



## Pipeline Safety Division Investigation Report

### Investigation regarding: Miller Pipeline

UPPAC Database Record ID: 3569

Investigator: Howard Friend

Report Date: 12/13/2012

Damage Date: 8/15/2012 12:54:57 PM

Damage Address: 512 S Clinton St

City: Alexandria

County: Madison

### The Parties

Excavator: **Miller Pipeline**

Contact: Ralph Miller, Vice President

Address: 8850 Crawfordsville Rd, Indianapolis, In 46234

Telephone:

Facility Owner: Vectren

Contact: Darlene Kulhanek

Address: 1 N Main Street, Evansville, IN 47702

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

## **Investigation regarding: Miller Pipeline**

UPPAC Database Record ID: 3569

### **Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 2

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$494

### **Excavator Activities/Cause of damage information:**

Excavator request locates: Yes    Indiana 811 ticket Number: 1208130146

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Natural Gas

**Synopsis:** A natural gas line was damaged during excavation for a gas line.

**Findings:** Reported by Indiana 811; excavator's response to initial notice was received on 10/12/2012. The excavator had a valid locate request and the operator provided accurate locate markings. The excavator had spotted the facility and proceeded to dig beside the line and the line took an unexpected turn. The line was damaged with a backhoe.

**Conclusion:** There was a failure to maintain two (2) feet of clearance with mechanized equipment.

**Violation: IC 8-1-26-20(b): Failure to plan excavation to avoid damage or interference with underground facilities; Failure to maintain two (2) feet clearance with mechanized equipment.**



## INFORMATION REQUEST

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 3569

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

*Upon completion of answers select email button for submission.*

### The Parties

#### Excavator Information:

Business Name: Miller Pipeline

Responsible Party Personal Name: Denny Hewson

Title (if any): Foreman

Address (number and street): 8850 Crawfordsville Rd.

City, State and ZIP Code: Indianapolis, IN 46234

Preferred Telephone Number (area code): 317 293-0278

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: info@millerpipeline.com

#### Facility Information:

Business Name: Vectren

Responsible Party Personal Name: Keith Thomas

Title (if any): \_\_\_\_\_

Address (number and street): \_\_\_\_\_

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Locator Service Information:**

Business Name: USIC \_\_\_\_\_

Responsible Party Personal Name: \_\_\_\_\_

Title (*if any*): \_\_\_\_\_

Address (*number and street*): \_\_\_\_\_

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Cause of Damage Information**

**Type of Equipment (*select one*):** Backhoe/Trackhoe

**Type of Work Performed (*select one*):** Natural Gas

**Other Information (Witness, Policc, Fire, Other):**

Personal Contact: Mike Granger \_\_\_\_\_

Business/Organization Name: Miller Pipeline \_\_\_\_\_

Title (*if any*): Laborer \_\_\_\_\_

Address (*number and street*): 8850 Crawfordsville Rd. \_\_\_\_\_

City, State and ZIP Code: Indianapolis, IN 46234 \_\_\_\_\_

Preferred Telephone Number (area code): 317 293-0278 \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: info@millerpipeline.com

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### Utility Line Impact

#### Location of Damage:

Address (*number and street*): 512 Clinton Str.

City, State and ZIP Code: Alexandria, IN

Nearest Intersection: S. Clinton and 2nd

**Product Type (*select one*):** Natural Gas

**Facility Type (*select one*):** Distribution

**Size (Diameter/etc.):** 2" PE

**Pressure (PSIG/Inches):** 40 psig

**Interruption in Service:**       Yes       No      **Number of Customers Affected:** \_\_\_\_\_

**Evacuation:**       Yes       No      **If yes, How Many Evacuated?** \_\_\_\_\_

**Repair Cost (if known):** \$ \_\_\_\_\_

**Release of Product:**       Yes       No

**Ignition and/or Fire:**       Yes       No

**Excavator Notify 811:**       Yes       No

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### Locate Information

**Excavator Request Locate:**       Yes       No

**Indiana 811 Locate Ticket Number:** 1208130146

- 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:** <sup>0</sup> \_\_\_\_\_

**Number of Inpatient Treated:** <sup>0</sup> \_\_\_\_\_

**Number of Fatalities:** <sup>0</sup> \_\_\_\_\_

**Fire Department Response:**  Yes  No

**Police Department Response:**  Yes  No

**Ambulance Response:**  Yes  No

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### Additional Information / Comments

We hand spotted gas service and PE main at tee. We had about 6" to 8" of pipe exposed and placed spade against main and moved over about 1 foot to dig down so we could expose more of the main. While doing so we struck the main with as it moved over (offset) 2 feet in the short distance of our excavation. The tracer wire and therefore the marks did not move over like the pipe did. The tracer wire was buried about 18" away from the pipe at that location.

**NARRATIVE STATEMENT**

Your Pipeline Safety Division Case Number: 3569

Your Full Name: Ralph Miller

Full Name of Business / Entity (if applicable): Miller Pipeline

Your Business Title (if applicable): VP

Address (number and street): 8850 Crawfordsville Rd.

City: Indianapolis State: IN ZIP Code: 46234

Your E-mail Address: ralph.miller@millerpipeline.com

Today's Date (month, day, year): September 27, 2012

Your Signature: Ralph Miller Title (if any) VP HR

Please return your Narrative Statement to:

**Pipeline Safety Division – Case Number 3569  
Indiana Utility Regulatory Commission  
101 West Washington Street, 1500E  
Indianapolis, IN 46204**

Or scan the statement and Email to:

**[PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)**

## Miller, Ralph

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**From:** Heminger-Frazier, Sarah  
**Sent:** Friday, October 12, 2012 8:54 AM  
**To:** Miller, Ralph  
**Subject:** Emailing: Ticket Text and Map display for Ticket # 1208130146.htm

NORMAL NOTICE

Ticket : 1208130146 Date: 08/13/2012 Time: 07:25 Oper: SARAH.HEMINGER Chan:000

State: IN Cnty: MADISON Twp: MONROE  
Cityname: ALEXANDRIA Inside: Y Near: N  
Subdivision:

Address : 512  
Street : S CLINTON ST  
Cross 1 : 1ST ST Within 1/4 mile: Y  
Location: PAINT AND FLAG ENTIRE PROPERTY 512 S CLINTON ST AND ALONG S CLINTON ST  
:  
Grids : 4015C8540C 4015B8540C

Work type : RETIRE GAS SERVICE  
Done for : VECTREN  
Start date: 08/15/2012 Time: 07:45 Hours notice: 48/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 1 DAY Depth: 4FT

Company : MILLER PIPE LINE Type: CONT  
Co addr : 8850 CRAWFORDSVILLE RD  
City : INDIANAPOLIS State: IN Zip: 46234  
Caller : SARAH HEMINGER Phone: (317)295-6417  
Contact : DENNY HEWSON--CELL Phone:  
BestTime:  
Mobile : (317)503-4445  
Fax : (317)295-6418  
Email : [SARAH.HEMINGER@MILLERPIPELINE.COM](mailto:SARAH.HEMINGER@MILLERPIPELINE.COM)

Remarks : All tickets are taken and processed on Eastern Daylight Time  
Will you be white-lining the dig site area? NO  
:

Submitted date: 08/13/2012 Time: 07:25  
Members: AEPIN ID4720 ID8051 ID9108 SBCIN SM

Member Name	Facility Types
ALEXANDRIA, CITY OF	SEWER, STORM & WATER
AMERICAN ELECTRIC POWER	ELECTRIC
AT&T - DISTRIBUTION	COMMUNICATIONS
COMCAST NORTHEAST (ANDERSON)	CABLE TV
VECTREN - ANDERSON	GAS



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

September 18, 2012

Ms. Darlene Kulhanek  
Vectren  
1 N Main Street  
Evansville, IN 47702

Subject: Investigation Request for Information

Date of Event: 8/15/2012

Event Location: 512 S Clinton St, Alexandria

Facility Owner: Vectren

Excavator: Miller Pipeline

Other Party: N/A

Pipeline Division Case No. 3569

Dear Ms. Kulhanek:

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.**



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)  
INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: 9-28-2012

### Who is submitting this information?

Name of person providing this information: Darlene Kulhanek

Business address (*number and street*): 1 Main Street

City, State, and ZIP code: Evansville, IN 47711

Telephone number (*area code*): 812-491-4227

Fax number (*area code*): 812-491-4504

E-mail address: dkulhanek@vectren.com

### Excavator Information, if known

Full name: Miller Pipeline

Business address (*number and street*): PO Box 34141

City, State, and ZIP code: Indianapolis, IN 46234

Telephone number (*area code*): 317-295-6417

Fax number (*area code*): 317-295-6418

E-mail address: Unknown

### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Natural Gas

**Date and Location of Damage**

Date of damage (month, day, year): 8-15-2012

County: Madison

City: Alexandria

Street address (number and street, city, state, and ZIP code):  
512 S Clinton Street, Alexandria, IN

Nearest intersection: Unknown

Right of way where damage occurred: Dedicated Public Utility Easement

Was there a release of product? Yes

If yes, was there an ignition of product? No

Were evacuations necessary as a result of release? No

If yes, how many evacuated? 0

Was there a customer service interruption? Yes

If yes, how many affected? 2

Time to restore service (in hours): 1

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$<sup>494.14</sup>

**Affected Facility Information**

What type of pipeline was damaged? Natural Gas

What was the affected facility? Distribution

What was the depth of the facility, in inches?

**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1208130146

Was the locate request completed within two working days? Yes

If locates were performed, were they done so by a contractor or pipeline employee? Contract Locator

If a contractor locator, enter the company name, if known: USIC

Were facility marks visible in the area of excavation? Yes

Were facilities marked correctly? Yes

Type of markings used: Paint and Flags

If other, please specify: \_\_\_\_\_

Was site marked by "White Lining"? No

Were special instructions part of the locate request? Unknown/Other

Were maps used to complete the locate request? Unknown/Other

Were pipeline company representatives on site during excavation? No

Did the excavator notify the operator in the event of this damage? Yes

Did the excavator notify Indiana 811 in the event of this damage? Yes

Did the excavator notify 911 in the event of a release of product? Unknown/Other

### **Description of Cause**

Select from the list the most accurate cause for the damage: --Failure to use hand tools where required

### **Additional Comments**

2" plastic main damaged by bore. Not hand exposed.



2 VECTREN ENERGY DELIVERY OF INDIANA - NORTH

NOW DUE

\$494.14

MILLER PIPELINE  
PO BOX 34141,  
INDIANAPOLIS, IN 46234

Type: GAS  
Invoice: FDS0016742  
BillToID: 32393  
Billing Date: 9/7/2012  
Date of Loss: 8/15/2012  
5834 103.0509

Please return this portion with your remittance.



Mail Payment To:  
Vectren Utilities Holding Company, Inc.  
1239 Reliable Parkway  
Chicago, IL 60686-0012  
Inquiries: 1-877-902-2934, Mon.-Fri., 8-5  
Risk Management/Claims Department

NOW DUE  
  
\$494.14

MILLER PIPELINE  
PO BOX 34141,  
INDIANAPOLIS, IN 46234

Type: GAS  
Invoice: FDS0016742  
BillToID: 32393  
Billing Date: 9/7/2012  
Date of Loss: 8/15/2012

Invoice For Costs to Repair and Reconstruct Damaged Property

Address: 512 S CLINTON STREET, ALEXANDRIA  
2" PLASTIC MAIN SEVERED BY HOE. NOT HAND EXPOSED.

Material:	\$121.18
Company Labor:	\$111.65
Contract Labor:	\$0.00
Transportation/Equipment:	\$21.25
Misc:	\$0.00
Gas Loss:	\$240.06
Adjustments:	\$0.00
Payments:	\$0.00
Total:	\$494.14

5834 103.0509

Remember, call two (2) working days before digging. Contact I.U.P.P.S. at 1-800-382-5544.

FACILITIES DAMAGE REPORT GAS

Task No.: 109,0509

Capital (O&M)(circle one)

FDS 00.16.742

FACILITY TYPE

- DISTRIBUTION
PROPANE
SERVICE
STORAGE
TRANSMISSION (include supplemental report)

5384

TIME OCCURRED: 1:15 AM/PM
TIME FOUND: AM/PM

DATE OF DAMAGE: 8/15/12

LATITUDE 40.257980
LONGITUDE -85.672220

Cost Center No.: ANDERSON

DAMAGE SITE ADDRESS: 512 J. CLINTON ST LOT #
COUNTY Madison CITY: ALEXANDRIA STATE: IN TOWNSHIP

Table with columns: FACILITIES DAMAGED, ORIFICE SIZES, (1), (2), (3). Rows include Farm Tap, Heater, Main, Meter Residential, etc.

- VISUAL OBSERVATION AT DAMAGE SITE
LOCATE APPLICABLE?
FACILITIES PROPERLY MARKED
MARKING METHODS
WRONG ADDRESS REQUESTED
LOCATOR ERROR

Table with columns: TYPE OF MATERIAL, DAMAGE TYPE, PRESSURE. Rows include Cast Iron, Plastic (HDPE), Plastic (MDPE), Steel.

- WERE FACILITY MARKS VISIBLE
WAS AREA WHITE LINED?
POSITIVE RESPONSE
TOLERANCE ZONE VIOLATED
PART OF PROJECT

PROTECTION IN PLACE
BUILDING
FENCE
POST
RAIL
VAULT
IF OTHER

DURATION OF ESCAPING GAS
MINUTES 30

LEAK REPORT NUMBER #
EFV ACTIVATED YES NO N/S

COMPANY REPRESENTATIVE ON SITE YES NO
OBSERVATION BY: J. BEARD
NAME OF LOCATOR:
LOCATING ORGANIZATION

FEED TYPE
ONE-WAY FEED
TWO-WAY FEED
NUMBER OF CUSTOMERS AFFECTED: 2
TOTAL HOURS SERVICE WAS OFF 1

COPY OF MARKOUT REQUEST PROVIDED WITHIN 2 WORKING DAYS
YES NO N/S

Table with columns: DAMAGED BY, TYPE OF CONSTRUCTION. Rows include Company Crew, Contractor, County, etc.

NOTIFICATION AND OTHER DETAILS OF LOCATE
LOCATE TICKET #:
DATE: TIME: AM/PM
REGULAR REQUEST EMERGENCY REQUEST

WORKING FOR
CITY COUNTY DEVELOPER
PROPERTY/OWNER STATE
UTILITY
IF OTHER

ONE CALL CENTER
IUPPS
OUPS
UNKNOWN

**TYPE OF EQUIPMENT**

- AUGER
- BACKHOE/TRACKHOE
- BORING
- DRILLING
- EXPLOSIVES
- FARM EQUIPMENT
- GRADER/SCRAPER
- HAND TOOLS
- MILLING EQUIPMENT
- PLOW
- PROBING DEVICE
- TRENCHER
- VACUUM EQUIPMENT
- VEHICLE

IF OTHER \_\_\_\_\_

**DAMAGING CAUSE**

- ABANDON FACILITY
- DETERIORATED FACILITY
- FACILITY COULD NOT BE FOUND/LOCATED
- FACILITY WAS NOT LOCATED/MARKED
- FAILURE TO MAINTAIN CLEARANCE
- FAILURE TO MAINTAIN MARKS
- FAILURE TO SUPPORT EXPOSED FACILITY
- FAILURE TO USE HAND TOOLS WHERE REQ
- IMPROPER BACKFILLING
- INCORRECT RECORDS/MAPS
- MARKING OR LOCATIONS NOT SUFFICIENT
- NO NOTIFICATION MADE TO ONE-CALL CENT
- ONE-CALL NOTIFICATION ERROR
- PREVIOUS DAMAGE
- WRONG INFORMATION PROVIDED

IF OTHER \_\_\_\_\_

**CONTRACTOR REPAIRS**

- CONTRACTOR WORKING FOR VECTREN MADE REPAIRS AT OWN EXPENSE
  - YES  NO  N/S
- CONTRACTOR REPAIRED DAMAGE
  - YES  NO  N/S

NAME OF CONTRACTOR: MILLER PIPELINE  
 # OF REGULAR HOURS \_\_\_\_\_  
 # OF OVERTIME HOURS \_\_\_\_\_  
 # OF REGULAR HOURS \_\_\_\_\_  
 CREW TYPE \_\_\_\_\_

**MATERIALS OR ROADWORK**

- METER WAS REPLACED \_\_\_\_\_ (STORES CODE)
- REGULATOR WAS REPLACED \_\_\_\_\_ (STORES CODE)
- TEMPORARY ASPHALT REPAIR \_\_\_\_\_ (SQ.FT.)
- PERMANENT ASPHALT REPAIR \_\_\_\_\_ (SQ.FT.)

**RIGHT OF WAY**

- DEDICATED UTILITY EASEMENT
- FEDERAL UTILITY EASEMENT
- PIPELINE
- POWER/TRANSMISSION LINE
- PRIVATE - BUSINESS
- PRIVATE - EASEMENT
- PRIVATE - LAND OWNER
- PUBLIC - COUNTY ROAD
- PUBLIC - INTERSTATE HIGHWAY
- PUBLIC - OTHER
- PUBLIC - STATE HIGHWAY
- PUBLIC - CITY STREET
- UNKNOWN

DID EXCAVATOR NOTIFY YOU?  YES  NO

EVACUATION REQUIRED?  YES  NO

MEDIA AT SITE?  YES  NO

WAS THERE IGNITION OF GAS?  YES  NO

INVOICE:  YES  NO  N/S

**DAMAGING PARTY**

NAME: MILLER PIPELINE - DENISE HEWSON

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

PREPARED BY RECON DATE 8-15-12

**PARTY TO INVOICE**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

REVIEWED BY FIELD SUPERVISOR [Signature] DATE 8-15-12

NORMAL NOTICE

Ticket : 1208130146 Date: 08/13/2012 Time: 07:25 Oper: SARAH.HEMINGER Chan:000

State: IN Cnty: MADISON Twp: MONROE  
Cityname: ALEXANDRIA Inside: Y Near: N  
Subdivision:

Address : 512  
Street : S CLINTON ST  
Cross 1 : 1ST ST Within 1/4 mile: Y  
Location: PAINT AND FLAG ENTIRE PROPERTY 512 S CLINTON ST AND ALONG S CLINTON ST  
:  
Grids : 4015C8540C 4015B8540C

Work type : RETIRE GAS SERVICE  
Done for : VECTREN  
Start date: 08/15/2012 Time: 07:45 Hours notice: 48/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 1 DAY Depth: 4FT

Company : MILLER PIPE LINE Type: CONT  
Co addr : 8850 CRAWFORDSVILLE RD  
City : INDIANAPOLIS State: IN Zip: 46234  
Caller : SARAH HEMINGER Phone: (317)295-6417  
Contact : DENNY HEWSON--CELL Phone:  
BestTime:  
Mobile : (317)503-4445  
Fax : (317)295-6418  
Email : SARAH.HEMINGER@MILLERPIPELINE.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
Will you be white-lining the dig site area? NO  
:

Submitted date: 08/13/2012 Time: 07:25  
Members: AEPIN ID4720 ID8051 ID9108 SBCIN SM

Member Name	Facility Types
ALEXANDRIA, CITY OF	SEWER, STORM & WATER
AMERICAN ELECTRIC POWER	ELECTRIC
AT&T - DISTRIBUTION	COMMUNICATIONS
COMCAST NORTHEAST (ANDERSON)	CABLE TV
VECTREN - ANDERSON	GAS

[View Map](#) | [Close Map](#)

DAMAGE DAMAGE

Ticket : 1208151968 Date: 08/15/2012 Time: 12:53 Oper: LPORTER Chan:046

State: IN Cnty: MADISON Twp: MONROE  
 Cityname: ALEXANDRIA Inside: Y Near: N  
 Subdivision:

Address : 512  
 Street : S CLINTON ST  
 Cross 1 : 1ST ST Within 1/4 mile: Y  
 Location: PAINT AND FLAG ENTIRE PROPERTY 512 S CLINTON ST AND ALONG S CLINTON ST  
 :  
 Grids : 4015C8540C 4015B8540C

Work type : RETIRE GAS SERVICE  
 Done for : VECTREN  
 Start date: 08/15/2012 Time: 12:53 Hours notice: 0/000 Priority: EMER  
 Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
 Duration : 1 DAY Depth: 4FT

Company : MILLER PIPE LINE Type: CONT  
 Co addr : 8850 CRAWFORDSVILLE RD  
 City : INDIANAPOLIS State: IN Zip: 46234  
 Caller : SARAH HEMINGER Phone: (317)295-6417  
 Contact : DENNY HEWSON--CELL Phone:  
 BestTime:  
 Mobile : (317)503-4445  
 Fax : (317)295-6418  
 Email : SARAH.HEMINGER@MILLERPIPELINE.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
 PER DENNY HEWSON - HIT A VECTREN GAS LINE - GAS IS BLOWING - HAS CALLED VECTREN  
 - LINE DESCRIPTION UNKNOWN - CREW STILL ON SITE - DIGGING ALONG ROAD - PREVIOUS  
 TICKET 1208130146

Will you be white-lining the dig site area? NO  
 :

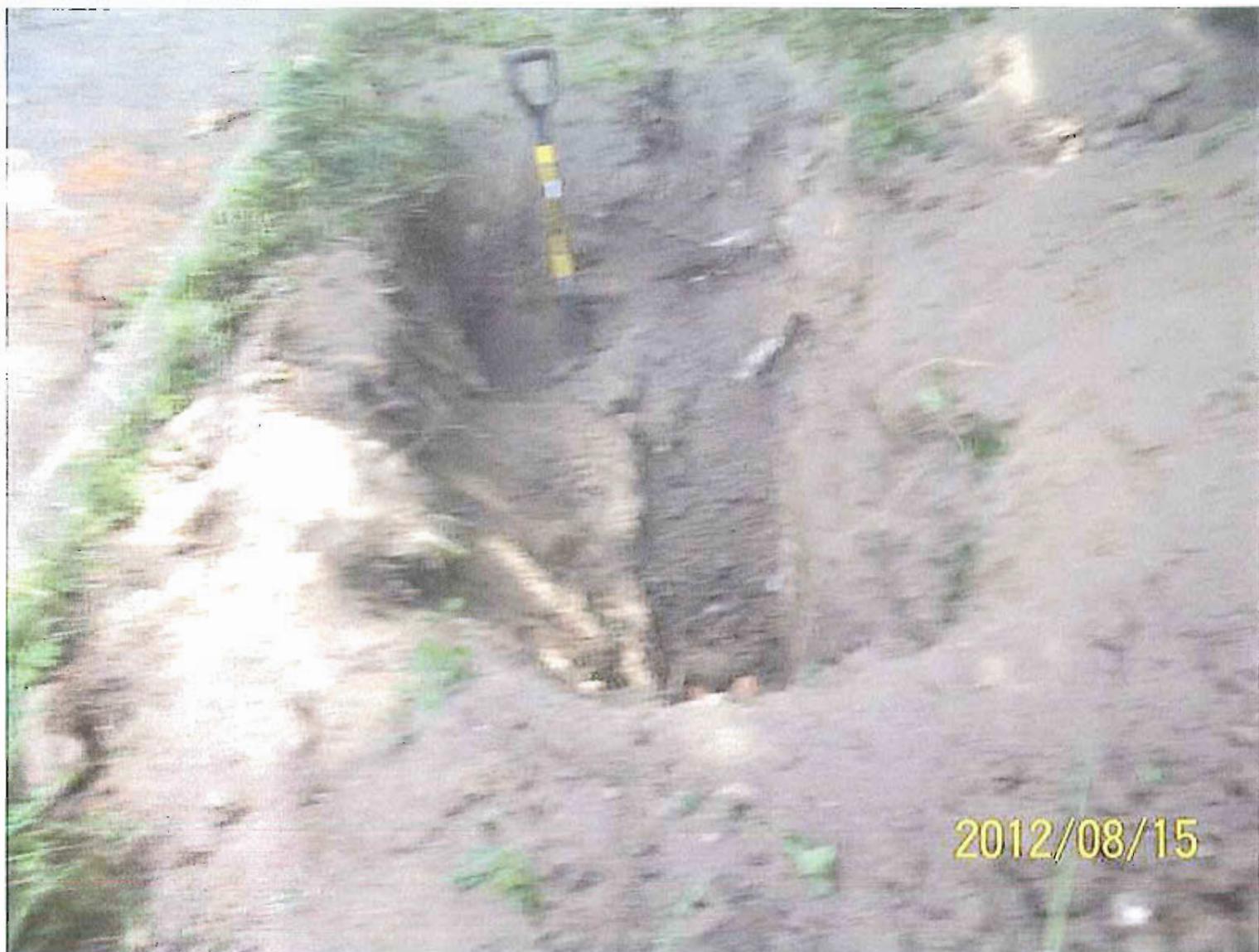
Submitted date: 08/15/2012 Time: 12:53  
 Members: AEPIN ID4720 ID8051 ID9108 SBCIN SM

Member Name	Facility Types
ALEXANDRIA, CITY OF	SEWER, STORM & WATER
AMERICAN ELECTRIC POWER	ELECTRIC
AT&T - DISTRIBUTION	COMMUNICATIONS
COMCAST NORTHEAST (ANDERSON)	CABLE TV
VECTREN - ANDERSON	GAS

[View Map](#) [Close Map](#)



Property of United States Infrastructure Corporation  
Photo taken on 8/15/2012 1:40:28 PM



Property of United States Infrastructure Corporation  
Photo taken on 8/15/2012 1:40:34 PM



Property of United States Infrastructure Corporation  
Photo taken on 8/15/2012 1:41:00 PM



Property of United States Infrastructure Corporation  
Photo taken on 8/15/2012 1:40:40 PM





Turned in w/ Report  
By Miller Pipeline

## Utility Damage Report IN/KY/KS

**Employee Name: \*** DENNY HEWSON  
**Is this report for record only?** Yes  
 (For record only indicates the damage has been resolved and no further action is needed.) \*  
**Job Title: \*** FOREMAN  
**Date of incident: \*** Wednesday, August 15, 2012  
**Time of incident** 1:00:00 PM  
**Street address of incident:** 512 CLINTON ST  
**City \*** ALEXANDRIA  
**State: \*** IN  
**Did an MPC employee cause the incident to occur?**  Yes  
**Has the owner been notified of the damage?**  Yes  
**What caused the damage: \*** Backhoe  
**What type of utility was damaged? \*** Gas  
**State of the utility:**  Live  
**Were locates requested?**  Yes  
**Were locates performed?**  Yes  
**Were locates legible?**  Yes  
**Did locates expire?**  No  
**Were all utilities marked?**  Yes  
**Were marks accurate?**  Yes  
**Types of markers:** Paint  
**Were utilities hand exposed?**  Yes  
**Did digging begin prior to locating?**  No

**Name of locating company: \*** USIC  
**Date located: \*** Tuesday, August 14, 2012  
**Locate reference number:** 1208130146

**Describe the event in detail (be specific: include all persons involved, sequence of events, measurements, etc.): \*** SPOTTED GAS SERVICE AND MAIN AT TEE HAD ABOUT 6 INCH EXPOSED PUT SPADE NEXT TO MAIN AND SERVICE MOVED OVER ABOUT 1 FOOT TO DIG DOWN SO WE COULD EXPOSE MORE OF THE MAIN WHEN DOING SO STRUCK THE MAIN AS IT MOVE OVER ABOUT 2 FEET IN THE SHORT DISTANCE WE WERE DIGGING

**Division:** Gas Construction

**Customer: \*** VECTREN

**Indicate any opinions or conclusions regarding who was at fault afer reviewing the facts of this incident: \*** AFTER REVIEWING THE SITUATION I SHOULD HAVE EXPOSED THE MAIN THE FULL DISTANCE WE WERE DIGGING BESIDE IT

**Please select your superintendent so we can send them and your area safety & compliance specialist a copy of this form \*** Blake Hollingsworth

**If you would like to receive a copy of this form, enter your email address here:** [dlhewso@millerpipeline.com](mailto:dlhewso@millerpipeline.com)

# Service Order Status

Friday, August 24, 2012

**Enter Service Order Number:**

5340161



[Order Form](#) [Print Order](#)

**Banner Instance:**  CS03PROD  CS01PROD  CS02PROD  
**Order Number:** N5340161  
**Order Type:** LEAK  
**Order Status:** Completed

**Customer:** 600240291 - ROESLER ERNEST D  
**Prem:** 5381547 - 512 S CLINTON ST

**Technician:** 2862 - Beard, John

**Order Dates and Times**

**Need Date:** 8/15/2012 1:25:00 PM  
**Time Created:** 8/15/2012 12:57:46 PM  
**Time Dispatched:** 8/15/2012 12:57:47 PM  
**Time In Route:** 8/15/2012 1:00:23 PM  
**Time On-Site:** 8/15/2012 1:21:53 PM  
**Tech Complete:** 8/15/2012 3:04:42 PM  
**Time Closed:** 8/15/2012 3:04:42 PM

**Events Performed/Completion Code**

LKOT - CMP

**Meter Information**

**Current ReadStatus**

**Old Meter:**  
**New Meter:**

**Completion Notes**

MAIN CUT BY MILLER PIPELINE. GAUGED BOTH SIDES OF CUT & SQUEEZED OFF. RELIT 2 SERVICES AFTER REMOVING GAUGES

**Request Notes**

PER KEITH THOMAS (SUP) DROPPING ON JOHN BEARD. HEATH CONSULTANTS HIT LINE ALREADY ON SITE. CONT# DENNY HEUSEN 317-503-4445 FIRE DEPT ONSITE...XST: 1ST ...REPORTED HIT MAIN/BLOWING..CONT 765-642-0221

**MDSI Event Dates and Times**

Event	Date/Time	User
AsnAssignmentManualAck_evt	8/15/2012 12:58:09 PM	Beard, John
AsnAssignmentEnRoute_evt	8/15/2012 1:00:23 PM	Beard, John
AsnAssignmentOnSite_evt	8/15/2012 1:21:53 PM	Beard, John
OrdOrderComplete_evt	8/15/2012 3:04:42 PM	Beard, John

NOTE: The Reporting database replicates in near real-time; it has been approximately 1 minute(s) since the last transaction replicated.