



Environmental Quality Incentives Program (EQIP)

Worksheet
Salina, Kansas
September 2007

Fiscal Year (FY) 2008 Kansas Self-Assessment Worksheet - Irrigation

- 1) **Name or Entity:** List all who will be a party to the contract and identify as owner or operator. If desired, producer may provide copy of FSA-156EZ.

PHONE NUMBER OF CONTACT (Home)_____ (Cell)_____

E-MAIL OF CONTACT_____

- 2) **Location of Application Acres:** Please provide copies of maps with legal descriptions and all fields clearly marked. Locate all wells and indicate all fields serviced by the wells on the map(s).

- 3) **Benchmark Condition:** Please complete the following information for the offered acres. Answer the following questions. (circle **Yes** or **No**, where indicated)

- Will application result in conversion of any acres from irrigated to non-irrigated?
Yes No

If so, please delineate on map(s) provided.

- Do you plan to enroll any irrigated acres in the Water Rights Conservation Program or similar program provided by a Groundwater Management District?
Yes No

- What is your current irrigation system?_____

Are you planning on increasing efficiency by converting:

- from flood to center pivot? **Yes No**
- from flood to subsurface drip irrigation? **Yes No**
- Do you intend to reduce water use by converting to a less water intensive crop rotation? **Yes No**
- Do you have enough well capacity to irrigate your permitted acres? **Yes No**
- What is your water source – **surface water or ground water?**
(circle one or both)

Continues on Next Page

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4) Program Requirements:

Note: The EQIP Final Rule states that “A participant may receive assistance to implement an EQIP plan of operations for water conservation . . . only if the assistance will facilitate a net savings in ground or surface water resources in the agricultural operation of the producer.” Net water savings is defined as an amount that is less than the average yearly water use. The previous five years to the contract are used to determine the average yearly water use. The agricultural operation is defined as (1) the well(s) designated in the unit of concern and the land unit(s) attached to those water right(s), and/or (2) for ditch irrigation, the fields currently irrigated with the irrigation district allocation or share. Producer reports to the Division of Water Resources or water districts will be used to determine the benchmark condition of net water savings and irrigated acres. Producers are required to furnish reports from the previous five years, to determine the average benchmark condition and eligible acres, and each year during the contract to ensure net water savings. These reports must be provided by the application evaluation cutoff date for the participant to be eligible under that funding period.

If land continues to be irrigated, the following requirements must be met to be eligible for EQIP funds:

- Producer must currently have, or will install, a functioning state-approved water measuring device meeting state installation specifications (Kansas Administrative Regulations [K.A.R.] 5-1-6) before financial assistance is received.
- Well capacity must be able to meet the seasonal Net Irrigation Requirement, with 50 percent chance rainfall, for the crops grown.
- The participant must stay within the certified rate, amount, and location of the existing water right at the time the EQIP contract is signed.
- No end gun or similar appurtenances are present or used on center pivots.
- Producer will use an approved evapotranspiration-(ET) based scheduling system during the life of the EQIP contract.
- Producer will not exceed the calculated ET by 10 percent the first year of the contract and will not exceed the calculated ET by five percent the remaining years of the contract.

5) Is the acreage offered for EQIP currently under any other U.S. Department of Agriculture (USDA) conservation program? If so, check those that apply and note the location and program(s) on the map(s) provided.

- Conservation Reserve Program*
- Conservation Security Program*
- Farm and Ranch Lands Protection Program*
- Grassland Reserve Program*
- Wildlife Habitat Incentives Program*
- Wetlands Reserve Program*

6) TO MEET ELIGIBILITY REQUIREMENTS FOR EQIP, THE FOLLOWING FORMS MUST BE CURRENT AND ON FILE WITH THE FARM SERVICE AGENCY (FSA) FOR ALL CONTRACT PARTICIPANTS THAT WOULD RECEIVE FINANCIAL ASSISTANCE. Please verify with FSA. (circle Yes or No)

Self-Assessment Worksheet - Irrigation

- Form AD-1026, Highly Erodible Land Conservation and Wetland Conservation Certification
On file: **Yes No**
- Form CCC-501A, Member's Information (for entity and joint operations only)
On file: **Yes No N/A**
- Form CCC-526, Payment Eligibility – Average Adjusted Gross Income Certification
On file: **Yes No**

7) PRIOR TO CONTRACT APPROVAL, THE FOLLOWING WILL BE REQUIRED:

- 1) Participants must agree and set contract shares and identify one decision maker (point of contact) for the contract.
- 2) If applicant is not the landowner, the applicant must also furnish evidence of control of the land for the contract period. *(This may be a written lease or other legal agreement, a letter from the owner indicating the participant will have control of the acres for the life of the contract, or a statement signed and dated by the owner indicating control by the participant for the life of the contract.)*
Landowners must sign the contract if the operator cannot provide control of land documentation or a structural practice will be installed.
- 3) If applicable, a copy of the corporate charter, bylaws, court orders of appointment, trust agreement, last will and testament, or articles of partnership clearly designating who has signature authority for the entity or joint operation.
- 4) If applicable, Power of Attorney (POA) will also be required on Form NRCS-CPA-9, POA. A legally developed POA, is also acceptable.

8) Contract Incentive Limits

Each participant may earn up to \$50,000 in total EQIP incentive payments for any ranking category (i.e., Water Quality, Soil Quality, Grazing Lands Health, etc.). Incentive payments shall not exceed \$50,000 per contract or participant.

Do you participate in any other EQIP contracts or will you be party to any other current year EQIP applications in Kansas? **Yes No**

If yes, please list the servicing county office and number of active contracts or current year's applications.

9) Certification

This Self-Assessment Worksheet must be completed and signed prior to the EQIP application evaluation cutoff date in order for your application to be eligible for EQIP ranking and funding.

I have answered all the questions on this worksheet and provided the information requested to the best of my ability.

Signature

Date