Form Approved OMB No. 2137-0522 Expires: 10/31/2017

						DOT U	SE OI	NLY	
	U.S. Department of Transportation	ANNUAL REPORT FOR	CALENDAR YEAR	20		itial Date ubmitted			_
	Pipeline and Hazardous Materials	NATURAL AND OTHER		N AND		Submiss	ion		
	Safety Administration	GATHERING PI	PELINE SYSTEMS		Date	Type Submitte	d		
comply current information complet this but Cleara <i>Import</i> <i>specific</i>	ral agency may not conduct or s y with a collection of information t valid OMB Control Number. The ation is estimated to be approxin eting and reviewing the collection rden estimate or any other aspen nce Officer, PHMSA, Office of P tant: Please read the separate c examples. If you do not have	subject to the requirements of ne OMB Control Number for the nately 42 hours per response, n of information. All responses ct of this collection of informati ipeline Safety (PHP-30) 1200 I instructions for completing this a copy of the instructions, you	the Paperwork Reductic is information collection including the time for rev- to this collection of infoi on, including suggestion New Jersey Avenue, SE form before you begin.	on Act unle is 2137-05 viewing ins rmation are s for reduc , Washing They clarif	ss that co 22. Publi tructions, e mandato ing this b ion, D.C. the infor	bllection of i ic reporting gathering to ory. Send o ourden to: Ir 20590. mation req	nforma for this he data comme nformat	tion disp collecti a needents rega ion Colle and pro	olays a on of d, and irding ection <i>vide</i>
	//www.phmsa.dot.gov/pipeline/li A - OPERATOR INFORMATIOI		DOT USE ONLY	<u> </u>		<u> </u>	Т	T	
1. OPE	1. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER (OPID)		2. NAME OF OPERAT	ror:		I		- I	
3. RES	SERVED		4. HEADQUARTERS	ADDRESS	5:				
			Street Address State: //_Zip (Code: /	1 1 1	<u> </u>	1		
5. THIS and cor	REPORT PERTAINS TO THE nplete the report for that Commo	FOLLOWING COMMODITY G odity Group. File a separate rej	ROUP: (Select Commo port for each Commodity	dity Group Group inc	based or luded in t	n the predo this OPID.)	minant	gas can	ried
1	Natural Gas								
	Synthetic Gas								
	Hydrogen Gas								
	Propane Gas								
	Landfill Gas								
	\Box Other Gas \rightarrow Name	e of Other Gas							
6. RES	ERVED		. · · · · ·					·	
	THE DESIGNATED "COMMOD	ITY GROUP", THE PIPELINE	S AND/OR PIPELINE FA	ACILITIES	INCLUDE	ED WITHIN	THIS	opid Af	RE:
	INTERstate pipeline pipelines and/or pipeline	$e \rightarrow$ List all of the St efacilities included under					ate		
	INTRAstate pipeline facilities included under			ite pipeli	nes and	d/or pipel	ine		
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8. RESERVED

For the designated Commodity Group, PARTs B and D will be calculated based on the data entered in Parts L and P respectively. Complete Part C one time for all pipelines and/or pipeline facilities – both INTERstate and INTRAstate - included within this OPID.

PART B - TRANSMISSION	PIPELINE HCA MILES
	Number of HCA Miles
Onshore	Calc
Offshore	Calc
Total Miles	Calc

PART C - VOLUME TRANSPORTED IN TRAN PIPELINES (ONLY) IN MILLION SCF PER YEA Transmission lines of Gas Distribution syste	AR (excludes		d do not complete PART C if this report only belines or transmission lines of gas distribution
		Onshore	Offshore
Natural Gas			
Propane Gas			
Synthetic Gas			
Hydrogen Gas			
Landfill Gas			
Other Gas → Name:			

	Steel cathodically protected		Steel cathodically unprotected							
	Bare	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other	Total Miles
Transmission										
Onshore	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Offshore	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calo
Subtotal Transmission	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Gathering										
Onshore Type A	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc.	Calc
Onshore Type B	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Offshore	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Subtotal Gathering	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Total Miles	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc

¹ Use of Composite pipe requires a PHMSA Special Permit or waiver from a State

PART E - RESERVED

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For the designated Commodity Group, complete PARTs F and G one time for all INTERstate pipeline facilities included within this OPID and multiple times as needed for the designated Commodity Group for each State in which INTRAstate pipeline facilities included within this OPID exist. Part F "WITHIN AN HCA SEGMENT" data and Part G may be completed only if HCA Miles in Part L is greater than zero.

PARTs F and G

The data reported in these PARTs applies to: (select only one)

□ Interstate pipelines/pipeline facilities

□ Intrastate pipelines/pipeline facilities in the State of /_/_/ (complete for each State)

1. MILEAGE INSPECTED IN CALENDAR YEAR USING THE FOLLOWING IN-LINE INSPECTION (ILI) TOOLS	
a. Corrosion or metal loss tools	
b. Dent or deformation tools	
c. Crack or long seam defect detection tools	
d. Any other internal inspection tools, specify other tools:	
e. Total tool mileage inspected in calendar year using in-line inspection tools. (Lines a + b + c + d)	Calc
2. ACTIONS TAKEN IN CALENDAR YEAR BASED ON IN-LINE INSPECTIONS	
a. Based on ILI data, total number of anomalies excavated in calendar year because they met the operator's criteria for excavation.	
b. Total number of anomalies repaired in calendar year that were identified by ILI based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	<u> </u>
c. Total number of conditions repaired WITHIN AN HCA SEGMENT meeting the definition of:	Calc
1. "Immediate repair conditions" [192.933(d)(1)]	
2. "One-year conditions" [192.933(d)(2)]	<u>-</u> -
3. "Monitored conditions" [192.933(d)(3)]	
4. Other "Scheduled conditions" [192.933(c)]	;
3. MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON PRESSURE TESTING	
a. Total mileage inspected by pressure testing in calendar year.	
b. Total number of pressure test failures (ruptures and leaks) repaired in calendar year, both within an HCA Segment and outside of an HCA Segment.	
c. Total number of pressure test ruptures (complete failure of pipe wall) repaired in calendar year WITHIN AN HCA SEGMENT.	
d. Total number of pressure test leaks (less than complete wall failure but including escape of test medium) repaired in calendar year WITHIN AN HCA SEGMENT.	

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(PART F continued)

a. Total mileage inspected by each DA method in calendar year.	Calc
1. ECDA	
2. ICDA	
3. SCCDA	
b. Total number of anomalies identified by each DA method and repaired in calendar year based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	Calc
1. ECDA	
2. ICDA	
3. SCCDA	
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT meeting the definition of:	Calc
1. "Immediate repair conditions" [192.933(d)(1)]	
2. "One-year conditions" [192.933(d)(2)]	
3. "Monitored conditions" [192.933(d)(3)]	
4. Other "Scheduled conditions" [192.933(c)]	
MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON OTHER INSPECTION TECHNIQUES	a de la seconda de la second
a. Total mileage inspected by inspection techniques other than those listed above in calendar year. Specify other inspection technique(s):	
b. Total number of anomalies identified by other inspection techniques and repaired in calendar year based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT meeting the definition of:	Calc
1. "Immediate repair conditions" [192.933(d)(1)]	
2. "One-year conditions" [192.933(d)(2)]	
3. "Monitored conditions" [192.933(d)(3)]	
4. Other "Scheduled conditions" [192.933(c)]	
TOTAL MILEAGE INSPECTED (ALL METHODS) AND ACTIONS TAKEN IN CALENDAR YEAR	
a. Total mileage inspected in calendar year. (Lines 1.e + 3.a + 4.a.1 + 4.a.2 + 4.a.3 + 5.a)	Calc
b. Total number of anomalies repaired in calendar year both within an HCA Segment and outside of an HCA Segment. (Lines 2.b + 3.b + 4.b.1 + 4.b.2 + 4.b.3 + 5.b)	Calc
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT. (Lines 2.c.1 + 2.c.2 + 2.c.3 + 2.c.4 + 3.c + 3.d + 4.c.1 + 4.c.2 + 4.c.3 + 4.c.4 + 5.c.1 + 5.c.2 + 5.c.3 + 5.c.4)	Calc
d. Total number of actionable anomalies eliminated by pipe replacement in calendar year WITHIN AN HCA SEGMENT:	
e. Total number of actionable anomalies eliminated by pipe abandonment in calendar year WITHIN AN HCA	

 PART G- MILES OF BASELINE ASSESSMENTS AND REASSESSMENTS COMPLETED IN CALENDAR YEAR (HCA Segment miles ONLY)

 a. Baseline assessment miles completed during the calendar year.

 b. Reassessment miles completed during the calendar year.

 c. Total assessment and reassessment miles completed during the calendar year.

For the designated Commodity Group, complete PARTs H, I, J, K, L, M, P, Q, and R covering INTERstate pipeline facilities for each State in which INTERstate systems exist within this OPID and again covering INTRAstate pipeline facilities for each State in which INTRAstate systems exist within this OPID.

PARTS H, I, J, K, L, M, P, Q, and R

The data reported in these PARTs applies to: (select only one)

□ Interstate pipelines/pipeline facilities in the State of /_/_/ (complete for each State)

□ Intrastate Pipelines/pipeline facilities in the State of /_/_/ (complete for each State)

PART H - MIL	ES OF TRANS	MISSION PIPE	BY NOMINAI	L PIPE SIZE (NPS)				
	NPS 4 or less	6	8	10	12	14	16	18	20
Onshore	22	24	26	28	30	32	34	36	38
	40	42	44	46	48	52	56	58 and over	
		ipe Sizes Listed		[J
	Size: Mile Add Sizes as	es: s needed							
Calc	Total Miles o	f Onshore Pipe	e - Transmissio	n					
	NPS 4 or less	6	8	10	12	14	16	18.	20
Offshore	22	24	26	28	30	32	34	36	38
	40	42	44	46	48	52	56	58 and over	
]
	Other Pi Not L								
	Size: Mile Add Sizes as	es: needed							
Calc	Total Miles of	f Offshore Pipe	- Transmissio	n					

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	NPS 4 or less	6	8	10	12	14	16	18	20
Inshore									1
уре А	22	24	26	28	30	32	34	36	38
				ļ		ļ			<u> </u>
	40	42	44	46	48	52	56	58 and over	
	Other F Not	Pipe Sizes Listed							
	Size: Mi Add Sizes a	les: Is needed							
Caic	Total Miles	of Onshore Ty	pe A Pipe - Ga	thering			-		
	NPS 4 or less	6	8	10	12	14	16	18	20
Onshore									
Гуре В	22	24	26	28	30	32	34	36	38
								58 and	
	40	42	44	46	48	52	56	over	
	Other P Not	lipe Sizes Listed							
	Size: Mil Add Sizes a	es: s needed							
Calc	Total Miles of	of Onshore Typ	be B Pipe - Gat	hering					•
	NPS 4 or less	6	8	10	12	14	16	18	20
Offshore	22	24	26	28	30	32	34	36	38
	L	· · ·						<u> </u>	
	40	42	44	46	48	52	56	58 and over	
	Other P Not I	ipe Slzes Listed		_			L	<u> </u>	I
	Size: Mile Add Sizes as	es: s needed							

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PART J - MILES OF PIPE BY DECADE INSTALLED

Decade Pipe Installed	Unknown	Pre-1940	1940 - 1949	1950 - 1959	1960 - 1969	1970 - 1979	1980 - 1989
Transmission							
Onshore							
Offshore							
Subtotal Transmission	Calc	Calc	Calc	Calc	Calc	Calc	Calç
Gathering							
Onshore Type A							
Onshore Type B							
Offshore							
Subtotal Gathering	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Total Miles	Calc	Calc	Calc	Calc	Calc	Calc	Calc

Decade Pipe Installed	1990 - 1999	2000 - 2009	2010 - 2019	Total Miles
Transmission				
Onshore				Calc
Offshore				Calc
Subtotal Transmission	Calc	Calc	Calc	Calc
Gathering				
Onshore Type A				Calc
Onshore Type B				Calc
Offshore				Calc
Subtotal Gathering	Calc	Calc	Calc	Calc
Total Miles	Calc	Calc	Calc	Calc

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ONSHOPE		CLASS LC	DCATION		
ONSHORE	Class I	Class 2	Class 3	Class 4	Total Miles
Steel pipe Less than 20% SMYS					Calc
Steel pipe Greater than or equal to 20% SMYS but less than30% SMYS					Calc
Steel pipe Greater than or equal to 30% SMYS but less than or equal to 40% SMYS					Calc
Steel pipe Greater than 40% SMYS but less than or equal to 50% SMYS					Calc
Steel pipe Greater than 50% SMYS but less than or equal to 60% SMYS					Calc
Steel pipe Greater than 60% SMYS but less than or equal to 72% SMYS					Calc
Steel pipe Greater than 72% SMYS but less than or equal to 80% SMYS			1		Calc
Steel pipe Greater than 80% SMYS					Calc
Steel pipe Unknown percent of SMYS					Calc
All Non-Steel pipe					Calc
Onshore Totals	Calc	Calc	Calc	Calc	Calc
OFFSHORE	Class I				
Steel pipe Less than or equal to 50% SMYS					
Steel pipe Greater than 50% SMYS but less than or equal to 72% SMYS					
Steel pipe Greater than 72% SMYS					
Steel pipe Unknown percent of SMYS					
All non-steel pipe					
Offshore Total	Calc	用的过去 的问题。			
Total Miles	Calc	Calc	Calc	Calc	Calc

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		Class	Location		Total	
	Class I	Class 2	Class 3	Class 4	Class Location Miles	HCA Miles
Transmission						
Onshore	Calc from Part K	Calc				
Offshore	Calc from Part K				Calc	
Subtotal Transmission	Calc	Calc	Calc	Calc	Calc	Calc
Gathering						
Onshore Type A					Calc	
Onshore Type B					Calc	
Offshore					Calc	
Subtotal Gathering	Calc	Calc	Calc	Calc	Calc	
Total Miles	Calc	Calc	Calc	Calc	Calc	Calc

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PART M - FAILURES, LEAKS, AND REPAIRS PART M1 - ALL LEAKS ELIMINATED/REPAIRED IN CALENDAR YEAR; FAILURES IN HCA SEGMENTS IN CALENDAR YEAR **Transmission Leaks and Failures Gathering Leaks** Leaks Failures Onshore Offshore in HCA Leaks Leaks **Onshore Leaks Offshore Leaks** Segments Туре Туре HCA Non-HCA HCA Non-HCA Cause в Α External Corrosion Internal Corrosion Stress Corrosion Cracking Manufacturing Construction Equipment Incorrect Operations Third Party Damage/Mechanical Damage **Excavation Damage** Previous Damage (due to Excavation Activity) Vandalism (includes all Intentional Damage) Weather Related/Other Outside Force Natural Force Damage (all) Other Outside Force Damage (excluding Vandalism and all Intentional Damage) Other Calc Calc Calc Calc Calc Calc Calc Calc Total PART M2 - KNOWN SYSTEM LEAKS AT END OF YEAR SCHEDULED FOR REPAIR Gathering Transmission PART M3 - LEAKS ON FEDERAL LAND OR OCS REPAIRED OR SCHEDULED FOR REPAIR Gathering Transmission Onshore Type A Onshore Onshore Type B OCS OCS Subtotal Gathering Calc Calc Subtotal Transmission Calc Total

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	Steel cathodically protected		Steel cathodically unprotected							
	Bare	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other ²	Total Miles
Transmission										
Onshore										Calo
Offshore										Calo
Subtotal Transmission	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Gathering										
Onshore Type A										Calc
Onshore Type B										Calc
Offshore										Calc
Subtotal Gathering	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Total Miles	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc

 1 Use of Composite pipe requires a PHMSA Special Permit or waiver from a State 2 specify Other material(s):

	(a)(1) Total	(a)(1) Incomplete Records	(a)(2) Total	(a)(2) Incomplete Records	(a)(3) Total	(a)(3) Incomplete Records	(a)(4) Total	(a)(4) Incomplete Records	(c) Total	(c) Incomplete Records	(d) Total	(d) Incomplete Records	Other ¹ Total	Other Incomplete Records
Class 1 (in HCA)														
Class 1 (not in HCA)														
Class 2 (in HCA)														
Class 2 (not in HCA)														
Class 3 (in HCA)														
Class 3 (not in HCA)														
Class 4 (in HCA)														
Class 4 (not in HCA)														
Total	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc	Calc
Grand Total Sum of Total row for all "Incomplete Records" columns							Calc Calc							

¹ Specify Other method(s):

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	1							
		PT ≥ 1.2	5 MAOP	1.25 MAOP > P	PT ≥ 1.1 MAOP	PT < 1.1 or No PT		
Location	Miles Ir Inspectio		Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Interna Inspection NOT ABLE	
Class 1 in HCA								
Class 2 in HCA								
Class 3 in HCA								
Class 4 in HCA								
in HCA subTotal Ca		lc	Calc	Calc	Calc	Calc	Calc	
Class 1 not in HCA								
Class 2 not in HCA								
Class 3 not in HCA								
Class 4 not in HCA								
not in HCA subTotal Ca		'c	Calc	Calc	Calc	Calc	Calc	
Total	Calc		Calc	Calc	Calc	Calc	Calc	
PT ≥ 1.25 MAOP Total		Calc	Total Miles	Internal Inspectio	n ABLE	Calc		
1.25 MAOP > PT ≥ 1.1		Calc Total Miles		Internal Inspectio	n NOT ABLE	Calc		
PT < 1.1 or No PT T	otal	Calc			Grand Total	Calc		
Gra	ind Total	Calc						

Part R - Gas Transmission Miles by Pressure Test (PT) Range and Internal Inspection

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For the designated Commodity Group, complete PART N one time for all of the pipelines and/or pipeline facilities included within this OPID, and then also PART O if any gas transmission pipeline facilities included within this OPID have Part L HCA mile value greater than zero.

PART N - PREPARER SIGNATURE	
Preparer's Name(type or print)	Telephone Number
Preparer's Title	
Preparer's E-mail Address	
	·····
PART O - CERTIFYING SIGNATURE (applicable to PARTs B, F, G, and M1)	
	//_//_/_/-/_/_/_/_/_/ Telephone Number
Senior Executive Officer's name certifying the information in PARTs B, F, G, and M as required by	
49 U.S.C. 60109(f)	
Senior Executive Officer's title certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f)	
Senior Executive Officer's E-mail Address	