



Water Quality Enhancement Activity – WQL16 – Use of legume cover crops as a nitrogen source

State Criteria

Cover crops must be planted whenever the crop they are scheduled to follow in the rotation is grown and rotated across all planned acres by the end of the contract period.

Cover Crop Requirements

- Cover crops can not be harvested or grazed.
- Cover crops must follow planting dates, seeding rates, method of planting and other requirements in [340 Cover Crop Standard](#). Specifications will be provided on the [Cover Crop Worksheet \(NE-CPA-7\)](#).
- Cover crops which winter kill must be planted at least 8 weeks prior to the average date of the first killing frost.
- Cover crops which over winter must have at least 4 weeks of spring growth before termination.
- Winter annual cover crops planted following a low residue crop must have a minimum of 6-8” of growth before they are terminated.
- Cover crop must be a different crop type (i.e. warm season grass, cool season grass, warm season broadleaf, cool season broadleaf) or, if a cover crop mix is used, include a different crop type than the previous crop.
- Cover crops which follow fall harvested crops must be a winter annual small grain such as rye, wheat or triticale, or a winter annual small grain with a legume.

Acceptable cover crops for this option are: Alfalfa; Chickling vetch; Chickpea; Cowpea; Field pea/lentils; Hairy or crown vetch; White clover; Red clover; Soybean; and Sweet clover.



DOCUMENTATION REQUIREMENTS

Complete the Table below:

To be completed by NRCS and Producer during planning						To be completed by Producer during certification process	
1	2	3	4	5	6	7	8
Tract	Field(s)	Existing Rotation	Planned Rotation with Cover Crop	Cover Crop	Acres Planned	Date Planted	Acres Applied
<i>Ex. 1</i>	<i>1</i>	<i>C-B-W</i>	<i>C-B-W-cc</i>	<i>Field peas</i>	<i>100 ac</i>	<i>Aug. 15</i>	<i>100 ac.</i>

EX= EXAMPLE, COLUMNS 1-6 NRCS COMPLETES, COLUMNS 7-8 PRODUCER COMPLETES
C=Corn; B=soybeans/edible beans; W=Wheat; M=Milo; A=Alfalfa; O=Oats; cc=cover crop;
Others=_____

I certify that the following information meets specifications and has been provided to NRCS:

1. Planned rotation, legume cover crop grown, and the number of acres where the enhancement was applied (complete the above table).
2. A completed Cover Crop Worksheet ([NE-CPA-7](#)).
3. Calculations for estimating available nitrogen.
4. Realistic yield goals for field or specialty crop grown and application rates of additional nitrogen.
5. A map with delineation of the area where the enhancement was applied.

I understand that it is my responsibility to obtain all necessary permits and to comply with all laws, regulations and ordinances pertaining to the application of these activities.

Certified by: _____ **Date:** _____