



Pipeline Safety Division Investigation Report

Investigation regarding: Vectren

UPPAC Database Record ID: 4099

Report Date: 5/24/2013

Investigator: Mike Orr

Damage Date: 11/8/2012 10:02:49 AM

Damage Address: 605 Centennial St, Seymour, Jackson

The Parties

Excavator: **Dave Omara Contractor**

Address: 1100 East O And M Avenue, Po Box 1139, North Vernon, In 47265

Facility Owner: **Vectren**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Water

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$1071

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1211012542

Original Start Date:

Locate Instructions: LOCATE SOUTH SIDE OF ADDRESS

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Indiana 811; excavator's response to initial notice was received on 12/18/2012. The excavator had a valid locate request however, the operator reports the locate markings to be inaccurate by six (6) feet.

Conclusion: There was a failure to provide accurate locate markings.

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



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

INITIAL DOCUMENTS -
OPERATOR

CASE 4099

Submitted to IURC-Pipeline Safety on: 12-14-2012

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: Dave Omara Contractor

Business address (number and street): 1100 East O and M Avenue

City, State, and ZIP code: North Vernon, IN 47265

Telephone number (area code): 812-346-4135

Fax number (area code): 812-524-9129

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Water

Date and Location of Damage

Date of damage (*month, day, year*): 11-8-2012

County: Jackson

City: Seymour

Street address (*number and street, city, state, and ZIP code*):
605 Centennial Street, Seymour, 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? 1

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 \$ 1,071.02

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: 1211012542

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? No

Type of markings used: Paint

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? No

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: --Facility marking or location not sufficient

Additional Comments

2" plastic main damaged by hoe. > 24"

Vectren Claim Number: _____

FDS0067197

Task No: 103.0509 Capital / O & M (circle one)

Police Report / MO #: _____

Date of Damage 11/8/12

Vectren Claims Camera: Fos 8041

Cost Center # COLUMBUS

FACILITIES DAMAGE REPORT

GAS

VE03034
4

Time Occurred 9:30 (am/pm)

Time Found 9:30 (am/pm)

Latitude 38° 52.874 Longitude: 85° 52.854

DAMAGE SITE:

Address 605 CENTENNIAL ST. Lot # _____
County Jackson City Seymour State IN Township Jackson

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"/>
	20.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VISUAL OBSERVATION AT DAMAGE SITE: 11/8

- Visual Observation: Above Ground Below Ground
- Locate Applicable Yes No N/S
- Facilities Properly Marked Yes No N/S
- Marking Methods: Conventional Flags None
- Offset Paint Stakes Whiskers
- 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: 6 (Feet / Inches)

- Were Facility Marks Visible Yes No
- 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

TYPE OF MATERIAL: DAMAGE TYPE: PRESSURE:

- Cast Iron Severed 25 PSIG
- Plastic (HDPE) Not Cut 40 PSIG
- Plastic (MDPE) Severed 50 PSIG
- Steel Size 2.50" x 3.00" 55 PSIG
- Other _____ 60 PSIG
- Other _____ 6 WC (.2163)
- Other _____ 7 WC (252)
- Other _____ Other

PROTECTION IN PLACE:

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

DURATION OF ESCAPING GAS:

Minutes: 35 min.

LEAK REPORT

NUMBER: _____

EFV Activated Yes No N/S

FEED TYPE:

- One-Way Feed
- Two-Way Feed

Number of Customers Affected: 1

Total Hours Service Was Off: 1

SERVICE ORDER NUMBER: N5422949

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 WATER SERVICE Replacement

WORKING FOR:

- City County Developer
- State Property Owner
- Utility

NOTIFICATIONS AND OTHER DETAILS OF LOCATE:

Locate Ticket: _____

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

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.)

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

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

DAMAGING PARTY:

Name: DAVE O'MARA CONTRACTING
 Address: 1100 E. O & M AVENUE
 City/ State/ Zip: NORTH VEETRON 47265
 Phone: (812) 346-4135
R. Jason Mellencamp 11-8-12
 Prepared / Investigated By: _____ Date: _____

PARTY TO INVOICE:

Name: USIC
 Address: _____
 City/ State/ Zip: _____
 Phone: ()
Ben Bantz 11/12/12
 Reviewed by Field Supervisor: _____ Date: _____

Dave O'MARA CONTRACTING WAS REPLACING A WATER SERVICE TO 605 CENTENNIAL ST. AND HIT 2" PL. MAIN WITH EXCAVATOR. GAS MAIN WAS MARKED IN STREET APPROX. 6" OFF. APPEARED TO MARK OLD MAIN IN STREET RATHER THAN ACTIVE MAIN IN TREE PLOT.

NORMAL NOTICE JOB EXTENSION

Ticket : 1211012542 Date: 11/01/2012 Time: 14:49 Oper: RANDY.HAMMONS Chan:000
 Old Tkt: 1210250019 Date: 10/25/2012 Time: 06:23 Oper: RANDY.HAMMONS Rev: 00A

State: IN Cnty: JACKSON Twp: JACKSON
 Cityname: SEYMOUR Inside: Y Near: N
 Subdivision:

Address : 605
 Street : CENTENNIAL ST
 Cross 1 : S OBRIEN ST Within 1/4 mile: Y
 Location: LOCATE SOUTH SIDE OF ADDRESS
 :
 Grids : 3857C8552B 3857C8552A

Work type : WATER SERVICE REPAIR
 Done for : INDIANA AMERICAN WATER
 Start date: 11/05/2012 Time: 15:00 Hours notice: 97/48 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
 Duration : 1 DAY Depth: 4 FEET

Company : DAVE OMARA CONTRACTOR Type: CONT
 Co addr : 1100 EAST O AND M AVENUE
 City : NORTH VERNON State: IN Zip: 47265
 Caller : RANDY HAMMONS Phone: (812)346-4135
 Contact : RANDY HAMMONS - CELL Phone:
 BestTime:
 Mobile : (812)592-0501
 Fax : (812)524-9129
 Email : RANDYH@DAVEOMARA.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
 Will you be white-lining the dig site area? YES
 :

Submitted date: 11/01/2012 Time: 14:49
 Members: ID0002 ID2981 ID4401 ID8000 ID8791 ID9596 SM

Member Name	Facility Types
COMCAST - SEYMOUR	CABLE TV
DUKE ENERGY / FORMERLY CINERGY	ELECTRIC
FRONTIER	TELEPHONE
IN AMERICAN WATER SEYMOUR	
SEYMOUR WATER POLLUTION CONTROL FACILITY	SEWER
VECTREN - COLUMBUS	GAS

[View Map](#)

[Close Map](#)

Service Order Status

Enter Service Order Number:

5422949



Banner Instance: CS03PROD CS01PROD CS02PROD
Order Number: N5422949
Order Type: LEAK
Order Status: Completed

Customer: 600505055 - BELL LUCY D
Prem: 5144050 - 605 CENTENNIAL ST

Technician: 1930 - Shinolt, Elvin

Order Dates and Times

Need Date: 11/8/2012 10:10:00 AM
Time Created: 11/8/2012 10:08:15 AM
Time Dispatched: 11/8/2012 10:08:15 AM
Time In Route: 11/8/2012 12:31:32 PM
Time On-Site: 11/8/2012 12:31:35 PM
Tech Complete: 11/8/2012 12:41:00 PM
Time Closed: 11/8/2012 12:41:00 PM

Events Performed/Completion Code

LKOT - CMP

Meter Information

Current ReadStatus

Old Meter:
New Meter:

Completion Notes

CONTRACTOR DAMAGED 2" MAIN AT THIS SITE I ARRIVED AT 9:42 CREW ARRIVED AT 9:55 LEAK MADE SAFE AT10:55 LEAK REPAIRED FDS# 0017197 ASSOC. ORDER#N5422895

Request Notes

HIT LINE BLOWING PER DONNIE WITH 811...HIT BY DAVE OMARA ..DIGGING ON SOUTHSIDE OF PROPERTY BEHIND C URB...XST: S O'BRYAN...CONT RANDY HAMMONDS812-592-0501...LOCATES 1211012542

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	11/8/2012 11:34:29 AM	Shinolt, Elvin
AsnAssignmentEnRoute_evt	11/8/2012 12:31:32 PM	Shinolt, Elvin
AsnAssignmentOnSite_evt	11/8/2012 12:31:35 PM	Shinolt, Elvin
OrdOrderComplete_evt	11/8/2012 12:41:18 PM	Shinolt, Elvin

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



Dave O'Mara Contractor, Inc.
1100 East O & M Avenue, PO Box 1139
North Vernon, Indiana 47265

Phone: 812.346.4135

www.daveomara.com

Fax: 812.346.6305

VIA E-MAIL

December 18, 2012

Pipeline Safety Division – Case No. 4099
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 E
Indianapolis, Indiana 46204
PipelineDamageCase@urc.in.gov

RE: Notice of Preliminary Determination of Violation
Pipeline Safety Division Case No. 4099 – Information Request

To Whom It May Concern:

This letter and the documents submitted herewith are the response of Dave O'Mara Contractors, Inc. ("DOCI") to a letter, dated November 30, 2012, from William Boyd, Director of the Pipeline Safety Division of the Indiana Utility Regulatory Commission.

Please note that any further information or communication with respect to this matter should be directed to Jessica A. Hill, Graydon Head & Ritchey LLP, 7759 University Drive, Suite A, West Chester, Ohio 45069.

**DOCI'S RESPONSES TO THE PIPELINE SAFETY DIVISION OF THE
INDIANA UTILITY REGULATORY COMMISSION'S INFORMATION REQUESTS**

1. The Parties:

▪ Excavator Information:

Response: Dave O'Mara Contractor, Inc.
Jeff Jackson, Operator
1100 East O & M Avenue
P.O. Box 1139
North Vernon, Indiana 47265
Preferred Phone: 812-346-4135

rachelr@daveomara.com

- Facility Information:

Response: Vectren Energy
1239 Reliable Parkway
Chicago, IL 60686-0012
877.902.2934

- Locator Service Information:

Response: After performing a diligent search of company records and directing inquiries to company personnel most likely to have relevant information, DOCI has discovered no information responsive to this request.

- Other (Witness, Police, fire, Other) Information:

Response: After performing a diligent search of company records and directing inquiries to company personnel most likely to have relevant information, DOCI has discovered no information responsive to this request and believes that there no other individuals or entities involved.

2. Utility Line Impact:

- Location of Damage:

Response: 605 Centennial Street
Seymour, IN 47274
The nearest intersection is South O'Brien Street

- Product Type:

Response: The product type involved was natural gas.

- Facility Type:

Response: Service/Drop

- Size (Diameter/etc.):

Response: The diameter of the facility was two (2) inch.

- Pressure (PSIG/Inches):

Response: After performing a diligent search of company records and directing inquiries to company personnel most likely to have relevant information, DOCI does not know the pressure that was within the facility.

- Interruption in Service:

Response: No, there was no interruption in service.

- Number of Customers Affected:

Response: After performing a diligent search of company records and directing inquiries to company personnel most likely to have relevant information, DOCI does not know whether any customers were affected.

- Evacuation:

Response: There was no need for an evacuation, and therefore, no evacuation occurred.

- Repair Cost (if known):

Response: DOCI has not been billed for any repair cost.

3. Cause of Damage Information:

- Type of Equipment:

Response: The equipment used was an Excavator.

- Type of Work Performed:

Response: DOCI was performing water line work.

- Release of Product:

Response: Yes, there was a minimal release of product.

- Ignition and/or Fire:

Response: There was not any ignition or fire involved.

- Excavator Notify 811:

Response: Yes, 811 was notified after the incident occurred.

4. Locate Information:

- Excavator Request Locate:

Response: Yes, the excavator did make a locate request. The Request Ticket Number from Indiana 811 is 1211012542. A copy of the Request Ticket Number 1211012542 is enclosed.

- Locate Marks Visible:

Response: No, the locate marks were not visible.

- Locate Marks Correct:

Response: No, the locate marks were not correct.

- Excavator "White Lined":

Response: No, the excavator did not "white line."

- Maps Used to Mark Facilities:

Response: After performing a diligent search of company records and directing inquiries to company personnel most likely to have relevant information, DOCI has discovered no information responsive to this request.

- Was Locate Provided within Two (2) Working Days?

Response: Yes, locates were provided within two working days.

- Operator Employees On-site: Were operator's employees on site at the time of the incident?

Response: Yes, the employees were on-site.

5. Incident Impact Information:

- Number of Outpatient Treated:

Response: There were no injuries or fatalities related to this incident, and therefore, there were no patients treated through out-patient treatment.

- Number of Inpatient Treated:

Response: There were no injuries or fatalities related to this incident, and therefore, there were no patients treated through in-patient treatment.

- Number of Fatalities:

Response: There were no fatalities as a result of this incident.

- Fire Department Response:

Response: Yes, 911 was called immediately after the line was damaged.

- Police Department Response:

Response: Yes, 911 was called immediately after the line was damaged.

- Ambulance Response:

Response: Yes, 911 was called immediately after the line was damaged.

6. Additional Information/Comments:

Response: There is no additional information or comments that DOCI would like to make at this time.

This concludes the response of DOCI to the foregoing request regarding Pipeline Safety Division Case No. 4099.

Sincerely,

DAVE O'MARA CONTRACTORS, INC.
1100 East O & M Avenue, P.O. Box 1139
North Vernon, Indiana 47265
812-346-4135

By: 
Dave O'Mara

Title: President

Date: December 18, 2012

Enclosures