

AG YIELD SURVEY - NOVEMBER 2023

OMB No.0535-0213
 Approval Expires: 4/30/2024
 Project Code: 128
 SurveyId:3654 Version 48



USDA/NASS - Texas
 Southern Plains Region
 PO Box 70
 Austin, TX 78767-0070
 Phone: 1-800-626-3142
 Fax: 1-855-270-2725
 E-mail: NASSRFOSPR@usda.gov

Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is voluntary.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB number is 0535-0213. The time required to complete this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

Office Use Only	FIPS	POID	Tract	Subtr.
_____	_____	_____	_____	_____

If you no longer operate this farm or ranch go to Section 2.

SECTION 1 - CROP ACREAGE and YIELD

Please report the acres for harvest and yield per acre you expect to harvest from the total acres you operate for the following crops. If harvest is not complete, make your best estimate of the final yield for all acres harvested and to be harvested. EXCLUDE information for land rented to others.

1. CORN

		TOTAL CROP	
a. Harvested and to be harvested (grain and seed only).....	Acres		531
b. Expected yield for grain and seed.....	Bu. per Acre		154

2. SORGHUM

		IRRIGATED	NON-IRRIGATED
a. Harvested and to be harvested (grain and seed only).....	Acres	746	745
b. Expected yield for grain and seed.....	Lbs. per Acre	423	424

3. SOYBEANS

		TOTAL CROP	
a. Harvested and to be harvested for beans or seed.....	Acres		599
b. Expected yield for beans or seed.....	Bu. per Acre		157

4. UPLAND COTTON

		TOTAL CROP	
a. Harvested and to be harvested.....	Acres		668
b. Expected yield (lint).....	Lbs. per Acre		576

5. AMERICAN - PIMA COTTON

		TOTAL CROP	
a. Harvested and to be harvested.....	Acres		804
b. Expected yield (lint).....	Lbs. per Acre		577

6. PEANUTS

TOTAL CROP

a. Harvested and to be harvested.....	Acres	329
b. Expected yield.....	Lbs. per Acre	158

7. RICE

TOTAL CROP

a. Harvested and to be harvested.....	Acres	440	
b. Expected yield.....	Lbs. per Acre	443	446
c. Are you planning to harvest a ratoon crop?.....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No	447
d. If Yes, did you include your expected ratoon yield in the per acre reported?.....	1 <input type="checkbox"/> Yes	3 <input type="checkbox"/> No	448

If no, please go back to expected yield and include the ratoon yield in expected yield in box 443, 446.

SECTION 2 - CONCLUSION

1. If you no longer operate this farm or ranch, please provide the name and address of the new operator.

Operation Name: _____

Operator Name: _____

Address: _____

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

Phone: (____) _____ Check if cell phone.

2. Survey Results:

Operator Email:	Operator Phone:
9929	9918
<input type="checkbox"/> Check to receive results by email	<input type="checkbox"/> check if cell phone
(____) _____	(____) _____

Operation Email: (if different from above)	Operation Phone: (if different from above)
9937	9936
<input type="checkbox"/> Check to receive results by email	<input type="checkbox"/> check if cell phone
(____) _____	(____) _____

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. The results will be available on the release date at: nass.usda.gov/results. Thank you for your help.

OFFICE USE ONLY										
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID	
1-Comp	9901	1-Op/Mgr	9902	1-PASI (Mail)	9903	9998	9900	9985	9989	
2-R		2-Sp		2-PATI (Tel)					_____ - _____ - _____	
3-Inac		3-Acct/Bkpr		3-PAPI (Face-to-Face)						
4-Office Hold		4-Partner		6-Email						
5-R - Est		9-Oth		7-Fax						
6-Inac - Est				19-Other						
7-Off Hold - Est										
						R. Unit	Optional Use			
						9921	9907	9908	9906	9916
S/E Name										