

# **Burt County, Nebraska**





CRP
Tract Boundary
PLSS

2022 NAIP Ortho Imagery

2024 Program Year
Map Created October 11, 2023

Farm **6577** Tract **8758** 

### Wetland Determination



Limited RestrictionsExempt from Wetland

## Tract Cropland Total: 50.22 acres

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).

NEBRASKA

BURT

USDA Farm

United States Department of Agriculture Farm Service Agency

**Abbreviated 156 Farm Record** 

FARM: 6577

Prepared: 1/31/24 10:48 AM CST

Crop Year: 2024

**Operator Name** 

Form: FSA-156EZ

: ROGER W JOHNSON

CRP Contract Number(s)

See Page 2 for non-discriminatory Statements.

: 11099C, 11125B

Recon ID

: 31-021-2019-145

Transferred From

: None

ARCPLC G/I/F Eligibility

: Eligible

	Farm Land Data									
Farmland	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane	Farm Status	Number Of Tracts	
55.71	50.22	50.22	0.00	0.00	0.00	0.00	0.0	Active	1	
State Conservation	Other Conservation	Effective DCP	Cropland	Double	Cropped	CRP	MPL	DCP Ag.Rel. Activity	SOD	
0.00	0.00	0.00		0.	00	50.22	0.00	0.00	0.00	

	Crop Election Choice							
ARC Individual	ARC County	Price Loss Coverage						
None	None	None						

DCP Crop Data									
Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP					
Corn	0.00	4.84	0						
Soybeans	0.00	31.49	0						

**TOTAL** 

0.00

36.33

#### NOTES

**Tract Number** 

: 8758

Description

: Pt N1/2NE1/4 35-23-8; W1/2NW1/4NW1/4 36-23-8

FSA Physical Location

NEBRASKA/BURT

ANSI Physical Location

NEBRASKA/BURT

**BIA Unit Range Number** 

:

**HEL Status** 

: NHEL: No agricultural commodity planted on undetermined fields

**Wetland Status** 

: Tract contains a wetland or farmed wetland

**WL Violations** 

: None

Owners

ROGER AND SUZANNE JOHNSON LIVING TRUST DATED AUGUST 16, 2018

**Other Producers** 

: None

Recon ID

: 31-021-2019-144

Tract Land Data									
Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane		
55.71	50.22	50.22	0.00	0.00	0.00	0.00	0.0		

NEBRASKA

**BURT** 

Form: FSA-156EZ



**FARM**: 6577

Prepared: 1/31/24 10:48 AM CST

Crop Year: 2024

### Abbreviated 156 Farm Record

Tract 8758 Continued ...

State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	CRP	MPL	DCP Ag. Rel Activity	SOD
0.00	0.00	0.00	0.00	50.22	0.00	0.00	0.00

	DCP Crop Data									
Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield							
Corn	0.00	4.84	0							
Soybeans	0.00	31.49	0							

TOTAL 0.00 36.33

NOTES	2 3 64 5	a verassa		0.7016	3	rang i

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To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at <a href="http://www.ascr.usda.gov/complaint\_filing\_cust.html">http://www.ascr.usda.gov/complaint\_filing\_cust.html</a> and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) e-mail: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

						1	Page 1 of 1
CRP-1	U.S. DEPARTMENT			1. S	T. & CO. CODE &	ADMIN. LOCATIO	
(07-06-20)	Commodity C	edit Corporation			31	021	NUMBER 51
CONSE	RVATION RESERV	/E DDOODAN	CONTRACT	3. C	ONTRACT NUMB	ER	4. ACRES FOR
	CONTRACT		11:	125B	ENROLLMENT 34.64		
	SA OFFICE ADDRESS (In	clude Zip Code)		6. T	RACT NUMBER	7. CONTRACT PI	ERIOD
BURT COUNTY F 539 S 13th St	ARM SERVICE AGENCY				8758	FROM: (MM-DD-Y	
CEKAMAH, NE68					0.50	12-01-201	18 09-30-2029
				8. S	IGNUP TYPE:		
	SA OFFICE PHONE NUM Code): (402)374-1920		, <u>.</u>	Cor	ıtinuous		
acreage the Cons comply with the to Program Contract applicable contract thereto. BY SIGN	rated contract period from Tervation Plan developed (	of the date the Contra for such acreage and ained in this Contra (x"). By signing belo conditions of this co RTICIPANTS ACKNO	act is executed by the d approved by the ct, including the A w, the Participant ontract are contain	the CCC. The CCC and the Appendix to the acknowledge ned in this Fo	e Participant also a Participant. Addit is Contract, entitle es receipt of a copy	agrees to implement ionally, the Particip of Appendix to CRP of the Appendix/A	pant and CCC agree to P-1, Conservation Reserve Appendices for the
A. Rental Rate F				on of CRP L	and (See Page 2	2 for additional sp	pace)
B. Annual Contr	act Payment \$ 7,96	7.00	A. Tract No.	B. Field N			E Total Estimated
C. First Year Pa	yment \$		8758	3	CP23	4.2	
Item 9C is applica rorated.)	able only when the first ye	ar payment is	8758	4	CP23	30.4	\$ 0.00
1. PARTICIP	PANTS (If more than	three individuals	s are signing, s	see Page 3	1		
(1) PARTICIPAN	NT'S NAME AND nclude Zip Code)		37 SIGNATURE (		(4) TITLE/RELA INDIVIDUAL	TIONSHIP OF THE SIGNING IN THE TATIVE CAPACITY	(MM-DD-YYYY)
			Lap Culp	how	-		X/2-2-2(
	nclude Zip Code)	0.00 %	3) SIGNATURE (	Ву)	INDUAL	TIONSHIP OF THE SIGNING IN THE TAT VE CAPACITY	E (5) DATE (MM-DD-YYYY)
ADDRESS (In	NT'S NAME AND aclude Zip Code)	(2) SHARE (	3) SIGNATURE (I	Ву)	(4) TITLEXRELA	TIONSHIP OF THE SIGNING IN THE FATIVE CAPACITY	(MM-DD-YYYY)
2. CCC USE O		E OF CCC REPR					B. DATE  (MM-DD-YYYY)
3831 et seq receive ben	ng statement is made in acco modity Credit Corporation Ch j), the Agricultural Improvence tefits under the Conservation cies, and nongovernmental et	nt Act of 2018 (Pub. L. Reserve Program. The	4 et seq.), the Food S 115-334) and 7 CFF e information collecte	Security Act of R Part 1410. The ad on this form i	1985 (16 U.S.C. 3801 ne information will be may be disclosed to a	et seq.), the Agricultu used to determine elig ther Federal, State, Li	gibility to participate in and

N identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

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DEC - 2 2021 Burt Co. FSA Office

Date Printed: 11/03/2021

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CRP-1	U.S. DEPARTMENT OF AGRICULTURE	1. ST. & CO. CODE &	ADMIN. LOCATION	2. SIGN-UP
(07-06-20)	Commodity Credit Corporation	31	021	NUMBER 50
		<ol><li>CONTRACT NUMB</li></ol>	ER	4. ACRES FOR
	ERVATION RESERVE PROGRAM CONTRACT	11	099C	ENROLLMENT 15.58
5A. COUNTY F	FSA OFFICE ADDRESS (Include Zip Code)	6. TRACT NUMBER	7. CONTRACT PERIOD	
	FARM SERVICE AGENCY	0.750	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
539 S 13th S		8758	11-01-2017	09-30-2028
TEKAMAH, NE6	8001-0148			
		8. SIGNUP TYPE: Continuous		
	FSA OFFICE PHONE NUMBER a Code): (402)374-1920 x2	Concinuous		
THIS CONTRAC	T is entered into hotseen the Commodity Credit Corneration (	=== d t= == !!CCC!!\ === d th=d		

THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants (referred to as "the Participant") The Participant agrees to place the designated acreage into the Conservation Reserve Program ("CRP") or other use set by CCC for the stipulated contract period from the date the Contract is executed by the CCC. The Participant also agrees to implement on such designated acreage the Conservation Plan developed for such acreage and approved by the CCC and the Participant. Additionally, the Participant and CCC agree to comply with the terms and conditions contained in this Contract, including the Appendix to this Contract, entitled Appendix to CRP-1, Conservation Reserve Program Contract (referred to as "Appendix"). By signing below, the Participant acknowledges receipt of a copy of the Appendix/Appendices for the applicable contract period. The terms and conditions of this contract are contained in this Form CRP-1 and in the CRP-1 Appendix and any addendum thereto. By SIGNING THIS CONTRACT PARTICIPANTS ACKNOWLEDGE RECEIPT OF THE FOLLOWING FORMS: CRP-1; CRP-1 Appendix and any addendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.

9A. Rental Rate Per Acre \$300.00	10. Identification of CRP Land (See Page 2 for additional space)					
9B. Annual Contract Payment \$4,674.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share	
9C. First Year Payment \$	8758	0020	CP23	15.58	\$ 773.00	
(Item 9C is applicable only when the first year payment is prorated.)						

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.) A(1) PARTICIPANT'S NAME AND (2) SHARE (3) SIGNAT RE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE ADDRESS (Include Zip Code) INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) REPRESENTATIVE CAPACITY 100.00% メノス-2-2 B(1) PARTICIPANT'S NAME AND WRE (By) (2) SHARE (4) TITLE/RELATIONSHIP OF THE (5) DATE INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) REPRESENTATIVE CAPACITY 0.00% x12-2-21 rustes C(1) PARTICIPANT'S NAME AND (2) SHARE (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE ADDRESS (Include Zip Code) INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) REPRESENTATIVE CAPACITY

12. CCC USE ONLY A. SIGNATURE OF CCC REPRESENTATIVE

B. DATE
(MM-DD-YYYY)
12621

The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Clarter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

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