



Pipeline Safety Division Investigation Report

Investigation regarding: Vectren

UPPAC Database Record ID: 3616

Report Date: 5/8/2013

Investigator: Mike Orr

Damage Date: 8/23/2012 2:03:20 PM

Damage Address: 3593 Saddlebrook Ln, Bloomington, Monroe

The Parties

Excavator: **Final Grade Excavating Incorporated**

Address: 6787 East 171st Street, Noblesville, In 46062

Facility Owner: **Vectren**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Construction

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 20

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$2500

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1208202490

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

Synopsis: Excavator struck and damaged an underground natural gas main while performing sewer work.

Findings: Reported by Indiana 811; excavator did not respond to initial notice mailed 9/14/2012. The excavator had a valid locate request however, the operator located the wrong address.

Conclusion: There was a failure to provide locate markings.

Violation: 8-1-26-18(f) Operator failed to locate or provided incorrect locate markings.



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: 8/23/2012

Event Location: 3593 Saddlebrook Ln, Bloomington

Facility Owner: Vectren

Excavator: Final Grade Excavating Incorporated

Other Party: N/A

Pipeline Division Case No. 3616

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: Final Grade Excavating Inc.

Business address (*number and street*): 6787 E 171st Street

City, State, and ZIP code: Noblesville, IN 46062

Telephone number (*area code*): 317-590-8251

Fax number (*area code*): Unknown

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Bldg. Construction

Date and Location of Damage

Date of damage (*month, day, year*): 8-23-2012

County: Monroe

City: Bloomington, IN

Street address (*number and street, city, state, and ZIP code*):
3593 Saddle Brook Lane, Bloomington, 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? 20

Time to restore service (*in hours*): 3

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 2,500

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: 1208202490

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? No

Were facilities marked correctly? No

Type of markings used: Other

If other, please specify: None

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: Other

Additional Comments

2" plastic main severed by hoe. Locator marked wrong address. Marked 3593 Saddle Brook Court instead of Lane.

FDS 0016723

Task No: 103,0509 Capital / O & M (circle one)

Vectren Claim Number: _____

Date of Damage 8 / 23 / 12

Police Report / MO #: _____

Cost Center # 5924

Time Occurred 2:00 am / pm

Time Found 2:30 am / pm

Latitude 37.0300 Longitude: -86.290460

FACILITIES DAMAGE REPORT

GAS

Vectren Claims Camera:

VE01561

DAMAGE SITE:

Address 3593 SADDLE BROOK LN Lot # _____

County MONROE City Bloomington State IN Township _____

FACILITY TYPE:

- Distribution Propane
- Service Storage
- Transmission: (include supplemental report)

FACILITIES DAMAGED:

	ORIFICE SIZE(S):	(1)	(2)	(3)
<input type="checkbox"/> Farm Tap	0.50 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heater	5/8 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Main	0.75 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Residential)	1.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Industrial / Commercial)	1.25 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Odorizer	2.00 inch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Regulator Station	3.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Relief Valve	4.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Riser	5.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Service Line	6.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Valve	10.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	12.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	16.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	20.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other			

1.943

TYPE OF MATERIAL:

- Cast Iron
- Plastic (HDPE)
- Plastic (MDPE)
- Steel
- Other _____

DAMAGE TYPE:

- Severed
- Not Cut
- Severed
- Size _____ x _____

PRESSURE:

- 25 PSIG
- 40 PSIG
- 50 PSIG
- 55 PSIG
- 60 PSIG
- 6 WC (.2163)
- 7 WC (252)
- Other _____

69.439

PROTECTION IN PLACE:

- Building Fence None
- Post Rail Vault N/A
- Other _____

DURATION OF ESCAPING GAS:

Minutes: 90 min

LEAK REPORT

NUMBER: 20731

EFV Activated Yes No N/S

FEED TYPE:

- One-Way Feed
- Two-Way Feed

Number of Customers Affected: 20
 Total Hours Service: 3
 Was Off: _____

SERVICE ORDER NUMBER: N5317639

DAMAGED BY:

- Company Crew
- Contractor
- County
- Developer
- Farmer
- Municipality
- Property Owner/ Tenant
- Railroad
- State
- Unknown
- Utility
- Vehicle Accident
- Other _____

TYPE OF CONSTRUCTION:

- Agriculture
- Building Construction
- Building Demolition
- Cable TV
- Curbs / Sidewalk
- Drainage
- Driveway
- Electric
- Engineering / Surveying
- Fencing
- Grading
- Irrigation
- Landscaping
- Liquid Pipeline
- Milling
- Pole
- Natural Gas
- Public Transit Authority
- Railroad Maintenance
- Other _____

WORKING FOR:

- City County Developer
- State Property Owner
- Utility

VISUAL OBSERVATION AT DAMAGE SITE:

- Visual Observation: Above Ground Below Ground
- Locate Applicable: Yes No N/S
- Facilities Properly Marked: Yes No N/S
- Marking Methods: Conventional Flags None Whiskers
- Offset Paint Stakes N/S
- Locate Marking Faded: Yes No N/S
- Wrong Address Requested: Yes No N/S

Facilities Improperly Located:

- Qualified Locator Could Not Have Accurately Located
- Inaccurate Maps / Cards
- Broken or No Tracer Wire (Plastic)
- Insulation Preventing Accurate Locate

Locator Error:

- Failure to Follow Policy
- Inappropriate Site Markings
- Incomplete Locate
- No Locates Performed
- Qualified Locator Could Have Accurately Located
- Wrong Address Located
- Marking Off By: _____ (Feet / Inches)

- Were Facility Marks Visible: Yes No Destroyed
- Was Area White Lined: Yes No Destroyed
- Positive Response: Yes No Destroyed
- Tolerance Zone Violated: Yes No
- Part of Project: Yes No
- Company Representative On-Site: Yes No

Observation by (ID#): 7074

Name of Locator: _____

LOCATING ORGANIZATION:

- Contract Locator
- Unknown / Other
- Utility Owner

NOTIFICATIONS AND OTHER DETAILS OF LOCATE:

Locate Ticket: 1208202490 *

Date: _____ Time: _____ am / pm

TYPE OF REQUEST:

- Regular Request Emergency Request
- Locate Company Notified

Contact Name: _____
 Time Called: _____ am / pm
 Time Locator Arrived at the Site: _____ am / pm

Company Notified of Locate Near Critical Facilities
 Yes No N/S

Copy of Mark Out Request Provided Within 2 Working Days
 Yes No N/S

ONE-CALL CENTER:

- IUPPS
- OUPS
- Unknown

AUG 29 2012

Does not pull up for me on IUPPS. Randa

Vectren Claim Number: _____

TYPE OF EQUIPMENT:

- Auger
- Backhoe / Track hoe
- Boring
- Drilling
- Explosives
- Farm Equipment
- Grader / Scraper
- Hand Tools
- Milling Equipment
- Plow
- Probing Device
- Trencher
- Vacuum Equipment
- Vehicle
- Other _____

ROOT DAMAGING CAUSE:

- Abandoned 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 Required
- Improper Backfilling
- Incorrect Records / Maps
- Marking or Location Not Sufficient
- No Notification Made to One-Call
- One-Call Notification Error
- Previous Damage
- Wrong Information Provided
- 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: _____
 # of Regular Hours; _____
 # of Overtime Hours; _____
 # of Regular Hours; _____
 Crew Type: _____

MATERIALS OR ROAD WORK:

- 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
- Excavation Required Yes No
- Media at Site Yes No
- Was There Ignition of Gas? Yes No

INVOICE: Yes No N/S

DAMAGING PARTY:
 Name: KRAMER BUILDERS
 Address: 1315 N. Arlington Ave
 City/ State/ Zip: Indpls 46219
 Phone: (317) 408 - 2668
 Prepared / Investigated By: GRAF Swan Date: 8-22-12

PARTY TO INVOICE:
 Name: USIC
 Address: _____
 City/ State/ Zip: _____
 Phone: () _____
 Reviewed by Field Supervisor: Kanda Powers Date: 8/27/12

Locator located wrong Address
 The located 3593 Saddlebrook Court
 not lane.

NORMAL NOTICE

Ticket : 1208202490 Date: 08/20/2012 Time: 13:09 Oper: JELEWITZ Chan:086

State: IN Cnty: MONROE Twp: PERRY
 Cityname: BLOOMINGTON Inside: Y Near: N
 Subdivision: SADDLEBROOK Lot: 1

Address : 3593
 Street : SADDLEBROOK LN
 Cross 1 : E ROGERS RD Within 1/4 mile: Y
 Location: LOCATE ENTIRE PROPERTY -- THIS IS THE HOME UNDER CONSTRUCTION
 :
 Grids : 3908C8628A 3908D8629D 3908C8629D 3908D8629C 3908C8629C

Work type : INSTALL FOOTER WALLS/GRADE FOR DRIVEWAY
 Done for : RICHARD MAGUIRE
 Start date: 08/22/2012 Time: 13:30 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 3 FEET

Company : FINAL GRADE EXCAVATING INCORPORATED Type: CONT
 Co addr : 6787 EAST 171ST STREET
 City : NOBLESVILLE State: IN Zip: 46062
 Caller : BILL KHAMIS Phone: (317)590-8251
 Contact : BILL KHAMIS - CELL Phone:
 BestTime:
 Mobile : (317)408-2668
 Email : BKHAMIS@AOL.COM

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

Submitted date: 08/20/2012 Time: 13:09
 Members: ID0002 ID1443 ID3147 ID5960 ID8499 SBCIN SM

Member Name	Facility Types
AT&T - DISTRIBUTION	COMMUNICATIONS
BLOOMINGTON UTILITIES, CITY OF	SEWER & WATER
COMCAST CENTRAL (BLOOMINGTON)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY ELECTRIC	
EAST MONROE WATER CORP.	
VECTREN - BLOOMINGTON	GAS

[View Map](#)

[Close Map](#)

DAMAGE

Ticket : 1208232080 Date: 08/23/2012 Time: 13:58 Oper: KMINGUS Chan:000

State: IN Cnty: MONROE Twp: PERRY
Cityname: BLOOMINGTON Inside: Y Near: N
Subdivision: SADDLEBROOK Lot: 1Address : 3593
Street : SADDLEBROOK LN
Cross 1 : E ROGERS RD Within 1/4 mile: Y
Location: LOCATE ENTIRE PROPERTY -- THIS IS THE HOME UNDER CONSTRUCTION
:
Grids : 3908C8628A 3908D8629D 3908C8629D 3908D8629C 3908C8629CWork type : INSTALL FOOTER WALLS/GRADE FOR DRIVEWAY
Done for : RICHARD MAGUIRE
Start date: 08/23/2012 Time: 14:00 Hours notice: 0/000 Priority: EMER
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y
Duration : 1 WEEK Depth: 3 FEETCompany : FINAL GRADE EXCAVATING INCORPORATED Type: CONT
Co addr : 6787 EAST 171ST STREET
City : NOBLESVILLE State: IN Zip: 46062
Caller : BILL KHAMIS Phone: (317)590-8251
Contact : BILL KHAMIS - CELL Phone:
BestTime:
Mobile : (317)408-2668
Email : BKHAMIS@AOL.COMRemarks : All tickets are taken and processed on Eastern Daylight Time
GAS LINE HAS BEEN HIT---CALLER UNSURE WHAT COMPANY THIS LINE BELONGS TO---LINE
IS BLOWING---CALLER HAS NOT CONTACTED 911 OR ANY GAS COMPANIES BUT HAS BEEN
ADVISED TO DO SO---CALLER COULD NOT DESCRIBE THE LINE---CALLER DOES NOT KNOW
WHERE ON THE PROPERTY THE LINE WAS DAMAGED--CREW IS ON SITE---PREVIOUS TICKET
NUMBER 1208202490

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

:

Submitted date: 08/23/2012 Time: 13:58
Members: ID0002 ID1443 ID3147 ID5960 ID8499 SBCIN SM

Member Name	Facility Types
AT&T - DISTRIBUTION	COMMUNICATIONS
BLOOMINGTON UTILITIES, CITY OF	SEWER & WATER
COMCAST CENTRAL (BLOOMINGTON)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY ELECTRIC	
EAST MONROE WATER CORP.	
VECTREN - BLOOMINGTON	GAS

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



Property of United States Infrastructure Corporation
Photo taken on 8/23/2012 3:54:08 PM



Property of United States Infrastructure Corporation
Photo taken on 8/23/2012 3:54:14 PM



Property of United States Infrastructure Corporation
Photo taken on 8/23/2012 3:54:20 PM



Property of United States Infrastructure Corporation
Photo taken on 8/23/2012 3:54:28 PM



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Photo taken on 8/23/2012 3:54:36 PM



Property of United States Infrastructure Corporation
Photo taken on 8/23/2012 3:54:50 PM



Property of United States Infrastructure Corporation
Photo taken on 8/23/2012 3:54:42 PM

Service Order Status

Wednesday, August 29, 2012

Enter Service Order Number:

5347639



[Clear Form](#) | [Refresh Data](#)

Banner Instance: CS03PROD CS01PROD CS02PROD
Order Number: N5347639
Order Type: LEAK
Order Status: Completed

Customer: 009999999 - OWNER UNKNOWN
Prem: 5723364 - 3593 SADDLE BROOK LN

Technician: 7074 - Owen, Geoffrey

Order Dates and Times

Need Date: 8/23/2012 2:20:00 PM
Time Created: 8/23/2012 2:15:00 PM
Time Dispatched: 8/23/2012 2:15:00 PM
Time In Route: 8/23/2012 2:16:08 PM
Time On-Site: 8/23/2012 2:31:03 PM
Tech Complete: 8/23/2012 5:03:13 PM
Time Closed: 8/23/2012 5:03:13 PM

Events Performed/Completion Code

LKNS - CMP

Meter Information

Current ReadStatus

Old Meter:
New Meter:

Completion Notes

contrcter hit 2 in main while digging alongside drive vectren crew onsite to mak e repairs ck sewers ok probed main ok ckd nearby house ok s/o & locked 20 homes due to outage advsd supervisor

Request Notes

PER BILL KHAMIS W/KHAMUS BUILDERS HIT LIEN WITH EXCAVATOR BUCKET/BLOWING CONT# 317-408-2668 ONSIT CO NT PHIL PAUL # 317-590-8251/SIZE AND TYPE ? LOCIN FRONT BY STREET ORIGLOC# 1208232080

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	8/23/2012 2:15:16 PM	Owen, Geoffrey
AsnAssignmentEnRoute_evt	8/23/2012 2:15:28 PM	Owen, Geoffrey
AsnAssignmentOnSite_evt	8/23/2012 2:16:03 PM	Owen, Geoffrey
AsnAssignmentEnRoute_evt	8/23/2012 2:16:08 PM	Owen, Geoffrey
AsnAssignmentOnSite_evt	8/23/2012 2:31:03 PM	Owen, Geoffrey
OrdOrderComplete_evt	8/23/2012 5:03:13 PM	Owen, Geoffrey

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