



## Pipeline Safety Division Investigation Report

### Investigation regarding: Rodney Gunter

UPPAC Database Record ID: 3793

Report Date: 5/28/2013

Investigator: Mike Orr

Damage Date: 9/9/2012 5:18:37 PM

Damage Address: 338 W 600 S, Boone Grove, Porter

### The Parties

Excavator: **Rodney Gunter**

Address: 346 W. 600s, Hebron, In 46341

Facility Owner: **NIPSCO**

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Sewer

### Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

### Excavator Activities/Cause of Damage Information:

Excavator Request Locates: No

Indiana 811 Ticket Number: Original Start Date:

Locate Instructions: LOCATE THE ENTIRE WEST SIDE OF THE PROPERTY FROM THE HOUSE TO THE DRIVEWAY.

Follow-Up Locate Instructions (if applicable):

**Synopsis:** A natural gas service line was damaged by a backhoe while performing work on a sewer line.

**Findings:** Reported by Indiana 811; excavator/occupant did not respond to initial notice mailed 11/30/2012. The occupant was excavating for a sewer line without benefit of a locate ticket resulting in damage to the natural gas service line.

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

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



150 West Market Street, Suite 600  
Indianapolis, IN 46204

January 28, 2012

*Via Electronic Transmission – [PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)*

Pipeline Safety Division – Case No. 3793  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3793

To Whom It May Concern:

Attached please find Northern Indiana Public Service Company's ("NIPSCO") written information, and supporting documentation, relating to the following event:

Date of Event: 9/9/2012

Event Location: 338 W 600 S

Facility Owner: Northern Indiana Public Service Company

Excavator: Rodney Gunter

Other Party: N/A

Pipeline Division Case No. 3793

NIPSCO has reviewed its recovery and damage prevention files for this matter and has provided answers, when known, to the list of questions set forth in the Information Request. To the extent available, NIPSCO is also providing a copy of the Damage Information Report – Pipeline Safety Division previously submitted by NIPSCO to IURC Pipeline Safety as well as additional documentation relating to this Event Location.

Upon completion of the investigation, NIPSCO requests that it be provided with a copy of the Pipeline Division's Investigation Report with findings that will be forwarded to the Underground Plant Protection Advisory Committee. If there are any additional questions, please contact the undersigned.

Very truly yours,

Christopher C. (Kit) Earle  
NiSource Corporate Services - Legal  
Phone: 317-684-4904  
Fax: 317-684-4918  
Email: [cearle@nisource.com](mailto:cearle@nisource.com)

<b>IURC INFORMATION REQUEST</b>	
<b>Pipeline Safety Division Case No. 3793</b>	
Date of Event	9/9/2012
Event Location	338 W 600 S
Event City	Boone Grove
Facility Owner	Northern Indiana Public Service Company
Excavator	Rodney Gunter
Date of IURC Information Request	12/5/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	
RESPONSIBLE PARTY PERSONAL NAME	Rodney Gunter
TITLE (IF ANY)	
ADDRESS	346 W. 600 S
CITY/ STATE/ZIP	Hebron, IN 46341
PREFERRED TELEPHONE	219-766-5280
CELL PHONE TELEPHONE	219-743-3274
EMAIL ADDRESS	
<b>FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:</b>	
BUSINESS NAME	NORTHERN INDIANA PUBLIC SERVICE COMPANY
RESPONSIBLE PARTY PERSONAL NAME	LUKE SELKING
TITLE	
ADDRESS	1501 HALE AVENUE
CITY/STATE/ZIP	FORT WAYNE, IN 46802
PREFERRED TELEPHONE	260/439-1290
SECONDARY TELEPHONE	
EMAIL ADDRESS	LSELKING@NISOURCE.COM
<b>LOCATOR SERVICE INFORMATION</b>	
BUSINESS NAME	USIC
RESPONSIBLE PARTY PERSONAL NAME	Morgan Thompson
TITLE (IF ANY)	Claims Coordinator
ADDRESS	9045 N. River Rd. Suite 300
CITY/ STATE/ZIP	Indianapolis, IN 46240
PREFERRED TELEPHONE	1-317-538-7301
CELL PHONE TELEPHONE	Same
EMAIL ADDRESS	morganthompson@usicinc.com
<b>OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION</b>	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	
TITLE (IF ANY)	

ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<b>UTILITY LINE IMPACT</b>	
<b>LOCATION OF DAMAGE</b>	
ADDRESS	338 W 600 S
CITY/STATE/ZIP	Hebron, IN 46341
NEAREST INTERSECTION	S 400 W
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8"
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	
REPAIR COST (IF KNOWN) (\$)	
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	
Backhoe/Trackhoe	X
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	
Vacuum Equipment	
Unknown/Other	
<b>TYPE OF WORK PERFORMED (Select One)</b>	
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)	X
Site Development	
Steam	
Storm Drain/Culvert	
Street Light	
Telecommunications	
Traffic Signal	
Traffic Sign	
Water	
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y 1209090154
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	N

INDIANA 811 LOCATE TICKET NUMBER	N/A
LOCATE MARKS VISIBLE (YES/NO)	N
LOCATE MARKS CORRECT (YES/NO)	N
EXCAVATOR "WHITE LINED" (YES/NO)	N
MAPS USED TO MARK FACILITIES (YES/NO)	N
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	N
<b>INCIDENT IMPACT INFORMATION</b>	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	Y
POLICE DEPARTMENT RESPONSE (YES/NO)	N
AMBULANCE RESPONSE (YES/NO)	N
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
No notification made to the one-call center	

**Fact Based Investigation Report**

NOTIFICATION ID: 01820120909002                      DISTRICT: Northern IN  
DAMAGE DATE: 9/9/2012 5:18:57 PM      NOTIFICATION DATE: 9/9/2012 5:20:16 PM  
NOTIFIED BY: RODNEY GUNTER  
DAMAGE ADDRESS: 338 W 600 S  
CITY: BOONE GROVE      ST: IN      ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 09/09/2012  
FROM: 17:45:00                                              TO: 19:15:00

EXCAVATOR INVOLVED: Homeowner  
TYPE OF EXCAVATION: Removing Cistern

ORIG. LOCATE REQ.:                                      START DATE/TIME:  
TYPE OF TICKET:                                      LOCATE REQ. INFO N/A: Yes

DIG UP/DAMAGE REQ.: 1209090154                      START DATE/TIME: 9/9/2012 5:15:00 PM

PICTURES TAKEN BY: Kevin Stewart      DATE/TIME: 9/9/2012 6:35:00 PM  
PHOTOGRAPHY TYPE: Digital                      FRAME #: 1

INVESTIGATOR EMP#: 125481                      INVESTIGATOR NAME: Kevin Stewart  
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

**Fact Based Investigation Customer Information**

NOTIFICATION ID: 01820120909002  
SELECT A CUSTOMER: NIPSCO  
CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF      FACILITY ID: Gas Service  
LOCATOR NAME & EMP #:  
LOCATOR NOT KNOWN: Yes

CHECK ALL THAT APPLY TO INVESTIGATION:  
No Locate Req. By Contractor

Other:

CHECK ALL THAT APPLY TO METHOD OF INVESTIGATION (at least one must be checked):

Visual, Facility Exposed At Time Of Investigation,  
Investigation Results Verified By Utility Representative

INVESTIGATOR STATEMENT/CAUSAL FACTORS:  
Homeowner digging on property without a locate hit the plastic gas service. Nipsco already made the repairs before arrival.

**NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:**

None on site. Already gone.

**NAMES OF EXCAVATOR'S REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:**

Homeowner, Rodney Gunter

**LIST ANY OTHER INDIVIDUALS ON SITE:**

Homeowner, Shirley Gunter

**WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL?** No

**WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA?** No

**WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?** No

**EXTENT OF FACILITY DAMAGE** cut plastic gas service

**REPLACEMENT FOOTAGE** approx 3ft

**WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?** No

**WHAT CONTRACTOR EQUIPMENT WAS USED?** N/A

**IS THE FACILITY SHOWN ON THE UTILITY RECORDS?** No

**IF YES, PLEASE LIST RECORD #(S)**

NIPSCO 00067 IUPPSa 09/09/2012 17:18:57 1209090154-00A EMER DAMG STRT

DAMAGE DAMAGE

Ticket : 1209090154 Date: 09/09/2012 Time: 17:08 Oper: DKERBERG Chan:017

State: IN Cnty: PORTER Twp: BOONE  
Cityname: BOONE GROVE Inside: N Near: Y  
Subdivision:

#3793

Address : 338  
Street : W 600 S  
Cross 1 : S 400 W Within 1/4 mile: Y  
Location: LOCATE THE ENTIRE WEST SIDE OF THE PROPERTY FROM THE HOUSE TO THE DRIVEWAY.

:  
Grids : 4120A8707B 4120A8707A 4120A8708D 4120A8708C 4120A8708B  
Boundary: n 41.347973 s 41.346813 w -87.143440 e -87.126633

Work type : REMOVING OLD CISTERN  
Done for : SHIRLEY GUNTER  
Start date: 09/09/2012 Time: 17:12 Hours notice: 0/0 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 2 DAYS Depth: 2 FEET

Company : RODNEY GUNTER Type: OTHR  
Co addr : 346 W. 600S  
City : HEBRON State: IN Zip: 46341  
Caller : RODNEY GUNTER Phone: (219)766-5280  
Contact : RODNEY GUNTER - CELL Phone:  
BestTime:  
Mobile : (219)743-3274

Remarks : All tickets are taken and processed on Eastern Daylight Time  
PER RODNEY - HIT NIPSCO GAS LINE WHILE DIGGING 10FT OUT FROM THE WEST SIDE OF THE HOME. CALLER DOES NOT KNOW DIAMETER OR COLOR OF THE LINE. GAS IS BLOWING. CALLER DOES NOT HAVE A DIG TICKET. RODNEY WILL CALL 911 AND HAS ALREADY CALLED NIPSCO.

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

Submitted date: 09/09/2012 Time: 17:08  
Members: BE COMCN ID2511 ID8000 NIPSCO SM

**NORTHERN INDIANA PUBLIC SERVICE COMPANY  
FACILITY DAMAGE REPORT**

\*\* COMPLETE FORM FOR ALL DAMAGES TO NIPSCO FACILITIES \*\*

REPORTING OPERATING AREA VA/ps MAXIMO WO # 11552066  
 OPERATING AREA CONTACT Rick Smith JOB ORDER # 58187-5  
 TRACKING NUMBER 0/8-2012-0909-003 LOCATE REF # \_\_\_\_\_  
 Locate Performed By: \_\_\_\_\_

DATE AND TIME OF ACCIDENT Sept 9 2012 11:09 PM DATE OF REPORT 9/9/12  
 PLACE OF DAMAGE (INCLUDE CITY) 338 W 600 S. Hebron

DAMAGE WAS TO:  
 ELECTRIC - POLE / TRANSFORMER: # \_\_\_\_\_ SIZE \_\_\_\_\_ YEAR INSTALLED \_\_\_\_\_ BROKEN YES ( ) NO ( )  
 OTHER (DESCRIBE) \_\_\_\_\_

GAS: SERVICE  MAIN ( ) SIZE 5/8" MATERIAL: PLASTIC  STEEL ( ) METER ( ) REG STATION ( ) STUB ( )  
 OTHER (DESCRIBE) \_\_\_\_\_ DEPTH OF FACILITY (inches) 8" PRESSURE (PSI) 50 Lbs.

RELEASE OF GAS: YES ( ) NO  IGNITION OF GAS: YES ( ) NO  EVACUATION REQUIRED: YES ( ) # \_\_\_\_\_ NO   
 INTERRUPTION OF SERVICE: YES  NO ( ) NUMBER OF CUSTOMERS LOST: 1  
 DURATION OF INTERRUPTION: TIME REPORTED 16:00 TIME RESTORED 17:05  
 DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 5/8"

LOCATE MARKS ON SITE: YES ( ) DISTANCE BETWEEN FACILITY AND LOCATE MARKS \_\_\_\_\_ NO   
 HOW LOCATED: PAINT ( ) FLAGS ( ) BOTH ( ) WHITE LINED ( )  
 PARTY THAT CAUSED DAMAGES (NAME) Freddie Guste  
 ADDRESS OF PARTY (INCLUDE CITY) 338 W 600 S. Hebron

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE \_\_\_\_\_ NO   
 WITNESS NAME AND ADDRESS N/A  
 WITNESS REMARKS N/A  
 AGENCIES NOTIFIED /ONSITE: POLICE ( ) AGENCY \_\_\_\_\_ REPORT # \_\_\_\_\_  
 FIRE  AGENCY Hebron Fire Dept REPORT # \_\_\_\_\_  
 OTHER ( ) \_\_\_\_\_ Any Injuries? ( ) YES # \_\_\_\_\_ ( ) NO \_\_\_\_\_

PHOTOS TAKEN: YES  NO  TAKEN BY: USIC (ATTACH PHOTOS TO REPORT)  
 MEDIA ON SITE YES ( ) NO ( )

**WORK IN PROGRESS WHEN FACILITY DAMAGED** - CHECK APPROPRIATE CHOICE BELOW

<input type="checkbox"/> AGRICULTURE/FARMING	<input type="checkbox"/> CABLE TV	<input type="checkbox"/> CURB/SIDEWALK	<input type="checkbox"/> TELECOMMUNICATIONS
<input type="checkbox"/> BLDG CONSTRUCTION	<input type="checkbox"/> DEMOLITION	<input type="checkbox"/> DRAINAGE	<input type="checkbox"/> WATER
<input type="checkbox"/> DRIVEWAY	<input type="checkbox"/> ELECTRIC	<input type="checkbox"/> SURVEYING	<input type="checkbox"/> DRAINS/CULVERTS
<input type="checkbox"/> FENCING	<input type="checkbox"/> GRADING	<input type="checkbox"/> IRRIGATION	<input type="checkbox"/> MOWING
<input type="checkbox"/> LANDSCAPING	<input type="checkbox"/> PIPELINE	<input checked="" type="checkbox"/> MILKING	<input type="checkbox"/> OTHER _____
<input type="checkbox"/> POLE/SIGN POST	<input type="checkbox"/> ROAD WORK	<input checked="" type="checkbox"/> SEWER	

**TYPE OF EQUIPMENT USED** - CHECK APPROPRIATE CHOICE BELOW

<input type="checkbox"/> AUGER	<input type="checkbox"/> HAND TOOLS	<input checked="" type="checkbox"/> BACKHOE/TRACKHOE
<input type="checkbox"/> MILLING EQUIPMENT	<input type="checkbox"/> PROBING DEVICE	<input type="checkbox"/> BORING / DRILLING
<input type="checkbox"/> EXPLOSIVES	<input type="checkbox"/> TRENCHER	<input type="checkbox"/> FARM EQUIPMENT
<input type="checkbox"/> VACCUUM EQUIPMENT	<input type="checkbox"/> GRADER	<input type="checkbox"/> OTHER _____

**REASON DAMAGE OCCURRED** - CHECK APPROPRIATE CHOICE BELOW

AUTOMOTIVE ACCIDENT  EXCAVATING BEFORE LOCATES DUE  CARELESS MACHINE OPERATOR  
 NO NOTIFICATION  MARKS DISTURBED  STUB  OTHER \_\_\_\_\_

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM