



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

1200 New Jersey Avenue SE
Washington DC 20590

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Pipeline Safety

20__ Natural Gas Base Grant Progress Report for

Please follow the directions listed below:

1. Review the entire document for completeness.
2. Review and have an authorized signatory sign and date page 2:
3. Fasten all pages with a paper or binder clip - no staples please as this package will be scanned upon it's arrival at PHMSA.
4. Mail the entire document, including this cover page to the following:

**ATTN: Gwendolyn M. Hill
U.S. Department of Transportation
Pipeline & Hazardous Materials Safety Administration
Pipeline Safety, PHP-50
1200 New Jersey Avenue, SE Second Floor E22-321
Washington, D.C. 20590**



FedSTAR Information

Electronic Submission Date:



Pipeline and Hazardous Materials Safety Administration
1200 New Jersey Avenue, SE
Washington DC 20590

OFFICE OF PIPELINE SAFETY

20__ Natural Gas Base Grant Progress Report

Office:

Authorized Signature

Printed Name

Title

Date



PROGRESS REPORT ATTACHMENTS (NATURAL GAS)

PHMSA Form No. PHMSA F 999-92

INSTRUCTIONS:

These attachments request information either for the entire calendar year (CY20__: January 1 through December 31, 20__) or as of (or on) December 31, 20__. Please report actual as opposed to estimated numbers on the attachments. Be careful to provide complete and accurate information since the PHMSA State Programs will be validating the attachments during the state's next annual evaluation.

- **Attachment 1: State Jurisdiction and Agent Status Over Natural Gas Facilities.** Requires the state to indicate those pipeline operator types over which the state agency has jurisdiction under existing law. If the state does not have jurisdiction over an operator type, indicate why not in the column designated No, using the one alpha code (A or B) which best describes the reason. If the state agency has jurisdiction over an operator type, place an X in the column designated Yes and provide information on the number of operators, the number and percent of operators inspected, the number of inspection units, and the number and percent of inspection units inspected. If the jurisdiction over a type of operator is under a Section 60106 Agreement, indicate X/60106 in the column designated Yes. [If the same operator/inspection unit is visited more than once during the year, count only once under number of operators inspected/number of inspection units inspected on Attachment 1. The multiple visits would, however, be reflected under total inspection person-days in Attachment 2.]
- **Attachment 2: Total State Field Inspection Activity.** Requires the state to indicate by operator type the number of inspection person-days spent during CY 20__ on inspections; standard comprehensive; design, testing, and construction; on-site operator training; integrity management; operator qualification; investigating incidents or accidents; damage prevention activities; and compliance follow-up. Attachment 2 should include drug and alcohol inspections. Counting In Office Inspection Time - An inspector may choose to review pipeline company procedure manuals or records away from the company facility in order to effectively use onsite inspection time. The amount of time spent reviewing procedures and records may be counted as part of the inspection process. It is important that an inspector only record time for activities that normally would be completed as part of an onsite inspection. For example, an inspector may attribute the three hours he or she spent reviewing a pipeline operator's procedure manual and records prior to an on site inspection towards the total inspection time. Each supervisor must carefully review the reported time to ensure the time attributed is consistent with the activity completed and is carefully delineated from normal office duties.
- **Attachment 3: Natural Gas Facility Subject to State Safety Jurisdiction.** States should only list the facilities that are jurisdictional under Part 192 of which the state has safety authority over. This attachment requires the business name and address of each person subject to the pipeline safety jurisdiction of the state agency as of December 31, 20__. Also indicate the operator type (e.g., intrastate transmission) consistent with the listing in Attachment 1 and include the number of inspection units in each operator's system.
- **Attachment 4: Natural Gas Pipeline Incidents.** Requires a list of incidents investigated by or reported to the state agency that involved personal injury requiring hospitalization, a fatality, property damage exceeding \$50,000, and other incidents otherwise considered significant by the state agency. Please also make an effort to clearly identify the cause of the incident using the one most appropriate alpha code footnoted in the attachment. We summarize this information for Congress by classifying the cause into one of eight categories: (A) corrosion failure; (B) natural force damage; (C) excavation damage; (D) other outside force damage; (E) material failure of pipe or weld; (F) equipment failure; (G) incorrect operation; (H) other accident cause. Please provide a summary of incident investigations.

- **Attachment 5: State Compliance Actions.** This requires a summary of state pipeline inspection and compliance actions. [In the Number of Compliance Actions Taken column, keep in mind one compliance action can cover multiple probable violations.]
- **Attachment 6: State Record Maintenance and Reporting.** Requires a list of records and reports maintained and required by the state agency.
- **Attachment 7: State Employees Directly Involved in the Natural Gas Pipeline Safety Program.** This attachment requires a list by name and title of each employee directly involved in the Natural Gas pipeline safety program. Be sure to include the percentage of time each employee has been involved in the Natural Gas pipeline safety program during 20___. If an employee has not been in the Natural Gas pipeline safety program the full year of 20___, please note the number of months working on the program. Indicate a Qualification Category for each of the state's inspectors (see Attachment 7a). The categories are shown in descending order of education and experience. Please enter the number of the highest description applicable to each inspector. For each inspector and supervisor, indicate the month and year he/she successfully completed the training courses at the Pipeline Safety Office of Training and Qualifications in Oklahoma City, OK. Finally, provide in summary form the number of all staff (supervisors, inspectors/investigator, damage prevention/technical and clerical/administrative) working on the Natural Gas pipeline safety program and the person-years devoted to Natural Gas pipeline safety. Person-years should be reported in hundreds (e.g., 3.25).
- **Attachment 8: State Compliance with Federal Requirements.** This requires the state to indicate whether it is in compliance with applicable federal requirements. If a particular requirement is not applicable to the state (e.g., offshore inspections), indicate NA in the column designated Y/N/NA. If a regulation has been adopted, indicate the date adopted (e.g., 05/01/04) in the appropriate column. If the regulation is applicable but has not been adopted, indicate N in the Y/N/NA column and explain why not in the appropriate column (e.g., requires legislative action). [If the state has not adopted the maximum please indicate civil penalty levels in effect in the state as of December 31, 20___. Note that at the end of Attachment 8 we are requesting each state to indicate the frequency its legislature meets in general session. This information will be taken into account when determining if applicable federal regulations have been adopted within 24 months of the effective date or two general sessions of the state legislature.
- **Attachment 10: Performance and Damage Prevention Questions.** This attachment requires a narrative of each states goals and accomplishments. In addition it requires a narrative on each states progress toward meeting the nine elements of an effective damage prevention program as described in the PIPES Act of 2006.



DEFINITIONS

- **Inspection Unit.** An inspection unit is all or part of an operator's pipeline facilities that are under the control of an administrative unit that provides sufficient communication and controls to ensure uniform design, construction, operation, and maintenance procedures for the facilities. (See Glossary of Terms in Guidelines for States Participating in the Pipeline Safety Program for application of the inspection unit concept to transmission and hazardous liquid pipeline systems, distribution systems, liquefied natural gas systems, municipality, master meter system, regulated gathering pipeline systems, and propane-air systems/petroleum gas systems.)
- **Inspection Person-Day.** An inspection person-day is all or part of a day spent by a state agency representative including travel in an on site examination or evaluation of an operator or his system to determine if the operator is in compliance with federal or state pipeline safety regulations, in an on site investigation of a pipeline incident, or in job-site training of an operator. Time expended on such activities should be reported as one inspection person-day for each day devoted to safety issues, regardless of the number of operators visited during that day.
- **Probable Violation.** A probable violation is a non-compliance with any section or, where a section is divided into subsections (a), (b), (c), etc., any subsection of federal or state pipeline regulations. Each numbered section should be counted separately. Multiple non-compliances of a numbered section discovered on the same inspection should be counted as one probable violation with multiple pieces of evidence.
- **Compliance Action.** A compliance action is an action or series of sequential actions taken to enforce federal or state pipeline regulations. One compliance action can cover multiple probable violations. A compliance action may take the form of a letter warning of future penalties for continued violation, an administratively imposed monetary sanction or order directing compliance with the regulations, an order directing corrective action under hazardous conditions, a show-cause order, a criminal sanction, a court injunction, or a similar formal action.



Attachment 1 - Stats on Operators

STATE JURISDICTION AND AGENT STATUS OVER NATURAL GAS FACILITIES AS OF DECEMBER 31, 20__

| Operator Type | State Agency Jurisdiction/ Agent Status | | No. of Operators | Operators Inspected | | No. of Inspection Units | Units Inspected | |
|--|--|-----|---------------------|------------------------|---|-------------------------------|-----------------|---|
| | No ¹ | Yes | | # | % | | # | % |
| Distribution | | | | | | | | |
| Private | | | | 0 | | | | |
| Municipal | | | | 0 | | | | |
| Master Meter | | | | 0 | | | | |
| LPG | | | | 0 | | | | |
| LNG | | | | 0 | | | | |
| Other (See note below) | | | | 0 | | | | |
| Transmission | | | | | | | | |
| Intrastate | | | | 0 | | | | |
| Interstate (Interstate Agent Only) | | | | 0 | | | | |
| Interstate LNG (Interstate Agent Only) | | | | 0 | | | | |
| Other | | | | | | | | |
| Gathering Lines (Jurisdictional) | | | | 0 | | | | |
| Offshore Facilities (State Waters) | | | | 0 | | | | |
| Total | | | | | | | | |

¹Codes: A - None in state and does not have jurisdiction;

B - State does not have jurisdictional authority (Provide current status or action being taken to obtain authority in notes section below)

F - No, State is currently not an interstate agent.

X/60105P = Yes, I have Section 60105 (Certification) over some of the operator type (meaning: I have 60105 authority over some, but not all of this operator type and do not have a 60106 agreement with PHMSA to inspect them). These operators are identified in the notes below.

X/IA - Yes I have Interstate Agent jurisdiction over this type of operator

Distribution "Other" - ie Co-ops, Public Utility Districts, etc.

States should explain any special circumstances

General Instructions - All above facilities should only include facilities as defined by federal pipeline regulations and should not include extended jurisdiction by state regulation.

Attachment 1 Notes:

Attachment 2 - State Inspection Activity

**TOTAL STATE FIELD INSPECTION ACTIVITY AS
OF DECEMBER 31, 20__**

| Operator Type | Standard Comprehensive | Design, Testing and Construction | On-Site Operator Training | Integrity Management | Operator Qualification | Investigating Incidents or Accidents | Damage Prevention Activities | Compliance Follow-up | Total |
|------------------------------------|------------------------|----------------------------------|---------------------------|----------------------|------------------------|--------------------------------------|------------------------------|----------------------|-------|
| Distribution | | | | | | | | | |
| Private | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Municipal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Master Meter | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| LPG | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| LNG | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Transmission | | | | | | | | | |
| Intrastate | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Interstate | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Interstate LNG | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Other | | | | | | | | | |
| Gathering Lines (Jurisdictional) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Offshore Facilities (State Waters) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | | | | | | | | | |

Drug and Alcohol

| | |
|---|--|
| Total Count of Drug and Alcohol Inspections | |
|---|--|

Attachment 2 Notes

Attachment 3 - List of Operators

NATURAL GAS FACILITIES SUBJECT TO STATE SAFETY JURISDICTION AS OF DECEMBER 31, 20__

| Operator Business Name Operator ID Address | Distribution (Operator type & Inspection Units) | | | | | | Transmission (Operator type & Inspection Units) | | | Other (Operator type & Inspection Units) | |
|--|--|------------------|-------------------------|------------|------------|--------------|--|-------------------|---------------------------|---|---|
| | Private | Municipal | Master Meter | LPG | LNG | Other | Intrastate | Interstate | Interstate LNG | Gathering Lines (Juris- dictional) | Offshore Facilities (State Waters) |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |



| | Distribution (Operator type & Inspection Units) | | | | | | Transmission (Operator type & Inspection Units) | | | Other (Operator type & Inspection Units) | |
|---------------------------------------|--|-----------|-----------------|-----|-----|-------|--|------------|-------------------|---|---|
| | Private | Municipal | Master Meter | LPG | LNG | Other | Intrastate | Interstate | Interstate LNG | Gathering Lines (Juris- dictional) | Offshore Facilities (State Waters) |
| Inspection Unit totals by type | | | | | | | | | | | |

Total Operators

Attachment 3 Notes:



Attachment 4 - Incidents/Accidents

SIGNIFICANT⁴ NATURAL GAS INCIDENTS/ACCIDENTS JANUARY 1, THROUGH DECEMBER 31, 20__

| Date of Incident | Location - City/County/etc. | Injuries # | Fatalities # | Property Damage ³ \$ | Cause Code ¹ |
|------------------|-----------------------------|------------|--------------|------------------------------------|-------------------------|
|------------------|-----------------------------|------------|--------------|------------------------------------|-------------------------|

Name of Operator:

Cause Reported by Operator (Describe)²

¹Cause Codes: A - Corrosion failure; B - Natural Force Damage; C - Excavation Damage; D - Other Outside Force Damage; E - Pipe, Weld or Joint Failure; F - Equipment Failure; G - Incorrect Operation; H - Other Incident Cause

²Please attach a summary or report of the state agency's investigation of each of the above incidents.

³Interstate agents should use the 191.3 Incident definition for listing incidents investigated on interstate facilities.

⁴Significant: Investigated by or reported to the state agency, involving personal injury requiring hospitalization, fatality, property damage exceeding \$50,000 and other incidents otherwise considered significant which involved jurisdictional facilities.

Attachment 4 Notes



Attachment 5 - Stats on Compliance Actions

STATE COMPLIANCE ACTIONS -- CALENDAR YEAR (CY) 20__

Probable Violation Categories

Intrastate

Interstate

Number carried over from previous CY (including carryover and long term)

Number found during CY

Number submitted for DOT action (60106 Agreement agent only)

Number corrected during CY (including carryover from previous year)

Number to be corrected at end of CY (including carryover and long term)

Number of Compliance Actions Taken ¹

(see definition)

Civil Penalties

Number assessed during CY

Dollars assessed during CY

Number collected during CY

Dollars collected during CY

¹Do not double count for a related series of actions.

Attachment 5 Notes



Attachment 6 - List of Records Kept

NATURAL GAS STATE RECORD MAINTENANCE AND REPORTING DURING CY 20__

Attachment 6 Notes



Attachment 7 - Staffing and TQ Training

**STATE EMPLOYEES DIRECTLY INVOLVED IN THE NATURAL GAS PIPELINE
SAFETY PROGRAM DURING CY 20__**

| Name/Title | % Time | # Months | Qual. Cat. |
|------------|-----------|-------------|---------------|
| | | | |
| | | | |

Summary

| <u>Employee Type</u> | <u>No. of Staff</u> | <u>Person-Years</u> |
|-----------------------------|---------------------|---------------------|
| Supervisor | | |
| Inspectors/Investigators | | |
| Damage Prevention/Technical | | |
| Clerical/Administrative | | |
| Total | | |

| Last Name | First Name | Course | Completion Date |
|-----------|------------|--------|-----------------|
| | | | |

Attachment 7 Notes



Attachment 8 - Compliance with Federal Regulations

STATE COMPLIANCE WITH FEDERAL REQUIREMENTS AS OF DECEMBER 31, 20

| No. | Effective Date | Impact | Adoption Date | AdoptionStatus |
|-------------------|----------------|---|---------------|----------------|
| 1 | | Maximum Penalties Substantially Same as DOT (\$100,000/\$1,000,000); Indicate actual amount in note. | | |
| Note ¹ | | | | |
| 2 | | 191.23 and 191.25 Safety-Related Conditions(through current amendment 191-14) | | |
| 3 | | Part 192 Amendments | | |
| 01-90 | Pre 2002 | [All applicable amendments prior to and including 2002] | | |
| Note ¹ | | | | |
| 91 | 4/23/2004 | Definition of high consequence areas for gas transmission lines | | |
| Note ¹ | | | | |
| 92 | 9/4/2003 | Procedures for Producer-operated outer continental shelf natural pipelines that cross directly into state waters | | |
| Note ¹ | | | | |
| 93 | 10/15/2003 | various changes to gas pipeline safety standards from NAPSR recommendations | | |
| Note ¹ | | | | |
| 94 | 5/6/2005 | Modification to the definition of a Transmission Line | | |
| Note ¹ | | | | |
| 95 | 5/26/2004 | Pipeline integrity management for transmission lines in HCAs | | |
| Note ¹ | | | | |
| 96 | 9/14/2004 | Pressure limiting and regulating stations | | |
| Note ¹ | | | | |

| | | |
|----------------------------------|------------|--|
| 97 Note ¹ | 7/28/2004 | Passage of internal inspection devices on new and retrofitted transmission pipelines |
| 98 Note ¹ | 9/9/2004 | Performance of periodic underwater inspections |
| 99 Note ¹ | 6/20/2005 | API RP 1162 Public awareness campaign |
| 100 Note ¹ | 7/15/2005 | PSIA Statuory changes to Operator Qualification Program |
| 101 Note ¹ | 11/25/2005 | Adoption of Nace Standard as a direct assesment standard |
| 102 Note ¹ | 4/14/2006 | Definition of a Gathering Line |
| 103 Note ¹ | 7/10/2006 | Incorporate by Reference various Standards |
| 103a Note ¹ | 2/1/2007 | Update Incorporated by Reference and Correction |
| 72 FR 20055 Note ¹ | 4/23/2007 | Design and Construction Standards to Reduce Internal Corrosion in Gas Transmission Pipelines |
| 104 Note ¹ | 5/23/2007 | Integrity Management Program Modifications and Clarifications |
| 105 Note ¹ | 12/13/2007 | Applicability of Public Awareness Regulations to Certain Gas Distribution Operators |



| | | |
|----------------------------|--|--|
| 106 Note ¹ | 3/28/2008 | Administrative Procedures, Updates and Technical Amendments (73 FR 16562) |
| 107 Note ¹ | 10/17/2008 | Standards for Increasing the Maximum Allowable Operating Pressure for Gas Transmission Pipelines (73 FR 62147) |
| 108 Note ¹ | 12/24/2008 | PA-11 Design Pressures (73 FR 79005) |
| 4 | Part 193 Amendments (applicable only where state has jurisdiction over LNG) | |
| 01-17 Note ¹ | Pre 2002 | [All applicable amendments prior to and including 2002] |
| 18 Note ¹ | 4/9/2004 | Updated LNG standards by section |
| 19 Note ¹ | 7/10/2006 | Incorporate by Reference various Standards |
| 20 Note ¹ | 3/28/2008 | Administrative Procedures, Updates and Technical Amendments (73 FR 16562) |
| 5 | Part 199 - Drug Testing | |
| 6 | Part 199 Amendments | |
| 01-19 Note ¹ | Pre 2002 | [All applicable amendments prior to and including 2002] |
| 20 Note ¹ | 3/12/2003 | Definition of Administrator |
| 21 Note ¹ | 12/31/2003 | Instructions for Single Use Form for MIS |



| | | |
|-------------------|--|--|
| 22 | 7/14/2004 | New address for reporting |
| Note ¹ | | |
| 23 | 3/8/2005 | Administration name change |
| Note ¹ | | |
| 24 | 3/28/2008 | Administrative Procedures, Updates and Technical Amendments (73 FR 16562) |
| Note ¹ | | |
| 7 | State Adoption of Part 198 State One-Call Damage Prevention Program | |
| a. | | Mandatory coverage of areas having pipeline facilities |
| Note ¹ | | |
| b. | | Qualification for operation of one-call system |
| Note ¹ | | |
| c. | | Mandatory excavator notification of one-call center |
| Note ¹ | | |
| d. | | State determination whether calls to center are toll free |
| Note ¹ | | |
| e. | | Mandatory intrastate pipeline operator participation |
| Note ¹ | | |
| f. | | Mandatory operator response to notification |
| Note ¹ | | |
| g. | | Mandatory notification of excavators/public |
| Note ¹ | | |
| h. | | Civil penalties/injunctive relief substantially same as DOT (\$25000/\$500000) |
| Note ¹ | | |



1If Adoption Status is No, Please provide an explanation

State Attendance at 20__ NAPS Regional Meeting:

Frequency of General Legislative Session:

Attachment 8 Notes



Attachment 10 - Performance and Damage Prevention Questions

CALENDAR YEAR (CY) 20__

Planned Performance: What are your Planned Annual and Long-term goals for your Pipeline Safety Program?

Past Performance: What did the Pipeline Safety Program accomplish during the subject year (to this document) to contribute toward the program's annual and long-term goals?

1. Has the state or agency reviewed the Damage Prevention Assistance Program (DPAP) document in the last twelve months?
2. Has the state or agency developed or is in the process of developing a plan to address the nine elements contained in the PIPES Act of 2006 for an effective State Damage Prevention Program?

If yes to question 2, where does the state or agency stand on implementation of the nine elements contained in the PIPES Act of 2006? Please provide a description of how the state or agency has or will meet each element. If not, please provide a brief passage explaining the reasons why the state or agency has not.

Attachment 10 Notes

