



Pipeline Safety Division Investigation Report

Investigation regarding: **Jim Brown**

UPPAC Database Record ID: 4379

Report Date: 3/21/2013

Investigator: Howard Friend

Damage Date: 11/16/2012

Damage Address: 29145 Lark Street, Elkhart, Elkhart

The Parties

Excavator: **Jim Brown**

Address: 29145 Lark Street, Elkhart, In 46514

Facility Owner: **NIPSCO**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Landscaping

Damage Impact

Product Release: Yes

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: No

Indiana 811 Ticket Number:

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

Synopsis: A natural gas service was damaged during excavation to remove a tree stump.

Findings: Reported by Carrie Ludwig (NIPSCO); excavator's response to initial notice was received on 3/14/2013. The homeowner lost his house to a fire the month before this damage. He purchased a mobile home to place on the lot and needed to remove a tree stump. He provided notice of excavation the morning he started the job.

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

Violation: 8-1-26-16(g)(prior) Failure to provide notice of excavation - damage occurred prior to two working days from request date.



150 West Market Street, Suite 600
Indianapolis, IN 46204

March 8, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4379
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4379

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: 11/16/2012

Event Location: 29145 Lark Street

City: Elkhart

Facility Owner: Northern Indiana Public Service Company

Excavator: Jim Brown

Other Party: N/A

Pipeline Division Case No. 4379

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

IURC INFORMATION REQUEST	
Pipeline Safety Division Case No. 4379	
Date of Event	11/16/2012
Event Location	29145 Lark Street
Event City	Elkhart
Facility Owner	Northern Indiana Public Service Company
Excavator	Jim Brown
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Jim Brown
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	Homeowner
ADDRESS	29145 Lark Street
CITY/ STATE/ZIP	Elkhart, IN 46514
PREFERRED TELEPHONE	574-262-9663
CELL PHONE TELEPHONE	574-596-2003
EMAIL ADDRESS	
FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:	
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
LOCATOR SERVICE INFORMATION	
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	1-317-538-7301
EMAIL ADDRESS	morganthompson@usicinc.com
OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	

TITLE (IF ANY)	
ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
UTILITY LINE IMPACT	
LOCATION OF DAMAGE	
ADDRESS	29145 Lark Street
CITY/STATE/ZIP	Elkhart, IN 46514
NEAREST INTERSECTION	Co Rt 5
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8
PRESSURE (PSIG/INCHES)	35
INTERRUPTION IN SERVICE (YES/NO)	NO
NUMBER OF CUSTOMERS AFFECTED	0
EVACUATION (YES/NO)	NO
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	
CAUSE OF DAMAGE INFORMATION:	
TYPE OF EQUIPMENT (Select One)	
Auger	
Backhoe/Trackhoe	X
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	

Probing Device	
Trencher	
Vacuum Equipment	
Unknown/Other	
TYPE OF WORK PERFORMED (Select 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	X-Stump Removal
RELEASE OF PRODUCT (YES/NO)	YES
IGNITION AND/OR FIRE (YES/NO)	NO
EXCAVATOR NOTIFY 811 (YES/NO)	NO
LOCATE INFORMATION:	

EXCAVATOR REQUEST LOCATE (YES/NO)	YES
INDIANA 811 LOCATE TICKET NUMBER	1211161130
LOCATE MARKS VISIBLE (YES/NO)	NO
LOCATE MARKS CORRECT (YES/NO)	N/A
EXCAVATOR "WHITE LINED" (YES/NO)	NO
MAPS USED TO MARK FACILITIES (YES/NO)	NO
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	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	
<p>Notification to one-call center made but not sufficient Contractor dug before ticket 1211161130 was due. NIPSCO Emergency Repair Ticket# 1211162533</p>	

Fact Based Investigation Report

NOTIFICATION ID: 01820121116011

DISTRICT: Northern IN

DAMAGE DATE: 11/16/2012 6:00:00 PM

NOTIFICATION DATE: 11/16/2012 5:59:03 PM

NOTIFIED BY: TENNILLE 800-333-3806 Other

DAMAGE ADDRESS: 29145 LARK ST

CITY: ELKHART

ST: IN ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 11/16/2012

FROM: 18:30:00

TO: 19:00:00

EXCAVATOR INVOLVED: Homeowner

TYPE OF EXCAVATION: Install Pillars

ORIG. LOCATE REQ: 1211161130

START DATE/TIME: 11/20/2012 11:15:00 AM

TYPE OF TICKET: Routine

LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ: 1211162533

START DATE/TIME: 11/16/2012 5:55:00 PM

PICTURES TAKEN BY: Charles Alvord DATE/TIME: 11/16/2012 6:30:00 PM

PHOTOGRAPHY TYPE: Digital

FRAME #: see 1211162533

INVESTIGATOR EMP#: 130534

INVESTIGATOR NAME: Josh Schelbelhut

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820121116011

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Schelbelhut Joshua - 130534

LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:

Contractor Dug Before Ticket Due

Other:

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

Visual, Facility Exposed At Time Of Investigation

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

Contractor dug before ticket was due. USIC not at fault.

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:
n/a

NAMES OF EXCAVATOR'S REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:
n/a

LIST ANY OTHER INDIVIDUALS ON SITE:
n/a

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 n/a
REPLACEMENT FOOTAGE n/a
WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No n/a
WHAT CONTRACTOR EQUIPMENT WAS USED? n/a
IS THE FACILITY SHOWN ON THE UTILITY RECORDS? No
IF YES, PLEASE LIST RECORD #(S) n/a

Facility: Distribution Lines; Folder: N/A; Assigned To: USIC - Company Request

NIPSCO 00850 IUPPSa 11/16/2012 17:55:24 1211162533-00A EMER NEW STRT

EMERGENCY

Ticket : 1211162533 Date: 11/16/2012 Time: 17:52 Oper: SDOERFLEIN Chan:029

State: IN Cnty: ELKHART Twp: CLEVELAND

Cityname: ELKHART Inside: Y Near: N

Subdivision:

Address : 29145

Street : LARK ST

Cross 1 : CO RT 101 Within 1/4 mile: Y

Location: LOCATE THE ENTIRE PROPERTY

:

Grids : 4144D8601C 4144D8601B

Boundary: n 41.734524 s 41.733414 w -86.028969 e -86.023445

Work type : GAS LINE REPAIR

Done for : NIPSCO

Start date: 11/16/2012 Time: 17:53 Hours notice: 0/0 Priority: EMER

Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y

Duration : 1 DAY Depth: 6 FEET

Company : NIPSCO Type: MEMB

Co addr : 801 EAST 86TH AVENUE

City : MERRILLVILLE State: IN Zip: 46410

Caller : TENNILLE FORD Phone: (800)322-2806

Contact : TIM ARMSTRONG-CELL Phone:

BestTime:

Mobile : (219)776-4877

Fax : (219)647-4764

Remarks : All tickets are taken and processed on Eastern Daylight Time

CREW EN ROUTE

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

:

Submitted date: 11/16/2012 Time: 17:52

Members: AEPIN COMCN ID5693 ID8000 NIPSCO SM

NIPSCO 00393 IUPPSa 11/16/2012 11:02:31 1211161130-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1211161130 Date: 11/16/2012 Time: 10:58 Oper: LPORTER Chan:046

State: IN Cnty: ELKHART Twp: CLEVELAND
Cityname: ELKHART Inside: N Near: Y
Subdivision:

Address : 29145
Street : LARK ST
Cross 1 : CO RT 5 Within 1/4 mile: Y
Location: LOCATE ENTIRE PROPERTY

:
Grids : 4144D8601C 4144D8601B
Boundary: n 41.734524 s 41.733414 w -86.028969 e -86.023445

Work type : INSTALL PILLARS
Done for : JAMES BROWN
Start date: 11/20/2012 Time: 11:15 Hours notice: 96/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 1 WEEK Depth: UNKNOWN

Company : JAMES BROWN Type: HOME
Co addr : 29145 LARK ST
City : ELKHART State: IN Zip: 46514
Caller : JAMES BROWN Phone: (574)596-2003
Contact : JAMES BROWN - CELL Phone:
BestTime:
Mobile : (574)596-2003

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

:

Submitted date: 11/16/2012 Time: 10:58
Members: AEPIN COMCN ID5693 ID8000 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA S.P. MAXIMO WO # _____
OPERATING AREA CONTACT T. ARMSTRONG JOB ORDER # 587300
TRACKING NUMBER 018-2012-1116-011 LOCATE REF # _____
Locate Performed By: _____

DATE AND TIME OF ACCIDENT 11/14 2012 1701 M DATE OF REPORT 11/16/12
PLACE OF DAMAGE (INCLUDE CITY) 29145 LARK ST. ELKHART

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) 28 PRESSURE (PSI) 35 Lbs.

RELEASE OF GAS: YES NO () IGNITION OF GAS: YES () NO EVACUATION REQUIRED: YES () # _____ NO

INTERRUPTION OF SERVICE: YES () NO NUMBER OF CUSTOMERS LOST: 0

DURATION OF INTERRUPTION: TIME REPORTED 1701 TIME SHUT OFF 1705 TIME RESTORED 1705

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) JIM BROWN

ADDRESS OF PARTY (INCLUDE CITY) 29145 LARK ST. ELKHART

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE HOME OWNER (JIM BROWN)

WITNESS NAME AND ADDRESS _____

WITNESS REMARKS _____

AGENCIES NOTIFIED / ONSITE: POLICE () AGENCY _____ REPORT # _____

FIRE () AGENCY _____ REPORT # _____

OTHER () _____ Any Injuries? () YES # _____ NO

PHOTOS TAKEN: YES () NO () TAKEN BY: _____ (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 <u>STUMP REMOVAL</u> |
| <input type="checkbox"/> LANDSCAPING | <input type="checkbox"/> PIPELINE | <input type="checkbox"/> MILLING | <input checked="" type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> POLE/SIGN POST | <input type="checkbox"/> ROAD WORK | <input 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
- | | | |
|---|--|--|
| <input type="checkbox"/> AUTOMOTIVE ACCIDENT | <input type="checkbox"/> EXCAVATING BEFORE LOCATES DUE | <input type="checkbox"/> CARELESS MACHINE OPERATOR |
| <input checked="" type="checkbox"/> NO NOTIFICATION | <input type="checkbox"/> MARKS DISTURBED | <input type="checkbox"/> STUB |
| | | <input type="checkbox"/> OTHER |

COMMENTS :

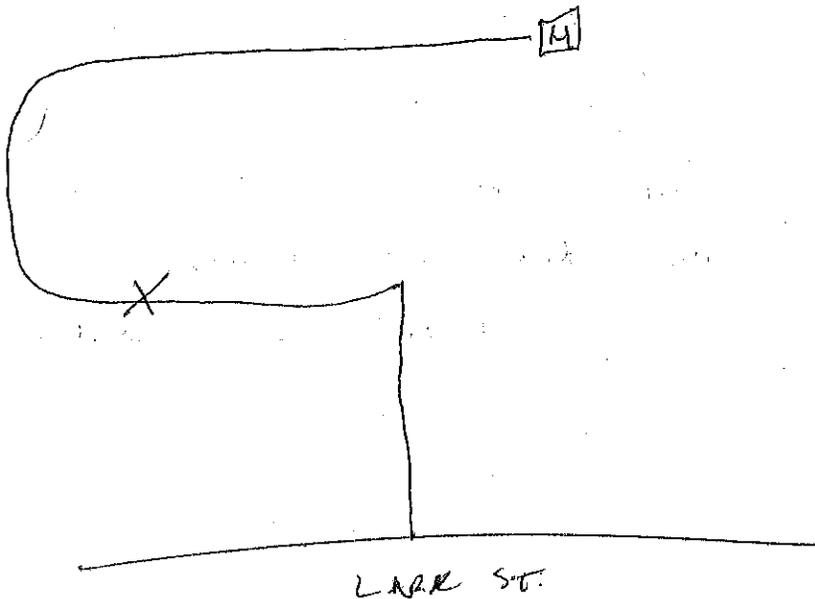
PERSON PREPARING REPORT STEVE CHADFECKER

FIELD SUPERVISOR Tim O'Leary

FIELD MANAGER Russ GRAY

- ORIGINAL REPORT AND SUPPORTING INFORMATION IS TO BE SENT TO FACILITY DAMAGE RECOVERY
- COPY OF REPORT IS TO BE SENT TO DAMAGE PREVENTION

SKETCH: - Show position of all pertinent information



FOR OFFICE USE ONLY:

- | | | |
|---|-----|----|
| • DID EXCAVATION OCCUR BEFORE LOCATES WERE DUE | YES | NO |
| • NO IN 811 LOCATE CALLED IN | YES | NO |
| • DAMAGE CAUSED FROM EXCAVATION WITHIN 24" ZONE | YES | NO |
| • EXPIRED LOCATE | YES | NO |
| • WAS WHITE LINING INDICATED ON LOCATE REQUEST | YES | NO |

COMPLETED BY: _____ DATE: _____



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Jan 16, 2013

Who is submitting this information?

Name of person providing this information: Carrie Ludwig

Business address (*number and street*): 3511 East 15th Avenue

City, State, and ZIP code: Gary, IN 46403

Telephone number (*area code*): (219) 962-0422

Fax number (*area code*): (219) 962-0404

E-mail address: cludwig@nisource.com

Excavator Information, if known

Full name: Jim Brown

Business address (*number and street*): 29145 Lark Street

City, State, and ZIP code: Elkhart, IN 46514

Telephone number (*area code*): (574) 262-9663

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Occupant

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Unknown/Other

Date and Location of Damage

Date of damage (*month, day, year*): Nov 16, 2012

County: Elkhart

City: Elkhart

Street address (*number and street, city, state, and ZIP code*):
29145 Lark Street, Elkhart, IN 46514

Nearest intersection: _____

Right of way where damage occurred: Private - Land Owner

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? _____

Was there a customer service interruption? No

If yes, how many affected? _____

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

Enter number of injuries, if applicable and known: _____

Enter number of fatalities, if applicable and known: _____

Property damage, Estimate \$ _____

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? 28

Notification, Locating, Marking

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: _____

Was the locate request completed within two working days? Unknown/Other

If locates were performed, were they done so by a contractor or pipeline employee? Unknown/Other

If a contractor locator, enter the company name, if known: _____

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? Unknown/Other

Type of markings used:

If other, please specify: _____

Was site marked by "White Lining"?

Were special instructions part of the locate request?

Were maps used to complete the locate request?

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? Unknown/Other

Description of Cause

Select from the list the most accurate cause for the damage: --No notification made to the one-call center

Additional Comments

Emergency Ticket # 1211162533

On OCTOBER 3 2012 WE LOST ARE HOUSE TO A FIRE
AFTER THE HOME WAS REMOVED WE HAD PICKED OUT A NEW
DOUBLE WIDE MOBILE HOME AT THE WEST END OF ARE OLD HOUSE
WAS A TREE STUMP WE NEEDED TO REMOVE AFTER DISSING DOWN
9" WE WAS SURPRIZED TO HIT THE GAS LINE THE STUMP WAS
AT THE BASE OF THE OLD HOUSE AND WAS RUNNING UNDER
THE HOUSE LIFTING THE ROSE THIS WAS THE RESUME THIS TREE WAS
CUT DOWN 5 YEARS AGO LEAVING JUST THE STUMP OVER THE LAST
5 YEARS WE HAD CALLED NIPSCO TO MAKE THE GAS LINES 2009
WHEN WE BUILT AN ADDITION ON TO ARE HOUSE AND AGAIN TO ADD
A FENCE THEY NEVER MARKED ARE SIDE OR FRONT YARD ALWAYS
MARKED THE BACK YARD SO WHEN WE DID CALL 811 I NEVER
THOUGHT ABOUT A GAS LINE 9" DOWN BY THE STUMP I'M SORRY
FOR ANY ISSUES THIS HAS CAUSED

THANKS JIM BROWN

Case# 4379

RECEIVED

MAR 14 2013

INDIANA UTILITY
REGULATORY COMMISSION

