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

02/06/2024

INITIAL

**Date Submitted:** 

OMB NO: 2137-0629 EXPIRATION DATE: 6/30/2026

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U.S. Department of Transportation Pipeline and Hazardous Materials Safety Administration

## ANNUAL REPORT FOR CALENDAR YEAR 2023 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 20 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 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 <a href="http://www.phmsa.dot.gov/pipeline/library/forms">http://www.phmsa.dot.gov/pipeline/library/forms</a>.

PART A - OPERATOR INFORMATION	(DO	T use only)		20240170-55911		
1. Name of Operator	NEPHI CITY					
2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY	BE OBTA	INED)				
2a. Street Address		21 E 100 N				
2b. City and County		NEPHI JUAE	3			
2c. State		UT				
2d. Zip Code		84648				
3. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER	30510					
4. HEADQUARTERS NAME & ADDRESS						
4a. Street Address		21 EAST 100 NORTH				
4b. City and County		NEPHI				
4c. State		UT				
4d. Zip Code		84648				
5. STATE IN WHICH SYSTEM OPERATES		UT				
6. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GRO complete the report for that Commodity Group. File a separate report for				ninant gas carried and		
Natural Gas						
7. THIS REPORT PERTAINS TO THE FOLLOWING TYPE OF OPERAT included in this OPID for which this report is being submitted.):	Γ <b>OR</b> (Sele	ct Type of Ope	rator based on the structure	e of the company		
Municipal Owned						

PART B - SYSTEM	DESCRIPTION
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1	G	F	N	FI	R	Δ	ı

	STEEL										
	UNPRO	UNPROTECTED CATHODICALLY PROTECTED		PLASTIC	CAST/ WROUGHT IRON	DUCTILE IRON	COPPER	OTHER	RECONDITION ED CAST IRON	SYSTEM TOTAL	
	BARE	COATED	BARE	COATED							
MILES OF MAIN				40	94.9	0	0	0	0	0	134.9
NO. OF SERVICES					2736	0	0	0	0	0	2736

10.6

OVER 1"

**THRU 2"** 

10.6

OVER 2"

THRU 4"

OVER 4"

THRU 8"

OVER 8"

OVER 4"

**THRU 8"** 

**AVERAGE SERVICE LENGTH: 84** 

OVER 2"

THRU 4"

2" OR LESS

84.3

1" OR LESS

84.3

2. MILES OF MAINS IN SYSTEM AT END OF YEAR

UNKNOWN

3.NUMBER OF SERVICES IN SYSTEM AT END OF YEAR

UNKNOWN

**Describe Other Material:** 

**MATERIAL** 

STEEL

**DUCTILE IRON** 

**COPPER** 

CAST/WROUGHT

IRON **PLASTIC PVC** 

PLASTIC PE

PLASTIC ABS

PLASTIC OTHER

**OTHER** 

RECONDITIONED

**CAST IRON TOTAL** 

MATERIAL

**DUCTILE IRON** 

CAST/WROUGHT

**PLASTIC PE** 

**PLASTIC ABS** 

OTHER

TOTAL

**CAST IRON** 

PLASTIC OTHER

RECONDITIONED

**Describe Other Material:** 

STEEL

**COPPER** 

IRON PLASTIC PVC

4.MILES OF MAIN	AND NUMBER OF	SEDVICES BY	SECADE OF	INCTALLATION
4.MILES OF MAIN	AND NUMBER OF	SERVICES BY L	JECADE OF	INSTALLATION

	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	106	10.2	4.5	14.2	134.9
NUMBER OF SERVICES	0	0	0	0	0	0	0	1554	505	385	291	2735

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

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OMB NO: 2137-0629 EXPIRATION DATE: 6/30/2026

CAUSE OF LEAK	M	AINS	SERVICES		
CAUSE OF LEAR	TOTAL	HAZARDOUS	TOTAL	HAZARDOUS	
CORROSION FAILURE					
NATURAL FORCE DAMAGE					
EXCAVATION DAMAGE			9		
OTHER OUTSIDE FORCE DAMAGE					
PIPE, WELD OR JOINT FAILURE					
EQUIPMENT FAILURE			1		
INCORRECT OPERATIONS					
OTHER CAUSE			16		

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 – RESERVED
TOTAL NUMBER OF EXCAVATION DAMAGES BY APPARENT ROOT CAUSE: 9      One Call Natification Practices Not Sufficient: 3	
a. One-Call Notification Practices Not Sufficient: 3	
b. Locating Practices Not Sufficient: 1	
c. Excavation Practices Not Sufficient: 4	
d. Other: 1	
2. NUMBER OF EXCAVATION TICKETS <u>2648</u>	
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: 2.7%

OMB NO: 2137-0629 EXPIRATION DATE: 6/30/2026

PART H - ADDITIONAL INFORMATION							
PART I - PREPARER							
Drew Mcpherson operator	<u>(435) 623-4914</u>						
(Preparer's Name and Title)	(Area Code and Telephone Number)						
dmcpherson@nephi.utah.gov	<u>(435) 623-4916</u>						
(Preparer's email address)	(Area Code and Facsimile Number)						