			Initial Date Submitted:	03/06/2024			
2	U.S. Department of Transportation Pipeline and Hazardous Materials Safety Administration	ANNUAL REPORT FOR CALENDAR YEAR 2023 GAS DISTRIBUTION SYSTEM	Report Submission Type	INITIAL			
			Date Submitted:				
A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0629. Public reporting for this collection of information is estimated to be approximately 20 hours per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE, Washington, D.C. 20590.							

PART A - OPERATOR		(DO	T use only)			20240633	3-57643			
1. Name of Operator		WEST COAS	T GAS CO I	NC						
2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY BE OBTAINED)										
2a. Street A	Address	9203 Beatty [	Drive							
2b. City and	d County	Sacramento								
2c. State		CA								
2d. Zip Coo	le			95826						
3. OPERATOR'S 5 D	IGIT IDENTIFICATION NUMBER			31267						
4. HEADQUARTERS	NAME & ADDRESS									
4a. Street A	Address			9203 BEATT	EATTY DRIVE					
4b. City and	d County			SACRAMENTO						
4c. State			CA							
4d. Zip Coo	le			95826						
5. STATE IN WHICH SYSTEM OPERATES CA										
6. THIS REPORT PE complete the report for	RTAINS TO THE FOLLOWING COMN or that Commodity Group. File a separa	IODITY GRO	OUP (Sele each Con	ct Commodity C modity Group i	Group based ncluded in th	on the pro	edominant gas c	arried and		
Natural Gas	Natural Gas									
7. THIS REPORT PERTAINS TO THE FOLLOWING TYPE OF OPERATOR (Select Type of Operator based on the structure of the company included in this OPID for which this report is being submitted.):										
Privately Owned										
PART B - SYSTEM DE	SCRIPTION									
1.GENERAL										
	STEEL									

		ST	EEL								
	UNPROTECTED CATHODICALLY PROTECTED		PLASTIC CAST/ WROUGHT IRON		DUCTILE IRON	COPPER	OTHER	RECONDITION ED CAST IRON	SYSTEM TOTAL		
	BARE	COATED	BARE	COATED							
MILES OF MAIN	0	0	0	26	14	0	0	0	0	0	40
NO. OF SERVICES	0	0	0	82	1308	0	0	0	0	0	1390

## 2. MILES OF MAINS IN SYSTEM AT END OF YEAR

MATERIA	4L U	JNKNOWN	2" OR	LESS	OVER 2" THRU 4"		OVER 4" THRU 8"	OVEF THRU		<b>OVER 12</b> "	SYSTI	EM TOTALS
STEEL		0	6		15	5		0	0		26	
DUCTILE II	RON	0	0		0	0		0	0		0	
COPPE	R	0	0		0	0		0	0		0	
CAST/WROU	JGHT	0	0		0	0		0	0		0	
PLASTIC F	PVC	0	0		0	0		0	0		0	
PLASTIC	PE	0	0		14	0		0	0		14	
PLASTIC A	ABS	0	0		0	0		0	0		0	
PLASTIC OT	THER	0	0		0	0		0	0		0	
OTHER	2	0	0		0	0		0	0		0	
RECONDITIO		0	0		0	0		0	0		0	
TOTAL		0	6		29	5		0	0		40	
Descr	ibe Other N	laterial:		•		•		•	•			
NUMBER C	OF SERVICES	S IN SYSTEM	AT END OF	YEAR		AVERAG	SE SERVICE LE	ENGTH: 46				
MATERIAL UNKNOWN		1" OF	LESS	OVER 1" THRU 2"		OVER 2" THRU 4"	OVEF THRU		OVER 8"	SYST	ΕΜ ΤΟΤΑΙ	
STEEL	0		0		82	0		0	0		82	
UCTILE IRC	0 <b>ИС</b>		0		0	0		0	0		0	
OPPER	0		0		0	0		0	0		0	
CAST/WROU RON	IGHT 0		0		0	0		0	0		0	
PLASTIC PV	<b>c</b> 0		0		0	0		0	0		0	
PLASTIC PE	0		1271		36	1		0	0		1308	
PLASTIC AB	<b>s</b> 0		0		0	0		0	0		0	
PLASTIC OT	HER 0		0		0	0		0	0		0	
OTHER	0		0		0	0		0	0		0	
	DNED 0		0		0	0		0	0		0	
RECONDITIC					118	1		0	0		1390	
CAST IRON	0		1271		110							
CAST IRON	0 ner Material:		1271		110	1						
CAST IRON TOTAL Describe Oth	ner Material:	UMBER OF \$			DF INSTALLA							
CAST IRON OTAL Describe Oth	ner Material:	1		Y DECADE (	DF INSTALLA	TION 1970-197	9 1980-1989	1990-1999	2000-2009	2010-2019	2020-2029	ΤΟΤΑΙ
CAST IRON TOTAL Describe Oth	ner Material: MAIN AND N	1	SERVICES B	Y DECADE (	DF INSTALLA	-	<b>9 1980-1989</b> 0	<b>1990-1999</b> 0	<b>2000-2009</b> 10	<b>2010-2019</b> 0	<b>2020-2029</b> 0	<b>TOTAI</b> 40

NOTICE: This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty OMB No. 2137-0629 as provided in 49 USC 60122.

OMB NO: 2137-0629 EXPIRATION DATE: 6/30/2026

CAUSE OF LEAK	N	IAINS	SEI	RVICES
	TOTAL	HAZARDOUS	TOTAL	HAZARDOUS
CORROSION FAILURE	0	0	0	0
NATURAL FORCE DAMAGE	0	0	0	0
EXCAVATION DAMAGE	0	0	0	0
OTHER OUTSIDE FORCE DAMAGE	0	0	0	0
PIPE, WELD OR JOINT FAILURE	0	0	0	0
EQUIPMENT FAILURE	0	0	0	0
INCORRECT OPERATIONS	0	0	0	0
OTHER CAUSE	0	0	0	0
NUMBER OF KNOWN SYSTEM LEAKS AT END NUMBER OF HAZARDOUS LEAKS INVOLVING		T FAILURE : 0		
PART D - EXCAVATION DAMAGE		PART E – RESERVED		
a. One-Call Notification Practices Not Suffic b. Locating Practices Not Sufficient: <u>0</u> c. Excavation Practices Not Sufficient: <u>0</u> d. Other <u>:</u> <u>0</u>				
2. NUMBER OF EXCAVATION TICKETS 44	<u>1</u>			
PART F - LEAKS ON FEDERAL LAND		PART G - PERCENT OF	UNACCOUNTED FOR	GAS
TOTAL NUMBER OF LEAKS ON FEDERAL SCHEDULED TO REPAIR: <u>0</u>	LAND REPAIRED O	R UNACCOUNTED FOR GA FOR THE 12 MONTHS E [(PURCHASED GAS + PI COMPANY USE + APPR (CUSTOMER USE + COI TIMES 100 EQUALS PER FOR YEAR ENDING 6/30	NDING JUNE 30 OF THI RODUCED GAS) MINUS OPRIATE ADJUSTMEN MPANY USE + APPROP RCENT UNACCOUNTED	E REPORTING YEAR. 6 (CUSTOMER USE + TS)] DIVIDED BY RIATE ADJUSTMENTS]

PART H - ADDITIONAL INFORMATION									
PART I - PREPARER									
Cynthia Morris Adminstrator	<u>(916) 364-4100</u>								
(Preparer's Name and Title)	(Area Code and Telephone Number)								
westgas@aol.com	(916) 364-4200								
(Preparer's email address)	(Area Code and Facsimile Number)								