



Pipeline Safety Division Investigation Report

Investigation regarding: **Richard Sparks**

UPPAC Database Record ID: 38

Investigator: Dan Novak

Telephone: 317-232-2781

Report Date: 01/24/2012

Damage Date: 11/03/2010

Damage Address: 12834 E Sparks Road

City: Solsberry

County: Greene

The Parties

Excavator: **Richard Sparks**

Contact: Richard Sparks

Address: 12834 E Sparks Road, Solsberry, In 47459

Telephone: (812) 825-2285

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: Richard Sparks

UPPAC Database Record ID: 38

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$193

Excavator Activities/Cause of damage information:

Excavator request locates: No Indiana 811 ticket Number:

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Drainage

Synopsis: Homeowner damaged natural gas service during excavation to install a drain for a detached garage.

Findings: Reported by Midwest Natural Gas Co; excavator response to initial notice received on 12/21/2011. Homeowner failed to request that gas service be located and marked.

Conclusion: There was a failure to request locates.

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

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

Subject: Investigation Request for Information

Date of Event: 11/3/2010

Event Location: 12834 E Sparks Road, Solsberry

Facility Owner: Midwest Natural Gas Corporation

Excavator: Richard Sparks

Other Party: N/A

Pipeline Division Case No. 38

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. 38, 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

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: Richard Sparks
Title (if any): _____
Address: RR 2 Box 269A
City, State, Zip: Solsberry, IN 47459
Preferred Telephone: 812-825-2285
Cell Phone Number: 812-327-3032
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:

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 **Number of Customers Affected:** _____ 1 _____

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

Repair Cost (if know): \$ _____ \$192.80 _____

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:	<hr/>	
Locate Marks Visible:	Yes	No
Locate Marks Correct:	Yes	No
Excavator "White Lined":	Yes	No
Maps Used to Mark Facilities:	Yes	No

YOUR PIPELINE SAFETY DIVISION CASE NO. 38
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: 11/10/2011

YOUR SIGNATURE *Ted A. Williams* TITLE (if any) Bloomfield Regional Manager

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

Pipeline Safety Division-Case No. 38
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: Nov 4, 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: Richard Sparks

Business Address: 12834 E Sparks Road

City, State, Zip Code: Solsberry, IN 47459

Telephone Number: 8,128,252,285

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: Putting in drains

Date and Location of Damage

Date of Damage: Nov 3, 2010

County: Greene

City/Subdivision/Location Name: Solsberry

Street Address: 12834 E Sparks Road

Nearest Intersection: Hwy 45

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? 22"

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

RECEIVED

DEC 27 2011

INDIANA UTILITY
REGULATORY COMMISSION

YOUR PIPELINE SAFETY DIVISION CASE NO. 38

YOUR FULL NAME: Richard Sparks

FULL NAME OF BUSINESS/ENTITY (if applicable): Home owner

YOUR BUSINESS TITLE (if applicable): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

YOUR TELEPHONE NUMBER: () _____ - _____ SECOND NO. () _____ - _____

YOUR EMAIL ADDRESS: _____

TODAY'S DATE: 12/5/11

YOUR SIGNATURE: Richard Sparks TITLE (if any) _____

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

Pipeline Safety Division – Case No. 38
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. 38

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: *Richard Sparks*

Title (if any):

Address: *12834 E Sparks Rd*

City, State Zip: *Salsberry In 47459*

Preferred Telephone: *812-825-2285*

Cell Phone Number: *812-327-3032*

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: 12834 E Sparks Rd.
Address:

City, State Zip: Solsberry In 47959

Nearest Intersection: E Sparks Rd + N St Rd 45

Product Type (circle one):

- Natural Gas
- Liquid Pipeline
- Unknown/Other

Facility Type (circle one):

- Distribution - line to Home.
- Gathering
- Service/Drop
- Transmission
- Unknown/Other

Size (Diameter/etc.): 3/8

Pressure (PSIG/Inches): 20

Interruption in Service: Yes / No **Number of Customers Affected:** 1

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

Repair Cost (if known): \$ 299 From Gas Co.

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 Doing myself

Locate Information:

Excavator Request Locate: Yes No

Indiana 811 Locate Ticket Number: n/a

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:

Putting drain for Detached Garage Approx 75'
H.7 Rock that cut Gas line to House, Cap Put on
Line until Gas Company came + Repaired within
1 Hr.