ANNUAL REPORT OF NATURAL AND SUPPLEMENTAL GAS SUPPLY AND DISPOSITION FORM EIA-176

REPORT YEAR | 2 | 0 | | |

| **Check box to indicate revised report** | |

This report is **mandatory** under the Federal Energy Administration Act of 1974 (Public Law 93-275). For the sanctions and the provisions concerning the confidentiality, see instructions.   **Title 18 USC 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction**.

SECTION I.   RESPONDENT IDENTIFICATION

Enter the name and mailing address of the company filing the EIA-176

EIA ID NUMBER: | 1 | 7 | 6 | | | | | | |

Company Name: _____
Operations in (State): _____
Address 1: _____
Address 2: _____
City: _____

State: | | | Zip Code: | | | | | | - | | | | |

Attention: _____
Contact Name: _____
(Person who can answer questions about the reported data)

Phone No.: | | | | - | | | | - | | | | | Ext: | | | | |
Fax No.: | | | | - | | | | - | | | | |

Email address: _____

Check the box, if you are reporting a change
in address or contact information | |

Complete form and return by March 1, 2004:

Energy Information Administration
U.S. Department of Energy
P.O. Box 8279
Silver Spring, MD   20907
ATTN: Form EIA-176
                 OR
Fax to: (202) 586-1076

Email to: OOG.SURVEYS@eia.doe.gov

Questions? Call (202) 586-6106

List the affiliates or subsidiaries for which data are included in this State:

_____
_____
_____

Section II.   TYPE OF OPERATIONS (Check all that apply)

a.		Distribution company - investor owned	h.		Storage operator
b.		Distribution company - municipally owned	i.		Synthetic natural gas (SNG) plant operator
c.		Distribution company - privately owned	j.		Producer
d.		Distribution company - cooperative	k.		Gatherer
e.		Distribution company - other ownership	l.		Liquefied natural gas (LNG) operations
f.		Interstate pipeline	m.		Other (specify)
g.		Intrastate pipeline			

Section III.   Comments: *To enter a new line of comments, hold down the alt key and hit the enter key.*

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REPORT YEAR `2 0 | |`

EIA ID NUMBER: `1 7 6 0 0 0 0 0 0 0`   Company Name: _____   Revised Report Indicator `0`

SECTION IV. NATURAL AND SUPPLEMENTAL GAS SUPPLY FOR THE REPORT STATE

ITEM DESCRIPTION	VOLUME (Mcf @14.73 psia and 60° F)	NOTES*	
		E	F
1.0 If you are a producer report production within the report State of			
1.1 Natural gas**…………………………………………………………….....			
1.2 Synthetic natural gas (SNG)………………………………………………			
2.0 If you are a storage operator, report operations within the report State			
2.1 Underground storage withdrawals………………………………………………			
2.2 Liquefied natural gas (LNG) storage withdrawals………...…………….……..……………			
2.3 Above ground storage withdrawals …………………………………………………..			
3.0 If you are an interstate pipeline company or other company receiving physical custody at State lines or U.S. borders, report receipts			
From Company ▼			
in neighboring State or Country ▼			
From Company ▼			
in neighboring State or Country ▼			
From Company ▼			
in neighboring State or Country ▼			
From Company ▼			
in neighboring State or Country ▼			
4.0 If you are a distributor, report receipts at city gates within the report State………………………..			
5.0 Report any other receipts of natural gas within the report State……………………………………			
6.0 Supplemental gaseous fuels supplies (Specify type) ▼			
▼			
7.0 Total supply within report State (**sum of all items in 1 through 6**)……………………………..	0		

SECTION V. LIQUEFIED NATURAL GAS (LNG) STORAGE INVENTORY

8.0 Inventory of LNG (gaseous equivalent) in storage as of December 31 of report year			

*Check **E** if data reported are an estimate; check **F** if you are providing a footnote for this data item on Page 4.

**If reporting Natural Gas production (1.1) data should also be reported on lease use (15.0).

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SECTION VI. NATURAL AND SUPPLEMENTAL GAS DISPOSITION FOR THE REPORT STATE

Item Description	Volume (Mcf at 14.73 psia and 60°F)	Revenue (whole dollars)	Notes* E	F
9.0 Heat content of gas delivered to consumers ☐☐☐ (Btu/cf)				
10.0 Deliveries of natural gas that **you own** to end-use consumers within the report State				
Number of Customers				
10.1 Residential………………………………………				
10.2 Commercial………………………………………				
10.3 Industrial…………………………………………				
10.4 Electric power…………………………………				
10.5 Vehicle fuel……………………………………..				
10.6 Other (not included in above categories)………………				
Specify type _____				
11.0 Deliveries of natural gas that **you do not own** to end-use consumers within the report State				
Number of Customers				
11.1 Residential………………………………………				
11.2 Commerical………………………………………				
11.3 Industrial…………………………………………				
11.4 Electric power…………………………………				
11.5 Vehicle fuel……………………………………..				
11.6 Other (not included in above categories…………………				
Specify type _____				
12.0 Natural gas consumed in your operations				
12.1 Pipeline compressor use….……………………………………				
12.2 New pipeline fill….……………………………………				
12.3 Pipeline distribution use….……………………………………				
12.4 Other (Specify type) ▼				
13.0 If you are a storage operator, report operations within the State				
13.1 Underground storage injections (including new fields)………………				
13.2 Liquefied natural gas (LNG) storage additions…………………………				
13.3 Above ground storage additions…………………………………				
14.0 If you are an interstate pipeline company or other company moving gas across or to state lines or U.S. borders, report volumes transported.				
To Company ▼				
in neighboring State or Country ▼ ☐☐☐☐☐				
To Company ▼				
in neighboring State or Country ▼ ☐☐☐☐☐				
To Company ▼				
in neighboring State or Country ▼ ☐☐☐☐☐				
15.0 Lease use (Reported by producers only)………………………………				
16.0 Returned to oil and/or gas reservoirs, used for repressuring, reinjection (Reported by producers only)……………………………………				
17.0 Losses from leaks, migration, damage, and/or accidents within report State…………………………………………………………				
18.0 Other disposition within report State (not included above)				
18.1 Distribution companies…………………………………………				
18.2 To other pipelines in the report State…………………………				
18.3 To storage operators in the report State………………………				
18.4 To other (Specify type) ▼				
▼				
19.0 Total disposition (**sum of all items 10.1 through 18.4**)……………	0			
20.0 Difference between gas supply (+) and disposition (-) **Section IV line 7.0 and Section VI line 19.0**)………………………………………	0			

*Check E if data reported are an estimate; check F if you are providing a footnote for this data item on Page 4.

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REPORT YEAR 2 0 ☐ ☐

EIA ID NUMBER: 1 7 6 0 0 0 0 0 0 0   Company Name: _____   Revised Report Indicator 0

SECTION VII. FOOTNOTES

Section No.	Item No.	Footnote