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| **STATE OF LOUISIANA** | **ABANDONMENT OF CNG** | **CNG-102** |
| **OFFICE OF CONSERVATION** | **SERVICE AND/OR FACILITY** | **(4/92)** |
| **PIPELINE DIVISION** |  | **Rev. 5/12** |

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| **NAME OF FACILITY TO BE ABANDONDED:** |  |
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| **DESCRIPTION AND LOCATION OF FACILITY TO BE ABANDONED:** |

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| THE APPLICATION FOR THIS CNG FACILITY WAS FILED UNDER DOCKET NO. PL CNG AND APPROVED BY PL ORDER NO. .  DESCRIBE FULLY IN SECTION V OF APPLICATION. |

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| **TYPE OF SERVICE THAT WILL BE ABANDONED:** | | | | | | | |
|  | GENERAL PUBLIC |  | PRIVATE FLEET |  | PUBLIC TRANSPORTATION | | |
|  | STATE GOVERNMENT |  | LOCAL GOVERNMENT |  | SCHOOL BUS |  | OTHER |
|  |  |  |  |  |  |  |  |
| **TYPE OF REFUELING TO BE ABANDONED:** | | | |  | QUICK FILL |  | SLOW FILL |
|  |  |  |  |  |  |  |  |

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| DATE FACILITIES LAST UTILIZED: |  |  |
| DESCRBIE FULLY THE SERVICE PROVIDED BY SAID FACILITY IN SECTION IV OF THE APPLICATION AND THE REASON FOR ABANDONMENT OF SAID FACILITIES IN SECTION V OF THE APPLICATION. | | |

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| PROSPECTIVE DATE OF ABANDONMENT: |  | PARTIALLY REMOVED |  | OR COMPLETELY REMOVED |  |
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| **REMARKS:** |

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| Address all communications concerning this application to: | |  | I hereby certify that this application has been examined by me and that the Statements therein contained are to the best of my knowledge and belief true, correct and complete. | | |
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|  | |  | **NAME OF OPERATOR/APPLICANT** | | |
|  | |  | **SIGNATURE:** | |  |
| Date: |  |  | **TITLE:** |  | |
|  |  |  |  |  | |