



## **Filing Receipt**

**Filing Date - 2023-06-30 02:29:52 PM**

**Control Number - 54442**

**Item Number - 244**

## REPORTING FORM FOR GENERATING CAPACITY REPORTS

Provide the legal name of the party filing this report SE Titan, LLC

Provide the name, company, and telephone number of the person who may be contacted for clarification of information contained in this report: Luisa Elkins, Director of Compliance and Regulatory Counsel, SB Energy.

email: regulatory@sbenergy.com; telephone number: (650) 731-3262

The Reporting Form for Generating Capacity Reports consists of this cover sheet, the attached four tables, and an affidavit. Please review the *Instructions to the Reporting Form for Generating Capacity Reports* before completing this reporting form.

This reporting form and the instructions may be obtained from the Commission's Central Records Division or downloaded from Commission website at <http://www.puc.state.tx.us>. Information may be inserted in the form electronically. As necessary, reply spaces may be expanded and/or rows may be added to the tables in order to provide the information requested.

The completed report must be filed with the Public Utility Commission of Texas, Attention: Filing Clerk, Public Utility Commission of Texas, 1701 N. Congress Avenue, P.O. Box 13326, Austin, Texas, 78711-3326. Submit four (4) copies, including the original.

**Generating Capacity Reports – Table 1**

		Reliability Council (or Power Region)				
			Name:		Name:	
		ERCOT	Texas Area	Total Rel. Council (or Pwr. Region)	Texas Area	Total Rel. Council (or Pwr. Region)
1. Total capacity of generating facilities that are connected with a transmission or distribution system.	270					
2. Total capacity of generating facilities used to generate electricity for consumption by the person owning or controlling the facility.	NA					
3. Total capacity of generating facilities that will be connected with a transmission or distribution system and operating within 12 months.	NA					
4. Total affiliate installed generation capacity.	5040					
5. Total amount of capacity available for sale to others.	Confidential					
6. Total amount of capacity under contract to others.	Confidential					
7. Total amount of capacity dedicated to own use.	NA					
8. Total amount of capacity that has been subject to auction as approved by the Commission.	NA					
9. Total amount of capacity that will be retired within 12 months.	NA					
10. Annual capacity sales to affiliated retail electric providers (REPs).	NA					
11. Annual wholesale energy sales.	Confidential					
12. Annual retail energy sales.	NA					
13. Annual energy sales to affiliate REPs.	NA					

**Generating Capacity Reports – Table 2**

<b>Generating Facility Name</b>	<b>Facility Capacity</b>	<b>Location (County)</b>	<b>Utility Service Area</b>	<b>Reliability Council</b>	<b>Transmission Congestion Zone (if applicable)</b>
SE Titan LLC	261.36	Culberson	LCRA	ERCOT	N/A

**Generating Capacity Reports – Table 3**

<b>Generating Facility Name</b>	<b>Generating Unit Name</b>	<b>Unit Capacity</b>	<b>Annual Generation</b>	<b>Primary Fuel or Nonfuel Resource</b>	<b>Technology of Natural Gas Generator</b>	<b>Date of Commercial Operation</b>
SE Titan LLC	SE Titan LLC	261.36	Culberson	Solar	N/A	Dec. 1, 2021

**Generating Capacity Reports – Table 4**

1. Provide the facility name and unit name of each generating unit that is jointly owned. For each such unit provide the names of the joint owners and their respective ownership percentages.

N/A

2. Provide the facility name and unit name of each generating unit that is owned but not controlled. For each such unit, provide the name of the controlling party and briefly describe the nature of the other party's control of the unit.

N/A

3. Provide the facility and unit name of each generating that is located on the boundary between two power regions (i.e., reliability councils) and able to deliver electricity directly into either power region. For each such unit, provide the total energy sales to each power region during the preceding year.

N/A

4. If the reporting party is subject to PURA Sec. 39.154(e), provide the facility name and unit name of each "grandfathered" unit that is located in an ozone non-attainment area. Attach to this report copies of any applications to the Texas Natural Resources Conservation Commission (TNRCC) for a permit for the emission of air contaminants related to the grandfathered units. Also attach a written description of the progress made since the last Generating Capacity Report on achieving approval of each such TNRCC permit.

N/A

5. For each power region (i.e., reliability council) in Texas in which the reporting party owns generation facilities, identify the amount of transmission import capability that has been reserved and is available to import electricity during the summer peak into the power region from generating facilities that are owned by the reporting party or its affiliate in another power region.

N/A

**AFFIDAVIT**

*(Must be notarized by a public notary)*

STATE OF \_\_\_\_\_ §  
COUNTY OF \_\_\_\_\_ §

BEFORE ME, the undersigned authority, on this day personally appeared the undersigned, who, after being duly sworn, stated on their oath that they are entitled to make this Affidavit, and that the statements contained below and in the foregoing are true and correct.

I swear or affirm that the attached report was prepared under my direction, and that I have the authority to submit this report on behalf of the reporting party. I further swear or affirm that all statements made in the report are true, correct and complete and that any substantial changes in such information will be provided to the Public Utility Commission of Texas in a timely manner.

  
\_\_\_\_\_  
Signature of Authorized Representative

Abhijeet Sathe - Co President

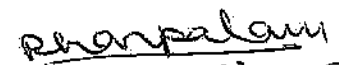
\_\_\_\_\_  
Printed Name

SE Titan, LLC

\_\_\_\_\_  
Name of Reporting Party

Sworn and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Month Year

Notary Public in and for the State of \_\_\_\_\_

  
\_\_\_\_\_  
Notary Acknowledgement/Jurat  
on separate page.

# JURAT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of San Mateo

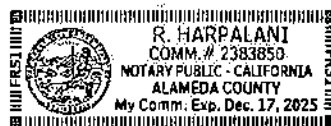
Subscribed and sworn to (or affirmed) before me on this 28 day of June,  
2023 by Abhijeet Sathe

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

R. Harpalani

Signature

(Seal)



## OPTIONAL INFORMATION

### DESCRIPTION OF THE ATTACHED DOCUMENT

Reporting form for  
(Title or description of attached document)

Generating Capacity  
(Title or description of attached document continued)  
Reports

Number of Pages \_\_\_\_\_ Document Date \_\_\_\_\_

Additional information \_\_\_\_\_

## INSTRUCTIONS

The wording of all Jurats completed in California after January 1, 2015 must be in the form as set forth within this Jurat. There are no exceptions. If a Jurat to be completed does not follow this form, the notary must correct the verbiage by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one with does contain the proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

- State and county information must be the state and county where the document signer(s) personally appeared before the notary public.
- Date of notarization must be the date the signer(s) personally appeared which must also be the same date the jurat process is completed.
- Print the name(s) of the document signer(s) who personally appear at the time of notarization.
- Signature of the notary public must match the signature on file with the office of the county clerk.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different jurat form.
  - ❖ Additional information is not required but could help to ensure this jurat is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
- Securely attach this document to the signed document with a staple.