

1.) CORPORATION NAME:

H.L. Chapman Pipeline Construction, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI
CORPORATION SERVICE COMPANY
11 S 12TH ST
PO BOX 1463**

RICHMOND, VA 23218

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

DUE DATE: **4/30/2011**

SCC ID NO: **F1419987**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9250 FM 2243

CITY/ST/ZIP: LEANDER, TX 78641-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	DERRICK A JENSEN	
TITLE:	D/VP/AS	
ADDRESS:	1360 POST OAK BLVD STE 2100	
CITY/ST/ZIP/CO:	HOUSTON, TX 77056-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MAX THOMAS	
TITLE:	VICE PRESIDENT	
ADDRESS:	9250 FM 2243	
CITY/ST/ZIP/CO:	LEANDER, TX 78641-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	NICOLAS M. GRINDSTAFF	
TITLE:	TREASURER	
ADDRESS:	2800 POST OAK BLVD STE 2600	
CITY/ST/ZIP/CO:	HOUSTON, TX 77056-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SCOT P. FLUHARTY	
TITLE:	PRESIDENT	
ADDRESS:	4500 N. MISSION RD	
CITY/ST/ZIP/CO:	ROSEBUSH, MI 48878-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	MICHAEL J. MCARTHY	
TITLE:	CFO, SVP, AT	
ADDRESS:	1200 ROOSEVELT RD STE 400	
CITY/ST/ZIP/CO:	GLEN ELLYN, IL 60137-	

NAME: JAMES H. HADDOX TITLE: AS/VP ADDRESS: 2800 POST OAK BLVD STE 2600 CITY/ST/ZIP/CO: HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TANA L. POOL TITLE: AS/VP ADDRESS: 2800 POST OAK BLVD STE 2600 CITY/ST/ZIP/CO: HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: CAROLYN M. CAMPBELL TITLE: SECRETARY ADDRESS: 2800 POST OAK BLVD STE 2600 CITY/ST/ZIP/CO: HOUSTON, TX 77056-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ CAROLYN M. CAMPBELL SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CAROLYN M. CAMPBELL, SECRETARY PRINTED NAME AND CORPORATE TITLE	4/26/2011 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.