

<b>CRP-1</b> (01-08-24)  <b>CONSERVATION RESERVE PROGRAM CONTRACT</b>	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation		1 ST. & CO. CODE & ADMIN. LOCATION 46 109	2 SIGN-UP NUMBER 46
			3 CONTRACT NUMBER 11011C	4 ACRES FOR ENROLLMENT 35.47
5A COUNTY FSA OFFICE ADDRESS (Include Zip Code) ROBERTS COUNTY FARM SERVICE AGENCY 2018 SD HIGHWAY 10, STE B SISSETON, SD57262-2502		6 TRACT NUMBER 4864	7 CONTRACT PERIOD FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) 10-01-2014 09-30-2029	
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (605)698-7639		8 SIGNUP TYPE: FWP		

**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	\$ 193.98	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 6,880.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	4864	11	CP27	0.56	\$ 4.00
(Item 9C is applicable only when the first year payment is prorated.)		4864	13	CP27	0.86	\$ 6.00
		4864	15	CP27	0.49	\$ 4.00

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

A(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)
WARREN FELLBAUM 45827 102ND ST NEW EFFINGTON, SD57255-6101	50.00 %	<i>Warren Fellbaum</i>	owner	9-9-24
DEBRA J SUTTON 111 7TH AVE W SISSETON, SD57262-1709	50.00 %	<i>Debra Sutton</i>		9-9-24
TERRY SUTTON 111 7TH AVE W SISSETON, SD57262-1709	0.00 %	<i>Terry Sutton</i>		9-9-24

12. CCC USE ONLY	A. SIGNATURE OF CCC REPRESENTATIVE	<i>Carrie Hanson</i>
	B. DATE (MM-DD-YYYY)	09/09/2024

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

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

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

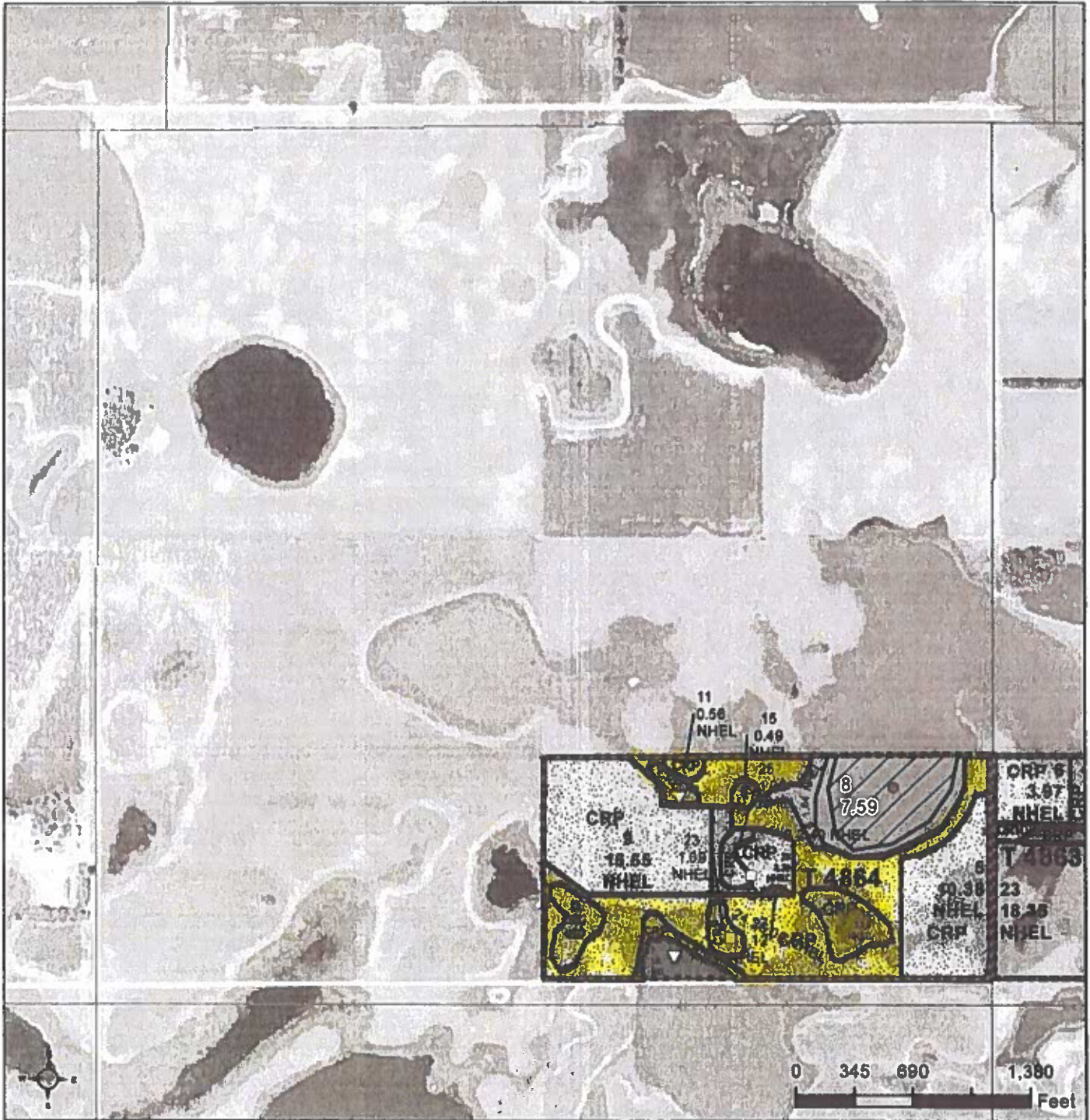
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11. PARTICIPANTS (CONTINUED FROM PAGE 1)

D(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)
VICKY FELLBAUM 45827 102ND ST NEW EFFINGTON, SD57255-6101	0.00 %	Vicky Fellbaum		9-9-24
E(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
F(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
G(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
H(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
I(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
J(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
K(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
L(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
M(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
N(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
O(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			





**Common Land Unit**

	Non-Cropland		CRP
	Cropland		Tract Boundary
			PLSS

**Wetland Determination Identifiers**

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

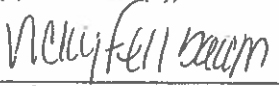
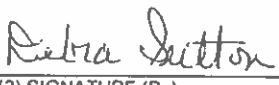


2023 Program Year

Map Created April 14, 2023

**Farm 10315**

**4-128N-51LW**



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).

<b>CRP-1</b> (01-08-24)		U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation			1. ST. & CO. CODE & ADMIN LOCATION 46 109		2. SIGN-UP NUMBER 48	
<b>CONSERVATION RESERVE PROGRAM CONTRACT</b>					3. CONTRACT NUMBER 11333C		4. ACRES FOR ENROLLMENT 25.93	
					5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) ROBERTS COUNTY FARM SERVICE AGENCY 2018 SD HIGHWAY 10, STE B SISSETON, SD57262-2502		6. TRACT NUMBER 4864	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2016 TO: (MM-DD-YYYY) 09-30-2029
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (605) 698-7639					8. SIGNUP TYPE: Continuous			
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 \$ 199.24		10. Identification of CRP Land (See Page 2 for additional space)						
9B. Annual Contract Payment \$ 5,166.00		A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost/Share		
9C. First Year Payment \$		4864	5	CP37	10.38	\$ 67.00		
(Item 9C is applicable only when the first year payment is prorated.)		4864	9	CP37	15.55	\$ 101.00		
<b>11. PARTICIPANTS (If more than three individuals are signing, see Page 3.)</b>								
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) WARREN FELLBAUM 45827 102ND ST NEW EFFINGTON, SD57255-6101		(2) SHARE 50.00 %	(3) SIGNATURE (By) 	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY Spouse		(5) DATE (MM-DD-YYYY) 9-9-24		
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) DEBRA J SUTTON 111 7TH AVE W SISSETON, SD57262-1709		(2) SHARE 50.00 %	(3) SIGNATURE (By) 	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY		(5) DATE (MM-DD-YYYY) 9-9-24		
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) TERRY SUTTON 111 7TH AVE W SISSETON, SD57262-1709		(2) SHARE 0.00 %	(3) SIGNATURE (By) 	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY		(5) DATE (MM-DD-YYYY) 9-9-24		
<b>12. CCC USE ONLY</b>		A. SIGNATURE OF CCC REPRESENTATIVE 				B. DATE (MM-DD-YYYY) 09/09/2024		
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11. PARTICIPANTS (CONTINUED FROM PAGE 1)				
D(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) VICKY FELLBAUM 45827 102ND ST NEW EFFINGTON, SD57255-6101	(2) SHARE  0.00 %	(3) SIGNATURE (By) 	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY) 
E(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)
F(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)
G(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)
H(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)
I(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)
J(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)
K(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)
L(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)
M(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)
N(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)
O(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)



**Common Land Unit**

Non-Cropland	CRP
Cropland	Tract Boundary
	PLSS

**Wetland Determination Identifiers**

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

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2023 Program Year

Map Created April 14, 2023

Farm 10315

4-128N-51LW

<b>CRP-1</b> (01-08-24)  <b>CONSERVATION RESERVE PROGRAM CONTRACT</b>	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation		1. ST. & CO CODE & ADMIN. LOCATION 46 109	2. SIGN-UP NUMBER 50
	3. CONTRACT NUMBER 11456C		4. ACRES FOR ENROLLMENT 4.52	
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) ROBERTS COUNTY FARM SERVICE AGENCY 2018 SD HIGHWAY 10, STE B SISSETON, SD57262-2502			6. TRACT NUMBER 4864	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2017 TO: (MM-DD-YYYY) 09-30-2029
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (605) 698-7639			8. SIGNUP TYPE FWP	

**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	\$ 207.03	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 936.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	4864	25	CP27	1.06	\$ 0.00
(Item 9C is applicable only when the first year payment is prorated.)		4864	27	CP27	0.12	\$ 0.00
		4864	28	CP28	3.34	\$ 25.00

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

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WARREN FELLBAUM 45827 102ND ST NEW EFFINGTON, SD57255-6101	50.00 %	<i>Warren Fellbaum</i>	owner	9-9-24
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TERRY SUTTON 111 7TH AVE W SISSETON, SD57262 1709	0.00 %	<i>Terry Sutton</i>	owner	9-9-24
<b>12. CCC USE ONLY</b>		A. SIGNATURE OF CCC REPRESENTATIVE <i>Camie Hanson</i>		B. DATE 09/09/2024

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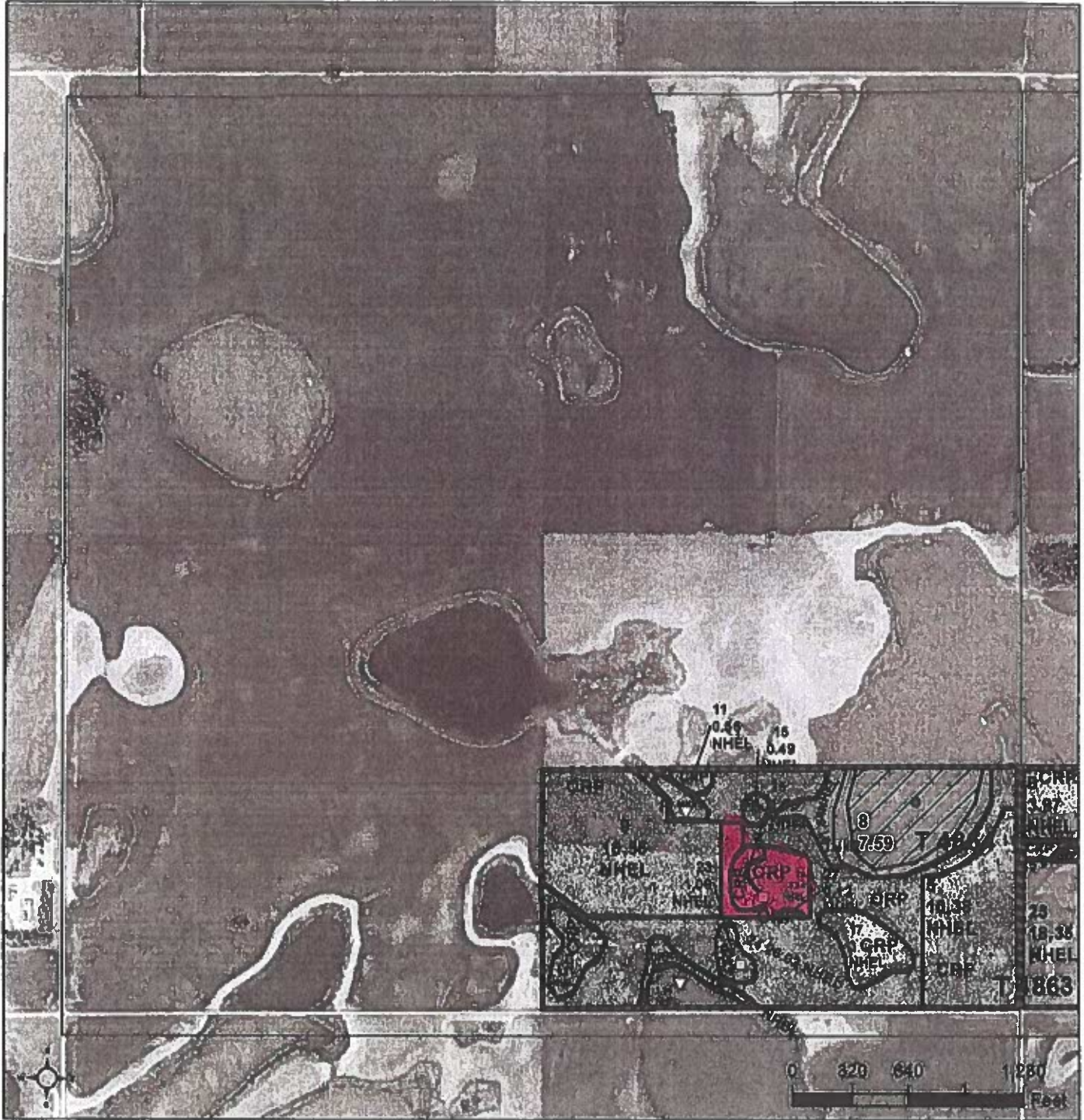
## 11. PARTICIPANTS (CONTINUED FROM PAGE 1)

(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)
D(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) VICKY FELLBAUM 45827 102ND ST NEW EFFINGTON, SD57255-6101	0.00 %	Vicky Fellbaum		9/19/24
E(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
F(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
G(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
H(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
I(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
J(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
K(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
L(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
M(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
N(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			
O(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	%			



United States  
Department of  
Agriculture

# Roberts County, South Dakota



**Common Land Unit**

Non-Cropland	CRP
Cropland	Tract Boundary
	PLSS

**Wetland Determination Identifiers**

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

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2017 Program Year

Map Created February 02, 2017

**Farm 10315**

**T128 R51 S4**