	-0612 (Rev. 8/98)
Gas Distribution and	Technical Services

Leak Survey Log # OF SERVICES PCC NUMBER DATE OPERATOR INST TYPE INST# MILES OF MAIN REPORTED BY ☐ CALL IN REVIEWED BY . ☐ MOBILE SURVEY ☐ FOOT SURVEY REVIEW DATE ☐ OTHER EMPLOYEE

LEAK NUMBER	DATE FOUND	TIME FOUND	ADDRESS/CITY	PAVED WALL TO WALL?	SOL ⁵	LEAK LOC WM/PLT	REC. LGC. WM/PLT	BLOCK	READING	ő	LOCATION REMARKS	OPTIONAL GR 3 RECHECK INTERVAL
				WALL?								
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INSTRUMENT TYPE: Enter <u>H</u> - Hydrogen flame ionization or <u>C</u>- Combustible gas indicator SURFACE OVER LEAK: Enter <u>C</u> - Concrete, <u>T</u> - Tar Compound, <u>U</u> - Unsurfaced, or <u>O</u> - Other GRADE: Enter Grade or 2+ for Pnority Grade 2. Enter a 0 (zero) if no leak is found on a customer Call In

LEAK SURVEY LOG INSTRUCTIONS

Field	Required?	Instructions
PCC NUMBER	No	Fill in the appropriate Provider Cost Center (PCC) number for the area in which the leak occurred.
REVIEWED BY	Yes	* The signature or initials of the gas construction supervisor or qualified management person who reviewed the leak grading criteria and documented the date of the review.
REPORTED BY CALL IN MOBILE SURVEY FOOT SURVEY OTHER EMPLOYEE	Yes	Check one box to reflect how the leak indication was discovered. "Call In" is for leaks reported by customers or other non-PG&E personnel (for example, fire departments). "Mobile Survey" is for leaks discovered by conducting a leak survey using a vehicle (M-53.4). "Foot Survey" is for leaks discovered by walking. "Other Employee" is for leaks reported by a PG&E employee who is not conducting a scheduled leak survey.
DATE OPERATOR	Yes	For each day the form is used to record leak indications, record the date, the operator's initials or LAN ID.
INST TYPE® INST # MILES OF MAIN SERVICES	Yes	Record the Instrument Type that was used to record leak indication. See footnote 'a' on front of form for valid entries. Enter Instrument number. Record the miles of main surveyed (to the tenth of the mile) and the number of services surveyed each day if used for routine survey.
LEAK NUMBER DATE TIME FOUND FOUND	Yes	Record the leak number assigned by the Mapping Department, the date found and the time found (in 24-hour clock).
ADDRESS/CITY	Yes	Record the nearest address of the building where the leak is located. Also record city or unincorporated area. If no address, write in description.
PAVED WALL SOL ^b	Yes	Record the surface over the leak as indicated in footnote 'b' on front of form. (C = Concrete, T = Tar Compound, U = Unsurfaced, O = Other). Record a "Y" if the leak indication is in an area paved wall to wall.
LEAK LOC. REC. LOC. BLOCK WM/PLT WM/PLT	Yes	Enter the leak Location Wall Map and Plat numbers, (the Plat on which the leaking gas facility exists). Enter the Recorded Wall Map and Plan and Block number of the Leak.
READING G ^c	Yes	Record the gas leak reading indication on the instrument and specify units (for example, 200 PPM, 40%LEL, or 10% GAS). Using the grading criteria specified in DCS/GTS Standard D-S0350/S4100. Grade the leak 1, 2+, 2, or 3. Refer to footnote 'c' on front of form.
LOCATION REMARKS	Yes	Record a more detailed description to pinpoint the leak indication (For example, "Leak Indication on service at curb," "In water meter box.")
OPTIONAL GR 3 RECHECK INTERVAL	No	Enter the number of months for the Grade 3 Leak Recheck interval if different from the next scheduled survey (for example, 12, 18, 36 months). Minimum interval is 12 months. If left blank, default will be the next scheduled survey after current year survey.

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^{*} Mapping is responsible for reviewing all data for completeness and accuracy.