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Page 1 of 1

CRP-1 U.S. DEPARTMENT (07-06-20) Commodity Cri	OF AGRICULTURE edit Corporation		1, 81.	27	NUMBER 55		
CONSERVATION RESERV	E PROGRAN	CONTRACT		3. CONTRACT NUMBER 1544			4 ACRES FOR ENROLLMENT 28.96
5A. COUNTY FSA OFFICE ADDRESS (In	clude Zip Code)		6. TRA	CT NUMBER	7. CONTRAC		
WILKIN COUNTY FARM SERVICE AGENC 1150 HWY 75 NORTH SUITE 1 BRECKENRIDGE, MN 56520-1117			5225	FROM: (MM-I 10/01/2		TO: (MM-DD-YYYY) 09/30/2031	
5B. COUNTY FSA OFFICE PHONE NUM (Include Area Code): (218) 643-1536	SAFE	8. SIGNUP TYPE: SAFE - MN Back Forty Pheasant Habitat SAFE					
(referred to as "the Participant".) The Participant (referred to as "the Participant".) The Participant (referred to as "the Participant (referred to as "the Program Contract (referred	n the date the Control or such acreage ar ained in this Control x"). By signing bel conditions of this of RTICIPANTS ACKN RP-2G, or CRP-2CS	act is executed by ad approved by the act, including the A ow, the Participant contract are contain OWLEDGE RECEIF	the CCC. The F CCC and the P appendix to this acknowledges ned in this Form PT OF THE FOLI	Participant also articipant. Addi Contract, entitle receipt of a cop CRP-1 and in the LOWING FORMS	agrees to Implitionally, the Pa ed Appendix to y of the Appen he CRP-1 Appen S: CRP-1; CRP-	ement on s articipant as CRP-1, Co dix/Append andix and a	uch designated not CCC agree to onservation Reserve dices for the any addendum x and any
S/I. HOMOTHUE FEETING	ا	-		C. Practic). Acres	E. Total Estimated
9B. Annual Contract Payment \$ 5,52		A. Tract No.	B. Field No.	C 1559 (156 - 156)			Cost-Share
9C. First Year Payment \$ 5,52 (Item 9C is applicable only when the first ye		5225	0001	CP38E	-25	28.96	\$ 3,736.00
prorated.)							
11. PARTICIPANTS (If more than	three individua	ls are signing,	see Page 3.)				
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) CO PROPERTES IT LLC CO JILL CHRISTENSEN 101 PEDICAN RD CTERTAIL, NR 15571-7004	(2) SHARE	(3) SIGNATURE (e-Signed by Jill For, if app On 07-2	(By) Christensen licable:	(4) TITLE/REL INDIVIDUA REPRESEI Presi	L SIGNING IN NTATIVE CAP dent	THE ACITY	(5) DATE (MM-DD-YYYY) 07-21-21
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE	(3) SIGNATURE	(By)		ATIONSHIP O LL SIGNING IN NTATIVE CAP	THE	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE	(3) SIGNATURE	(By)		ATIONSHIP O LL SIGNING IN NTATIVE CAP	THE	(5) DATE (MM-DD-YYYY)
	RE OF CCC REF		7/	1 C	FD.		B. DATE (MM-DD-YYYY) 8-24-21
NOTE: The following statement is made in acc is the Commodity Credit Corporation C 3831 et seq), the Agricultural Improven receive benefits under the Conservatio Tribal agencies, and nongovernmental	harter Act (15 U.S.C. nent Act of 2018 (Pub.	714 et seq.), the Food L. 115-334) and 7 CF The information collec	f Security Act of 1 FR Part 1410. The eted on this form n	985 (16 U.S.C. 38 e information will b nav be disclosed to	01 et seq.), the A ne used to detern o other Federal. S	igricultural A nine eligibility State, Local d	ot or 2014 (16 0.5.0. to participate in and dovernment agencies,

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 in accuration with reuse a configure for 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.hlm/ 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.inlake@usda.qov. USDA is an equal opportunity provider, employer, and lender. RECEIVED

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CRP Plan Map



Customer(s): OC PROPERTIES II LLC

District: WILKIN SOIL AND WATER CONSERVATION DISTRICT

Legal Description: T135 R45 S30

Approximate Acres: 28.96

Field Office: BRECKENRIDGE SERVICE CENTER
Agency: USDA-NRCS Date: 7/1/2021

Assisted By: JONATHAN QUAST

Land Units: 1

State and County: MN, Wilkin County, Minnesota



Legend

CRP CP38E-25

Townships
Sections

Wilkin County Tanberg 30 - Tract 5225



1:3,490

1 inch = 291 feet

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Page 1 of 1 2. SIGN-UP 1. ST. & CO. CODE & ADMIN. LOCATION U.S. DEPARTMENT OF AGRICULTURE CRP-1 NUMBER Commodity Credit Corporation (07-06-20)27 167 55 4. ACRES FOR 3. CONTRACT NUMBER CONSERVATION RESERVE PROGRAM CONTRACT **ENROLLMENT** 1154. 15.92 5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) 6. TRACT NUMBER 7. CONTRACT PERIOD WILKIN COUNTY FARM SERVICE AGENCY FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) 5231 1150 HWY 75 NORTH SUITE 1 09/30/2031 10/01/2021 BRECKENRIDGE, MN 56520-1117 8. SIGNUP TYPE: SAFE - MN Back Forty Pheasant COUNTY FSA OFFICE PHONE NUMBER Habitat SAFE (Include Area Code): (218)643-1536 x2 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

9A. Rental Rate Per Acre	\$ 131.76 J.C.	10. Identification of CRP Land (See Page 2 for additional space)					
9B. Annual Contract Payment	\$2,098.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share	
9C. First Year Payment	\$2,098.00	5231	0001	CP38E-25	3.48	\$ 449.00	
(Item 9C is applicable only when the first year payment is		5231	0002	CP38E-25	7.91	\$ 1,020.00	
prorated.)	, -	5231	0003	CP38E-25	4.53	\$ 584.00	

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.) (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE A(1) PARTICIPANT'S NAME AND (2) SHARE (MM-DD-YYYY) INDIVIDUAL SIGNING IN THE ADDRESS (Include Zip Code) e-Signed by Jill Christensen For, if applicable: On 07-21-21 PROPERTIES II LLC JILL CHRISTENSEN PELICAN RD ERTAIL, MN 56571-7004 REPRESENTATIVE CAPACITY 100.00% 07-21-21 President (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE (2) SHARE B(1) PARTICIPANT'S NAME AND (MM-DD-YYYY) INDIVIDUAL SIGNING IN THE ADDRESS (Include Zip Code) REPRESENTATIVE CAPACITY (4) TITLE/RELATIONSHIP OF THE C(1) PARTICIPANT'S NAME AND (3) SIGNATURE (By) (5) DATE (2) SHARE (MM-DD-YYYY) INDIVIDUAL SIGNING IN THE ADDRESS (Include Zip Code) REPRESENTATIVE CAPACITY % B. DATE A. SIGNATURE OF CCC REPRESENTATIVE 12. CCC USE ONLY (MM-DD-YYYY)

NOTE: The following statement is made in accordance with the Privacy Act of 1976 (5-USC 552a - a amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

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WILKIN COUNTY FSA OFFICE

Date Printed: 06/30/2021

19

T135'R45

Tanberg

Wilkin County, Minnesota



MN167 T5231 1394529

T135.R45

Tanberg

2021 Program Year

Map Created April 28, 2021

1354529



Unless otherwise noted:
Shares are 100% operator
Crops are non-irrigated
Corn = yellow for grain
Soybeans = common soybeans for grain
Wheat = HRS, HRW = Grain
Sunflower = Oil, Non-Oil = Grain
Oats and Bariey = Spring for grain
Rye = for grain
Peas = process
Alfalfa, Mixed Forage AGM, GMA, IGS = for forage
Beans = Dry Edible
NAG = for GZ
Canola = Spring for seed

Common Land Unit

Non-Cropland
Cropland
CRP
Tract Boundary

Tract Boundary
Minnesota_Transparency_Polygon_021420

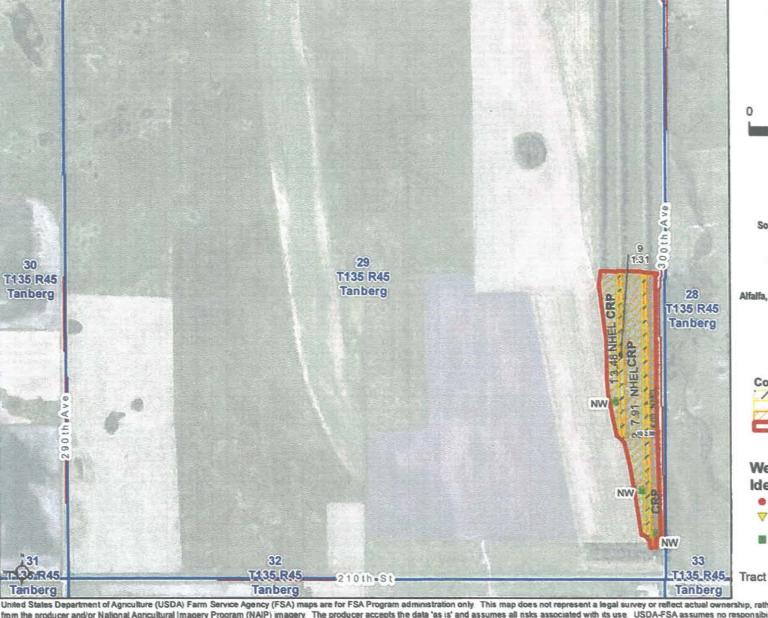
Wetland Determination Identifiers

Restricted Use

▼ Limited Restrictions

Exempt from Conservation Compliance Provisions

Tract Cropland Total: 15.92 acres



20

T-135 R45

Tanberg

200th St

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). This map displays the 2019 NAIP imagery.

COPY FOR YOUR INFORMATION

Page 1 of 1 1 ST. & CO. CODE & ADMIN LOCATION SIGN-UP U.S. DEPARTMENT OF AGRICULTURE CRP-1 NUMBER (07-06-20)Commodity Credit Comporation 27 167 53 3 CONTRACT NUMBER ACRES FOR **ENROLLMENT** CONSERVATION RESERVE PROGRAM CONTRACT 7. CONTRACT PERIOD 5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) 6 TRACT NUMBER WILKIN COUNTY FARM SERVICE AGENCY 1150 HWY 75 NORTH SUITE 1 FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) 5226 10/01/2020 BRECKENRIDGE, MN 56520-1117 09/30/2035 8. SIGNUP TYPE: 5B. COUNTY FSA OFFICE PHONE NUMBER Continuous (Include Area Code): (218) 643-1536 x2 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. 10. Identification of CRP Land (See Page 2 for additional space) \$ 120.00 9A. Rental Rate Per Acre Initial here E. Total Estimated 9B. Annual Contract Payment \$ 250.00 A. Tract No. B Field No C. Practice No. D. Acres Cost-Share 9C. First Year Payment \$ 250.00 5226 0001 CP21 2.08 \$ 0.00 (Item 9C is applicable only when the first year payment is prorated.) 11. PARTICIPANTS (If more than three individuals are signing, see Page 3.) (2) SHARE A(1) PARTICIPANT'S NAME AND (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE (MM-DD-YYYY) ADDRESS (Include Zip Code) INDIVIDUAL SIGNING IN THE REPRESENTATIVE CAPACITY 07-28-2020 100.00% US RD 301 \$677). B(1) PARTICIPANT'S NAME AND (4) TITLE/RELATIONSHIP OF THE (2) SHARE (3) SIGNATURE (By) (5) DATE ADDRESS (Include Zip Code) INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) REPRESENTATIVE CAPACITY % C(1) PARTICIPANT'S NAME AND (2) SHARE (4) TITLE/RELATIONSHIP OF THE (3) SIGNATURE (By) (5) DATE INDIVIDUAL SIGNING IN THE ADDRESS (Include Zip Code) (MM-DD-YYYY) REPRESENTATIVE CAPACITY 12. CCC USE ONLY A. SIGNATURE OF CCC REPRESENTATIVE B DATE (MM-DD-YYYY) -10-202 The following statement is made in accordance with the Privacy Act of 1974 (5/OSC 552a - as amegical). 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 NOTE: 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. 3845(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.

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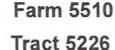
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Date Printed 07/22/2020



2020 Program Year

Map Created April 28, 2020



Shares are 100% operator Crops are non-irrigated Corn = yellow for grain Soybeans = common soybeans for grain Wheat = HRS, HRW = Grain Sunflower = Oil, Non-Oil = Grain Oats and Barley = Spring for grain Rye = for grain Peas = process Alfalfa, Mixed Forage AGM, GMA, IGS = for forage Beans = Dry Edible NAG = for GZ Canola = Spring for seed

Minnesota Transparency Polygon 02142019

- Exempt from Conservation Compliance Provisions

Tract Cropland Total: 2.08 acres



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). This map displays the 2019 NAIP imagery.

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Page 1 of 1

(07-06-20)			F AGRICULTURE lit Corporation	FSA OFF			ADMIN. LOCATION 167	2. SIGN-UP NUMBER 53
CONSERVATION RESERVE PROGRAM CONTRACT 5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)						NTRACT NUMB	4. ACRES FOR ENROLLMENT 3.57	
5A. COUNTY F	SA OFFICE ADD	RESS (Incl	ude Zip Code)		6 TRA	ACT NUMBER	7. CONTRACT PERIO	
WILKIN COUNTY 1150 HWY 75 N BRECKENRIDGE,	ORTH SUITE 1			8		5224	FROM: (MM-DD-YYYY) 10/01/2020	TO: (MM-DD-YYYY) 09/30/2035
					8. SIG	NUP TYPE:		-L
(Include Area	SA OFFICE PHO Code): (218) 64:	3-1536 x	2			nuous	ersigned owners, operate	
acreage the Conscomply with the Program Contract applicable contract thereto. BY SIGN	servation Plan de terms and condit at (referred to as ' act period. The te NING THIS CONTI	eveloped for tions contain "Appendix" erms and co RACT PAR	r such acreage an ned in this Contra). By signing belo anditions of this c	ed approved by the Co act, including the Ap ow, the Participant a contract are contains OWLEDGE RECEIPT 10, as applicable.	CCC and the F pendix to this icknowledges ad in this Form OF THE FOL	Participant. Additional contract, entitle receipt of a cope of CRP-1 and in the LOWING FORMS	agrees to implement on stronally, the Participant a ed Appendix to CRP-1, C y of the Appendix/Appen he CRP-1 Appendix and a S: CRP-1; CRP-1 Appendi	and CCC agree to onservation Reserve widices for the any addendum ix and any
9A. Rental Rate	Per Acre	\$120.0	5 B		n of CRP La	nd (See Page	2 for additional space)	
9B. Annual Cont	tract Payment	\$428.0	0 Initial here	A. Tract No.	B. Field No.	C. Practic	e No. D. Acres	E. Total Estimated Cost-Share
9C. First Year P.	ayment	\$428.0	0	5224	0001	CP2	1 3.57	\$ 0.00
9C. First Year P. (Item 9C is applied prorated.)				5224	0001	CP2	1 3.57	\$ 0.00
(Item 9C is applied prorated.)	cable only when t	the first yea	r payment is	5224 Is are signing, s			1 3.57	\$ 0.00
(Item 9C is applie prorated.) 11. PARTICIPA ADDRESS	PANTS (If mo	the first yea ore than t	r payment is		ee Page 3.,) (4) TITLE/REL	ATIONSHIP OF THE	\$ 0.00 (5) DATE (MM-DD-YYYY)
(Item 9C is applic prorated.) 11. PARTICI A(1) PARTICIPA	PANTS (If mo	the first yea ore than t	r payment is hree individua	ls are signing, s	ee Page 3.,) (4) TITLE/REL INDIVIDUA	ATIONSHIP OF THE	(5) DATE (MM-DD-YYYY)
(Item 9C is applice prorated.) 11. PARTICIPA ADDRESS PROPERTIES IT LOSS PROPERT LOSS PROPERTIES IT LOSS PROPERTIES IT LOSS PROPERTIES IT LOS	PANTS (If mo	the first yea ore than t	r payment is hree individual (2) SHARE	ls are signing, s	ee Page 3.,	(4) TITLE/REL INDIVIDUA REPRESEI (4) TITLE/REL INDIVIDUA	ATIONSHIP OF THE L SIGNING IN THE	(5) DATE (MM-DD-YYYY)
(Item 9C is application of the provided.) 11. PARTICIPA ADDRESS (PROPERTIES IT LO 1/10 STEPLEM RE 12 PELICAN RE 12 PARTICIPA ADDRESS (C1) PARTICIPA (C1) PARTICIPA	PANTS (If mo	the first yea ore than t	r payment is hree individual (2) SHARE 100.00 %	Is are signing, signature (E	ee Page 3.,	(4) TITLE/REL INDIVIDUA REPRESEI INDIVIDUA REPRESEI INDIVIDUA REPRESEI INDIVIDUA	ATIONSHIP OF THE L SIGNING IN THE NTATIVE CAPACITY ATIONSHIP OF THE L SIGNING IN THE	(5) DATE (MM-DD-YYYY) (37 - 28 - 2020)

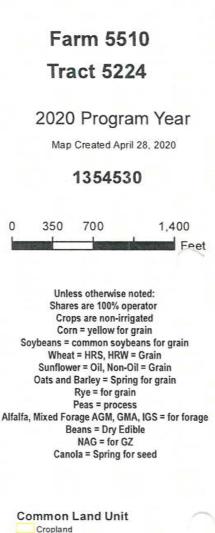
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Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.





Wetland Determination Identifiers

Minnesota_Transparency_Polygon_02142019

Restricted Use

CRP Tract Boundary

Limited Restrictions

Exempt from Conservation Compliance Provisions

Tract Cropland Total: 3.57 acres

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). This map displays the 2019 NAIP imagery.

CRP-1	J.S. DEPARTMENT	OF AGRICULTUR	?F	11 ST	& CO CODE & A	DMIN. LOCATION	Page 1 of 1
(07-06-20)		redit Corporation		1. 31	27 1	2. SIGN-UP NUMBER 57	
	TION RESERV		M CONTRACT	7 3. CC	IL 630	4. ACRES FOR ENROLLMENT 15.13	
5A. COUNTY FSA OF	FICE ADDRESS (In	clude Zip Code)		6. TR		7. CONTRACT PERIO	
WILKIN COUNTY FAR		Y				FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
1150 HWY 75 NORTH SUITE 1 BRECKENRIDGE, MN 56520-1117				1	5228	10/01/2022	100 E
±						10/01/2022	09/30/2032
					SNUP TYPE: tinuous		
5B. COUNTY FSA OF (Include Area Code): THIS CONTRACT is en (referred to as "the Par	(218)643-1536	x2			and the control of the second of		
(referred to as "the Par CCC for the stipulated acreage the Conservat, comply with the terms Program Contract (refe applicable contract per thereto. BY SIGNING T addendum thereto; and	ion Plan developed f and conditions cont erred to as "Appendi; riod. The terms and THIS CONTRACT PAI	for such acreage a ained in this Contr x"). By signing be conditions of this RTICIPANTS ACKN	ract is executed by nd approved by the act, including the A flow, the Participant contract are contain NOWLEDGE RECEIR	CCC and the P Appendix to this acknowledges	Participant also ag Participant. Addition Contract, entitled receipt of a copy of	rees to implement on s mally, the Participant a Appendix to CRP-1, Co of the Appendix/Appendix	such designated nd CCC agree to onservation Reserve dices for the
9A. Rental Rate Per A				(000)			
				On of CRP La	and (Soo Page 2)	for additional annual	
9B. Annual Contract Pa	avment \$ 2 15	J.C.				for additional space)	
9B. Annual Contract Page 80. First Year Bayman		1.00	A. Tract No.	B. Field No.			E. Total Estimated Cost-Share
9B. Annual Contract Page 9C. First Year Paymen		1.00					E. Total Estimated
	nt \$2,15	1.00	A. Tract No.	B. Field No.	C. Practice N	D. Acres	E. Total Estimated Cost-Share
9C. First Year Paymen (Item 9C is applicable of prorated.)	nt \$2,15	1.00 1.00 par payment is	A. Tract No. 5228	8. Field No. 0001	C. Practice N	D. Acres	E. Total Estimated Cost-Share
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In following statement is made in accordance with the Privacy Act of 1974 ISTISC 552a 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 Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

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

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and

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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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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MAY - 3 2022

Farm 6760 **Tract 5228**

2024 Program Year

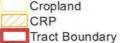
Map Created April 17, 2024

1354529



Unless otherwise noted: Shares are 100% operator Crops are non-irrigated Corn = yellow for grain Soybeans = common soybeans for grain Wheat = HRS, HRW = Grain Sunflower = Oil, Non-Oil = Grain Oats and Barley = Spring for grain Rye = for grain Peas = process Alfalfa, Mixed Forage AGM, GMA, IGS = for forage Beans = Dry Edible NAG = for GZ Canola = Spring for seed

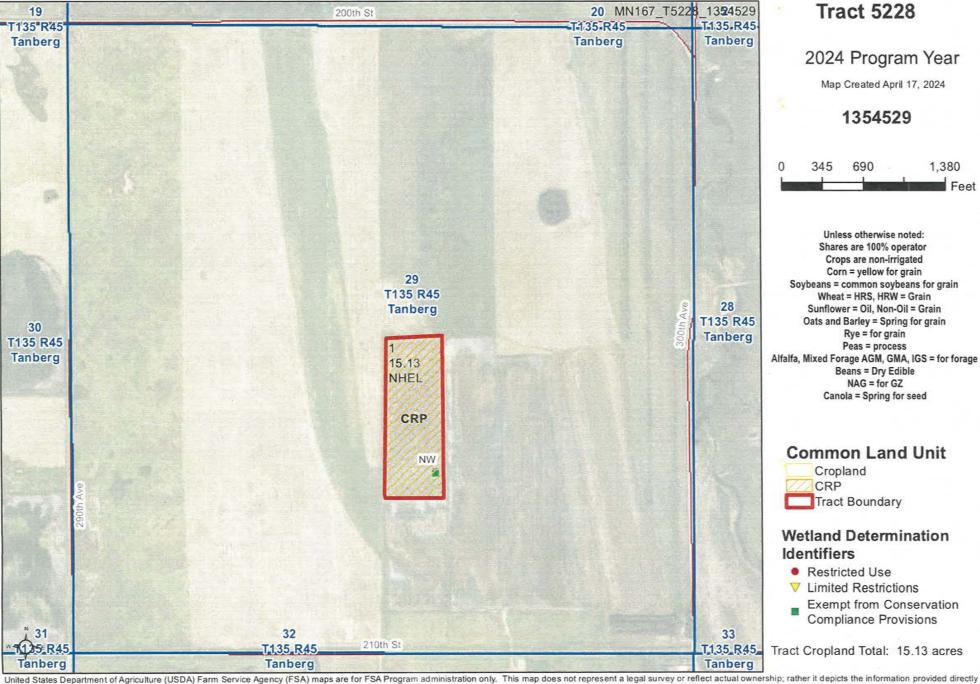
Common Land Unit



Wetland Determination Identifiers

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

Tract Cropland Total: 15.13 acres



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). This map displays the 2021 NAIP imagery.

COPY FOR YOUR INFORMATION

Page 1 of 1 1. ST. & CO. CODE & ADMIN. LOCATION 2. SIGN-UP CRP-1 U.S. DEPARTMENT OF AGRICULTURE NUMBER (07-06-20)Commodity Credit Corporation 27 167 3. CONTRACT NUMBER ACRES FOR CONSERVATION RESERVE PROGRAM CONTRACT ENROLLMENT 11542 28.88 5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code) 6. TRACT NUMBER 7. CONTRACT PERIOD FROM: (MM-DD-YYYY) TO: (MM-DD-YYYY) WILKIN COUNTY FARM SERVICE AGENCY 5218 1150 HWY 75 NORTH SUITE 1 09/30/2031 10/01/2021 BRECKENRIDGE. MN 56520-1117 8. SIGNUP TYPE: SAFE - MN Back Forty Pheasant COUNTY FSA OFFICE PHONE NUMBER Habitat SAFE (Include Area Code): (218)643-1536 x2

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-2C, or CRP-2C30, as applicable.

9A. Rental Rate Per Acre	\$ 114.04 J.C.	10. Identificati	on of CRP Land	(See Page 2 for ad	ditional space)	
9B. Annual Contract Payment	\$3,293.00	A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$3,293.00	5218	0002	CP38E-25	9.30	\$ 1,200.00
(Item 9C is applicable only when	the first year payment is	5218	0003	CP38E-25	11.57	\$ 1,493.00
(Item 9C is applicable only when the first year payment is prorated.)		5218	0004	CP38E-25	8.01	\$ 1,033.00

11. PARTICIPANTS (If more than three individuals are signing, see Page 3.) (4) TITLE/RELATIONSHIP OF THE (3) SIGNATURE (By) (5) DATE A(1) PARTICIPANT'S NAME AND (2) SHARE (MM-DD-YYYY) ADDRESS (Include Zip Code) e-Signed by Jill Christensen For, if applicable: On 07-21-21 INDIVIDUAL SIGNING IN THE OC PROPERTIES II LLC C/O JILL CHRISTENSEN 101 PELICAN RD OTTERTAIL, MN 56571-7064 REPRESENTATIVE CAPACITY 100.00% 07-21-21 President (5) DATE B(1) PARTICIPANT'S NAME AND (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (2) SHARE (MM-DD-YYYY) INDIVIDUAL SIGNING IN THE ADDRESS (Include Zip Code) REPRESENTATIVE CAPACITY % C(1) PARTICIPANT'S NAME AND (3) SIGNATURE (By) (4) TITLE/RELATIONSHIP OF THE (5) DATE (2) SHARE INDIVIDUAL SIGNING IN THE (MM-DD-YYYY) ADDRESS (Include Zip Code) REPRESENTATIVE CAPACITY % 8-201 12. CCC USE ONLY A. SIGNATURE OF CCC REPRESENTATIVE

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 252a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

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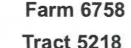
In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national 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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2024 Program Year

Map Created April 17, 2024

1354529



Unless otherwise noted: Shares are 100% operator Crops are non-irrigated Corn = yellow for grain Soybeans = common soybeans for grain Wheat = HRS, HRW = Grain Sunflower = Oil, Non-Oil = Grain Oats and Barley = Spring for grain Rye = for grain Peas = process Alfalfa, Mixed Forage AGM, GMA, IGS = for forage Beans = Dry Edible NAG = for GZ Canola = Spring for seed

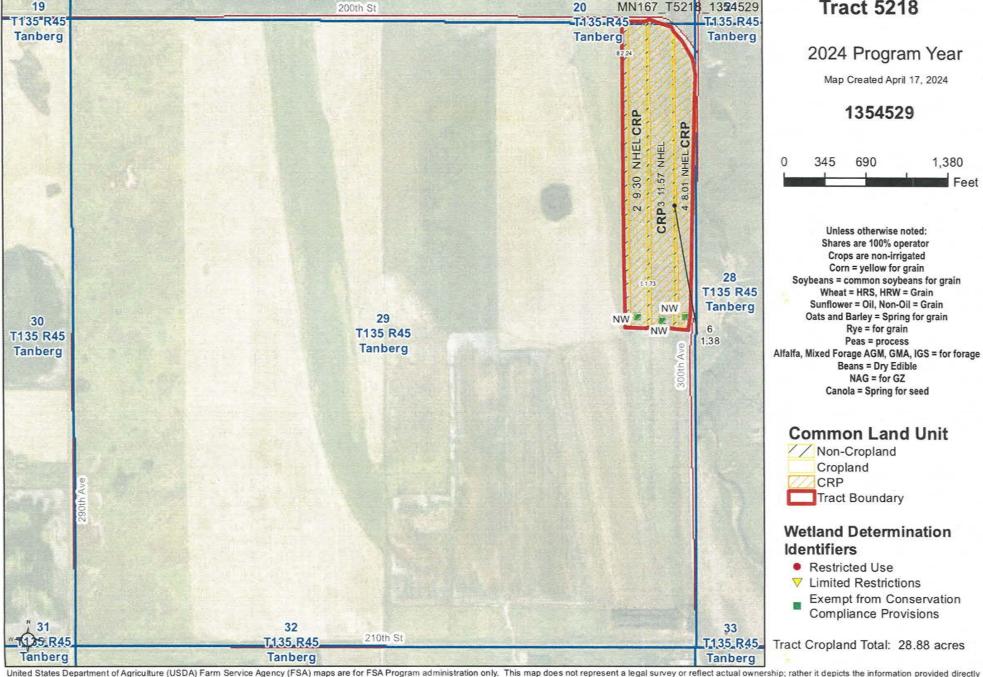
Common Land Unit



Wetland Determination Identifiers

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

Tract Cropland Total: 28.88 acres



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). This map displays the 2021 NAIP imagery.

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	ARTMENT OF AGRICU nmodity Credit Corporat			1. S		ADMIN. LOCATION 167	2 SIGN-UP NUMBER
				2.0	ONIT DA CT AUUND	20	57
CONSERVATION	RESERVE PROG	RAM C	ONTRACT		ONTRACT NUMBI	3/	4 ACRES FOR ENROLLMENT 10.50
5A. COUNTY FSA OFFICE AD	DRESS (Include Zip Co	ide)		6. TF	RACT NUMBER	7. CONTRACT PERIOD	
WILKIN COUNTY FARM SERVI	CE AGENCY	A.C. 1870		1000000		FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
1150 HWY 75 NORTH SUITE BRECKENRIDGE, MN 56520-1					5230	10/02/2022	09/30/2032
					GNUP TYPE:		
5B. COUNTY FSA OFFICE PH (Include Area Code): (218) 6			Con	ntinuous			
THIS CONTRACT is entered into (referred to as "the Participant". CCC for the stipulated contract acreage the Conservation Plan comply with the terms and comply rogram Contract (referred to a applicable contract period. The thereto. BY SIGNING THIS CON addendum thereto; and, CRP-2,) The Participant agree beriod from the date the leveloped for such acre itions contained in this s "Appendix"). By signi terms and conditions o TRACT PARTICIPANTS	is to place a Contract bage and a Contract, ing below, of this contract.	the designated is executed by a pproved by the including the Aj the Participant are contain (LEDGE RECEIP	acreage into the CCC. The CCC and the ppendix to th acknowledge aed in this Fol	the Conservation of Participant also a Participant. Additional Contract, entitled as receipt of a copyrm CRP-1 and in the	Reserve Program ("CRP") grees to implement on su ionally, the Participant en d Appendix to CRP-1, Cou r of the Appendix/Append te CRP-1 Appendix and ar	or other use set by uch designated d CCC agree to nservation Reserve lices for the ny addendum
9A. Rental Rate Per Acre	\$148.90	0 1	0. Identification	on of CRP L	and (See Page :	2 for additional space)	
9B. Annual Contract Payment \$ 1,563.00		.с.	A. Tract No.	B. Field No	o. C. Practice	No. D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment	\$1,563.00		5230	0003	CP18	C 4.80	\$ 547.00
(Item 9C is applicable only when prorated.)	the first year payment i	is	5230	0004	CP18	C 5.70	\$ 650.00
11. PARTICIPANTS (If m	ore than three indi	viduals a	are signing, s	ee Page 3	3.)		
A(1) PARTICIPANT'S NAME AI ADDRESS (Include Zip Code, Oc., PROFEST 155-11 MER 101-911M CINTERS 151-151 101-94J-AN 80 OCTREASE: NU SE(NE, 1038		e-	SIGNATURE (I -Signed by Jill Ch For, if applica On 05-03-	ristensen able:	INDIVIDUAL	ATIONSHIP OF THE SIGNING IN THE TATIVE CAPACITY	(5) DATE (MM-DD-YYYY) 05-03-22
B(1) PARTICIPANT'S NAME AI ADDRESS (Include Zip Code		E (3)	SIGNATURE (I	Ву)	INDIVIDUAL	ATIONSHIP OF THE SIGNING IN THE TATIVE 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)
	SIGNATURE OF CCC			1/1	-	EN	B. DATE (MM-DD-YYYY) 5-5-22
3831 et seq), the Agricultur receive benefits under the	al Improvement Act of 2018	8 (Pub. L. 1 gram. The ii	15-334) and 7 CFI nformation collecte	R Part 1410 T ad on this form	he information will be may be disclosed to	for requesting the information of et seq.), the Agricultural Act to used to determine eligibility to other Federal, State, Local go	o participate in and

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