FORM OF SERVICE REQUEST FORM

Requests for service under Garden Banks' FERC Gas Tariff shall be deemed valid only after the following information is provided by Shipper in writing to Garden Banks' Contract Administration, at 1100 Louisiana, Suite 3300, Houston, Texas 77002, via email to, or Facsimile Number (832) 214-5791. Acceptance of a request is contingent upon a satisfactory credit appraisal by Garden Banks in accordance with Section 34 of the "General Terms and Conditions" of its FERC Gas Tariff.

Date of Request: _____

I. Shipper (Full Legal Name): _____
Contact Name/Department:
_____Shipper Address:
_____
_____
Telephone No.: _____
Facsimile No.: _____
Email address: _____

II. Type of legal entity and state of incorporation:

_____

_____

III. Type of company:

_____ Interstate Transporter
_____ Local Distribution Company
_____ Intrastate Transporter
_____ Producer
_____ End-User
_____ Marketer
_____ Broker
_____ Other (describe)_____

Shipper's Federal Tax ID # _____
Shipper's DUNS # _____

Type of Service (circle one) FT-1 FT-2 FT-3 IT-1
(Other type of Service) _____

Modifying Existing Service?: ___Y ___ N

Transportation Rate Requested: _____

IV. Production Platform (Block No.): _____

FORM OF SERVICE REQUEST FORM

V. Maximum Daily Quantity (MDQ) Requested: _____ Dth
Dates of Service: Commencing _____ Ending _____
_____ Evergreen: _____Month to Month _____ Year to Year
_____ Life of Reserves/Lease

VI. Receipt Point(s): _____

Delivery Point(s): _____

VII. Agent ( ) or Marketer ( ):
_____
Company Name: _____
Address: _____
Telephone No.: _____
Facsimile No.: _____
E-mail address: _____
If Agent, is Agent responsible for: Accounting, Invoices Y ___ N ___
Nominations, Scheduling Y ___ N ___

VIII. Credit Evaluation - A Shipper seeking service from Transporter under Rate Schedules FT-1, FT-2 or IT-1 must comply with the creditworthiness criteria as described in the General Terms and Conditions of the Garden Banks Tariff.
Representatives of Shipper (up to two) who are authorized to receive notices regarding Shipper's creditworthiness, including requests for additional information:

Name	Email Address
_____	_____
_____	_____

IX. Shipper understands that this request form, complete and unrevised as to format, must be received by Transporter before the transportation request will be accepted and processed.

Shipper, by its signature, certifies to Transporter (1) that the information above is correct and accurate and that all necessary transportation arrangements with the upstream and downstream transporters have been or will be secured prior to the commencement of the requested transportation service and (2) that Shipper will have title to the gas that is to be delivered to Transporter and (3) that Shipper will advise Transporter of any changes in the information provided.

X. Requested by:_____(signature)

Name:_____
Title:_____
Telephone: _____
Email Address: _____