

AG YIELD SURVEY - JUNE 2023

OMB No.0535-0213
 Approval Expires: ??/??/20??
 Project Code: 128
 SurveyId:3629 Version 48



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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. WINTER WHEAT

		TOTAL CROP
a. Harvested and to be harvested (grain and seed only).....	Acres	541
b. Expected yield for grain and seed.....	Bu. per Acre	151
c. Has harvest been completed?..... Yes = 1 No = 3		980

CONTINUE ON BACK

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: (____) _____		<input type="checkbox"/> Check if cell phone.	

2. **SURVEY RESULTS:** To receive the complete results of this survey on the release date, go to: nass.usda.gov/results

To have a brief summary emailed to you, please enter your email address:

1095

Operation Email: (if different from above)

Operation Phone:

9937	9936	check if cell phone
	() _____	<input type="checkbox"/>

Respondent Name:

Respondent Phone (if different from above)

9912	9911	check if cell phone	9910	MM	DD	YY
	() _____	<input type="checkbox"/>	Date: ____	____	____	____

This completes the survey. 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					Optional Use				
5-R – Est		9-Oth		7-Fax					R. Unit	9907	9908	9906	9916
6-Inac – Est				19-Other					9921				
7-Off Hold – Est													
S/E Name													