Notice: '	This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty not to exceed \$100,000 for each violation	1
for each	day the violation continues up to a maximum of \$1,000,000 as provided in 49 USC 60122.	0

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9	U.S. Department of Transportation	ANNUAL REPORT FOR CALENDAR YEAR 2016	Initial Date Submitted	03/14/2017
	Pipeline and Hazardous Materials Safety Administration	NATURAL OR OTHER GAS TRANSMISSION and GATHERING SYSTEMS	Report Submission Type	INITIAL
			Date Submitted	
A federa	I agency may not conduct or s	ponsor, and a person is not required to respond to, nor shall a person be	e subject to a pena	Ity for failure to

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 2137-0522. Public reporting for this collection of information is estimated to be approximately 42 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 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.

Important: Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the PHMSA Pipeline Safety Community Web Page at http://www.phmsa.dot.gov/pipeline/library/forms.

PART A - OPERATOR INFORMATION	DOT USE ONLY	20175901 - 32818				
1. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER (OPID) 18112	2. NAME OF OPERATOR: SAN DIEGO GAS & ELECTRIC CO					
3. RESERVED	4. HEADQUARTERS 8326 CENTURY PAR Street Address SAN DIEGO City					
	State: CA Zip Code: 92123					
5. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY (and complete the report for that Commodity Group. File a separate re Natural Gas						
6. RESERVED						
 7. FOR THE DESIGNATED "COMMODITY GROUP", THE PIPELIN (Select one or both) INTERstate pipeline – List all of the States pipelines and/or pipeline facilities included INTRAstate pipeline – List all of the States facilities included under this OPID exist. C 	and OSC portions under this OPID e in which INTRAsta	in which INTERstate xist. etc.				
8. RESERVED						

For the designated Commodity Group, PARTs B and D will be calculated based on the data entered in Parts L and P respectively. Complete Part C 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						
Onshore	188						
Offshore	0						
Total Miles	188						

PART C - VOLUME TRANSPORTED IN TRAN PIPELINES (ONLY) IN MILLION SCF PER YEA (excludesTransmission lines of Gas Distribu	AR	Check this box and do not complete PART C if this report only includes gathering pipelines or transmission lines of gas distribution systems.					
		Onshore	Offshore				
Natural Gas							
Propane Gas							
Synthetic Gas							
Hydrogen Gas							
Landfill Gas							
Other Gas - Name:							

PART D - MILES OF S	STEEL PI	PE BY COR		OTECTION						
		athodically tected	Steel Cathodically unprotected							
	Bare	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other	Total Miles
Transmission										
Onshore	0	225	0	0	0	0	0	0	0	225
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Transmission	0	225	0	0	0	0	0	0	0	225
Gathering										
Onshore Type A	0	0	0	0	0	0	0	0	0	0
Onshore Type B	0	0	0	0	0	0	0	0	0	0
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Gathering	0	0	0	0	0	0	0	0	0	0
Total Miles	0	225	0	0	0	0	0	0	0	225

¹Use of Composite pipe requires a PHMSA Special Permit or waiver from a State

PART E - RESERVED

For the designated Commodity Group, complete PARTs F and G one time for all INTERstate pipeline facilities included within this OPID and multiple times as needed for the designated Commodity Group for each State in which INTRAstate pipeline facilities included within this OPID exist. Part F "WITHIN AN HCA SEGMENT" data and Part G may be completed only if HCA Miles in Part L is greater than zero.

PARTs F and G

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

- Interstate pipelines/pipeline facilities
- Intrastate pipelines/pipeline facilities in the State of CALIFORNIA (complete for each State) \boxtimes

ILEAGE INSPECTED IN CALENDAR YEAR USING THE FOLLOWING IN-LINE INSPECTION (ILI) TOOLS	
a. Corrosion or metal loss tools	50
b. Dent or deformation tools	50
c. Crack or long seam defect detection tools	0
d. Any other internal inspection tools, specify other tools:	0
1. Internal Inspection Tools - Other	
e. Total tool mileage inspected in calendar year using in-line inspection tools. (Lines a + b + c + d)	100
CTIONS 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.	2
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
IILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON PRESSURE TESTING	<u>, , , , , , , , , , , , , , , , , , , </u>
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
ILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON DA (Direct Assessment methods)	
a. Total mileage inspected by each DA method in calendar year.	3
1. ECDA	3
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:	0

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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
5. MILEAGE INSPECTED AND ACTIONS TAKEN IN CALENDAR YEAR BASED ON OTHER INSPECTION TECHNIQUES	
a. Total mileage inspected by inspection techniques other than those listed above in calendar year.	0
1.Other Inspection Techniques	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.	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©]	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)	103
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.3 + 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)	0
	0
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) d. Total number of actionable anomalies eliminated by pipe replacement in calendar year WITHIN AN HCA	
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) d. Total number of actionable anomalies eliminated by pipe replacement in calendar year WITHIN AN HCA SEGMENT: e. Total number of actionable anomalies eliminated by pipe abandonment in calendar year WITHIN AN HCA	0
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) d. Total number of actionable anomalies eliminated by pipe replacement in calendar year WITHIN AN HCA SEGMENT: e. Total number of actionable anomalies eliminated by pipe abandonment in calendar year WITHIN AN HCA SEGMENT: PART G- MILES OF BASELINE ASSESSMENTS AND REASSESSMENTS COMPLETED IN CALENDAR YEAR (HCA Segments)	0
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) d. Total number of actionable anomalies eliminated by pipe replacement in calendar year WITHIN AN HCA SEGMENT: e. Total number of actionable anomalies eliminated by pipe abandonment in calendar year WITHIN AN HCA SEGMENT: PART G- MILES OF BASELINE ASSESSMENTS AND REASSESSMENTS COMPLETED IN CALENDAR YEAR (HCA Seg ONLY)	0

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For the designated Commodity Group, complete PARTs H, I, J, K, L, M, P Q and R 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, M, P, Q, and R

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

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			
	0	0	2	10	6	0	91	0	24			
	22	24	26	28	30	32	34	36	38			
Onshore	0	1	0	0	60	0	0	31	0			
	40	42	44	46	48	52	56	58 and over				
	0	0	0	0	0	0	0	0				
	Additional Sizes and Miles (Size – Miles;): 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0; 0 - 0;											
225		of Onshore Pip	e – Transmissi	on								
	NPS 4 or less	6	8	10	12	14	16	18	20			
			00	00		00	0.4		00			
	22	24	26	28	30	32	34	36	38			
Offshore	40	42	44	46	48	52	56	58 and over				
	Additional Sizes and Miles (Size – Miles;): -; -; -; -; -; -; -; -; -;											
	Total Miles o	of Offshore Pip	e – Transmissi	on								
PART I - MIL	ES OF GA	THERING F	PIPE BY NC	MINAL PIP	PE SIZE (NF	PS)						
	NPS 4 or less	6	8	10	12	14	16	18	20			
Onshore Type A	22	24	26	28	30	32	34	36	38			
- 789 77												
	40	42	44	46	48	52	56 58 a ove					

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	Addition	al Sizes and Miles	(Size – Miles;)								
		iles of Onshore Type									
	NPS 4	4 6	8	10	12	14	16		18	20	
	or les	s	0								
	22	24	26	28	30	32	34		36	38	
Onshore											
Туре В	40	42	44	46	48	52	56	58 a			
								over	r		
	Addition	al Sizes and Miles	(Size – Miles;)	:							
	Total Mi	iles of Onshore Type	e B Pipe – Gat	thering							
	NPS 4	4 6	8	10	12	14	16		18	20	
	or les	s	0	10	12	14	10		10	20	
	22	24	26	28	30	32	34		36	38	
Offshore		2.	20	20		02					
Unshore	40	42	44	46	48	52	56	58 a			
								over	r		
	Addition	al Sizes and Miles	(Size – Miles;)	:							
	Total Mi	iles of Offshore Pipe	e – Gathering								
		· ·									
PART J – M	ILES OF	F PIPE BY DEC	ADE INST	ALLED							
Decade Pipe		Unknown	Pre-40	1940 -	1949 1	950 - 1959	1960 - 1	969		1970 - 1979	
Installed Transmissio	n										
Onshore	///	0	2	52		36	63		21		
Offshore		-	0								
Subtotal Trans	mission	0	2	52		36 63				21	
Gathering											
Onshore Typ	be A		0								
Onshore Typ	be B		0								
Offshore			0								
Subtotal Ga	athering		0								
Total Miles		0	2	52		36	63			21	
Decade Pipe Installed		1980 - 1989	1990 - 199	9 2000 - 2	2009 2	2010 - 2019	2020 - 2	029		Total Miles	
Transmissio	on										
Onshore		3	43	4		1				225	
Offshore										0	
Subtotal Trans	mission	3	43	4		1				225	
Gathering											

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Onchara Tura A	1					Expires: 1/31/2023
Onshore Type A				-		0
Onshore Type B						0
Offshore						0
Subtotal Gathering						0
Total Miles	3	43	4	1		225
PART K- MILES OF	TRANSMISSION	PIPE BY SPI	ECIFIED MI		STRENGTH	
	DE		CL	ASS LOCATION		Total Miles
ONSHO	IRE	Class I	Class	2 Class	3 Class 4	
Steel pipe Less than 2	20% SMYS	0	0	0	0	0
Steel pipe Greater tha 20% SMYS but less the		2	0	23	0	25
Steel pipe Greater th 30% SMYS but less th 40% SMYS		10	8	92	0	110
Steel pipe Greater the but less than or equa		13	4	73	0	90
Steel pipe Greater the but less than or equa	to 60% SMYS	0	0	0	0	0
Steel pipe Greater than 60% SMYS but less than or equal to 72% SMYS		0	0	0	0	0
Steel pipe Greater the but less than or equa	to 80% SMYS	0	0	0	0	0
Steel pipe Greater th		0	0	0	0	0
Steel pipe Unknown	percent of SMYS	0	0	0	0	0
All Non-Steel pipe		0	0	0	0	0
	Onshore Totals	25	12	188	0	225
OFFSHORE		Class I				
Less than or equal to						
Greater than 50% SM or equal to 72% SMYS						
Steel pipe Greater that						
Steel Pipe Unknown						
All non-steel pipe						
	Offshore Total					
	Total Miles	25				225
	Total Miles	25				225
PART L - MILES OF	PIPE BY CLASS				T	1
		Class	Location		Total Class Location	HCA Miles in the IMP
	Class I	Class 2	Class 3	Class 4	Miles	Program
Transmission						
Onshore	25	12	188	0	225	188
Offshore		0	0	0	0	
Subtotal Transmissio	n 25	12	188	0	225	
Subtotal Transmission	n 25	12	188	0	225	

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	-	n			-		E	xpires: 1/31/2023	
Onshore Type A									
Onshore Type B									
Offshore									
Subtotal Gathering									
Total Miles	25	12		188	0		225	188	
	20			100	, i i i i i i i i i i i i i i i i i i i			100	
PART M – FAILURES, LE PART M1 – ALL LEAKS ELIMIN			ENDAR YI	EAR; INCIDE	NTS & FAILURE	S IN HCA S	EGMENTS IN	I CALENDAR YEAR	
	T	Transmissi	on Leaks	and Failures			Gathering	1 Loaks	
				anu i anules		Quality			
	0	Lea	-		Failures in HCA	Onsho	re Leaks	Offshore Leaks	
Causa		ore Leaks		ore Leaks	Segments				
Cause	HCA	Non-HCA	HCA	Non-HCA	-	Туре А	Type B		
External Corrosion	0	0	0	0	0				
Internal Corrosion	0	0	0	0	0				
Stress Corrosion Cracking	0	0	0	0	0	 			
Manufacturing	1	0	0	0	0	 			
Construction	0	0	0	0	0	 			
Equipment	5	2	0	0	0	 			
Incorrect Operations	0	1	0	0	0	l			
Third Party Damage/Mec	1		r		1	r			
Excavation Damage	0	0	0	0	0				
Previous Damage (due to Excavation Activity)	0	0	0	0	0				
Vandalism (includes all	0	0	0	0	0				
Intentional Damage)		-	l	Ľ					
Weather Related/Other C	- 1	· · · · · · · · · · · · · · · · · · ·	1	i	1				
Natural Force Damage (all)	0	0	0	0	0				
Other Outside Force Damage (excluding Vandalism and all Intentional Damage)	0	0	0	0	0				
Other	0	0	0	0	0				
Tota	l 6	3	0	0	0				
PART M2 – KNOWN SYSTEM L		ID OF YEAR S		ED FOR REF	AIR				
Transmission	0		Gathe		0	1			
PART M3 – LEAKS ON FEDER		OCS REPAIR							
Transmission				athering					
		Oneho		-		1			
Onshore	0		Onshore Type A Onshore Type B						
OCS	0	OCS				ļ			
Subtotal Transmission	0	Sub	ototal Gath	ering					
Total			0			1			

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DADT D _ MILES OF DIDE BY MATER	AL AND CORROSION PROTECTION STATUS

	Steel Cathodically Ste protected			hodically tected						
	Bare	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other ²	Total Miles
Transmission										
Onshore	0	225	0	0	0	0	0	0	0	225
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Transmission	0	225	0	0	0	0	0	0	0	225
Gathering										
Onshore Type A	0	0	0	0	0	0	0	0	0	0
Onshore Type B	0	0	0	0	0	0	0	0	0	0
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Gathering	0	0	0	0	0	0	0	0	0	0
Total Miles	0	225	0	0	0	0	0	0	0	225

¹Use of Composite pipe requires PHMSA Special Permit or waiver from a State ²specify Other material(s):

Part Q - Gas Transmission Miles by §192.619 MAOP Determination Method

	(a)(1) Total	(a)(1) Incomplete Records	(a)(2) Total	(a)(2) Incomplete Records	(a)(3) Total	(a)(3) Incomplete Records	(a)(4) Total	(a)(4) Incomplete Records	(c) Total	(c) Incomplete Records	(d) Total	(d) Incomplete Records	Other ¹ Total	Other Incomplete Records
Class 1 (in HCA)	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 1 (not in HCA)	7		3		6		0		8		0		0	
Class 2 (in HCA)	2	0	0	0	1	0	0	0	0	0	0	0	0	0
Class 2 (not in HCA)	0		0		1		0		8		0		0	
Class 3 (in HCA)	52	0	16	0	65	0	0	0	51	0	0	0	0	0
Class 3 (not in HCA)	0	0	1	0	3	0	0	0	0	0	0	0	0	0
Class 4 (in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 4 (not in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total	62	0	20	0	76	0	0	0	67	0	0	0	0	0
Grand Total						-	225		=		-			
Sum of Total row for all "Incomplete Records" columns							0							
¹ Specify Other me	thod(s)	:							<u>-</u>					
Class 1 (in HCA)					Class	1 (not in HC	ot in HCA)							
Class 2 (in HCA)	ass 2 (in HCA) Class					Class	ss 2 (not in HCA)							
Class 3 (in HCA)	ss 3 (in HCA) Class					Class	lass 3 (not in HCA)							
Class 4 (in HCA)				Class 4 (in HCA) Class 4 (n					A)					

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Faith - Gas Hallsli		y Fressure rest	(Fi) Kaliye ali	d Internal Inspection			
	PT ≥ 1.	25 MAOP	1.25 MAO	P > PT ≥ 1.1 MAOP	PT < 1.1 or No PT		
Location	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	
Class 1 in HCA	0	1	0	0	0	0	
Class 2 in HCA	1	2	0	0 0		0	
Class 3 in HCA	88	49	0	0 29		18	
Class 4 in HCA	0 0		0	0	0	0	
in HCA subTotal	89 52		0	0	29	18	
Class 1 not in HCA	5 11		0	0	8	0	
Class 2 not in HCA	1	0	0	0 8		0	
Class 3 not in HCA	4	0	0	0 0		0	
Class 4 not in HCA	0	0	0	0 0		0	
not in HCA subTotal	10	11	0	0	16	0	
Total	99	63	0	0	45	18	
PT ≥ 1.25 MAOP Tota	al		162	Total Miles Internal Ins	144		
1.25 MAOP > PT ≥ 1.	1 MAOP Total		0	Total Miles Internal Ins	81		
PT < 1.1 or No PT To	tal		63		Grand Total	225	
		Grand Total	225				

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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 gas transmission pipeline facilities included within this OPID have Part L HCA mile value greater than zero.

PART N - PREPARER SIGNATURE	
James Dewberry Preparer's Name(type or print)	(213) 244-4514 Telephone Number
Reporting Management Team Lead	
Preparer's Title	-
JDewberry@semprautilities.com	
Preparer's E-mail Address	-
PART O - CERTIFYING SIGNATURE (applicable only to PARTs B, F, G, and M1)	
	_ (213) 244-5154 Telephone Number
Douglas M. Schneider	
Senior Executive Officer's name certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f)	-
VP Sys Int and Asst Mgt	
Senior Executive Officer's title certifying the information in PARTs B, F, G, and M as required by 49 U.S.C. 60109(f)	-
DSchneider@semprautilities.com	