

NON-UTILITY CERTIFICATE

Railroad Commission of Texas
Oversight and Safety Division-Gas Services
Utility Audit Section



Permit Number: _____

Pursuant to Texas Utilities Code, § 121.005, _____ elects to be treated as a non-utility.
The statutory requirements for such treatment have been met and the company certifies that:

I. Does the company own, operate, manage, lease or control a pipeline for the carriage of natural gas where any part of the right-of-way
for said line has (ever) been acquired by exercising the right of eminent domain?

- Yes No [from the original date(s) of construction to present]

II. Does the company make city-gate deliveries for local distribution?

- Yes No [includes either sales at or transportation delivery to a 'City Gate']

III. The company transports natural or synthetic gas, whether for sale, hire or otherwise, solely: (Check appropriate box or boxes.)

- 1. In, or in the vicinity of, the field or fields where the gas is produced to a gas processing plant or treating facility; or
from the outlet of such plant or treating facility to:
A. a person at or within the vicinity of such plant or treating facility; or
B. (1) to another person for transportation or sale in interstate commerce; or
(2) to another person in or within the vicinity of the field or fields where produced for
transportation or sale in intrastate commerce;
2. To another person for transportation or sale in interstate commerce; or
3. To another person in or within the vicinity of the field or fields where produced for transportation or sale in intrastate
commerce.

If items 1, 2 and/or 3 above are not applicable, are your deliveries or sales solely:

- 1. For lease use, compressor fuel, processing plant fuel or similar uses; or
2. Pursuant to lease or right-of-way agreements.

AFFIDAVIT

I declare under penalties prescribed in Texas Natural Resources Code § 91.143, that I am authorized to make this certification to the Gas Services
department of the Railroad Commission of Texas, that this Certificate was prepared by me or under my supervision, and that data and facts stated
herein are true, correct and complete to the best of my knowledge.

REPRESENTATIVE OF COMPANY (Signature)

TITLE (Type or Print)

REPRESENTATIVE OF COMPANY (Type or Print)

DATE

Inquiries regarding this Certificate should be directed to:

NAME (Print)

ADDRESS

TELEPHONE NO.

NOTE: If the pipeline is to be classified as a Private Pipeline and will carry natural gas other than the operator's own production, this
certificate, in support of the factual basis, must be attached to the Form T-4 application.