Form Approved OMB No. 2137-0522 Expires: 01/13/2014

				Expires: 01/13/2014			
U.S. Department of Transportation Pipeline and Hazardous Materials Safety Administration	ANNUAL REPOR NATURAL OR OT GAT	Report Submission Type INITIAL					
A federal agency may not conduct or spo comply with a collection of information sul current valid OMB Control Number. The information is estimated to be approximat completing and reviewing the collection of this burden estimate or any other aspect Clearance Officer, PHMSA, of Important: PI	bject to the requirements of OMB Control Number for the ely 22 hours per response, i of information. All responses of this collection of informati	the Paperwork Reduction is information collection including the time for re- to this collection of info- on, including suggestion IP-30) 1200 New Jerse	on Act unless that coll n is 2137-0522. Public viewing instructions, g ormation are mandato ns for reducing this bu y Avenue, SE, Washin	ection of information displays a c reporting for this collection of gathering the data needed, and ory. Send comments regarding urden to: Information Collection ngton, D.C. 20590.			
•		1 3	,	0			
PART A - OPERATOR INFORMATION		DOT USE ONLY	20120848 - 25431				
1. OPERATOR'S 5 DIGIT IDENTIFICATI	ON NUMBER (OPID)	2. NAME OF COMPA	ANY OR ESTABLISH S & Electric Co	MENT:			
18112		IF SUBSIDIARY, NAME OF PARENT: SEMPRA ENERGY					
3. INDIVIDUAL WHERE ADDITIONAL IN OBTAINED: Name: JEFF W. KOSKIE	IFORMATION MAY BE	4. HEADQUARTERS ADDRESS: SAN DIEGO GAS & ELECTRIC					
		Company Name					
Email Address: WKoskie@semprautiliti	ies com	8326 CENTURY PAR Street Address	RK COURT, SAN DIE	GO			
•	63.0011	State: CA Zip Code: 9	92123-4150				
Telephone Number: (661) 775-8770		(800) 411-7343 Telephone Number					
5. THIS REPORT PERTAINS TO THE FO and complete the report for that Commod							
Natural Gas							
6. CHARACTERIZE THE PIPELINES AN RESPECT TO COMPLIANCE WITH PHN							
Portions of SOME OR ALL of the pipeline Integrity Management Program subject to PART A, Question 8.		•	• •				
7. FOR THE DESIGNATED "COMMODI" (Select one or both)	TY GROUP", THE PIPELINE	ES AND/OR PIPELINE	FACILITIES INCLUD	ED WITHIN THIS OPID ARE:			
INTERstate pipeline - L facilities included under the		in which INTERst	ate pipelines and	d/or pipeline			
INTRAstate pipeline - L facilities included under th			ate pipelines and	d/or pipeline			

FOLLOW Commod	S THIS REPORT REPRESENT A CHANGE FROM LAST YEAR'S FINAL REPORTED NUMBERS FOR ONE OR MORE OF THE /ING PARTs: PART B, D, E, H, I, J, K, or L? <i>(For calendar year 2010 reporting or if this is a first-time Report for an operator or OPID, dity Group(s), or pipelines and/or pipeline facilities, select the first box only. For subsequent years' reporting, select either No or one or the Yes choices.)</i>
	This report is FOR CALENDAR YEAR 2010 reporting or is a FIRST-TIME REPORT and, therefore, <i>the remaining choices in this Question 8 do not apply</i> . Complete all remaining PARTS of this form as applicable
	NO, there are NO CHANGES from last year's final reported information for PARTs B, D, E, H, I, J, K, or L. Complete PARTs A, C, M, and N, along with PARTs F, G, and O when applicable.
	YES, this report represents a CHANGE FROM LAST YEAR'S FINAL REPORTED INFORMATION for one or more of PARTs B, D, E, H, I, J, K, or L <i>due to corrected information; however, the pipelines and/or pipeline facilities and operations are the same</i> as those which were covered under last year's report. Complete PARTs A, C, M, and N, along with only those other PARTs which changed (including PARTs B, F, G, and O when applicable).
✓	YES, this report represents a CHANGE FROM LAST YEAR'S FINAL REPORTED INFORMATION for PARTS B, D, E, H, I, J, K, or L because of one or more of the following <i>change(s) in pipelines and/or pipeline facilities and/or operations</i> from those which were covered under last year's report. Complete PARTS A, C, M, and N, along with only those other PARTs which changed (including PARTs B, F, G, and O when applicable). <i>(Select all reasons for these changes from the following list)</i>
	 Merger of companies and/or operations, acquisition of pipelines and/or pipeline facilities Divestiture of pipelines and/or pipeline facilities New construction or new installation of pipelines and/or pipeline facilities Conversion to service, change in commodity transported, or c change in MAOP (maximum allowable operating pressure) Abandonment of existing pipelines and/or pipeline facilities Change in HCA's identified, HCA Segments, or other changes to Operator's Integrity Management Program Change in OPID
	Other – Describe: , false

For the designated Commodity Group, complete PARTs B, C, D, and E one time for all pipelines and/or pipeline facilities – both INTERstate and INTRAstate - included within this OPID.

PART B – TRANSMISSION PIPELINE HCA MILES						
	Number of HCA Miles in the IMP Program					
Onshore	174					
Offshore	0					
Total Miles	174					

PART C - VOLUME TRANSPORTED IN TRANSMISSION PIPELINES (ONLY) IN MILLION SCF PER YEAR (excludesTransmission lines of Gas Distribution systems)		Check this box and proceed to PART D without completing this PART of if this report only includes gathering pipelines or transmission lines of gas distribution systems.				
		Onshore	Offshore			
Natural Gas						
Propane Gas						
Synthetic Gas						
Hydrogen Gas						
Other Gas - Name: Y						

PART D - MILES OF STEEL PIPE BY CORROSION PROTECTION									
	Cathodica	Ily protected	Cathodically	unprotected	Total Miles				
	Bare	Coated	Bare	Coated	Total Willes				
Transmission									
Onshore	0	245	0	0	245				
Offshore	0	0	0	0	0				
Subtotal Transmission	0	245	0	0	245				
Gathering									
Onshore Type A	0	0	0	0	0				
Onshore Type B	0	0	0	0	0				
Offshore	0	0	0	0	0				
Subtotal Gathering	0	0	0	0	0				
Total Miles	0	245	0	0	245				

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PART E - MILES OF non-STEEL PIPE BY TYPE AND LOCATION										
	Cast Iron Pipe	Wrought Iron Pipe	Plastic Pipe	Other Pipe	Total Miles					
Transmission										
Onshore	0	0	0	0	0					
Offshore	0	0	0	0	0					
Subtotal Transmission	0	0	0	0	0					
Gathering										
Onshore Type A	0	0	0	0	0					
Onshore Type B	0	0	0	0	0					
Offshore	0	0	0	0	0					
Subtotal Gathering	0	0	0	0	0					
Total Miles	0	0	0	0	0					

For the designated Commodity Group, complete PARTs F and G one time for all INTERstate pipelines and/or pipeline facilities included within this OPID and multiple times as needed for the designated Commodity Group for each State in which INTRAstate pipelines and/or pipeline facilities included within this OPID exist. Each time these sections are completed, designate the State to which the data applies for INTRAstate pipelines and/or pipeline facilities, or that it applies to all INTERstate pipelines included within this Commodity Group and OPID.

PARTs F and G

The data reported in these PARTs F and G applies to: (select only one)

FRASTATE pipelines/pipeline facilities CALIFORNIA	
MILEAGE INSPECTED IN CALENDAR YEAR USING THE FOLLOWING IN-LINE INSPECTION (ILI) TOOLS	
a. Corrosion or metal loss tools	0
b. Dent or deformation tools	0
c. Crack or long seam defect detection tools	0
d. Any other internal inspection tools	0
e. Total tool mileage inspected in calendar year using in-line inspection tools. (Lines a + b + c + d)	0
ACTIONS TAKEN IN CALENDAR YEAR BASED ON IN-LINE INSPECTIONS	
a. Based on ILI data, total number of anomalies excavated in calendar year because they met the operator's criteria for excavation.	0
b. Total number of anomalies repaired in calendar year that were identified by ILI based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	0
c. Total number of conditions repaired WITHIN AN HCA SEGMENT meeting the definition of:	0
1. "Immediate repair conditions" [192.933(d)(1)]	0
2. "One-year conditions" [192.933(d)(2)]	0
3. "Monitored conditions" [192.933(d)(3)]	0
4. Other "Scheduled conditions" [192.933(c)]	0
MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON PRESSURE TESTING	
a. Total mileage inspected by pressure testing in calendar year.	0
b. Total number of pressure test failures (ruptures and leaks) repaired in calendar year, both within an HCA Segment and outside of an HCA Segment.	0
c. Total number of pressure test ruptures (complete failure of pipe wall) repaired in calendar year WITHIN AN HCA SEGMENT.	0
d. Total number of pressure test leaks (less than complete wall failure but including escape of test medium) repaired in calendar year WITHIN AN HCA SEGMENT.	0
MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON DA (Direct Assessment methods)	
a. Total mileage inspected by each DA method in calendar year.	28
1. ECDA	28
2. ICDA	0
3. SCCDA	0
b. Total number of anomalies identified by each DA method and repaired in calendar year based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	0
1. ECDA	0
2. ICDA	0
3. SCCDA	0
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT meeting the definition of:	1
1. "Immediate repair conditions" [192.933(d)(1)]	0
2. "One-year conditions" [192.933(d)(2)]	0

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3. "Monitored conditions" [192.933(d)(3)]	1
4. Other "Scheduled conditions" [192.933(c)]	0
5. MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON OTHER INSPECTION TECHNIQ	UES
a. Total mileage inspected by inspection techniques other than those listed above in calendar year.	0
b. Total number of anomalies identified by other inspection techniques and repaired in calendar year based on the operator's criteria, both within an HCA Segment and outside of an HCA Segment.	he 0
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT meeting the definition of:	0
1. "Immediate repair conditions" [192.933(d)(1)]	0
2. "One-year conditions" [192.933(d)(2)]	0
3. "Monitored conditions" [192.933(d)(3)]	0
4. Other "Scheduled conditions" [192.933(c)]	0
6. TOTAL MILEAGE INSPECTED (ALL METHODS) AND ACTIONS TAKEN IN CALENDAR YEAR	
a. Total mileage inspected in calendar year. (Lines 1.e + 3.a + 4.a.1 + 4.a.2 + 4.a.3 + 5.a)	28
b. Total number of anomalies repaired in calendar year both within an HCA Segment and outside of an HCA Segment. (Lines 2.b + 3.b + 4.b.1 + 4.b.2 + 4.b.3 + 5.b)	0
c. Total number of conditions repaired in calendar year WITHIN AN HCA SEGMENT. (Lines 2.c.1 + 2.c.2 + 2.c. 2.c.4 + 3.c + 3.d + 4.c.1 + 4.c.2 + 4.c.3 + 4.c.4 + 5.c.1 + 5.c.2 + 5.c.3 + 5.c.4)	³⁺ 1
PART G– MILES OF BASELINE ASSESSMENTS AND REASSESSMENTS COMPLETED IN CALENDAR YEAR (HCA ONLY)	A Segment miles
a. Baseline assessment miles completed during the calendar year.	13
b. Reassessment miles completed during the calendar year.	2
c. Total assessment and reassessment miles completed during the calendar year.	15

For the designated Commodity Group, complete PARTs H, I, J, K, L, and M covering INTERstate pipelines and/or pipeline facilities for each State in which INTERstate systems exist within this OPID and again covering INTRAstate pipelines and/or pipeline facilities for each State in which INTRAstate systems exist within this OPID.

PARTs H, I, J, K, L and M

The data reported in these PARTs H, I, J, K, L and M applies to:

INTRASTATE pipelines/pipeline facilities CALIFORNIA

PART H - MILES OF TRANSMISSION PIPE BY NOMINAL PIPE SIZE (NPS)

	_										
	NPS 4" or less	6"	8"	10"	12"	14"	16"	18"	20"		
Onshore	0	0	9	14	6	0	95	0	29		
	22"	24"	26"	28"	30"	32"	34"	36"	38"		
	0	1	0	0	60	0	0	31	0		
	40"	42"	44"	46"	48"	50"	52"	54"	56"		
	0	0	0	0	0	0	0	0	0		
	58" and over Additional Sizes and Miles (Size – Miles;): 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0;										
	0				, , , , ,						
245		of Onshore Pip	e – Transmissi	on							
	NPS 4" or less	6"	8"	10"	12"	14"	16"	18"	20"		
	22"	24"	26"	28"	30"	32"	34"	36"	38"		
Offshore	40"	42"	44"	46"	48"	50"	52"	54"	56"		
	58" and over Additional Sizes and Miles (Size – Miles;): -; -; -; -; -; -; -; -; -;										
	Total Miles c	of Offshore Pipe	e – Transmissi	on							

	NPS 4 or less		8"	10"	12"	14"	16"		18"	20"
Onshore	22"	24"	26"	28"	30"	32"	34"		36"	38"
Гуре А	40"	42"	44"	46"	48"	50"	52"	54"	56"	58" and over
	Addition	al Sizes and Miles	(Size – Miles;):			-				
	Total Mi	les of Onshore Typ	e A Pipe – Gathe	ring						
	NPS 4 or less		8"	10"	12"	14"	16"		18"	20"
	22"	24"	26"	28"	30"	32"	34"		36"	38"
Dnshore Гуре B	40"	42"	44"	46"	48"	50"	52"	54"	56"	58" and
	40	72			-0	50	52			over
	Addition	al Sizes and Miles	(Size – Miles;):							
	Total Mi	les of Onshore Typ	e B Pipe – Gathe	ring						
	NPS 4 or less		8"	10"	12"	14"	16"		18"	20"
	22"	24"	26"	28"	30"	32"	34"		36"	38"
Offshore	40"	42"	44"	46"	48"	50"	52"	54"	56"	58" and over
	Addition	al Sizes and Miles	(Size – Miles;):							
	Total Mi	les of Offshore Pip	e – Gathering							
PART J – M	IILES OF	PIPE BY DEC	ADE INSTAL	LED						
Decade Pipe		Pre-40 or Unknown	1940 - 1949	1950 - 1959	196	60 - 1969	1970 - 19	79	1980 -	1989
Fransmissi	on									
Onshore		2	53	41		65	28		7	7
Offshore										
Subtotal Tran	smission	2	53	41		65	28		7	7
Gathering										
Onshore T					_					
Onshore T	уре В				_					
Offshore										
Subtotal C	athering									

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Total Miles	2	53	41	65	28		7
Decade Pipe Installed	1990 - 1999	2000 - 2009	2010 - 2019				Total Miles
Transmission							
Onshore	43	5	1				245
Offshore							
Subtotal Transmission	43	5	1				245
Gathering							
Onshore Type A							
Onshore Type B							
Offshore							
Subtotal Gathering							
Total Miles	43	5	1				245
PART K- MILES OF		N PIPE BY S		IMUM YIEL		тн	Total Mile
ONSHO	RE	Class I	Class	2 CI	ass 3	Class 4	
Less than 20% SMY	′S	0	0		0	0	0
Greater than or equ SMYS but less than		3	0		22	0	25
Greater than or equal to 30% SMYS but less than or equal to 40% SMYS		11	8		71	0	90
Greater than 40% S than or equal to 50%		16	3		110	0	129
Greater than 50% S than or equal to 60%	% SMYS	0	0		1	0	1
Greater than 60% S than or equal to 72%	% SMYS	0	0		0	0	0
Greater than 72% S than or equal to 80%	% SMYS	0	0		0	0	0
Greater than 80% S		0	0		0	0	0
Unknown percent o	f SMYS	0	0		0	0	0
All Non-Steel pipe		0	0		0	0	0
	Onshore Totals	30	11	:	204	0	245
OFFSHORE		Class I					
Less than or equal							
Greater than 50% S than or equal to 72%	% SMYS						
	Offshore Total						
	Total Miles	30					245
PART L - MILES OF							
-AKIL-WILES OF						Total	
		Cla	ss Location		Cla	ss Location	HCA Miles in th

Class I

Class 3

Class 2

IMP Program

Class Location

Miles

Class 4

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Transmission						
Onshore	30	11	204	0	245	174
Offshore	0	0	0	0	0	
Subtotal Transmission	30	11	204	0	245	
Gathering						
Onshore Type A						
Onshore Type B						
Offshore						
Subtotal Gathering						
Total Miles	30	11	204	0	245	174

PART M - INCIDENTS, FAILURES, LEAKS, AND REPAIRS

PART M1 – ALL LEAKS ELIMINATED/REPAIRED IN CALENDAR YEAR; INCIDENTS & FAILURES IN HCA SEGMENTS IN CALENDAR YEAR

	1	ransmiss	ion Incidents,	Leaks, aı	nd Failures		G	athering l	Leaks
	Incidents	Leaks				Failures	Onshore		Offshore
	in HCA Segments	Onshore Leaks		Offshore Leaks		in HCA Segments	Leaks		Leaks
Cause		HCA	Non-HCA	HCA	Non-HCA		Type A	Туре В	
External Corrosion	0	0	0	0	0	0			
Internal Corrosion	0	0	0	0	0	0			
Stress Corrosion Cracking	0	0	0	0	0	0			
Manufacturing	0	0	0	0	0	0			
Construction	0	0	0	0	0	0			
Equipment	0	1	0	0	0	0			
Incorrect Operations	0	0	0	0	0	0			
	Th	nird Party	/ Damage/M	echanic	al Damage		_		
Excavation Damage	0	0	0	0	0	0			
Previous Damage (due to Excavation Activity)	0	0	0	0	0	0			
Vandalism (includes all Intentional Damage)	0	0	0	0	0	0			
Weather Related/Other Outs	side Force						•		
Natural Force Damage (all)	0	0	0	0	0	0			
Other Outside Force Damage (excluding Vandalism and all Intentional Damage)	0	0	0	0	0	0			
Other	0	0	0	0	0	0			
Total	0	1	0	0	0	0			
PART M2 – KNOWN SYSTEM LE	AKS AT END	OF YEAR	SCHEDULED F	OR REP	AIR				
Transmission			Gathering	,					
PART M3 – LEAKS ON FEDERAL REPAIR	LAND OR O	CS REPAIR	RED OR SCHE	DULED F	OR				
Transmission			Gathe	ring					

Transmission		Gathering		
Onakana	0	Onshore Type A		
Onshore	0	Onshore Type B		
OCS	0	OCS		
Subtotal Transmission	0	Subtotal Gathering		
Total	0			

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For the designated Commodity Group, complete PART N one time for all of the pipelines and/or pipeline facilities included within this OPID, and then also PART O if any portion(s) of the pipelines and/or pipeline facilities covered under this Commodity Group and OPID are included in an Integrity Management Program subject to 49 CFR 192.

PART N - PREPARER SIGNATURE (applicable to all PARTs A - M)		
ROBERT W. CONAWAY Preparer's Name(type or print)	(213) 244-5429 Telephone Number	
TECHNICAL ADVISOR II	(213) 244-8116 Facsimile Number	
Preparer's Title		
rconaway@semprautilities.com		
Preparer's E-mail Address		
PART O - CERTIFYING SIGNATURE (applicable only to PARTs B, F, G, and M1)		
PART O - CERTIFYING SIGNATURE (applicable only to PARTs B, F, G, and M1) RICHARD M. MORROW	(213) 244-3650	
	(213) 244-3650 Telephone Number	
RICHARD M. MORROW Senior Executive Officer's signature certifying the information in PARTs B, F, G, and M as required by		
RICHARD M. MORROW Senior Executive Officer's signature certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f)		
RICHARD M. MORROW Senior Executive Officer's signature certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f) RICHARD M. MORROW Senior Executive Officer's name certifying the information in PARTs B, F, G, and M as required by		
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RICHARD M. MORROW Senior Executive Officer's signature certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f) RICHARD M. MORROW Senior Executive Officer's name certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f) VICE PRESIDENT- ENGINEERING & OPERATIONS STAFF Senior Executive Officer's title certifying the information in PARTs B, F, G, and M as required by		