



- Legend**
- Non-Cropland
 - Cropland
 - CRP
 - Tract Boundary
 - Iowa PLSS
 - Iowa Roads

Wetland Determination Identifiers

- Restricted Use
- ▼ Limited Restrictions
- Exempt from Conservation Compliance Provisions

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).

Tract Cropland Total: 258.83 acres

2023 Program Year
Map Created April 19, 2023

Farm 6198
Tract 8864

CRP-1 (07-06-20) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT	1. ST. & CO. CODE & ADMIN. LOCATION 19 125	2. SIGN-UP NUMBER 54
	3. CONTRACT NUMBER 11659A	4. ACRES FOR ENROLLMENT 3.75
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) MARION COUNTY FARM SERVICE AGENCY 1445 LAKE DRIVE SUITE 3 KNOXVILLE, IA50138-0000	6. TRACT NUMBER 8864	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2020 TO: (MM-DD-YYYY) 09-30-2030
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (641) 842-3168	8. SIGNUP TYPE: General	

RECEIVED

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	\$ 134.91	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 506.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	8864	0008	CP25	1.02	\$ 336.00
(Item 9C is applicable only when the first year payment is prorated.)		8864	0010	CP25	2.73	\$ 898.00

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)				
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) NANCY LENGER 2397 WILSON DR BUSSEY, IA50044-7531	(2) SHARE 100.00 %	(3) SIGNATURE (By) <i>Nancy Lenger</i>	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY) 4-26-21
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)

12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE <i>Angela K. Vos, CED</i>	B. DATE (MM-DD-YYYY) 5-10-2021
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NOTE: 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 Charter 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.

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.**

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html 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) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

CRP-1 (07-06-20) U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation CONSERVATION RESERVE PROGRAM CONTRACT		1. ST. & CO. CODE & ADMIN. LOCATION 19 125		2. SIGN-UP NUMBER 50		
		3. CONTRACT NUMBER 11367A		4. ACRES FOR ENROLLMENT 32.72		
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) MARION COUNTY FARM SERVICE AGENCY 1445 LAKE DRIVE SUITE 3 KNOXVILLE, IA50138-0000		6. TRACT NUMBER 8864	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) 10-01-2017 09-30-2027			
		8. SIGNUP TYPE: Continuous				
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (641) 842-3168		MARION CO. FSA KNOXVILLE, IOWA				
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 \$ 209.10		10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment \$ 6,842.00		A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$		8864	0021	CP33	0.80	\$ 222.00
(Item 9C is applicable only when the first year payment is prorated.)		8864	0022	CP33	1.53	\$ 424.00
		8864	0023	CP33	0.38	\$ 105.00
11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)						
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) NANCY LENGER 2397 WILSON DR BUSSEY, IA50044-7531		(2) SHARE 100.00 %	(3) SIGNATURE (By) <i>Nancy Lenger</i>	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY) 4-26-21	
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)		(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)	
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)		(2) SHARE %	(3) SIGNATURE (By)	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY)	
12. CCC USE ONLY		A. SIGNATURE OF CCC REPRESENTATIVE <i>Angela K. Vos CEP</i>			B. DATE (MM-DD-YYYY) 5-10-2021	
NOTE: 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 Charter 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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Abbreviated 156 Farm Record

Operator Name : ELK CREEK FARMS INC
 CRP Contract Number(s) : 11367A, 11659A
 Recon ID : 19-125-2013-26
 Transferred From : None
 ARCPLC G//F Eligibility : Eligible

Farm Land Data

Farmland	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane	Farm Status	Number Of Tracts
391.61	258.83	258.83	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	222.36	0.00		36.47	0.00	0.00	0.00	

Crop Election Choice

ARC Individual	ARC County	Price Loss Coverage
None	CORN, SOYBN	None

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield	HIP
Corn	56.46	0.00	129	
Soybeans	56.44	0.00	38	
TOTAL	112.90	0.00		

NOTES

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Tract Number : 8864

Description : M15,35,36,L13,36
 FSA Physical Location : IOWA/MARION
 ANSI Physical Location : IOWA/MARION
 BIA Unit Range Number :
 HEL Status : HEL determinations not completed for all fields on the tract
 Wetland Status : Wetland determinations not complete
 WL Violations : None
 Owners : NANCY LENGER
 Other Producers : None
 Recon ID : 19-125-2013-30

Tract Land Data

Farm Land	Cropland	DCP Cropland	WBP	EWP	WRP	GRP	Sugarcane
391.61	258.83	258.83	0.00	0.00	0.00	0.00	0.0

Abbreviated 156 Farm Record

Tract 8864 Continued ...

State Conservation	Other Conservation	Effective DCP Cropland	Double Cropped	CRP	MPL	DCP Ag. Rel Activity	SOD
0.00	0.00	222.36	0.00	36.47	0.00	0.00	0.00

DCP Crop Data

Crop Name	Base Acres	CCC-505 CRP Reduction Acres	PLC Yield
Corn	56.46	0.00	129
Soybeans	56.44	0.00	38
TOTAL	112.90	0.00	

NOTES

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REPORT OF COMMODITIES FARM SUMMARY

NOTE: 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 7 CFR Part 718, the Farm Security and Rural Investment Act of 2002 (Pub L. 107-171), and the Agricultural Act of 2014 (Pub. L. 113-79). The information will be used to collect producer certification of the report of acreage of crops/commodities and land use data which is needed in order to determine producer eligibility to participate in and receive benefits under FSA programs. The information collected on the 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) and USDA/FSA-14, Applicant/Borrower. Providing the requested information is voluntary. However, failure to furnish the requested information may result in a denial of the producer's request to participate in and receive benefits under FSA programs. 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 0560-0175. The time required to complete this information collection is estimated to average 30 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. The provisions of criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

Planting Period	Crop/Commodity	Variety/Type	Intended Use	Irrigation Practice	Reporting Unit	Reported Quantity	Determined Quantity	Planting Period	Crop/Commodity	Variety/Type	Intended Use	Irrigation Practice	Reporting Unit	Reported Quantity	Determined Quantity
	ELK CREEK FARMS INC														
	NANCY LENGGER														
01	MIXFG	IGS	LS	N	A	6.79		01	CRP	025		N	A	3.75	
01	CRP	033		N	A	32.72									

CERTIFICATION: I certify to the best of my knowledge and belief that the acreage of crops/commodities and land uses listed herein are true and correct and that all required crops/commodities and land uses have been reported for the farm as applicable. Absent any different or contrary prior subsequent certification filed by any producer for any crop for which NAP coverage has been purchased, I certify that the applicable crop, type, practice, and intended use is not planted if it is not included on the Report of Commodities for this crop year. The signing of this form gives FSA representatives authorization to enter and inspect crops/commodities and land uses on the above identified land. A signature date (the date the producer signs the FSA-578) will also be captured.

Operator's Signature (By) Nancy Lengger Title/Relationship of Individual Signing in the Representative Capacity _____ Date 2-16-23

accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident. Persons with disabilities who require alternative means of communication (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html 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) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

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FEB 10 2023

MARION CO. FSA
KNOXVILLE, IOWA

Operator Name and Address
ELK CREEK FARMS INC
11667 HIGHWAY T14 S
REASNDOR, IA 50232-8511

REPORT OF COMMODITIES

FARM AND TRACT DETAIL LISTING

Original: Dup
Revision: _____
Cropland: 258.83
Farmland: 391.61

Tract Number	CLU/Field	Crop/Commodity	Var/Type	Int Use	Act Use	Irr. Pr.	Org Stat	Nat. Sod	C/C Stat	Rpt Unit	Rpt Qty	Det Qty	Crop Land	Field ID	Official/Measured	Planting Date	Planting Period	End Date	
Producer NANCY LENGGER																			
8	CRP	CRP	025	N	N	C	N	N	I	A	1.02		Yes	N	N		01	2030	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
10	CRP	CRP	025	N	N	C	N	N	I	A	2.73		Yes	N	N		01	2030	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
21	CRP	CRP	033	N	N	C	N	N	I	A	0.80		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
22	CRP	CRP	033	N	N	C	N	N	I	A	1.53		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
23	CRP	CRP	033	N	N	C	N	N	I	A	0.38		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
24	CRP	CRP	033	N	N	C	N	N	I	A	4.26		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
25	CRP	CRP	033	N	N	C	N	N	I	A	0.35		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
26	CRP	CRP	033	N	N	C	N	N	I	A	1.08		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
27	CRP	CRP	033	N	N	C	N	N	I	A	2.60		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
28	CRP	CRP	033	N	N	C	N	N	I	A	6.65		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
29	CRP	CRP	033	N	N	C	N	N	I	A	6.70		Yes	N	N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			

RECEIVED

FEB 10 2023
MARION CO. FSA
KNOXVILLE, IOWA

REPORT OF COMMODITIES

FSA - 578 (09-13-16)

Farm Number: 6198

FARM AND TRACT DETAIL LISTING

DATE: 01/31/2023
PAGE: 2

Tract Number	CLU/Field	Crop/Commodity	Var/Type	Int Use	Act Use	Irr. Pr.	Org Stat	Nat. Sod	C/C Stat	Rpt Unit	Rpt Qty	Det Qty	Crop Land	Field ID	Official/Measured	Planting Date	Planting Period	End Date	
Producer NANCY LENGGER																			
31		CRP	033			N	C	N	I	A	1.35		Yes		N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
32		CRP	033			N	C	N	I	A	1.55		Yes		N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
33		CRP	033			N	C	N	I	A	2.14		Yes		N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
34		CRP	033			N	C	N	I	A	0.90		Yes		N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer NANCY LENGGER																			
35		CRP	033			N	C	N	I	A	0.97		Yes		N		01	2027	
Share 100.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3968 Signature Date																			
Producer ELK CREEK FARMS INC																			
84		MIXFG	IGS	LS		N	C	N	I	A	0.41		Yes		N		04/15/2000	01	2030
Share 50.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3972 Signature Date																			
Producer ELK CREEK FARMS INC																			
96		MIXFG	IGS	LS		N	C	N	I	A	3.73		Yes		N		04/15/2000	01	2030
Share 50.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3972 Signature Date																			
Producer ELK CREEK FARMS INC																			
129		MIXFG	IGS	LS		N	C	N	I	A	0.10		Yes		N		04/15/2000	01	2030
Share 50.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3972 Signature Date																			
Producer ELK CREEK FARMS INC																			
142		MIXFG	IGS	LS		N	C	N	I	A	0.13		Yes		N		04/15/2000	01	2030
Share 50.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3972 Signature Date																			
Producer ELK CREEK FARMS INC																			
164		MIXFG	IGS	LS		N	C	N	I	A	1.54		Yes		N		04/15/2000	01	2030
Share 50.00 FSA Physical Location Marion, Iowa																			
NAP Unit 3972 Signature Date																			

RECEIVED
NAP Unit 3972
Signature Date

FEB 10 2023

MARION COUNTY, IOWA
KNOXVILLE, IOWA
Signature Date

REPORT OF COMMODITIES

FARM AND TRACT DETAIL LISTING

Tract Number	CLU/Field	Crop/Commodity	Var/Type	Int Use	Act Use	Irr. Pr.	Org Stat	Nat. Sod	C/C Stat	Rpt Unit	Rpt Qty	Det Crop Land	Field ID	Official/Measured	Planting Date	Planting Period	End Date
Producer ELK CREEK FARMS INC																	
NANCY LENGGER																	
8864	172	MIXFG	IGS	LS		N	C	N	I	A	0.09	Yes		N	04/15/2000	01	2030
Share 50.00 FSA Physical Location Marion, Iowa																	
50.00 Marion, Iowa																	
NAP Unit 3972 Signature Date																	
Producer ELK CREEK FARMS INC																	
NANCY LENGGER																	
173		MIXFG	IGS	LS		N	C	N	I	A	0.79	Yes		N	04/15/2000	01	2030
Share 50.00 FSA Physical Location Marion, Iowa																	
50.00 Marion, Iowa																	
NAP Unit 3972 Signature Date																	

Tract 8864 Summary

PP Cr/Co	Var/Type	Int Use	Irr Pr	Rpt Unit	Rpt Qty	PP Cr/Co	Var/Type	Int Use	Irr Pr	Rpt Unit	Rpt Qty	PP Cr/Co	Var/Type	Int Use	Irr Pr	Rpt Unit	Rpt Qty
01	CRP	033	N	A	32.72	01	CRP	025	N	A	3.75	01	MIXFG	IGS	N	A	6.79
Photo Number/Legal Description: M15,35,36,L13,36																	
Cropland: 258.83 Reported on Cropland: 43.26 Difference: -215.57																	
Reported on Non-Cropland: 0.00																	

Note: All cropland has not been reported.

RECEIVED

2023 10 27

MARION CO. FSA
KNOXVILLE, IOWA