Page 1 of 1

| CRP-1 U.S. DEPARTMENT OF AGRICULTURE (01-08-24) Commodity Credit Corporation | | 1. ST. & CO. CODE & ADMIN. LOCATION 46 011 | | | |
|---|-------------------------------|--|--------------------------------|--|--|
| CONSERVATION RESERVE PROGRAM CONTRACT | - | 3. CONTRACT NUMBER 11172B | | | |
| 5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) | 6. TRACT NUMBER | 7. CONTRACT PERIOD | | | |
| BROOKINGS COUNTY FARM SERVICE AGENCY 205 6TH ST BROOKINGS, SD57006-1406 | 6309 | FROM: (MM-DD-YYYY) 10-01-2017 | TO: (MM-DD-YYYY) 09-30-2027 | | |
| | 8. SIGNUP TYPE: Continuous | | | | |
| 5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (605) 692-8003 | Continuous | | | | |
| THIS CONTRACT is entered into between the Commodity Credit Corporation (referred to as "CCC") and the undersigned owners, operators, or tenants | | | | | |

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

| 9A. Rental Rate Per Acre \$ 211.55 | 10. Identification of CRP Land (See Page 2 for additional space) | | | | |
|---|--|--------------|-----------------|----------|----------------------------------|
| 9B. Annual Contract Payment \$1,946.00 | A. Tract No. | B. Field No. | C. Practice No. | D. Acres | E. Total Estimated Cost-Share |
| 9C. First Year Payment \$ | 6309 | 0014 | CP21 | 7.40 | \$ 222.00 |
| (Item 9C is applicable only when the first year payment is prorated.) | 6309 | 0018 | CP21 | 1.80 | \$ 54.00 |

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)

in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

| THE TRUTTED PARTIES (III THISTO LIT | arr arroo marriado | no aro digining, occ i ag | 0 0./ | |
|--|--------------------|---------------------------|---|--------------------------|
| A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) FRANCES FAY OLSON ESTATE 22792 469TH AVE COLMAN, SD57017-6807 | (2) SHARE | (3) SIGNATURE (By) | (4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY | (5) DATE (MM-DD-YYYY) |
| B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) | (2) SHARE | (3) SIGNATURE (By) | (4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY | (5) DATE (MM-DD-YYYY) |
| C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) | (2) SHARE | (3) SIGNATURE (By) | (4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY | (5) DATE (MM-DD-YYYY) |
| 12. CCC USE ONLY A. SIGNA | TURE OF CCC REI | PRESENTATIVE | | B. DATE |

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq), the Agricultural Improvement Act of 2018 (Pub. L. 115-334), the Further Continuing Appropriations and Other Extensions Act, 2024 (Pub. L. 118-22), and the Conservation Reserve Program 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result

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

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

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

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

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2. SIGN-UP

1. ST. & CO. CODE & ADMIN. LOCATION

| (01-08-24) Commodity Credit Corporation | | | | 46 011 | | | NUMBER 50 | |
|--|---|--|--|---|---|--|---|--|
| CONSERVATION RESERVE PROGRAM CONTRACT | | | | 3. CONTRACT NUMBER | | | 4. ACRES FOR | |
| | | | | | ENROLLMENT 11.80 | | | |
| 5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) | | | | 6. TRACT NUMBER 7. CONTRACT PER | | 7. CONTRACT PERIOD | | |
| BROOKINGS COUNTY FARM SERVICE AGE | NCY | | | 6309 | | FROM: (MM-DD-YYYY) | TO: (MM-DD-YYYY) | |
| 205 6TH ST BROOKINGS, SD57006-1406 | | | 6309 | | 10-01-2017 | 09-30-2027 | | |
| Zhodrings, Sp3,000 1100 | | | | | | | | |
| | | | | 8. SIGNUE | | | | |
| 5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (605) 692-8003 | | | | -Continuous | | | | |
| THIS CONTRACT is entered into between the (referred to as "the Participant".) The Partic CCC for the stipulated contract period from acreage the Conservation Plan developed for comply with the terms and conditions conta Program Contract (referred to as "Appendix applicable contract period. The terms and content of the t | ipant agrees to plathe date the Contrars of the contrars of the contrars of the contrars of this contrars of this conditions of this contrars ACKNO | ace the designated act is executed by d approved by the act, including the Aj ow, the Participant ontract are contain OWLEDGE RECEIP | acreage the CCC CCC an ppendix acknowned in th | e into the Co C. The Partion of the Partion to this Cou dedges reco | onservation I icipant also a cipant. Addit ntract, entitle eipt of a copy RP-1 and in th | Reserve Program ("CRP") grees to implement on su ionally, the Participant and Appendix to CRP-1, Col of the Appendix/Append e CRP-1 Appendix and ar | or other use set by uch designated d CCC agree to servation Reserve ices for the by addendum | |
| 9A. Rental Rate Per Acre \$ 200.4 | Per Acre \$ 200.40 10. Identification of | | | f CRP Land (See Page 2 for additional space) | | | | |
| 9B. Annual Contract Payment \$ 2,365 | 5.00 | A. Tract No. B. | | Field No. C. Practic | | No. D. Acres | E. Total Estimated Cost-Share | |
| 9C. First Year Payment \$ | | 6309 | 0 | 0017 CI | | 11.80 | \$ 354.00 | |
| (Item 9C is applicable only when the first year payment is prorated.) | | | | | | | | |
| 11. PARTICIPANTS (If more than a | hree individual | ls are signing, s | see Pa | ge 3.) | 52 | | | |
| A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) FRANCES FAY OLSON ESTATE 22792 469TH AVE COLMAN, SD57017-6807 | (2) SHARE | (3) SIGNATURE (By) | | (4) | (4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY | | (5) DATE (MM-DD-YYYY) | |
| B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) | (2) SHARE | (3) SIGNATURE (By) | | (4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY | | (5) DATE (MM-DD-YYYY) | | |
| C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) | (2) SHARE | (3) SIGNATURE (By) | | (4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY | | (5) DATE (MM-DD-YYYY) | | |
| 12. CCC USE ONLY A. SIGNATURE OF CCC REPRESENTATIVE | | | | | B. DATE (MM-DD-YYYY) | | | |

CRP-1

U.S. DEPARTMENT OF AGRICULTURE

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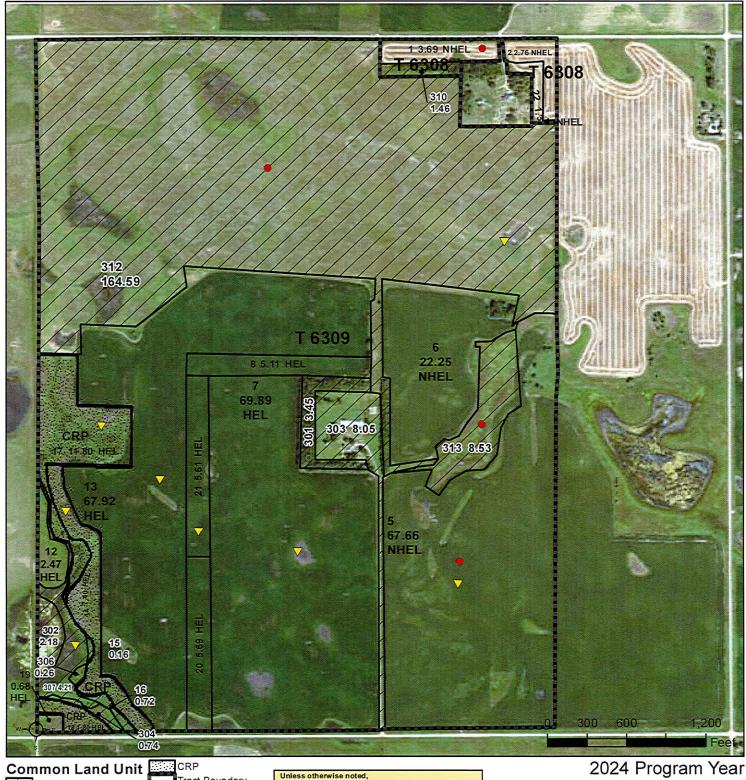
In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national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

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Brookings County, South Dakota



Non-Cropland

Tract Boundary **PLSS**

crops listed below are: Non-irrigated Producer initial Intended for Grain Corn = Yellow Soybeans = Common Wheat - HRS or HRW

Sunflowers = Oil or Non

Map Created January 04, 2024

Farm 9393

Wetland Determination Identifiers

Restricted Use

Cropland

- Limited Restrictions
- Exempt from Conservation Compliance Provisions

20-111N-51W-Brookings

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