



Pipeline Safety Division Investigation Report

Investigation regarding: Miller Pipeline

UPPAC Database Record ID: 4111

Report Date: 9/12/2013

Investigator: Mike Orr

Damage Date: 11/13/2012 11:20:49 AM

Damage Address: E 36th St, Indianapolis, Marion

The Parties

Excavator: **Miller Pipeline**

Address: 8950 Crawfordsville Road, Indianapolis, In 46234

Facility Owner: **Citizens Gas**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Water

Damage Impact

Product Release: No

Ignition: No

Service Interruption: False

Number of Customers Affected: 0

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1210292149

Original Start Date:

Locate Instructions: FROM THE ABOVE INTERSECTION - LOCATE GOING EAST FOR APPROX 600 FEET ON BOTH SIDES OF E 36TH STR - STARTING AT MANOR CT AND ENDING WALLACE AVE

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Indiana 811; excavator's response to initial notice was received on 12/28/2012. Excavator had a valid locate ticket; however, the gas operator self reported a failure to provide facility locate markings.

Conclusion: There was a failure to provide facility 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

Submitted to IURC-Pipeline Safety on: Nov 22, 2012

Who is submitting this information?

Name of person providing this information: Tony Chan (Citizens Gas)

Business address (*number and street*): 2150 Dr. M.L. King Jr. St.

City, State, and ZIP code: Indianapolis, IN 46202

Telephone number (*area code*): (317) 927-4619

Fax number (*area code*): (317) 927-4619

E-mail address: AChan@CitizensEnergyGroup.com

Excavator Information, if known

Full name: MILLER PIPELINE

Business address (*number and street*): 8850 CRAWFORDSVILLE RD

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

Telephone number (*area code*): 317-501-5495

Fax number (*area code*): _____

E-mail address: _____

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*): Nov 13, 2012

County: Marion

City: Indianapolis

Street address (*number and street, city, state, and ZIP code*):
3604 ARTHINGTON BLVD

Nearest intersection: E 36TH ST

Right of way where damage occurred: Public - City Street

Was there a release of product? No

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? No

If yes, how many affected? 0

Time to restore service (*in hours*): 0

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 0

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? 36

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1210292149

Was the locate request completed within two working days? Yes

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

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 and Flags

If other, please specify:

Was site marked by "White Lining"? No

Were special instructions part of the locate request? No

Were maps used to complete the locate request? Yes

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? No

Description of Cause

Select from the list the most accurate cause for the damage: --Facility was not located or marked

Additional Comments

Gas operator has self reported a failure to locate or mark facility resulting in a determination of an OPERATOR VIOLATION.
MAO 12/4/2012.

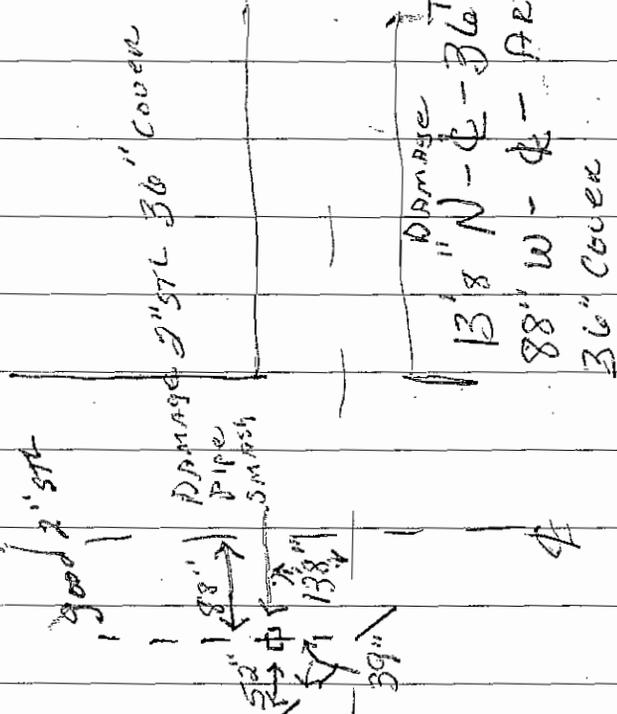
date:

DAMAGE # 1211131461

Locate # 1210292149
New locate 1211131192

old
dead
2" cover
43" cover

ARTHINGTON BLVD



LOCATE MARKS
N - End of Ditch 52" off
S - End of Ditch 39" off

REPAIR ~~with~~ with oversize
Pipe used Has pumpkin

(1 - JOINT + REST.
Then HIT live shot
Production down)





1011101010



Not Marked

2000



INFORMATION REQUEST

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 4111 _____

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: Ronnie Black _____

Title (if any): Foreman _____

Address (number and street): _____

City, State and ZIP Code: _____

Preferred Telephone Number (area code): _____

Cellular Telephone Number (area code): _____

Email Address: info@millerpipeline.com _____

Facility Information:

Business Name: Citizens Gas _____

Responsible Party Personal Name: _____

Title (if any): _____

Address (number and street): _____

City, State and ZIP Code: Indianapolis, IN

Preferred Telephone Number (area code): _____

Cellular Telephone Number (area code): _____

Email Address: info@millerpipeline.com

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*): Water

Other Information (Witness, Police, Fire, Other):

Personal Contact: our whole crew

Business/Organization Name: Miller Pipeline

Title (*if any*): _____

Address (*number and street*): _____

City, State and ZIP Code: _____

Preferred Telephone Number (area code): _____

Cellular Telephone Number (area code): _____

Email Address: _____

Utility Line Impact

Location of Damage:

Address (*number and street*): E. 36th Str.

City, State and ZIP Code: Indianapolis, IN

Nearest Intersection: Arthington Blvd and 36th Str.

Product Type (*select one*): Natural Gas

Facility Type (*select one*): Distribution

Size (Diameter/etc.): ²"

Pressure (PSIG/Inches): [?]

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

Locate Information

Excavator Request Locate: Yes No

Indiana 811 Locate Ticket Number: 1210292149

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: ⁰ _____

Number of Inpatient Treated: ⁰ _____

Number of Fatalities: ⁰ _____

Fire Department Response: Yes No

Police Department Response: Yes No

Ambulance Response: Yes No

Additional Information / Comments

We hand spotted a 2" main on the locate marks and moved to dig backside of line with track hoe and hit a second 2" steel gas line that was not marked. We just put small dent in 2" steel line and it did not puncture or leak. We notified gas company and they made repair. The nearest locate marks were 39" off on the south-side of ditch and 52" on the north-side of the ditch. See attached pictures and drawing. I would be happy to explain pictures and drawing if you call me.

NARRATIVE STATEMENT

Your Pipeline Safety Division Case Number: 4111

Your Full Name: Ralph Miller

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

Your Business Title (if applicable): VP HR

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): 12/18/12

Your Signature: **Ralph Miller** Digitally signed by Ralph Miller
DN: cn=Ralph Miller, o=Miller Pipeline, ou=Miller
Pipeline, email=ralph.miller@millerpipeline.com, c=US
Date: 2012.12.18 14:05:21 -0500 Title (if any) VP HR

Please return your Narrative Statement to:

Pipeline Safety Division – Case Number 4111
Indiana Utility Regulatory Commission
101 West Washington Street, 1500E
Indianapolis, IN 46204

Or scan the statement and Email to:

PipelineDamageCase@urc.in.gov