

CONSERVATION PRACTICE ADOPTION MOTIVATIONS SURVEY VERSION 1

CROP PRACTICES

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1. During 2020, 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.

100 1 ☐ Yes - Go to Section 1 - Land Use and Livestock
on page 2.

3 ☐ No - Complete Item 1a, then go to Section
15 - Conclusion on page 44

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

101 1 ☐ Sold

2 ☐ Rented Out

3 ☐ Idle

4 ☐ Enrolled in a conservation program (CRP, WRP, etc.)

After completing Item 1a above, Go to Section 15 - Conclusion on page 44.

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. On January 1, 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 on January 1, 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?

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?

c. Woodland, not pastured?

d. Other land?

4. Of the total acres operated, how many acres were 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, including wetlands reserve and agricultural land easements) and the Farm and Ranch Lands Protection Program (FRPP) on May 1, 2020?

Acres
901
902
905
900

Acres
103
104
233
042
5803

Section 1 - Land Use and Livestock (continued)

5. Report the total number of livestock and poultry, by type, on your operation on January 1, 2021.

a. Beef cows

INCLUDE beef heifers that have calved

EXCLUDE heifers that have not calved, steers, calves, and bulls

b. Milk cows, including any dry cows

EXCLUDE any heifers not yet freshened

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.

Number
xxx
xxx
xxx
xxx
xxx

6. During 2020, 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

9707

₁ ☐ Yes

₃ ☐ No

Section 2 - Technical Assistance

1. 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?

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

EXCLUDE financial assistance that helps defray the cost of installing or implementing conservation practices

105

1 ☐ Yes

3 ☐ No - Go to Item 1b

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

xxx

☐ Federal agencies

xxx

☐ State or local agencies

xxx

☐ 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.

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
106 Technical assistance is available to me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
107 I received technical assistance during 2020.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
108 I received technical assistance in the past, but not in 2020.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
109 I have never sought out any form of technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
110 I have had trouble accessing technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
111 Technical assistance is beneficial to my operation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
112 I would use technical assistance if it was free.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
113 I am comfortable using technical assistance from the federal government.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
114 I am comfortable using technical assistance from a non-federal government source.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 3 - Cover Crops

1. Cover crops are 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 on any portion of your operation?

EXCLUDE Conservation Reserve Program acres

- 201 ¹ ☐ Yes - Go to Item 2 ³ ☐ No - Complete Items 1a and 1b below, then go to Section 4 - Nutrient Management on page 9

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

I have never used cover crops because:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
202 There is no reason for me to use cover crops.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
203 Other farmers I know have had unsuccessful attempts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
204 Anticipated costs greater than the benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
205 It takes too much time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
206 I did not receive technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
207 I did not receive financial assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
208 Financial assistance would not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
209 I cannot fit into my crop rotation/not enough time to establish cover before frost or between crops.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ²¹⁰ _____

After completing Items 1a and 1b above, go to Section 4 - Nutrient Management on page 9.

2. Did you use cover crops in 2020? ²¹¹ ¹ ☐ Yes - Continue ³ ☐ No - Go to Item 3 on page 6

- a. What percentage of your cropland had cover crops in 2020? (0-100%) ²¹² %

- i. What type of cover crop was used in 2020? Select all that apply.

- ²¹³ ☐ Single species or seed type
- ²¹⁴ ☐ Mix of 2 to 5 seed types
- ²¹⁵ ☐ Mix of more than 5 seed types
- ²¹⁶ ☐ Other

Section 3 - Cover Crops (continued)

- ii. What crops were planted before and after the 2020 cover crop?
INCLUDE every crop planted before or after a cover crop.

217
Before _____

218
After _____

- iii. Which of the following were used to terminate the 2020 cover crop? Select all that apply.

219 ☐ Herbicide

220 ☐ Tillage

221 ☐ Roller/Crimper

222 ☐ Winter kill

- iv. Did you use any cover crops for grazing, forage or other on farm use in 2020? 223 1 ☐ Yes 3 ☐ No

- v. Did you harvest any cover crops for grain in 2020? 224 1 ☐ Yes 3 ☐ No

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

617

- 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 meet a conservation compliance 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.

226 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
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 %

Section 3 - Cover Crops (continued)

c. How important were the following in your decision to start using cover crops on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
232 Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
233 Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
234 Anticipated benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
235 Anticipated saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
236 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
237 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
238 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx _____

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

239

1 ☐ Yes - Continue

3 ☐ No - Go to Item 5 on page 8

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

%

ii. How important were the following in your decision to expand cover crops on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
245 Addressed additional conservation needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
246 Benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
247 Saved time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
248 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
249 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
250 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 3 - Cover Crops (continued)

251

5. What year did you last use cover crops? year

a. If you did not plant cover crops in 2020, do you plan to use cover crops again within 3 years?

 xxx ₁ ☐ Yes - Go to Section 4 - Nutrient Management on page 9

₃ ☐ No - Continue

b. How important were the following in your decision to stop using cover crops?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
252 Did not meet conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
253 Costs were greater than benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
254 Too much time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
255 Technical assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
256 Financial assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
257 Financial assistance did not cover enough of the cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 4 - Nutrient Management

1. Which of the following nutrient or fertility management practices did you use in 2020? Select 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 some 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 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 ☐ Yes - Go to Item 3 on page 10 ☐ No - Complete Items 2a and 2b below, then go to Section 5 - Pest Management on page 12

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

I have never used a written nutrient management plan because:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
308 There is no reason for me to use a written nutrient management plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
309 Other farmers I know have had unsuccessful attempts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
310 Anticipated costs greater than benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
311 It takes too much time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
312 I did not receive technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
313 I did not receive financial assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
314 Financial assistance would not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ³¹⁵ _____

After completing Items 2a and 2b above, Go to Section 5 - Pest Management on page 12.

Section 4 - Nutrient Management (continued)

3. Did you follow a written nutrient management plan in 2020? ³¹⁶ 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? ³¹⁷ ₁ ☐ Yes ₃ ☐ No

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

c. On what percentage of your cropland did you use a written nutrient management plan in 2020? ³¹⁹ %

4. What year did you start following a written nutrient management plan? year ³²⁰

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

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	³²² ₁ <input type="checkbox"/> Yes ₃ <input type="checkbox"/> No	³²³ ₁ <input type="checkbox"/> Yes ₃ <input type="checkbox"/> No	³²⁴	³²⁵ %

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

c. How important were the following in your decision to start implementing a written nutrient management plan on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
³²⁷ Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
³²⁸ Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
³²⁹ Anticipated benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
³³⁰ Anticipated saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
³³¹ Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
³³² Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
³³³ Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ^{xxx} _____

Section 4 - 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

- 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 %

- b. How important were the following in your decision to expand the use of nutrient management on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
340 Addressed additional conservation needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
341 Benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
342 Saved time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
343 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
344 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
345 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. What year did you last follow a written nutrient management plan? year 346

- a. If you did not follow a written nutrient management plan in 2020, do you plan to do so again within 3 years?

xxx 1 ☐ Yes - Go to Section 5 - Pest Management on page 12 3 ☐ No - Continue

- b. How important were the following in your decision to stop using a written nutrient management plan?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
347 Did not meet conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
348 Costs were greater than benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
349 Too much time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
350 Technical assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
351 Financial assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
352 Financial assistance did not cover enough of the cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 5 - Pest Management

1. Which of the following pest management practices did you use in 2020? Select 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 ☐ 1 Yes - Go to Item 3 on page 13 ☐ 3 No - Complete Items 2a and 2b below, then go to Section 6 - Tillage Practices on page 16

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

I have never used a written pest management plan because:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
408 There is no reason for me to use a written pest management plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
409 Other farmers I know have had unsuccessful attempts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
410 Anticipated costs greater than benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
411 It takes too much time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
412 I did not receive technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
413 I did not receive financial assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
414 Financial assistance would not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ⁴¹⁵ _____

After completing Items 2a and 2b above, Go to Section 6 - Tillage Practices on page 16.

Section 5 - Pest Management (continued)

3. Did you use a written pest management plan in 2020? ⁴¹⁶ 1 ☐ Yes - Continue 3 ☐ No - Go to Item 4

a. On what percentage of your cropland did you use a pest management plan in 2020? (0-100%) 417 %

4. What year did you first follow a written pest management plan? year 418

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

- 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	420 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	421 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	422	423 %

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

- c. How important were the following in your decision to start following a written pest management plan on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
426 Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
427 Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
428 Benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
429 Anticipated saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
430 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
431 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
432 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx _____

Section 5 - 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 on page 15

- 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

%

- ii. How important were the following in your decision to expand the pest management plan on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
439 Addressed additional conservation needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
440 Benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
441 Saved time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
442 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
443 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
444 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 5 - Pest Management (continued)

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

445

a. If you did not follow a written pest management plan in 2020, do you plan to do so again within 3 years?

xxx

₁ ☐ Yes -Go to Section 6 - Tillage Practices on page 16

₃ ☐ No - Continue

b. How important were the following in your decision to stop using a written pest management plan?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
446 Did not meet conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
447 Costs were greater than benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
448 Too much time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
449 Technical assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
450 Financial assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
451 Financial assistance did not cover enough of the cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 6 - 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. 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?

2371 ☐ Yes - Go to Item 2

☐ No - Complete Items 1a and 1b below, then go to
Section 7 - Drainage Water Management on page 20

- a. 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:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
501 There is no reason for me to use tillage practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
502 Other farmers I know have had unsuccessful attempts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
503 Anticipated costs greater than benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
504 It takes too much time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
505 I did not receive technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
506 I did not receive financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ⁵⁰⁷ _____

After completing Items 1a and 1b above, Go to Section 7 - Drainage Water Management on page 20.

2. Did you use no-till, strip-till, or reduced tillage (e.g., mulch till, ridge-till, etc.), in 2020?

509

☐ Yes - Continue

☐ No - Go to Item 3 on page 17

- a. In 2020, 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 %

Section 6 - Tillage Practices (continued)

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

%

c. How important were the following in your decision to start implementing no-till, strip-till, or reduced tillage techniques on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
526 Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
527 Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
528 Anticipated benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
529 Anticipated saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
530 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
531 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
532 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx

Section 6 - 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 on page 19

- 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

%

- ii. How important were the following in your decision to expand the no-till, strip-till, or reduced tillage practices on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
534 Addressed additional conservation needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
544 Benefits that exceeded costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
545 Saved time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
546 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
547 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
548 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 6 - Tillage Practices (continued)

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

549

a. If you did not use any no-till, strip-till, or reduced tillage in 2020, do you plan to do so again within 3 years?

xxx

¹ ☐ Yes - Go to Section 7 - Drainage Water Management on page 20

³ ☐ No - Continue

b. How important were the following in your decision to stop using no-till, strip-till, or reduced tillage techniques?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
550 Did not meet conservation need.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
551 Anticipated costs greater than benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
552 Too much time or effort.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
553 Technical assistance ended.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
554 Financial assistance ended.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
555 Financial assistance did not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 7 - Drainage Water Management

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

600

1 ☐ Yes - Continue

3 ☐ No - Go to Section 8 - Runoff Management Practices on page 24

a. What proportion of your cropland has drainage?

xxx %

b. 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 flashboard risers, check dams, division boxes, pipe drop inlets, etc.

Based on the definition above, does your drainage system include water control structures?

601

1 ☐ Yes, manually operated

2 ☐ Yes, automated or remotely operated

3 ☐ No water control structure(s)

If you selected Option 3 for Item 1b above, "No water control structure(s)", go to Section 8 - Runoff Management Practices on page 24. Otherwise, continue to Item 1c.

c. 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

d. Do you store your drainage water (such as in a pond) for use in irrigation or livestock watering? 603

1 ☐ Yes

3 ☐ No

2. What are your objectives for using drainage water control structures? Select all that apply.

604

☐ Improving water quality (reducing nutrients, sediment, or pesticides leaving the field in drainage water)

605

☐ Increasing yield and/or supporting the health and vigor of crops or forages

606

☐ Managing water quantity as a way to adapt to changing weather conditions

607

☐ Maintaining soil organic matter

608

☐ Managing dust

609

☐ Other, specify:

610

Section 7 - Drainage Water Management (continued)

3. 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 ¹ ☐ Yes - Go to Item 4

³ ☐ No - Complete Items 3a and 3b below, then go to

Section 8 - Runoff Management Practices on page 24

- 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:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
612 There is no reason for me to use a drainage water management plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
613 Other farmers I know have had unsuccessful attempts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
614 Anticipated costs greater than benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
615 It takes too much time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
616 I did not receive technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
617 I did not receive financial assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
618 Financial assistance would not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ⁶¹⁹ _____

After completing Items 3a and 3b above, Go to Section 8 - Runoff Management Practices on page 24.

4. Did you follow a written drainage water management plan in 2020? ⁶²¹ ¹ ☐ Yes ³ ☐ No

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

622

- a. In 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	624 ¹ <input type="checkbox"/> Yes ³ <input type="checkbox"/> No	625 ¹ <input type="checkbox"/> Yes ³ <input type="checkbox"/> No	626	627 %

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

xxx %

Section 7 - Drainage Water Management (continued)

- c. How important were the following in your decision to start implementing a drainage water management plan on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
628 Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
629 Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
630 Benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
631 Saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
632 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
633 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
634 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx _____

- e. What percentage of your drained cropland did you use drainage water management in 2020? 635 %

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 - Continue ₃ ☐ No - Go to Item 7 on page 23

- 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 %

Section 7 - Drainage Water Management (continued)

- b. How important were the following in your decision to expand the drainage water management plan on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
642 Addressed additional conservation needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
643 Benefits that exceed costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
644 Saved time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
645 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
646 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
647 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

648

- a. If you did not follow a written drainage water management plan in 2020, do you plan to do so again within 3 years?

xxx

1 ☐ Yes - Go to Section 8 - Runoff Management Practices on page 24 3 ☐ No - Continue

- b. How important were the following in your decision to stop using a written drainage water management plan?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
649 Did not meet conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
650 Costs were greater than benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
651 Too much time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
652 Technical assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
653 Financial assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
654 Financial assistance did not cover enough of the cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 8 - 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 2020, 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 the follow instructions at the end of the table.

Practice	For land owned is the practice in use?	For land leased is the practice in use?
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 on page 25.

- 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 9 - Edge of Field Structures on page 26.

I have never used runoff management structures or practices because:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
710 No conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
711 Anticipated costs greater than benefit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
712 Would interfere with field operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
713 Difficulty getting technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
714 I did not receive financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
715 Financial assistance would not cover enough of the cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ⁷¹⁶ _____

After completing Items 1a and 1b above, Go to Section 9 - Edge of Field Structures on page 26.

Section 8 - Runoff Management Practices (continued)

2. Were any runoff management practices or improvements still in use on leased land in 2020? 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. For the runoff management structures in use in 2020 on land you own:

Practice	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 %

- a. 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 %

4. How important were the following in your decision to install, rebuild or upgrade any runoff management structures on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
745 Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
746 Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
747 Anticipated benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
748 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
749 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
750 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx _____

Section 9 - 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 2020 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.

Practice	For land owned is the practice in use?	For land leased is the practice in use?
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	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 on page 27.

- 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 10 - Wetland Conservation Practices on page 28.

I have never used edge of field structures because:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
806 There is no reason for me to use edge of field structures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
807 Removes land from production.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
808 Anticipated costs greater than benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
809 It takes too much time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
810 I did not receive technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
811 I did not receive financial assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
812 Financial assistance would not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ⁸¹³ _____

After completing Items 1a and 1b above, Go to Section 10 - Wetland Conservation Practices on page 28.

Section 9 - Edge of Field Structures (continued)

2. Were any edge of field structures still in use on leased land in 2020? 814 1 ☐ Yes 3 ☐ No

xxx

- a. Do any of your lease agreements require maintenance of edge of field structures? 1 ☐ Yes 3 ☐ No

3. For the edge of field structures in use in 2020 on land you own:

Practice	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 %

- a. 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. How important were the following in your decision to install any edge of field structures on land you own?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
831 Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
832 Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
833 Anticipated benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
834 Anticipated saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
835 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
836 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
837 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx _____

Section 10 - 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? Select all that apply.

- 906 ☐ Permanent wetlands reserve easement?
- 907 ☐ 30 year wetlands reserve easement?
- 908 ☐ Conservation Reserve Program (CRP) contract?
- 909 ☐ EQIP Contract?
- 910 ☐ Wetland mitigation bank?
- 911 ☐ 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.

Practice	For land owned is the practice in use?	For land leased is the practice in use?
Restored or enhanced existing wetlands	912 ₁ <input type="checkbox"/> Yes ₃ <input type="checkbox"/> No	913 ₁ <input type="checkbox"/> Yes ₃ <input type="checkbox"/> No
Created new wetlands	914 ₁ <input type="checkbox"/> Yes ₃ <input type="checkbox"/> No	915 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 on page 29.

- 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 11 - Irrigation Management and System Improvements on page 31.

I have never used wetland conservation practices because:

	1. Agree	2. Neither Agree nor Disagree	3. Disagree
916 There is no reason for me to use wetland conservation practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
917 Takes land out of production.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
918 Anticipated costs greater than benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
919 It takes too much time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
920 It would interfere with field operations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
921 I did not receive technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
922 I did not receive financial assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
923 Financial assistance would not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section 10 - Wetland Conservation Practices (continued)

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

Other reason, specify: ⁹²⁴ _____

After completing Items 2a and 2b, Go to Section 11 - Irrigation Management and System Improvements on page 31.

3. Were any wetland conservation practices still in use on leased land ⁹²⁵
in 2020?..... 1 ☐ Yes - Continue 3 ☐ No - Go to Item 4

a. Do any of your lease agreements require maintenance of the ⁹²⁶
wetland conservation practices? 1 ☐ Yes 3 ☐ No

4. For the wetland conservation practices in use in 2020 on land you own:

Practice	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	⁹²⁷ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹²⁸ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹²⁹ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹³⁰ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹³¹	⁹³² %
Created new wetlands	⁹³³ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹³⁴ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹³⁵ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹³⁶ 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	⁹³⁷	⁹³⁸ %

a. What portion of financial assistance to install, rebuild, or upgrade wetland practices was from federal sources? Enter 0 if no financial assistance was received. ⁹³⁹ %

b. How important were the following in your decision to install or upgrade any wetland conservation practice on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
⁹⁴⁰ Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
⁹⁴¹ Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
⁹⁴² Anticipated benefits exceed costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
⁹⁴³ Anticipated saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
⁹⁴⁴ Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
⁹⁴⁵ Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
⁹⁴⁶ Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: ^{xxx} _____

Section 10 - Wetland Conservation Practices (continued)

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

2 ☐ Remove the wetland structures or practices

- b. If you chose to remove the wetland structures or practices, how important were the following in making that decision?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
949 Did not meet conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
950 Too much time or effort to maintain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
951 Interfered with field operations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
952 Took too much land out of production	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- c. What percentage of your land (owned and rented) had any wetland conservation practices that were still in use in 2020? (0-100%)

953
%

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 11 - 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 - Continue

3 ☐ No - Go to Section 12 - Conservation Stewardship Program on page 36

- a. What proportion of your total cropland was irrigated during 2020?

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)

1004

☐ 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)

1007

☐ Computer simulation models (not from a commercial service)

2. 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 3
on page 32

3 ☐ No - Complete Items 2a and 2b below, then go to Section 12 -
Conservation Stewardship Program on page 36

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

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

		1. Agree	2. Neither Agree nor Disagree	3. Disagree
1009	There is no reason for me to use a written irrigation water management plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1010	Would not impact decision of when to irrigate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1011	Anticipated costs greater than benefits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1012	It takes too much time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1013	I did not receive technical assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1014	I did not receive financial assistance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1015	Financial assistance would not cover enough of the cost.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx _____

After completing Items 2a and 2b above, Go to Section 12 - Conservation Stewardship Program on page 36.

Section 11 - Irrigation Management and System Improvements (continued)

3. Did you follow a written irrigation water management plan in 2020? ¹⁰¹⁷ ₁ ☐ Yes - Continue ₃ ☐ No - Go to Item 4

a. On what percentage of your irrigated cropland did you follow an irrigation water management plan in 2020? (0-100%) 1018 %

4. 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. How important were the following in your decision to follow a written irrigation water management plan on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
1026 Addressed conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1027 Used successfully by other farms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1028 Anticipated benefits greater than cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1029 Anticipated saving time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1030 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1031 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1032 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1033 Required by water supplier or water control district	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1034 To reduce water application amounts/levels due to drought	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1035 To reduce water application amounts/levels due to a loss of water supply (loss of access rather than drought/physical scarcity).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: xxx _____

Section 11 - Irrigation Management and System Improvements (continued)

5. 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 6

- 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 %
- ii. How important were the following in your decision to expand the irrigation water management plan on your operation?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
1042 Addressed additional conservation needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1043 Benefits that exceed costs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1044 Saved time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1045 Availability of technical assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1046 Availability of financial assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1047 Improved water quality/environmental benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. What year did you last follow an irrigation water management plan? year 1048

- a. If you did not follow a written irrigation management plan in 2020, do you plan to do so again within 3 years?

xxx

1 ☐ Yes - Go to Item 7 on page 343 ☐ No - Continue to Item 6b on page 34

Section 11 - Irrigation Management and System Improvements (continued)

b. How important were the following in your decision to stop using the irrigation water management plan?

	1. Very Important	2. Important	3. Neither Important nor Unimportant	4. Unimportant	5. Very Unimportant
1049 Did not meet conservation need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1050 Costs were greater than benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1051 Too much time or effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1052 Technical assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1053 Financial assistance ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1054 Financial assistance did not cover enough of the cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Which of the following irrigation systems are in use on your farm?

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

Irrigation System	Cropland owned by this operation	Cropland rented by this operation	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 on page 35.

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

Irrigation System	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	1086 %

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

Enter 0 if no financial assistance was received.

1087
%

Section 11 - Irrigation Management and System Improvements (continued)

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

	New Irrigation System	System Upgrade	Independent of New Installation or Upgrade
Irrigation Water Supply System	(Including changing the application technology in an existing irrigated field)	(Improvement of the same application technology)	(Maintenance, repair or improvement with current application technology)
Irrigation pipeline	1088 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1089 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1090 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Water conveyance structure	1091 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1092 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1093 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Pumping plant	1094 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

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

Irrigation Water Supply System	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 this practice was from federal sources?

Enter 0 if no financial assistance was received.

1117	%
------	---

Section 12 - Conservation Stewardship Program

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

1120

₁ ☐ Yes - Continue

₃ ☐ No - Go to Section 13 - Demographics on page 37

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

1121

₁ ☐ Yes - Continue

₃ ☐ No - Go to 13 - Demographics on page 37

- 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.

Enhanced Practice Enrolled in CSP	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 13 - Demographics

1. Please answer the following for the operator:

a. Sex.

1243

1 ☐ Male

2 ☐ Female

b. Age on January 1, 2021.

1242

c. Is the operator of Hispanic, Latino, or Spanish origin? 1219

1 ☐ Yes

3 ☐ No

d. Race. Select all that apply.

1223

1 ☐ White

1217

2 ☐ Black or African American

1213

3 ☐ American Indian or Alaska Native

1215

4 ☐ Asian

1221

5 ☐ 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?

1633

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 farming or ranching? years

1201

3. At which occupation did the operator spend the majority (50 percent or more) of his/her time in 2020?

974

1 ☐ Farm or ranch work

2 ☐ Work other than farming or ranching

4. Is the operator retired from farming or ranching? 1203

1 ☐ Yes

3 ☐ No

Section 13 - Demographics (continued)

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

1257

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

6. In 2020, what was this operation's legal status for tax purposes? Select one answer only.

1240

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:		
Is this partnership registered under state law?	1204	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
3 <input type="checkbox"/> Incorporated under state law - If option 3 is selected:		
Is this a family held corporation?	4856	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Are there more than 10 stockholders?	1202	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
4 <input type="checkbox"/> Other - If option 4 is selected:		
Estate or trust	1674	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Grazing association, government facility or American Indian reservation	1205	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
Other, specify 1676 type:	1206	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

Section 14 - Value of Sales

1. Please classify this operation in terms of the gross value of sales and government agricultural payments in 2020.

INCLUDE: sales of all the crops, livestock, poultry, and livestock products (milk, eggs, etc.) sold in 2020.

- the value of hay, silage, and other crops harvested in 2020, but not sold.
- the value of all crops, livestock and poultry produced under contract in 2020.
- landlord's share of government payments and crops sold in 2020.

EXCLUDE dollars received on land rented to others.

1207

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

Section 14 - Value of Sales (continued)

2. 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
(corn, flaxseed, grain silage and forage, grains and oilseeds, popcorn, rice,
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
(beets, cabbage, cantaloupes, pumpkins, sweet corn,
tomatoes, watermelons, vegetable seeds, etc.) | 4 <input type="checkbox"/> |
| 5 – Fruit, Tree Nuts and Berries
(almonds, apples, blueberries, cherries, grapes, hazelnuts, kiwifruit,
oranges, pears, pecans, strawberries, walnuts, etc.) | 5 <input type="checkbox"/> |
| 6 – Nursery, Greenhouse, Floriculture and Sod
(bedding plants, bulbs, cut flowers, flower seeds, foliage plants,
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
(grass seed, hay and grass silage, hops, maple syrup, mint,
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
(beef and dairy cattle for breeding stock, fed cattle, beef and dairy cull animals,
stockers and feeders, veal calves, etc.) | 11 <input type="checkbox"/> |
| 12 – Sheep, Goats, and their Products
(wool, mohair, milk and cheese) | 12 <input type="checkbox"/> |
| 13 – Horses, Ponies, and Mules
(burros and donkeys) | 13 <input type="checkbox"/> |
| 14 – Poultry and Eggs
(broilers, chickens, turkeys, ducks, eggs, emus, geese, hatchlings,
ostriches, pigeons, pheasants, quail, poultry products, etc.) | 14 <input type="checkbox"/> |
| 15 – Aquaculture
(catfish, trout, ornamental and other fish, mollusks, crustaceans, etc.) | 15 <input type="checkbox"/> |
| 16 – Other Animals and Other Animal Products
(honey bees, honey, rabbits, fur-bearing animals, semen, manure,
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.

Use this Space for Notes and Comments.

Section 15 - Conclusion

1. 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 2

Operation Name: _____

Operator Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: (____) _____ ☐ Check if cell phone.

a. Did this person operate land individually on June 1, 2020?

1 ☐ Yes

3 ☐ No

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.	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												