Print or Type

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF SOUTH DAKOTA

Print Form

This form is only for persons who wish to be an active party in this docket. You do NOT need to be a party to submit comments.

In the Matter of the Application by SCS Carbon) Transport LLC for a Permit to Construct a Carbon **Dioxide Transmission Pipeline**

APPLICATION FOR PARTY STATUS

HP24-001

Mal	lissa	D	Sch	vitto
IVIC	1133a	11.	OCI	เนเเธ

(Name of Applicant. This will be the person or entity named as a party.)

petitions the Public Utilities Commission to be granted party status in this proceeding.

Place a check mark next to each item below that applies to you, adding a mileage number where requested. I am a person or organization that received official notification of the project via U.S. mail from the siting permit applicant. 1.5 miles of the proposed project. Residential address if different from your mailing address: I own land within 0 miles of the proposed project. W1/2 SE 1/4 & NE 1/4 SE 1/4 32-99-48 Legal description: plus Govt lots in 33-99-48 I officially represent a municipal, city, township, county or other affected governmental agency within

Explain your interest in applying for party status below.

The placement of the pipeline has a substantial negative impact on:

miles of the proposed project.

- a) farm operations disrupted and negatively altered due to the chosen placement on our property.
- b) finances/retirement we have improved and worked to pay for our land to support our family financially today and long-term. The value of our land will be decreased and the future use/value is negatively impacted.

c) quality of life - noise, aesthetics, safety

Deadline: This application must be filed with the Public Utilities Commission on or before 5:00 p.m. CT, Jan. 24, 2025. File this completed form electronically at puc.sd.gov/EFilingOptions.aspx

This section is to be completed by the person requesting party status. All fields are required.

Melissa R. Schutte

Applicant's Printed/Typed Name

Name of Applicant's Organization (if Applicable)

Can be contacted via counsel

Applicant's Address (PO Box/St/Ave/Road)

Can be contacted via counsel

Applicant's Address (City, State, ZIP Code)

402-493-4100

Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number

SDco2@dominalaw.com

Applicant's E-mail Address* or, if represented, Applicant's Attorney's E-mail Address*

The section below is to be completed by the Applicant's attorney, if represented. All fields are required.

Brian Jorde / Ryan Cwach

Signature of Attorney

Date Signed

Attorney's Address (PO Box/St/Ave/Road)

maha, NE 68144

Attorney's Address (City, State, ZIP Code)

*The Commission processes its dockets electronically for time and cost efficiencies. Communication on the docket will be done via email to parties to this docket. Failure to provide an email address may result in documents being served upon the county auditor rather than sent directly to the party, pursuant to SDCL 49-41B-17.1.