



APPLICATION FOR REGISTRATION AS A REGISTERED SERVICE COMPANY

Public Service Commission
SFN 51277 (2/2014)



TYPE OR PRINT - AN INCOMPLETE OR ILLEGIBLE APPLICATION WILL BE REJECTED

Name of Company CMS Petroleum Equip. Co.	Email Address jschultz004@msn.com	Application Date 9-25-14	
Mailing Address PO Box 85	City Morris	State MN	Zip Code 56267
Telephone Number 320-589-9017	Cell Phone Number 320-760-4146	Fax Number 320-589-9010	

Select below all device types your company will certify:

Scales (include maximum capacity, if applicable)	Liquid (include maximum flow rate, if applicable)
<input type="checkbox"/> 1. Rail <input type="checkbox"/> 2. Truck <input type="checkbox"/> 3. Livestock <input type="checkbox"/> 4. Hopper: Max. Capacity: _____ <input type="checkbox"/> 5. Belt <input type="checkbox"/> 6. Over 30 lbs.: Max. Capacity: _____ <input type="checkbox"/> 7. 30 lbs. or less <input type="checkbox"/> 8. Class II (indicate on your calibration report which weight kit is Class II certified) <input type="checkbox"/> 9. Other: Please List: <i>NA</i>	<input type="checkbox"/> 1. Retail Fuel (less than 20 gal. per minute) <input checked="" type="checkbox"/> 2. High Flow Retail Fuel (20 gal. per minute or greater) <input type="checkbox"/> 3. Vehicle Tank: Max. Flow Rate: _____ <input type="checkbox"/> 4. Stationary Bulk (fuel or oil): Max. Flow Rate: _____ <input checked="" type="checkbox"/> 5. LPG <input checked="" type="checkbox"/> 6. Stationary LPG <input type="checkbox"/> 7. Fertilizer: Max. Flow Rate: _____ <input type="checkbox"/> 8. Chemical <input type="checkbox"/> 9. Anhydrous <input type="checkbox"/> 10. Loading Rack <input type="checkbox"/> 11. Other: Please List:

List below all persons employed by your company as a North Dakota Registered Service Person and the device types they are registered to certify (attach a separate sheet to list additional employees):

Permit No.	Employee	Device Types Registered to Certify (list using device type numbers from above)
e.g. 1001	e.g. John Doe	e.g. Scales - 2, 3, 6, 8; e.g. Liquid - 1, 2, 6
	<i>John Schultz</i>	<i>256</i>
	<i>Joe McNally</i>	<i>256</i>
	<i>Jeff Finkbe</i>	<i>256</i>



List below all field standards (attach current calibration reports):

SEE ATTACHED	

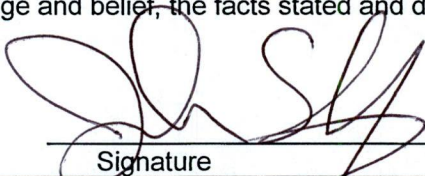
Additional Application Items (initial where appropriate):

Standardized Test Report	<input checked="" type="checkbox"/> Copy enclosed
	<input checked="" type="checkbox"/> No change in report filed previously
Tested and Approved Sticker	<input checked="" type="checkbox"/> Copy enclosed
	<input checked="" type="checkbox"/> No change in sticker filed previously
Photocopy of Crimped Lead Wire Seal	<input checked="" type="checkbox"/> Copy enclosed
	<input checked="" type="checkbox"/> No change in crimped lead wire seal filed previously

Public Company Listing:

Include my company information on your registered service company list for public contact.
 Yes No

I am SONN SCHULTZ, and have authority to represent this company.
By signing this application, I declare that I have examined this form and accompanying documentation, and to the best of my knowledge and belief, the facts stated and documentation provided is true, correct, and complete.

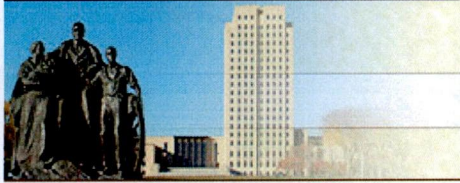


Signature

Send Completed Application and Related Documents To:

Public Service Commission
600 E Boulevard Ave Dept 408
Bismarck ND 58505-0480
Telephone: (701) 328-2400
Fax: (701) 328-2410

North Dakota

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CMS PETROLEUM EQUIPMENT CO.

Corporation Details

System ID: 12648800 **Phone:** (320) 589-9017
Type: FOREIGN BUSINESS CORPORATION
Status: Active & Good Standing
Original File Date: 04/07/1999 **Effective Date:** 04/07/1999
State of Origin: Minnesota

Nature of Business

PETROLEUM EQUIPMENT SALES & SERVICE

Principal Office

48505 210TH ST PO BOX 85 MORRIS, MN 56267-0085

Registered Agent

QUAM PETROLEUM SERVICE, INC.
4720 HWY 6 S
MANDAN, ND 58554-8513
Established Date: Jun 06, 2005

Generate an Annual Report To File

To Generate a Annual Report form to be filed with the Secretary of State, select the appropriate year of the report you intend to file. This report does not contain details of a report previously filed with the Secretary of State. The annual report years reflected are an indication of the various report forms available in this site and is not an indication that an entity needs to file reports for all years. Missing years indicate that the forms for the missing year have not yet been deployed to the website, or have already been removed, and can be obtained by contacting the Secretary of State.

[2014](#) (generates a forms-fillable pdf in a new pop-up window)

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Will open a new window (pop-up).

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Receipt Date: December 18, 2014
Test Date: December 18, 2014
Report Date: December 18, 2014

State Test No.: 333561
Serial No.: 102
Barcode: 017450

Calibration Report

CMS PETROLEUM EQUIPMENT
48150 210TH ST
MORRIS, MN 56267
Contact: Joel McNally
Phone: 320-589-9017
PO Number: NONE
SOP: 33
Technician ID: 13

Item(s) Submitted: 100 Gallon Prover
Manufacturer: Kleespie
Material: Mild Steel
Description: Dry Bottom
Condition: Dirty
Temperature: 20.3°C
Pressure: 743.3 mmHg
Relative Humidity: 31. %

Nominal Volume		Volume (gallons)	Error (in ³)	Uncertainty (in ³)	Coefficient of Expansion(/°F)
100 gal	As Found	99.993	-1.7	3.0	0.0000195
	As Left	99.993	-1.7	3.0	

Levels: Neither adjusted nor sealed. Please level to the neck.

Neck Calibration: No neck calibration was done at this time.

This prover has been calibrated as a "to contain after wet down" vessel with a drain time of 30 seconds after cessation of full flow and at a reference temperature of 60 °F.

The prover listed above has been compared by volumetric transfer methods to the standards of the State of Minnesota. The standards are traceable to the SI through NIST. Statistical process control charts indicate standards are currently in control. All gauges were sealed in place.

The reported uncertainty conforms to NIST Technical Note 1297. The confidence interval is 95 %.

Results apply to item identified in this report only.

Kari Anderson

Kari Anderson
Metrologist

Reviewed by:

Mark Nicollet

Mark Nicollet
Quality Manager



Receipt Date: December 18, 2014
 Test Date: December 18, 2014
 Report Date: December 18, 2014

State Test No.: 333562
 Serial No.: 33011
 Barcode: 018524

Calibration Report

CMS PETROLEUM EQUIPMENT
 48150 210TH ST
 MORRIS, MN 56267
 Contact: Joel McNally
 Phone: 320-589-9017
 PO Number: NONE
 SOP: 34
 Technician ID: 13

Item(s) Submitted: 100 gallon LPG Prover
 Manufacturer: Arrow Tank & Eng
 Material: Mild Steel
 Description: Wet Bottom
 Condition: Good
 Temperature: 17.1°C
 Pressure: 743.2 mmHg
 Relative Humidity: 22. %

Nominal Volume	Error As Found (in ³)	Error As Left (in ³)	Uncertainty (in ³)	Coefficient of Expansion(/°F)
100 gal	2	2	10	0.0000186

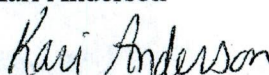
Neck Calibration: No neck calibration was done at this time.
 Levels: Neither adjusted nor sealed. Please level to the neck.

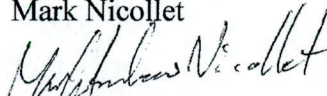
This prover has been calibrated as a "to contain after wet down" vessel at a reference temperature of 60°F and a reference pressure of 100 psig.

The prover listed above has been compared by volumetric transfer methods to the standards of the State of Minnesota. The standards are traceable to the SI through NIST. Statistical process control charts indicate standards are currently in control. All gauges were sealed in place.

The reported uncertainty conforms to NIST Technical Note 1297. The confidence interval is 95%.

Results apply to item identified in this report only.

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Pressure Correction Chart

CMS PETROLEUM EQUIPMENT
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 PO Number: NONE
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 Technician ID: 13

Item(s) Submitted: 100 gallon LPG Prover
 Manufacturer: Arrow Tank & Eng
 Material: Mild Steel
 Description: Wet Bottom
 Condition: Good
 Temperature: 17.1°C
 Pressure: 743.2 mmHg
 Relative Humidity: 22. %

Pressure Gauge Reading (PSIG)	Volume Correction (gal)
0	-0.096
10	-0.087
20	-0.077
30	-0.067
40	-0.057
50	-0.048
60	-0.037
70	-0.026
80	-0.015
90	-0.004
100	0.007
110	0.015
120	0.023
130	0.031
140	0.039
150	0.047
160	0.054
170	0.061
180	0.068
190	0.074
200	0.081

Kari Anderson

Metrologist