



Pipeline Safety Division Investigation Report

Investigation regarding: Indiana American Water

UPPAC Database Record ID: 4390

Report Date: 7/16/2013

Investigator: Mike Orr

Damage Date: 11/12/2012

Damage Address: 5200 Melton Rd, Gary, Lake

The Parties

Excavator: **Indiana American Water**

Address: 650 Madison Street, Gary, In 46401

Facility Owner: **NIPSCO**

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: 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: 1211120254

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Tommy Buher (NIPSCO); excavator's response to initial notice was received on 3/14/2013. The excavator had a valid locate ticket; however, the gas operator self reported a failure to locate a live service stub not on the maps and records.

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.



150 West Market Street, Suite 600
Indianapolis, IN 46204

March 13, 2013

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 4390
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4390

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: 11/12/2012

Event Location: 5200 Melton Rd

City: Gary

Facility Owner: Northern Indiana Public Service Company

Excavator: Indiana American Water Northwest

Other Party: N/A

Pipeline Division Case No. 4390

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. 4390	
Date of Event	11/12/2012
Event Location	5200 Melton Rd
Event City	Gary
Facility Owner	Northern Indiana Public Service Company
Excavator	Indiana American Water Northwest
Date of IURC Information Request	2/13/2013
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Indiana American Water Northwest
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	650 Madison St
CITY/ STATE/ZIP	Gary, IN 46401
PREFERRED TELEPHONE	219-881-2220
CELL PHONE TELEPHONE	219-712-0358
EMAIL ADDRESS	roberto.pena@amwater.com
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	5200 Melton Rd
CITY/STATE/ZIP	Gary, IN 46403
NEAREST INTERSECTION	Clay St
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.)	2
PRESSURE (PSIG/INCHES)	28
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	X
Waterway Improvement	
Unknown/Other	
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	1211120254
LOCATE MARKS VISIBLE (YES/NO)	YES
LOCATE MARKS CORRECT (YES/NO)	NO
EXCAVATOR "WHITE LINED" (YES/NO)	NO
MAPS USED TO MARK FACILITIES (YES/NO)	YES
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>Other- In-Service gas stub was damaged. Locate marks appear to be off. NIPSCO Emergency Repair Ticket# 1211121708</p>	

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

NIPSCO 00101 IUPPSa 11/12/2012 08:43:46 1211120254-00A EMER NEW STRT

EMERGENCY EMERGENCY

Ticket : 1211120254 Date: 11/12/2012 Time: 08:40 Oper: DWILSON Chan:006

State: IN Cnty: LAKE Twp: CALUMET
Cityname: GARY Inside: Y Near: N
Subdivision:

Address : 5201
Street : E DUNES HWY
Cross 1 : CLAY ST Within 1/4 mile: Y
Location: LOCATE--FRONT OF THE PROPERTY--BETWEEN THE MILLER K MARKET AND MUFFLER
BRAKE SHOP--
:
Grids : 4135A8716C 4135B8716B 4135A8716B
Boundary: n 41.597851 s 41.595810 w -87.278625 e -87.273895

Work type : REPAIRING WATER MAIN BREAK
Done for : INDIANA AMERICAN WATER
Start date: 11/12/2012 Time: 08:40 Hours notice: 0/0 Priority: EMER
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y
Duration : 1 DAY Depth: 9 FEET

Company : INDIANA AMERICAN WATER NORTHWEST Type: MEMB
Co addr : 650 MADISON STREET
City : GARY State: IN Zip: 46401
Caller : ROBERTO PENA Phone: (219)881-2220
Contact : ROBERTO PENA--CELL Phone:
BestTime:
Mobile : (219)712-0358
Fax : (219)881-2227
Email : ROBERTO.PENA@AMWATER.COM

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: 11/12/2012 Time: 08:40

Members: COMCN IB ID2227 ID2554 ID5121 ID5845 ID8000 ID8240 NIPSCO SM

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

NIPSCO 00887 IUPPSa 11/12/2012 18:43:37 1211121708-01A EMER 2NDR STRT

SECOND NOTICE SECOND NOTICE

Ticket : 1211121708 Date: 11/12/2012 Time: 18:42 Oper: LWORTON Chan:021

Old Tkt: 1211121708 Date: 11/12/2012 Time: 13:22 Oper: CALEVI Rev: 00A

State: IN Cnty: LAKE Twp: CALUMET

Cityname: GARY Inside: Y Near: N

Subdivision:

Address : 5200

Street : MELTON RD

Cross 1 : ELKHART ST Within 1/4 mile: Y

Location: LOCATE ENTIRE PROPERTY

:

Grids : 4135B8716C 4135A8716C 4135B8716B 4135A8716B

Boundary: n 41.597126 s 41.595531 w -87.275932 e -87.273209

Work type : GAS LINE REPAIR

Done for : NIPSCO

Start date: 11/12/2012 Time: 13:22 Hours notice: 0/0 Priority: EMER

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

Duration : 5 HOURS Depth: 5 FEET

Company : NIPSCO Type: MEMB

Co addr : 801 E 86TH AVE

City : MERRILLVILLE State: IN Zip: 46410

Caller : DARREN SUROVIK Phone: (219)647-4701

Contact : STEVE TAYLOR-CELL- Phone:

BestTime:

Mobile : (291)314-9567

Fax : (219)647-4777

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

PER RONNIE: NEEDS INDIANA AMERICAN WATER TO RETURN AND VERIFY MARKINGS--- THANK YOU

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

:

Submitted date: 11/12/2012 Time: 18:42

Members: COMCN IB ID2227 ID2554 ID5121 ID5845 ID8000 ID8240 NIPSCO SM

NORTHERN INDIANA PUBLIC SERVICE COMPANY
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA GARY 150 MAXIMO WO #
OPERATING AREA CONTACT JOB ORDER # 477243
TRACKING NUMBER 01820121112006 LOCATE REF #
Locate Performed By:

DATE AND TIME OF ACCIDENT Nov 12 2012 11:44M DATE OF REPORT Nov 12, 2012

PLACE OF DAMAGE (INCLUDE CITY) 5200 Melton Rd GARY, IN

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

OTHER (DESCRIBE)

GAS: SERVICE () MAIN () SIZE 2.0 MATERIAL: PLASTIC () STEEL () METER () REG STATION () STUB ()
OTHER (DESCRIBE)

DEPTH OF FACILITY (inches) 4 ft PRESSURE (PSI) 28 Lbs.

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

INTERRUPTION OF SERVICE: YES () NO () NUMBER OF CUSTOMERS LOST: 2 (RETICED STUB)

DURATION OF INTERRUPTION: TIME REPORTED 11:20 TIME RESTORED 01:30

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 1/2"

LOCATE MARKS ON SITE: YES () NO () DISTANCE BETWEEN FACILITY AND LOCATE MARKS 3 ft NO ()
HOW LOCATED: PAINT () FLAGS () BOTH () WHITE LINED ()

PARTY THAT CAUSED DAMAGES (NAME) Indiana American Water

ADDRESS OF PARTY (INCLUDE CITY) GARY, IN

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE

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
() AGRICULTURE/FARMING () CABLE TV () CURB/SIDEWALK () TELECOMMUNICATIONS
() BLDG CONSTRUCTION () DEMOLITION () DRAINAGE () WATER
() DRIVEWAY () ELECTRIC () SURVEYING () DRAINS/CULVERTS
() FENCING () GRADING () IRRIGATION () MOWING
() LANDSCAPING () PIPELINE () MILLING () OTHER
() POLE/SIGN POST () ROAD WORK () SEWER

- TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW
() AUGER () HAND TOOLS () BACKHOE/TRACKHOE
() MILLING EQUIPMENT () PROBING DEVICE () BORING / DRILLING
() EXPLOSIVES () TRENCHER () FARM EQUIPMENT
() VACCUUM EQUIPMENT () GRADER () OTHER

- REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW
() AUTOMOTIVE ACCIDENT () EXCAVATING BEFORE LOCATES DUE () CARELESS MACHINE OPERATOR
() NO NOTIFICATION () MARKS DISTURBED () STUB () OTHER LOCATES OFF MARK



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

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

Excavator Information, if known

Full name: Indiana American Water Northwest

Business address (*number and street*): 650 Madison t

City, State, and ZIP code: Gary, IN 46401

Telephone number (*area code*): 219-881-2220

Fax number (*area code*): 219-881-2227

E-mail address: roberto.pena@amwater.com

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 12, 2012

County: Lake

City: Gary

Street address (*number and street, city, state, and ZIP code*):
5200 Melton Rd, Gary, IN 46403

Nearest intersection: Clay St

Right of way where damage occurred: Private - Business

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? No

If yes, how many affected? 0

Time to restore service (*in hours*): 2

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? 48

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1211120254

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? Unknown/Other

Type of markings used: Paint

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? Unknown/Other

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: Other

Additional Comments

In-service gas stub was damaged.
Nipsco emergency repair ticket -- 1211121708

Fact Based Investigation Report

NOTIFICATION ID: 01820121112006

DISTRICT: Northern IN

DAMAGE DATE: 11/12/2012 12:00:00 AM

NOTIFICATION DATE: 11/12/2012 12:33:45 PM

NOTIFIED BY: JEFF Facility Owner

DAMAGE ADDRESS: 5200 MELTON RD X ELKHART ST

CITY: GARY

ST: IN ZIP:

DAMAGED CUSTOMER: NIPSCO

INVESTIGATION DATE: 11/12/2012

FROM: 11:55:00

TO: 12:50:00

EXCAVATOR INVOLVED: INDIANA AMERICAN WATER

TYPE OF EXCAVATION: Repairs

ORIG. LOCATE REQ.:

START DATE/TIME:

TYPE OF TICKET:

LOCATE REQ. INFO N/A:

DIG UP/DAMAGE REQ.: M70585906

START DATE/TIME: 11/12/2012 1:35:00 PM

PICTURES TAKEN BY: Bob Anderson DATE/TIME: 11/13/2012 10:45:00 AM

PHOTOGRAPHY TYPE: Digital

FRAME #: 1

INVESTIGATOR EMP#: 117382

INVESTIGATOR NAME: Bob Anderson

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? No

Fact Based Investigation Customer Information

NOTIFICATION ID: 01820121112006

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: (optional)

FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Squertz Robert - 122566

LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:

Abandoned Facility,
Facility Marked Accurately

Other:

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

Visual, Facility Exposed At Time Of Investigation,
Investigation Results Verified By Utility Representative

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

This damage happened on Nov. 12th but good photos and info were not available at that time. I did a follow up on the 13th

and took photos and found out that a main that ran through the parking lot from east to west was marked but off a little. The damaged section was an abandon service that feed of the main at or near it's dead end. The line off the "T" was about 3 or 4ft in length and was already capped off. Nipsco dug back further on the live main and dead ended it at that point. No loss of service at any time.

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

Nipsco made the necessary repairs on the 12th.

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

Crew from IAWC was back out on site working on the 13th and were able to provide information at that time. They also explained that they called Nipsco because they smelled gas when they were digging and did not hit any main.

LIST ANY OTHER INDIVIDUALS ON SITE:

Searched back to 10-1-11 and was unable to find any tickets for this for the damaging party.

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? Yes

EXTENT OF FACILITY DAMAGE Gas leak or unknown if damaged

REPLACEMENT FOOTAGE None

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO? No

WHAT CONTRACTOR EQUIPMENT WAS USED? Backhoe

IS THE FACILITY SHOWN ON THE UTILITY RECORDS? Yes

IF YES, PLEASE LIST RECORD #(S) Nipsco Gary prints



Property of United States Infrastructure Corporation
Photo taken on 1/1/1980 12:00:17 AM.



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

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

Excavator Information, if known

Full name: Indiana American Water Northwest

Business address (*number and street*): 650 Madison t

City, State, and ZIP code: Gary, IN 46401

Telephone number (*area code*): 219-881-2220

Fax number (*area code*): 219-881-2227

E-mail address: roberto.pena@amwater.com

Excavation or Demolition Information

Excavator type: Utility

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Water

Date and Location of Damage

Date of damage (*month, day, year*): Nov 12, 2012

County: Lake

City: Gary

Street address (*number and street, city, state, and ZIP code*):
5200 Melton Rd

Nearest intersection: Clay St

Right of way where damage occurred: Private - Business

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? No

If yes, how many affected? 0

Time to restore service (*in hours*): 2

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? 48

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1211120254

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? Unknown/Other

Type of markings used: Paint

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? Unknown/Other

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: Other

Additional Comments

In-service gas stub was damaged.

Nipsco emergency repair ticket -- 1211121708

The gas operator failed to locate the facility resulting in an OPERATOR VIOLATION. MAO 1/23/2013.



INFORMATION REQUEST

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 4390

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: Indiana American Water

Responsible Party Personal Name: _____

Title (if any): _____

Address (number and street): 650 Madison St.

City, State and ZIP Code: Gary, IN

Preferred Telephone Number (area code): 219-880-2361

Cellular Telephone Number (area code): 219-208-9399

Email Address: _____

Facility Information:

Business Name: NIPSCO

Responsible Party Personal Name: Mary Lechowicz

Title (if any): Facility Damages, Leader

Address (number and street): 801 E. 86th Ave.

City, State and ZIP Code: Merrillville, IN 46410

Preferred Telephone Number (area code): 800-884-2684

Cellular Telephone Number (area code): _____

Email Address: _____

Locator Service Information:

Business Name: USIC

Responsible Party Personal Name: Unknown

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: Unknown

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*): 5200 Melton Rd. _____

City, State and ZIP Code: Gary, IN _____

Nearest Intersection: Melton Rd. & Elkhart St. Gary, IN _____

Product Type (*select one*): Natural Gas

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

Size (Diameter/etc.): Unknown _____

Pressure (PSIG/Inches): Unknown _____

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: 1211120254 _____

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: N/A

Number of Inpatient Treated: N/A

Number of Fatalities: N/A

Fire Department Response: Yes No

Police Department Response: Yes No

Ambulance Response: Yes No

Additional Information / Comments

Indiana American Water was excavating at this address after calling in locates. Locates marks were mismarked by a minimum of 3 feet. Damage occurred when Indiana American Water excavated in an area that was thought to be outside the prohibited zone for mechanized digging due to information provided by the incorrect locates marks. Indiana American Water maintains it is not liable for this damage due to the incorrect locates information provided by NIPSCO's contractor.

NARRATIVE STATEMENT

Your Pipeline Safety Division Case Number: 4390

Your Full Name: Craig Richard Murphy

Full Name of Business / Entity (if applicable): Indiana American Water

Your Business Title (if applicable): Senior Specialist Operational Risk Management

Address (number and street): 650 Madison St.

City: Gary State: IN ZIP Code: 46401

Your E-mail Address: craig.murphy@amwater.com

Today's Date (month, day, year): 03/13/2013

Your Signature:  Title (if any) Sr. Spec. ORM

Please return your Narrative Statement to:

Pipeline Safety Division – Case Number 4390
Indiana Utility Regulatory Commission
101 West Washington Street, 1500E
Indianapolis, IN 46204

Or scan the statement and Email to:

PipelineDamageCase@urc.in.gov

Today's Date: 2/19/13																									
TRAVELERS: (800) 238-6225 or (800) 832-7839																									
American Water Contact: Or (District):	Phone #: Roberto Peña cell # 219-712-0358 Phone #: cell #:																								
Operational Risk Management: Sam Alvey 317-885-2407 or Craig Murphy (NW) 219-208-9399	Claim Number																								
GENERAL LIABILITY INVESTIGATION & RISK MANAGEMENT REPORT																									
Describe Liability:	Personal Injury <input type="checkbox"/> Property Damage <input checked="" type="checkbox"/>																								
Company property or process involved: (check below boxes that pertain)																									
<table border="1"> <tr> <td>Meter Box</td> <td><input type="checkbox"/></td> <td>Curb/Valve Box</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Excavation</td> <td><input checked="" type="checkbox"/></td> <td>Barricades</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Vehicle</td> <td><input type="checkbox"/></td> <td>Water Meter</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Fire Hydrant</td> <td><input type="checkbox"/></td> <td>Backhoe</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water Quality</td> <td><input type="checkbox"/></td> <td>Water Pressure</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water Main</td> <td><input type="checkbox"/></td> <td>Service Line</td> <td><input type="checkbox"/></td> </tr> </table>	Meter Box	<input type="checkbox"/>	Curb/Valve Box	<input type="checkbox"/>	Excavation	<input checked="" type="checkbox"/>	Barricades	<input type="checkbox"/>	Vehicle	<input type="checkbox"/>	Water Meter	<input type="checkbox"/>	Fire Hydrant	<input type="checkbox"/>	Backhoe	<input type="checkbox"/>	Water Quality	<input type="checkbox"/>	Water Pressure	<input type="checkbox"/>	Water Main	<input type="checkbox"/>	Service Line	<input type="checkbox"/>	Other/Complaint: Gas line was hit with excavator because of mislocate by USIC. The gas line was 3-ft off the mark. .
Meter Box	<input type="checkbox"/>	Curb/Valve Box	<input type="checkbox"/>																						
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Name and Address of Claimant:	NIPSCO Phone # 1-800-884-8684																								
801 E. 86th Avenue, Merrillville, Indiana 46410																									
Email address:																									
Name and Address of Customer:	Same																								
Same																									
Location of Incident:	5200 Melton Road, Gary, Indiana																								
Date of Incident:	11/12/12 Time: 12:00pm																								
Person Receiving Call:	Roberto Peña Time Received: 12:00pm																								
Date Letter Received:	2/18/13																								
Date Notified of Incident:	11/12/12																								
If employee error was involved, was safety code violated	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																								
If so, what section(s)?																									
Supervisor: Roberto Peña	Date: 2/18/13																								
Operations Manager/Superintendent:	Date:																								
	02-18-13																								
District Risk Management Manager:	Date:																								

**GENERAL LIABILITY INVESTIGATION REPORT
(CONTINUED)**

Investigation Report:

Gas line was hit due to mislocate by USIC. Photos sent indicate the gas mark with the location of the hit. Location indicates 2 plus feet off USIC's mark.

Conclusion:

NWIO Crews not at fault.

Recommendation Action for Prevention of a Reoccurrence:

None at this time.

Date of Investigation: 11/12/12

By: Roberto Peña

Signature (above)

Leak is between
and Miller Muffler + Brake
in parking lot

Front
Leak Report

4th ST L - JOINT

Indiana American Water Company
Investigation Section

Original Install Year
O&M
Capital

Location: 5201 E Dunes Highway City/Town Gary

Cross Street Clay Surface: Street () Alley () Parkway Backyard () Called by: Plant () Shop () T/C

Time called 7:59 AM/PM Date: 11/9/12 Time TS Responded 9:00 AM/PM Date: 11/9/12

Main Fire Hydrant () Service Line () Meter () Unknown () Flooding: Light Moderate () Heavy () Severe ()

Valves Operated: Field Book Page: 4-I Valve Nos: 19, 20
Urgent: Yes () No Remarks _____ Troubleshooter 50284241

Crew Leader Section

Crew called: 8 AM/PM Date: 11/13/12 Crew reached site: 8:30 AM/PM Date: 11/13/12 Flow GPM: 20/38

Flow stopped: — AM/PM Date: TT Water escaped to: GROUND

Valves Operated: Field Book Page: — Valve Nos: —

Inoperable valves: — Valves repaired: — Hydrants out of service: —

Leak on: Main Valve () No. _____ Fire Hydrant () Company Service () Customer Service ()

Pipe Size: 4 Type: CI () DI () Stl Concrete () Copper () Lead () Galv () Other () _____

Description of Leak: Corrosion () Longitudinal Crack () Shear Crack () Joint Service Line () Other () _____

Further Details of Leak: CAULKED JOINT No. of Customers _____ Notified Yes () No

Boil Advisory Issued: Yes () No Reason Why Not UNDER PRESSURE PSI _____

Unusual Circumstances Delaying the Stopping of Water Flow or Repair: _____

Did Water Cause Property Damage: Yes () No () If yes, describe: _____

Water on: _____ AM/PM Date: —/—/— Flushed: _____ AM/PM Date: —/—/—

Flushing Points: Flushouts () Nos: _____ F.H. (s) () Nos: _____ Installed Tap ()
Other flushing points () Where: _____ Chlorine Residual: _____ MG/L

Sample(s) Taken: _____ AM/PM Date: —/—/— Where? _____

Locates Requested: 7:40 AM/PM Date: 11/12/12 IUPP No. 12112025A Locating Time: _____ (Hours)

Work Completed: 2:00 AM/PM Date: 11/13/12 Crew Leader: BAL Supv: _____

Employees	Man Hours		Vehicles		Materials Used
	Reg	O.T.	No.	Hours	
B. ALEXANDER	6		470	6	NONE
S. FLEWELL	6		50720	6	
K. REAGAN	6		62007	6	
A. EDWARDS	6		97068	6	
P. DELVILLIE	6				



March 13, 2013

Pipeline Safety Division-Case # 4390
Indiana Utility Regulatory Commission
101 W. Washington St. Ste. 1500 E
Indianapolis, IN 46204

INITIAL DOCUMENTS-EXCAVATOR

Dear Mr. Boyd:

I have received the Notice of Preliminary Determination of Violation for Pipeline Safety Division Case # 4390 relating to a utility damage incident occurring on 11/12/2012 at 5200 Melton Rd. Gary, IN. This case alleges that we may have violated the statutes below and requires response from Indiana American Water.

IC 8-1-26-16(g) Failure to provide notice of excavation

IC 8-1-26-16(h) Failure to perform required white lining

IC 8-1-26-20(b) Failure to maintain two (2) feet clearance with mechanized equipment

Indiana American Water responds to the alleged violations as follows:

IC 8-1-26-16 (g) Failure to provide notice of excavation: Indiana American Water provided notice of the excavation to the IUPP as evidenced by locate number 1211120254.

IC 8-1-26-16 (h) Failure to perform required white lining: Indiana American Water was not required to provide white lining because an accurate street address was provided as allowed by IC 8-1-26-16 (a)(2)(A).

IC 8-1-26-20 (b) Failure to maintain two (2) feet clearance with mechanized equipment: Indiana American Water operator did not maintain appropriate clearance as required in IC 8-1-26-20 (a)(2) resulting in mechanized equipment coming in contact with and causing damage to the utility facility owned by Northern Indiana Public Service Company. Indiana American Water investigation shows as supported by photographs that the gas utility was mismarked by a minimum of three feet, misleading Indiana American Water employees to dig with mechanized equipment in an area that should have been free of utilities as indicated by the locates marks provided. This would be a failure on the part of NIPSCO and its locators to properly locate the gas utility as is required by IC 8-1-26-18(f). Due to this circumstance Indiana American Water maintains it is not liable for this damage.

The information request for this Notice of Preliminary Determination of Violation has been attached to this narrative response, per your request. Also attached are photos showing the area of the excavation and locates marks that were provided for the excavation. A customer ticket showing notes pertinent to this issue has also been included.

Sincerely,

A handwritten signature in blue ink, appearing to read "Craig Murphy". The signature is fluid and cursive, with the first name "Craig" and last name "Murphy" clearly distinguishable.

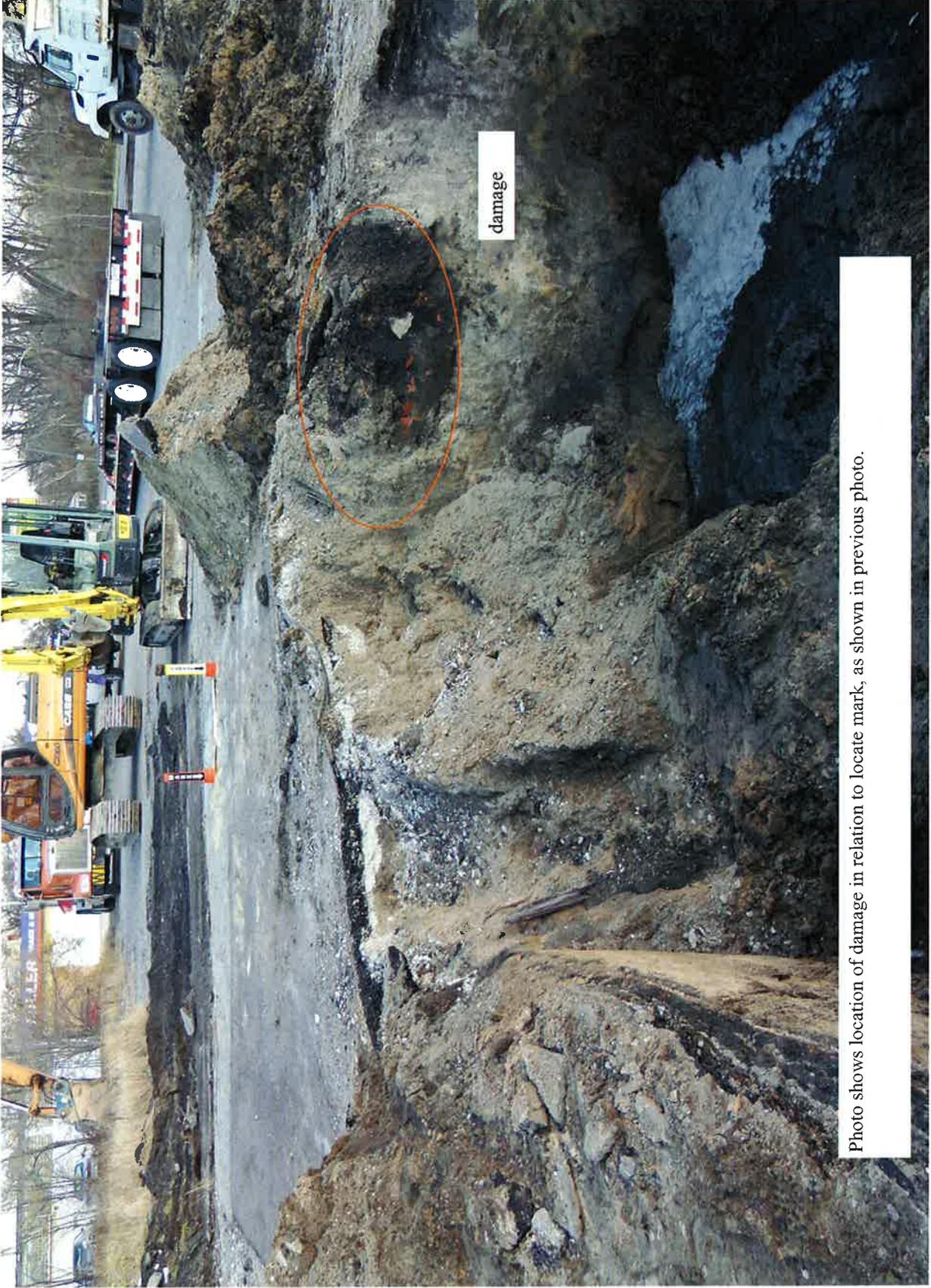
Craig Murphy
Senior Specialist Operation Risk Management
Indiana American Water



Photo shows original locates mark for gas main. Indiana American Water investigation shows through photos that locate mark was mismarked by a minimum of 3 feet.

Photo shows location of locate mark in relation to where damaged gas line is actually located.





damage

Photo shows location of damage in relation to locate mark, as shown in previous photo.