NOTICE: This report is required by 49 CFR Part 191. Failure to report can result in a civil pexceed 100,000 for each violation for each day that such violation persists except that the penalty shall not exceed \$1,000,000 as provided in 49 USC 60122.	OMB NO: 2137-0629 EXPIRATION DATE: 1/31/2018	
	Initial Date Submitted:	03/14/2018
U.S Department of Transportation Pipeline and Hazardous Materials Safety Administration	Form Type:	INITIAL
	Date Submitted:	

ANNUAL REPORT FOR CALENDAR YEAR 2017 GAS DISTRIBUTION SYSTEM

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 16 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	Tuse only) 20188701-35851						
1. Name of Operator	SOUTHWEST GAS CORP							
2. LOCATION OF OFFICE (WHERE ADDITIONAL INFORMATION MAY BE OBTAINED)								
2a. Street Address		5241 SPRIN	G MOUNTAI	N ROAD				
2b. City and County		LAS VEGAS						
2c. State		NV						
2d. Zip Code		89150						
3. OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER		18536						
4. HEADQUARTERS NAME & ADDRESS								
4a. Street Address		5241 SPRING MOUNTAIN ROAD						
4b. City and County		LAS VEGAS						
4c. State		NV						
4d. Zip Code		89150						
5. STATE IN WHICH SYSTEM OPERATES		CA						
6. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GROUP (Select Commodity Group based on the predominant gas carried and complete the report for that Commodity Group. File a separate report for each Commodity Group included in this OPID.)								
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.):								
Investor Owned								

PART B - SYSTEM DESCRIPTION

1.GENERAL

		STI	EEL														
	UNPRO	TECTED	CATHODICALLY PROTECTED								PLASTIC W	CAST/ WROUGHT	DUCTILE IRON	COPPER	OTHER	RECONDITION ED	SYSTEM TOTAL
	BARE	COATED	BARE	COATED		IRON				CAST IRON							
MILES OF MAIN				570.221	2568.287						3138.508						
NO. OF SERVICES				8969	168220						177189						

2.MI	LES OF MAINS IN	SYSTEM AT END	OF YEAR							
MATERIAL	UNKNOWN	2" OR LESS	OVER 2" THRU 4"	OVER 4" THRU 8"		VER 8" IRU 12"	OVE	R 12"	SYSTEM	TOTALS
STEEL	0	167.904	213.148	161.853	2	20.547	6.7	769	570.221	
DUCTILE IRON	0	0	0	0		0	(0	0	
COPPER	0	0	0	0		0	(0	()
CAST/WROUGH T IRON	0	0	0	0		0	(0	0	
PLASTIC PVC	0	56.247	0	0		0	(0	56.247	
PLASTIC PE	0	2121.823	345.13	45.087		0	(0	251:	2.04
PLASTIC ABS	0	0	0	0		0	(0	()
PLASTIC OTHER	0	0	0	0		0	(0	()
OTHER	0	0	0	0		0	(0	()
RECONDITIONE D CAST IRON	0	0	0	0		0	(0	()
TOTAL	0	2345.974	558.278	206.94	2	20.547	6.7	769	3138	3.508
Describe Other	Material:									
3.NUMBER OF SE	ERVICES IN SYSTE	M AT END OF YEA	R		AVERAG	E SERVICE	LENGTH: 74			
MATERIAL	UNKNOWN	1" OR LESS	OVER 1" THRU 2"	OVER 2" THRU 4"		VER 4" HRU 8"	OVE	R 8"	SYSTEM	TOTALS
STEEL	0	8906	46	13		4	(0	89	69
DUCTILE IRON	0	0	0	0		0	(0	0	
COPPER	0	0	0	0		0	(0	()
CAST/WROUGH T IRON	0	0	0	0		0	(0	()
PLASTIC PVC	0	698	0	0		0	(0	69	98
PLASTIC PE	0	166505	1008	9		0	(0	167522	
PLASTIC ABS	0	0	0	0		0	(0	0	
PLASTIC OTHER	0	0	0	0		0	(0	0	
OTHER	0	0	0	0		0	(0	0	
RECONDITIONE D CAST IRON	0	0	0	0		0	(0	0	
TOTAL 0		176109	176109 1054		22 4		0		177	189
Describe Other	Material:		<u>l</u>				1			
4.MILES OF MAIN	I AND NUMBER O	F SERVICES BY DE	CADE OF INSTALL	ATION						

MILES OF MAIN	97.800	0	0.120	153.006	104.341	273.849	487.472	621.467	1004.200	396.253	3138.508
NUMBER OF SERVICES	7671	0	0	145	740	9261	36558	38328	68373	16113	177189

PART C - TOTAL LEAKS AND HAZARDOUS LEAKS ELIMINATED/REPAIRED DURING THE YEAR

CAUSE OF LEAK		MAINS	SERVICES		
CAUSE OF LEAR	TOTAL	HAZARDOUS	TOTAL	HAZARDOUS	
CORROSION FAILURE	0	0	3	2	
NATURAL FORCE DAMAGE	2	1	90	73	
EXCAVATION DAMAGE	18	17	114	111	
OTHER OUTSIDE FORCE DAMAGE	2	2	27	25	
PIPE, WELD OR JOINT FAILURE	18	2	41	12	
EQUIPMENT FAILURE	11	1	820	153	
INCORRECT OPERATIONS	7	3	7	5	
OTHER CAUSE	0	0	1	1	

PART D - EXCAVATION DAMAGE PART E - EXCESS FLOW VALUE (EFV) AND SERVICE VALVE DATA

PART H - ADDITIONAL INFORMATION

Total Number Of Services with EFV Installed During Year: 4313 1. TOTAL NUMBER OF EXCAVATION DAMAGES BY APPARENT ROOT CAUSE: 136 Estimated Number Of Services with EFV In the System At End Of Year: a. One-Call Notification Practices Not Sufficient: 68 b. Locating Practices Not Sufficient: 11 * Total Number of Manual Service Line Shut-off Valves Installed During c. Excavation Practices Not Sufficient: 49 Year: 2 d. Other: 8 * Estimated Number of Services with Manual Service Line Shut-off Valves Installed in the System at End of Year: 3 *These questions were added to the report in 2017. 2. NUMBER OF EXCAVATION TICKETS : 33017 **PART F - LEAKS ON FEDERAL LAND** PART G-PERCENT OF UNACCOUNTED FOR GAS TOTAL NUMBER OF LEAKS ON FEDERAL LAND REPAIRED OR UNACCOUNTED FOR GAS AS A PERCENT OF TOTAL INPUT FOR THE 12 MONTHS ENDING JUNE 30 OF THE REPORTING YEAR. SCHEDULED TO REPAIR: 0 [(PURCHASED GAS + PRODUCED GAS) MINUS (CUSTOMER USE + COMPANY USE + APPROPRIATE ADJUSTMENTS)] DIVIDED BY (PURCHASED GAS + PRODUCED GAS) EQUALS PERCENT UNACCOUNTED FOR. INPUT FOR YEAR ENDING 6/30: __0.03%_

DADTI DDEDADED	
PART I - PREPARER	
	(700)070 7070
Roger Ragoonanan, Administrator/Compliance	(702)876-7359
(Preparer's Name and Title)	(Area Code and Telephone Number)
TO GOT TO GOOD ON ON ON ON ON	(702)221-4116
roger.ragoonanan@swgas.com	
(Preparer's email address)	(Area Code and Facsimile Number)