PASTURE COMPLIANCE PLAN

Froducer Name: Native Pasture—Art Schaap
Producer Number: 650 Curry Road O
Farm Address:Clovis, NM 88101-5134(b) (6) Producer Phone Number(b Y O Cell Phone Number
Part 1: Please answer the following questions to the best of your ability and with as
much detail as possible (use extra sheets, if necessary).
 The following is a listing of the non-compliance issues with the CROPP Dairy Pool Pasture Policy which have placed this operation in a pending status.
4. Pending status will be lifted once the above is completed.
 Pending status will be lifted once the above is completed. Describe what immediate actions will be taken to help correct the above non-compliance issues
Wit(b) (4) CDCDD Daine Book Bacture Policy
3. Describe what actions the operation will take beyond the corrective measures outlined in question #2 to optimize access to pasture and dry matter intake from pasture for all dairy livestock.

Part 2: Please complete the following sections that demonstrate compliance with minimum CROPP Pasture Policy Standards.

acres	owned and leased for grazing:			
aci 63	towines one research by			
Α.	Milk Cow Grazing:	(b) (4)		
	Total irrigated acres available for gra	azing:		
	Total non-irrigated acres available for	or gra		
	Total residues acres available for gra	azing		
	Number of paddocks/breaks availab	le to		_
В.	Dry Cow Grazing:	(b) (4)		
	Total irrigated acres available for gra	azing		
	Total non-irrigated acres available for	or gra		
	Total residues acres available for gra			
	Number of paddocks/breaks availab	ole to		
c.	Yearling Heifers (12-24 months):	(b) (4)		
	Total irrigated acres available for gr			
	Total non-irrigated acres available f	or grazi		
	Total residues acres available for gr			
	Number of paddocks/breaks availab	ne to g	TN.	
D.	Young Stock (6-12 months):	b) (4)		
	Access to pasture:	U) (4)		
	Total irrigated acres available for g			
	Total non-irrigated acres available			
	Total residues acres available for g			
E. (Other Livestock: Identify all non-dai	ry livestock (Steer	s, Horses, etc.) that	graze the sa
	pastures as dairy livestock	18-96-96-14-15-15-15-15-15-15-15-15-15-15-15-15-15-		
	7			
-				
scrit	be how the operation has structured	its grazing progra	m (identify how ea	ch group of o
tock	cycles through the operations grazin	g program). Inclu	de a description of	the process of
4)				

ection 2 - Certifie	ed Organic Cattle (During the Regio	on's Grazing Season):	
A. Average	Number of Milking Cows:	(B) (4)	
B. Average	Number of Dry Cows:	147	
C. Average	Number of Young Stock 1 Yr. and	Older	
D. Average	e Number of Calves > 6 months:		
Section 2 - Grazin	g/Growing Season:		
A. Growin		(4) (b) (4)	0.64
Est. start d		_ Growing s	(days)
B. Grazing	70.5		
Est. start d		Grazing: _	rs)
Minus non	-grazing days during growing seaso	on (e.g. too hot) :(-)	_(days)
Equals esti	imated grazing season:	(=) _	_ (days)
	ny measures taken to extend the	grazing spason:	
Describe (4)	grazing scason.	
-			
-			
-			
			-
-			
Section 4 - Perio	ds of Confinement		1 1 1 1 1 1 1 1
Average time, in	hours, per day each group of lives	tock is confined (denied access	to pasture) during
the region's grazi			24
A Lactating Cows	. (-/ (-/		
(if more than on	e group note each specific group's	time in confinement)	
B. Dry Cows:	(b) (4)		
C. Young Stock C			
D. Calves Greate	r than 6	***	
Section 5 – Avera	age Grazing Season Ration—Milkir	ng Cows:	
Milking cows: Est	timated average animal body weigh	nt: (b) (4) bs.	
Estimated milk p	roduction: (b) (4) bs/per cow/d	ay	
	(b) (4)	(b) (4)	
Total estimated a	average animal body weight	\times 4% = TOTAL DI	RY MATTER INTAKE
(b) (4		= (b) (4) DRY MATTE	D
Less	lbs. Concentrate (grain) x 85%		
Less	.lbs Dry Hay x 85%=	_ DRY MATTE	
Less	ius Grass Haylage x 45%=	- DRY MATTE	
Less	lbs Corn Silage x 35%=	DRY MATTE	K
Equals	Daily Grazing Intake of	DRY MATTE	R

ball stimated average animal body weight Data Stimated average animal body weight Data Stimated average animal body weight Data Stimated average animal body weight Data Stimated average animal body weight Data Da	Lesslbs. Concentrate (grain) x 85% = DRY MALESSlbs Dry Hay x 85% = DRY MALESSlbs Grass Haylage x 45% = DRY MALESSlbs Corn Silage x 35% = DRY MALESS	
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Less	Less lbs. Concentrate (grain) x 85% =	L DRY MATTER INTAKE
Less lbs Dry Hay x 85%= DRY MATTER Less lbs Grass Haylage x 45%= DRY MATTER Less lbs Corn Silage x 35%= DRY MATTER DRY MATTE	Less lbs Dry Hay x 85%= DRY MAI Less lbs Grass Haylage x 45%= DRY MAI Less lbs Corn Silage x 35%= DRY MAI Equals Daily Grazing Intake of DRY MAI Describe the mixture of species of grasses, legumes and other forages plan rovide nutby (4) for all dairy livestock Please include any comments and/or remarks. (b) (4) Date:	L DKI WATER IN
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Lesslbs Grass Haylage x 45%=	Less	
Less	Less	
Equals Daily Grazing Intake of	Equals Daily Grazing Intake of	
Describe the mixture of species of grasses, legumes and other forages planted in the pasture to ovide nute; the mixture of species of grasses, legumes and other forages planted in the pasture to ovide nute; the mixture of species of grasses, legumes and other forages planted in the pasture to ovide nute; the pasture	Describe the mixture of species of grasses, legumes and other forages plan ovide nutsition for all dairy livestock Please include any comments and/or remarks. (b) (4) (b) (6) Member Signature:	
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Please include any comments and/or remarks. (b) (4) (b) (6) Member Signature:	Please include any comments and/or remarks. (b) (4) (b) (6) Member Signature:	1
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Vicinizer Signature.	Welliber Signature.	
Vicinizer Signature.	Welliber Signature.	-10-10
Authorized CROPP Signature: Date:	Authorized CROPP Signature: Date:	
Authorized CROPP Signature:	Authorized CROPP Signature: Bate	
	For Office Use Only: Date Received:	



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New Mexico Department of Agriculture, Organic Program

4501 Indian School Rd Ne Suite 100, Room G104 Albuquerque, NM 87110

PHONE: (505) 889-9980 or (575) 646-6336 FAX: (505) 883-3235

http://nmdaweb.nmsu.edu/

APPLICATION FOR ORGANIC CERTIFICATION - CROP PRODUCERS

FARM BUSINESS NAME:		CERTIFICATION NUMBER:
Hishland Fams		352
GROWER / PRODUCER NAME:	PHONE NUMBER:	JoB TITLE:
ART School	(D) (O)	ou-
CONTACT NAME (IF DIFFERENT FROM ABOVE):	PHONE NUMBER:	JOB TITLE:
FARM MANAGER / INSPECTION CONTACT NAME (IF DIFFERENT FROM ABOVE):	Phone Number: (b) (6)	JOB TITLE:
Joe Black		Fam MGR COUNTY: CORRY
PHYSICAL LOCATION OF FARM:		COUNTY:
S. W. Clavis NM Hwy467 MALING ADDRESS (IF DIFFERENT FROM ABOVE):	mile morker	13 CORRY
MAILING ADDRESS (IF DIFFERENT FROM ABOVE):		·
450 CURRY RD O		
I CITY:	STATE:	ZIP CODE:
Clouis	NM	8810/
CELL PHOME NUMBER:	ALTERNATE PHONE NUMBER:	
(b) (6)	(D) (O)	
FAX NUMBER:	EMAIL ADDRESS:	
	(b) (6)	
575-683-5154	(b) (6)	
		ase check the forms you are submitting.
575-683-5154		ase check the forms you are submitting.
575-683-5154	his application packet. Plea	elds Not Presently Certified Organic
575-683-5154 Application Checklist – Below is the list of forms included in the state of the st	his application packet. Plea	
575-683-5154 Application Checklist – Below is the list of forms included in t	his application packet. Flea	elds Not Presently Certified Organic
575-683-5754 Application Checklist – Below is the list of forms included in the second secon	his application packet. Flea For Use with New Fi	elds Not Presently Certified Organic
575-683-5154 Application Checklist – Below is the list of forms included in the state of the st	his application packet. Flea	elds Not Presently Certified Organic
575-683-5754 Application Checklist – Below is the list of forms included in the second secon	his application packet. Flea For Use with New Fi	elds Not Presently Certified Organic
Application Checklist – Below is the list of forms included in the For All Applicants Application for Organic Certification Affirmation of Applicant for Organic Certification Organic Certification Fee Form	his application packet. Frea For Use with New File New Field Application Previous Land Use	elds Not Presently Certified Organic on Statement
Application Checklist – Below is the list of forms included in the For All Applicants Application for Organic Certification Affirmation of Applicant for Organic Certification	his application packet. Flea For Use with New Fi	elds Not Presently Certified Organic on Statement
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AFFIRMATION OF APPLICANT FOR NMDA ORGANIC CERTIFICATION

Business Name: Hichard Farms	Business License number:			
APPLICANT NAME AND SCHARP				
Business information (Please Check appropriate Box):	EDUCATIONAL INSTITUTION / PUBLIC INSTITUTION / NONPROFIT			
☐ INDIVIDUAL (SOLE PROPRIETORSHIP)	GENERAL PARTNERSHIP.			
☐ INDIVIDUAL "DOING BUSINESS AS"	СООР			
CORPORATION	OTHER: (PLEASE LIST)			
LIMITED LIABILITY COMPANY (LLC)				
	, as an authorized representative of			
	depose and say that I will:			
 Fully comply with all applicable organic production and handli Organic Program Rule. 	ng regulations in accordance with Title 7 CFR Part 205 National			
Establish, implement, and update annually an organic production 205.201).	on or handling system plan that will be submitted to NMDA (NOS			
	ction or handling operation, including noncertified production and These inspections may be announced or unannounced at the			
5. Maintain all records applicable to the organic operation for not le				
Allow authorized representatives of NMDA, or the US Secreta hours for review and copying to determine compliance with the N	ry of Agriculture access to these records under normal business lational Organic Program Rule (NOS 205.103/c)].			
7. Submit to NMDA the applicable fees as described on the fee sch	- ' '			
8. Immediately notify NMDA about any application, including drift, livestock, or part of an operation [NOS 205.400(f)(1)].	of a prohibited substance to any field, production unit, site, facility,			
9. Immediately notify NMDA of any change in our certified operati	on or portion of it that may affect its compliance with the National os & fields; facilities, ingredients & products, changes to managers, 205.400(f)(2)].			
! understand that willful violation of organic rules and regulations may result in revoking of organic certification and in extreme cases may lead to state and federal fines and penalties.				
I understand that receipt of this application in no way implies granting	of certification by the NMDA.			
SIGNATURE OF AUTHORIZED REF	DATE: 3-6-12			
PRINT NAME AreTSchage Hishlad Fam	DATE: 3-6-12 TITLE: Sure partin			

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Application, Affirmation, Fees and Sales/Yield

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 $\gamma_{\rm ex}$



ORGANIC SYSTEM PLAN — CROP PRODUC	ER Annual
FARM BUSINESS NAME:	CERTIFICATION NUMBER:
Highland terms	352
ORGANIC GROWER / PRODUCER NAME:	
HKI SCHOCLP	
SECTION A. GENERAL INFORMATION	[NOS 205.201 AND 205.401]
The National Organic Standards (NOS) require all operations seeking certification to dev	velop an organic system plan that is agreed to
by the certified producer or handler and an accredited certifying agent. A certified operators in order to verify centinued compliance.	ion must update this system plan on an armuar
그 어떻게 하면 무슨 하다가 얼마에 되어 마음을 하면 하는 것이 모든 그들은 그는 그 그는 어린이 하는 것들이다.	
The organic system plan must include the following: A description of practices and procedures including the frequency with which they we	vill he performed.
 A list of each substance to be used in organic production or handling, 	
 A description of the monitoring practices and frequency the practices will be perform 	ned,
 A description of the recordkeeping system that demonstrates compliance with the N A description of the practices in place to prevent commingling of organic and non-or 	ranic products.
 A description of the practices in place to prevent contamination of organic products 	with prohibited substances, and
 Any additional information required by the certifying agent in order to evaluate comp 	
This is a "Plan" - You may change or update it throughout the year. Chan Program prior to implementation. Plan updates can be submitted	ges must be approved by NMDA Organic ed by phone, fax, email or letter.
FARM OVERVIEW	
1. Please provide a description of your farming operation. (please include major crops	& acreage, and primary markets)
(b) (4)	
Please provide detailed directions to your operation:	17 1 0 13
Clouds, New Mexica located on Hury	467 & country Rol ?
and Center Rd.	<u> </u>
•	
3. Does your farm business (the entity for which you seek certification) produce non-org	ganic crops or provide (b) (4)
custom service work for non-organic operations (seeding, spraying, laser leveling)?	
CERTIFICATION SUMMARY	
Are you currently certified organic?	✓ Yes □ No
	hat agency
4a. If "Yes," please list the name of the agency and the first year certified by the	nai ayanty.

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Have you ever been denied certification or had your certification suspended or revoked?	Yes	☑∕No	□ N/A
5a. If "Yes," please list the name of the agency, the year and describe the circumstances.			
		ges ^a	, ·
If currently certified by NMOCC, were conditions noted or has information been requested that is still outstanding? (see your last correspondence from NMOCC)	Yes	No	□ N/A
6a. If "Yes," please note conditions or information requested and how you have resolved the	issue.		
CHAIN OF CUSTODY			
7. When do organic crops leave your custody? (Examples – "at point of retail sale" "after dollward to be harvested by the buyer", etc.) (b) (4)	endlor" "oro	na ara aar	tracted 0
Are you hired or contracted by another operation to grow organic crops?		Yes	□No
8a. If "Yes," please provide the name of the operation (processor, grower, dairy, marketing contract. (Please note any areas to which you are not the responsible party (e.g. seed selection, planting)	<i>mpany)</i> and ng/harvest, l	the detail herd mana	s of the agement)
9. Do you hire or contract custom services during production, handling or storage or organic crops? (E – tractor work, laser leveling, transportation, harvest, cleaning, etc.)	xampli <mark>(</mark> b) (4)	
9a. If "Yes (b) (4) hydroco(c) comics and contact in the little stom Opera appropriate	tor Complia	nce Stater	nent as
10. In what final form does organic product leave your operation? (check all that apply)		<u>.</u>	
יי איט איט איט איט איט איט איט איט איט א		***	
	_	r to printi	ng.
11. Is your organic crop processed at your farm (Example: made into essential oil, canned, pickled, etc.).)	Yes	□ No
12. Do you handle or pack organic crops grown by other organic crop producers?		(1)	
If "Yes," to #11 or #12 you must be certified as a Processor. Please contact our office for information and a certification packet.			

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NMDA Organic System Plan -- Crop Producer

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SECTION B. SEEDS, ANNUAL TRANSPLANTS, AND SEEDLINGS

[NOS 205.204]

NOS 205.204 requires that producers use organically grown seed, annual seedlings and planting stock (even when these are provided from a contract-buyer). Annual transplants must be certified organic to produce an organic crop. Non-organically produced untreated seeds & planting stock may be used only if organic forms are not commercially available.

Commercially available means that is available in the form, quality, and quantity required to fulfill an essential function.

Seed and Planting Stock Search Documentation include:

- 1) You may use non-organic untreated seed and planting stock only when organic is not commercially available and only if you document which companies and/or individuals were contacted in your search for organic seed and planting stock.
- At least three documented searches are required.
- Searches must include suppliers who might reasonably be expected to have organic product. For example, checking only with three local feed stores is not considered a valid search since such suppliers do not normally carry organic products.
- Cost of organic compared to non-organic is not a consideration.
- 5) In certain cases, specific varieties or qualities are needed. For example, organic alfalfa seed or organic tomato seed may be available but not of the particular variety required for your climate or your market. It is your responsibility to submit clear & convincing evidence that available organic varieties are not a viable substitute.
- 6) All non-organic seed & planting stock must be documented as: Not Genetically Modified & Untreated with prohibited substances

SEEDS, TRANSPLANTS & PLANTING STO	CK N/A No Seeds, planting stock or Annual Transplants are used. Skip to Section C.
1. List the source(s) of seeds, transpla	ants & planting stock used to grow organic crops.
Do you use any non organic seed of the seed of th	or planting stock?
2a) If "Yes", how do you dete	mine that organic seeds, transplants & planting stock are not commercially available?
2b. If "Yes", how do you ver	for that organic seeds, transplants & planting stock were not commercially available?
ANNUAL TRANSPLANTS	N/A No Annual Transplants are used. Skip to Section C.
3. Do you purchase annual transplant	s? (b) (4)
3a. If "Yes," attach a copy of t	he transplant supplier's organic certificate.
4. Do you produce annual transplants	
4a. If "Yes", where are transpl	ants raised? (Example: on site greenhouse, home, Field #23, etc.)
List all nursery and transplant ma	terials (growing medium, fertilizers, and other inputs) in Section I. Material Inventory.





SECTION C. SOIL FERTILITY AND CROP I	NUTRIENT MANAGEMENT	[NOS 205.200, 205.203, 205.205]
NOS 205.203 requires producers to:		
 contamination of crops, soil, or wate Manage crop nutrients and soil fertili 	r by plant nutrients, pathogenic organisms, h ty through crop rotations, cover crops, and a	ntent in a manner that does not contribute to neavy metals, or residues of prohibited substances. applications of plant and/or animal material. chemical, and biological condition of the soil and
(b) (4)		
2 Chack the practices used to manage (b) (4)	eron nutriente and coil fertility	
3.(b) (4)	,	
4. Check each issue as applicable. For	reach box checked, list the specific issue an	d your corrective action.
Issue	Specific Issue	Corrective Plan
5) (4)	Example – Zinc Deficient	Example - Add Biomin Zinc 2-0-0
	e for deficiencies? (Micronutrients are nutrie very small quantities. Example - zinc, boro	
-	documented through soil or tissue testing?	☐ Yes ☐ No
5b. If "No", explain how the nut	rient deficiency was determined.	
		(b) (4)
6. Is animal manure (raw or composted)	used on crops? If "No," skip to Question 10	

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(b) (4)	
7a. If "Yes", go to question #8	
7b. If "No", is it applied 90 days before harvest of crops (120 days for crops where the edible portions have direct contact with the soil)?	□No
8. Describe compost production practices or submit documentation from compost supplier verifying how it is made:	
8a. List feedstock materials for compost:	
9. Are temperatures of at least 131* F maintained for a minimum of three days?	□No
9a. If "Yes", are records of compost temperatures and duration maintained?	□No
10. How do you evaluate the effectiveness of your soil fertility practices? 11. List the records you maintain for soil fertility and crop nutrient management. (Examples: soil & tissue tests, material input & receipts, compost records, etc) (b) (4)	ut records
11a. Can your material application records track all fertility inputs applied to organic fields?	□No
List all fertility materials that you plan to use in Section I. Material Inventory.	
SECTION D. CROP ROTATION [NOS 20	5.205]
The National Organic Standards define crop rotation as: "The practice of alternating the annual crops grown on a specific field planned pattern or sequence in successive crop years so that crops of the same species or family are not grown repeatedly with interruption on the same field. Perennial cropping systems employ means such as alley cropping, intercropping, and hedgero introduce biological diversity in lieu of crop rotation."	vithout
Crop Rotation systems must maintain or improve soil organic matter content; provide for pest management in crops deficient or excess plant nutrients; and provide erosion control.	; manage
(b) (4)	





SECTION E. NATURAL RESOURCES: SOIL, WATER, WOODLANDS, WETLANDS, AND WILDLIFE	NOS 205.200]
NOS 205.200 requires that an organic producer implement practices that maintain or improve the natural resources of th including soil and water quality.	is operation,
1. List the source(s) of water on your farm: (b) (4)	
 List the type(s) of irrigation system(s) used on your farming operation. (Examples: drip, flood, center pivot) (b) (4) 	
3. Do you apply any material inputs (fertilizer, cleansers, etc.) through your irrigation system?	lo 🗌 N/A
Specify the materials used with irrigation systems in Section I. Material Inventory	
4. Describe your efforts to conserve water and improve the natural resources of your operation. (Example: wildlife hat (b) (4)	itat. water
SECTION F. WEED, PEST, AND DISEASE MANAGEMENT PRACTICES [N	IOS 205.206]
NOS 205.206 requires that the producer implement management practices to prevent crop pests, weeds, and diseases. practices may include crop rotation, sanitation, cultural practices, mechanical methods, and physical methods.	These
WEED MANAGEMENT	
Check the management practices used to prevent or suppress weeds. (b) (4)	
2. How do you evaluate the effectiveness of your weed control practices? (b) (4)	observation and the second
3. If preventive weed controls are not effective, do you plan to apply approved weed control materials?	
List all weed control materials you plan to use in Section I. Material Inventory.	
PEST MANAGEMENT	
4. List the pests or potential pests that threaten the crops you grow.	
b) (4)	
5. How do you monitor for these pests?	
(b) (4)	

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☐ Yes	☑No
☐ Yes	☑No
or records, fie	eld logs,
Yes	□No
	☐ Yes





SECTION G. SPLIT AND PARALLEL PRODUCTION Split production is growing organic and non organic on the same farm.		[NOS 205.272]
Parallel production is growing organic and non-organic of the same crop	or where crops are visibly identic	αN
Procedures must be in place to prevent contamination and commingling of prevent contamination of organic crops and prevent commingling of organic inspection.	crops. Records verifying that ster	ns have been taken to
Does your farm business (the entity for which you seek certification) procustom service work for non-organic operations (seeding, spraying, last	oduce non-organic crops or provider leveling)?	de Yes No
If "No," skip to Section H.		
2. List all crops that are grown and indicate whether they are organic or no	on-organic.	
Стор	Organic	Non-Organic
Corn		
Wheat		
Gorshum	G-	
DIFa/Fa	W	
2a. Percentages of the entire operation that is organic and non organic:	(b) (4)	(b) (4)
2b. Acres of the entire operation that is organic and non organic:	Acres (b) (4)	(b) (4) Acres:
3. Do you use the same equipment on your organic and non-organic crops?	A Control of the Cont	Yes No
3a. If "yes" , list equipment. & describe how equipment is cleaned of	or numed hefore use on organic e	
3) (=)		
, .		
A House day with the		
 How do you identify crops as "organic" crops? (Please include all phases (4) 	of production through sale)	
5. How do you keep organic and non organic crops separate? (Please includ	e all phases of production through	h sale)
(b) (4)	Alta	e. hel
	•	
		1





SECTION H. HARVEST, PACKING, STORAGE, AND TRANSPORTATION

[NOS 205,272]

NOS 205.272 requires that handling practices and procedures present no contamination risk to organic products from commingling with non-organic products or contact with prohibited substances.

- Packaging materials, bins, and storage containers must not contain synthetic fungicides, preservatives, or fumigants.
- Reusable bags or containers that have been in contact with any substance in such a manner as to compromise the organic integrity cannot be used unless the bag or container has been thoroughly cleaned.

Procedures used t	o maintain the organic integrity of ingredients or pr	oducts (cleaning or lining) mus	t be documented.
HARVEST			
1. How are organic crops	harvested?		
(b) (4)			
2. What type of containers	s are used to harvest organic crops?		•
3. Are harvest containers	dedicated organic only?		Yes No
3a. If "No", how is	contamination prevented.		
4. How is organic identity n	naintained through harvest?		
(5) (4)			
5. List the Harvest and/or Sa	ales records you maintain.		D -
I list the	Dade we harvest Ame	d delicated to	Hathe fagra-
STORAGE			
7. Do you store your organic	crops?	9	Yes No
7a. If "Yes," please p	rovide details on your storage areas by completing	the following table.	
Crop	Location /Name of Storage Area(s)	Type/Capacity	Dedicated Organic?
			Olganic;
TRANSPORTATION			
8. How do you ensure organ	lic crops are not contaminated during transport?		
0) (4)			
List the storage and trans	portation records you maintain:		
All drivers a	ere to powerwach or sa	cap Trucks, I	- visualu look
44 all Trucks	they sigh a Chean Tru	ck Affidavit	a+ horvest
DOC C103 Version J Eff. Date 9.111	NMDA Organic System Plan – Crop Pr		Page 8 - (40

Page 9 of 10



ative Pastuves



NEW FIELD APPLICATION

Complete this form for each field you want considered for organic certification that is not currently certified NMDA must receive completed New Field Applications prior to the inspection and the harvest of the first crop FARM BUSINESS NAME: GROWER / PRODUCER NAME:

Section A. Field Identification		
Field - An area of land identified as a discrete unit within a production intended to be sold, labeled, or represented as "organic," must: be m substances, applied to it for a period of 3 years; and have distinct, de prevent the unintended application of a prohibited substance to the cathat is not under organic management.	anaged in accordant fined boundaries and	e with the organic rules, have had no prohibited I buffer zones such as runoff diversions to
1. Field Name (what you call this field) Sundawn Rand	h	
2. Field Location - Legal Description of Location		
Township, Range, Section: T2 R33E 512 &/o	r Street Address:	2005 RRW, Portales
Please provide directions to this field from the nearest town or highway	ау:	
West of hospital 5 miles	then I mile	south
·		
3. List Crop Grown on Site (one crop per line)	Acreage	Estimate Harvest Date This Year
Pasture Grass	(b) (4)	all year
		0
٠		
Total Field Acreage	(b) (4)	
If more space is needed.	attach additional page	•

Section C. Field Map

Please submit a map of your field. Field maps must meet the following requirements:

- Map size should be 8-1/2 X 11 inches
- Include farm business name, field name, legal location description, and total acreage of field on the map.
- Show the borders, shape and size of the field.
- Identify locations of crops and fallow land.
- Indicate areas that separate your field from other land use such as roads, canals, fences and open land.
- Identify all adjacent land use, including land managed by others.
- identify and label borders at risk of contamination with prohibited materials





NEW FIELD APPLICATION

Section B. Field History			
1. Do you own this Field? If "Yes", skip to que	estion #2.	X/Yes	No
1a. Provide the name and contact inform	ation for the land owner:		
1b. Describe the details of the lease (if ve	erbal lease) OR attach a copy of the lea	se agreement:	
2. Is this field currently certified by another operat	or?	Yes	∑ No
2a. If "Yes", please list the grower name	and operation, field name and attach	the organic certificate:	
3. What date did you start making the day-to-day p	production decisions for this field?	3 - 4 - 09 (month / date / year)	
4. List all material inputs, including fertilizers and a Only include materials applied while you mana must be documented on the Previous Land You may submit your materials list in another.	ged this site. Materials applied by pi Use Statement	revious growers / producers	
Material Applied (Brand Name if Applicable)	Crop or Land Use	Date & Year	Applied
None	Pasture	all	
			-
I attest that the information provided is true ar (b) (6) Signature (b) (6), (b) (4)	nd accurate:	Date3-13-12_	

DOC C 103.2 version C - Eff. Date 9.1.11

New Field Application

Page 2 of 2





PREVIOUS LAND USE STATEMENT

Complete this form if another person has managed this field within three years of the current year's harvest.

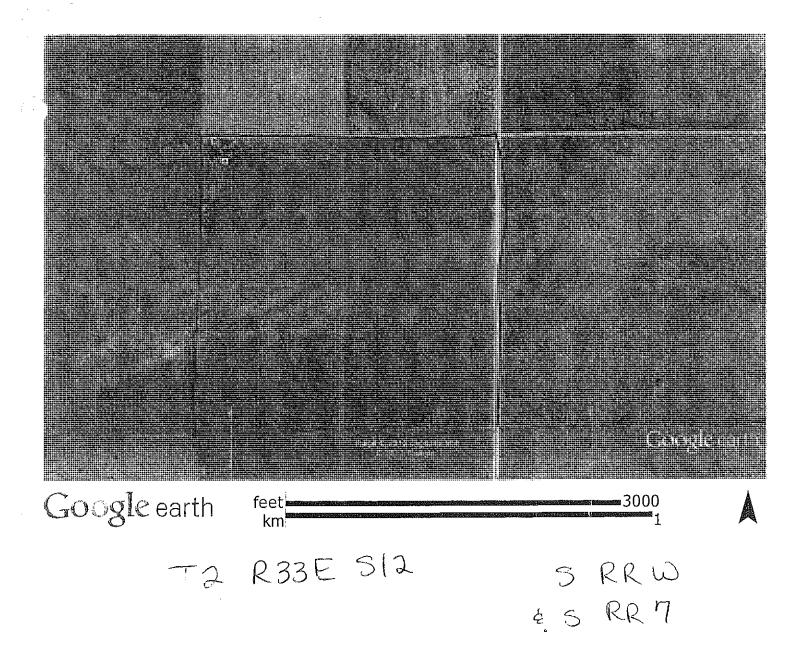
If this field has had more than one manager during the time period listed above, then a declaration is required from each of the previous land managers.

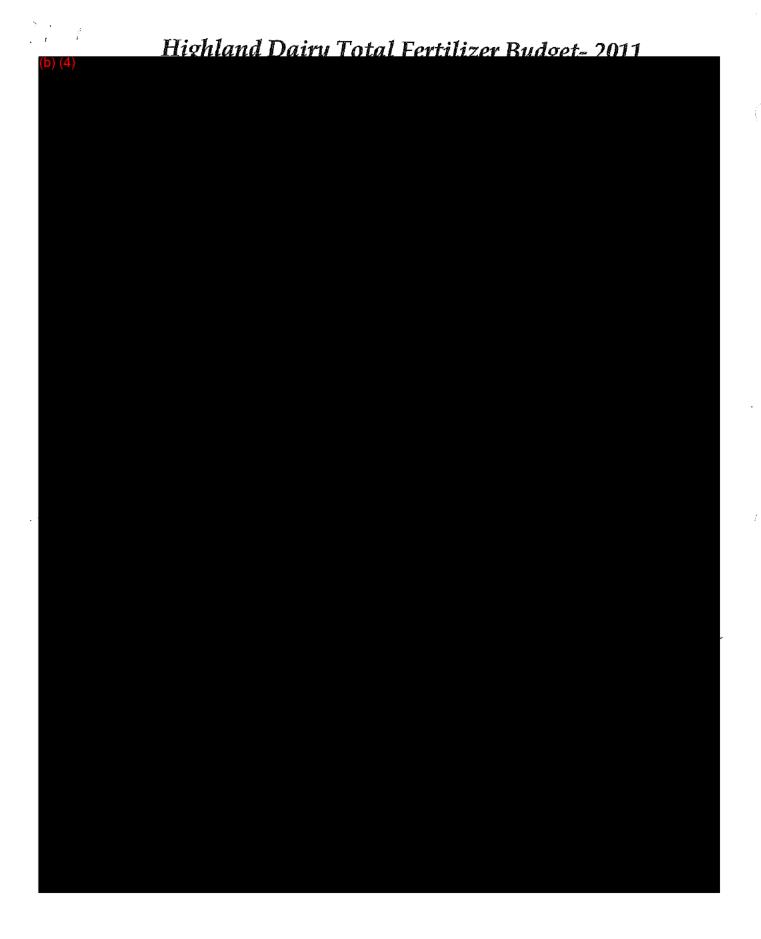
NAME OF PREVIOUS FIELD GROWER / PRODUCTS (BESCON COMPLETING THIS DECI	ARAHON):	Previous Grower / Propu	CER PHONE NUMBER:
NAME OF DOGINESS CLEARING CENTIFICATION OF THIS FIELD:		CURRENT PRODUCER PHONE	NUMBER:
LOCATION OF FIELD(STREET ADDRESS OR TOWNSHIP, RANGE, SECTION): T2 R33E S12			
Field Name:	and an area and a second	The second secon	
When did you manage this field? Start date (mont)	- , , , ,	End date (month/y	rear):
 List all materials (including fertilizers & seed treatments years. If the field has been under your control for less Statement. Attach additional pages if necessary or su 	than three veers, the provious	ie farmar munt aukwik .	ontret for at least three another Previous Land Use
Material Applied (Brand Name if Applicable)	Crop		Date & Year Applied
NONE	Postura	9	N/A
	F		
	is needed, attach additional pa	age.	
I attest that the information provided is true and accur-	ate;		
(b) (6)		2 12 12	
Signature of previous grower / producer		<u>3-12-12</u> Date	
(b) (6), (b) (4)			
200 0 140			

DOC C 110 version F - Eff. Date 9.1.11

Previous Land Use Statement

Page 1 of 1





Highland Dairy Total Fertilizer Budget- 2011

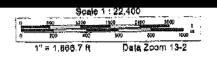
Highland Dairy- Soil Sample Location Map 2012

Data use subject to license.

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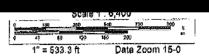
Highland Dairy- Soil Sample Location Map 2012

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<u>USDA</u> United States Department of Agriculture

Farm Service Agency

Farm 3439

Tract 3309

Legal

S1/2 6; Sec 5-1-35

igital Orthophotography
Not to Scale

ares Department of Agriculture Farm Service Agency

Farm

3535

Tract

3306

Legal

W1/2 28 ; W1/2 33-2-35

Orthophotography

Not to Scale

<u>USDA</u> United States Department of Agriculture

Farm Service Agency

Farm

3439

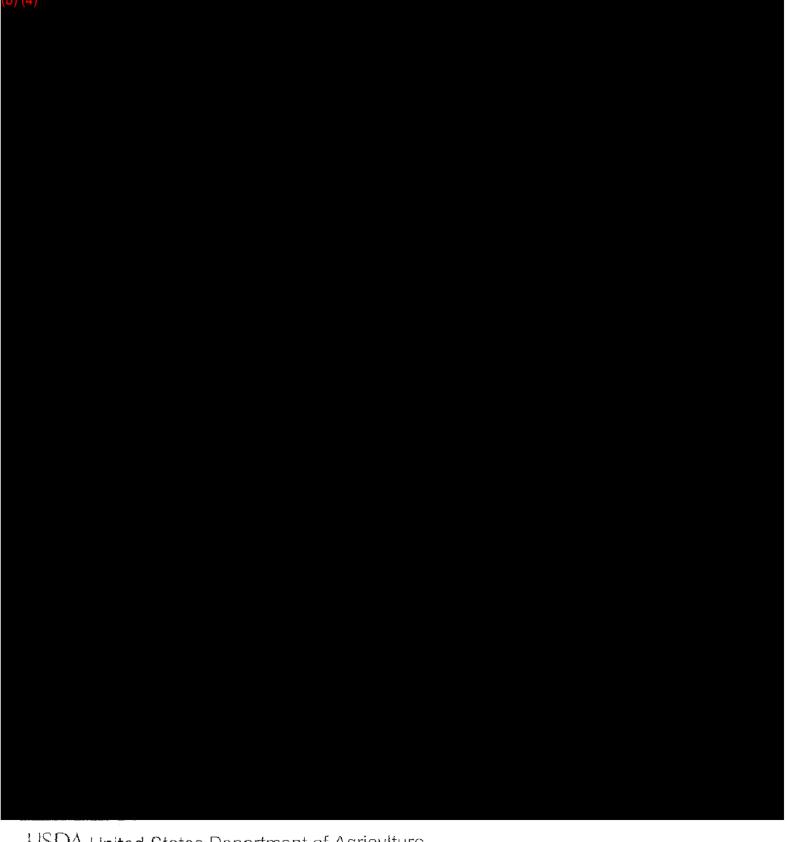
Tract

3375

Legal

Sec 19-1-35

Digital Orthophotography Not to Scale



<u>USDA</u> United States Department of Agriculture

Farm Service Agency

Farm 3439

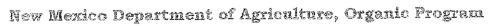
Tract 3378

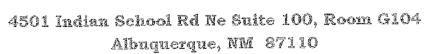


Legal N1/2, SW1/4SW1/4 28-2S-36

igital Orthophotography
Not to Scale







2012 APPLICATION FOR ORGANIC CERT	TIFICATION - PROCESSO	OR/HANDLER
Business Name: Native Pastoves Dais Owner's Name:		CORRY TITLE:
	PHONE NUMBER: (b) (6)	TITLE:
CONTACT NAME (IF DIFFERENT FROM ABOVE): (b) (6)	PHONE NUMBER: (b) (6)	TITLE:
F pve):	PHONE NUMBER:	MG-R TITLE:
Mailing Address:		<u> </u>
1050 CORRY ROC		
louis	STATE:	ZIP CODE:
PHYSICAL ADDRESS/LOCATION OF FACILITY: 4/3 CORRY CELL PHONE NUMBER (IF DIFFERENT FROM ABOVE):		DEGELVE
	ALTERNATE PHONE NUMBER: DL	APR 2 4 2012
st .	FAX NUMBER;	
Email Address: (b) (6)		
Website:		
Business Information:	EDUCATIONAL INSTITUTION	/PUBLIC INSTITUTION /
MINDIVIDUAL (SOLE PROPRIETORSHIP)	NONPROFIT	
☐ INDIVIDÚAL "DOING BUSINESS AS"	GENERAL PARTNERSHIP.	
CORPORATION		
LIMITED LIABILITY COMPANY (LLC)	OTHER: (PLEASE LIST)	

CENTIFIED
ORGANIC
by the New Mexico
Department of Agriculture

PRODUCT PROFILE



Complete one form for each organic product.

BUSINESS NAME:

Processing Aid	Comp		A. Weight of Organic Ingradients:		-			Ingredient (Include Additives)	Complete t	Product Labeling Category:	Product Name exactly as it appears on the label.
Organic	ete the belov							if mor	ne table belo] 100% Organic	19
Organic le	w table with ir	(Exci	, po	receveration descriptions are considerabled and description				Supplier/Manufacturer to than one supplier for either one supplier for edient, list both sepal	moin hin w		The
is the processing aid on the National List (205.605)?	nformation about all pro-	(Excluding water and salt)	B. Total Weight of Formula:					Supplier/Manufacturer If more than one supplier for same Ingredient, list both separately	nation about all ingredie	Crganic (95-100% organic ingredients)	en erie mente de l'entre propriet de l'entre propriet de l'entre de l'entre de l'entre de l'entre de l'entre d
	essing aids							Organic	nts containe	c ingredients	the same arrangement of the sa
Supplier/Manufacturer Name	Complete the below table with information about all processing aids used in the manufacturing of this product.	(A + B) x 100	C. Percent of Organic Ingredients:					Certifying Agency of Organic Ingredient	Complete the table below with information about all ingredients contained in this product (including water and salt).) Made with organic ingredients (70- 95% Organic Ingredients)	
App	of this product.		janic Ingredients:					Non-Organic	water and salt).	ngredients (70-98	
Application & Use								Weight or Volume		5% Organic Ir	
			and the second s					% of Finished Product		gredients)	**************************************

NMDA Organic Processor/Handler Application







If you were Certified Organic in 2011, please report your 2011 ORGANIC SALES & PRODUCTION

- Sales include distributors, grocery stores, internet, farmer's markets, restaurants, etc.
- Please list by general product type (apples, nuts, nut butters, herbs, lip balm, body oil, pasta, tortillas, breads, etc)
- Mixed operations may list "vegetables" and "fruit"

	Prod	uction	Sa	les
Organic Product	Total of Unique Brand Name Products	All Unit Sizes (pounds, ounces, supersacks, etc)	Wholesale Sales (rounded to nearest dollar)	Retail Sales (rounded to nearest dollar)
Bulk milk		Per/DD LBS	See list (milk cks Nation) Organic Valley	
			(milk CKS Nation)	Pastuns)
			Organic Valley	
			ď	
			-	
:				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
_				
		,		
	Total Certified C	rganic Sales 2011	\$	

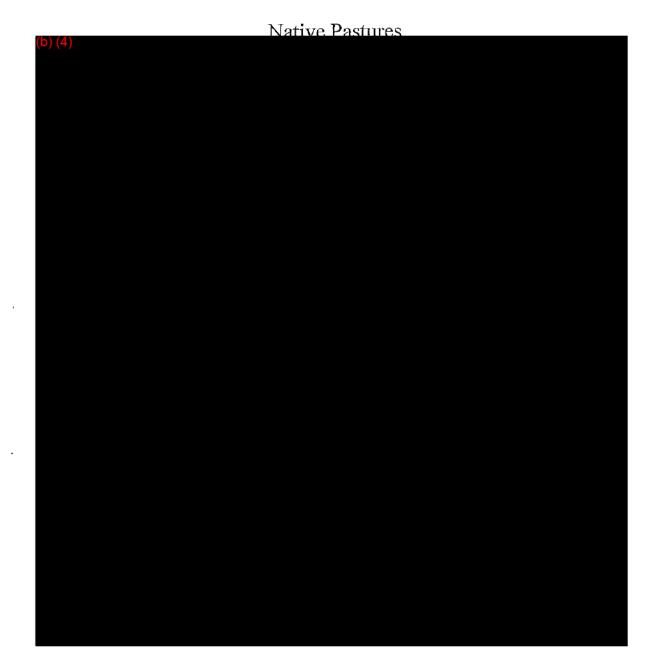
Percentage of Sales	Type of Sales	Number of employees	Type of Employee	
% O	Farmers Markets		Permanent Full Time Employees	
% O	On-Farm Sales		Permanent Part Time Employees	
% 0	CSA (Community Supported Agriculture)		Seasonal Employees	
% 0	Wholesale			
% 0	Restaurant	Marketing & Jobs - Help us show state government the importance of organi		
% 0	Retail Stores			
10 100	Other Ofgener Valley Please specify	farmin	g in New Mexico's economy	





ORGANIC SYSTEM PLAN - PROCESSOR/HANDLER

Section P. Optional. Forms are available on our website if needed http://nmdaweb.nmsu.edu/organics-program/Organic%20Program.html
Other useful organic recordkeeping forms are available at https://attra.ncat.org/organic.html
Product Profile One Product profile must be completed for EACH organic product. For example, "Coffee" is not one product. One form must be completed for French Roast, one for Colombian, for one Sumatra, etc. "Chile" is not one product. One form must be completed for Green Chile- frozen, one for Red Chile Powder, one for Red Chile Flakes, etc.
Complaint Log To document customer complaints. Keep on file. Do not submit with your application.
☐ Application for Cost Share Reimbursement ☐ Cost Share Reimbursement (Substitute W-9)
USDA Program that reimburses a percentage of your certification costs.
Sother (please specify) Bulk milk
KEEP COPIES OF ALL APPLICATIONS, FORMS AND DOCUMENTS YOU SUBMIT TO NMDA







					 -	
						7.174
			,			Norm Care
			January Control of the Control of th			· · · · · · · · · · · · · · · · · · ·
	ESSING AIDS [NOP 205.2					
normally present substance that is	I is defined as (a) substaged in its finished form; in the food, and does not added to a food for its teat have any technical or fi	(b) a substance tha t significantly increas hnical or functional e	t is added to a e the amount o ffect in the proc	food during processing of the constituents natura	, is converted in ally found in the	to constituents
To use a prod	essing aid in or on an org	janic product labeled	as "100% orgar	nic" the processing aid m	ust be certified o	rganic.
To use a pro	cessing aid in or on an essing aid must be an ap	organic product lab	eled as "organi	c." or "made with organ	ic (specific ingre	diente or food
	what types of Processing					
	- Move onto Section I -			g agent	y. The on an ara	: abbû:
	r release agents			king agent		
Enzymes	G			please specify):		
v. 1	rocessing aids used at yo	ur facility. Please be		302	nd ratible apparation	a no alesada
•		ise attach a separat			a wiii organic j	orvunces.
Used with organic	Product Used		Function of	Source Name and	Is it on the	ls it
products?	rioduct Osea		stance?	Phone #	National List?	Certified Organic?
	NA			***************************************	E1061	- Widding :
				10000		
						_
SECTION I. WATER	[NOP 205.103, 205.272,	205.601, 205.605]			I	
1. How is water us			NOTUS	SED - Move onto Section	n I Stornes	
Ingredient	,	Product transpo			•	:
Cooking		Cleaning organic	•	, <u> </u>	equipment ease specify)	ļ
<u>-</u>		Cooling	z producto	□ otuer (bre	ase specily)	





☐ Product specification sheet ☐ Ingredient inspection forms ☐ Batch recipes	Production log Shift production log QC reports	Ingredient inventory reportsFinished product inventory reportsPackaging reports
	☐ Waste log	Other (please specify):
2. Are products identified as "organic" on	production documents? N	/A- (b) (4)
3. Are your packing or processing lines a	nd/or equipment dedicated for use v	with organic products only?
3a, If "No," please describe how you encorganic products during packing and/or p		minated with prohibited materials or commingled with non-
How are partial pallets/boxes/drums of commingling with non-organic products		does your company ensure they are protected from
Section G. Post Harvest Materials [N A post harvest material is a substance to a post harvest material on an organic order. 205.601 of the National List.	hat is used on a raw organic crop p	rior to packaging or processing of the crop. In order to use approved agricultural product or must be listed in section
1. Please indicate what type(s) of post har	rvest materials are at your facility.(Check all that apply.
NONE USED - Move onto Section I	H - Processing Aids	-
☐ Waxes	Anti-Microbial Agents	Sanitizers
Floatation Agents	Anti-Fungal Agents	Other (please specify):
Anti-foaming agents	Sprouting Inhibitors	
Please list all post harvest materials us with organic products. Please attach		. Please be sure to indicate which materials are used cessary.
Used with organic Product Use products?	What is the Function the Substance	1 Source Mame and Phone H
b) (4)		
u) (4)		

Washing Protocols





(b) (4)			
SECTION C. HARVEST AND TRANSPOR	RTATION OF ORGANIC CROPS [NO	205.103, 205.270, 205.272]	
1. Does your company arrange for, o	or is your company responsible fo	or, the harvest of organic crops?	Yes No
If "No," move onto question #	12.		,
1b. If "Yes," how do you ensur	e there are no non-organic crop r	esidues in harvest equipment?	
Equipme	nt used for organic crops only	Equipment is cleaned prior to or	ganic crop harvest or use
1c. Is harvest equipment cleani	ng documented?		Yes No
1d, If "Yes," please indicate wh	nat type of cleaning documentatio	n is maintained. ,	
Clean truck/equipment affidavits	Clean out records Other	(please specify):	
Does your company arrange for, o	or is your company responsible fo	or, the transportation of organic crops?	Yes No
If "No," move onto question	‡ 3.		•
2a. If "Yes," how you ensure th	ere are no non-organic crop resi	dues in transport equipment?	
Equipme	nt used for organic crops only	Equipment is cleaned prior to or	ganic crop harvest or use
2b, Is transport equipment clea	ning documented?		☐ Yes No
2c. If "Yes," please indicate wh	nat type of cleaning documentatio	n is maintained.	
Clean truck/equipment affidavits	Clean out records Othe	er (please specify):	
Does your company provide harv	est containers to farms for organi	c products?	Yes TWO
If "No," move onto Section D	– Receiving – Incoming Organ	ic Products.	
3a. If "Yes," are the containers	i,		
☐ New	Used for organic crops only	Cleaned prior to use	Lined prior to use
3b. How are harvest containers iden	tified/labeled as "organic"?		
SECTION D. RECEIVING - INCOMING C	PREANIC PRODUCTS [NOP 205.10	3, 205.270, 205.272]	
How are organic products receive	d at your facility? Please check	all that apply. N/A	
Bins	Totes	Retail packag	es
Bulk trailer	Drums	Other (please	specify):
Bulk bags	Wholesale boxes		





PRIVATE LABELING				
6. Do you plan to custom process or c 6a. If "Yes," please complete process for. <i>Please attach a</i>	the table below with the comp	any or companies that you plan	☐ Yes n to custom label or	□ No oustom
Company Name	Product Name (exactly as appears on label)	Is the contracting company an organically certified company?	Please ide certification age the la	ency listed on
SUB-CONTRACTS 7. Does your company plan to contract	•	ng facilities to produce,	Yes	No
process, store, or label organic pro		et of paper if necessary.		
Contract Farm or Company Name	Address	Phone No.		Organic Certification Agency of the Farm or Contracting Company
Is your company responsible for sou your facility?		ic products processed at	Yes	No
8a. If "No," please identify the	responsible party or parties.			
Please indicate how organic product	is handled or processed by you	ır company are marketed. Plea	ase check all that a	pply.



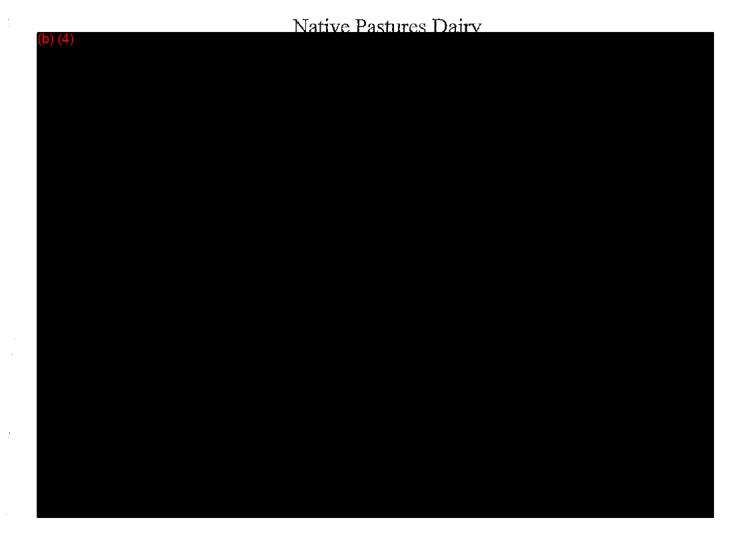


If currently certified by NMDA, were conditions noted still outstanding? (see your last correspondence fro 6a. If "Yes," please note conditions or informations.	
7. Which other bodies inspect/audit your facility?	Please specify which agency/organization :
State/local E/D	Environment Dopt
nealth /food safety.	NMDA - (6) (6)
independent (AIB, Fair Trade, etc)	
other	
SECTION B. CHAIN OF CUSTODY	
Please indicate which handling categories apply to the second control of the second	is facility and your company. Please check all that apply.
Processor of single-ingredient products Packer of raw agriculture products F	Wholesale Grocery Distributor Warehouse/Storage Facility Re-pack of previously packaged products Other (please specify):
	nt this facility (i.e. baking, milling, canning, grain cleaning, etc.)? e よいって
3. Does your company own the organic products that ar facility?	e handled at this Yes No Both
(b) (4)	ip the ingredients or products handled at your facility?
Percentage of annual production :	O O % Organic % Non-organic
5. Do you handle or process, or plan to handle or process and in non-organic form? 5a. If "Yes," please provide a list of the production of the pr	ss, the same product in both an organic Yes No s that you handle or process in both an organic and conventional form. separate sheet of paper if necessary.





SECTION A. GENERAL INFORMATION	[NOP § 205.201 AND 205.401]
SECTION A. GENERAL INFORMATION	[§ 205.201 AND 205.401]
The National Organic Standards 7 CFR 205 require all operations seeking certification to verified and approved by an accredited certifying agent. A certified operation must update to verify continued compliance. This is a "Plan" – Changes or updates must be approved by the Changes and updates can be submitted by emails.	te this system plan on an annual basis in order
COMPANY OVERVIEW	
Please provide a description of your operation.	
See list	
Please provide detailed directions to your operation:	
	/
3. Does your business process non-organic products?	☐ Yes ☐ No
CERTIFICATION SUMMARY	
4. Are you currently certified organic?	Yes No
4a. If "Yes," please list the name of the agency and the first year certified by th	at agency.
NMOCC	
5. Have you ever been denied certification or had your certification suspended or revoke	ed? Yes No N/A
5a. If "Yes," please list the name of the agency, the year and describe the circu	ımstances.







(b) (4)			
2. Please indicate what shipping or sales do	cuments are maintained by your comp	pany. Please check all that apply.	:
Pallet/tote ticket	Clean truck affidavit	Contracts	
☐ Bill of lading	Purchase order	Other (please specify):	
Sales invoice	Scale ticket	/	
3. Do all documents clearly identify products	as organic?	ZY e	s 🗌 No
4. Does your company arrange outgoing pro	duct transport?	☐ Y€	es No
4a. If "No," move onto Section M	l. Pest Management		
4b. If "Yes," have transport compa	nies been notified of organic handling	requirements?	es 🗌 No
5. How does your company ensure outgoing	transport units are cleaned prior to lo	oading löose, bulk organic products?	
Not Applicable, only packaged pr	oducts are shipped 🔲 Clean ou	ut records	!
Clean truck/equipment affidavits	Other (p	lease specify	
			:
6. Are organic products shipped in the same	transport units as non-organic produ	uots?	es 🗌 No 📗
6a. If "Yes," please indicate what s	teps are taken to segregate organic p	products.	
Use of separate pallets	Organic	product sealed in impermeable containe	rs
Organic product shrink wrapped	Other (p	lease specify)	
Separate area in transport unit		Market arrange at a second of the second of	
SECTION M. PEST MANAGEMENT [NOP 205.2	71]		
The NOP Rule requires a certified handling the removal of pest habital, food sources ar temperature, light, humidity, atmosphere, and by mechanical or physical controls including synthetic substances consistent with the National be used, provided the certifying agent contact with ingredients or organic products system plan.	nd breeding areas, and prevention of d air circulation may also be used to g, but not limited to, traps, light, sou ional List. If these measures are not e approves use of the substance, me	faccess to the facility. Environmental fa prevent pests: Control of pests may be und, or lures and repellants that use no effective, a synthetic substance no on the ethod of application, and measures take	ctors such as accomplished onsynthetic or a National List en to prevent
What type of pest management system do	pes your facility use?	None used	;
n-house: Name of responsible person			
Contract pest control service: Name, add	iress, phone number		
			Ì





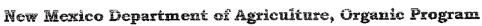
Check all pest problems at your facility.						
No pest problems Crawling insects	Flying insects	Rodents	Birds	Other (plea	ase specify)	
Check all pest management practices use	ed at your facility.					_
(4)						
The use frequency and method of applic	otion of those cupthat	ie auhetanese	muet ha anni	myed by NIMDA	Please evals	in how
The use, frequency, and method of applic	ation of these synthet	ic substances ces at your fac	must be apprility.(b) (4)	roved by NMDA.	. Please expla	in how
The use, frequency, and method of applic organic products are protected from expos	ation of these synthet sure to these substanc	ic substances ces at your fac	must be appr ility. <mark>(5) (4)</mark>	roved by NMDA.	 . Please expla	in how
The use, frequency, and method of applic organic products are protected from expos (b) (4)	ation of these synthet sure to these substanc	ic substances ces at your fac	must be appr ility. <mark>(5) (4)</mark>	roved by NMDA.	 . Please expla	in how
The use, frequency, and method of applic organic products are protected from expos (b) (4)	ation of these synthet sure to these substand	ic substances ces at your fac	must be appr ility. <mark>(5) (4)</mark>	roved by NMDA.	. Please expla	in how
(b) (4) Section N. Quality Assurance [NOP 205.	sure to these substance	ces at your fac	ility.(5) (4)			
organic products are protected from exposition (4) Section N. Quality Assurance [NOP 205. The National Organic Program requires a decords must be adapted to the particular operation in sufficient detail to be readily	sure to these substance 103, 205.270, 205.27 certified operation to a business or operation and audientees	ces at your fac 2] maintain recoron, must fully lited, must be	ds regarding	the handling of	f organic prod ansactions of	ucts. The
organic products are protected from exposition (4) SECTION N. QUALITY ASSURANCE [NOP 205. The National Organic Program requires a decords must be adapted to the particular operation in sufficient detail to be readily lemonstrate compliance with the National On order to gain a better understanding of your	sure to these substance 103, 205.270, 205.27 certified operation to a business or operation understood and aud rganic Program Rule. ur company and the o	ces at your fac 2] maintain recor on, must fully lited, must be	ds regarding disclose all maintained	the handling of activities and tr for five years,	f organic prod ansactions of and must be	ucts. The the certifi sufficient
corganic products are protected from exposition (b) (4) ECTION N. QUALITY ASSURANCE [NOP 205. The National Organic Program requires a decords must be adapted to the particular peration in sufficient detail to be readily emonstrate compliance with the National Organic Program of the National Organic Program of the National Organic Procedure of the Production of the Production of the National Organic Program of the Production of the National Organic Program of the Production of the National Organic Program of the Program of the National Organic Program of the National Organic Program of the Program of the National Org	sure to these substance 103, 205.270, 205.27 certified operation to a business or operation understood and aud rganic Program Rule ur company and the contents the second secon	ces at your fac 2] maintain recor on, must fully lited, must be quality assuran	ds regarding disclose all maintained nce systems,	the handling of activities and tr for five years, or recordkeepin	f organic prod ansactions of and must be	ucts. The the certifi sufficient
GECTION N. QUALITY ASSURANCE [NOP 205. The National Organic Program requires a decords must be adapted to the particular peration in sufficient detail to be readily lemonstrate compliance with the National On order to gain a better understanding of you acility, please complete the following section. Do you have standard operating procedulatach a copy.	eure to these substance 103, 205.270, 205.27 certified operation to a purification of the company and the co	2] maintain recoron, must fully lited, must be quality assurancesing and/or ha	ds regarding disclose all maintained nce systems,	the handling of activities and tr for five years, or recordkeepin	f organic prod ansactions of and must be g systems, in	ucts. The the certifi sufficient
organic products are protected from exposition (b) (4) Section N. Quality Assurance [NOP 205. The National Organic Program requires a decords must be adapted to the particular	sure to these substance 103, 205.270, 205.27: certified operation to a business or operation understood and aud rganic Program Rule. ur company and the content res for organic proces Sec // m in place?	2] maintain recoron, must fully lited, must be quality assurancesing and/or ha	ds regarding disclose all maintained nce systems,	the handling of activities and tr for five years, or recordkeepin	f organic prod ansactions of and must be g systems, in	ucts. The the certifi sufficient





Organic System Plan – Processor/Handler Attach MSDS and/or label information for boiler additives you plan to use during organic handling or processing. 8. If boiler water additives are used during organic processing, please indicate how you prevent prohibited volatile boiler additives from contaminating organic ingredients or products. SECTION J. STORAGE [NOP 205,270, 205,272] No 1. Does your company store organic products? If "No," move onto Section K - Packaging, Storage Yes Containers, Shipping Containers 1a. If "Yes," please provide details:. Storage Off Site ? Location and name/number of Unit Use Capacity Type Dedicated Storage Area(s) Organic? Incoming Raw Product Storage Ingredient Storage Packaging Material Storage In-process Storage Finished Product Storage Other (Please specify): If off-site storage is utilized, please ensure the name, address, and phone number of the facility is noted in Section B, Table 7a. 2. Please describe how you ensure organic products are not contaminated with prohibited materials or commingled with non-organic products during storage. Please include details on both incoming product storage and finished product storage.







AFFIRMATION OF ORGANIC APPLICANT

•		_	eement must be autho		
١, _	ART	SCHANG) 		, as an authorized representative of
[Bı	usiness Name]	Native	Pastures	Dain	, as an authorized representative ofdepose and say that I will:
		all applicable org		•	in accordance with Title 7 CFR Part 205
2.	Establish, implem Mexico Departme			duction or handling	system plan that will be submitted to New
3.	Supply NMDA with	h all information re	quired to verify compl	iance with the Natio	nal Organic Program Rule.
4.	production and ha	andling areas, stru	ctures, and offices by	NMDA inspectors.	nandling operation, including noncertified These inspections may be announced of the National Organic Program.
 !	Maintain all record	ds applicable to the	e organic operation fo	not less than five (5) years beyond their creation .
6.					ire access to these records under norma onal Organic Program Rule .
7.	Submit to NMDA t	the applicable fees	as described on the	fee schedule which	is current at time of payment.
8.	Immediately notify site, facility, livesto			g drift, of a prohibite	ed substance to any field, production unit
9.	with the Nation	al Organic Prog	ram Rule, including	g: additions or o	rtion of it that may affect its compliance deletions of crops & fields; facilities act information and email address.
		•	nic rules and regulation federal fines and pena	•	oking of organic certification and
l u	nderstand that rece (b) (6)	ipt of this applicati	on in no way implies o	ranting of certificati	on by NMDA.
S	IGNATURE OF A	.TiVE:			DATE: 4-16-12
Ö	RINT NAME	T- 2-1	0 4/1:	010	TITLE:





2. Source of water: (b) (4)	olease sp	ecify):	
3. Does the water meet the Safe Drinking Water Act	?	Į.	Yes No
4. Is water treated on-site?			Yes No
4a. If "Yes," please indicate what water trea	alment processes are used	1.	
			
5. Describe how you monitor water quality. μ	vater tests	Done	
See list			
	The second secon	(b) (4)	
6. Is chlorine, calcium hypochlorite, chlorine dioxide, your facility?	or sodium hypoclorite use	d in wash water or flume water :	
6a. If "Yes," how often do you monitor or tes your facility is maintained at or below 4ppm (
☐ Daily	Month	ly	
Weekly	Annua Annua	illy	i i
	Other	(please specify):	:
7. Is steam used in the processing or packaging of fo	ood products?	(b) (4)
7a. If "No," move onto to Section J - Stora	•		
7b. If "Yes," does steam have direct contact		s?	
7c. If "Yes," do you use?	. The organia rood product		
Steam filters	Testin	g of finished products	
Condensate traps	Other	(please specify):	
Testing of condensate			
7d. Are boller water additives used during for	od handling or processing	?	
7e. If "No," move onto to Section J – Stora	age.		
7f. If "Yes," please list all products used as l be used during handling or processing of org		below. Please indicate which boiler w	rater additives will
Name of Boiler Water Additive	Used During Organic Handling or Processing?	Source Name and Phone #	Is the Substance on the National List?



Water Analysis Report

Date Tested: 4/2/2012

Sample Reference Number: 12095

WS West

General Water Sample Information
Company Rep.: (b) (6)
Customer: Native Pasture Dairy
Application: Dairy

Sample condition: Raw

Water supply: Well Date drawn: 3/21/2012 Date received 3/29/2012

Dealer Comments: Hardness Metals. Look	ing for Silica
STANDARD WATER ANALYSIS	RESULTS
PH No treatment required for pH 6.8 to 8.5. Belo	ow 6.8 can be corrected by a Surge AN-15 acid neutralizing filter.
	(b)
1 - 3 GPG = Soft 8 - 12 GPG = Moderately hard	4 - 7 GPG = Slightly hard 13 - 20 GPG = hard
20+ GPG = Very hard Hardness minerals can cause white deposits sized Surge water softener. To remove exis acid wash product at 2 Oz/Gal.	s on equipment. To remove water hardness minerals use a properly ting hardness deposits, in a dairy pipeline, shock with good quality
ppm Iron (Total)	easant taste in water. A Surge water softener can remove up to 3.0 separate AF-15 Surge iron filter. To remove existing deposits in a
US EPA suggested limit on sulfates is 250 p bitter taste and white film on equipment. To	pm. Less than 50 ppm is desirable. High amounts can cause a treat drinking water with under 2000 ppm TDS, use an under sink have reduced milk fat when exposed to water with sulfate
To treat drinking water with under 2000 ppm less than 1,000 ppm of TDS is ideal for dairy	more TDS may be corrosive and lower Softener's capacity by 30%. TDS, use an under sink reverse osmosis filter. Drinking water with cows. Levels of 1,000 to 3,000 ppm are usually satisfactory. Levels ad-tasting water, which may result in reduced water intake and milk
ppm Bicarbonate Buffers	(b) (4)



Sample Reference Number: 12095

Bicarbonate buffers affect a detergent or acids ability to change pH. Water with 500 ppm or greater buffers needs more chemicals to raise or lower the pH. Water with 250 ppm or lower buffers can give deceptively good pH levels. With low buffers more emphasis should be put on the amount of chemicals being used, rather than the pH

OPTIONAL TESTS (Preformed By Request Only)

ppm Silicia (SiO₂)



Over 30 ppm silica has the potential to cause white, glassy silica deposits. There is no safe way to remove silica deposits. You can help prevent silica deposits in dairy pipelines, by using a powder CIP detergent with high phosphates.

- We normally do not run any bacterial tests.
- The above test results are for informational purposes and provide quantitative data only! It does not imply any acceptance or adherence to any health or bacteriological standards. If you have a water related health concern, contact your local health department!

This water hard with average Bicarbonate Buffers. Silica is high enough to cause deposits. A properly sized softener will remove the hardness but not Silica.



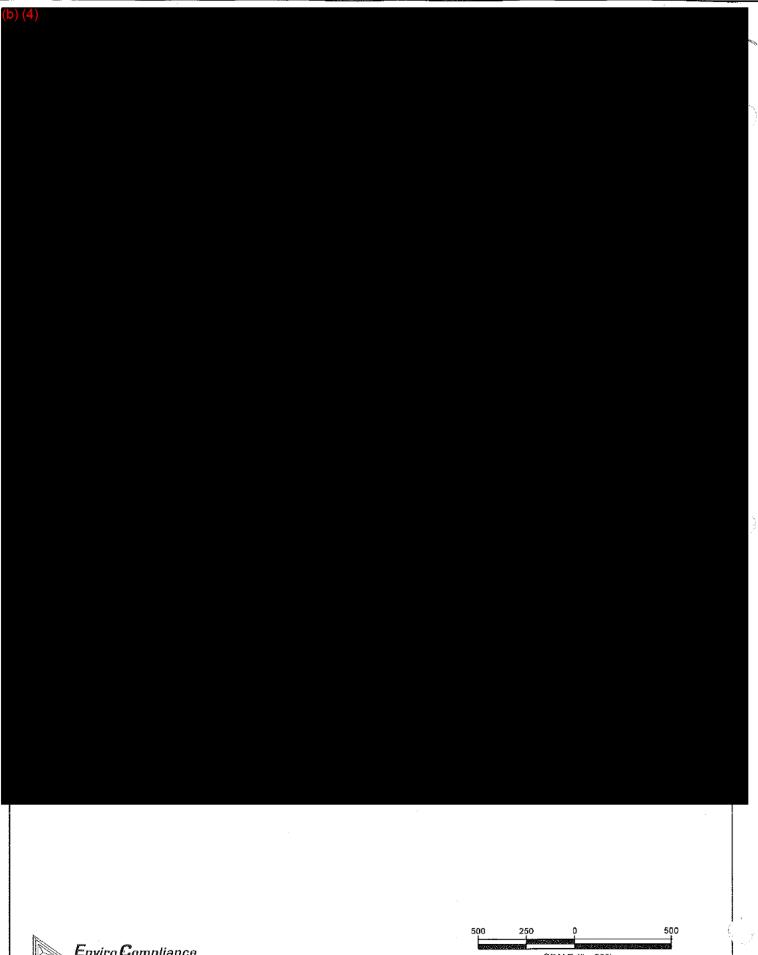


PS. Normal lab sample, turnaround time is approximately 10 to 15 working days after receipt. All 1st class mail and ground mail samples are run in order of receipt. Turn around on a "Rush" sample is approximately 5 to 8 working days after receipt. Samples requested as "Rush" must be sent by overnight mail and clearly marked "Rush" both on the outside of the mailing carton and on the sample bottle label. Turnaround times vary according to workload.





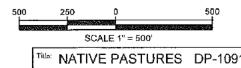
See List	100
	On a second seco
SECTION K. PACKAGING, STORAGE CONTAINERS, AND SHIPPING CONTAINERS [NOP 205.270, 205.272]	minalina
The NOP Rule requires that handling practices and procedures present no contamination risk to organic products from comi with non-organic products or contact with prohibited substances. Packaging materials, bins, and storage containers must not c	ontain a
synthetic fungicide, preservative, or fumigants. Reusable bags or containers that have been in contact with any substance in manner as to compromise the organic integrity unless the bag or container has been thoroughly cleaned. Procedures used to r	i such a maintain
the organic integrity of ingredients or products must be documented.	
Does this facility pack organic products into retail packages or place organic products in storage or shipping Yes containers?	No
1a. If "No," move onto Section L – Shipping-Outgoing Products. If "Yes," what type(s) of packaging materials or storage/shipping containers do you use? Please check all that apply.	
Paper Glass Poly	
Cardboard	
Wood Foil	
Plastic Waxed paper	
2. Are all packaging materials and/or storage and shipping containers food grade?	No
Have any packaging and/or storage and shipping containers been exposed to synthetic fungicides, preservatives, or funigants?	∠ No
4. Are packaging materials and/or storage and shipping containers reused?	No
4a. If "Yes," please describe how organic products are protected from contamination when placed in the reused conta	iner.
5. Please describe how you identify packages or containers as organic.	
6. Is all packaging and labeling equipment cleared of organic identification prior to all subsequent Yes No conventional runs?	□ N/A
ECTION L. SHIPPING - OUTGOING ORGANIC PRODUCTS [NOP 205.103, 205.270, 205.272]	
How do organic products leave your facility? Please check all that apply.	





Office (575) 762-9674 Fax (575) 762-3749

Providing Management Assistance for Environmental Compliance Since 1981



Title: NATIVE PASTURES DP-1091 SITE PLAN

^{Date:} 2/19/10

DWG/Doc Ref 1"=500'

SAMS04015





New Mexico Organic Commodity Commission 4001 Indian School Rd NE Suite 310 Albuquerque NM 87110 (505) 841-9070, fax: (505) 841-9080 http://nmocc.state.nm.us

APPLICATION FOR ORGANIC CERTIFICATION - RUMINANT LIVESTOCK PRODUCERS

	Parm Business Name: Native Pastures Dain		CERTIFICATION NUMBER: 383 Aus
	GROWER/PRODUCER NAME: ART Schaap	PHONE NUMBER: (b) (6)	JOB TITLE:
	CONTACT NAME (IF DIFFERENT FROM ABOVE):	PHONE NUMBER:	JOB TITLE:
	FARM MANAGER / INSPECTION CONTACT NAME (IF DIFFERENT FROM ABOVE):	PHONE NUMBER:	JOB TITLE: M.GR.
4	13 C.R.L. Clovis NM	S.W of clovis	COUNTY:
•	MAILING ADDRESS (IF DIFFERENT FROM ABOVE): 5 Gree	<i>V</i>	/
	Clou's	STATE VM	ZIP CODE: 8 / 0 /
	CELL PHONE NUMBER: (b) (6)	ALTERNATE PHONE NUMBER: (b) (6)	
	FAX.NUMBER: 575-683-5154	EMAI!. ADDRESS: (b) (6)	
	Application Checklist - Below is the list of forms included in the	s application packet. Please	check the forms you are submitting.
	For All Applicants	For Use with New Fields	s Not Presently Certified Organic
	Application for Organic Certification	New Field Application	
	Affirmation of Applicant for Organic Certification	Previous Land Use Stat	tement
	Organic Certification Fee Form		
	Organic Sales & Yield Form	Optional: For your us	se
	Application for Cost Share Reimbursement	Custom Service Provide	er Form
	Cost Share Reimbursement (Substitute W-9)	Neighboring Land Use	Statement
	Field Summary (Renewal Applicants Only)		Ottomoni
	Organic System Plan -Ruminant Livestock Producer		

Please be aware that electronic applications are available! Please call if you are interested.





AFFIRMATION OF APPLICANT FOR NMOCC ORGANIC CERTIFICATION

Business NAME: Native Dastures Dain		BUSINESS LICENSE NUMBER:			
APPLICANT NAME					
BUSINESS INFORMATION (PLEASE CHECK APPROPRIATE BOX):	EDUCATIONAL INSTIT	UTION / PUBLIC INSTITUTION / NONPROFIT			
☐ INDIVIDUAL (SOLE PROPRIETORSHIP)	GENERAL PARTNERS	HIP.			
INDIVIDUAL "DOING BUSINESS AS"	□ COOP				
CORPORATION	OTHER: (PLEASE LIST	Γ)			
LIMITED LIABILITY COMPANY (LLC)					
O_{i}	, as an	authorized representative of			
	√	depose and say that will:			
 Fully comply with all applicable organic production and handli Organic Program Rule. 	ing regulations in accord	ance with Title 7 CFR Part 205 National			
2. Establish, implement, and update annually an organic production 205.201).	on or handling system pla	n that will be submitted to NMOCC (NOS			
3. Supply NMOCC with all information required to verify complianc	e with the National Organ	ic Program Rule [NOS 205.201(a)(6)].			
 Permit on-site inspections with complete access to the production handling areas, structures, and offices by NMOCC inspectors discretion of NMOCC or as required by the Administrator of the literature. 	. These inspections ma	y be announced or unannounced at the			
5. Maintain all records applicable to the organic operation for not le	ess than five (5) years bey	ond their creation [NOS 205.103(b)(3)].			
Allow authorized representatives of NMOCC, or the Secretary of for review and copying to determine compliance with the National					
7. Submit to NMOCC the applicable fees as described on the fee s	chedule which is current	at time of payment [NOS 205.400(e)].			
8. Immediately notify NMOCC about any application, including of facility, livestock, or part of an operation [NOS 205.400(f)(1)].	drift, of a prohibited subs	stance to any field, production unit, site,			
Immediately notify NMOCC of any change in our certified operation or portion of it that may affect its compliance with the National Organic Program Rule, including: additions or deletions of crops & fields; facilities, ingredients & products, changes to managers, responsible parties, contact information and email address [NOS 205.400(f)(2)].					
I understand that willful violation of organic rules and regulations may	y result in revoking of orga	anic certification and in extreme			
cases may lead to state and federal fines and penalties.					
understand that receipt of this application in no way implies granting	g of certification by the NM	10CC.			
SIGNATURE OF AUTHORIZED Matica Paster	» Di	DATE: 12-30-11			
PRINT NAME		Timue:			







FARM OR B	JUSINESS NAME: Wat V	e Pastur	دح ا	Dain		CERTHICATION NUMBER:
NAME:	usiness name: Natori Art Sch	aap)		,
Assessi	ment Fees: Fees have cha	nged! Assessment fees	are now thr	ree-fourths o anic sales o	of one percent over one millio (b) (4)	(% percent) of the first million of gross organic n. Please determine your assessment fees below
	oss Organic Sales for the 2010 – Dec. 31, 2010)	2010 Calendar Year =			A	
\$0 to \$1	,000,000 (one million)	For sales between zer million dollars, multipl			В	
Ar	e gross organic sales <u>ove</u>	r one million dollars?	☐ Yes	☐ No	lf "No"	, enter amount from box B into box D
11.	'Yes", your total assessmen			our first one llion dollars		(box B), plus the assessment on sales over your
Over \$1	,000,000 (one million)	For sales over one mil the amount over one r			C: (b) (4)	
	Total Organic Sale	s Assessment Fee (the	sum of bo	x B & C) =	D:	
Late Fee	es: If postmarked after June	1, 2011. Late Fees are	in addition	to the ass	essment fee	and the application fee.
	Late Fee: renewals receiv	red after June 1, 2011		\$75.00		does not apply to new applicants
	Late Fee: renewals receiv	red after July 1, 2011		\$100.00		does not apply to new applicants
	Late Fee: renewals receiv	red after August 1, 2011		\$200.00		does not apply to new applicants
	Late Fee: renewals receiv	red after September 1, 20	011	\$500.00		does not apply to new applicants
		Total La	te Fees =	\$		
Applicat	tion Fees: Check the appro	opriate boxes and enter a	ipplicable a	mounts fron	n above.	
Renewal Application Fee (renewal applicants)			\$200.00		Applies to renewal applicants ONLY!	
	"NEW Applicants" - App	lication Fee (first time ap	oplicants)	\$250.00		Applies to NEW applicants ONLY!
	Late Fees (if applicable)			\$ (b) (4)		Applies to renewal applications postmarked after June 1, 2011
	Total Organic Sales Asse	essment Fee (see box L	above)	\$		Does not apply to new applicants
		Tot	al Fees =	\$		

Application Fees are non-nerungable

Check or money order payable to: NMOCC 4001 Indian School Rd NE, Suite 310 Albuquerque NM 87110





ORGANIC SALES AND YIELD FORM

FARM BUSINESS NAME: Nativa	· Pastures	Dain	Certification Number:
GROWER / PRODUCER NAME: ART	Schaap		

Sales and Yield

Sales include CSA, farmer's markets, restaurants, on-farm stand, distributors, grocery stores, internet, etc.

List all organic crops & livestock produced in 2010. Please make sure to include all crops listed on your last organic product list. Direct market operations may list "mixed vegetables", "mixed fruit" or "mixed herbs" or similar if all sales are retail.)

If you do not maintain organic crop yield records in the format below, please summarize your yields on an additional sheet.

	Yı	elds	Sales		
Organic Crop / Product	Total Acres / Animals in Production	Organic Yield / Unit of Measurement	Wholesale Sales	Retail Sales	
milk	(b) (4)		o) (4)	Mile American and Principles (Marie Control of Control	
			-		
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
<u></u>					
		Total Organic Sales			

Marketing & Jobs - Help us show state government the importance of organic farming in New Mexico's economy!

Percentage of Sales	Type of Sales	Number of employees	Type of Employee
%			Permanent Full Time Employees
%	On-Farm Sales		Permanent Part Time Employees
%	CSA (Community Supported Agriculture)		Seasonal Employees
% 100	Wholesale		
%	Restaurant		
%			
%	Other – Please List		





To be completed by operations that raise cattle, goats, or sheep.

If you are raising non-livestock related crops for wholesale or retail sale (vegetables, fruit, etc.), the Crop Producer Organic System Plan must be completed in addition to this form.

FARM BUSINESS NAME:	tive Pasture	Dais	CERTIFICATION NUM	384
ORGANIC GROWER / PRODUCER NAM	EART Scha	ap		
Section A. General Infor	mation		[NOS 205.201 and	205.401]
The National Organic Star certified producer or hand to verify continued compli	ler and an accredited certifyii	rations seeking certification t ng agent. A certified operatio	o develop an organic system n must update this system p	n plan that is agreed to by the lan on an annual basis in order
 A list and detailed info A description of the m A description of the p A description of the p A description of the p Any additional inform 	ices and procedures — includ ormation regarding each sub- nonitoring practices and freque ecordkeeping system that del ractices in place to prevent c ractices in place to prevent c ation required by the certifyin n" - You may change or up	stance to be used in organic tency the practices will be pe monstrates compliance with ommingling of organic and no ontamination of organic prod g agent in order to evaluate	production or handling, informed, the National Organic Standa on-organic products, ucts with prohibited substan compliance. Changes must be appro	ces, and wed by NMOCC prior to
FARM OVERVIEW				
•	f description of your livestock	=		
	ture & Feed	•	milking C	·ο ω S
	d directions to your operation			,
South a	b Clovis	Smi on H	my 70 - g	o west
es 51	on South w	vest cheese		Dairy Fam
Does your operation pr (seeding, spraying, laser let)	oduce non-organic crops or peveling)?	provide custom service work	for non-organic operations	☐ Yes ☐ No





Certification Summary		
4. Are you seeking Organic Certification for any of the following:	Yes	IX No
☐ Vegetative crops for human consumption ☐ Non-ruminant livestock (ch	ickens, pigs, etc	á
If "Yes", you must complete a separate Organic System Plan for each - please contact our office.		
5. Are you currently certified organic?	Yes	☐ No
5a. If "Yes," please list the name of the agency and the first year certified by that agency. Nw		
6. Have you ever been denied certification or had your certification suspended or revoked?	IX No	□ NA
6a. If "Yes," please list the name of the agency, the year and describe the circumstances.		
7. If currently certified by NMOCC, were conditions noted or has information been requested that is still outstanding? (see you last correspondence from NMOCC)	Yes	No
7a. If "Yes," please note conditions or information requested and how you have resolved the issue.		
		()
CHAIN OF CUSTODY		
8. When do organic crops leave your custody? (Examples – "at point of retail sale", "after delivery to handler", "cropharvested by the buyer", etc.) (b) (4)	os are contracte	d &
9. Are you hired or contracted by another operation to grow organic crops?	X Yes	□No
9a. If "Yes," please provide the name of the operation (processor, grower, dairy, marketing company) and the (Please note any areas to which you are not the responsible party (e.g. seed selection, planting/harvest, herd		contract.
10. Do you hire or contract custom services during production, handling or storage or organic crops? (Examples – tractor work, transportation, harvest, etc.)	Yes	[X](No
10a. If "Yes," list the business(s), service, and contact information and submit a Custom Operator Compliance	e Statement as	appropriate.
		¥





Section B. Seeds, Annual Transplants and Seedlings [NOP 205.204] NOP 205.204 requires that pure annual seedlings and planting stock unless organic produced seeds and planting stock are not commerced to defined as "the ability to obtain a production input in an appropriate form, quality, or quantity to fulfill a organic production or handling, as determined by the certifying agent in the course of reviewing the organic documentation verifying the unavailability of organic seed, even when seeds are provided from a contral and seeds treated with a prohibited substance are not allowed.	cially available. Commerd n essential function in a s unic plan." You must mair	cial availability system of ntain
1.) Do you use seeds on your farming operation?	Yes	☐ No
If "No," please skip to Section B.		
2. List the source(s) of seeds used to grow organic crops. (Be specific when listing seed suppliers such	as seed companies)	
3.) Do you use any non organic seed?	Yes	☐ No
3a. If "Yes", how do you determine that organic seed is not commercially available?		
3b. If "Yes", what records do your maintain verifying your organic seed search?		
3c. If "Yes", what records do your maintain verifying that non organic seeds are not treated or ger	netically modified?	
Section C. Soil Fertility and Crop Nutrient Management [NOP 205.203, 205.205] NOP 205.203 required cultivation practices that maintain or improve the physical, chemical, and biological condition of the soil a requires producers to manage crop nutrients and soil fertility through crop rotations, cover crops and app Additionally, you must manage plant and animal materials to maintain or improve soil organic matter while soil and water. Please list all fertility inputs that you plan to use in the last section of this plan	ind minimize erosion. NC dication of plant and anim	S 205.205 nal material
Describe practices to improve soil organic matter. (b) (4)		
Check the practices used to manage crop nutrients and soil fertility. (b) (4)		





4. Check each issue as applicable. For each box checked, list the specific issue and your corrective action to mitigate the	he issue.	
Issue Specific Issue Corrective Action		
Evample - Mutrient Deficiencies France 7: Deficient Comple Add Biomis (b) (4)	Zina () () ()	
5. Do you apply micronutrients to manage for deficiencies? (Micronutrients are nutrients essential to plant growth and health that are only needed in very small quantities. Example - zinc, boron, manganese)	☐ Yes	⊠No
5a. If "Yes", was the deficiency documented through testing?	☐ Yes	×ΩNο
5b. If "No", explain how the nutrient deficiency was determined.		
		()
6. Please describe your manure management plan. (b) (4)		
7. How do you evaluate the effectiveness of your soil fertility practices? Soil test		
8. List the records you maintain for soil fertility and crop nutrient management. (Examples: soil & tissue tests, material in compost records, etc.)	nput records	& receipts,
		•
8b. Can your material application records track all fertility inputs applied to organic fields?	Yes [X No
List all fertility input materials that you plan to use in Section M. Material inventory.		





Section D. Crop Rotation and Pasture Management [NOS 205.205]

Requires organic producers to implement a crop rotation (including sod and animal rotation) that maintains or improves soil organic matter, provides for pest management, manages deficient or excess plant nutrients and provides erosion control.

The "new" section 205.240, Pasture Management; requires ruminant livestock producers to have a functioning pasture management plan and manage pasture to meet the "new" feed requirements for grazing animals including:

- Animals must graze pasture during the grazing season (at least 120 days)

 Describe vour pasture management plan. Please include a description of your pastures and any pasture rotation (b) (4) 	ons. (b) (4)	
2. Are pastures, and other grazed land sufficient to provide at least 30% dry matter intake for your livestock during the grazing season? 2a. How is this determined? (b) (4)	√XYes	□ No
SECTION E. NATURAL RESOURCES & WATER [NOP 205.200] National Organic Standards require that an organic practices which maintain or improve the natural resources of this operation, including soil and water quality. 1. List the source(s)) of water on your farm. (b) (4)	roducer must in	nplement
2. List the type(s) of irrigation system(s) used on your farming operation. (Examples: drip, flood, center pivot) (b) (4)		
3. Do you apply any material inputs (fertilizer, cleansers, etc.) through your irrigation?	☐ Yes	[X √N₀
4. Describe your efforts to conserve water and improve the natural resources of your farm. (Example: wildlife has control)	abitat, water col	'ection, erosion





Section F. Weed, Pest, and Disease Practice Management Practices [NOP 205.206] required that producers implement management practices to prevent weeds, pests, and diseases in crops grown for livestock. In the event that the preventative practices are not adequate to prevent such outbreaks, the producer may control weeds, pests, or diseases through mechanical or physical methods. When these practices are again insufficient, a producer may use non-synthetic materials or synthetic materials approved and listed on the National List of Allowed Substances [205.601 through 205.607].

Specific Weed, Pest or Disease	or rate of secretary resembles and the property of the second	Pest (X)	Disease (X)	Preventative Practice	Cultural Practice or Materials used for Control
Ex - Canadian Thistle	X	CONT. COMP. STATE OF STATE OF		Pasture rotation	Hand Pulling
(b) (4)					
· · · · · · · · · · · · · · · · · · ·					
· 					,
How do you monitor for wee	eds, pests a	and disea	se?		
Visi	va (06	serva	tion	
				nd disease control practices?	-
	1 Pa			·	
. 0	ľ				
P. S. Litter and a second and a second assets			4 - 6		- A 1
List the records you maintain	ın tor weed	, pest, an	d disease co	ontrol. None New	e de el
List all weed	, pest and	disease	control mat	erials that you plan to use i	n Section M. Material Inventory.
				ational Organic Standards rec	quire that practices and procedures prevent n-organic products.
	iois willi pr				
ontamination of organic produ			lo <u>you plan</u> t	o harvest this season?	
	silage or ot	her crop o	(b) (4)	to harvest this season?	





4. Do you store organic crops at other locations: 4a. If "Yes", please indicate the location of your off farm storage:	
4. Do you store organic crops at other locations: 4a. If "Yes" please indicate the location of your off farm storage:	
4. Do you store organic crops at other locations: 4a. If "Yes" please indicate the location of your off farm storage:	
4a. If "Yes", please indicate the location of your off farm storage:	N/A
4a. If "Yes", please indicate the location of your off farm storage:	
(b) (4)	N/A
5. Do you use silage inoculants or other materials on feed crops after harvest?	
5a. If "Yes", please list:	No
6. How do you ensure organic crops are not contaminated during transport? Clean Afridavids — and Cleaning	
7. List the harvest, storage and transportation sales records you maintain. +ick++> / Clean afidaits	





Section H. Livestock Flow Chart Please provide information regarding the flow of animals through your system. Include source of animals, living conditions for each stage of production and final destination of animals. This may be in a narrative form or submitted as a flow chart. Refer to the example below and attach additional sheets as necessary. Heifers Calves born Raised in Cows move Calves Steers to bred at 18 on farm hutches for slaughter into milkina pastured at months 12 weeks rotation at 18 12 weeks months Section I. Livestock Type & Origin [NOS 205.236] National Organic Standards require that livestock products intended for sale as organic must be from livestock under continuous organic management from the last third of gestation; except that the National Organic Standards require that milk or milk products which will be marketed as organic must be from animals that have been under continuous organic management beginning no later than 1 year prior to the production of the milk or milk products. l**X**I No ☐ Yes 1. Do you raise organic livestock for slaughter? If "No", skip to question #2. 1a. If "Yes", have all slaughter animals been under organic management from the last third of gestation? Yes ∏No 2. Do you produce organic dairy livestock? ☐ No If "No", Skip to #8 3. Are you currently milking for organic production? ſŢ∕Yes ☐ No If "Yes", you must complete an organic processor system plan. 4. Under what label is your milk sold? Organic Valley 5. Have all organic dairy animals been under continuous organic management beginning no later than 1 year prior to Mo No

the production of the milk or milk products?





6. Are you currently converting non organic and	imals to organic dairy production? duction, and livestock ID for all animals converting	to organic:	☐ Yes XNo
Livestock Identification Numbers	Stage of Production		ganic management
			(b) (4)
7. Are culled livestock slaughtered as organic?	•		
7a. If "Yes", have the culled animals bee	n under organic management from the last third o	f gestation?	Yes No
8. Please list the name and certification agence	by of the slaughter and cut and wrap facilities that	you plan to use:	(b) (4)
9. Jo you purchase animals from outside sour		T. Control of the con	
Purchased Livestock	Supplier	Cer	tification Agency
(b) (4)			
10.(b) (4)			
11. Do records track individual animals through	n all stages of production?		Yes ☐ No
11a. If "No", describe how your records	verify that livestock are eligible for organic produc	tion:	
A second			
	•		
:			····





Section J. Organic Feed The National Organic Standards require that agricultural products, including pasture and f derive not less than an average of 30 percent must be sufficient to meet nutritional requirer & 205, 604). Please note that all agricultural 1. Do you purchase organic feed?	orage. To ensure a pa at of their dry matter in ments and may include	asture based management system, th take (DMI) from pasture during the gra e supplements and feed additives allo	eed ration composed of organic e rule requires that ruminant animals azing season. The entire feed ration wed on the National List (NOS 205 603
1a. If "Yes", list the type(s) of feed pure	chased the supplier, a	nd the certification agency.	
Feed		Supplier	Certification Agency
(b) (4)			
You must have organic certi	ficates and receipts	for all feed purchases available at y	our annual inspection.
2. Complete the table below with the days as	vailable each month fo	or livestock grazing:	
Month	Days Grazing Pasture	Month	Days Grazing Pasture
Jan	(b) (4)	July	(b) (4)
Feb		Aug	
March		Sept	
April		Oct	
May		Nov	
June		Dec	
Total Days Grazing per year :		= Length of Grazing Season	
Bease describe your method for calculating	dry matter demand a	and dry matter intake /At least 200/ o	f the day many

The discussion of the dry matter intake must come grazing during the grazing season) Please see attachments in your Application Packet







Grazing Season								
animal class/	# of	Total Dry Matter	TYPE OF FEED			AMOUNT OF FEED DMD /lbs per day		
stage of production	animals	Demand (DMD)	concentrate	pasture	other forage	concentrate	pasture	other forage
dairy cow, lactating) (4)	25	50 lbs	Corn	Pasture	Silage	10.68 lbs	44 lbs	4 lbs
Mon Grazing Sea animal class/		Total Dry		TYPE OF FEE	D	AMOUNT	OF FEED DMD	/lbs per day
stage of production	# of animals	Matter Demand (DMD)	concentrate	pasture	other forage	concentrate	pasture	other forage
·			<i>y</i>					
								•
	, please com	plete the table		upplements an	d feed additives	ascum your orga	inio icea tanons	(r rease meade
Non-Organic Ing				Supplier Na			Function (Vita Biologic, C	
					<u>.</u>			
a ' 								· <u>·</u>
-							·····	•





Section K. Housing and Pasture National Organic Standards require that a producer provide lincluding daily management on pasture during the grazing sear, clean water, sunlight and clean dry bedding. Temporary	eason and year round access	to the outdoors, shade	natural behavior of the	ne animal, eas, fresh
Are animals provided year round access to the <u>outside</u> ?		, always 🔲 Yes, e	xcept for confinement	☐ No
2. Are animals on pasture every day throughout the grazing	season? Yes	, always 💢 Yes, e	voent for	No
If "Yes always", skip to Question #3		,		
2a. If "No", briefly explain:				
2b. If "Yes, except for temporary confinement", chec questions for each reason for confinement checked.	ck which reasons for confiner	nent apply to your open	ation and complete th	ne column
Allowed Reasons for Temporary Confinement (Restrictions)	Type/Class of Livestock	Duration of confinement	Specific Reason	
(4)				
3. Is shelter available for organic animals? (b) (4)	the abolter provided (about a	If that apply (b) (4)	Yes	☐ No
3a. Please indicate which conditions are addressed by t(b) (4)	me sheker provided (check a	ii tiiat appiy). <mark>(6) (4)</mark>		()





4.			
	. Do you provide bedding for your animals?	☐ Yes	[XÎ No
	4a. If "Yes," please list the type of bedding:		
	4b. Is the bedding material edible?	Yes	⊠ No
	4c. If "Yes," is the bedding material organic?	☐ Yes	⊠ No
N pr ur m	ection L. Livestock Health Care [NOS 205.23 ational Organic Standards require livestock producers to establish & maintain preventative livestock health care practices & veterinary biologics are inadequate to prevent sickness, a producer may administer synthetic nder 205.603. Any medications administered, whether allowed or prohibited, must be recorded on an animal health nedical treatment from a sick animal is prohibited by the National Organic Standards. Review the conditions that have afflicted or could afflict your animals. Describe your preventative plan and treatment is insufficient. Use additional sheets as necessary.	c medications all record. <i>Withho</i>	lding
	Check if Preventative Plan Experienced 4)	ent (if preventati fails)	ve plan





								emoving this ar			rganic
narket:	No	ANI	mals	are	treat	ted	Pro	hibited	Mati	erals	
								Sales			
4a.	How would	l this be doc	umented?	IN	Ricon	d.s	and	File	5		

You must maintain documents that verify that all animals treated with a prohibited material were removed from the organic market, and have those documents available at your next annual inspection.





2. For Dairies	, please list your	milk production and somatic	cell counts (SCC) for the previous six mo	onths in the table below:
Date		SCC Pounds P	roduced Date	SCC Pounds Produced
) (4)				
3. List any anir	nals that have b	een treated with a prohibited s	substance within the previous 12 months	in the table below (use additional sheets
as necessary):				
Animal ID	- Date	Medication	Reason for use	Preventative Practice
Ex #14 b) (4)	5/17/2009	Tylan	Pneumonia	Adequate housing and nutrition
<i>y</i>) (1)				
:				
· .			on the state of th	
	•	ted with a prohibited material,	please describe your plan for removing	this animal from the herd and organic
I	NA			
				,
4a. How	would this be do	cumented? VA		
		,		
You must m	aintain docume	ents that verify that all anima and have those docume	als treated with a prohibited material v ents available at your next annual insp	were removed from the organic market, section.
5. List and de	scribe the record	ds you maintain for livestock h	ealth care: Darry Comp 3	305 & Note Book
			,	
			•	
:				





ORGANIC SYSTEM PLAN - RUMINANT LIVESTOCK PRODUCERS

Section J. Optional Forms are included in this packet available and on our website if needed http://nmdaweb.nmsu.edu/organics-program/Organic%20Program.html
Other useful organic recordkeeping forms are available at https://attra.ncat.org/organic.html
Previous Land Use Statement For new farms/pastures not certified organic 2011-2009. To be completed by previous owner/farmer.
Custom Service Compliance Statement For custom services provided on your farm (manure spreading, seeding, harvesting, etc). To be completed by the Custom Operator.
* Milking, slaughtering/packing etc is not a custom service but must be performed at a Certified Organic facility.
Adjoining Land Use Statement For verifying non-organic use of land adjacent to your ranch. To be completed by adjoining land user. It is your responsibility (not your neighbors) to maintain the organic integrity of your ranch. However, this form may be used to provide information from neighbors when their land use practices might affect you.
Organic Seed/Planting Stock Search Log To document searches for organic seed and planting stock. Keep on file. Do not submit to NMDA.
Complaint Log To document customer complaints. Keep on file. Do not submit to NMDA.
☐ Application for Cost Share Reimbursement ☐ Cost Share Reimbursement (Substitute W-9) USDA Program that reimburses a percentage of your certification costs
Other (please specify)
KEEP COPIES OF ALL APPLICATIONS, FORMS AND DOCUMENTS YOU SUBMIT TO NMDA





ORGANIC SYSTEM PLAN - RUMINANT LIVESTOCK PRODUCERS

Section M: Material Inventory NOS 205-201 requires that the organic system plan include a list of each substance to be used as a production or handling input. Material input must be included in the organic system plan and agreed to by the certifier prior to use application				
1 Please list all non feed material inputs used in or on your livestock. Please include fertilizers and pest control materials for crops & all vaccines, medications (herbal, natural, approved), pest controls materials for livestock.				
Material Input (list brand or generic)	NOP Generic [205:603]	OMRI		
Ex. Dr. Johns Probiotic		X		
Ex. Copper Sulfate	X			
b) (4)				





ORGANIC SYSTEM PLAN – RUMINANT LIVESTOCK PRODUCERS For organic cattle, goats and sheep.

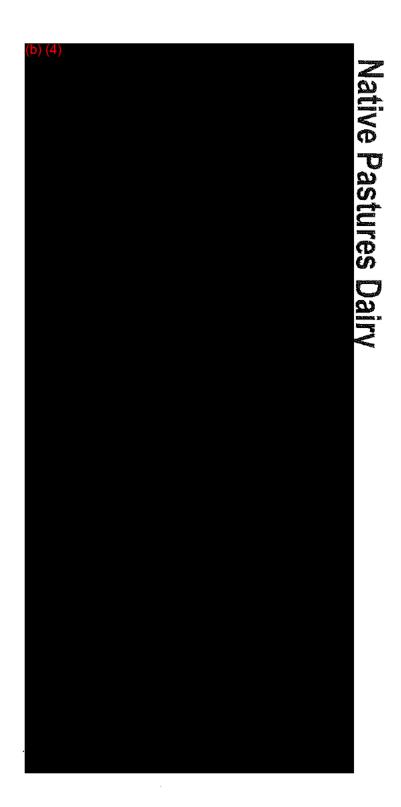
MATERIAL INVENTORY

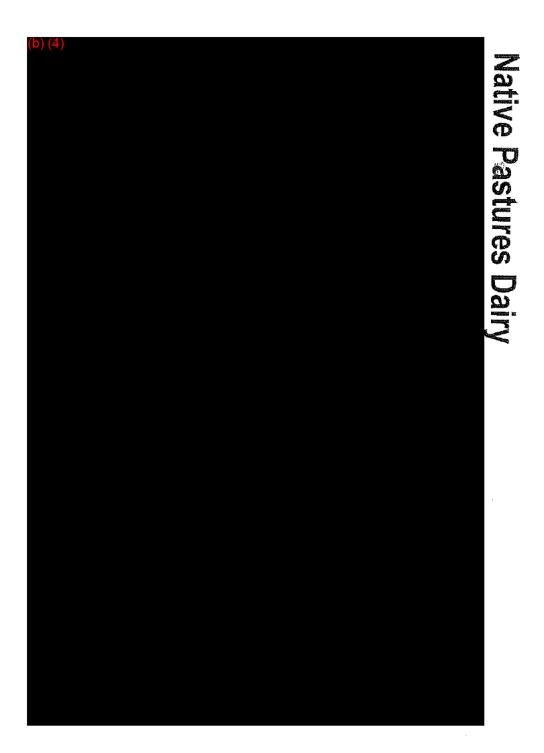
§ 205.201]
§ 205.201 requires that the organic system plan include a list of each substance to be used as a production or handling input. Materials must be approved by the certifier prior to use application. Please call if in doubt.

You must provide updates to NMDA by email, letter or fax before you add a material NOT already on this inventory.

Use of unreported materials may jeopardize your organic certification.

Material & Brand Name Please be specific Example: Ultrabac 7, Drammatic 0 Liquid Fish 2-5-0.2	Purpose (vaccination, udder ointment, fertilization, pests, disease, etc)	ls this	material Listed? nri.org/omri-lists
		Yes	No
2 2008			
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att			
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Treatment For Calves And Vaccinations



Treatment Of Cows And Vaccinations

