

**MICHIGAN PUBLIC SERVICE COMMISSION**

**ANNUAL REPORT OF NATURAL GAS UTILITIES (MAJOR AND NONMAJOR)**  
**WITH ANNUAL SALES OF LESS THAN 200,000 MCF**

This form is authorized by 1919 PA 419, as amended, being MCL 460.51 et seq. and  
1969 PA 306, as amended, being MCL 24.201 et seq. Filing of this form is mandatory.  
Failure to complete and submit this form will place you in violation of the Acts.

<b>Report submitted for year ending:</b>	
September 30, 2008	
<b>Present name of respondent:</b>	
AURORA GAS COMPANY	
<b>Address of principal place of business:</b>	
7038 BLACK RIVER ROAD ONAWAY MI 49765	
<b>Utility representative to whom inquires regarding this report may be directed:</b>	
<b>Name:</b>	JOHN S TIERNEY
<b>Title:</b>	PRESIDENT
<b>Address:</b>	P.O. BOX 721
<b>City:</b>	ONAWAY
<b>State:</b>	MI
<b>49765</b>	
<b>Direct Telephone, Include Area Code:</b>	9898-733-6625
<b>If the utility name has been changed during the past year:</b>	
<b>Prior Name:</b>	
<b>Date of Change:</b>	
<b>Two copies of the published annual report to stockholders:</b>	
[ ]	were forwarded to the Commission
[ ]	will be forwarded to the Commission
	on or about
<b>Annual reports to stockholders:</b>	
[ ]	are published
[ X ]	are not published

**FOR ASSISTANCE IN COMPLETION OF THIS FORM:**

Contact the Michigan Public Service Commission (Bill Stosik) at  
(517) 241-5853 or [stosikb@michigan.gov](mailto:stosikb@michigan.gov) OR forward correspondence to:

Regulated Energy Division (Bill Stosik)  
Financial Analysis and Customer Choice Section  
6545 Mercantile Way  
P.O. Box 30221  
Lansing, MI 48909

**NONMAJOR GAS UTILITIES WITH ANNUAL  
SALES OF LESS THAN 200,000 MCF**

**ANNUAL REPORT OF:**

**AURORA GAS COMPANY**

(Name of Company)

TO THE

**MICHIGAN PUBLIC SERVICE COMMISSION**

For the Calendar Year:

**9/30/2007**

(Read Instructions on Last Page Carefully Before Filling Out Report)

Name of Company: AURORA GAS COMPANY

Post Office Address: P.O. BOX 721

Organization: CORPORATION  
(Corporation, Partnership or Individual)

Date of Organization: January 13, 1984 Under the laws of what state? Michigan

Printed name of person who prepared this report: \_\_\_\_\_

Signature of person who prepared this report: \_\_\_\_\_

If incorporated, give the titles, names and addresses of all company officials at close of year:

<u>Name</u>	<u>Title</u>	<u>Address</u>
John S Tierney	President	P.O. Bos 721, Onaway, MI 49765
John S Tierney	Secretary	P.O. Bos 721, Onaway, MI 49765
John S Tierney	Treasurer	P.O. Bos 721, Onaway, MI 49765
John S Tierney	Manager	P.O. Bos 721, Onaway, MI 49765

If not incorporated, state the name and address of owner or owners and the extent of their respective interests:

<u>Name</u>	<u>Address</u>

Name of any stockholders owning or controlling 10% or more of the stock, and number of votes to which each said stockholder is entitled:

<u>Name</u>	<u>Address</u>	<u>Number of Votes</u>
John S Tierney	P.O. Bos 721, Onaway, MI 49765	15,000
Helen Tierney	P.O. Bos 721, Onaway, MI 49765	15,000





Name of Respondent		This Report Is: (1) <input checked="" type="checkbox"/> An Original (2) <input type="checkbox"/> A Resubmission	Date of Report (Mo, Da, Yr) 3/30/2008	Year of Report September 30, 2008
<b>BALANCE SHEET</b>				
Line	Title of Account (a)	Balance at Beginning of Year (b)	Balance at End of Year (c)	
1	<b>INVESTMENTS</b>			
2	Total Utility Plant in Service	5,326,073	5,353,167	
3	Construction Work in Progress			
4	Total Utility Plant (2 + 3)	5,326,073	5,353,167	
5	Accumulated Provision for Depreciation	2,119,558	2,203,838	
6	Net Utility Plant (4 - 5)	3,206,515	3,149,329	
7	Other Property			
8	Other Investments (please describe here)	146,296	127,058	
9	Total Property and Investments (6 thru 8)	3,352,811	3,276,387	
10	<b>CURRENT ASSETS</b>			
11	Cash	6,032	17,470	
12	Notes Receivable - Net			
13	Accounts Receivable - Net	79,034	79,638	
14	Material and Supplies	738,098	757,234	
15	Prepayments			
16	Other Current and Accrued Assets	495,388	451,352	
17	Total Current and Accrued Assets (10 thru 15)	1,318,356	1,305,694	
18	Deferred Debits	1,104		
19	Total Assets (9 + 17 + 18)	4,672,467	4,582,081	
20	<b>LIABILITIES &amp; STOCKHOLDERS EQUITY</b>			
21	<b>STOCKHOLDER EQUITY</b>			
22	Capital Stock	30,000	30,000	
23	Retained Earnings	423,375	479,598	
24	Total Stockholders Equity (22 + 23)	453,375	509,598	
25	Long -Term Debt	3,834,792	3,544,141	
26	<b>CURRENT AND ACCRUED LIABILITIES</b>			
27	Notes Payable			
28	Accounts Payable	201,202	336,683	
29	Customer Deposits	175,195	166,796	
30	Other Current and Accrued Liabilities	7,903	24,863	
31	Total Current and Accrued Liabilities (27 thru 30)	384,300	528,342	
32	Deferred Credits			
33	Total Liabilities and Equity (24+25+31+32)	4,672,467	4,582,081	



Name of Respondent		This Report Is: (1) <input type="checkbox"/> An Original (2) <input type="checkbox"/> A Resubmission	Date of Report (Mo, Da, Yr)	Year of Report
<b>STATEMENT OF INCOME</b>				
Line	Title of Account (a)	Balance at Beginning of Year (b)	Balance at End of Year (c)	
1	Operating Revenues	3,665,574	3,447,885	
2	Natural Gas Production Expense			
3	Cost of Purchased Gas	2,423,654	2,226,376	
4	Transmission Expense			
5	Distribution Expense Operation			
6	Distribution Expense - Maintenance			
7	Administrative & General Expense	672,801	696,939	
8	Other Expenses			
9	Total Operation & Maintenance Expense (2 thru 8)	3,096,455	2,923,315	
10	Depreciation & Amortization Expense	150,617	150,945	
11	Tax Expense	64,614	61,770	
12	Interest Expense	267,976	199,540	
13	Other Deductions	55,044	55,044	
14	Total Cost of Gas Service (9 thru 13)	3,634,706	3,390,614	
15	Income From Operations (1 - 14)	30,868	57,271	
16	Miscellaneous Non-Operating Income	14,256	22,231	
17	Miscellaneous Non-Operating Deductions			
18	Total Non-Operating Income (Loss)	14,256	22,231	
19	<b>NET INCOME (15 + 18)</b>	45,124	79,502	

Name of Respondent	This Report Is: (1) <input type="checkbox"/> An Original (2) <input type="checkbox"/> A Resubmission	Date of Report (Mo, Da, Yr)	Year of Report
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**SALES DATA BY RATE SCHEDULE FOR THE YEAR**

- 1 Report below the distribution of customers, sales and revenue for the year by individual rate schedules.
- 2 Column (a): List all rate schedules by identification number or symbol. Where the same rates schedule designation applies to different rates in different zones, cities or districts, list separately data for each such area.
- 3 Column (b): Give the type of service to which rate schedule is applicable (ex. Commercial heating, space heating, etc)
- 4 Column (c): Indicate the class or classes of customers served under each rate schedule.
- 5 Column (d): Give the average number of customers billed under each rate schedule during the year.
- 6 Columns (e) and (f): For each rate schedule listed, enter the total number of Mcf sold to, and revenues received from customers billed under that rate schedule.
- 7 If a rate schedule was not in effect during the entire year, indicate in a foot note the period in which it was in effect.

Line No.	Rate Schedule Designation (a)	Type of Service to Type of Service to (b)	Class of Service (c)	Ave Number of Customers per Month (d)	Mcf Sold (e)	Revenue (f)
1	Residential			2,414	152,001	\$2,177,320
2	Commercial			158	88,568	\$866,494
3	Publi Auth			4	7,758	\$91,574
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Notes to Financial Statements



Name of Respondent	This Report Is: (1) <input type="checkbox"/> An Original (2) <input type="checkbox"/> A Resubmission	Date of Report (Mo, Da, Yr)	Year of Report
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### OFF-SYSTEM SALES OF NATURAL GAS

Report the details concerning off-system sales. Off-system sales include all sales other than MPSC approved rate schedule sales.

Line No.	Name (a)	Point of Delievery (City/Town, State) (b)	Account (c)	Mcf of Gas Sold (apprx BTU per CubicFt) (d)	Revenue For Year (e)	Average Revenue Per Mcf (f)	Peak Day Delivery to Cusotomers		
							Date (g)	Mcf	
								Noncoin- cidental (h)	Coin- cidental (i)
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Name of Respondent		This Report Is: (1) <input type="checkbox"/> An Original (2) <input type="checkbox"/> A Resubmission		Date of Report (Mo, Da, Yr)		Year of Report	
<b>REVENUE FROM TRANSPORTATION OF GAS OF OTHERS - NATURAL GAS (Account 489)</b>							
<p>1 Report below the details of revenue from transportation or compression (by respondent) of natural gas for others. Subdivide revenue between transportation or compression for Interstate pipeline companies and others.</p> <p>2 Natural gas means either natural gas unmixed, or any mixture of natural and manufactured gas. Designate with an asterisk if gas transported or compressed is other than natural gas.</p> <p>3 In column (a), include the names of companies from which revenues were derived, points of receipt and delivery, and names of companies from which gas was received and to which delivered. Also specify the Commission order or regulation authorizing such transaction.</p> <p>4 Designate points of receipt and delivery so that they can be identified on map of the respondent's pipeline system.</p> <p>5 Enter Mcf at 14.73 psi at 60 degrees Fahrenheit.                      6 Minor Items (less than 1,000,000 Mcf) may be grouped.</p>							
Line No.	Name of Company and Description of Service Performed (a)	Distance Transported (in miles) (b)	Mcf of Gas Received (c)	Mcf of Gas Delivered (d)	Revenue (e)	Ave Revenue per Mcf of Gas Delivered (in cents) (f)	FERC Tariff Rate Schedule Designation (g)
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25	TOTAL						



<b>GENERAL INSTRUCTIONS</b>	
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- 1 This form for Annual Report should be filled out and copied in duplicate with one copy returned to the office of the Michigan Public Service Commission by April 30, following the year for which made. The remaining copy should be retained by the Utility Company in its permanent files in case correspondence with regard to this report becomes necessary.
- 2 Additional statements inserted for the purpose of further explanation of accounts or schedules should be made on durable paper the same size as this report and securely attached.
- 3 There should always appear some notation to indicate that the questions asked have not been overlooked. The word "None" may be used against any particular item or items where that word expresses the fact.
- 4 The Oath on this page must be administered by a Notary Public or other officer authorize to administer oaths.

OATH	
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State of Michigan.....

} SS.

County of Chesapeake

I, the undersigned, on oath do say that I am

John S. Tierney - President  
(State official position as owner or officer)

of the Utility Company for whom the foregoing annual report was prepared; that the same was prepared by myself or under my direction; that I have full and complete knowledge of the affairs of the said Natural Gas Purchaser and/or Carrier that I have examined the foregoing annual report and declare the same to be a correct and complete statement of the business and affairs of said Utility Company in respect to each and every matter and thing therein set forth, to the best of my knowledge, information and belief.

(Signature of person executing this report)

(Signature of person executing this report)

PO Box 721 Oranay, Mi 49765  
(Address of person executing this report)

(Address of person executing this report)

SUBSCRIBED AND SWORN BEFORE ME

at Cheboygan County

this 13<sup>th</sup> day of April

Sr Susan Nelson

(Signature of person executing this report)

My Commission expires 10-26-2013

Notary Public  
(OFFICIAL TITLE)

(Official Title)