NOTICE: This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty OMB No. 2137-0629 as provided in 49 USC 60122.

Initial Date
Submitted:

Report
Submission
Type

O3/01/2022

INITIAL

OMB NO: 2137-0629

EXPIRATION DATE: 5/31/2024

(2)

U.S. Department of Transportation Pipeline and Hazardous Materials Safety Administration ANNUAL REPORT FOR CALENDAR YEAR 2021 GAS DISTRIBUTION SYSTEM

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 2137-0629. Public reporting for this collection of information is estimated to be approximately 16 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.

Date Submitted:

Important: Please read the separate instructions for completing 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 http://www.phmsa.dot.gov/pipeline/library/forms.

PART A - OPERATOR INFORMATION	(DOT use	only)		20220551-45526			
1. Name of Operator	LEVA	NOT NA	N				
2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY	BE OBTAINED)						
2a. Street Address	20 no	20 north main po box 40					
2b. City and County	levar	ı					
2c. State	UT						
2d. Zip Code	8463	9					
3. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER	3050	8					
4. HEADQUARTERS NAME & ADDRESS							
4a. Street Address	20 N	ORTH M	IAIN				
4b. City and County	LEVA	AN					
4c. State	UT						
4d. Zip Code	8463	9					
5. STATE IN WHICH SYSTEM OPERATES	UT						
6. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GR complete the report for that Commodity Group. File a separate report for				minant gas carried and			
Natural Gas							
7. THIS REPORT PERTAINS TO THE FOLLOWING TYPE OF OPERA included in this OPID for which this report is being submitted.):	TOR (Select Type	e of Ope	rator based on the structur	e of the company			
Municipal Owned							

PART B - SYSTEM DESCRIPTION

1.GENERAL

		ST	EEL								
	UNPROTECTED		CATHODICALLY PROTECTED		PLASTIC	CAST/ WROUGHT	DUCTILE IRON	COPPE R	OTHER	RECONDITION ED	SYSTEM TOTAL
	BARE	COATED	BARE	COATED		IRON				CAST IRON	
MILES OF MAIN	0	0	0	0	20.96	0	0	0	0	0	20.96
NO. OF SERVICES	0	0	0	0	348	0	0	0	0	0	348

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0 0 0	IAL UNKNOWN	2" OR LESS	OVER 2"	OVER 4"	OVER 8"		
0 0 0			THRU 4"	THRU 8"	THRU 12"	OVER 12"	SYSTEM TOTALS
0	EL 0	0	0	0	0	0	0
0	IRON 0	0	0	0	0	0	0
	ER 0	0	0	0	0	0	0
	OUGH 0	0	0	0	0	0	0
0	PVC 0	0	0	0	0	0	0
0	C PE 0	20.75	0.21	0	0	0	20.96
0	ABS 0	0	0	0	0	0	0
0	TIC 0	0	0	0	0	0	0
0	:R 0	0	0	0	0	0	0
0	TIONE IRON	0	0	0	0	0	0
0	L 0	20.75	0.21	0	0	0	20.96
rial:	Other Material:						
ES IN SYSTE	R OF SERVICES IN SYSTI	M AT END OF YEAR		A	VERAGE SERVICE L	ENGTH: 97.4	
NKNOWN	IAL UNKNOWN	1" OR LESS	OVER 1" THRU 2"	OVER 2" THRU 4"	OVER 4" THRU 8"	OVER 8"	SYSTEM TOTALS
0	EL 0	0	0	0	0	0	0
0	IRON 0	0	0	0	0	0	0
0	ER 0	0	0	0	0	0	0
0	OUGH 0	0	0	0	0	0	0
0	PVC 0	0	0	0	0	0	0
0	C PE 0	348	0	0	0	0	348
0	ABS 0	0	0	0	0	0	0
	TIC 0	0	0	0	0	0	0
0	ER 0	0	0	0	0	0	0
	TIONE IRON	0	0	0	0	0	0
0	L 0	348	0	0	0	0	348
0		 	1	1	<u> </u>		·
	ER 0 TIONE IRON 0		0	0 0	0 0 0	0 0 0 0	0 0 0 0 0

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	UNKNOWN	PRE- 1940	1940- 1949	1950- 1959	1960- 1969	1970- 1979	1980- 1989	1990- 1999	2000- 2009	2010- 2019	2020- 2029	TOTAL
MILES OF MAIN	0	0	0	0	0	0	0	19	0.80	0.84	.32	20.96
NUMBER OF SERVICES	0	0	0	0	0	0	0	282	29	27	10	348

PART C - TOTAL LEAKS AND HAZARDOUS LEAKS ELIMINATED/REPAIRED DURING THE YEAR

CAUSE OF LEAK		MAINS	SERVICES		
CAUGE OF LEAK	TOTAL	HAZARDOUS	TOTAL	HAZARDOUS	
CORROSION FAILURE					
NATURAL FORCE DAMAGE					
EXCAVATION DAMAGE					
OTHER OUTSIDE FORCE DAMAGE					
PIPE, WELD OR JOINT FAILURE					
EQUIPMENT FAILURE					
INCORRECT OPERATIONS					
OTHER CAUSE					

NUMBER OF KNOWN SYSTEM LEAKS AT END OF YEAR SCHEDULED FOR REPAIR : 0 NUMBER OF HAZARDOUS LEAKS INVOLVING A MECHANICAL JOINT FAILURE : 0

PART D - EXCAVATION DAMAGE	PART E - EXCESS FLOW VALUE (EFV) AND SERVICE VALVE DATA
TOTAL NUMBER OF EXCAVATION DAMAGES BY APPARENT ROOT CAUSE: _0	Total Number Of Services with EFV Installed During Year: 10
a. One-Call Notification Practices Not Sufficient: 0	Estimated Number Of Services with EFV In the System At End Of Year: 41
b. Locating Practices Not Sufficient: 0 c. Excavation Practices Not Sufficient: 0	* Total Number of Manual Service Line Shut-off Valves Installed During Year: 10
d. Other: 0	* Estimated Number of Services with Manual Service Line Shut-off Valves Installed in the System at End of Year: 348
	*These questions were added to the report in 2017.
2. NUMBER OF EXCAVATION TICKETS : 124	
PART F - LEAKS ON FEDERAL LAND	PART G-PERCENT OF UNACCOUNTED FOR GAS
TOTAL NUMBER OF LEAKS ON FEDERAL LAND REPAIRED OR SCHEDULED TO REPAIR: 0	UNACCOUNTED FOR GAS AS A PERCENT OF TOTAL CONSUMPTION FOR THE 12 MONTHS ENDING JUNE 30 OF THE REPORTING YEAR. [(PURCHASED GAS + PRODUCED GAS) MINUS (CUSTOMER USE + COMPANY USE + APPROPRIATE ADJUSTMENTS)] DIVIDED BY (CUSTOMER USE + COMPANY USE + APPROPRIATE ADJUSTMENTS) TIMES 100 EQUALS PERCENT UNACCOUNTED FOR. FOR YEAR ENDING 6/30:0%
PART H - ADDITIONAL INFORMATION	

NOTICE: This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty OMB No. 2137-0629 as provided in 49 USC 60122. EXPIRATION DATE: 5/31/2024 PART I - PREPARER travis rosquist,operator (Preparer's Name and Title) (435) 623-1959 (Area Code and Telephone Number) trosquist.levantown@gmail.com (Preparer's email address) (435) 623-2730 (Area Code and Facsimile Number)

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