



Pipeline Safety Division Investigation Report

Investigation regarding: Dph Utilities

UPPAC Database Record ID: 4480

Report Date: 8/9/2013

Investigator: Mike Orr

Damage Date: 2/20/2013 3:12:25 PM

Damage Address: Lionel Ln, Franklin, Johnson

The Parties

Excavator: **Dph Utilities**

Address: 117 Hamilton Heights, Lebanon, Ky 40033

Facility Owner: **Vectren**

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Boring

Type of Work Performed: Telecommunications

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$1024

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes
2/21/2013

Indiana 811 Ticket Number: 1302191254

Original Start Date:

Locate Instructions: FROM THE ABOVE INTERSECTION - LOCATE EAST FOR 150 FEET ON THE SOUTHSIDE OF LIONEL LN

Follow-Up Locate Instructions (if applicable):

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

Findings: Reported by Indiana 811; excavator did not respond to initial notice mailed 3/27/2013. The excavator failed to wait two full working days prior to excavation and damaging the underground facility.

Conclusion: There was a failure to wait the required two full working days prior to excavation.

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



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION
State Form 54122 (R2 / 7-11)
INDIANA UTILITY REGULATORY COMMISSION

INITIAL DOCUMENTS -
OPERATOR
CASE # 4480

Submitted to IURC-Pipeline Safety on: 04/03/2013

Who is submitting this information?

Name of person providing this information: Darlene Kulhanek

Business address (number and street): 1 Main Street

City, State, and ZIP code: Evansville, IN 47711

Telephone number (area code): 812-491-4227

Fax number (area code): 812-491-4504

E-mail address: dkulhanek@vectren.com

Excavator Information, if known

Full name: DPH Utilities

Business address (number and street): 117 Hamilton Heighta

City, State, and ZIP code: Lebanon, KY 40033

Telephone number (area code): 573-275-7886

Fax number (area code): Unknown

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Boring

Type of work performed: Telecommunications

Date and Location of DamageDate of damage (*month, day, year*): 2-20-2013County: JohnsonCity: FranklinStreet address (*number and street, city, state, and ZIP code*):
399 Galahad Drive, Franklin, INNearest intersection: UnknownRight of way where damage occurred: Private - Land OwnerWas there a release of product? YesIf yes, was there an ignition of product? NoWere evacuations necessary as a result of release? NoIf yes, how many evacuated? 0Was there a customer service interruption? YesIf yes, how many affected? 1Time to restore service (*in hours*): 1Enter number of injuries, if applicable and known: 0Enter number of fatalities, if applicable and known: 0Property damage, Estimate \$ 1024.31

Affected Facility InformationWhat type of pipeline was damaged? Natural GasWhat was the affected facility? Service/Drop

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

Notification, Locating, MarkingDid excavator request locates prior to commencing work? YesEnter Indiana 811 ticket number, if known: 1302191254

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

If other, please specify: None

Was site marked by "White Lining"? No

Were special instructions part of the locate request? Unknown/Other

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? Unknown/Other

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: --Notification to one-call center made but not sufficient

Additional Comments

1" plastic service damaged by bore. No valid locate & Not hand exposed.



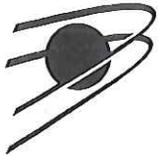
2 VECTREN ENERGY DELIVERY OF INDIANA - NORTH

NOW DUE
\$1,024.31

DPH
117 HAMILTON HEIGHTS
LEBANON, KY 40033

Type: GAS
Invoice: FDS0017491
BillToID: 33038
Billing Date: 3/12/2013
Date of Loss: 2/20/2013
5835 103.0510

Please return this portion with your remittance.



Mail Payment To:
Vectren Utilities Holding Corp.
1239 Reliable Parkway
Chicago, IL 60686-0012
Inquiries: 1-877-902-2934, Mon.-Fri., 8-5
Risk Management/Claims Department

NOW DUE
\$1,024.31

DPH
117 HAMILTON HEIGHTS
LEBANON, KY 40033

Type: GAS
Invoice: FDS0017491
BillToID: 33038
Billing Date: 3/12/2013
Date of Loss: 2/20/2013

Invoice For Costs to Repair and Reconstruct Damaged Property

Address: 399 GALAHAD DR, FRANKLIN

1" PLASTIC SERVICE DAMAGED BY BORE. NO VALID LOCATE & NOT HAND EXPOSED.

Material:	\$85.18
Company Labor:	\$735.89
Contract Labor:	\$0.00
Transportation/Equipment:	\$168.75
Misc:	\$0.00
Gas Loss:	\$34.49
Adjustments:	\$0.00
Payments:	\$0.00
Total:	\$1,024.31

5835 103.0510

Remember, call two (2) working days before digging. Contact I.U.P.S. at 1-800-382-5544.

Task No: 103.0510 Capital/O & M (circle one)

Vectren Claim Number: _____

Date of Damage 2/20/13

Police Report /MO #: _____

Cost Center # Franklin

FACILITIES DAMAGE

Vectren Claims Camera:

Time Occurred 3:25 am (pm)

REPORT

VE02671
4

Time Found 3:41 am (pm)

GAS

Latitude 39.7635 Longitude: -86.08213

FACILITY TYPE:
 Distribution Propane
 Service Storage
 Transmission: (include supplemental report)

DAMAGE SITE:

Address 399 Galahad Dr Lot # _____

County Johnson City Franklin State Ind Township _____

FACILITIES DAMAGED:	ORIFICE SIZE(S):	(1)	(2)	(3)
<input type="checkbox"/> Farm Tap	0.50 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heater	5/8 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Main	0.75 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Residential)	1.00 inch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Industrial / Commercial)	1.25 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Odorizer	2.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Regulator Station	3.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Relief Valve	4.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Riser	5.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Service Line	6.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Valve	10.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	12.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	16.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	20.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	Other _____			

VISUAL OBSERVATION AT DAMAGE SITE:

Visual Observation: Above Ground Below Ground

Locate Applicable Yes No N/S

Facilities Properly Marked Yes No N/S

Marking Methods: Conventional Flags None Whiskers
 Offset Paint Stakes

Locate Marking Faded: Yes No N/S

Wrong Address Requested Yes No N/S

Facilities Improperly Located:

Qualified Locator Could Not Have Accurately Located

Inaccurate Maps / Cards

Broken or No Tracer Wire (Plastic)

Insulation Preventing Accurate Locate

Locator Error:

Failure to Follow Policy

Inappropriate Site Markings

Incomplete Locate

No Locates Performed

Qualified Locator Could Have Accurately Located

Wrong Address Located

Marking Off By: _____ (Feet / Inches)

TYPE OF MATERIAL:

Cast Iron

Plastic (HDPE)

Plastic (MDPE)

Steel

Other _____

DAMAGE TYPE:

Severed

Not Cut

Severed

Size 1/2" x 1/2"
PUNCT.

PRESSURE:

25 PSIG

40 PSIG

50 PSIG

55 PSIG

60 PSIG

6 WC (.2163)

7 WC (252)

Other _____

PROTECTION IN PLACE:

Building Fence None

Post Rail Vault N/A

Other _____

DURATION OF ESCAPING GAS:

Minutes: 30

LEAK REPORT NUMBER:

EFV Activated Yes No N/S

FEED TYPE:

One-Way Feed

Two-Way Feed

Number of Customers Affected: 1

Total Hours Service Was Off: 1

SERVICE ORDER NUMBER: 5532536

DAMAGED BY:

Company Crew

Contractor

County

Developer

Farmer

Municipality

Property Owner/ Tenant

Railroad

State

Unknown

Utility

Vehicle Accident

Other _____

TYPE OF CONSTRUCTION:

Agriculture

Building Construction

Building Demolition

Cable TV

Curbs / Sidewalk

Drainage

Driveway

Electric

Engineering / Surveying

Fencing

Grading

Irrigation

Landscaping

Liquid Pipeline

Milling

Pole

Natural Gas

Public Transit Authority

Railroad Maintenance

Other _____

NOTIFICATIONS AND OTHER DETAILS OF LOCATE:

Locate Ticket: Locate was expired

Date: _____ Time: _____ am / pm

TYPE OF REQUEST:

Regular Request Emergency Request

Locate Company Notified

Contact Name: _____

Time Called: _____ am / pm

Time Locator Arrived at the Site: _____ am / pm

Company Notified of Locate Near Critical Facilities Yes No N/S

Copy of Mark Out Request Provided Within 2 Working Days Yes No N/S

ONE-CALL CENTER:

IUPPS

OUPS

Unknown

Vectren Claim Number: _____

TYPE OF EQUIPMENT:

- Auger
- Backhoe / Track hoe
- Boring
- Drilling
- Explosives
- Farm Equipment
- Grader / Scraper
- Hand Tools
- Milling Equipment
- Plow
- Probing Device
- Trencher
- Vacuum Equipment
- Vehicle
- Other _____

ROOT DAMAGING CAUSE:

- Abandoned Facility
- Deteriorated Facility
- Facility Could Not be Found/ Located
- Facility Was Not Located / Marked
- Failure to Maintain Clearance
- Failure to Maintain Marks
- Failure to Support Exposed Facility
- Failure to Use Hand Tools Where Required
- Improper Backfilling
- Incorrect Records / Maps
- Marking or Location Not Sufficient
- No Notification Made to One-Call
- One-Call Notification Error
- Previous Damage
- Wrong Information Provided
- Other Locate expired

Did Excavator Notify You

- Yes No

Excavation Required

- Yes No

Media at Site

- Yes No

Was There Ignition of Gas?

- Yes No

INVOICE:

- Yes No N/S

CONTRACTOR REPAIRS:

- Contractor Working for Vectren Made Repairs at Own Expense
 Yes No N/S
- Contractor Repaired Damage N/A
 Yes No N/S

Name of Contractor: _____

of Regular Hours; _____

of Overtime Hours; _____

of Regular Hours; _____

Crew Type: _____

MATERIALS OR ROAD WORK:

- Meter was replaced _____ N/A (Stores Code)
- Regulator Was Replaced _____ (Stores Code)
- Temporary Asphalt Repair: _____ (sq. ft.)
- Permanent Asphalt Repair: _____ (sq. ft.)

RIGHT OF WAY:

- Dedicated Utility Easement
- Federal Utility Easement
- Pipeline
- Power / Transmission Line
- Private - Business
- Private - Easement
- Private - Land Owner
- Public - County Road
- Public - Interstate Highway
- Public - Other
- Public - State Highway
- Public - City Street
- Unknown

DAMAGING PARTY:

Name: D.P.H.

Address: 117 Hamilton Heights

City/ State/ Zip: Lebanon, Ky.

Phone: (573) 275-7886

Prepared / Investigated By: Jimmy Wright

Date: 2-20-13

D. Shepherd

PARTY TO INVOICE:

Name: Jame

Address: _____

City/ State/ Zip: _____

Phone: () _____

Reviewed by Field Supervisor: _____

Date: 2-21-13

The locate had expired. There were some very faint paint markers from an older request and they were accurate.

WDS.

NORMAL NOTICE

Ticket : 1302191254 Date: 02/19/2013 Time: 11:24 Oper: SMCCLORE Chan:049

State: IN Cnty: JOHNSON Twp: FRANKLIN
 Cityname: FRANKLIN Inside: Y Near: N
 Subdivision: CAMELOT

Address :
 Street : LIONEL LN
 Cross 1 : GALAHAD DR Within 1/4 mile: Y
 Location: FROM THE ABOVE INTERSECTION - LOCATE EAST FOR 150 FEET ON THE
 SOUTHSIDE OF LIONEL LN
 ***Boring Where = UNDER GALAHAD DR

:
 Grids : 3929D8604A
 Boundary: n 39.486219 s 39.485105 w -86.082759 e -86.080148

Work type : PLACING PIPE
 Done for : METRONET
 Start date: 02/21/2013 Time: 11:45 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 3 FEET

Company : DPH UTILITIES Type: CONT
 Co addr : 117 HAMILTON HEIGHTS
 City : LEBANON State: KY Zip: 40033
 Caller : JIMMY WRIGHT Phone: (573)275-7886
 Contact : JIMMY WRIGHT CELL Phone:
 BestTime:
 Mobile : (573)275-7886

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

:
 Submitted date: 02/19/2013 Time: 11:24
 Members: ID0002 ID0270 ID2034 ID3640 ID5857 ID7131 ID7288 SM

Member Name	Facility Types
CENTURYLINK	TELEPHONE
COMCAST CENTRAL (GREENWOOD)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY	ELECTRIC
FRANKLIN DPW, CITY OF	
IN AMERICAN WATER JOHNSON COUNTY	WATER
VECTREN - FRANKLIN	GAS

NORMAL NOTICE

Ticket : 1301280635 Date: 01/28/2013 Time: 10:08 Oper: AOWENS Chan:041

State: IN Cnty: JOHNSON Twp: FRANKLIN
 Cityname: FRANKLIN Inside: Y Near: N
 Subdivision: CAMELOT

Address : 399
 Street : GALAHAD DR
 Cross 1 : LIONEL LN Within 1/4 mile: Y
 Location: LOCATE THE ENTIRE PROPERTY
 ***Boring Where = EASEMENT

:
 Grids : 3929D8604A
 Boundary: n 39.486203 s 39.484727 w -86.082758 e -86.081326

Work type : PLACING PIPE
 Done for : METRONET
 Start date: 01/30/2013 Time: 10:30 Hours notice: 48/048 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N
 Duration : 1 WEEK Depth: 3 FEET

Company : DPH UTILITIES Type: CONT
 Co addr : 117 HAMILTON HEIGHTS
 City : LEBANON State: KY Zip: 40033
 Caller : JIMMY WRIGHT Phone: (573)275-7886
 Contact : JIMMY WRIGHT CELL Phone:
 BestTime:
 Mobile : (573)275-7886

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

:
 Submitted date: 01/28/2013 Time: 10:08
 Members: ID0002 ID0270 ID2034 ID3640 ID5857 ID7131 ID7288 SM

Member Name	Facility Types
CENTURYLINK	TELEPHONE
COMCAST CENTRAL (GREENWOOD)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY	ELECTRIC
FRANKLIN DPW, CITY OF	
IN AMERICAN WATER JOHNSON COUNTY	WATER
VECTREN - FRANKLIN	GAS

Service Order Status

Tuesday, March 5, 2013

Enter Service Order Number:

5532536



Clear Form

Refresh Data

Banner Instance: CS03PROD CS01PROD CS02PROD

Order Number: N5532536

Order Type: LEAK

Order Status: Completed

Customer: 008888888 - INACTIVE CUSTOMER

Prem: 5735717 - LIONEL LANE & GALLAHAD DR

Technician: 2148 - Shipp, Randy

Order Dates and Times

Need Date: 2/20/2013 3:27:00 PM
Time Created: 2/20/2013 3:24:09 PM
Time Dispatched: 2/20/2013 3:24:09 PM
Time In Route: 2/20/2013 3:31:30 PM
Time On-Site: 2/20/2013 3:40:23 PM
Tech Complete: 2/20/2013 4:13:47 PM
Time Closed: 2/20/2013 4:13:47 PM

Events Performed/Completion Code

LKNS - CMP

Meter Information

Current Read/Status

Old Meter:

New Meter:

Completion Notes

hit service at 399 galahad dr crew is fixing

Request Notes

HIT LINE PER AMBER WITH 811....PH 317-893.-1416....BLOWING...JIMMY RIGHTONSITE...PH 573-275-7886....
 LOCATE #1302191254....JOHNSON CTY....THANKS

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	2/20/2013 3:28:43 PM	Shipp, Randy
AsnAssignmentEnRoute_evt	2/20/2013 3:31:30 PM	Shipp, Randy
AsnAssignmentOnSite_evt	2/20/2013 3:40:23 PM	Shipp, Randy
OrdOrderComplete_evt	2/20/2013 4:13:47 PM	Shipp, Randy

NOTE: The Reporting database replicates in near real-time; it has been approximately 0 minute(s) since the last transaction replicated.