

**Bauske, Shelly A.**

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**From:** Curtis E. Shuck, Jr. <curtis@redriversupply.us>  
**Sent:** Monday, July 03, 2017 2:11 PM  
**To:** Bauske, Shelly A.  
**Cc:** Curtis E. Shuck, Jr.; Chris Lund  
**Subject:** Temporary Variance Permit #514 Extension  
**Attachments:** Montana Dakota Scale Service\_Weightronix.pdf

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Shelly,

Thank you for your time on the phone this morning. As discussed, Red River Oilfield Services, Inc. is applying for an extension to the Temporary Variance Permit #514 for our Weightronix Model W/T E1310, Serial Number 140615144, 120,000 lb. capacity, 11' x 75' Truck Scale until September 30, 2017.

Based on operational requirements, Red River did not operate the scale during Q2-2017 and therefore we took the scale out of service. Additionally, our capital project to relocate the scale to its permanent position had to be delayed due to economic reasons.

I have attached our Test Reports from Montana Dakota Scale Service for your records and apologize in advance for the copy quality.

Please let me know if you have any questions.

Thanks!

**Curtis Shuck,**

President

**Red River Oilfield Services, Inc.**

1202 East Broadway  
Williston, North Dakota 58801  
(701) 570-4778 mobile  
[www.redriversupply.us](http://www.redriversupply.us)



**4**    **WM-16-751**    Filed: 7/3/2017    Pages: 3  
**Request for variance permit extension**



# MDSS MONTANA DAKOTA SCALE SERVICE

## Test Report

13217 Hwy 200 - Fairview, Montana 59221 • Phone: (406) 742-5944

Date	PSC Device Code	No. of Sections	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business			<input checked="" type="checkbox"/> New Installation (w/ RFI Check)	<input type="checkbox"/> Performed Calibration
Mailing Address			<input type="checkbox"/> Modified Equipment	<input type="checkbox"/> Use as a Reference Scale
City			<input checked="" type="checkbox"/> Replaced Existing Equipment	<input checked="" type="checkbox"/> Non-Commercial
State	Zip Code		<input checked="" type="checkbox"/> Variance Permit Posted; Expiration Date: _____	
County	Telephone Number		<input checked="" type="checkbox"/> Stored/Recalled Weights Meet NDAC §§ 69-10-02-23 & 69-10-02-24	
Device Contact/Manager	Cell Number		<input checked="" type="checkbox"/> Software is NTEP Approved	
Email Address			<input checked="" type="checkbox"/> Built-In Standards; Date Certified: _____	
Device Location			<input type="checkbox"/> Multiple Decks/Single Indicator	<input type="checkbox"/> Customer Has Clear View
			<input checked="" type="checkbox"/> Clearance Below Scale Clear	<input checked="" type="checkbox"/> Video Camera Working
			<input type="checkbox"/> Approach Requirements Met	<input checked="" type="checkbox"/> View Distance > 200'
			<input type="checkbox"/> Pit Coping and Crush Strip Good	<input checked="" type="checkbox"/> Two-Way Audio Working
<input checked="" type="checkbox"/> In Response to PSC Quality Assurance Inspection				

### Scale Information

Scale Manufacturer	Indicator Manufacturer/Model	Indicator Serial No.	Weighing Elements
Capacity/Divisions/Units	Legible Label	Class	Printer Manufacturer/Model
Deck Size	Clearance (Inches)	Approach - 12' Concrete Level	Printer Serial No.
SR or Discrimination Test	Motion Detection	AZSM (Auto Zero)	
Zero Load = _____ lb. Loaded = _____ lb.	Range = _____ lb.	Range = _____ lb.	

### Test Data

LBP / Section / Product Wt.	Value of Test Weights Used	Errors +/-		LBP / Section / Product Wt.	Value of Test Weights Used	Errors +/-	
		As Found	As Left			As Found	As Left
100 #1	100.00						
2	50.00						
3	33.33						
4	25.00						
5	20.00						
6	16.67						
7	14.29						
8	12.50						
9	11.11						
10	10.00						
11	9.09						
12	8.33						
13	7.69						
14	7.14						
15	6.67						
16	6.25						
17	5.88						
18	5.56						
19	5.26						
20	5.00						

### Strain Load Test

Section (Increasing or Decreasing)	Full Truck Weight	Test Weight	Empty Truck Weight	Errors	Remarks (include environmental conditions, if applicable). Attach additional sheets as necessary.
Physical Seal <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Seal Date:	Seal Type:	Electronic Audit Trail: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Audit Trail Information:	
Meets tolerances in PSC adopted NIST Handbook 44? <input type="checkbox"/> Maintenance <input type="checkbox"/> Acceptance					
<input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Taken out of Service <input checked="" type="checkbox"/> Sticker Applied					
By signing this test report, I declare that I have examined this report and to the best of my knowledge and belief, the report is complete and the facts stated are sufficient, true and correct. I also declare that, except for conditions noted in "Remarks," the device meets the minimum requirements of the State laws and rules, including NIST Handbook 44, for use of the device in commerce.					
Permit Holder Signature			Permit No.		
Operator Signature			Date		