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 460.55 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 state law.

Report su	Report submitted for year ending:											
	December	31, 2019										
Present n	ame of res	pondent:										
	SUPERIOR ENERGY COMPNAY, LLC											
Address o	of principal	place of	business:									
	11690 CH	IPPEWA I	HWY									
Utility rep	resentative	to whom	inquires regardi	ng thi	is report	may be	e directed:					
	Name:	EDWAR	D HARE		Title:	CONT	ROLLER					
	Address:	2674 S F	HURON ROAD									
	City:	KAWKA	WLIN		State:	MI	Zip:	48631				
	Direct Tel	ephone, I	nclude Area Code	e:	989-439	-7124						
If the utili	ty name ha	s been ch	anged during the	e past	year:							
	Prior Nam	ie:										
	Date of CI	hange:	.,									
Two copie	es of the pu	ublished a	nnual report to s	tockh	olders:							
Ī	•]	were forwarded	l to th	e Comm	ission						
1	X]	will be forwared	d to th	ne Comm	nission						
			on or about		June 30	, 2020						
Annual re	ports to st	ockholdei	'S :									
		1	are published									
	x]	are not publish	ed								
l												

FOR ASSISTANCE IN COMPLETION OF THIS FORM:

Contact the Michigan Public Service Commission (Jennifer Brooks) at brooksj10@michigan.gov OR forward correspondence to:

Michigan Public Service Commission Regulated Energy Division (Jennifer Brooks) 7109 W. Saginaw Hwy PO Box 30221 Lansing, MI 48909

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

ANNUAL REPORT OF:

SUPERIOR ENERGY COMPANY, LLC

(Name of Company)

TO THE

MICHIGAN PUBLIC SERVICE COMMISSION

For the Calendar Year:

	:	2019			
(Read Instructions on Last Pag	e Carefully	Before Filling Out Report)		
Name of Company:	SUPERIOR ENERGY	COMPA	NY, LLC	-14444000000000000000000000000000000000	
Post Office Address:	11690 CHIPPEWA H	NY, BEA	R LAKE, MI 49614		9. · · ·
Organization:	LLC (Corporation, Partnershi	p or Indivi	dual)		
Date of Organization:	January 5, 1998		_Under the laws of wha	at state?	Michigan
Printed name of person who pre	epared this report:	EDWAI	RD HARE	111 14000 100 0 0 0 0 0 0 0 0 0 0 0 0 0	
Signature of person who prepar	ed this report:			ALMAN MARKET	
If incorporated, give the titles, n	ames and addresses of	all comp	any officials at close of	year:	
Name ROBERT ROESE	<u>Title</u> MANAGING MEN	1BER	Address 604 SHIRMOR, MIDLA	AND, MI 4864	0
If not incorporated, state the na	me and address of own <u>Address</u>	er or own	ers and the extent of th	eir respective	interests:
Name of any stockholders owni each said stockholder is entitled Name		· more of		of votes to wh umber of Vote	

Name	of Respondent	This Report Is:	al	Date of Report	Year of Report
SUPE	RIOR ENERGY COMPNAY, LLC	(1) [X] An Origin (2) [] A Resubm	ai iission	(Mo, Da, Yr) 4/28/2020	12/31/19
	PI	ROPERTIES USED	IN OPERATION		
T				T	
Line	Description and Location		Date	Date Placed	Original
No.	County and City or To (a)		Purchased	In Service	Cost (d)
1		T MI 40C44	(b)	(c)	(u)
1	11690 CHIPPEWA HWY, BEAR LAK		44/44/45	4414411	#400.770
3	BEAR LAKE TOWNSHIP, MANISTEI	= COUNTY	11/14/15	11/14/15	\$132,779
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25	- Na Carlos Mila Pari				
26		TOTAL			\$132,779
	to Financial Statements		A110 00 00 00 00 00 00 00 00 00 00 00 00		
ı					

	e of Respondent This Re	port Is: An Original	Date of Report (Mo, Da, Yr)	Year of Report
SUPI		A Resubmission	4/28/2020	12/31/19
	В	ALANCE SHEET		
Line	Title of Account (a)		Balance at Beginning of Year (b)	Balance at End of Year (c)
11	INVESTMENTS	w. ·		
2	Total Utility Plant in Service	A THE STATE OF THE	2,798,387	2,829,563
3	Construction Work in Progress			0
4	Total Utility Plant (2 + 3)		2,798,387	2,829,563
5	Accumulated Provision for Depreciation		1,402,066	1,509,474
6	Net Utility Plant (4 - 5)		1,396,321	1,320,089
7	Other Property		203,328	180,714
8	Other Investments (please describe here)		383,591	414,161
9	Total Property and Investme	nts (6 thru 8)	1,983,241	1,914,964
10	CURRENT ASSETS			
11	Cash		338,202	379,652
12	Notes Receivable - Net		0	0
13	Accounts Receivable - Net		366,844	373,291
14	Material and Supplies		0	0
15	Prepayments		28,116	34,610
16	Other Current and Accrued Assets		52,018	45,512
17	Total Current and Accrued Assets (10 thru 15)	***************************************	785,180	833,065
18	Deferred Debits		0	0
19	Total Assets	(9 + 17 + 18)	2,768,420	2,748,029
20	LIABILITIES & STOCKHOLDERS EQUITY			
21	STOCKERHOLDER EQUITY			
22	Capital Stock		2,442,267	2,455,829
23	Retained Earnings		99,986	96,350
24	Total Stockholders Eq	uity (22 + 23)	2,542,253	2,552,179
25	Long -Term Debt		120,685	108,670
26	CURRENT AND ACCRUED LIABILITIES			,
27	Notes Payable	······································	0	0
28	Accounts Payable		73,162	53,045
29	Customer Deposits		16,762	14,645
30	Other Current and Accrued Liabilities		15,558	19,490
31	Total Current and Accrued Liabilities	s (27 thru 30)	105,482	87,180
32	Deferred Credits			
33	Total Liabilities and Equity (2	4+25+31+32)	2,768,420	2,748,029

Name	e of Respondent	This Report Is:	Date of Report	Year of Report
SUPI	ERIOR ENERGY COMPNAY, LLC	(1) [X] An Original (2) [] A Resubmission	(Mo, Da, Yr)	12/31/19
	·		4/28/2020	
	P	STATEMENT OF INCO	OME 	
Line	Title of Acco (a)	unt	Balance at Beginning of Year (b)	Balance at End of Year (c)
1	Operating Revenues		2,716,082	2,827,988
2	Natural Gas Production Expense		0	
3	Cost of Purchased Gas		972,403	792,100
4	Transmission Expense		0	
5	Distribution Expense Operation		0	
6	Distribution Expense - Maintenance		0	
7	Administrative & General Expense		1,478,449	1,782,796
8	Other Expenses		0	
9	Total Operation & Maintena	ance Expense (2 thru 8)	2,450,852	2,574,896
10	Depreciation & Amoritization Expens	е	131,126	130,825
11	Tax Expense		33,309	35,740
12	Interest Expense		6,715	7,406
13	Other Deductions	and the second s	0	
14	Total Cost of	Gas Service (9 thru 13)	2,622,002	2,748,867
15	Income From Operations (1 - 14)		94,080	79,121
16	Miscellaneous Non-Operating Incom	е	13,344	17,261
17	Miscellaneous Non-Operating Deduc	tions	(7,438)	(31)
18	Total Non-Operating Income (Loss)		5,906	17,230
19		NET INCOME (15 + 18)	99,986	96,351

Name of Respondent	This Report Is:	Date of Report	Year of Report
SUPERIOR ENERGY COMPNAY, LLC	(1) [x] An Original	(Mo, Da, Yr)	December 31, 2019
SUPERIOR ENERGY COMPINAL, LEC	(2) [] A Resubmission	4/28/2020	December 51, 2015

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.

1	II a rate seriedate	was not in chect during ti	ic critic year, indicate in	a look flote the p	CHOC III WIIIOH IC WC	o in choot.
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	Mcf Sold (e)	Revenue (f)
2		RESIDENTIAL		2,341	195,048	\$1,732,972
3		COMMERCIAL		150	30,531	\$270,056
4		GOVERNMENT		30	8,291	\$73,503
5		CHURCHES		37	8,940	\$81,282
6		INDUSTRIAL		0	0	\$0
7		SCHOOLS		6	13,727	\$202,228
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Notes to Financial Statements

OFF-SYSTEM SALES OF NATURAL GAS	e all sales other	Revenue For Year	(e)																	g
SALES OF N	n sales include	Mcf of Gas Sold (apprx BTU per CubicFt)	(b)																	Page 6
-SYSTEM	Off-syster	Account	(0)					The state of the s	The state of the s											
OFF	erning off-system sales.	Point of Delievery (City/Town, State)	(q)								The state of the s									
	Report the details concerning off-system sales. Off-system sales include all sales other	Name	(a)																	JRM P-522B

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Noncoincidental \equiv

Revenue Per Mcf

Line No.

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Date 9

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Peak Day Delivery to Cusotomers

than MPSC approved rate schedule sales.

12/31/19

Year of Report

Date of Report (Mo, Da, Yr) 04/28/20

SUPERIOR ENERGY COMPNAY, Ll(1)[X] An Original (2) [1] A Resubmission

This Report Is:

Name of Respondent

Year of Report	12/31/19	AL GAS (Account 489)	gas for others.	thers.		t and delivery, and names of companies	tion authorizing such transaction.	vipeline system.	0 Mct) may be grouped.		per Mcf of	Revenue Gas Delivered Schedule																											
Date of Report	(Mo, Da, Yr) 04/28/20	REVENUE FROM TRANSPORTATION OF GAS OF OTHERS - NATURAL GAS (Account 489)	sion (by respondent) of natural	state pipeline companies and ot	turar and maintractured gas. r than natural gas.	s were derived, points of receip	he Commission order or regular	d on map of the respondent's p	Minor Items (less than 1,000,000 Mct) may be grouped			Gas Gas Received Delivered																											
		NSPORTATION OF G	ansportation or compress	or compression for Inters	d or compressed is other	ies from which revenues	delivered. Also specify the	that they can be identifie	9	Distance		ion ported (in miles)	(P)	2																									
Name of Respondent This Report Is:	SUPERIOR ENERGY COMPNAY, $\text{Ll}[(1)[X]$ An Original $[(2)[]$ A Resubmission	REVENUE FROM TRA	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. Natural das means either natural das unmixed, or any mixture of natural and manufactured das	Designate with an asterisk if gas transported or compressed is other than natural gas.	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.	Designate points of receipt and delivery so that they can be identified on map of the respondent's pipeline system.	Enter Mcf at 14.73 psi at 60 degrees Fahrenheit.			Name of Company and Description of Service Performed	(6)	(5)																									
Name	SUPER		_		7	ო		4	2			Line N	<u>:</u>		_	2	က	4	5	ဖ	7	∞	တ	10	7	12	13	14	15	16	17	18	19	20	21	22	23	24	

GENERAL INSTRUCTIONS

- 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.
- 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.
- 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.
- The Oath on this page must be administered by a Notary Public or other officer authorize to administer oaths.

	OATH
State of	
} ss.	
County of	
I, the undersigned, on oath do say that I an	nAN OFFICER (State official position as owner or officer)
was prepared by myself or under my direct said Natural Gas Purchaser and/or Carrier the same to be a correct and complete stat	oing annual report was prepared; that the same cion; that I have full and complete knowledge of the affairs of the that I have examined the foregoing annual report and declare tement of the business and affairs of said Utility Company ing therein set forth, to the best of my knowledge,
	Mas Jac
	(Signature of person executing this report)
	2674 S HURON RD, KAWKAWLIN, MI 48631
at	(Address of person executing this report)
this	(Signature of person executing this report)
My Commission expires 04-24-23	MANAGING MEMBER (Official Title)