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.

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

		Initial Date Submitted:	03/03/2026
U.S. Department of Transportation Pipeline and Hazardous Materials Safety Administration	**ANNUAL REPORT FOR CALENDAR YEAR 2025 GAS DISTRIBUTION SYSTEM**	**Report Submission Type**	SUPPLEMENTAL
		Date Submitted:	04/28/2026

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 http://www.phmsa.dot.gov/pipeline/library/forms.*

PART A - OPERATOR INFORMATION	**(DOT use only)**		20260587-85840

1. Name of Operator	BLANDING, CITY OF
2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY BE OBTAINED)	
2a. Street Address	50 WEST 100 SOUTH
2b. City and County	BLANDING SAN JUAN
2c. State	UT
2d. Zip Code	84511
3. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER	30047
4. HEADQUARTERS NAME & ADDRESS	
4a. Street Address	50 WEST 100 SOUTH
4b. City and County	BLANDING
4c. State	UT
4d. Zip Code	84511
5. STATE IN WHICH SYSTEM OPERATES	UT
6. **THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GROUP** *(Select Commodity Group based on the predominant gas carried and complete the report for that Commodity Group. File a separate report for each Commodity Group included in this OPID.)*	
Natural Gas	
7. **THIS REPORT PERTAINS TO THE FOLLOWING TYPE OF OPERATOR** *(Select Type of Operator based on the structure of the company included in this OPID for which this report is being submitted.)*:	
Municipal Owned	

PART B - SYSTEM DESCRIPTION

1.GENERAL

	STEEL				PLASTIC	CAST/ WROUGHT IRON	DUCTILE IRON	COPPER	OTHER	RECONDITIONED CAST IRON	SYSTEM TOTAL
	UNPROTECTED		CATHODICALLY PROTECTED								
	BARE	COATED	BARE	COATED							
MILES OF MAIN	0	0		34.6	39.2	0	0	0	0	0	73.8
NO. OF SERVICES	0	0			1199	0	0	0	0	0	1199

2. MILES OF MAINS IN SYSTEM AT END OF YEAR

MATERIAL	UNKNOWN	2" OR LESS	OVER 2" THRU 4"	OVER 4" THRU 8"	OVER 8" THRU 12"	OVER 12"	SYSTEM TOTALS
STEEL	0	0.1	0	34.5	0	0	34.6
DUCTILE IRON	0	0	0	0	0	0	0
COPPER	0	0	0	0	0	0	0
CAST/WROUGHT IRON	0	0	0	0	0	0	0
PLASTIC PVC	0	0	0	0	0	0	0
PLASTIC PE	0	36.3	2.9	0	0	0	39.2
PLASTIC ABS	0	0	0	0	0	0	0
PLASTIC OTHER	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
RECONDITIONED CAST IRON	0	0	0	0	0	0	0
TOTAL	0	36.4	2.9	34.5	0	0	73.8
Describe Other Material:							

3.NUMBER OF SERVICES IN SYSTEM AT END OF YEAR — **AVERAGE SERVICE LENGTH: 90**

MATERIAL	UNKNOWN	1'' OR LESS	OVER 1'' THRU 2''	OVER 2'' THRU 4''	OVER 4'' THRU 8''	OVER 8''	SYSTEM TOTALS
STEEL	0	0	0	0	0	0	0
DUCTILE IRON	0	0	0	0	0	0	0
COPPER	0	0	0	0	0	0	0
CAST/WROUGHT IRON	0	0	0	0	0	0	0
PLASTIC PVC	0	0	0	0	0	0	0
PLASTIC PE	0	1178	21	0	0	0	1199
PLASTIC ABS	0	0	0	0	0	0	0
PLASTIC OTHER	0	0	0	0	0	0	0
OTHER	0	0	0	0	0	0	0
RECONDITIONED CAST IRON	0	0	0	0	0	0	0
TOTAL	0	1178	21	0	0	0	1199
Describe Other Material:							

4.MILES OF MAIN AND NUMBER OF SERVICES BY DECADE 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	59.6	6	5.8	2.4	73.8
NUMBER OF SERVICES	0	0	0	0	0	0	0	864	135	115	85	1199

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

CAUSE OF LEAK	MAINS		SERVICES	
	TOTAL	HAZARDOUS	TOTAL	HAZARDOUS
CORROSION FAILURE			1	
NATURAL FORCE DAMAGE			1	
EXCAVATION DAMAGE	1		2	
OTHER OUTSIDE FORCE DAMAGE			1	
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

Notification Issue Sub-Total		**Location Issue Sub-Total**	
No notification made to the One-Call Center/811		Facility not marked due to Abandoned facility	
Excavator dug outside area described on ticket		Facility not marked due to Incorrect facility records/maps	
Excavator dug prior to valid start date/time		Facility not marked due to Locator error	
Excavator dug after valid ticket expired		Facility not marked due to No response from operator/contract locator	
Excavator provided incorrect notification information		Facility not marked due to Incomplete marks at damage location	
		Facility not marked due to Tracer wire issue	
Excavation Issue Sub-Total	*3*	Facility not marked due to Unlocatable Facility	
Excavator dug prior to verifying marks by test-hole (pothole)		Facility marked inaccurately due to Abandoned facility	
Excavator failed to maintain clearance after verifying marks		Facility marked inaccurately due to Incorrect facility records/maps	
Excavator failed to protect/shore/support facilities	3	Facility marked inaccurately due to Locator error	
Improper backfilling practices		Facility marked inaccurately due to Tracer wire issue	
Marks faded or not maintained			
Improper excavation practice not listed above			
Miscellaneous Root Causes Sub-Total	*3*		
Deteriorated facility	1		
One Call Center Error			
Previous damage	1	1. Total Excavation Damages	6
Root Cause not listed	1	2. Number of Excavation Tickets	377

PART E – RESERVED

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: -.11%

PART H - ADDITIONAL INFORMATION

PART I - PREPARER

Patrick Parsons (Preparer's Name and Title)	(000) 000-0000 (Area Code and Telephone Number)
pparsons@blanding-ut.gov (Preparer's email address)	(000) 000-0000 (Area Code and Facsimile Number)