

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

# INSPECTION REPORT

OMB Approval No.: 2130-0509

|  |  |     |            |                       |                                |                     |                       |                             |   |                   |                |                                |      |  |
|--|--|-----|------------|-----------------------|--------------------------------|---------------------|-----------------------|-----------------------------|---|-------------------|----------------|--------------------------------|------|--|
| Inspector's Name<br>Jackson, Dave  |  |     |            | Inspector's Signature |                                |                     |                       | Inspector's ID No.<br>M3003 |   | Report No.<br>156 |                | Date<br>yy mm dd<br>2024 09 09 |      |  |
| Railroad/Company Name & Address<br>BNSF RAILWAY COMPANY<br>1135 1st Street<br><br>Havre MT 59501 |  |     |            |                       |                                | R/C<br>R            | Division<br>SYSTEM    |                             | RR/Co. Representative (Receipt Acknowledged)<br>Name Jack Murray<br>Title General Foreman<br>Email jack.murray2@bnsf.com<br>Signature _____ |                   |                |                                |      |  |
|  |  |     |            |                       |                                | RR/Co. Code<br>BNSF | Subdivision<br>SYSTEM |                             |   |                   |                |                                |      |  |
| From: City GLENDIVE  |  |     | Codes 0500 |                       | Destination City & County      |                     |                       |                             | Codes   |                   | From Latitude  |                                |      |  |
| State MT   |  |     | 30         |                       | City                           |                     |                       |                             |   |                   | From Longitude |                                |      |  |
| County DAWSON  |  |     | C021       |                       | County                         |                     |                       |                             |   |                   | To Latitude    |                                |      |  |
| Mile Post: From  |  |     | To         |                       | Inspection Point GLENDIVE YARD |                     |                       |                             |   |                   | To Longitude   |                                |      |  |
| Activity Code:   |  | 215 | 224        | 229D                  | 231                            | 232                 |                       |                             |   |                   |                |                                | CARS |  |
| Units:   |  | 50  | 51         | 1                     | 51                             | 50                  |                       |                             |   |                   |                |                                | 50   |  |
| Sub Units:   |  | 0   | 0          | 0                     | 0                              | 0                   |                       |                             |   |                   |                |                                | 0    |  |

| Item  | Initials/Milepost | Equipment/Track # | Type/Kind    | 49 CFR/USC | Defect | Subrule              | Speed | Class | Train #/Site      | SNFR* | RCL**             | # of Occ.*** | Activity Code |
|---|-------------------|-------------------|--------------|------------|--------|----------------------|-------|-------|-------------------|-------|-------------------|--------------|---------------|
| 1   | MRL               | 4312              | EMF          | 229        | 0119   | E1                   |       |       | GLENDIVE YARD     | N     | N                 | 1            | 229D          |
| Description<br>Front & rear continuous barrier not in-place.  |                   |                   |              |            |        |                      |       |       |                   |       |                   |              |               |
| Seal Applied  |                   |                   | Seal Removed |            |        | Hazard Class         |       |       | UN/NA ID          |       |                   |              |               |
| Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |                   |                   |              |            |        | Latitude:            |       |       | Longitude:        |       |                   |              |               |
| Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional |                   |                   |              |            |        | Railroad Action Code |       |       | Date(mm/dd/yyyy): |       | Comments on back? |              |               |

| Item  | Initials/Milepost | Equipment/Track # | Type/Kind    | 49 CFR/USC | Defect | Subrule              | Speed | Class | Train #/Site      | SNFR* | RCL**             | # of Occ.*** | Activity Code |
|---|-------------------|-------------------|--------------|------------|--------|----------------------|-------|-------|-------------------|-------|-------------------|--------------|---------------|
| 2   | CTCX              | 302303            | T            | 232        | 0103   | F3                   |       |       | GLENDIVE YARD     | N     | N                 | 1            | 232           |
| Description<br>R-4 Brake shoe broken.   |                   |                   |              |            |        |                      |       |       |                   |       |                   |              |               |
| Seal Applied  |                   |                   | Seal Removed |            |        | Hazard Class         |       |       | UN/NA ID          |       |                   |              |               |
| Violation Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |                   |                   |              |            |        | Latitude:            |       |       | Longitude:        |       |                   |              |               |
| Written Notification to FRA of Remedial Action is: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional |                   |                   |              |            |        | Railroad Action Code |       |       | Date(mm/dd/yyyy): |       | Comments on back? |              |               |

# INSPECTION REPORT

(Continuation)

OMB Approval No.: 2130-0509

|                             |                   |                         |
|-----------------------------|-------------------|-------------------------|
| Inspector's ID No.<br>M3003 | Report No.<br>156 | Report Date<br>9/9/2024 |
|-----------------------------|-------------------|-------------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site  | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|---------------|-------|-------|--------------|---------------|
| 3    | PROX              | 34168             | T         | 231        | 0138   | A11     |       |       | GLENDIVE YARD | N     | N     | 1            | 231           |

Description  
Top continuous barrier not in-place.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| Seal Applied | Seal Removed | Hazard Class | UN/NA ID |
|--------------|--------------|--------------|----------|

|                       |   |           |            |
|-----------------------|---|-----------|------------|
| Violation Recommended | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Latitude: | Longitude: |
|-----------------------|---|-----------|------------|

|  |  |                      |                   |                   |
|--|--|----------------------|-------------------|-------------------|
| Written Notification to FRA of Remedial Action is: | <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional | Railroad Action Code | Date(mm/dd/yyyy): | Comments on back? |
|--|--|----------------------|-------------------|-------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site  | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|---------------|-------|-------|--------------|---------------|
| 4    | OFOX              | 34789             | T         | 231        | 0138   | A11     |       |       | GLENDIVE YARD | N     | N     | 1            | 231           |

Description  
Top continuous barrier not in-place.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| Seal Applied | Seal Removed | Hazard Class | UN/NA ID |
|--------------|--------------|--------------|----------|

|                       |   |           |            |
|-----------------------|---|-----------|------------|
| Violation Recommended | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Latitude: | Longitude: |
|-----------------------|---|-----------|------------|

|  |  |                      |                   |                   |
|--|--|----------------------|-------------------|-------------------|
| Written Notification to FRA of Remedial Action is: | <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional | Railroad Action Code | Date(mm/dd/yyyy): | Comments on back? |
|--|--|----------------------|-------------------|-------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site  | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|---------------|-------|-------|--------------|---------------|
| 5    | TILX              | 307645            | T         | 231        | 0138   | A11     |       |       | GLENDIVE YARD | N     | N     | 1            | 231           |

Description  
Top continuous barrier not in-place.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| Seal Applied | Seal Removed | Hazard Class | UN/NA ID |
|--------------|--------------|--------------|----------|

|                       |   |           |            |
|-----------------------|---|-----------|------------|
| Violation Recommended | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Latitude: | Longitude: |
|-----------------------|---|-----------|------------|

|  |  |                      |                   |                   |
|--|--|----------------------|-------------------|-------------------|
| Written Notification to FRA of Remedial Action is: | <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional | Railroad Action Code | Date(mm/dd/yyyy): | Comments on back? |
|--|--|----------------------|-------------------|-------------------|

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/USC | Defect | Subrule | Speed | Class | Train #/Site  | SNFR* | RCL** | # of Occ.*** | Activity Code |
|------|-------------------|-------------------|-----------|------------|--------|---------|-------|-------|---------------|-------|-------|--------------|---------------|
| 6    | TILX              | 351968            | T         | 231        | 0138   | A11     |       |       | GLENDIVE YARD | N     | N     | 1            | 231           |

Description  
Top continuous barrier not in-place.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| Seal Applied | Seal Removed | Hazard Class | UN/NA ID |
|--------------|--------------|--------------|----------|

|                       |   |           |            |
|-----------------------|---|-----------|------------|
| Violation Recommended | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Latitude: | Longitude: |
|-----------------------|---|-----------|------------|

|  |  |                      |                   |                   |
|--|--|----------------------|-------------------|-------------------|
| Written Notification to FRA of Remedial Action is: | <input type="checkbox"/> Required <input checked="" type="checkbox"/> Optional | Railroad Action Code | Date(mm/dd/yyyy): | Comments on back? |
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| Inspector's ID No. | Report No. | Report Date |
| M3003              | 156        | 9/9/2024    |

| Item | Initials/Milepost | Equipment/Track # | Type/Kind | 49 CFR/<br>USC | Defect | Subrule | Speed | Class | Train #/Site     | SNFR* | RCL** | # of<br>Occ.*** | Activity<br>Code |
|------|-------------------|-------------------|-----------|----------------|--------|---------|-------|-------|------------------|-------|-------|-----------------|------------------|
| 7    | UTLX              | 950240            | T         | 231            | 0138   | A11     |       |       | GLENDIVE<br>YARD | N     | N     | 1               | 231              |

Description  
Top continuous barrier not in-place.

|              |              |              |          |
|--------------|--------------|--------------|----------|
| Seal Applied | Seal Removed | Hazard Class | UN/NA ID |
|              |              |              |          |

|                       |                              |  |           |            |
|-----------------------|------------------------------|--|-----------|------------|
| Violation Recommended | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | Latitude: | Longitude: |
|-----------------------|------------------------------|--|-----------|------------|

|   |                                   |  |                      |                      |                   |                      |                   |
|---|-----------------------------------|--|----------------------|----------------------|-------------------|----------------------|-------------------|
| Written Notification to<br>FRA of Remedial Action is: | <input type="checkbox"/> Required | <input checked="" type="checkbox"/> Optional | Railroad Action Code | <input type="text"/> | Date(mm/dd/yyyy): | <input type="text"/> | Comments on back? |
|---|-----------------------------------|--|----------------------|----------------------|-------------------|----------------------|-------------------|