

EXHIBIT C

SPECIFICATIONS FOR PIPELINE

1. The proposed line will transport natural gas from Northern Natural Gas Company's existing metering station facility in the NW ¼ of Section 28, T88N, R2E, east of the 5th Principal Meridian, Dubuque County, Iowa, to MidAmerican Energy Company's existing Town Regulator Station in the NE ¼ of Section 12, T78N, R3E east of the 5th Principal Meridian, city of Davenport, Scott County, Iowa.

The maximum actual operating pressure of the line will be 960 psig. (See a.)
When operated at an inlet pressure of 575 psig and an outlet pressure of 425 psig it will transport 78,270 (mcf) per day.

2. PIPE: Total length (mi): 62.77 miles
Length in Location Class 1: 60.54 mi 2 1.02 mi 3 1.21 mi 4 _____ (See b.)
If more than one location class attach a map or description showing the locations of each class. **(SEE EXHIBIT B FOR LOCATION OF CLASS LOCATIONS)**

3. PIPE SPECIFICATIONS: **(SEE ATTACHMENT C-1)**
External diameter (in) _____ Wall thickness (in) ____
Weight per foot (lb) _____ Minimum yield psi (SMYS) _____
Longitudinal seam type _____ Pipe Specification (API, ASME) ____
Type of coating _____ Manufacturer of pipe _____
% SMYS at MAOP _____
If more than one type of pipe is used provide specifications for each type and attach a map or description showing where each is located.

4. **(SEE ATTACHMENT C-1)**
Test Pressure (psig) _____ Test medium _____
For existing lines, the date(s) of the test _____

5. Maximum allowable operating pressure (MAOP): 960 psig (See c, d.)
Attach calculations showing how the MAOP was determined.
(SEE ATTACHMENT C-2)

6. Type of cathodic protection. Anodes _____ Rectifier X Other (explain) _____

7. VALVES AND FLANGES:
Valves: API class ANSI 600 or pressure rating _____
Flanges: ASME or MSS class ANSI 600 or pressure rating _____
Type of valve (plug, gate, ball, etc.) Ball
Method of valve connection (Flanged, screwed or welded): Flanged and Welded
Valve manufacturer's name and reference No. Kerotest, Grove B5

Valve spacing:	VLV# 61901G to VLV# 61904G	<u>9.16</u> miles
	VLV# 61904G to VLV# 61907G	<u>18.96</u> miles
	VLV# 61907G to VLV# 61910G	<u>16.65</u> miles
	VLV# 61910G to VLV# 61923	<u>15.35</u> miles
	VLV# 61923 to VLV# 61927G	<u>2.65</u> miles

See attached map, Exhibit B, showing valve locations.

8. The contents of this pipeline are/will be odorized. Yes X No _____
9. The pipeline is/will be designed and constructed to accommodate the passage of instrumented internal inspection devices. Yes X No _____ (See e.)
(SEE ATTACHMENT C-3)
 If not, attach an explanation of why the pipeline cannot accommodate internal inspection devices, and a description of the measures and degree of difficulty that would be necessary to allow the line to accommodate such devices.
10. **STANDARDS:** Unless otherwise indicated, all design, construction, operation and maintenance records will be in accordance with the appropriate federal and state regulations and standards. (See f.)
11. **CROSSINGS:** Listed on an attached sheet is the name and location (legal description) of each feature being crossed. **(SEE ATTACHMENT C-4)**

Railroads	Number of crossings <u>1</u>	(See g.)
Federal or State Highways	Number of crossings <u>7</u>	
Foreign Pipelines	Number of crossings <u>13</u>	
Rivers, Streams, Bodies of Water	Number of crossings <u>72</u>	(See h.)
12. **CONSTRUCTION:**
 If applicable, attached is information on any special design, construction, or test measures contemplated due to route conditions, environmentally sensitive areas, or other unusual circumstance.
 The project has been designed and will be constructed to minimize the risk of damage to other utilities or disruption of service by those utilities. Petitioner will notify other utilities and exercise caution during construction in compliance with Iowa Code chapter 480.
 The pipeline will be tested upon completion in accordance with the applicable provisions of 49 CFR Part 192, latest or replacement issue. The Utilities Board will be notified prior to testing, and after completion a written report will be filed showing the test method and results.

Name of applicant: Emily Leon

Date: January 28, 2021

Signed by: /s/ Emily Leone
 Program Manager – Regulatory Reporting