

USG Pipeline Company, LLC as of 9/9/2019
Effective Date: 01/22/2017

Forms, Third Revised Sheet No. 98, 4.0.0 A

SERVICE REQUEST FORM

Customer Service
USG Pipeline Company, LLC
550 West Adams Street
Dept. # 143-50
Chicago, IL 60661-3676
Email: usgpipeline@usg.com <<mailto:usgpipeline@usg.com>>

Re: New Service Rate Schedule FT
 Modification of service
under Agreement No. Rate Schedule IT

_____ (Shipper) hereby requests service as specified above
from USG Pipeline Company, LLC (Transporter) and concurrently provides the following
information in connection with this request:

1. Complete legal name of Shipper:

2. Type of legal entity and state of incorporation:

3. Type of company:

_____ Local Distribution Company
_____ Intrastate Pipeline
_____ Interstate Pipeline
_____ Producer
_____ End-User
_____ Marketer
_____ Broker
_____ Other (fill in)

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4. Name of Shipper's contact, address and telephone number through which correspondence of the following should be directed:

Contact For Request:

Contact for Notices:

Contact For Invoices:

5. If Shipper is requesting service on behalf of another entity, please specify the full legal name of such entity and type of entity.

(Transporter reserves the right to require proof that Shipper's request meets the requirements of the applicable Commission Regulations.)

6. The intended use of the gas is:

_____ system supply for _____
_____ end use by industry of commerce
_____ other (fill in)

and, if the gas is for other than system supply, provide the full legal name of the ultimate consumer, the location (i.e., state) of the ultimate Delivery Point of the gas to be transported (i.e., if ultimate consumer is an end use, location(s) of plant(s) where gas is to be consumed) and indicate the identity of the on behalf of entity corresponding to each delivery point in paragraph 13 herein:

7. Date service is proposed to commence:

8. Term of service:

9. If additional or new facilities are required to receive or deliver gas pursuant to this Request or otherwise perform the requested service, provide a description of the facilities required, location and requested in-service date and, if the service to be provided using the new facilities is to a customer that is located in the service area of a local distribution company, specify the name of the local distribution company.

10. The:

_____ Transportation Quantity (sum of MDQs at all Delivery Points under an FT Agreement) to be transported is _____ Dth per day.

_____ The Maximum Interruptible Quantity (sum of the maximum quantities at all Delivery Points under an IT Agreement) to be transported is _____ Dth per day.

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The estimated total quantity of gas to be transported during the requested term of service is _____ Dth.

11. If Shipper is purchasing gas, provide the location and state (including offshore designation) of the source(s) of supply:

*12. If Shipper is selling gas, provide the name of purchaser(s) of the gas, contract quantity, and the effective and termination date(s) of executed Agreement(s) between Shipper and purchaser(s):

*This information is not required at the time of the request but is required at the time Shipper executes the gas service contract.

13. The names of those entities delivering gas into Transporter's system and the names of those entities taking gas off Transporter's system:

Transporter Point of Receipt

Name/Delivering Entity

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14. Credit Evaluation - Provide all information required in Section 6 of Transporter's General Terms and Conditions. Shippers requesting service under Rate Schedule FT shall submit, with their request for service, a check or wire transfer in an amount equal to the lesser of \$10,000 or the total Reservation Charge applicable to the proposed service for a one month period. This amount shall be credited to Shipper's bill for the first month of the requested transportation service. If the requested service is not available, Transporter shall refund the entire amount of the prepayment within thirty days of notification by Transporter that service can not be provided. All prepayments made to Transporter are to be sent by check or wire transfer to Transporter or Transporter's designated bank at an address to be furnished by Transporter.

15. Is requestor affiliated with USG Pipeline Company, LLC?

_____ Yes _____ No

If yes, what is the percentage of affiliation?

16. Is shipper affiliated with USG Pipeline Company, LLC?

_____ Yes _____ No

If yes, what is the percentage of affiliation?

17. Is your supplier affiliated with USG Pipeline Company, LLC?

_____ Yes _____ No

If yes, what is the percentage of affiliation?

18. For marketing affiliates of USG Pipeline Company, LLC only, does the cost of gas exceed the sales price, less associated costs including transportation, i.e. is the gas being sold at a loss?

_____ Yes _____ No _____ Unknown

If so, by how much? _____

If applicable, Shipper agrees by its signature below to provide this information within twenty-five calendar days after the month in which the transportation service occurred.

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Effective Date: 04/04/2013

Forms, Second Revised Sheet No. 103, 3.0.0 A

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Shipper understands that this request form, complete and unrevised as to format, and any required prepayment must be received by Transporter before the service request will be accepted and processed.

Shipper, by its signature, certifies to Transporter (1) that the information above is correct and accurate and that all necessary transportation arrangements with the upstream and downstream Transporters have been or will be secured prior to the commencement of the requested service, (2) that Shipper will have title, or the right to acquire title, to the gas that is to be delivered to Transporter, and (3) that Shipper will advise Transporter of any changes in the information provided in item 18 five business days prior to the end of any month for the preceding month's transportation business in which a change occurred.

Submitted this _____ day of _____, 20____

Very truly yours,

By _____
Title _____