NOTICE: This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty OMB No. 2137-0629 as provided in 49 USC 60122.

Initial Date
Submitted:

Report Submission
Type

INITIAL

**Date Submitted:** 

OMB NO: 2137-0629 EXPIRATION DATE: 5/31/2024

2

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

## ANNUAL REPORT FOR CALENDAR YEAR 2022 GAS DISTRIBUTION SYSTEM

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 16 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 <a href="http://www.phmsa.dot.gov/pipeline/library/forms">http://www.phmsa.dot.gov/pipeline/library/forms</a>.

PART A - OPERATOR INFORMATION	(DO	T use only)		20231076-51721		
1. Name of Operator	SOUTHWEST GAS CORP					
2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY	INED)					
2a. Street Address	8360 S. Dura	ngo Drive				
2b. City and County		LAS VEGAS				
2c. State		NV				
2d. Zip Code		89113				
3. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER	18536					
4. HEADQUARTERS NAME & ADDRESS						
4a. Street Address	8360 S. Durango Drive					
4b. City and County		LAS VEGAS				
4c. State		NV				
4d. Zip Code		89113				
5. STATE IN WHICH SYSTEM OPERATES		CA				
6. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GRO complete 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 OPERAT included in this OPID for which this report is being submitted.):	OR (Sele	ct Type of Ope	rator based on the structure	e of the company		
Investor Owned						

## PART B - SYSTEM DESCRIPTION

1	.G	F	NE	=R	Δ	ı

		ST	EEL								
	UNPROTECTED CATHODICALLY PROTECTED		PLASTIC	CAST/ WROUGHT IRON	DUCTILE IRON	COPPER	OTHER	RECONDITION ED CAST IRON	SYSTEM TOTAL		
	BARE	COATED	BARE	COATED							
MILES OF MAIN	0	0	0	510.62	2723.258	0	0	0	0	0	3233.878
NO. OF SERVICES	0	0	0	8045	177640	0	0	0	0	0	185685

EXPIRATION DATE: 5/31/2024 2. MILES OF MAINS IN SYSTEM AT END OF YEAR **MATERIAL** UNKNOWN 2" OR LESS OVER 2" OVER 4" OVER 8" **OVER 12"** SYSTEM TOTALS THRU 4" **THRU 8" THRU 12"** STEEL 127.25 190.868 165.19 20.543 6.769 510.62 **DUCTILE IRON** n COPPER CAST/WROUGHT IRON PLASTIC PVC 0.031 0.031 **PLASTIC PE** 2295.086 370.927 57.214 2723.227 PLASTIC ABS **PLASTIC OTHER** n OTHER RECONDITIONED **CAST IRON TOTAL** 2422.367 561.795 222.404 20.543 6.769 3233.878 **Describe Other Material:** 3.NUMBER OF SERVICES IN SYSTEM AT END OF YEAR **AVERAGE SERVICE LENGTH: 75** OVER 1" OVER 2" OVER 4" MATERIAL UNKNOWN 1" OR LESS OVER 8" SYSTEM TOTALS **THRU 2"** THRU 4" **THRU 8" STEEL DUCTILE IRON** COOPER CAST/WROUGHT **IRON** PLASTIC PVC PLASTIC PE **PLASTIC ABS** PLASTIC OTHER n OTHER RECONDITIONED **CAST IRON** TOTAL **Describe Other Material:** 4.MILES OF MAIN AND NUMBER OF SERVICES BY DECADE OF INSTALLATION

	UNKNOWN	PRE-1940	1940-1949	1950-1959	1960-1969	1970-1979	1980-1989	1990-1999	2000-2009	2010-2019	2020-2029	TOTAL
MILES OF MAIN	88.06	0	0.005	96.329	64.423	218.493	465.874	595.547	1002.226	542.502	160.419	3233.878
NUMBER OF SERVICES	6899	0	0	0	412	7104	31307	34631	66395	25352	13585	185685

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

OMB NO: 2137-0629

OMB NO: 2137-0629 EXPIRATION DATE: 5/31/2024

CAUSE OF LEAK	MA	INS	SERVICES		
CAUGE OF ELAN	TOTAL HAZARDOUS		TOTAL	HAZARDOUS	
CORROSION FAILURE	0	0	1	1	
NATURAL FORCE DAMAGE	1	0	20	16	
EXCAVATION DAMAGE	14	14	118	118	
OTHER OUTSIDE FORCE DAMAGE	1	1	35	26	
PIPE, WELD OR JOINT FAILURE	10	1	35	3	
EQUIPMENT FAILURE	8	2	367	10	
INCORRECT OPERATIONS	19	1	9	5	
OTHER CAUSE	0	0	1	0	

NUMBER OF KNOWN SYSTEM LEAKS AT END OF YEAR SCHEDULED FOR REPAIR : 7 NUMBER OF HAZARDOUS LEAKS INVOLVING A MECHANICAL JOINT FAILURE :  $\,7\,$ 

PART D - EXCAVATION DAMAGE	PART E – EXCESS FLOW VALUE (EFV) AND SERVICE VALUE DATA
1. TOTAL NUMBER OF EXCAVATION DAMAGES BY APPARENT ROOT CAUSE: 149	Total Number Of Services with EFV Installed During Year : 4353
a. One-Call Notification Practices Not Sufficient: 61	Estimated Number Of Services with EFV In the System At End Of Year: 43456
b. Locating Practices Not Sufficient: 22	* Total Number of Manual Service Line Shut-off Valves Installed During Year: $\underline{2}$
c. Excavation Practices Not Sufficient: 59	
d. Other: 7	* Estimated Number of Services with Manual Service Line Shut-off Valves Installed in the System at End of Year: 70
	*These questions were added to the report in 2017.
2. NUBMER OF EXCAVATION TICKETS 61483	
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: 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: 0.74%

OMB NO: 2137-0629 EXPIRATION DATE: 5/31/2024

PART H - ADDITIONAL INFORMATION						
PART I - PREPARER						
Alyse Baker Administrator/Compliance	(702) 364-3272					
(Preparer's Name and Title)	(Area Code and Telephone Number)					
Alyse.Baker@swgas.com	<u>(702) 876-4238</u>					
(Preparer's email address)	(Area Code and Facsimile Number)					