12-02- GA- RPT

300584

# **PIPELINE**

# ANNUAL REPORT

OF

Ohio Oil Gathering Corporation II (Exact legal name of respondent

If name was changed during year, show also the previous name and date of change

Website URL (where this filing is available for public viewing)

(Address of principal business office at end of year)

## TO THE

# PUBLIC UTILITIES COMMISSION OF OHIO

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MAR 19 2012

THE OFFICE OF OHIO CONSUMERS' COUNSEL

# FOR THE YEAR ENDED DECEMBER 31, 2011\_\_

Name, title, address, telephone and fax number (including area code) of the person to be contacted concerning this report.

Dawn Seifried 5 Radnor Corporate Center, Suite 400, Radnor, PA 19087

Phone: 610-293-0410 Fax: 610-293-1440 E-mail: dseifried@clearfieldenergy.com

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business.

Tachnician Date Processed JUN 1 4 2012

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#### HISTORY

## SEE ATTACHED FERC6

1.	Exact name of company making this report.
2.	Date of organization
3.	Under the laws of what Government, State of Territory organized? If more than one, name all.
4.	If a consolidated or merged company, name all constituent and all merged companies.
5.	Date and authority for each consolidation and each merger.
6.	State whether respondent is a corporation, a joint stock association, a firm or partnership, or an individual.
7.	If a reorganized company, given name of original corporation, refer to laws under which it was organized, and state the occasion for the reorganization.
8.	State wether or not, the respondent during the year conducted any part of its business under a name, or names, other than shown, in response to inquiry No. 1. If so, give full particulars.
9.	Where are the books and records of the company kept?
10	Name below all classes of public service furnished by the respondent.

# **IDENTITY OF RESPONDENT**

#### SE

	TACHED FERC 6  State whether respondent is a corporation, a joint stock association, a firm or partnership, or an andividual.				
2.	Date when operations began.				
3.	If a consolidated or merged company, give names of each such incident, date, and Commission authority. If a reorganized company, give name of original corporation.				
4.	If incorporated specify  (a) Date of filing articles of incorporation,  (b) State in which incorporated,				
5.	Commission Case Number granting operating authority and date issued.				
6.	State whether or not the respondent during the year conducted any part of its business under a name or names other than that shown Title Page; if so, give full particulars.				
7.	Description of general service territory.				
8.	List all affiliated companies with whom the respondent does business and their relationship to the respondent. If respondent is a partnership, provide this information for each partner. (Use separate page(s) if needed).  State whether the affiliate is (a) a regulated public utility or, (b) a publicly held corporation.				
9	Did any corporation or corporations, telephone or other, hold control over the respondent at the close of the year? If control was so held, state:				
	<ul> <li>a. The name and address of the controlling corporation or corporations.</li> <li>b. The form of control, whether sole or joint.</li> <li>c. The extent of control.</li> <li>d. Whether control was direct or indirect.</li> <li>e. If indirect, the name and address of the intermediary through which control was established.</li> </ul>				
10	Did any individual, association, or corporation hold control, as trustee, over the respondent at the close of the year?  If control was so held, state:				
	<ul><li>a. The name and address of the trustee.</li><li>b. The name and address of the beneficiary or beneficiaries for whom the trust was maintained, if available</li></ul>				

#### SCHEDULE: 20

		Amount		
ine Vo.	Item	Total Company	Other Than Ohio Intrastate	Ohio Intrastate
1	Operating and Miscellaneous Revenue (Rent Revenue, Special Billings (revenue from work performed for others, rent revenue-nonoperating, return on regulated investment used to provide nonregulated products and services, etc.)			
2	Other Revenue, Dividend and Interest Income, Gains From Disposition of Property -Operating and Nonoperating, Other Operating or Nonoperating Gains (foreign currency exchange or transfer, extinguishment of debt, company's share of earnings of affiliated company accounted for on equity method, income from sinking and other funds, etc.)	16,435		16,435
3	SUBTOTAL (1) + (2)	16,435		16,435
4	Earnings or receipts from sales to other public utilities for resale	( )	( )	(
5	TOTAL (3) + (4)	16,435		16,435
	(1) Intrastate means from one point in Ohio to	another point i	n Ohio,	

#### SCHEDULE: 21

#### IN ORDER TO ENSURE THAT PUCO CORRESPONDENCE IS DIRECTED TO THE APPROPRIATE PERSON AT THE CORRECT ADDRESS, PLEASE COMPLETE THE FOLLOWING.

Name, Title, Address, and Phone Number of the Company's Contact Persons To Receive Entries and Orders from the Docketing Division

DAWN SEIFRIED	TREASURER
Name	Title
5 RADNOR CORPORATE CENTER, SUITE 400	J. RADNOR. PA 19087
Address	
(610) 293-0410	
Phone Number (Including Area Code)	
dseifried@clearfieldenergy.com	
E-Mail Address	
	hone Number of Person to whom Invoice ould be directed
SAME AS ABOVE	
Name	Title
Address	
Phone Number (Including Area Code)	
E-Mail Address	_ <del></del>
Name and	Address of the President
BRIAN JONARD	
Name	President
SAME AS ABOVE	
A didworn	

Annual Report of Ohio Oil Gathering Corporation 1	il Gathering Corporation II	Annual Report of Ohio Oil
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Year Ended December 31, 2011\_\_\_

#### **VERIFICATION**

The foregoing report must be verified by the President or Chief Officer of the company. The oath required may be taken before any person authorized to administer an oath by the laws of the State in which the same is taken.

OATH		
State of PENNSYLVANIA		
County of DELAWARE		
DAWN SEIFRIED	makes oath and says that	
(Insert here the name of the affiant.)	•	
he is TREASURER		
(Insert here the official title of de	ponent)	
of OHIO OIL GATHERING CORPORATION II	nowledge, information, and belief, all	
statements of fact contained in the said report are true and the sai business and affairs of the above-named respondent in respect to eaduring the period from and including <a href="IANUARY1">IANUARY1</a> , 2011, to and	ich and every matter set forth therein	
	Signature of affiant.)	
Subscribed and sworn to before me, a Notzny Public in an 13 day of Manh 2012. My commission expires Man Catherin R Howard Signature of officer adthorized to admin	d for the State and county named, this	

COMMONWEALTH OF PENNSYLVANIA

Notarial Seal
Catherine R. Hrycyszyn, Notary Public
Radnor Twp., Delaware County
My Commission Expires May 6, 2013

Member, Pennsylvania Association of Notaries