

SECTION I _ INTERCONNECT EQUIPMENT CHECKLIST -By Producer & Verified by EQT personnel

SITE NAME, LOCATION, MID# : _____

DATE: _____ **Completed By (Name & Co.)** _____

Y	N	N/A	DESCRIPTION
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TESTS AND REPORTS

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Test Reports - Fabricator Shop - Hydro/Air Pressure test documents and X-Ray reports
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Test Reports -Field Welding - Hydro/Air Pressure test documents and X-Ray reports
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meter Micrometer Sheet / Accuracy Test Reports - Orifice, USM, Turbine or Rotary
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical Connections (Documentation of bolt torque and leak checks)

GENERAL

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ANSI Rating - Flanges & Valves (Note: Manuf. and model)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Equipment Tags - Verify proper working pressure, electric classification & equipment is on the Approved List
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Confirm Required Distances
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Class 1 / Div 2 - see hazardous area drawing for distances
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pipeline to edge of R/W
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GC Building to meter set (min. 15 feet)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Check Valve - downstream of M&R set
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Filter/Separator (F/S) or Liquid Level Shut-off(LLS) Type: _____ Size: _____

METER & REGULATION

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Orifice Plate - Pull and check/confirm size
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Extra plates available ? (Producer to provide)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meter Size & Bypass: Tube Information Manufacturer: _____ S/N: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OPP, Pressure Control & Flow Control
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monitor Type: _____ S/N: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Controller Type: _____ Range: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Primary (Pressure) Type: _____ S/N: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Controller Type: _____ Range: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Primary (Flow Control) Type: _____ S/N: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Controller Type: _____ Range: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Instrument Supply System lines- Separate lines to TOL's & upstream or regs
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Locations of sensing lines taps downstream - 10D downstream of regs, sloped & separate lines
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Remote set point - Automatic shut-in for gas quality per Equitrans tariff.

GAS QUALITY MONITORING EQUIPMENT

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Initial gas sample analysis approved ?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gas Chromatograph or Continuous Sampler Type: _____ S/N: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sample System Pony <input type="checkbox"/> Mustang <input type="checkbox"/> Other _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Heat traced sample tubing
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GC tap location (per drawing ?)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GC - Calibration Gas
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GC - Zero Grade Helium
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Moisture Analyzer Type: _____ S/N: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	H2S Analyzer Type: _____ S/N: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	O2 Analyzer Type: _____ S/N: _____

FACILITIES, INSTRUMENTATION & TELECOMMUNICATION

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FC / RTU Manufacturer: _____ S/N: _____ Battery Size: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Communications Type: _____ Provider/Phone#: _____

ELECTRICAL / CORROSION

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conduit - Separate conduit for data, AC power & DC power
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Conduit - Sealed
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AC Power - Inspection sticker Source: _____ Sticker/Pole#: _____
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Isolation flange kits - per drawing of site
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Corrosion Coupon TOL's - 3/4" min. at top and bottom of pipe

STATION LOT AND ACCESS

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Building / Enclosure (Per drawings)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Access road
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Site is at final grade (gravel to top of skid I-beam)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fence and Signage complete
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Meter Site Agreement - Access for EQT?

SECTION 2 - FINAL COMMISSIONING CHECKLIST BY EQT PERSONNEL

DATE: _____ **Completed By (Name & Co.)** _____

Y	N	N/A	DESCRIPTION	COMMENTS
FACILITY START- UP				
			Verify all items in SECTION 1 of this checklist	
			Verify all piping and equipment has been purged. (>95% Gas in Air)	
			Leak test all flanges, tubing & threaded connections after pressurization is complete.	
			Verify correct size and press. rating of pressure control and over-pressure protection(OPP) equip. and transmitters.	
			Calibrated & test all pressure control and OPP equipment and transmitters & verify correct signal to RTU.	
			Have pressure control & OPP set points been provided by engineering and/or pipeline operations? Comment by whom.	
			Adjust Press control and OPP equipment to specified set points.	
			Locking valves have been installed on all sensing & supply lines associated with OPP equipment.	
			All sensing & supply lines to OPP equipment have been locked in position with "Company" locks.	
RTU CONFIGURATION / TRANSMITTER CALIBRATIONS				
			Verify that RTU and Transmitter installation is complete.	
			Calibrate Transmitters and RTU	
			Verify proper sizing of solar panel, thermal electric generator and batteries for required polling frequency (as applicable).	
			Verify correct static pressure & D/P range of RTU.	
			Verify correct K factor configured in RTU (if applicable).	
			Verify the correct pipe diameter & orifice size is entered in the RTU.	
			Verify RTU has been configured to read in gauge pressure (psig)	
			Verify that RTU manifold valves are in the correct position.	
			Gas quality data has been properly entered in the RTU?	
			RTU is configured to auto shut-in if gas quality not per Contract.	
GAS QUALITY				
			Verify initial gas sample.	
			Take a moisture sample after gas flow has been established.	
			Verify all gas quality monitoring equipment is activated, calibrated and configured properly, including auto-cal frequency.	
SCADA/COMMUNICATIONS/FINAL TIL				
			Verify that communication equipment has been configured properly.	
			Verify communication with the RTU from CYGNET/SCADA host.	
			Confirm SCADA has appropriate data points mapped.	
			Complete final TIL	
TAKE PHOTOS OF:				
			Pipeline Tap/Valve and M&R lot	
			Meter and Regulator Skid	
			GC Equip and Build/Enclosure	
			Other	