

**Black Hills Shoshone Pipeline, LLC
Gas Transportation Nomination Form***

All Volumes are reported in MMBtu's

Nomination Effective Date: _____ Nomination Effective Time: _____

Shipper Name: _____

Contract #: _____

Submit To: Black Hills Shoshone Pipeline, LLC

Shipper ID#: _____

Contact: _____

Contact: Patrick Joyce

Phone: _____

Phone: (402) 221-2691

Fax: _____

Fax: (401) 829-2691

E-Mail Address: _____

E-mail Address:

Patrick.Joyce@blackhillscorp.com

RECEIPTS

Receipt Point	Upstream Identifier	Previous Day Nomination Volume	DATE Nominated Volume	Change
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
_____	_____	_____	_____	-
Total Receipts			_____	_____
Less L&U %			_____	_____
Available for Delivery			_____	_____

DELIVERIES

Delivery Point	Downstream Identifier	Previous Day Nomination Volume	DATE Nominated Volume	Change
Pre-determined Allocation	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total Deliveries			_____	_____

Net Imbalance

Positive # indicated receipt from imbalance

Negative # indicates delivery to imbalance

***Please receive, transport and deliver gas under the contract(s) specified as listed on this form.**

This nomination will remain in effect until changed.