

**REQUEST FOR FTS POINT CHANGE
MIDCONTINENT EXPRESS PIPELINE LLC**

This Request Incorporates the Provisions of
Section 2.1 of the General Terms and Conditions

Date Received _____
Time Received _____

Shipper Name: _____ Date: _____

1. Service Type: FTS Agreement No.: _____

2. Requested Primary Points and Point MDQs:

	Point Name	PIN	MDQ
Receipt	_____	_____	_____
	_____	_____	_____
Delivery	_____	_____	_____
	_____	_____	_____

3. Existing Primary Points and Point MDQs:

	Point Name	PIN	MDQ
Receipt*	_____	_____	_____
	_____	_____	_____
Delivery	_____	_____	_____
	_____	_____	_____

4. Point Change Effective Date: _____ (Note: point change will be effective unless and until Shipper submits a subsequent point change request which is accepted by MEP)

5. Current Rates: Monthly Base Reservation Rate
Monthly Base Reservation Rate \$_____/Dth

6. Requested Rates:
Monthly Base Reservation Rate \$_____/Dth

7. If Requested Point MDQ is not available, will accept less capacity: Yes___ No___
If "Yes", Minimum Acceptable Point MDQ (specify points if necessary):
_____ Dth/d

8. Requests will be binding on the entity requesting firm capacity for two (2) business days unless the request states a shorter time period or until the request is accepted or rejected by MEP, whichever occurs first. Please specify if the request is binding for a stated period which is less than two (2) business days: _____

9. Other Comments: *This Request is not applicable to Leased Capacity. In accordance with Section 2.1 (d) of the General Terms and Conditions of MEP's Tariff, any change in Primary Receipt Points on Leased Capacity is subject to the Agreement of Enable and MEP.

Name Date

Title

Please email Request for FTS Point Change to your Account Manager, or
FTSservicerequest@kindermorgan.com.

<input type="checkbox"/> Accepted by _____
<input type="checkbox"/> Not Accepted by _____
Date/Time _____
<input type="checkbox"/> Subject to attached Deal Confirmation