



Pipeline Safety Division Investigation Report

Investigation regarding: **Charles Chanley Jr**

UPPAC Database Record ID: 1571

Investigator: Chuck Weindorf

Report Date: 02/27/2012

Damage Date: 07/11/2010

Damage Address: 3028 E Mansfield Rd

City: Leavenworth

County: Crawford

The Parties

Excavator: **Charles Chanley Jr**

Contact: Charles Chanley Jr, Homeowner

Address: 3028 E Mansfield Road, Leavenworth, In 47137

Telephone: 812-739-4793

Facility Owner: Indiana Natural Gas Corporation

Contact: Phillip Ross

Address: 1080 W Hospital Road, Paoli, IN 47454

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Investigation regarding: Charles Chanley Jr

UPPAC Database Record ID: 1571

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: False

Number of Customers Affected: 0

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$100

Excavator Activities/Cause of damage information:

Excavator request locates: No Indiana 811 ticket Number:

Type of Equipment: Hand Tools

Type of work performed: Fencing

Synopsis: Damage to a natural gas service occurred during work to install fencing.

Findings: Reported by Indiana Natural Gas; homeowner responded to initial notice on 11/09/2011. Damaged service was to the house and still energized but was not in use. Homeowner failed to request that underground facilities be located and marked prior to beginning work.

Conclusion: Homeowner failed to provide notice of excavation.

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

Charles Chanley Jr currently has no other reports of damages in the record.

NO

LOCATE

TICKET

PROVIDED

STATE OF INDIANA



INDIANA UTILITY REGULATORY COMMISSION
101 W. WASHINGTON STREET, SUITE 1500E
INDIANAPOLIS, INDIANA 46204-3407

<http://www.in.gov/iurc>
Office: (317) 232-2701
Facsimile: (317) 232-6758

November 2, 2011

Mr. Phillip Ross
Indiana Natural Gas Corporation
1080 W Hospital Road
Paoli, IN 47454

RECEIVED

NOV 28 2011

INDIANA UTILITY
REGULATORY COMMISSION

Subject: Investigation Request for Information

Date of Event: 7/11/2010

Event Location: 3028 E Mansfield Rd, Leavenworth

Facility Owner: Indiana Natural Gas Corporation

Excavator: Charles Chanley Jr

Other Party: N/A

Pipeline Division Case No. 1571

Dear Mr. Ross:

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. 1571, 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



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION
State Form 54122 (R / 11-09)
INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: 07-13-2010

Who is submitting this information?

Name of person providing this information: Phil Ross - Indiana Natural Gas Corp.

Business address (*number and street*): 1080 W Hospital Road

City, State, and Zip Code: Paoli, IN 47454

Telephone Number (*area code*): +1 (812) 723-2151

Fax Number (*area code*): +1 (812) 723-2188

Email address: phil_r@indiananatural.com

Excavator Information, if known

Full Name: Charles Chanley Jr

Business address (*number and address*): (homeowner) 3028 E Mansfield Rd

City, State, and Zip Code: Leavenworth, IN 47137

Telephone number (*area code*): +1 (812) 739-4793

Fax number (*area code*): _____

Email address: _____

Excavation or Demolition Information

Type of excavation or demolition: Installing Fence

Type of excavation or demolition equipment: Post Hole Digger (hand operated)

Type of work performed: Digging Post Holes for fence

Date and Location of Damage

Date of damage: 07-11-2010

County: Crawford

City/Subdivision/Location Name: Leavenworth, IN

Street address: 3028 E Mansfield Road

Nearest intersection: SR 66 S

Right of way where incident occurred: Public Private

Was there a release of product? Yes No

Was there any customer service interruption? Yes No

If yes, how many affected none (line fed vacant riser not being used)

Projected timeline for completion of re-lights after repairs are made. n/a

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

If yes, how many evacuated? n/a

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

If yes, was there:

Injuries, how many? 0

Fatalities, how many? 0

Property damage, Estimate \$ 100

Affected Facility Information

What type of facility operation was affected? Gas Distribution 3/4" service line.

What type of product was involved? Natural Gas

What was the depth of the damaged facility? 18"

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: n/a

Contract or company locator? n/a

If contracted, what was the name of the contracted locator? n/a

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

Were facilities marked correctly? Yes No

Locating equipment type, if known: n/a

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: Digging without a locate.

Additional Comments

Service line was damaged by post hole diggers and was leaking, but was not cut in two. Homeowner called 911



Information Request

Pipeline Safety Division Indiana Utility Regulatory Commission

Case No. 1571

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: N/A
Responsible Party Personal Name: CHARLES CHANLEY, JR.
Title (if any): HOME OWNER
Address: 3028 E MANSFIELD ROAD
City, State Zip: LEAVENWORTH, IN 47137
Preferred Telephone: 812-739-4793
Cell Phone Number:
Email Address:

Facility Information:

Business Name: INDIANA NATURAL GAS
Responsible Party Personal Name: PHIL ROSS
Title (if any): GM
Address: PO BOX 450
City, State, Zip: PADUCAH, IN 47454
Preferred Telephone: 812-723-2151
Cell Phone Number:
Email Address: phil_r@indiananatural.com

Locator Service Information:

Business Name: INE (see above)
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: 3028 E MANSFIELD ROAD

City, State Zip: LEAVENWORTH, IN 47137

Nearest Intersection: SR 66 S

Product Type (circle one):

Natural Gas

Liquid Pipeline

Unknown/Other

Facility Type (circle one):

Distribution

Gathering

Service/Drop

Transmission

Unknown/Other

Size (Diameter/etc.): ~~3~~ 3/4"

Pressure (PSIG/Inches): 42

Interruption in Service: Yes / No Number of Customers Affected: 0

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

Repair Cost (if known): \$ _____

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

POST HOLE DIGGER

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 during Excavation: 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:

- SERVICE TO VACANT RISER ON PROPERTY.
- HAND TOOLS ONLY
- MR. CHALEY IS THE PROPERTY OWNER & WAS DOING THE DIGGING
- LINE WAS NICKED, CAUSING A LEAK
- SEE ATTACHED.

YOUR PIPELINE SAFETY DIVISION CASE NO. 1571

YOUR FULL NAME: Phillip S Ross

FULL NAME OF BUSINESS/ENTITY (if applicable): INDIANA NATURAL GAS

YOUR BUSINESS TITLE (if applicable): GENERAL MANAGER

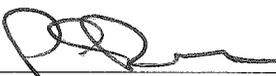
ADDRESS: PO BOX 450

CITY: PAOLI STATE: IN ZIP CODE: 47454

YOUR TELEPHONE NUMBER: (912) 723 2151 SECOND NO. () -

YOUR EMAIL ADDRESS: phil@indiananatural.com

TODAY'S DATE: 11/21/11

YOUR SIGNATURE:  TITLE (if any) GM

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

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

Or scan document(s) and Email to:

PipelineDamageCase@urc.in.gov

Information Request

Pipeline Safety Division
Indiana Utility Regulatory Commission

Case No. 1571

RECEIVED

NOV 09 2011

INDIANA UTILITY
REGULATORY COMMISSION

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:

Responsible Party Personal Name:

Title (if any):

Address:

City, State Zip:

Preferred Telephone:

Cell Phone Number:

Email Address:

Facility Information:

Business Name:

Responsible Party Personal Name:

Title (if any):

Address:

City, State, Zip:

Preferred Telephone:

Cell Phone Number:

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:

City, State Zip:

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.): _____

Pressure (PSIG/Inches): _____

Interruption in Service: Yes / No **Number of Customers Affected:** _____

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

Repair Cost (if known): \$ _____

Cause of Damage Information:

Type of Equipment (circle one):

Auger
Backhoe/Trackhoe
Boring /Drilling
Directional Drilling
Explosives
Farm Equipment
Grader/Scraper
Hand Tools Post hole digger
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 during Excavation: Yes / No

Incident Impact Information:

Number of Outpatient Treated: None

Number of Inpatient Treated: None

Number of Fatalities: None

Fire Department Response: Yes (No)

Police Department Response: Yes (No)

Ambulance Response: Yes (No)

Additional Information/Comments:

I was digging a hole with post hole diggers to put a fence post in to pasture horses. I did not hit the main gas line out at the road. I did hit the 1/2 line it probably 300ft away from the main line. There was no one around to me. I helped the man that came to fix the line. We spliced the line back, probably in 10 minutes. I'm sorry about this I've learnt my lesson. I didn't know I was suppose to call on our own place. It won't happen again.

Sorry Charlie

