

|                                                                                                                                                                                                                                                                                                                   |                              |                                               |                                     |                                                   |                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------|-------------------------------------|---------------------------------------------------|------------------------------------------------------|
| Flight Procedures Cover Page                                                                                                                                                                                                                                                                                      | Task Action:<br>FLIGHT CHECK | Task Type:<br>IAP                             | Estimated Chart Date:<br>06/12/2025 | APWS Task ID:<br>F1EE24C899414CFABB17F1982A33161D | APWS Project ID:<br>E344E91EE2494A249A5F00A440DF469B |
| Procedure:<br>RNAV (GPS) RWY 33 AMDT 1                                                                                                                                                                                                                                                                            |                              | Enroute:<br>NO                                | Specialist:<br>Johnson, Timothy     |                                                   | Agreement Number:                                    |
| Airport ID:<br>0XA4                                                                                                                                                                                                                                                                                               |                              |                                               | Airport City:<br>FREER              |                                                   | State:<br>TX                                         |
| Facility ID:                                                                                                                                                                                                                                                                                                      | Facility Type:               | Flight Inspection Remark Type:<br>New FC Slot |                                     |                                                   |                                                      |
| <div>Procedure Comments:<br/>ACTIVE DATA USED.</div> <div>FEEDER LEG: REMOVE THX AND REPLACE WITH SLENA.</div> <div>CRC REMAINDER CHANGED FROM 4C840069 TO 4AF58E64.</div> <div>CONTACT: DAVID DANNER (405) 954-5077.</div> <div><div>QUALITY<br/>10<br/>CHECKED</div><div>QUALITY<br/>38<br/>CHECKED</div></div> |                              |                                               |                                     |                                                   |                                                      |

| <b>FIPC BASIC FORM</b>                                                |                                                     |                                  |                                               |                                                                                                                                                      |                                                                                                                        |                                                                                                                                  |                                                                                                |                                   |  |
|-----------------------------------------------------------------------|-----------------------------------------------------|----------------------------------|-----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|-----------------------------------|--|
| <b>PROCEDURE:</b><br>RNAV (GPS) RWY 33 AMDT 1                         |                                                     |                                  | <b>AIRPORT NAME:</b><br>SEVEN C'S RANCH       |                                                                                                                                                      | <b>AIRPORT ID:</b><br>K0XA4                                                                                            |                                                                                                                                  | <b>SPECIAL CONTROL NO:</b><br>OG-02-249-25                                                     |                                   |  |
| <b>FAC ID:</b> K0XA433.01                                             |                                                     | <b>CITY:</b> FREER               |                                               |                                                                                                                                                      | <b>ST:</b> TX                                                                                                          |                                                                                                                                  | <b>ORIG CHART DATE:</b> 06/12/2025                                                             |                                   |  |
| <b>DFL TYPE:</b><br>PROC/W                                            | <b>THIRD PARTY:</b><br><input type="checkbox"/> YES | <b>EST. TIME ON SITE:</b><br>0.4 | <b>REIMB. NUMBER:</b><br>AC0721               |                                                                                                                                                      | <b>PTS TASK ID:</b><br>F1EE24C899414CFABB17F1982A33161D                                                                |                                                                                                                                  |                                                                                                |                                   |  |
| <b>PREFLIGHT NOTES</b>                                                |                                                     |                                  |                                               |                                                                                                                                                      |                                                                                                                        |                                                                                                                                  |                                                                                                |                                   |  |
| <b>REVIEWER:</b>                                                      |                                                     |                                  |                                               |                                                                                                                                                      | <b>DATE:</b>                                                                                                           |                                                                                                                                  |                                                                                                |                                   |  |
| <b>COMMENTS:</b>                                                      |                                                     |                                  |                                               |                                                                                                                                                      | <b>CHECK ONE:</b><br><input type="checkbox"/> FLT CK REQ <input type="checkbox"/> NFCR <input type="checkbox"/> REJECT |                                                                                                                                  |                                                                                                |                                   |  |
|                                                                       |                                                     |                                  |                                               |                                                                                                                                                      |                                                                                                                        |                                                                                                                                  | YES                                                                                            | NO                                |  |
|                                                                       |                                                     |                                  |                                               |                                                                                                                                                      | <b>CPV COMPLETE?</b>                                                                                                   |                                                                                                                                  | X                                                                                              |                                   |  |
| <b>PROCEDURE RESULTS</b>                                              |                                                     |                                  |                                               |                                                                                                                                                      |                                                                                                                        |                                                                                                                                  |                                                                                                |                                   |  |
| <b>INSPECTION DATE:</b><br>03/13/2025                                 |                                                     | <b>CREW #:</b><br>VN258          | <b>N #:</b><br>N90                            | <b>INSTRUMENT PROCEDURE STATUS:</b><br><input checked="" type="checkbox"/> SAT <input type="checkbox"/> SAT W/CHANGES <input type="checkbox"/> UNSAT |                                                                                                                        | <b>ARINC CODING:</b><br><input checked="" type="checkbox"/> SAT <input type="checkbox"/> SAT/GOLD <input type="checkbox"/> UNSAT |                                                                                                |                                   |  |
| <b>FLIGHT INSPECTOR SIGNATURE:</b><br>james hawley @ 03/17/2025 11:51 |                                                     |                                  | <b>PRINTED NAME:</b><br>HAWLEY, JAMES MICHAEL |                                                                                                                                                      |                                                                                                                        |                                                                                                                                  | <b>NOTAM INITIATED?</b><br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |                                   |  |
| <b>FLIGHT INSPECTOR REMARKS:</b>                                      |                                                     |                                  |                                               |                                                                                                                                                      |                                                                                                                        |                                                                                                                                  |                                                                                                |                                   |  |
| <b>IN-FLIGHT OBSTACLE REPORT</b>                                      |                                                     |                                  |                                               |                                                                                                                                                      |                                                                                                                        |                                                                                                                                  |                                                                                                |                                   |  |
| <b>OBSTRUCTION ID #:</b>                                              |                                                     | <b>COORDINATES OR LOCATION:</b>  |                                               | <b>GNSS ALTITUDE (MSL):</b>                                                                                                                          |                                                                                                                        | <b>BAROMETRIC ALTITUDE (MSL):</b>                                                                                                |                                                                                                | <b>HEIGHT ABOVE GROUND LEVEL:</b> |  |



FREER, TEXAS

|                                        |                        |                                                               |
|----------------------------------------|------------------------|---------------------------------------------------------------|
| WAAS<br>CH <b>61127</b><br><b>W33A</b> | APP CRS<br><b>328°</b> | Rwy Idg <b>5005</b><br>TDZE <b>336</b><br>Apt Elev <b>336</b> |
|----------------------------------------|------------------------|---------------------------------------------------------------|

# RNAV (GPS) RWY 33

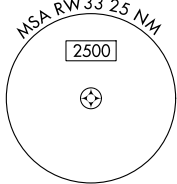
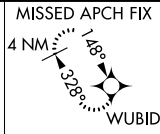
RNP APCH - GPS.

**T** Use of Seven C's Ranch requires permission of the owner; use of this procedure  
**A** NA requires specific authorization by FAA Flight Standards. Use Cotulla altimeter setting.

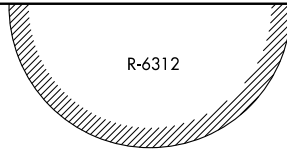
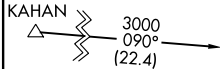
**MISSED APPROACH:** Climb to 3000 direct WUBID and hold.

COT ASOS  
**118.325**

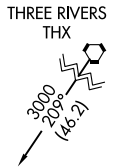
HOUSTON CENTER  
127.8 307.2



Procedure NA for arrivals  
at KAHAN on V17  
southbound.

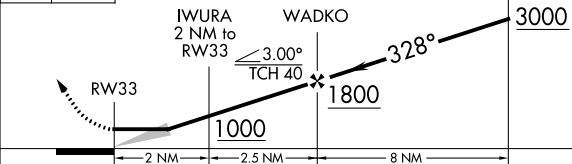
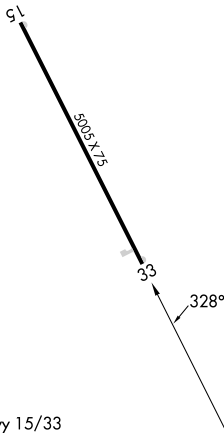


Procedure NA for arrival  
on THX VORTAC airway  
radials 126 CW 157.



ELEV 336

TDZE 336



| CATEGORY | A                    | B                    | C                                                 | D  |
|----------|----------------------|----------------------|---------------------------------------------------|----|
| LP MDA   | 760-1                | 424 (500-1)          | 760-1 $\frac{1}{4}$<br>424 (500-1 $\frac{1}{4}$ ) | NA |
| LNAV MDA | 780-1                | 444 (500-1)          | 780-1 $\frac{3}{8}$<br>444 (500-1 $\frac{3}{8}$ ) | NA |
| CIRCLING | 840-1<br>504 (600-1) | 860-1<br>524 (600-1) | 880-1 $\frac{1}{2}$<br>544 (600-1 $\frac{1}{2}$ ) | NA |

HIRL Rwy 15/33

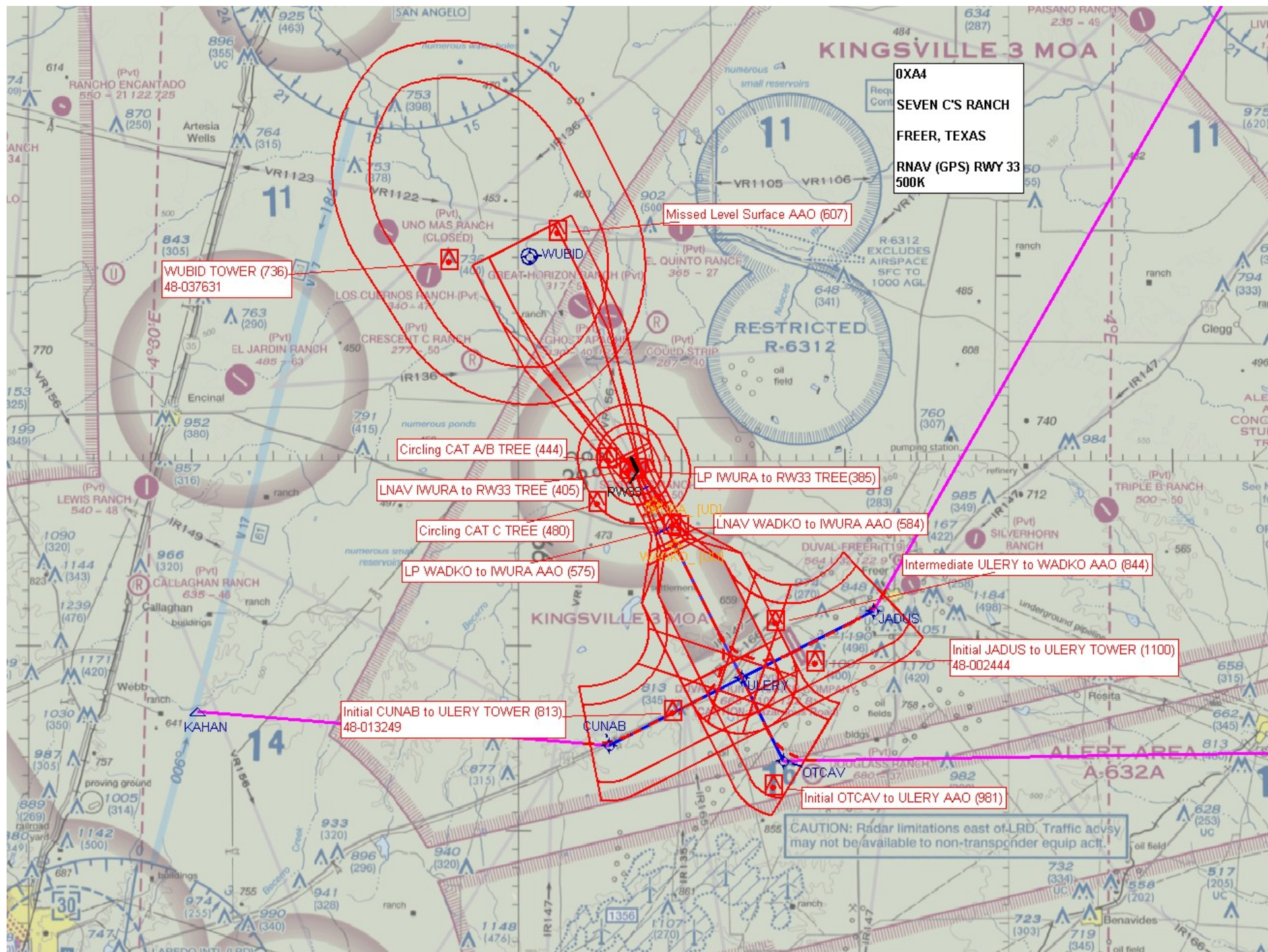
FREER, TEXAS

Orig-A 15JUN23

28°00'N-98°53'W

SEVEN C'S RANCH(0XA4)

RNAV (GPS) RWY 33



**RNAV (GPS) RWY 33  
FEEDER LEG SLENA TO JADUS  
500K**

Feeder SLENA to JADUS AAO (962)

Initial JADUS to ULERY TOWER (1100)  
48-002444

