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

Pipeline Safety Division Investigation Report

Investigation regarding: Miller Pipeline

UPPAC Database Record ID: 4196

Report Date: 9/11/2013 Investigator: Mike Orr

Damage Date: 10/10/2012 Damage Address: 4255 E 36th St, Indianapolis, Marion

The Parties

Excavator: **Miller Pipeline**

Address: 8850 Crawfordsville Rd, Indianapolis, In 46234

Facility Owner: **Citizens Gas**

Pipeline Facility

Facility Type: Natural Gas Facility Function: Service/Drop

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): $0

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes Indiana 811 Ticket Number: 1210021685 Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Tony Chan (Citizens Gas); excavator's response to initial notice was received on 3/8/2013. Excavator had a valid locate ticket; however, the gas operator self reported a failure to provide accurate facility markings.

Conclusion: There was a failure to provide accurate facility 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: Dec 5, 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: Indianapolis, IN 46234

Telephone number *(area code)*: _____

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*): Oct 10, 2012

County: Marion

City: Indianapolis

Street address (*number and street, city, state, and ZIP code*):
4255 E 36TH ST

Nearest intersection: JANET DR

Right of way where damage occurred: Public - City Street

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*): 3

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? Service/Drop

What was the depth of the facility, in inches? 24

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1210021685

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? No

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 marking or location not sufficient

Additional Comments

The Excavator had a valid locate; however, the gas operator has self reported a failure to locate or provided incorrect markings resulting in an OPERATOR VIOLATION. MAO 12/6/2012.

INFORMATION REQUEST
State Form 54909 (2-12)
INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 4196

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*): 8850 Crawfordsville Rd.

City, State and ZIP Code: Indianapolis, IN 46234

Preferred Telephone Number (area code): 317 293-0278

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: _____

Preferred Telephone Number (area code): _____

Cellular Telephone Number (area code): _____

Email Address: _____

Locator Service Information:

Business Name: USIC

Responsible Party Personal Name: Thomas (last name not known)

Title (*if any*): _____

Address (*number and street*): _____

City, State and ZIP Code: _____

Preferred Telephone Number (area code): _____

Cellular Telephone Number (area code): 317 219-8125

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: _____

Business/Organization 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: _____

Utility Line Impact

Location of Damage:

Address (*number and street*): 4255 E. 36th Str. or 4255 Janet Str. (corner lot)

City, State and ZIP Code: Indianapolis, IN

Nearest Intersection: 36 and Janet Str.

Product Type *(select one)*: Natural Gas

Facility Type *(select one)*: Service/Drop

Size (Diameter/etc.): about 3/4"

Pressure (PSIG/Inches): medium

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

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: 1210021659

Locate Marks Visible: ☐ Yes ☒ No

Locate Marks Correct: ☐ Yes ☒ No

Excavator "White Lined": ☐ Yes ☒ No

Maps Used to Mark Facilities: ☐ Yes ☐ No Not Known

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 were/are installing a new 24" water main down 36th street and at the corner lot we struck an unmarked gas service. We excavated around damage area so Citizen's personnel could make repair. All of the other gas services along the street were marked and somehow the locater missed this service. The only thing he located on the corner lot was water. Our Foreman called Thomas with the locate company and he came back out along with this boss and they admitted fault. As you can see from the attached drawing there was allot of paint on the ground along this street which may have made it easy to miss this one service that could have been on either street. As our Foreman made his pre-excavation walk on the dig site looking for signs of missed locates that morning, he could not see the gas meter for this house because it was hidden back behind the air conditioner unit.

NARRATIVE STATEMENT

Your Pipeline Safety Division Case Number: 4196

Your Full Name: Ralph Miller

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

Your Business Title (*if applicable*): VP of Safety

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)*: February 27, 2013

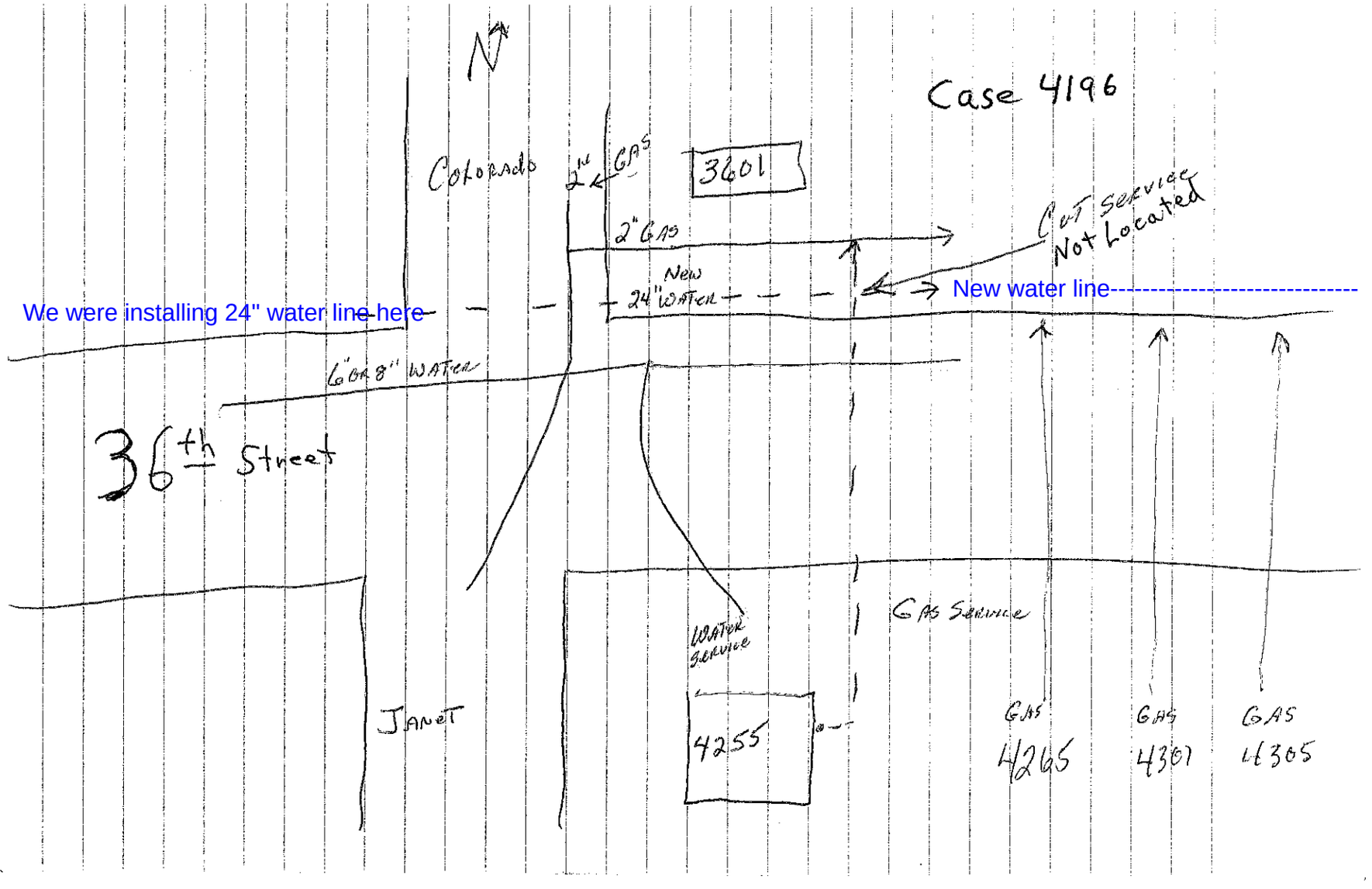
Your Signature: Ralph Mille Title (*if any*) VP of Safety

Please return your Narrative Statement to:

Pipeline Safety Division – Case Number 4196
Indiana Utility Regulatory Commission
101 West Washington Street, 1500E
Indianapolis, IN 46204

Or scan the statement and Email to:

PipelineDamageCase@urc.in.gov


Case 4196
N
Colorado
2" GAS
3601
2" GAS
Cut Service Not Located
New 24" WATER
New water line
We were installing 24" water line here
6" GAS 8" WATER
36th Street
GAS Service
WATER Service
JANET
4255
GAS 4265
GAS 4301
GAS 4305

Miller Pipeline Corp.
8850 Crawfordsville Road • P.O. 34141
Indianapolis, IN 46234
Phone 317-293-0278 • Fax 317-293-8502

Property Damage/Public Injury Form

FOR OFFICE USE: ☐ HQ ☐ NCUN ☐ CUN ☐ CUI ☐ PDN ☐ PDI

Case 4196

EMPLOYEE TO COMPLETE (please print & answer all known fields)

Name Ronnie Black Job Title Foreman

Name of Property Owner/Person Injured — Phone # 317-501-5495

Did MPC employee cause the damage? ☐ Yes ☐ No ? Has owner been notified of damage? ☒ Yes ☐ No

Street address of incident 4255 Janet St.

Indianapolis (City) IN (State) 46234 (ZIP)

Date of incident 10-10-12 Time of incident 8:25 AM/PM Job # CE102

What type of damage was done? ☐ property ☒ live utility ☐ abandoned utility

If a utility was damaged; what type was it?
☒ gas ☐ water ☐ phone cable ☐ phone fiber-optic ☐ phone drop ☐ cable tv ☐ electric primary ☐ electric secondary ☐ sewer ☐ other

If property was damaged; what type was it? ☐ street ☐ curb ☐ sidewalk ☐ driveway ☐ lawn ☐ tree ☐ shrubs ☐ sprinkler ☐ electrical ☐ sewer ☐ water ☐ home interior ☐ home exterior ☐ other

What damaged the utility/property? ☐ backhoe ☒ trackhoe ☐ trencher ☐ directional bore ☐ holehog ☐ concrete saw ☐ jackhammer ☐ shovel ☐ post-hole diggers ☐ auger ☐ grader ☐ plow ☐ stake ☐ other

	Yes	No	N/A
Were locates requested?	☒	☐	☐
Were located performed?	☒	☐	
Were locates legible?	☒	☐	
Did locates expire?	☐	☒	
Were all utilities marked?	☐	☒	
Were marks accurate?	☐	☐ ?	
Did digging begin prior to locating?	☐	☒	
Were utilities hand exposed?	☐	☐ ?	

Type of markers: ☒ paint ☒ flags ☐ wedges ☐ none ☐ other

How far off were marks? No Marks on ft. Service in.

Name of Locating Co. USIC Thomas 317-219-8125

Date located 2-Times Before 10-10-12

Locate reference # 1210021685

Describe the incident in detail (be specific: include all persons involved, sequence of events, measurements, etc.) Installing 24" Water Main Hit gas service at 34" Deep (Not Located) Call Dan Henry, He Told me To Call Tony Who Called Wayne From Gas Co. He Came out. I Dug up Line He Call for Crew To Make Repair. I Called Thomas with USIC He Came Back, His Boss Came out Said He would Take care of Problem. The House was a Corner House Service was on Back of House Behind Air Unit. He didnt Locate any Line for Corner House Except The Water Service I walk The Street Before I Started To Dig All other Gas SVC on Street where Located

FOREMAN TO COMPLETE (please print & answer all questions) Name Ronnie Black

Name of Superintendent Dan Henry

Division

☐ Construction: Job # Customer Name

☐ Municipals Services: Job # CE102 Customer Name Citizens Water

☐ Maintenance ☐ Manufacturing ☐ Fabrication ☐ Office

File #

NORMAL NOTICE JOB EXTENSION

Ticket : 1210021659 Date: 10/02/2012 Time: 11:15 Oper: LSTEVENSON Chan:018

State: IN Cnty: MARION Twp: CENTER
Cityname: INDIANAPOLIS Inside: Y Near: N
Subdivision:

Address :
Street : E 36TH ST
Cross 1 : FOREST MANOR AVE Within 1/4 mile: Y
Location: LOCATE FROM THE ABOVE INTERSECTION GOING EAST FOR APPROX 650 FEET ON BOTH SIDES OF E 36TH STREET AND STOPPING AT COLORADO AVE
:
Grids : 3949C8605B 3949C8605A

Work type : WATER MAIN INSTALL
Done for : CITIZENS WATER
Start date: 10/04/2012 Time: 11:30 Hours notice: 48/048 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 1 MONTH Depth: 10 FEET

Company : MILLER PIPELINE Type: CONT
Co addr : 8950 CRAWFORDSVILLE RD
City : INDIANAPOLIS State: IN Zip: 46234
Caller : RONNIE BLACK Phone: (317)293-0278
Contact : WES BOGARD - CELL Phone:
BestTime:
Mobile : (317)508-1157
Fax : (317)293-8502
Email : DAN.HENRY@MILLERPIPELINE.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time
REMARK AS NEEDED--PREVIOUS TICKET NUMBER IS 1209183236
Will you be white-lining the dig site area? NO
:

Submitted date: 10/02/2012 Time: 11:15
Members: CTG ID1501 ID3639 ID5555 SBCIN SM

EMERGENCY EMERGENCY

Ticket : 1210100644 Date: 10/10/2012 Time: 09:11 Oper: RJOHNSON Chan:002

State: IN Cnty: MARION Twp: CENTER
Cityname: INDIANAPOLIS Inside: Y Near: N
Subdivision:

Address : 4255
Street : E 36TH ST
Cross 1 : JANET DR Within 1/4 mile: Y
Location: AT THE ABOVE ADDRESS--LOCATE THE ENTIRE PROPERTY
:
Grids : 3949C8605B 3949C8605A

Work type : REPAIRING GAS LEAK
Done for : CITIZEN'S GAS
Start date: 10/10/2012 Time: 09:13 Hours notice: 0/000 Priority: EMER
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y
Duration : 4 HOURS Depth: 3 FEET

Company : CITIZENS GAS AND COKE UTILITY Type: MEMB
Co addr : 2150 DR MARTIN LUTHER KING JR DRIVE
City : INDIANAPOLIS State: IN Zip: 46202
Caller : CHRIS WISHMEIER Phone: (317)927-6000
Contact : WAYNE BALLOU - CELL Phone:
BestTime:
Mobile : (317)987-1283
Fax : (317)927-4655

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

Submitted date: 10/10/2012 Time: 09:11
Members: CTG ID1501 ID3639 ID5555 SBCIN SM