?.....

b. 600 - 699 pounds?.....

c. 700 - 799 pounds?.....

d. 800 - 899 pounds?.....

e. 900 - 999 pounds?.....

f. 1,000 pounds and over?.....

TOTAL

NUMBER

652

653

654

655

656

657

PERCENT

661

662

663

682

683

684

100%

OR

HEAD

671

672

673

692

693

694

(Total must equal Item 2a)

OVER PLEASE

HAY PRICES

- INCLUDE any size or type of dry hay bale but exclude hay bought as standing hay.
- EXCLUDE all hay purchased from dealers or any source other than farmers.
- EXCLUDE straw, haylage, greenchop, and baleage.

4. How many tons of baled alfalfa hay and alfalfa hay mixtures did you purchase from other farmers in August?.....

TONS289

5. What was the total amount you paid for the alfalfa hay and alfalfa hay mixtures purchased from other farmers in August?.....

DOLLARS181

6. How many tons of other baled hay, including fescue, clover, bermuda, sudan, sudan crosses, lespedeza, bahia, timothy, grain, ryegrass, other grass, other tame, and wild hays did you purchase from other farmers in August?.....

TONS319

7. What was the total amount you paid for the other baled hay purchased from other farmers in August?...

DOLLARS187

8. Has this operation (name on label) been sold, or turned over to someone else?

1 ☐ Yes - Identify the new operator(s) 3 ☐ No - Go to Item 9

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐ Check if cell phone.

a. Did this person operate land individually on June 1, 2022? 1 ☐ Yes 3 ☐ No

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1095

Operation Email: (if different from above)

9937

Operation Phone:

9936

( \_\_\_\_\_ ) \_\_\_\_\_

check if cell phone ☐

Respondent Name:

9912

Respondent Phone (if different from above)

9911

( \_\_\_\_\_ ) \_\_\_\_\_

check if cell phone ☐

9910 MM DD YY

Date: \_\_\_\_\_

Office Use

9909

916

OFFICE USE ONLY									
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989
							R. Unit		
							9921		
									Optional Use
									9907 9908 9906 9916
S/E Name									

OMB No.0535-0213  
Approval Expires: 4/30/2024  
Project Code: 154  
SurveyId:3991 Version 46



USDA/NASS - South Dakota  
Northern Plains Region  
100 Centennial Mall North Rm 263  
Lincoln, NE 68508  
Phone: 1-800-582-6443  
Fax: 1-855-270-2720  
E-mail: NASSRFONPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

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d. were returned to grazing?.....

e. died?.....

3. Of the number placed [Item 2a], how many or what percent weighed:

a. Less than 600 pounds?.....

b. 600 - 699 pounds?.....

c. 700 - 799 pounds?.....

d. 800 - 899 pounds?.....

e. 900 - 999 pounds?.....

f. 1,000 pounds and over?.....

TOTAL

NUMBER

652

653

654

655

656

657

PERCENT

661

662

663

682

683

684

100%

OR

HEAD

671

672

673

692

693

694

(Total must equal Item 2a)

OVER PLEASE



HAY PRICES

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DOLLARS181

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TONS319

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DOLLARS187

8. Has this operation (name on label) been sold, or turned over to someone else?

1 ☐ Yes - Identify the new operator(s) 3 ☐ No - Go to Item 9

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ ☐ Check if cell phone.

a. Did this person operate land individually on June 1, 2022? 1 ☐ Yes 3 ☐ No

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1095

Operation Email: (if different from above)

9937

Operation Phone:

9936

( \_\_\_\_\_ ) \_\_\_\_\_

check if cell phone ☐

Respondent Name:

9912

Respondent Phone (if different from above)

9911

( \_\_\_\_\_ ) \_\_\_\_\_

check if cell phone ☐

9910 MM DD YY

Date: \_\_\_\_\_

Office Use

9909

916

OFFICE USE ONLY									
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989
							R. Unit		
							9921		
									Optional Use
									9907 9908 9906 9916
S/E Name									


MILK PRODUCTION REPORT– OCTOBER 1, 2022

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List of Surveys

OMB No. 0535-0020  
Approval Expires: 6/30/2024  
Project Code: 178  
SurveyId: 3336  
Version: C - IL, IA, KS, KY, MO, NE, NV, ND,  
OH, OK, OR, SD, WA,



United States  
Department of  
Agriculture



NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE

USDA/NASS  
National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
E-mail: [nass@usda.gov](mailto:nass@usda.gov)

Please make corrections to name, address and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response to this survey is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number is 0535-0020. The time required to complete this information collection is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

1. Were any milk cows, including any dry cows, on this operation on October 1, 2022?

☐ Yes - Go to item 2      ☐ No      a. Will there be any milk cows on this operation during 2022?

1 ☐ Yes

2 ☐ Don't Know

3 ☐ No

OFFICE USE  
491

Please sign and return this report in the enclosed envelope.

2. How many milk cows, including any dry cows, were on this operation on October 1?  
EXCLUDE any heifers not yet freshened.....

Number	352
	349
	501 Lbs.
	503
	504 Lbs.
\$	514

a. How many cows were milked on this operation on October 1?.....

Number

b. How much milk was produced on this operation October 1? (Only one day's production).....

502

Gals.

OR

i. How much of this milk (2b) was used for food or drink by all people on this farm?.....

Quarts

ii. How much of this milk (2b) was fed as whole milk (unskimmed) to calves or other livestock on this operation? (Do not include milk sucked by calves.).....

505

Gals.

OR

3. Milk cows for dairy herd replacement - Average price per head in your locality?  
EXCLUDE heifers that have not calved.....

CONTINUE ON BACK

- HAY PRICES
- INCLUDE any size or type of dry hay bale but exclude hay bought as standing hay.

EXCLUDE all hay purchased from dealers or any source other than farmers.

EXCLUDE straw, haylage, greenchop, and baleage.

1. How many tons of baled alfalfa hay and alfalfa hay mixtures did you purchase from other farmers in September?

TONS

289

2. What was the total amount you paid for the alfalfa hay and alfalfa hay mixtures purchased from other farmers in September?

DOLLARS

181

3. How many tons of other baled hay, including fescue, clover, bermuda, sudan, sudan crosses, lespedeza, bahia, timothy, grain, ryegrass, other grass, other tame, and wild hay did you purchase from other farmers in September?

TONS

319

4. What was the total amount you paid for the other baled hay purchased from other farmers in September?

DOLLARS

187

Survey Results: To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](https://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

Comments related to the information you reported:

Operation Email: (if different from above)

9937

Operation Phone:

9936

( )

check if cell phone

Respondent Name:

9912

Respondent Phone (if different from above)

9911

( )

check if cell phone

9910 MM DD YY

Date:

This completes the survey. Thank you for your help.

OFFICE USE ONLY												
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989 _ _ _ _ - _ _ _ _ - _ _ _ _			
							R. Unit		Optional Use			
							9921		9907	9908	9906	9916
S/E Name												

# QUARTERLY COLONY LOSS - October 2022

[Click Here to  
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OMB No. 0535-0153  
Approval Expires: 12/31/2023  
Project Code: 115  
SurveyID: 3690



**USDA/NASS**  
National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@usda.gov](mailto:nass@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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## Section 1 – Apiaries

1. Between July 1, 2022 and September 30, 2022, did this operation own or control any apiaries?

2705

☐ Yes – Go to Section 2

☐ No – Go to Section 7

## Section 2 – Colonies Owned

1. On July 1, 2022, how many total colonies did this operation own, regardless of location?.....

2706
2707

2. On September 30, 2022, how many total colonies did this operation own, regardless of location?.....

<b>FOR OFFICE USE ONLY</b>
9921

### Section 3 – Colonies By State: July Through September

1. Please report for all colonies owned by this operation between July 1, 2022 and September 30, 2022.

OFFICE USE	1	2	3	4	5	6	7
	Between July 1 and September 30, in which states were your colonies located? (EXCLUDE states that were only passed through to reach a destination state.)  (State)	Were these colonies located in this state on July 1?  Check "No" if colonies were moved into the state between July 2 and September 30.  Yes      No	How many colonies did you have in this state on July 1, or when they were first moved into this state after July 1?  (Colonies)	Of the (column 3) colonies, how many were completely lost/dead out between July 1 and September 30?  (Colonies)	Of the (column 3) colonies, how many were requeened only? (EXCLUDE completely lost/dead out colonies reported in column 4.)  (Colonies)	Of the (column 3) colonies, how many received nucs or packages? (EXCLUDE completely lost/dead out colonies reported in column 4.)  (Colonies)	How many new colonies did you add? (INCLUDE splits, newly created, and replacement colonies. EXCLUDE colonies reported in columns 5 and 6.)  (Colonies)
2710 <b>A</b>		2711 1 <input type="checkbox"/> 3 <input type="checkbox"/>	2712	2713	2716	2717	2715
2710 <b>B</b>		2711 1 <input type="checkbox"/> 3 <input type="checkbox"/>	2712	2713	2716	2717	2715
2710 <b>C</b>		2711 1 <input type="checkbox"/> 3 <input type="checkbox"/>	2712	2713	2716	2717	2715
2710 <b>D</b>		2711 1 <input type="checkbox"/> 3 <input type="checkbox"/>	2712	2713	2716	2717	2715
2710 <b>E</b>		2711 1 <input type="checkbox"/> 3 <input type="checkbox"/>	2712	2713	2716	2717	2715
2710 <b>F</b>		2711 1 <input type="checkbox"/> 3 <input type="checkbox"/>	2712	2713	2716	2717	2715
2710 <b>G</b>		2711 1 <input type="checkbox"/> 3 <input type="checkbox"/>	2712	2713	2716	2717	2715

2. Between July 1, 2022 and September 30, 2022, did this operation sell or give away any of the colonies in column 3? (EXCLUDE packages and nucs created specifically for sale.)

2718

1 ☐ Yes – Go to Item 2a

3 ☐ No – Go to Section 4

Colonies

2719

a. How many colonies from those reported in column 3 were sold or given away?.....

### Section 4 – Lost Colonies Affected By All Four Specified Symptoms

1. Of the total colonies owned between July 1, 2022 and September 30, 2022, did any lost colonies experience all of the following symptoms?

- Little to no build-up of dead bees in the hive or at the hive entrance
- Rapid loss of adult honey bee population despite the presence of queen, capped brood, and food reserves
- Absence or delayed robbing of the food reserves
- Loss not attributable to Varroa or Nosema loads

2770

- 1 ☐ Yes – Continue
- 3 ☐ No – Go to Section 5
- 4 ☐ No Loss – Go to Section 5
- 2 ☐ Don't Know – Go to Section 5

Colonies

2771

2. How many colonies did you lose that experienced all of the symptoms in Item 1?.....

### Section 5 – Colony Health: July Through September

1. Of the total colonies owned between July 1, 2022 and September 30, 2022, how many colonies by state were affected by the following, but not necessarily lost? Note: The total of columns 2 through 7 may exceed the total number of colonies in a state.

O F F I C E  U S E	1	2	3	4	5	6	7
	(State)	Varroa Mites  (Colonies)	Other Pests and Parasites <sup>1/</sup>  (Colonies)	Diseases <sup>2/</sup>  (Colonies)	Pesticides  (Colonies)	Other <sup>3/</sup>  (Colonies)	Unknown  (Colonies)
2774 A		2775	2776	2777	2780	2781	2782
2774 B		2775	2776	2777	2780	2781	2782
2774 C		2775	2776	2777	2780	2781	2782
2774 D		2775	2776	2777	2780	2781	2782
2774 E		2775	2776	2777	2780	2781	2782
2774 F		2775	2776	2777	2780	2781	2782
2774 G		2775	2776	2777	2780	2781	2782

1/ Includes Tracheal Mites, Nosema, Hive beetle, Wax moths, etc.

2/ Includes American and European foulbrood, Chalkbrood, Stonebrood, Paralysis (acute and chronic), Kashmir, Deformed Wing, Sacbrood, IAPV, Lake Sinai II, etc.

3/ Includes weather, starvation, insufficient forage, queen failure, hive damage/destroyed, etc.

**Section 6 – Comments Related to The Information You Reported****Section 7 – Change In Operation**

1. Has the operation named on the label been sold or turned over to someone else?

1 ☐ Yes – Identify the new operator(s)

3 ☐ No – Go to Section 8

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

check if  
cell phone

Phone: (\_\_\_\_) \_\_\_\_\_ ☐

**Section 8 – Conclusion**

1. Do you make any day-to-day decisions for any other apiaries?

1 ☐ Yes – List other operations: \_\_\_\_\_

3 ☐ No

2. To receive the complete results of this survey in August 2023, go to: [nass.usda.gov/results](https://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address.

1095

**Section 9 – Contact Information**

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if  
cell phone

(\_\_\_\_) \_\_\_\_\_ ☐

**This completes the survey. Thank you for your help.**

Respondent Name:

Respondent Phone: (if different from above)

9912

9911

check if  
cell phone

9910 MM DD YY

\_\_\_\_\_  
(\_\_\_\_) \_\_\_\_\_ ☐ Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-PASI	9903	9998	9900	9985	9989			
2-R		2-Sp		2-PATI					_____ - _____ - _____			
3-Inac		3-Acct/Bkpr		3-PAPI					Optional Use			
4-Office Hold		4-Partner		6-Email					9907	9908	9906	9916
5-R -- Est		9-Oth		7-Fax								
6-Inac --Est				19-Other								
7-Off Hold --Est												
S/E Name:												

# AGRICULTURAL LABOR SURVEY - October 2022

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OMB No.0535-0109  
Approval Expires: 9/30/2024  
Project Code: 956  
Survey ID: 4012  
Version: 1



**United States  
Department of  
Agriculture**



**NATIONAL  
AGRICULTURAL  
STATISTICS  
SERVICE**

## USDA/NASS

National Operations Division  
9700 Page Avenue, Suite 400  
St. Louis, MO 63132-1547  
Phone: 1-888-424-7828  
Fax: 1-855-415-3687  
Email: [nass@usda.gov](mailto:nass@usda.gov)

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

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	FIPS	POID	Tract	Subtr.
Office Use Only	_____	_____	_____	_____

1. Verify name and mailing address of this operation.  
Make any corrections necessary (including the correct operation name) on the label and continue.
2. Since June 1, 2022 have you or will you (name on label):  
(Check all that apply)
  - ☐ grow any crops or cut hay? INCLUDE grains, row crops, oilseeds, fruits, nuts, vegetables (including strawberries and melon crops), nursery and greenhouse, Christmas trees, and other specialty crops.
  - ☐ own or raise any livestock, poultry, bees or aquaculture? INCLUDE livestock and poultry owned, and any being raised under contract for someone else.
  - ☐ sell any agricultural products?
  - ☐ receive government agricultural payments? EXCLUDE government payments received as a landlord.
  - ☐ have more than 19 acres of idle cropland or more than 99 acres of pastureland?
3. Did you check ANY of the boxes in item 2? ☐ Yes – continue ☐ No – skip to page 11



4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- ☐ One individual - Go to Section 1 on Page 3
- ☐ A hired manager - Go to Section 1 on Page 3
- ☐ Partners - Continue

<b>For Office Use Only</b>	R. Unit
	9921
	SUB
	9941
	JUNE 1
	9930

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Do not include landlords and tenants as partners

Number

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3.  
(Verify partners' names and make necessary corrections if names have already been entered.)

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

<input type="checkbox"/> Check if verified
Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ <input type="checkbox"/> check if cell phone
Did this partner also operate land individually on June 1, 2022?
<input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only
Stratum
9922
Ind. Op.
9924

For Office Use Only
Stratum
9923
Ind. Op.
9924

For Office Use Only
Stratum
9927
Ind. Op.
9924

For Office Use Only
Stratum
9928
Ind. Op.
9924

For Office Use Only	599	10
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## Section 1 - Paid Workers for October

October 2022

S	M	T	W	Th	F	S
						1
2	3	4	5	6	7	8
<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

### Instructions for Reporting Agricultural Workers

- Agricultural workers are workers directly hired and paid by the farm operation to perform work on a farm or ranch in connection with the production of agricultural products.
- INCLUDE part-time workers, paid family members, hired managers, and workers on paid leave. INCLUDE workers regardless of method of pay (hourly, salaried, piece rate, etc.).
- Do NOT INCLUDE workers hired through a contractor, custom workers (workers hired to use their machines to perform a service on the farm e.g., combining, fertilizing), retail workers, or value added workers (workers who materially alter the form of the product produced e.g., winery, dairy manufacturing plant workers).

1. Did this operation have agricultural workers on the payroll during the week of October 9th through October 15th?

600

☐ Yes - Continue

☐ No - Go to page 6

☐ Don't Know - Go to page 6

2. How many agricultural workers did you have on the payroll during the week of October 9th through October 15th?.....

TOTAL NUMBER

660

NUMBER OF  
WORKERS

700

3. In 2022, how many of the agricultural workers on the payroll that week will be paid by this operation for 150 days or more of work?.....

## Section 1 - Paid Workers for October (continued)

4. In the table below, report all agricultural workers on the payroll during the week of October 9th through October 15th.
- Report workers under the worker code (provided on page 5) in which they are working, not under the worker code for which they have been trained.
  - Report workers who fall under the same worker code on a single line.
  - Report the total hours and wages paid to the group of workers during the week of October 9th through October 15th.
  - Record each worker only once.
  - If the worker performs work in two or more worker codes, report them under the worker code that requires the highest level of skill. If there is no measurable difference in skill requirements, report workers under the worker code in which they spend the most time.
  - For workers on paid leave, report the number of hours normally worked during the week of October 9th through October 15th.
  - Gross wages are the total amount paid to workers before taxes and other deductions. INCLUDE the worker's share of social security and unemployment insurance, but EXCLUDE the employer's share. INCLUDE in-kind payments (e.g., agricultural product like a side of beef, bushels of grain, etc.) provided in lieu of wages for work done. In-kind payments do NOT INCLUDE benefits such as housing, meals or insurance.

Enter the Worker Code from Page 5	Number of Paid Workers that week	Total Hours Worked that week	Total Gross Wages Paid that week (Dollars)
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614

Office Use Only – Completion Code Usability

1 – Incomplete, Has Labor  
2 – Incomplete, Unknown  
3 – No Labor

698

599

## Worker Codes for Sections 1 and 2

Code	Work Hired to Do
<b>CROP, NURSERY AND GREENHOUSE WORKERS</b>	
11	<b>Agricultural Equipment Operators - Crop, Nursery and Greenhouse:</b> Drive and control farm equipment to till soil and to plant, cultivate, and harvest crops.
12	<b>Farmworkers - Crop, Nursery and Greenhouse:</b> Manually plant, cultivate, and harvest vegetables, fruits, nuts, horticultural specialties, field crops, Christmas trees and short rotation woody crops. Use hand tools, such as shovels, trowels, hoes, tampers, pruning hooks, shears, and knives. Duties may include tilling soil and applying fertilizers; transplanting, weeding, thinning, or pruning crops; applying pesticides; or cleaning, grading, sorting, packing, and loading harvested products. May construct trellises, repair fences and farm buildings, or participate in irrigation activities.
13	<b>Graders And Sorters - Crop, Nursery and Greenhouse Products:</b> Grade, sort, or classify agricultural crops by size, weight, color or condition.
14	<b>Hand Packers And Packagers - Crop, Nursery and Greenhouse Products:</b> Pack or package by hand a wide variety of products and materials.
15	<b>All Other Field Workers: Specify:</b> _____ All agricultural workers working with crops, nursery or greenhouse products not included in codes 11-14.

<b>LIVESTOCK WORKERS</b>	
20	<b>Agricultural Equipment Operators – Farm, Ranch, and Aquacultural Animals:</b> Drive and control heavy farm equipment while attending to live farm, ranch, or aquacultural animals and in harvest of unprocessed animal products.
21	<b>Farmworkers - Farm, Ranch, and Aquacultural Animals:</b> Attend to live farm, ranch, or aquacultural animals including cattle, sheep, swine, goats, horses and other equines, poultry, finfish, shellfish, and bees. Duties may include feeding, watering, herding, milking, grazing, castrating, branding, de-beaking, weighing, catching, and loading animals. May conduct simple exams; maintain records; assist in births; and administer medications, vaccinations, or insecticides. May clean and maintain animal housing areas.
22	<b>Graders And Sorters - Farm, Ranch, and Aquacultural Animal Products:</b> Grade, sort, or classify unprocessed food and other agricultural products by size, weight, color, or condition.
23	<b>Hand Packers And Packagers - Farm, Ranch and Aquacultural Animal Products:</b> Pack or package by hand a wide variety of products and materials.
24	<b>All Other Livestock Workers: Specify:</b> _____ All agricultural workers working with farm, ranch and aquacultural animals or products not included in codes 20 – 23.

<b>SUPERVISORS</b>	
31	<b>Farmers, Ranchers and Other Agricultural Managers:</b> Plan, direct, or coordinate the management or operation of farms, ranches, greenhouses, aquacultural operations, nurseries, tree farms, or other agricultural establishments.
32	<b>First-Line Supervisors of Farm Workers:</b> Directly supervise and coordinate the activities of agricultural, aquacultural, and related workers.

<b>OTHER WORKERS</b>	
41	<b>Agricultural Inspectors:</b> Inspect agricultural commodities, processing equipment and facilities, and aquacultural operations, to ensure compliance with regulations and laws governing health, quality, and safety.
42	<b>Animal Breeders:</b> Select and breed animals according to their genealogy, characteristics, and offspring.
43	<b>Pesticide Handlers and Sprayers:</b> Mix or apply pesticides, herbicides, fungicides, or insecticides through sprays, dusts, vapors, soil incorporation, or chemical application to all crops including nursery and greenhouse products and facilities, and livestock, and livestock facilities. Usually requires specific training and state or federal certification. Excludes pilots who dust or spray crops from aircraft.
44	<b>Any Other Worker Not Listed Above: Specify:</b> _____ Including, but not limited to, mechanics, shop workers, truck drivers, accountants, bookkeepers and office workers. Excluding contract and custom workers, retail workers, and “value-added” workers.

## Section 2 - Paid Workers for July

July 2022

S	M	T	W	Th	F	S
					1	2
3	4	5	6	7	8	9
<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

### Instructions for Reporting Agricultural Workers

- Agricultural workers are workers directly hired and paid by the farm operation to perform work on a farm or ranch in connection with the production of agricultural products.
- INCLUDE part-time workers, paid family members, hired managers, and workers on paid leave. INCLUDE workers regardless of method of pay (hourly, salaried, piece rate, etc.).
- Do NOT INCLUDE workers hired through a contractor, custom workers (workers hired to use their machines to perform a service on the farm e.g., combining, fertilizing), retail workers, or value added workers (workers who materially alter the form of the product produced e.g., winery, dairy manufacturing plant workers).

1. Did this operation have agricultural workers on the payroll during the week of July 10th through July 16th?

600

☐ Yes - Continue

☐ No - Go to page 8

☐ Don't Know - Go to page 8

2. How many agricultural workers did you have on the payroll during the week of July 10th through July 16th?.....

TOTAL NUMBER

660

3. In 2022, how many of the agricultural workers on the payroll that week will be paid by this operation for 150 days or more of work?.....

NUMBER OF  
WORKERS

700

## Section 2 - Paid Workers for July (continued)

4. In the table below, report all agricultural workers on the payroll during the week of July 10th through July 16th.

- Report workers under the worker code (provided on page 5) in which they are working, not under the worker code for which they have been trained.
- Report workers who fall under the same worker code on a single line.
- Report the total hours and wages paid to the group of workers during the week of July 10th through July 16th.
- Record each worker only once.
- If the worker performs work in two or more worker codes, report them under the worker code that requires the highest level of skill. If there is no measurable difference in skill requirements, report workers under the worker code in which they spend the most time.
- For workers on paid leave, report the number of hours normally worked during the week of July 10th through July 16th.
- Gross wages are the total amount paid to workers before taxes and other deductions. INCLUDE the worker's share of social security and unemployment insurance, but EXCLUDE the employer's share. INCLUDE in-kind payments (e.g., agricultural product like a side of beef, bushels of grain, etc.) provided in lieu of wages for work done. In-kind payments do NOT INCLUDE benefits such as housing, meals or insurance.

Enter the Worker Code from Page 5	Number of Paid Workers that week	Total Hours Worked that week	Total Gross Wages Paid that week (Dollars)
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614
611	612	613	614

Office Use Only – Completion Code Usability

1 – Incomplete, Has Labor  
2 – Incomplete, Unknown  
3 – No Labor

698

### Section 3 - Agricultural Workers on the Payroll in 2022

1. During 2022, what was or will be the largest number of agricultural workers on the payroll on any one day?

- INCLUDE part-time workers, paid family members, hired managers, and workers on paid leave. INCLUDE workers regardless of method of pay (hourly, salaried, piece rate, etc.).

- Do NOT INCLUDE workers hired through a contractor, custom workers (workers hired to use their machines to perform a service on the farm e.g., combining, fertilizing), retail workers, or value added workers (workers who materially alter the form of the product produced e.g., winery, dairy manufacturing plant workers).....

		Largest Number of Workers in 2022	
NONE			
278	3 <input type="checkbox"/>	277	

2. During 2022, did or will this operation have any H-2A temporary agricultural workers on the payroll?

The H-2A program allows agricultural employers who anticipate a shortage of domestic workers to bring non-immigrant foreign workers to the U.S. to perform agricultural labor or services of a temporary or seasonal nature.

279

1 ☐ Yes

3 ☐ No

2 ☐ Don't Know

## Section 4 - Value of Sales

1. Please classify this operation in terms of the gross value of sales and government agricultural payments in 2021.

INCLUDE: • sales of all crops, livestock, poultry, and livestock products (milk, eggs, etc.) sold in 2021.  
 • the value of hay, silage, and other crops harvested in 2021, but not sold.  
 • the value of all crops, livestock, and poultry produced under contract in 2021.  
 • landlord's share of government payments and crops sold in 2021.

EXCLUDE dollars received on land rented to others.

860

- 1 ☐ \$0 - \$999  
 2 ☐ \$1,000 - \$9,999  
 3 ☐ \$10,000 - \$49,999  
 4 ☐ \$50,000 - \$99,999  
 5 ☐ \$100,000 - \$249,999  
 6 ☐ \$250,000 - \$499,999  
 7 ☐ \$500,000 - \$999,999  
 8 ☐ \$1,000,000 - \$4,999,999  
 9 ☐ \$5,000,000 and over

2. Is the 2021 gross value of sales and government agricultural payments for this operation less than \$1,000?

☐ Yes - Continue ☐ No - Skip to Item 4

3. Record all 2022 crops, land uses, and livestock or poultry now on the total acres operated, then go to Item 4, next page.

Land Use	ACRES	Field Crops Intended For Harvest	ACRES	Other Crops	ACRES
Abandoned Crops .....		.....		Cut Christmas Trees	
Cover Crops .....		.....		.....	
Idle Cropland .....		.....		.....	
Summer Fallow .....		.....		.....	
.....		.....			

Government Payments	WHOLE DOLLARS	Fruits/Nuts	ACRES	Livestock	NUMBER
CRP/WRP Payments .....		.....		Cattle – Dairy.....	
Other Gov't Payments .....		.....		Cattle – Other.....	
		.....		Chickens.....	
		.....		Hogs.....	
Pasture/Rangeland	ACRES	.....		Horses.....	
Cropland Used Only For Pasture		.....		Mules/Burros .....	
Permanent Pasture .....		.....		.....	
Woodland Pasture .....		.....		.....	
		.....		.....	

Aquaculture	NUMBER	Vegetables/Melons	ACRES		
Acres of Ponds in Use .....		.....			
Foodsize/Stockers .....		.....			
Fingerlings/Broodfish .....		.....			
Trout Eggs .....		.....			

Office Use
TOTAL POINTS
861
PASTURE POINTS
869



## Section 4 - Value of Sales (continued)

4. Of the farm or ranch income reported, which of these categories represents the largest portion of the gross income from this operation?

### Code

- |   |    |                          |
|---|----|--------------------------|
| 1 – <b>Grains, Oilseeds, Dry Beans, and Dry Peas</b> .....  | 1  | <input type="checkbox"/> |
| (corn, flaxseed, grain silage and forage, grains and oilseeds, popcorn, rice, small grains, sorghum, soybeans, sunflowers, straw, etc.) |    |                          |
| 2 – <b>Tobacco</b> .....  | 2  | <input type="checkbox"/> |
| 3 – <b>Cotton and Cottonseed</b> .....  | 3  | <input type="checkbox"/> |
| 4 – <b>Vegetables, Melons, Potatoes and Sweet Potatoes</b> .....  | 4  | <input type="checkbox"/> |
| (beets, cabbage, cantaloupes, pumpkins, sweet corn, tomatoes, watermelons, vegetable seeds, etc.)                                       |    |                          |
| 5 – <b>Fruit, Tree Nuts and Berries</b> .....   | 5  | <input type="checkbox"/> |
| (almonds, apples, blueberries, cherries, grapes, hazelnuts, kiwifruit, oranges, pears, pecans, strawberries, walnuts, etc.)             |    |                          |
| 6 – <b>Nursery, Greenhouse, Floriculture and Sod</b> .....  | 6  | <input type="checkbox"/> |
| (bedding plants, bulbs, cut flowers, flower seeds, foliage plants, mushrooms, nursery potted plants, shrubbery, sod, etc.)              |    |                          |
| 7 – <b>Cut Christmas Trees and Short Rotation Woody Crops</b> .....   | 7  | <input type="checkbox"/> |
| 8 – <b>Other Crops and Hay, CRP and Pasture</b> .....   | 8  | <input type="checkbox"/> |
| (grass seed, hay and grass silage, hops, maple syrup, mint, peanuts, sugarcane, sugarbeets, CRP, etc.)                                  |    |                          |
| 9 – <b>Hogs and Pigs</b> .....  | 9  | <input type="checkbox"/> |
| 10 – <b>Milk and Other Dairy Products from Cows</b> .....   | 10 | <input type="checkbox"/> |
| 11 – <b>Cattle and Calves</b> .....   | 11 | <input type="checkbox"/> |
| (beef and dairy cattle for breeding stock, fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.)            |    |                          |
| 12 – <b>Sheep, Goats, and their Products</b> .....  | 12 | <input type="checkbox"/> |
| (wool, mohair, milk and cheese)   |    |                          |
| 13 – <b>Horses, Ponies, and Mules</b> .....   | 13 | <input type="checkbox"/> |
| (burros and donkeys)  |    |                          |
| 14 – <b>Poultry and Eggs</b> .....  | 14 | <input type="checkbox"/> |
| (broilers, chickens, turkeys, ducks, eggs, emus, geese, hatchlings, ostriches, pigeons, pheasants, quail, poultry products, etc.)       |    |                          |
| 15 – <b>Aquaculture</b> .....   | 15 | <input type="checkbox"/> |
| (catfish, trout, ornamental and other fish, mollusks, crustaceans, etc.)  |    |                          |
| 16 – <b>Other Animals and Other Animal Products</b> .....   | 16 | <input type="checkbox"/> |
| (honey bees, honey, rabbits, fur-bearing animals, semen, manure, other animal specialties, etc.)  |    |                          |

<b>Farm Type Code</b>
862

## Section 5 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

☐ Yes - Go to Item 2

☐ No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year? Include growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

☐ Yes

☐ Don't Know

☐ No

(Regardless of answer to above, write a note to explain the situation, then go to Section 6.)

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2. Was the operator (name on label) operating a farm or ranch on June 1, 2022?

☐ Yes - Continue

☐ No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

check if cell  
phone

☐

4. Was the (item 3) new operation in business before June 1, 2022?

☐ Yes - Go to Section 6

☐ No - Continue

5. Is the (item 3) operation managed?

☐ Yes - Go to Section 6

☐ No - Continue

6. Were any of the individuals associated with the (item 3) new operation operating land individually before June 1, 2022?

☐ Yes - Go to Section 6

☐ No - Go to Section 6

## Section 6 - Conclusion

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

☐ Yes - Continue

☐ No - Go to Item 2

a. What is the name of the other operation(s)?.....

b. Was this additional operation in business before June 1, 2022 ?

☐ Yes - Continue

☐ No - Continue

Operation Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ ☐ check if cell phone

[ENUMERATOR NOTE: IF ADDITIONAL OPERATION IS INDIVIDUAL OR PARTNERSHIP, answer item 2 below and complete a separate questionnaire for the additional operation.]

## 2. Comments:

To receive the complete results of this survey on the release date, go to: [nass.usda.gov/results](http://nass.usda.gov/results)

To have a brief summary emailed to you, please enter your email address:

1095

Operation Email: (if different from above)

Operation Phone:

9937

9936

check if cell phone  
☐

Respondent Name:

Respondent Phone (if different from above)

9912

9911

check if cell phone  
☐

9910 MM DD YY

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**This completes the survey. Thank you for your help.**

### OFFICE USE ONLY

Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989			
2-R		2-Spouse		2-PATI (Tel)					_____ - _____ - _____			
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)								
4-Office Hold		4-Partner		6-Email					Optional Use			
5-R - Est		9-Other		7-Fax					9907	9908	9906	9916
6-Inac - Est				19-Other								
7-Off Hold - Est												
S/E Name												