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

ANNUAL REPORT FOR CALENDAR YEAR 2023 GAS DISTRIBUTION SYSTEM

Initial Date
Submitted:

Report Submission
Type

INITIAL

Date Submitted:

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) | | 20241253-61121 | | | |
|---|-------------------------|------------------------------|------------------------|--|--|--|
| 1. Name of Operator | NAVITAS UT | NAVITAS UTILITY COPORATION | | | | |
| 2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY | BE OBTAINED) | | | | | |
| 2a. Street Address | 3186-D Airwa | 3186-D Airway Ave | | | | |
| 2b. City and County | Costa Mesa | | | | | |
| 2c. State | CA | | | | | |
| 2d. Zip Code | 92626 | | | | | |
| 3. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER | 32647 | 32647 | | | | |
| 4. HEADQUARTERS NAME & ADDRESS | | | | | | |
| 4a. Street Address | 121 EAKLY | 121 EAKLY CAMPUS ROAD | | | | |
| 4b. City and County | EAKLY | EAKLY | | | | |
| 4c. State | OK | OK | | | | |
| 4d. Zip Code | 73033 | 73033 | | | | |
| 5. STATE IN WHICH SYSTEM OPERATES | KY | | | | | |
| 6. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GROUPLES the report for that Commodity Group. File a separate report for | | | ninant gas carried and | | | |
| Natural Gas | | | | | | |
| 7. THIS REPORT PERTAINS TO THE FOLLOWING TYPE OF OPERA included in this OPID for which this report is being submitted.): | TOR (Select Type of Ope | rator based on the structure | e of the company | | | |
| Privately Owned | | | | | | |

PART B - SYSTEM DESCRIPTION

| 1 CE | NERAL | |
|------|-------|--|

| | | ST | EEL | | | | | | | | | | |
|--------------------|-------|--------|---------------------------|--------|--------|---|---------|--------------------------|-----------------|--------|---------|--------------------------------|-----------------|
| | UNPRO | TECTED | CATHODICALLY PROTECTED | | - | | PLASTIC | CAST/ WROUGHT IRON | DUCTILE IRON | COPPER | OTHER | RECONDITION ED CAST IRON | SYSTEM TOTAL |
| | BARE | COATED | BARE | COATED |] | | | | | | | | |
| MILES OF MAIN | 3.3 | | | | 99.948 | 0 | 0 | 0 | 0 | 0 | 103.248 | | |
| NO. OF SERVICES | 42 | | | | 702 | 0 | 0 | 0 | 0 | 0 | 744 | | |

| MATERIA | AL | UN | KNOWN | 2" OR | LESS | OVER 2" THRU 4" | | | VER 4" HRU 8" | OVEF THRU | | OVER 12" | SYST | EM TOTALS | |
|-----------------------|-----------------------|-------|-----------------------|------------|-----------|--------------------|---------------|-------|------------------------|---------------------------|-------------------|---------------------|-------------------|-----------|--|
| STEEL | | | 0 | 3.3 | | 0 | 0 |) | | 0 | |) | 3.3 | | |
| DUCTILE I | RON | | 0 | 0 | | 0 | 0 |) | | 0 | |) | 0 | | |
| COPPE | R | | 0 | 0 | (| 0 | 0 |) | | 0 | |) | 0 | | |
| CAST/WRO | UGHT | | 0 | 0 | (| 0 | 0 |) | | 0 | 1 |) | 0 | | |
| PLASTIC I | PVC | | 0 | 0 | | 0 | |) | | 0 | |) | 0 | | |
| PLASTIC | PE | | 0 | 28.008 | | 54.58 | 1 | 17.36 | | 0 | (|) | 99.94 | 8 | |
| PLASTIC A | ABS | | 0 | 0 | (| 0 | 0 |) | | 0 | |) | 0 | | |
| PLASTIC O | THER | | 0 | 0 | (| 0 | 0 |) | | 0 | |) | 0 | | |
| OTHER | 2 | | 0 | 0 | (| 0 | 0 |) | | 0 | |) | 0 | | |
| RECONDITION CAST IR | | | 0 | 0 | | 0 | 0 |) | | 0 | 1 |) | 0 | | |
| TOTAL | - | | 0 | 31.308 | ; | 54.58 | 1 | 17.36 | | 0 | 1 |) | 103.2 | 48 | |
| Descr | ibe Oth | er Ma | terial: | | | | | | | | | | | | |
| 3.NUMBER (| OF SERV | /ICES | IN SYSTEM | AT END OF | YEAR | | AVER | RAGE | SERVICE LE | NGTH: 103 | | | | | |
| MATERIAL | | UN | KNOWN | 1" OR LESS | | OVER 1" THRU 2" | | | VER 2" HRU 4" | OVER 4" THRU 8" | | OVER 8" | SYS | TEM TOTAL | |
| STEEL | | 0 | | 42 | | 0 | |) | | 0 | |) | 42 | | |
| DUCTILE IR | ON | 0 | | 0 | | 0 | 0 |) | | 0 | | 0 | 0 | | |
| COPPER | | 0 | | 0 | (| 0 | 0 |) | | 0 | |) | 0 | | |
| CAST/WROL IRON | JGHT | 0 | | 0 | (| 0 | 0 |) | | 0 | |) | 0 | | |
| PLASTIC PV | c | 0 | | 0 | (| 0 | 0 |) | | 0 | |) | 0 | | |
| PLASTIC PE | | 0 | | 669 | | 28 | 4 | 4 | | 1 | |) | 702 | | |
| PLASTIC AB | s | 0 | | 0 | (| 0 | 0 |) | | 0 | | 0 | 0 | | |
| PLASTIC OT | HER | 0 | | 0 | (| 0 | O |) | | 0 | | 0 | 0 | | |
| OTHER | | 0 | | 0 | | 0 | O |) | | 0 | |) | 0 | | |
| RECONDITION | ONED | 0 | | 0 | 0 0 | | 0 0 | | | 0 | | 0 | 0 | 0 | |
| CAST IRON | | 0 | | 711 | | 28 | 4 | 4 | | 1 | 1 (| | 744 | 744 | |
| | cribe Other Material: | | | | | | | | | | | | | | |
| TOTAL | ner Mate | | | | | EINSTALLA | TION | | | | | | | | |
| TOTAL | | ND NU | MBER OF S | ERVICES B | DECADE C | JI ING IALLA | | | | | | | | | |
| TOTAL Describe Otl | | Т | MBER OF S PRE-1940 | 1940-1949 | 1950-1959 | 1960-1969 | 1970-1 | 1979 | 1980-1989 | 1990-1999 | 2000-2009 | 2010-2019 | 2020-2029 | TOTAL | |
| TOTAL Describe Otl | MAIN AI | OWN | PRE-1940 | | | | 1970-1 | | 1980-1989 15 | 1990-1999 9.971 | 2000-200 9 | 2010-2019 73 | 2020-202 9 | 103.248 | |

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

| CAUSE OF LEAK | M | AINS | SERVICES | | | |
|-----------------------------|-------|-----------|----------|-----------|--|--|
| OAUSE OF ELAN | TOTAL | HAZARDOUS | TOTAL | HAZARDOUS | | |
| CORROSION FAILURE | | | | | | |
| NATURAL FORCE DAMAGE | | | | | | |
| EXCAVATION DAMAGE | | | | | | |
| OTHER OUTSIDE FORCE DAMAGE | | | 1 | 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 | PART E - RESERVED |
|--|---|
| 1. TOTAL NUMBER OF EXCAVATION DAMAGES BY APPARENT ROOT CAUSE: $\underline{0}$ | |
| a. One-Call Notification Practices Not Sufficient: 0 | |
| b. Locating Practices Not Sufficient: 0 | |
| c. Excavation Practices Not Sufficient: 0 | |
| d. Other: 0 | |
| | |
| | |
| O NUMBER OF EVOLUTION FIGURETO COSA | |
| 2. NUMBER OF EXCAVATION TICKETS 2054 | |
| 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: $\underline{0}$ | 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: 0% |
| | |
| | |
| | |
| | |

| PART H - ADDITIONAL INFORMATION | | | | | | | |
|---------------------------------|----------------------------------|--|--|--|--|--|--|
| | | | | | | | |
| PART I - PREPARER | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Kevin Pearcy operator | <u>(714) 242-4064</u> | | | | | | |
| (Preparer's Name and Title) | (Area Code and Telephone Number) | | | | | | |
| | | | | | | | |
| | | | | | | | |
| KPEARCY@NAVITASUTILITY.COM | <u>(714) 850-0876</u> | | | | | | |
| (Preparer's email address) | (Area Code and Facsimile Number) | | | | | | |