

MICHIGAN PUBLIC SERVICE COMMISSION

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

JAN 20 2010

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.

Report submitted for year ending: September 30, 2009
Present name of respondent: Aurora Gas Company
Address of principal place of business: 7038 Black River Road Onaway Mi 49765
Utility representative to whom inquires regarding this report may be directed: Name: John S Tierney Title: President Address: PO Box 721 City: Onaway State: Mi Zip: 49765 Direct Telephone, Include Area Code: 989-733-6625
If the utility name has been changed during the past year: Prior Name: Date of Change:
Two copies of the published annual report to stockholders: [] were forwarded to the Commission [] will be forwarded to the Commission <u>on or about</u>
Annual reports to stockholders: [] 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 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
Page P-322B Cover

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

**ANNUAL REPORT OF:
AAURORA GAS COMPANY**

(Name of Company)

**TO THE
MICHIGAN PUBLIC SERVICE COMMISSION**

For the Calendar Year:
9/30/2009

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

Name of Company: Aurora Gas Company

Post Office Address: PO Box 721 Onaway Mi 49765

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	PO Box 721 Onaway Mi 49765
Helen Tierney	Secretary	PO Box 721 Onaway Mi 49765
John S Tierney	Treasurer	PO Box 721 Onaway Mi 49765
John S Tierney	Manager	PO Box 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>	
John S Tierney	PO Box 721 Onaway Mi 49765	15,000
Helen Tierney	PO Box 721 Onaway Mi 49765	15,000

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>
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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
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PROPERTIES USED IN OPERATION

Line No.	Description and Location, Including County and City or Township (a)	Date Purchased (b)	Date Placed In Service (c)	Original Cost (d)
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26	TOTAL			

Notes to Financial Statements

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)	Year of Report September 30, 2009
BALANCE SHEET				
Line	Title of Account (a)	Balance at Beginning of Year (b)	Balance at End of Year (c)	
1	INVESTMENTS			
2	Total Utility Plant in Service	5,353,167	5,384,746	
3	Construction Work in Progress			
4	Total Utility Plant (2 + 3)	5,353,167	5,384,746	
5	Accumulated Provision for Depreciation	2,203,838	2,342,220	
6	Net Utility Plant (4 - 5)	3,149,329	3,042,526	
7	Other Property			
8	Other Investments (please describe here)	127,058	241,037	
9	Total Property and investments (6 thru 8)	3,276,387	3,283,563	
10	CURRENT ASSETS			
11	Cash	17,470	39,100	
12	Notes Receivable - Net			
13	Accounts Receivable - Net	79,638	66,836	
14	Material and Supplies	757,234	1,042,677	
15	Prepayments			
16	Other Current and Accrued Assets	451,352	396,308	
17	Total Current and Accrued Assets (10 thru 15)	1,305,694	1,544,921	
18	Deferred Debits			
19	Total Assets (9 + 17 + 18)	1,305,694	1,544,921	
20	LIABILITIES & STOCKHOLDERS EQUITY			
21	STOCKHOLDER EQUITY			
22	Capital Stock	30,000	30,000	
23	Retained Earnings	479,598	835,943	
24	Total Stockholders Equity (22 + 23)	509,598	865,943	
25	Long -Term Debt	3,544,141	3,582,161	
26	CURRENT AND ACCRUED LIABILITIES			
27	Notes Payable			
28	Accounts Payable	336,683	214,225	
29	Customer Deposits	166,796	149,508	
30	Other Current and Accrued Liabilities	24,863	19,643	
31	Total Current and Accrued Liabilities (27 thru 30)	528,342	383,376	
32	Deferred Credits			
33	Total Liabilities and Equity (24+25+31+32)	4,582,081	4,831,480	

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)	Year of Report September 30, 2009
STATEMENT OF INCOME				
Line	Title of Account (a)	Balance at Beginning of Year (b)	Balance at End of Year (c)	
1	Operating Revenues	3,447,885	4,018,582	
2	Natural Gas Production Expense			
3	Cost of Purchased Gas	2,226,376	2,641,423	
4	Transmission Expense			
5	Distribution Expense Operation			
6	Distribution Expense - Maintenance			
7	Administrative & General Expense	696,939	655,719	
8	Other Expenses			
9	Total Operation & Maintenance Expense (2 thru 8)	2,923,315	3,297,142	
10	Depreciation & Amortization Expense	150,945	142,290	
11	Tax Expense	61,770	64,418	
12	Interest Expense	199,540	126,622	
13	Other Deductions	55,044	55,044	
14	Total Cost of Gas Service (9 thru 13)	3,390,614	3,685,516	
15	Income From Operations (1 - 14)	57,271	333,066	
16	Miscellaneous Non-Operating Income	22,231	11,546	
17	Miscellaneous Non-Operating Deductions			
18	Total Non-Operating Income (Loss)	22,231	11,546	
19	NET INCOME (15 + 18)	79,502	344,612	

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)	Year of Report September 30, 2009
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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			2,435	174,134	\$2,555,015
2	Commercial			151	77,613	\$1,037,018
3	Public Auth			4	7,491	\$110,358
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Notes to Financial Statements

Name of Respondent	This Report Is:	Date of Report	Year of Report
	(1) <input checked="" type="checkbox"/> An Original (2) <input type="checkbox"/> A Resubmission	(Mo, Da, Yr)	September 30, 2009

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 Delivery (City/Town, State) (b)	Account (c)	Mcf of Gas Sold (approx BTU per CubicFt) (d)	Revenue For Year (e)	Average Revenue Per Mcf (f)	Peak Day Delivery to Customers		
							Date (g)	Noncoincidental (h)	Coincidental (i)
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Name of Respondent	This Report Is: (1) <input checked="" type="checkbox"/> An Original (2) <input type="checkbox"/> A Resubmission	Date of Report (Mo, Da, Y ^{rs})	Year of Report
		(Mo, Da, Y ^{rs})	September 30, 2009

REVENUE FROM TRANSPORTATION OF GAS OF OTHERS - NATURAL GAS (Account 489)

- 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.
- 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.
- 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.
- 4 Designate points of receipt and delivery so that they can be identified on map of the respondent's pipeline system.
- 5 Enter Mcf at 14.73 psi at 60 degrees Fahrenheit. 6 Minor items (less than 1,000,000 Mcf) may be grouped.

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						

GENERAL INSTRUCTIONS

- 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

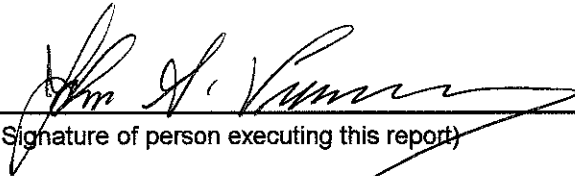
State of ... Michigan

} ss.

County of Cheboygan

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)

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

SUBSCRIBED AND SWORN BEFORE ME

at Cheboygan County

this 15th Day of January 2010


(Signature of person executing this report)

My Commission expires 10/26/2013

Notary Public
(Official Title)