



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: American Electric Power

UPPAC Database Record ID: 4436

Report Date: 9/16/2013

Investigator: Mike Orr

Damage Date: 1/3/2013

Damage Address: 51225 Bittersweet Rd, Granger, St. Joseph

### The Parties

Excavator: American Electric Power

Address: 3340 Old Us Rt 20 E, Elkhart, In 46516

Facility Owner: NIPSCO

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Auger

Type of Work Performed: Pole

### 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: 1212170012

Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

**Findings:** Reported by Tommy Buher (NIPSCO); excavator did not respond to initial notice mailed 2/14/2013. Excavator had a valid locate ticket; however, the gas operator failed to provide facility locate markings.

**Conclusion:** There was a failure to provide facility locate markings.

**Violation: IC 8-1-26-18(f) Operator failed to locate or provided incorrect locate markings.**



150 West Market Street, Suite 600  
Indianapolis, IN 46204

March 13, 2013

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

Pipeline Safety Division – Case No. 4436  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4436

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: 1/3/2013

Event Location: 51225 Bittersweet Rd

City: Granger

Facility Owner: Northern Indiana Public Service Company

Excavator: American Electric Power

Other Party: N/A

Pipeline Division Case No. 4436

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. 4436</b>	
Date of Event	1/3/2013
Event Location	51225 Bittersweet Rd
Event City	Granger
Facility Owner	Northern Indiana Public Service Company
Excavator	American Electric Power
Date of IURC Information Request	2/13/2013
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	American Electric Power
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	3340 Old US RT 20 East
CITY/ STATE/ZIP	Elkhart / IN / 46516
PREFERRED TELEPHONE	(574) 296-5044
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<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	Same
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	51225 Bittersweet Road
CITY/STATE/ZIP	Granger / IN / 46530
NEAREST INTERSECTION	Industrial Drive N
<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.)	1 1/8"
PRESSURE (PSIG/INCHES)	35
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	
REPAIR COST (IF KNOWN) (\$)	
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	X
Backhoe/Trackhoe	
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	X
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	
RELEASE OF PRODUCT (YES/NO)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	N
<b>LOCATE INFORMATION:</b>	

EXCAVATOR REQUEST LOCATE (YES/NO)	Y
INDIANA 811 LOCATE TICKET NUMBER	1212170012
LOCATE MARKS VISIBLE (YES/NO)	N
LOCATE MARKS CORRECT (YES/NO)	
EXCAVATOR "WHITE LINED" (YES/NO)	N
MAPS USED TO MARK FACILITIES (YES/NO)	Y
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	N
<b>INCIDENT IMPACT INFORMATION</b>	
NUMBER OF OUTPATIENT TREATED	
NUMBER OF INPATIENT TREATED	
NUMBER OF FATALITIES	
FIRE DEPARTMENT RESPONSE (YES/NO)	Y
POLICE DEPARTMENT RESPONSE (YES/NO)	N/A
AMBULANCE RESPONSE (YES/NO)	N/A
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>Facility was not located or marked.</p> <p>Emergency Ticket# 1301031176.</p>	

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

NIPSCO 00004 IUPPSa 12/17/2012 06:27:23 1212170012-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1212170012 Date: 12/17/2012 Time: 06:20 Oper: HEBERLING.MIKE Chan:000

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

Address : 51225  
Street : BITTERSWEET RD  
Cross 1 : INDUSTRIAL DR N Within 1/4 mile: Y  
Location: NORTH PROPERTY LINE LOCATE 15 FOOT RADIUS AROUND STAKE IN THE FENCED  
IN AREA NEAR THE DUMPSTERS ALSO SOUTH PROPERTY LINE 15 FOOT RADIUS AROUND POLE  
J146-569 IN THE FRONT AND AROUND STAKE 150 FEET TO THE WEST IN THE FENCED IN  
AREA  
:  
Grids : 4144A8606B 4145D8606B  
Boundary: n 41.750838 s 41.747121 w -86.111695 e -86.110193

Work type : INSTALLING AND REPLACING POLES  
Done for : AEP  
Start date: 12/19/2012 Time: 07:00 Hours notice: 48/048 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 1 DAY Depth: 6 FEET

Company : AMERICAN ELECTRIC POWER Type: MEMB  
Co addr : 3340 OLD US RT 20 EAST  
City : ELKHART State: IN Zip: 46516  
Caller : MIKE HEBERLING Phone: (574)296-5044  
Contact : LINDA SZYMKOWIAK--OFFICE Phone:  
BestTime:  
Mobile : (574)236-1696  
Fax : (574)296-5009  
Email : LKSZYMKOWIAK@AEP.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
DIM0133055  
Will you be white-lining the dig site area? NO  
:

Submitted date: 12/17/2012 Time: 06:20  
Members: AEPIN COMCN ID1639 ID5845 NIPSCO SBCIN SM

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

NIPSCO 00347 IUPPSa 01/03/2013 11:38:23 1301031176-00A EMER NEW GRID

EMERGENCY SEE REMARKS

Ticket : 1301031176 Date: 01/03/2013 Time: 11:36 Oper: SPOPE Chan:044

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

Address : 51225  
Street : BITTERSWEET RD  
Cross 1 : ASHLAND ST Within 1/4 mile: Y  
Location: LOCATE ENTIRE PROPERTY  
:  
Grids : 4144A8606B 4145D8606B  
Boundary: n 41.750857 s 41.747361 w -86.112455 e -86.109214

Work type : REPAIR GAS LINE  
Done for : NIPSCO  
Start date: 01/03/2013 Time: 11:37 Hours notice: 0/000 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 E 86TH AVE  
City : MERRILLVILLE State: IN Zip: 46410  
Caller : AMBER FERGUSON Phone: (800)322-2806  
Contact : RICH WAHLGREN-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

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

Submitted date: 01/03/2013 Time: 11:36  
Members: AEPIN COMCN ID1639 ID5845 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 # 595845

TRACKING NUMBER 018 2013 0103 003 LOCATE REF #
Locate Performed By:

DATE AND TIME OF ACCIDENT 01-03 2013, 1100 M DATE OF REPORT 1-3-13

PLACE OF DAMAGE (INCLUDE CITY) 51225 Bittersweet

DAMAGE WAS TO:

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

OTHER (DESCRIBE)

GAS: SERVICE (X) MAIN ( ) SIZE 1 1/2" MATERIAL: PLASTIC (X) STEEL ( ) METER ( ) REG STATION ( ) STUB ( )
OTHER (DESCRIBE)

DEPTH OF FACILITY (inches) 18" PRESSURE (PSI) med. Lbs. 35#

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

INTERRUPTION OF SERVICE: YES (X) NO ( ) NUMBER OF CUSTOMERS LOST: 1

DURATION OF INTERRUPTION: TIME REPORTED 1055 TIME RESTORED 2130pm

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

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

PARTY THAT CAUSED DAMAGES (NAME) J + M

ADDRESS OF PARTY (INCLUDE CITY) 2929 Rathrop, S. Bend

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

WITNESS NAME AND ADDRESS Same as above

WITNESS REMARKS Didn't see any locates in that area

AGENCIES NOTIFIED / ONSITE: POLICE ( ) AGENCY REPORT #
FIRE (X) AGENCY REPORT #
OTHER ( ) Any Injuries? ( ) YES # (X) NO

PHOTOS TAKEN: YES ( ) NO (X) TAKEN BY: (ATTACH PHOTOS TO REPORT)
MEDIA ON SITE YES ( ) NO (X)

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
(X) POLE/SIGN POST ( ) ROAD WORK ( ) SEWER

TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW

- (X) 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 (X) OTHER Marks covered snow

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS :

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PERSON PREPARING REPORT

\_\_\_\_\_

FIELD SUPERVISOR

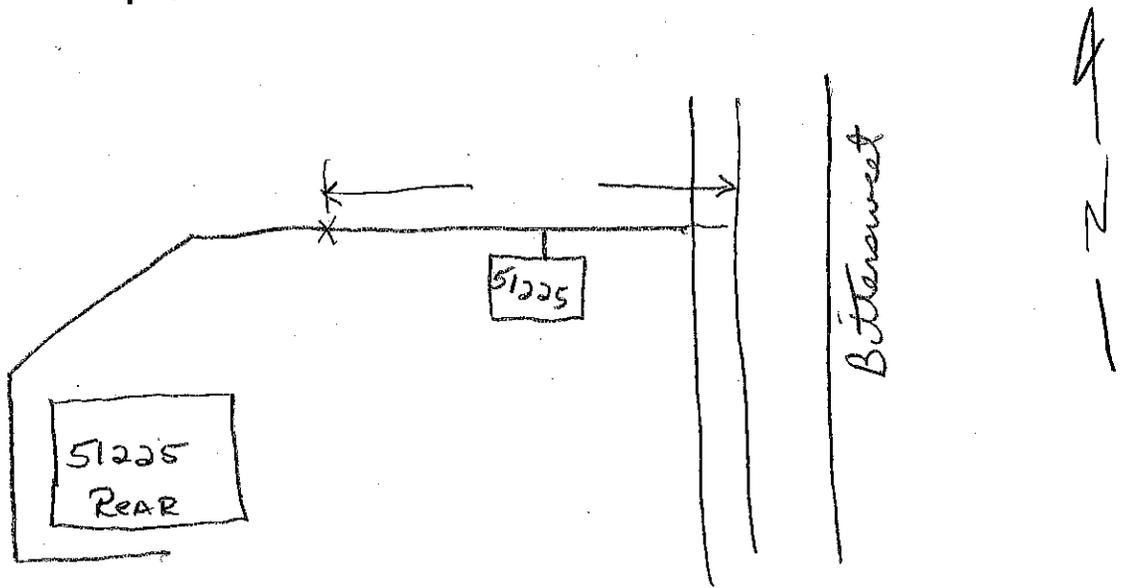
*Gary Crockett*

FIELD MANAGER

*R. Hay*

- 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 24, 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

---

### Excavator Information, if known

Full name: American Electric Power

Business address (*number and street*): 3340 Old US Rt 20 E

City, State, and ZIP code: Elkhart, IN 46516

Telephone number (*area code*): 574-296-5044

Fax number (*area code*): 574-296-5009

E-mail address: N/A

---

### Excavation or Demolition Information

Excavator type: Utility

Excavation or demolition equipment: Auger

Type of work performed: Pole

---

## Date and Location of Damage

Date of damage (*month, day, year*): Jan 3, 2013

County: St. Joseph

City: Granger

Street address (*number and street, city, state, and ZIP code*):  
51225 Bittersweet Rd, Granger, IN 46530

Nearest intersection: Industrial Dr N

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? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 10.5

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? 18

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## Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1212170012

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? No

Were facilities marked correctly? No

Type of markings used: Other

If other, please specify: no locate marks

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? Yes

---

### **Description of Cause**

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

---

### **Additional Comments**

Nipsco emergency repair ticket -- 1301031176

### Fact Based Investigation Report

NOTIFICATION ID: 01820130103003

DISTRICT: Northern IN

DAMAGE DATE: 1/3/2013 12:00:00 AM

NOTIFICATION DATE: 1/3/2013 11:41:07 AM

NOTIFIED BY: AMBER Facility Owner

DAMAGE ADDRESS: 51225 BITTERSWEET RD X ASHLAND ST

CITY: GRANGER

ST: IN ZIP:

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DAMAGED CUSTOMER: NIPSCO

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INVESTIGATION DATE: 01/03/2013

FROM: 13:30:00

TO: 13:40:00

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EXCAVATOR INVOLVED: AEP

TYPE OF EXCAVATION: INSTALLING AND REPLACING POLES

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ORIG. LOCATE REQ.: 1212170012

START DATE/TIME: 12/19/2012 7:00:00 AM

TYPE OF TICKET: Routine

LOCATE REQ. INFO N/A:

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DIG UP/DAMAGE REQ.: M75033581

START DATE/TIME: 1/3/2013 12:55:00 PM

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PICTURES TAKEN BY: Jose Galicia

DATE/TIME: 1/3/2013 1:00:00 PM

PHOTOGRAPHY TYPE: Digital

FRAME #: see M75033581

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INVESTIGATOR EMP#: 130534

INVESTIGATOR NAME: Josh Scheibelhut

BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED? Possibly

### Fact Based Investigation Customer Information

NOTIFICATION ID: 01820130103003

SELECT A CUSTOMER: NIPSCO

CUSTOMER #: (optional)

---

FACILITY DESCRIPTION: LOWPROF

FACILITY ID: Gas Service

LOCATOR NAME & EMP #: Fox Kevin - 121882

LOCATOR NOT KNOWN:

---

CHECK ALL THAT APPLY TO INVESTIGATION:

Other

Other: Facility Not Marked

---

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:

Branch service that ran to rear building was not marked.

**NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:**

Robert Hayward - Robert showed me where the USIC technician had written OK near the damage site and also where he had arrowed off the service to the rear building but not marked it completely.

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

n/a

**LIST ANY OTHER INDIVIDUALS ON SITE:**

Jose Galicia - USIC

---

**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** cut

**REPLACEMENT FOOTAGE** splice

**WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?** No n/a

**WHAT CONTRACTOR EQUIPMENT WAS USED?** backhoe

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

**IF YES, PLEASE LIST RECORD #(S)** n/a



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### Excavation or Demolition Information

Excavator type: Utility

Excavation or demolition equipment: Auger

Type of work performed: Pole

---

**Date and Location of Damage**

Date of damage (*month, day, year*): Jan 3, 2013

County: St. Joseph

City: Granger

Street address (*number and street, city, state, and ZIP code*):  
51225 Bittersweet Rd

Nearest intersection: Industrial Dr N

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? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 10.5

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

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**Notification, Locating, Marking**

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Were facilities marked correctly? No

Type of markings used: Other

If other, please specify: no locate marks

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? Yes

---

### **Description of Cause**

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

---

### **Additional Comments**

Nipsco emergency repair ticket -- 1301031176

The gas operator has self reported a failure to locate facility resulting in an OPERATOR VIOLATION. MAO 1/28/2013.