



## Pipeline Safety Division Investigation Report

### Investigation regarding: Cowsert Jr Septic

UPPAC Database Record ID: 4388

Report Date: 7/31/2013

Investigator: Mike Orr

Damage Date: 11/8/2012

Damage Address: 16509 Bennington Ct., Granger, St. Joseph

### The Parties

Excavator: **Cowsert Jr Septic**

Address: 51783 Ash Rd, Granger, In 46530

Facility Owner: **NIPSCO**

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Sewer

### Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

### Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes

Indiana 811 Ticket Number: 1210292008

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

**Synopsis:** Excavator struck and damaged an underground natural gas service while performing septic installation work.

**Findings:** Reported by Tommy Buher (NIPSCO); excavator did not respond to initial notice mailed 2/14/2013. The excavator had a valid locate ticket and the gas operator provided accurate locate markings; however, the excavator failed to use hand tools within the tolerance zone.

**Conclusion:** There was a failure to use hand tools within the tolerance zone.

**Violation:** IC 8-1-26-20(a)(2) Failure to maintain two (2) feet clearance with mechanized equipment.



150 West Market Street, Suite 600  
Indianapolis, IN 46204

March 13, 2013

*Via Electronic Transmission – PipelineDamageCase@urc.in.gov*

Pipeline Safety Division – Case No. 4388  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4388

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: 11/8/2012

Event Location: 16509 Bennington Ct.

City: Granger

Facility Owner: Northern Indiana Public Service Company

Excavator: Cowsert Jr Septic

Other Party: N/A

Pipeline Division Case No. 4388

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](mailto:cearle@nisource.com)

<b>IURC INFORMATION REQUEST</b>	
<b>Pipeline Safety Division Case No. 4388</b>	
Date of Event	11/8/2012
Event Location	16509 Bennington Ct.
Event City	Granger
Facility Owner	Northern Indiana Public Service Company
Excavator	Cowsert Jr Septic
Date of IURC Information Request	2/13/2013
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Cowsert Jr Septic
RESPONSIBLE PARTY PERSONAL NAME	Dave
TITLE (IF ANY)	
ADDRESS	51783 Ash Rd
CITY/ STATE/ZIP	Granger, IN 46530
PREFERRED TELEPHONE	574-674-2951
CELL PHONE TELEPHONE	574-360-1459
EMAIL ADDRESS	gailcowsert@yahoo.com
<b>FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:</b>	
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
<b>LOCATOR SERVICE INFORMATION</b>	
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
<b>OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION</b>	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	

TITLE (IF ANY)	
ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<b>UTILITY LINE IMPACT</b>	
<b>LOCATION OF DAMAGE</b>	
ADDRESS	16509 Bennington Ct
CITY/STATE/ZIP	Granger, IN 46530
NEAREST INTERSECTION	Yorktown Rd
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	$\frac{3}{4}$
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	YES
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	NO
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	
Backhoe/Trackhoe	X
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	

Probing Device	
Trencher	
Vacuum Equipment	
Unknown/Other	
<b>TYPE OF WORK PERFORMED (Select One)</b>	
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-replacing septic system
RELEASE OF PRODUCT (YES/NO)	YES
IGNITION AND/OR FIRE (YES/NO)	NO
EXCAVATOR NOTIFY 811 (YES/NO)	NO
<b>LOCATE INFORMATION:</b>	

EXCAVATOR REQUEST LOCATE (YES/NO)	YES
INDIANA 811 LOCATE TICKET NUMBER	1210292008
LOCATE MARKS VISIBLE (YES/NO)	YES
LOCATE MARKS CORRECT (YES/NO)	YES
EXCAVATOR "WHITE LINED" (YES/NO)	NO
MAPS USED TO MARK FACILITIES (YES/NO)	YES
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	NO
<b>INCIDENT IMPACT INFORMATION</b>	
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)	
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>Failure to use hand tools where required  NIPSCO Emergency Repair Ticket# 1211081515</p>	

**Fact Based Investigation Report**

NOTIFICATION ID: 01820121108007

DISTRICT: Northern IN

DAMAGE DATE: 11/8/2012 12:00:00 PM

NOTIFICATION DATE: 11/8/2012 12:07:46 PM

NOTIFIED BY: TENNILLE FORD Facility Owner

DAMAGE ADDRESS: 16509 BENNINGTON CT

CITY: GRANGER

ST: IN ZIP:

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DAMAGED CUSTOMER: NIPSCO

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INVESTIGATION DATE: 11/08/2012

FROM: 12:30:00

TO: 14:00:00

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EXCAVATOR INVOLVED: Cowsert Septic

TYPE OF EXCAVATION: INSTALL SEPTIC

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ORIG. LOCATE REQ.: 1210292008

START DATE/TIME:

TYPE OF TICKET:

LOCATE REQ. INFO N/A:

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DIG UP/DAMAGE REQ.: M70283658

START DATE/TIME:

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PICTURES TAKEN BY: KEVIN FOX

DATE/TIME: 11/8/2012 1:15:00 PM

PHOTOGRAPHY TYPE: Digital

FRAME #:

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INVESTIGATOR EMP#: 113212

INVESTIGATOR NAME: ERIC VEACH

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

**Fact Based Investigation Customer Information**

NOTIFICATION ID: 01820121108007

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: *(optional)*

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FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Fox Kevin - 121882

LOCATOR NOT KNOWN:

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CHECK ALL THAT APPLY TO INVESTIGATION:

Facility Marked Accurately

Other:

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

Visual, Facility Exposed At Time Of Investigation

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INVESTIGATOR STATEMENT/CAUSAL FACTORS:

CONTRACTOR WAS INSTALLING SEPTIC WHEN THEY BENT NIPSCO GAS SERVICE. THERE ARE EXISTING MARKS IN THE DIG AREA. THE EXISTING MARKS ARE CIRCLED IN WHITE PAINT. THE EXISTING MARKS LINE UP WITH THE DAMAGE AREA.

**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

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**WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL?** Yes

**WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA?** Yes

**WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?** No

**EXTENT OF FACILITY DAMAGE** BENT IN HALF

**REPLACEMENT FOOTAGE** N/A

**WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?** No

**WHAT CONTRACTOR EQUIPMENT WAS USED?** MINI BACK HOE

**IS THE FACILITY SHOWN ON THE UTILITY RECORDS?** No

**IF YES, PLEASE LIST RECORD #(S)**

Facility: Transmission Lines; Folder: N/A; Assigned To: N/A

NIPSCO 00736 IUPPSa 10/29/2012 12:28:25 1210292008-00A NORM NEW GRID

NORMAL NOTICE JOB EXTENSION

Ticket : 1210292008 Date: 10/29/2012 Time: 12:27 Oper: SHARRIS Chan:089

State: IN Cnty: ST JOSEPH Twp: HARRIS  
Cityname: GRANGER Inside: N Near: Y  
Subdivision: GEORGIAN ACRES Lot: 1

Address : 16509  
Street : BENNINGTON CT  
Cross 1 : YORKTOWN RD Within 1/4 mile: Y  
Location: LOCATE THE ENTIRE PROPERTY  
:  
Grids : 4143A8611C 4144D8611C  
Boundary: n 41.735222 s 41.732887 w -86.191216 e -86.187920

Work type : REPLACING SEPTIC SYSTEM  
Done for : RON SZULCZYK  
Start date: 10/31/2012 Time: 12:45 Hours notice: 48/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 3 DAYS Depth: 4 FEET

Company : COWSERT JR SEPTIC Type: CONT  
Co addr : 51783 ASH ROAD  
City : GRANGER State: IN Zip: 46530  
Caller : GAIL COWSERT Phone: (574)674-2951  
Contact : MIC COWSERT - CELL Phone:  
BestTime:  
Mobile : (574)360-1459  
Fax : (574)674-2951  
Email : GAILCOWSERT@YAHOO.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
REMARK AS NEEDED--PREVIOUS TICKET 1210122599--  
Will you be white-lining the dig site area? NO  
:

Submitted date: 10/29/2012 Time: 12:27  
Members: AEPIN COMCN ID1639 NIPSCO SBCIN SM

Facility: Transmission Lines; Folder: N/A; Assigned To: N/A

NIPSCO 00457 IUPPSa 11/08/2012 12:02:27 1211081515-00A EMER NEW STRT

EMERGENCY SEE REMARKS

Ticket : 1211081515 Date: 11/08/2012 Time: 11:59 Oper: DHIGHBAUGH Chan:091

State: IN Cnty: ST JOSEPH Twp: CLAY  
Cityname: GRANGER Inside: Y Near: N  
Subdivision:

Address : 16509  
Street : BENNINGTON CT  
Cross 1 : YORKTOWN RD Within 1/4 mile: Y  
Location: LOCATE ENTIRE PROPERTY  
:  
Grids : 4143A8611C 4144D8611C  
Boundary: n 41.734745 s 41.732536 w -86.190575 e -86.188087

Work type : GAS LINE REPAIR  
Done for : NIPSCO  
Start date: 11/08/2012 Time: 12:00 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 : RICH WAHLGEREN - CELL Phone:  
BestTime:  
Mobile : (574)360-9736  
Fax : (219)647-4764

Remarks : All tickets are taken and processed on Eastern Daylight Time  
CREW EN ROUTE---THANK YOU  
Will you be white-lining the dig site area? NO  
:

Submitted date: 11/08/2012 Time: 11:59  
Members: AEPIN COMCN ID1639 NIPSCO SBCIN SM

# NORTHERN INDIANA PUBLIC SERVICE COMPANY FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA 060 MAXIMO WO # \_\_\_\_\_  
OPERATING AREA CONTACT Armstrong JOB ORDER # 576032  
TRACKING NUMBER 018 2012 1108 007 LOCATE REF # \_\_\_\_\_  
Locate Performed By: \_\_\_\_\_

DATE AND TIME OF ACCIDENT 11-8 2012, 1200M DATE OF REPORT 11-8-12  
PLACE OF DAMAGE (INCLUDE CITY) 16509 Bennington Ct. Granger

**DAMAGE WAS TO:**  
**ELECTRIC** - POLE / TRANSFORMER: # \_\_\_\_\_ SIZE \_\_\_\_\_ YEAR INSTALLED \_\_\_\_\_ BROKEN YES ( ) NO ( )

OTHER (DESCRIBE) \_\_\_\_\_  
**GAS:** SERVICE  MAIN ( ) SIZE 3/4 MATERIAL: PLASTIC ( ) STEEL  METER ( ) REG STATION ( ) STUB ( )  
OTHER (DESCRIBE) \_\_\_\_\_

DEPTH OF FACILITY (inches) 20" PRESSURE (PSI) med. Lbs.  
RELEASE OF GAS: YES  NO ( ) IGNITION OF GAS: YES ( ) NO  EVACUATION REQUIRED: YES ( ) # \_\_\_\_\_ NO   
INTERRUPTION OF SERVICE: YES  NO ( ) NUMBER OF CUSTOMERS LOST: 1  
DURATION OF INTERRUPTION: TIME REPORTED 1150 TIME RESTORED 1600  
DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: Broken into 3/4"

LOCATE MARKS ON SITE: YES  DISTANCE BETWEEN FACILITY AND LOCATE MARKS 4' NO   
HOW LOCATED: PAINT ( ) FLAGS ( ) BOTH  WHITE LINED ( )

PARTY THAT CAUSED DAMAGES (NAME) Cowset Jr. Septic  
ADDRESS OF PARTY (INCLUDE CITY) 51783 Ash Rd Granger

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE Dave  
WITNESS NAME AND ADDRESS Same as above  
WITNESS REMARKS Knew it was there, still looked it

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 checked="" 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 checked="" type="checkbox"/> IRRIGATION | <input type="checkbox"/> MOWING             |
| <input type="checkbox"/> LANDSCAPING         | <input type="checkbox"/> PIPELINE   | <input type="checkbox"/> MILLING               | <input 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 checked="" type="checkbox"/> CARELESS MACHINE OPERATOR |
| <input type="checkbox"/> NO NOTIFICATION     | <input type="checkbox"/> MARKS DISTURBED               | <input type="checkbox"/> STUB ( ) OTHER _____                 |

COMMENTS:

gas shut off at 1:30 pm.

PERSON PREPARING REPORT

(SERV.) LARRY MULLINS & ROB SWATHWOOD (COM)

FIELD SUPERVISOR

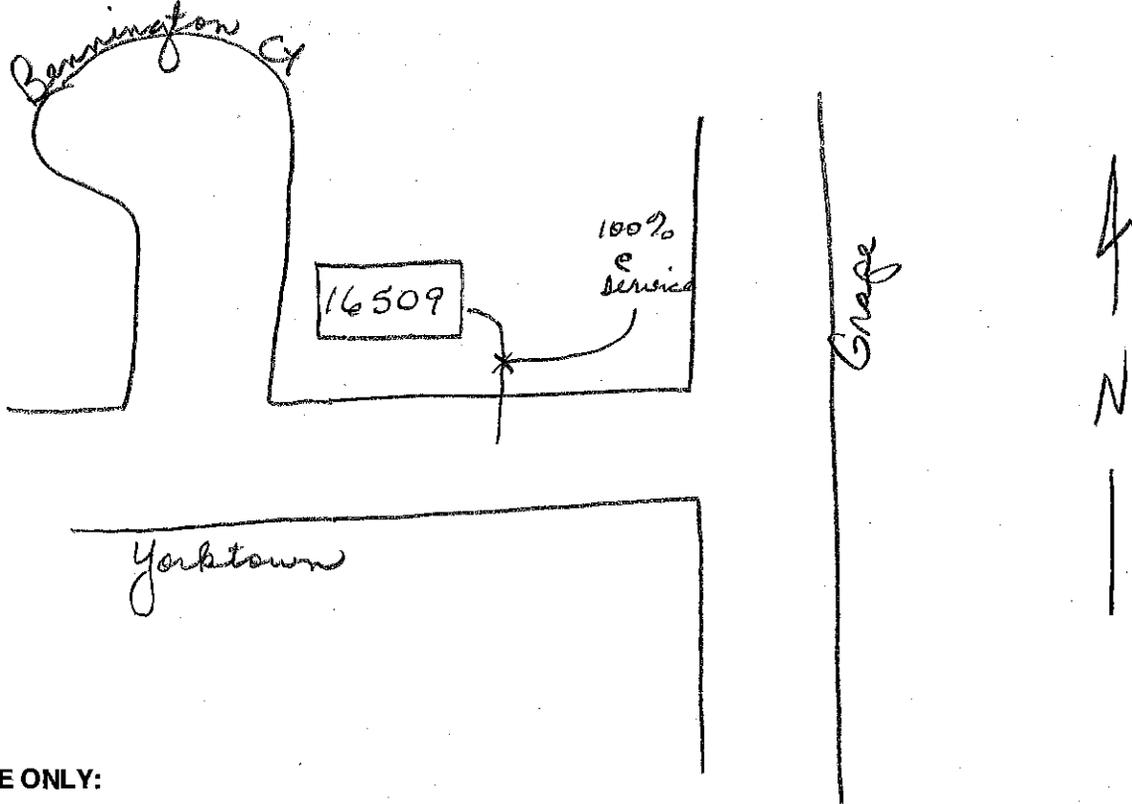
TONY LOPEZ

FIELD MANAGER

RICK 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 21, 2013

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### Who is submitting this information?

Name of person providing this information: Tommy Buher

Business address (*number and street*): 3511 E. 15th Ave.

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

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### Excavator Information, if known

Full name: Cowsert Jr Septic

Business address (*number and street*): 51783 Ash Rd

City, State, and ZIP code: Granger, IN 46530

Telephone number (*area code*): 574-674-2951

Fax number (*area code*): 574-674-2951

E-mail address: gailcowsert@yahoo.com

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### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Unknown/Other

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**Date and Location of Damage**

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

County: St. Joseph

City: Granger

Street address (*number and street, city, state, and ZIP code*):  
16509 Bennington Ct. Granger, IN 46530

Nearest intersection: Yorktown Rd

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? 0

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 4

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$

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**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? 20

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**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1210292008

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? Yes

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? Unknown/Other

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### **Description of Cause**

Select from the list the most accurate cause for the damage: --Failure to use hand tools where required

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### **Additional Comments**

Nipsco emergency repair ticket -- 1211081515



Property of United States Infrastructure Corporation  
Photo taken on 11/8/2012 1:29:16 PM



Property of United States Infrastructure Corporation  
Photo taken on 11/8/2012 1:28:34 PM



Property of United States Infrastructure Corporation  
Photo taken on 11/6/2012 1:18:08 PM



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Jan 21, 2013

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### Who is submitting this information?

Name of person providing this information: Tommy Buher (NIPSCo)

Business address (*number and street*): 3511 E. 15th Ave.

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

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### Excavator Information, if known

Full name: Cowsert Jr Septic

Business address (*number and street*): 51783 Ash Rd

City, State, and ZIP code: Granger, IN 46530

Telephone number (*area code*): 574-674-2951

Fax number (*area code*): 574-674-2951

E-mail address: gailcowsert@yahoo.com

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### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Unknown/Other

---

## Date and Location of Damage

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

County: St. Joseph

City: Granger

Street address (*number and street, city, state, and ZIP code*):  
16509 Bennington Ct.

Nearest intersection: Yorktown Rd

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? 0

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 4

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

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? 20

---

## Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1210292008

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? Yes

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? Unknown/Other

---

### **Description of Cause**

Select from the list the most accurate cause for the damage: --Failure to use hand tools where required

---

### **Additional Comments**

Nipsco emergency repair ticket -- 1211081515