Form Approved <u>??3/1/2022</u> OMB No. 2137-0522 Expires: <u>??3/31/2025</u>

			DOT USE O	NLY
(2)	U.S. Department of Transportation	ANNUAL REPORT FOR CALENDAR YEAR 20	Initial Date	
			Submitted	
	Pipeline and Hazardous Materials	LIQUEFIED NATURAL GAS (LNG) FACILITIES	Report Submission	
			Type	
	Safety Administration		Date Submitted	

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0522. Public reporting for this collection of information is estimated to be approximately ??42 hours per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

Important: Please read the separate instructions for completeing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the PHMSA Pipeline Safety Community Web Page at https://www.phmsa.dot.gov/forms/pipeline-forms.

PART A - OPERATOR INFORMATION	DOT USE ONLY
1. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER (OPID)	2. NAME OF COMPANY OR ESTABLISHMENT: IF SUBSIDIARY, NAME OF PARENT:
3. INDIVIDUAL WHERE ADDITIONAL INFORMATION MAY BE OBTAINED: Name Title Email Address	4. HEADQUARTERS ADDRESS: Street Address State: / / Zip Code: / / / / - / / / / / /_/_/_/_/_/_/_/_/ Telephone Number
5. RESERVED	

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PART B - PLANT DESCRIPTION, TYPE, AND FUNCTION

Name, ID, and Status, should be EXACTLY THE SAME as NPMS fields LNG_NM, LNG_ID, and STATUS_CD. Location must match the location submitted to NPMS. The LNG Facility ID (LNG_ID in NPMS) is a unique ID for a specific facility and is assigned by the Operator.

Use the following key to complete the Descriptive table(s) below:

Status Codes

I In Service

B Abandoned

R Retired

LNG Source

T Truck

R Railroad

M Ship/Barge

L Liquefaction

Type of LNG Plant

BL Base Load

PS Peak Shaving

SA Satellite

MT Mobile/Temporary

OT Other → Describe

Function of LNG Plant

MI Marine Terminal - Import

ME Marine Terminal - Export

MB Marine Terminal – Both

SL Storage w/ Liquefaction

SN Storage w/o Liquefaction

SB Storage w/ Both

SU Stranded Utility

VF Vehicular Fuel

NR Nitrogen Rejection Unit

OT Other → Describe

	LNG Plant #1	LNG Plant #2	Add Plants as needed
Name of LNG Plant			
NPMS LNG ID			
Location of Plant			
For a fixed LNG Plant, provide the			
State (e.g., TX); for a			
Mobile/Temporary facility, provide			
the Zip Code where it is			
typically stored.			
Plant Status			
Date Put In Service			
Process			
Maximum Liquefaction Rate (MMCF/D)			
Number of Vaporizers			
Maximum Vaporization Capacity (MMCF/D)			
LNG Source			
Interstate or Intrastate			
LNG Storage			
Number of LNG Tanks			
Total Capacity (Bbls)			
Type of LNG Plant			
Function of LNG Plant			
Inspection UNIT ID			
(DOT INTERNAL USE ONLY)			

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For each LNG Plant listed above (that is, for each column completed above), complete PARTs C and D.

PARTs C and D The data reported in these PARTs C and D apply to LNG PLANT NUMBER /__/_ (from PART B)

PART C1 – LEAK PAST	S <u>DISCOVERED</u> IN YEAR	Record the number of lead by location and cause. (\(\Lambda\)	ks resulting in a release dis	scoveredetected and repaired e instructions is required.)	7	
Cause		Leaks .				
			L <u>ocation</u> eaks			
		Plant Piping and Equipment	Storage Tank	Other Location	Totals	
External Corrosion					Calc	
	Internal Corrosion				Calc	
N	Natural Force Damage				Calc	
	Excavation Damage				Calc	
Other O	Other Outside Force Damage				Calc	
In-plant Piping or Weld ONLY	Construction-, Installation-, or Fabrication-related				Calc	
(For these types of failures involving	Original Manufacturing- related				Calc	
Equipment, see the Instructions)	Low Temperature Embrittlement				Calc	
	Equipment Failure				Calc	
Incorrect Operation					Calc	
Other Causes					Calc	
Totals		Calc	Calc	Calc	Calc	

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PAST	KS REPAIRED IN YEAR USE	Record the number of leaks resulting in a release repaired by location and cause. (NOTE: Careful review of the instructions is required.)			
		Plant Piping and Equipment	Location Storage Tank	Other Location	<u>Totals</u>
	External Corrosion				<u>Calc</u>
	Internal Corrosion				<u>Calc</u>
N:	atural Force Damage				<u>Calc</u>
	Excavation Damage				<u>Calc</u>
Other Ou	utside Force Damage				<u>Calc</u>
In-plant Piping or Weld ONLY	Construction-, Installation-, or Fabrication-related			,	<u>Calc</u>
(For these types of failures involving	Original Manufacturing- related				<u>Calc</u>
Equipment, see the Instructions)	Low Temperature Embrittlement				<u>Calc</u>
	Equipment Failure				<u>Calc</u>
	Incorrect Operation				<u>Calc</u>
	Other Causes				<u>Calc</u>
	Totals	<u>Calc</u>	<u>Calc</u>	<u>Calc</u>	<u>Calc</u>

Notice: This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty as provided in 49 USC 60122 $\,$

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	December of Francis			
PART D - OTHER EVENTS	Record the number of Events. (NOTE: Careful review of the instructions is required.)			
TYPE	Number of Events			
Rollover				
Security Breach				
ESD Actuations not reported as Incidents				
- Activated by false signal				
- Activated by maintenance or other non- emergency event				
Insulation Degradation				
Other Types				
Totals	Calc			
PART E - ESTIMATED EMISSIONS DURING CALENDAR YEAR (MMCF)				
Emissions Source	<u>Emissions</u>			
Leaks from Plant Piping and Equipment				
Leaks from Storage Tanks				
Other Leaks				
Blowdowns, Venting and Purging				
PART E-F- PREPARER SIGNATURE				
Preparer's Name Preparer's Title Preparer's E-mail Address	_ _ _ _ _ _ _ _ _ _			