

Request for Approval under the “Generic Clearance for Questionnaire Testing and Research” (OMB Control Number: 1905-0186)

Cognitive Research for Proposed Expansion of the Form EIA-914, “Monthly Natural Gas Production Report.”

PURPOSE: The EIA-914 form, or the Monthly Natural Gas Production Report, collects information on natural gas production by operator, by state, in the United States. Data collected from this form appear in a vast array of EIA publications, including the *Natural Gas Monthly*, *Natural Gas Annual*, *Petroleum Supply Monthly*, *Petroleum Supply Annual*, *Monthly Energy Review*, *Annual Energy Review*, and on other pages within the EIA website.

For the 2015 EIA-914 survey, EIA would like to add the collection of crude oil and lease condensate production from well operators. EIA is exploring collecting this information both as an aggregate and separated by American Petroleum Institute (API) Gravity categories by state. Finally, EIA is expanding the number of states and areas operators are asked to report for from seven to 21.

In order to understand the potential measurement error in this proposed expansion, EIA’s survey methodologists would like to conduct cognitive interviews with existing EIA-914 respondents. EIA requests approval to conduct these interviews under the Generic Clearance ICR EIA-882T(56).

The purpose of these visits will be:

- To assess if API Gravity data are available in respondent’s records;
- To understand the cognitive burden required from respondents to translate what is in their records to EIA’s API Gravity data requests;
- And, if time permits, to test the remaining components of the EIA-914, including the burden of asking EIA-914 respondents to report for 21 states and areas (previously it was seven states and areas).

DESCRIPTION OF RESPONDENTS: Current EIA-914 respondents that are operators and produce natural gas from gas wells.

TYPE OF COLLECTION: (Check one)

Field Testing

Usability Testing

Pilot Surveys

Respondent Debriefings

Cognitive Interviews

Focus Groups

Other: _____

CERTIFICATION:

I certify the following to be true regarding the proposed collection of information:

1. It is necessary for the proper performance of agency functions.
2. It avoids unnecessary duplication.

3. It reduces burden on small entities.
4. It uses plain, coherent, and unambiguous language that is understandable to respondents.
5. Its implementation will be consistent and compatible with current reporting and recordkeeping practices.
6. It indicates the retention periods for recordkeeping requirements.
7. It informs respondents of the information called for under 5 CFR 1320.8 (b)(3) about:
 - i. Why the information is being collected;
 - ii. Use of information;
 - iii. Burden estimate;
 - iv. Nature of response (voluntary, required for a benefit, or mandatory);
 - v. Nature and extent of confidentiality; and
 - vi. Need to display currently valid OMB control number
8. It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected.
9. It uses effective and efficient statistical survey methodology (if applicable).
10. It makes appropriate use of information technology.

Name: Stephen Harvey, Assistant Administrator for Energy Statistics,
U.S. Energy Information Administration

To assist review, please provide answers to the following questions:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? Yes No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Y No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector	25	1	25
Totals			

FEDERAL COST: The estimated annual cost to the Federal government is: \$5199.75

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?
[X] Yes [] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

We will recruit respondents to participate in cognitive testing from the current EIA-914 sampling frame.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
[] Web-based or other forms of Social Media
[] Telephone
[X] In-person
[] Mail
[] Other, Explain
2. Will interviewers or facilitators be used? [X] Yes [] No

Please make sure that all instruments, instructions, and scripts are submitted with the request.

Instructions for completing Request for Approval under the
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TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts are submitted with the request.