



**NATURAL GAS PROCESSING PLANT SURVEY  
FORM EIA-757  
Schedule A: Baseline Report**

This report is mandatory under the Federal Energy Administration Act of 1974 (Public Law 93-275). Failure to comply may result in criminal fines, civil penalties and other sanctions as provided by law. For further information concerning sanctions and data protections see the provision on sanctions and the provision concerning the confidentiality of information in the 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.

**PART 1. PLANT IDENTIFICATION DATA** | **PART 2. SUBMISSION INFORMATION**

**DATE:**              -   -

**EIA ID NUMBER:**

If this is a resubmission, enter an "X" in the box:

If any Plant Identification Data has changed since the last report, enter an "X" in the box:

Plant Name: \_\_\_\_\_

Plant Address 1: \_\_\_\_\_

Plant Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

County: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Plant Owner Companies (Top Three):

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

Operator Company: \_\_\_\_\_

Form may be submitted using one of the following methods:

**Email:** [OOGEIA-757@eia.gov](mailto:OOGEIA-757@eia.gov)

**Fax:** (202) 586-2849

**Secure File Transfer:**  
<https://signon.eia.doe.gov/upload/notice757.jsp>

**Questions? Call: (877) 800-5261**

**PART 3. CONTACTS**

*Section A: Contact information during an emergency (such as a hurricane):*

<p><i>Processing Plant Operations Contact:</i></p> <p>Contact Name: _____</p> <p>Title: _____</p> <p>Company: _____</p> <p>Primary Phone No.: _____ Ext: _____</p> <p>Secondary Phone No.: _____ Ext: _____</p> <p>Fax Number.: _____</p> <p>Email address: _____</p>	<p><i>Secondary Contact:</i></p> <p>Contact Name: _____</p> <p>Title: _____</p> <p>Company: _____</p> <p>Primary Phone No.: _____ Ext: _____</p> <p>Secondary Phone No.: _____ Ext: _____</p> <p>Fax Number.: _____</p> <p>Email address: _____</p>
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*Section B: Contact person regarding the submission of this form:*

Contact Name: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Ext: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Comments: (To separate one comment from another, press ALT+ENTER)**



Independent Statistics & Analysis

U.S. Energy Information Administration

OMB No. 1905-XXXX  
Expiration Date: 12/31/20XX  
Version No.: 20XX.01  
Burden: 0.5 hours

NATURAL GAS PROCESSING PLANT SURVEY

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Schedule A: Baseline Report

DATE:	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	2	0	<input type="text"/>	<input type="text"/>	Resubmission
EIA ID NUMBER:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

PART 4. BASELINE PIPELINE CONNECTION DATA

Please list all primary pipelines connected to the plant. (Please check all that apply.)

Name: \_\_\_\_\_

Capacity (list amount and check units): \_\_\_\_\_  MMcf/Day  Bbls/Day

Pipeline Type:  Entering  Wet Gas  Gas  Liquids  
 Exiting  Wet Gas  Gas  Liquids

If exiting, is the pipeline able to accept raw, unprocessed gas?  Yes  No

Name: \_\_\_\_\_

Capacity (list amount and check units): \_\_\_\_\_  MMcf/Day  Bbls/Day

Pipeline Type:  Entering  Wet Gas  Gas  Liquids  
 Exiting  Wet Gas  Gas  Liquids

If exiting, is the pipeline able to accept raw, unprocessed gas?  Yes  No

Name: \_\_\_\_\_

Capacity (list amount and check units): \_\_\_\_\_  MMcf/Day  Bbls/Day

Pipeline Type:  Entering  Wet Gas  Gas  Liquids  
 Exiting  Wet Gas  Gas  Liquids

If exiting, is the pipeline able to accept raw, unprocessed gas?  Yes  No

Name: \_\_\_\_\_

Capacity (list amount and check units): \_\_\_\_\_  MMcf/Day  Bbls/Day

Pipeline Type:  Entering  Wet Gas  Gas  Liquids  
 Exiting  Wet Gas  Gas  Liquids

If exiting, is the pipeline able to accept raw, unprocessed gas?  Yes  No

Name: \_\_\_\_\_

Capacity (list amount and check units): \_\_\_\_\_  MMcf/Day  Bbls/Day

Pipeline Type:  Entering  Wet Gas  Gas  Liquids  
 Exiting  Wet Gas  Gas  Liquids

If exiting, is the pipeline able to accept raw, unprocessed gas?  Yes  No



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Resubmission

EIA ID NUMBER:

PART 5. BASELINE PLANT OPERATIONAL STATUS

What is the plant's **annual average** total plant capacity?  
(Please enter the inlet capacity level at which the plant is able to operate.)

MMcf/Day

What is the **annual average** natural gas flow at the plant inlet?

MMcf/Day

What is the average annual **Btu content** of natural gas at the plant inlet?

Btu/Mcf

Which functions is the plant **able** to perform? (Please check all that apply.)

Dehydration

Contamination Removal (i.e.: CO2, N2, H2S, Hg, ...)

NGL Extraction

Fractionation

Other (please describe): \_\_\_\_\_

Which functions does the plant **actually** perform? (Please check all that apply.)

Dehydration

Contamination Removal (i.e.: CO2, N2, H2S, Hg, ...)

NGL Extraction

Fractionation

Other (please describe): \_\_\_\_\_

What is the **storage capacity** at the plant?

Dry Natural Gas

MMcf

Natural Gas Liquids

Bbls