



Pipeline Safety Division Investigation Report

Investigation regarding: **Mike Campbell**

UPPAC Database Record ID: 1569

Investigator: Mike Enlow

Report Date: 02/15/2012

Damage Date: 07/01/2010

Damage Address: 480 N Corwin Rd

City: Bloomfield

County: Greene

The Parties

Excavator: **Mike Campbell**

Contact: Mike Campbell

Address: 744 W Harvest Church Road, Newberry, In 47449

Telephone: 812-384-4703

Facility Owner: Midwest Natural Gas Corporation

Contact: Arthur Campbell

Address: 107 SE Third Street, Washington, IN 47501-0520

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Investigation regarding: Mike Campbell

UPPAC Database Record ID: 1569

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$190

Excavator Activities/Cause of damage information:

Excavator request locates: No Indiana 811 ticket Number:

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Sewer (Sanitary/Storm)

Synopsis: Damage to a natural gas service occurred during work to expand a septic system.

Findings: Reported by Midwest Natural Gas; excavator responded to initial notice on 11/28/2011. There was no call made to Indiana 811 to request that underground utilities be located and marked.

Conclusion: There was a failure to provide notice of excavation.

Violation: IC 8-1-26-16(g): Failure to provide notice of excavation.

Mike Campbell currently has no other reports of damages in the record.

NO

LOCATE

TICKET

PROVIDED



November 15, 2011

Mr. Arthur Campbell
Midwest Natural Gas Corporation
107 SE Third Street
Washington, IN 47501-0520

Subject: Investigation Request for Information

Date of Event: 7/1/2010

Event Location: 480 N Corwin Road, Bloomfield

Facility Owner: Midwest Natural Gas Corporation

Excavator: Mike Campbell

Other Party: N/A

Pipeline Division Case No. 1569

Dear Mr. Campbell:

Pursuant to Indiana Code 8-1-26, the *Indiana Damage to Underground Facilities Act*, the Pipeline Safety Division of the Indiana Utility Regulatory Commission ("Pipeline Division") is required to investigate reported incidents of alleged statutory violations involving underground pipeline safety. The purpose of this statute is to promote excavation and pipeline safety and to reduce the imminent danger to life, health, property, or loss of service associated with unsafe digging practices. Please note that the investigation does not entail determining criminal liability or a civil determination of fault or damages; however, it does determine whether any statutory violations were committed regarding public safety.

The Pipeline Division received information regarding potential statutory violations regarding the date and location referenced above. You were identified as a person or entity that might have information that would assist the Pipeline Division in its investigation. Therefore, we have contacted you in order to receive the full account of information in order to make a fair determination related to the circumstances of this incident.

We have asked all involved parties, entities and witnesses to provide *written* information within *30 days* in order to meet legal deadlines to conclude our investigation. **Please consider this letter as a formal request to receive any and all information and evidence (including a narrative, documentation,**

maps, photographs or any other written information) you can access regarding anything you may know about the incident referenced above.

Please promptly provide your information to: Pipeline Safety Division – Case No. 1569, Indiana Utility Regulatory Commission, 101 West Washington Street, # 1500E, Indianapolis, IN 46204. Also, please include the Investigation Number referenced above on your materials. In the alternative, if you would prefer to scan the materials and send them electronically, please send the documents to: PipelineDamageCase@urc.in.gov.

Although you are not a formal party in this investigation, please treat this request for information seriously, because the potential civil penalties for violations include: a potential civil fine up to \$10,000.00; mandatory education and training for employees regarding pipeline safety; a required development plan to avoid future violations; or a warning letter for certain homeowner/tenants who are first time offenders. Consequently, your input will assist the Pipeline Division with its determination and may have a substantial impact on the case.

After the investigation is completed, the Pipeline Division will prepare an Investigation Report with findings and forward it to the Underground Plant Protection Advisory Committee (“Advisory Committee”). This is a statutory committee, comprised of excavators, facility operators, investor and municipal utilities, the 811 Association and facility locate marking companies, whose role is to evaluate the Pipeline Division’s findings and make a recommendation for a civil penalty. In the event there is disagreement regarding the Advisory Committee’s recommendation to the Commission, parties are entitled to request a hearing before the full Commission. If there is a violation, the Indiana Utility Regulatory Commission (“Commission”) will impose the penalty. Any fines imposed are statutorily required to be spent funding the Commission’s training and educational programming to promote excavation and pipeline safety.

Thank you for your *prompt* assistance in providing written information to the Pipeline Division regarding the previously referenced incident. Any information received after the deadlines will not be considered in the investigation, will be unavailable to the Advisory Committee and will result in a lack of full information being made available; hence, your participation is vital to serving the interests of justice and enhancing the public’s safety. In an effort to assist you, please find an enclosure entitled “Information Request.” Should you have procedural or legal questions regarding the Underground Plant Protection Advisory Committee or the Indiana Utility Regulatory Commission, please contact David L. Welch, Assistant General Counsel, at (317) 234-4715. Should you have questions regarding the pipeline damage identified above, or our investigation, please contact me at (317) 232-2718. Thank you for your assistance.

Sincerely,



William Boyd
Director, Pipeline Safety Division

Enclosure: Information Request

INFORMATION REQUEST

Pipeline Safety Division Indiana Utility Regulatory Commission

Case No. 1569

The Pipeline Safety Division of the Indiana Utility Regulatory Commission requests any and all information you can provide regarding the following criteria:

The Parties:

Excavator Information:

Business Name: Mike Campbell
Responsible Party Personal Name: Mike Campbell
Title (if any): _____
Address: 744 West Harvest Church Road
City, State, Zip: Bloomfield, IN 47424
Preferred Telephone: 812-384-4703
Cell Phone Number: _____
Email Address: _____

Facility Information:

Business Name: Midwest Natural Gas Corp.
Responsible Party Personal Name: Ted A. Williams
Title (if any): Bloomfield Regional Manager
Address: PO Box 66
City, State, Zip: Bloomfield, IN 47424
Preferred Telephone: 812-384-4150
Cell Phone Number: 812-259-9236
Email Address: twilliams@midnatgas.com

Locator Service Information:

Business Name: Midwest Natural Gas Corp.
Responsible Party Personal Name: _____
Title (if any): _____
Address: Bloomfield Regional Manager
City, State, Zip: PO Box 66
Preferred Telephone: Bloomfield, IN 47424
Cell Phone Number: 812-384-4150
Email Address: _____

Other (Witness, Police, Fire, Other) Information:

Personal Contact: _____
Business/Organization Name: _____
Title (if any) _____
Address: _____
City, State, Zip: _____
Preferred Telephone: _____
Secondary Telephone: _____
Email Address: _____

Utility Line Impact:

Location of Damage:

Address: 480 North Corwin Road
City, State, Zip: Bloomfield, IN 47424
Nearest Intersection: North Corwin Road & Hwy 54 East

Product Type (circle one):

- Natural Gas
- Liquid Pipeline
- Unknown/Other

Facility Type (Circle One):

- Distribution
- Gathering
- Service/Drop
- Transmission
- Unknown/ Other

Size (Diameter/etc.): 5/8"

Pressure (PSIG/Inches): 50 PSI

Interruption in Service: Yes No

Evacuation: Yes No

Repair Cost (if know): \$ \$189.74

Number of Customers Affected: 1

If yes, How Many Evacuated? _____

Cause of Damage Information:

Type of Equipment (circle one):

Auger

Backhoe/Trackhoe

Boring/Drilling

Directional Drilling

Explosives

Farm Equipment

Grader/Scraper

Hand Tools

Milling Equipment

Probing Device

Trencher

Vacuum Equipment

Unknown/Other

Type of work performed (circle one):

Agriculture

Cable TV

Curb/Sidewalk

Bldg. Construction

Bldg. Demolition

Drainage

Driveway

Electric

Engineering/Surveying

Fencing

Grading

Irrigation

Landscaping

Liquid Pipeline

Milling

Natural Gas

Pole

Public Transit Authority

Railroad Maintenance

Road Work

Sewer (Sanitary/Storm)

Site Development

Steam

Storm Drain/Culvert

Street Light

Telecommunications

Traffic Signal

Traffic Sign

Water

Waterway Improvement

Unknown/Other

Release of Product: Yes No
Ignition and/or Fire: Yes No
Excavator Notify 811: Yes No

Locate Information:

Excavator Request Locate: Yes No
Indiana 811 Locate Ticket Number: _____
Locate Marks Visible: Yes No
Locate Marks Correct: Yes No
Excavator "White Lined": Yes No
Maps Used to Mark Facilities: Yes No
Was Locate Provided within Two (2) Working Days: Yes No
Operator Employees ON-site at time of incident? Yes No

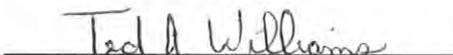
Incident Impact Information:

Number of Outpatient Treated: _____
Number of Inpatient Treated: _____
Number of Fatalities: _____
Fire Department Response: Yes No
Police Department Response: Yes No
Ambulance Response: Yes No

Additional Information/Comments: _____

YOUR PIPELINE SAFETY DIVISION CASE NO. 1569
YOUR FULL NAME: Ted Aaron Williams
FULL NAME OF BUSINESS/ENTITY (if applicable): Midwest Natural Gas Corp.
YOUR BUSINESS TITLE (if applicable): Bloomfield Regional Manager
ADDRESS: Po Box 66 2244 West State Road 54
CITY: Bloomfield STATE: IN ZIP CODE: 47424
YOUR TELEPHONE NUMBER: (812) 384-4150 SECOND NO. (812) 259-9236
YOUR EMAIL ADDRESS: twilliams@midnatgas.com

TODAY'S DATE: 11/28/2011

YOUR SIGNATURE  TITLE Bloomfield Regional Manager

Please return your Narrative Statement and Answers to the above questions to:

Pipeline Safety Division-Case No. 1569
Indiana Utility Regulatory Commission
101 West Washington Street, #1500E
Indianapolis, IN 46204

Or scan document(s) and Email to:
PipelineDamageCase@urc.in.gov



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (11-09)
INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Jul 2, 2010

Who is submitting this information?

Name of person providing this information: Ted A. Williams

Business Address: P.O. Box 66

City, State, Zip Code: Bloomfield, IN 47424

Telephone Number: 8,123,844,150

Fax Number: 8,123,844,895

Email Address: twilliams@midnatgas.com

Excavator Information, if known

Full Name: Mike Campbell

Business Address: 744 West Harvest Church Road

City, State, Zip Code: Newberry, IN 47449

Telephone Number: 8,123,844,703

Fax Number: _____

Email Address: _____

Excavation or Demolition Information

Type of Excavation or Demolition: Excavation

Type of Excavation or Demolition Equipment: Back Hoe

Type of Work Performed: Sewer Repair

Date and Location of Damage

Date of Damage: Jul 1, 2010 _____

County: Greene _____

City/Subdivision/Location Name: Bloomfield _____

Street Address: 480 North Corwin Road _____

Nearest Intersection: State Road 54 _____

Right of way where incident occurred: Public Private

Was there any customer service interruption? Yes No

If yes, how many affected 1 _____

Projected timeline for completion of re-lights after repairs are made. 15 Min _____

Were evacuations necessary as a result of release of gas or hazardous materials? Yes No

If yes, how many evacuated? _____

Was there an ignition of released gas or material? Yes No

If yes, was there:

Injuries, how many? _____

Fatalities, how many? _____

Property damage, Estimate \$ _____

Affected Facility Information

What type of facility operation was affected? 5/8" Plastic Service line _____

What type of product was involved? Natural Gas _____

What was the depth of the damaged facility? 2 Feet _____

Notification, Locating, Marking

Did excavator follow the law with respect to requesting a locate and commencing work? Yes No

Did excavator notify you in event of damage? Yes No

One Call ticket Number, if known: No Locate

Contract or company locator? _____

If contracted, what was the name of the contracted locator? _____

Were facility marks visible in the area of excavation or demolition? Yes No

Were facilities marked correctly? Yes No

Locating equipment type, if known: _____

Type of marking used:

Paint Flags Other

If other, explain: _____

Was site marked by "White Lining"? Yes No

Were special instruction part of the locate order? Yes No

Were maps used during marking? Yes No

Did the pipeline operator provide a positive response? Yes No

Were pipeline company representatives on site at the time of excavation or demolition? Yes No

Description of Cause

Possible Cause: No locate was called in

Additional Comments

Information Request

Pipeline Safety Division Indiana Utility Regulatory Commission

Case No. 1569

The Pipeline Safety Division of the Indiana Utility Regulatory Commission requests any and all information you can provide regarding the following criteria:

The Parties:

Excavator Information:

Business Name: *Mike Campbell*
Responsible Party Personal Name: *Mike Campbell*
Title (if any): *Owner/Operator*
Address: *744 W. Harvest Church Rd*
City, State Zip: *Newberry, IN. 47449*
Preferred Telephone: *812-384-4703*
Cell Phone Number:
Email Address:

RECEIVED

NOV 28 2011

INDIANA UTILITY
REGULATORY COMMISSION

Facility Information:

Business Name:
Responsible Party Personal Name:
Title (if any): *MAX JORDAN*
Address: *P.O. Box 404*
City, State, Zip: *Bloomfield, IN. 47424*
Preferred Telephone: *812-384-3535*
Cell Phone Number: *812-384-6509*
Email Address:

Locator Service Information:

Business Name:
Responsible Party Personal Name:
Title (if any):
Address:
City, State Zip:
Preferred Telephone:
Cell Phone Number:
Email Address:

Other (Witness, Police, Fire, Other) Information:

Personal Contact:

Business/Organization Name:

Title (if any)

Address:

City, State, Zip:

Preferred Telephone:

Cell Phone Number:

Email Address:

Utility Line Impact:

Location of Damage:

Address: 480 N. Corwin Rd.

City, State Zip: Bloomfield, DU. 89424

Nearest Intersection:

Product Type (circle one):

Natural Gas

Liquid Pipeline

Unknown/Other

Facility Type (circle one):

Distribution

Gathering

Service/Drop

Transmission

Unknown/Other

Size (Diameter/etc.): 1/2"

Pressure (PSIG/Inches): 50 #

Interruption in Service: Yes / No

Number of Customers Affected: 1

Evacuation: Yes / No If yes, How Many Evacuated? _____

Repair Cost (if known): \$ less than 100,

Cause of Damage Information:

Type of Equipment (circle one):

Auger
Backhoe/Trackhoe
Boring /Drilling
Directional Drilling
Explosives
Farm Equipment
Grader/Scraper
Hand Tools
Milling Equipment
Probing Device
Trencher
Vacuum Equipment
Unknown/Other

Type of Work Performed (circle one):

Agriculture
Cable TV
Curb/Sidewalk
Bldg. Construction
Bldg. Demolition
Drainage
Driveway
Electric
Engineering/Surveying
Fencing
Grading
Irrigation
Landscaping
Liquid Pipeline
Milling
Natural Gas
Pole
Public Transit Authority
Railroad Maintenance
Road Work
Sewer (Sanitary/Storm)
Site Development
Steam
Storm Drain/Culvert
Street Light
Telecommunications
Traffic Signal
Traffic Sign
Water
Waterway Improvement
Unknown/Other

Release of Product: Yes / No

Ignition and/or Fire: Yes / No

Excavator Notify 811: Yes / No

Locate Information:

Excavator Request Locate: Yes / No

Indiana 811 Locate Ticket Number: NONE

Locate Marks Visible: Yes / No

Locate Marks Correct: Yes/No

Excavator "White Lined": Yes / No N/A

Maps Used to Mark Facilities: Yes / No N/A

Was Locate Provided within Two (2) Working Days: Yes / No N/A

Operator Employees On-site during Excavation: Yes / No

Incident Impact Information:

Number of Outpatient Treated: 0

Number of Inpatient Treated: 0

Number of Fatalities: 0

Fire Department Response: Yes / No

Police Department Response: Yes / No

Ambulance Response: Yes / No

Additional Information/Comments:

I, Max Jordan ask Mr. Campbell to address to Septic System, was in process of selling property & appraiser was coming 7-01-10 & said septic system had to be done for appraisal. Did not know gas line was buried at location, resumed gas line come into furnace a few feet from location. Did not have time to call locater service.

Max Jordan

YOUR PIPELINE SAFETY DIVISION CASE NO. 1569

YOUR FULL NAME: Michael Campbell

FULL NAME OF BUSINESS/ENTITY (if applicable): _____

YOUR BUSINESS TITLE (if applicable): Owner/opr.

ADDRESS: 744 W. HARVEST Church Rd.

CITY: Newberry IN. STATE: IN. ZIP CODE: 47449

YOUR TELEPHONE NUMBER: (812) 384-4103 SECOND NO. () _____

YOUR EMAIL ADDRESS: _____

TODAY'S DATE: 11-18-11

YOUR SIGNATURE: Mike Campbell TITLE (if any) Owner

Please return your Narrative Statement and Answers to the above questions to:

**Pipeline Safety Division – Case No. 1569
Indiana Utility Regulatory Commission
101 West Washington Street, # 1500E
Indianapolis, IN 46204**

Or scan document(s) and Email to:

PipelineDamageCase@urc.in.gov