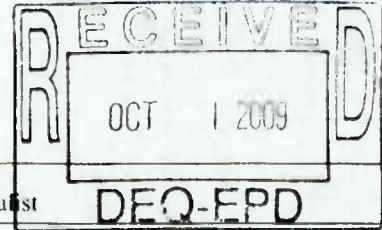


AT #1722
MSG 130270
GMP 20090001

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



OWNER INFORMATION

OWNER CONTACT NAME & POSITION: Steve Law, Senior Environmental Specialist

OWNER COMPANY NAME: Texas Gas Transmission, LLC

OWNER STREET (P.O. BOX): P.O. Box 20008

OWNER CITY: Owensboro STATE: KY ZIP: 42304-0008

OWNER PHONE # (INCLUDE AREA CODE): 270-688-6954

OPERATOR INFORMATION

OPERATOR CONTACT NAME & POSITION: Texas Gas Transmission, LLC

OPERATOR COMPANY: Texas Gas Transmission, LLC

OPERATOR STREET (P.O. BOX): P.O. Box 20008

OPERATOR CITY: Owensboro STATE: KY ZIP: 42304-0008

OPERATOR PHONE # (INCLUDE AREA CODE): 270-688-6954

FACILITY/PROJECT INFORMATION

FACILITY/PROJECT NAME: Helena 12-Inch OPP - Pin 50371

SIC Code: 4923

IF IT IS AN EXISTING PIPELINE, STORAGE TANK AND FLOWLINE, PLEASE IDENTIFY THE RAW MATERIAL OR PRODUCT CONTAINED IN THE VESSEL PRIOR TO THE TEST? Natural Gas

ACREAGE DISTURBED: < 5 Acres - Total. THIS IS APPLICABLE IF LAND DISTURBING ACTIVITIES ARE TO TAKE PLACE. A CONSTRUCTION STORM WATER POLLUTION PREVENTION PLAN MUST BE ATTACHED IF DISTURBING FIVE ACRES OR MORE (SEE PART IV. A. OF THE HYDROSTATIC TEST GENERAL PERMIT).

PHYSICAL SITE ADDRESS (IF NOT AVAILABLE INDICATE THE NEAREST NAMED ROAD - FOR LINEAR PROJECTS INDICATE BEGINNING OF PROJECT):

STREET: 3305 U.S. Hwy. 61 South CITY: Clarksdale

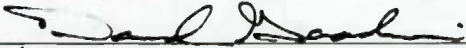
COUNTY: Coahoma ZIP: 38614

NEAREST NAMED RECEIVING STREAM (TO BEGINNING OF CONSTRUCTION PROJECT):
Sevier Lake

TYPE OF TREATMENT (IF PROVIDED): N/A

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.



Signature¹ (Must be signed by operator when different than owner)

9/29/2009

Date Signed

David Goodwin

Printed Name

Vice President Compliance and
Operations Services

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 2261
Jackson, Mississippi 39225-2261