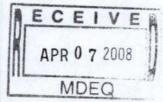
AI #36011 Gnf20080001





HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 0 2 | |

(Number to be assigned by MDEQ)

INSTRUCTIONS

File at least 30 days prior to the commencement of the regulated industrial activity.

Applicant must be the owner or operator. To avoid unnecessary delays, please be sure that the HTNOI is signed in accordance with Part V.J. of the General Permit. The coverage recipient is responsible for permit compliance.

HTNOI forms must be submitted to: Chief, Environmental Permits Division, MS Department of Environmental Quality, Office of Pollution Control, P.O. Box 10385, Jackson, Mississippi 39289-0385.

ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

SUBMITTALS WITH HTNOI

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the site's property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- A construction Storm Water Pollution Plan (SWPPP) as outlined in Part IV. of the permit. This is only required if
 construction activity including clearing, grading, and excavation, results in the disturbance of five acres or more of land.
 Activity less than five acres is also included if part of a common plan of development or sale with a planned disturbance
 of 5 acres or more.
- A list of water treatment chemicals, if added to the fill water. The applicant must provide the following information for
 each specific chemical: Material Safety Data Sheet (MSDS), composition of the additive, expected discharge
 concentrations, dosage addition rates, frequency of use, EPA registration (if applicable), and aquatic species
 toxicological data. There shall be no chemical additives containing any priority pollutants listed in 40 CFR 122,
 Appendix D, Tables II and III.
- Appropriate documentation from the U.S. Army Corps of Engineers, if a Section 404 Permit is required. For
 information call the Vicksburg District at 601/631-5289 or 5276 or the Mobile District at 334/694-3776 (a part of
 northern Desoto County is in the Memphis District (901/544/0736)).
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from surface waters or ground waters is to be used for the testing. For information call the Office of Land and Water at 601/961-5332.

Is the applicant the owner or operator? (circle one or both)

OWNER INFORMATION

OWNER COMPANY NAME: Monroe Gas Storage Company,		
OWNER STREET (P.O. BOX): 20445 Hwy. 249, Suite 460		
OWNER CITY: Houston	STATE: TX	ZIP: 77070
OWNER PHONE # (INCLUDE AREA CODE): (281) 290-24	24	
OPERATOR IN	NFORMATION	
OPERATOR CONTACT NAME & POSITION: Alliance Wo	ood Group Engineering, LP (Cliff	Pickett PM)
OPERATOR COMPANY: Alliance Wood Group Engineering.	LP (Cliff Pickett PM)	
OPERATOR STREET (P.O. BOX): 330 Barker Cypress		
OPERATOR CITY: Houston	STATE: TX	ZIP: 77094
OPERATOR PHONE # (INCLUDE AREA CODE): (281) 82	8-6000	
FACILITY/PROJECT NAME - Monroe Gas Storage Project -		
FACILITY/PROJECT NAME: Monroe Gas Storage Project -		ı
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FACILITY/PROJECT NAME: Monroe Gas Storage Project SIC Code: 4 9 2 2 IF IT IS AN EXISTING PIPELINE, STORAGE TANK AND	TETCO Lateral and TGP Lateral	TIFY THE RAW MATERIA
FACILITY/PROJECT NAME: Monroe Gas Storage Project SIC Code: 4 9 2 2 IF IT IS AN EXISTING PIPELINE, STORAGE TANK AND OR PRODUCT CONTAINED IN THE VESSEL PRIOR TO	FLOWLINE, PLEASE IDEN' THE TEST? None New Pip	TIFY THE RAW MATERIA elines
FACILITY/PROJECT FACILITY/PROJECT NAME: Monroe Gas Storage Project SIC Code: 4 9 2 2 IF IT IS AN EXISTING PIPELINE, STORAGE TANK AND OR PRODUCT CONTAINED IN THE VESSEL PRIOR TO ACREAGE DISTURBED: 182.5 acres for both pip. THIS IS TO TAKE PLACE. A CONSTRUCTION STORM WATER IF DISTURBING FIVE ACRES OR MORE (SEE PART IV.	FLOWLINE, PLEASE IDEN' THE TEST? None New Pip APPLICABLE IF LAND DIST	TIFY THE RAW MATERIA elines TURBING ACTIVITES ARE PLAN MUST BE ATTACH
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OUTFALL INFORMATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds, what method of location determination (GPS, interpolation – map, etc.), source (fill water), the name of the nearest named receiving water, the average flow contributed, and identify whether the hydrostatic test will be conducted on used or new pipe or vessels (attach additional sheets if necessary). All outfalls must be outlined and labeled on a USGS quadrangle map. Please number test sites/outfalls sequentially (001, 002, etc.)

OUTFALL	LATITUDE	LONGITUDE	METHOD OF LAT/LON DETERMINTATION	SOURCE WATER	RECEIVING STREAM	EST. TOTAL FLOW	USED PIPELINE, TANK, FLOWLINE, ETCYES/NO	EST. TEST DATE(S)
1	34°01'45.9'	88°26'59.2"	GPS Survey	Turner Branch	Turner Branch	673,772 g.	NO	May 08
2	34°00'27"	88°12'49"W	GPS Survey	Sipsey Creek	Sipsey Creek	2,061,196 g	NO	Aug. 08
Arth								
				Line No.				
	9 80 70							

CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

MIDH	3-16-08
Signature (Must be signed by operator when different than owner)	3-26-08 Date Signed
Marty Patterson	VP Operations
Printed Name	Title

¹This application shall be signed according to the General Permit, Part V.J., as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, the mayor, or ranking elected official.

HTNOI forms must be submitted to:

Chief, Environmental Permits Division MS Dept of Environmental Quality, Office of Pollution Control P.O. Box 10385 Jackson, Mississippi 39289-0385