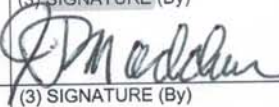


<b>CRP-1</b> (12-02-19)  <b>CONSERVATION RESERVE PROGRAM CONTRACT</b>	U.S. DEPARTMENT OF AGRICULTURE Commodity Credit Corporation	1. ST. & CO. CODE & ADMIN. LOCATION 08 001	2. SIGN-UP NUMBER 54
	3. CONTRACT NUMBER		4. ACRES FOR ENROLLMENT 580.20
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) ADAMS COUNTY FARM SERVICE AGENCY 57 W BROMLEY LANE BRIGHTON, CO 80601-3025		6. TRACT NUMBER 7099	7. CONTRACT PERIOD FROM: (MM-DD-YYYY) 10-01-2020 TO: (MM-DD-YYYY) 09-30-2030
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (303) 659-0525		8. SIGNUP TYPE: General	

**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; CRP-2; CRP-2C; or CRP-2G.**

9A. Rental Rate Per Acre	\$ 17.00	10. Identification of CRP Land (See Page 2 for additional space)				
9B. Annual Contract Payment	\$ 9,863.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$	7099	0001	CP2	88.54	\$ 8,854.00
(Item 9C is applicable only when the first year payment is prorated.)		7099	0002	CP2	178.30	\$ 17,830.00
		7099	0003	CP2	313.36	\$ 31,336.00

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

A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) JON P MADDERN 356 CROSSLAND CT EDMOND, OK 73003-2174	(2) SHARE 100.00 %	(3) SIGNATURE (By) 	(4) TITLE/RELATIONSHIP OF THE INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY	(5) DATE (MM-DD-YYYY) 2/25/2020
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)
------------------	------------------------------------	----------------------

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

**Paperwork Reduction Act (PRA) Statement:** The information collection is exempted from PRA as specified in 7 U.S.C. 9091(2)(c)(B). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. **RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.**

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

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

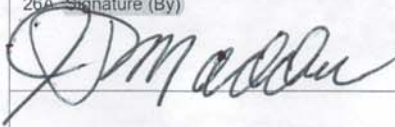
To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html) and at any USDA office or write a letter addressed to USDA and provide 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](mailto:program.intake@usda.gov). USDA is an equal opportunity provider, employer, and lender.

For Items 21 through 24 (See Page 4 for additional space)										
21. Tract No.	22. Current Field No.	23. Current Crop or Land Use	24. Crop Land Use Summary							
			A. Offered Acres	B. Crop History Eligible Acres	C. 2012	D. 2013	E. 2014	F. 2015	G. 2016	H. 2017
0007099	0001	CRP	88.54	88.54	CRP	CRP	CRP	CRP	CRP	CRP
0007099	0002	CRP	178.30	178.30	CRP	CRP	CRP	CRP	CRP	CRP
0007099	0003	CRP	313.36	313.36	CRP	CRP	CRP	CRP	CRP	CRP
<b>25. TOTALS ▶</b>			580.20	580.20						

**26. PRODUCER'S CERTIFICATION:**

*By signing below I certify to all of the following: (1) All of the Environmental Benefits Index (EBI) factors and subfactors N1 through N5 have been explained to me; (2) I have been informed that planting an approved mixture of covers that benefit wildlife, enhancing the existing cover to provide a mixture that benefits wildlife, if applicable, and/or creating and maintaining open areas of approved herbaceous cover, may improve the acceptability of the offer; (3) I have been informed of the estimated cost of establishing the cover offered; (4) I have been informed that offering a per acre rental payment that is less than the calculated annual maximum payment rate may enhance the acceptability of the offer; (5) I have been informed that I may be required to pay for a measurement service on the acreage offered before such acreage may be enrolled in the CRP; (6) I have been informed that certain land enrolled in the EQIP pursuant to regulations at 7 CFR Part 1466 is ineligible for enrollment in the CRP; (7) To the best of my knowledge and belief the acreage of crops and land listed herein, if applicable, are true and correct; and (8) The signing of this form gives USDA representatives authorization to enter and inspect crops and land uses, and enter for other purposes as deemed appropriate by USDA, on the above-identified land.*

*I understand that an inaccurate certification could result in a payment reduction or loss of program benefits.*

26A. Signature (By)	26B. Title/Relationship of the Individual if Signing in a Representative Capacity	26C. DATE (MM-DD-YYYY)
	<i>Crown Operator</i>	<i>2/25/2020</i>