



## Pipeline Safety Division Investigation Report

### Investigation regarding: Rieth Riley Construction Company

UPPAC Database Record ID: 4617

Report Date: 7/24/2013

Investigator: Mike Orr

Damage Date: 4/9/2013 3:26:58 PM

Damage Address: 81st Ave, Ross, Lake

### The Parties

Excavator: **Rieth Riley Construction Company**

Address: 7500 West 5th Avenue, Gary, In 46406

Facility Owner: **NIPSCO**

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Road Work

### 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  
4/5/2013

Indiana 811 Ticket Number: 1304033361

Original Start Date:

Locate Instructions: LOCATE THE NORTH FRONTAGE ROAD OF WEST 81ST AVENUE ALSO KNOWN AS ROUTE 30 FROM CLEVELAND PLACE GOING WEST FOR 375 FEET RIGHT OF WAY TO RIGHT OF WAY

Follow-Up Locate Instructions (if applicable):

**Synopsis:** Excavator struck and damaged an underground natural gas main while performing road work.

**Findings:** Reported by Indiana 811; excavator's response to initial notice was received on 7/15/2013. The excavator had a valid locate ticket and the gas operator provided locate markings; however, the equipment operator was told to stop work in order to investigate a possible service line in the zone and did not heed the request to stop causing damage to the facility. The worker was reprimanded by the excavation company as a result.

**Conclusion:** There was a failure to maintain two (2) feet clearance with mechanized equipment.

**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

May 31, 2013

[Via Electronic Transmission – PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)

Pipeline Safety Division – Case No. 4617  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 4617

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: 4/9/2013

Event Location: / 81st Ave

City: Ross

Facility Owner: Nipsco

Excavator: Rieth Riley Construction Company

Other Party: N/A

Pipeline Division Case No. 4617

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. 4617</b>	
Date of Event	4/9/2013
Event Location	/ 81st Ave
Event City	Ross
Facility Owner	Nipsco
Excavator	Rieth Riley Construction Company
Date of IURC Information Request	May 1, 2013
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	Rieth Riley Construction Company
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	7500 West 5 <sup>th</sup> Avenue
CITY/ STATE/ZIP	Gary / IN / 46406
PREFERRED TELEPHONE	(219)977-0722
CELL PHONE TELEPHONE	(219)712-2477
EMAIL ADDRESS	sbroe@rieth-riley.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	<a href="mailto:LSELKING@NISOURCE.COM">LSELKING@NISOURCE.COM</a>
<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	RT 30 and Cleveland Place
CITY/STATE/ZIP	Merrillville / IN /
NEAREST INTERSECTION	81st Avenue
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	X
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	2"
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	N
NUMBER OF CUSTOMERS AFFECTED	0
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	
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	X
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)	Y – 1304093372
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1304033361
LOCATE MARKS VISIBLE (YES/NO)	Y
LOCATE MARKS CORRECT (YES/NO)	Y
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	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FATALITIES	0
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>Failure to use hand tools where required (this was an in-service gas stub, locator and excavator were on-site, but excavator was told to wait before proceeding to dig by locator; locator stepped away and excavator ignored locator's directions to not dig). Please see NIPSCO Field Damage report.</p>	

NORTHERN INDIANA PUBLIC SERVICE COMPANY  
FACILITY DAMAGE REPORT

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

REPORTING OPERATING AREA CARY Lea MAXIMO WO # \_\_\_\_\_  
OPERATING AREA CONTACT MM Grey JOB ORDER # 477215  
TRACKING NUMBER 018-2013-0409-007 LOCATE REF # 1304033361  
Locate Performed By: USEE

DATE AND TIME OF ACCIDENT 4-9 2013 11:47M DATE OF REPORT 4-9-13  
PLACE OF DAMAGE (INCLUDE CITY) RT 30 + CUBELAND PL. MILWAUKEE

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

**GAS:** SERVICE ( ) MAIN  SIZE 4" MATERIAL: PLASTIC ( ) STEEL  METER ( ) REG STATION ( ) STUB ( )  
OTHER (DESCRIBE) \_\_\_\_\_  
DEPTH OF FACILITY (inches) 36" PRESSURE (PSI) 40-45 Lbs.  
RELEASE OF GAS: YES  NO ( ) IGNITION OF GAS: YES ( ) NO  EVACUATION REQUIRED: YES ( ) # \_\_\_\_\_ NO   
INTERRUPTION OF SERVICE: YES ( ) NO  NUMBER OF CUSTOMERS LOST: 0  
DURATION OF INTERRUPTION: TIME REPORTED 11:47 TIME RESTORED 17:20  
DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 2 1/2"

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

PARTY THAT CAUSED DAMAGES (NAME) KEITH RILEY  
ADDRESS OF PARTY (INCLUDE CITY) 7500 W 5th AVE Cary, IL 60406  
WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE SCOTT BROE (REITH & RILEY)  
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: DAMIAN PRESTON NIPSCO, REITH & RILEY (ATTACH PHOTOS TO REPORT)  
MEDIA ON SITE YES ( ) NO  USIC LOCATE COMPANY

**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 \_\_\_\_\_

• SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

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

NIPSCO 00994 IUPPSa 04/03/2013 17:43:12 1304033361-00A NORM NEW STRT

NORMAL NOTICE JOB EXTENSION

Ticket : 1304033361 Date: 04/03/2013 Time: 17:42 Oper: SCOTT.BROE.IN Chan:000  
Old Tkt: 1303221163 Date: 03/22/2013 Time: 11:53 Oper: SCOTT.BROE.IN Rev: 00A

State: IN Cnty: LAKE Twp: ROSS  
Cityname: MERRILLVILLE Inside: Y Near: N  
Subdivision:

Address :

Street : 81ST AVE

Cross 1 : CLEVELAND PL Within 1/4 mile: Y

Location: LOCATE THE NORTH FRONTAGE ROAD OF WEST 81ST AVENUE ALSO KNOWN AS ROUTE  
30 FROM CLEVELAND PLACE GOING WEST FOR 375 FEET RIGHT OF WAY TO RIGHT OF WAY

:

Grids : 4128C8720D 4128D8720D

Boundary: n 41.471628 e 41.470341 w -87.336711 e -87.335047

Work type : ROAD RECONSTRUCTION

Done for : INDOT

Start date: 04/05/2013 Time: 18:00 Hours notice: 48/048 Priority: NORM

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

Duration : 4 MONTHS Depth: 4 FEET

Company : RIETH RILEY CONSTRUCTION COMPANY Type: CONT

Co addr : 7500 WEST 5TH AVENUE

City : GARY State: IN Zip: 46406

Caller : SCOTT BROE Phone: (219)977-0722

Contact : SCOTT BROE (CELL) Phone:

BestTime:

Mobile : (219)712-2477

Fax : (219)944-2472

Email : SBROE@RIETH-RILEY.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
REFRESH PAINT/FLAGGING

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

:

Submitted date: 04/03/2013 Time: 17:42

Members: AN COMCN IB ID2227 ID2245 ID6784 NIPSCO SM

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

NIPSCO 01082 IUPPSa 04/09/2013 15:30:22 1304093372-00A EMER DAMG STRT

DAMAGE SEE REMARKS

Ticket : 1304093372 Date: 04/09/2013 Time: 15:23 Oper: SMCCLURE Chan:049

State: IN Cnty: LAKE Twp: ROSS  
Cityname: MERRILLVILLE Inside: Y Near: N  
Subdivision:

Address :  
Street : 81ST AVE  
Cross 1 : CLEVELAND PL Within 1/4 mile: Y  
Location: LOCATE THE NORTH FRONTAGE ROAD OF WEST 81ST AVENUE ALSO KNOWN AS ROUTE  
30 FROM CLEVELAND PLACE GOING WEST FOR 375 FEET RIGHT OF WAY TO RIGHT OF WAY  
:  
Grids : 4128C8720D 4128D8720D  
Boundary: n 41.471628 s 41.470341 w -87.336711 e -87.335047

Work type : ROAD RECONSTRUCTION  
Done for : INDOT  
Start date: 04/09/2013 Time: 15:24 Hours notice: 0/000 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 4 MONTHS Depth: 4 FEET

Company : RIETH RILEY CONSTRUCTION COMPANY Type: CONT  
Co addr : 7500 WEST 5TH AVENUE  
City : GARY State: IN Zip: 46406  
Caller : SCOTT BROE Phone: (219)977-0722  
Contact : SCOTT BROE (CELL) Phone:  
BestTime:  
Mobile : (219)712-2477  
Fax : (219)944-2472  
Email : SBROE@RIETH-RILEY.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
PER SCOTT BROE - A NIPSCO GAS LINE WAS DAMAGED AT THE NORTHWEST CORNER OF THE  
INTERSECTION - GAS CAN BE HEARD AND SMELLED -UNSURE OF LINE OF DISCRPTION -  
NIPSCO AND 911 HAVE BEEN NOTIFIED - CREW IS ON SITE - PREVIOUS TICKET IS  
1304033361 - THANK YOU  
Will you be white-lining the dig site area? NO  
:

Submitted date: 04/09/2013 Time: 15:23  
Members: AN COMCN IB ID2227 ID2245 ID6784 NIPSCO SM

Fact Based Investigation Report

**Notification ID** 01820130409008  
**Damage Date** 04/09/2013 15:26  
**Notified By** SCOTT BROE ()  
**Damage Address** 81ST AVE (rt 30 / Cleveland)  
MERRILLVILLE, IN  
**District** Northern Indiana  
**Notification Date** 04/09/2013 15:30

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**Damaged Customer** NIPSCO

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**Investigation Date From** 04/09/2013 15:30:00 **To** 04/09/2013 15:50:00

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**Excavator Involved** REITH RILEY  
**Type of Excavation** Road Construction

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**Orig. Locate Request** 1303181616 **Start Date** 04/07/2013 15:25  
**Type of Ticket** Routine **Locate Req. Info** N/A

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**Damage Request #** 1304093372 **Start Date** 04/09/2013 15:30

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**Pictures Taken By** Nathan Wolf **Date** 04/09/2013 15:25  
**Photography Type** Digital **Frame #**

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**Investigator Emp. #** 134728 **Investigator Name** Nathan Wolf  
**Based on your investigation, is further investigation needed?** Possibly

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Fact Based Investigation Customer Information

**Facility Description** Low Profile **Facility ID** main - 4"

**Locator Name & EMP #** Nagel Brad - 131807 **Locator Not Known**

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**Investigation Findings**

Abandoned Facility  
Facility Marked Accurately  
**Other Notes**

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**Investigation Methods**

Investigator Verified Existing Marks By Hooking Up  
Visual, Facility Exposed At Time Of Investigation

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**Investigator Statement/Causal Factors**

Contractor was excavating for access road entry way. The contractor called Locator Brad Nagel because they were moving to this area. Brad arrived on site and verified a phone cable and then marked out the gas before any further excavation was done. They shut down the excavator while Brad marked out the facilities in the area. There was a two inch plastic main teeing into a 4" steel main. Last summer NIPSCO lowered the two inch gas main running perpendicular to the access road. (The 4" steel main ran parallel to the access road) They stubbed off and retired the old 2" plastic gas main. The 2" stub is what was damaged during this excavation. The stub was approximately 32" long coming off the 4" main. The 4" steel main and the 2" plastic main were both marked accurately prior to the damage. The stub was not marked, and it could not be marked due to it being retired and not having an access point. Brad completed the locate, and the post locate photos, moments after he completed the locate

**Names of Utility Representatives Contacted or on Site and Statement**

Gary Gas Operations Supervisor Matt Gray and Field Coordinator Robert Haywood were both on site.

**Names of Excavator's Representatives Contacted or on Site and Statement**

n/a

**Other individuals on site**

USIC employee was on site at the time of the damage while assisting Locator Brad Nagel with the locate.

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<b>Were any markings visible on the damage site upon arrival?</b>	Yes
<b>Were any other indicators of facility present in the area?</b>	No
<b>Was the excavation within the tolerance zone of marks?</b>	Yes
<b>Extent of facility damage</b>	4" steel main had a hole in it where the stub was
<b>Replacement Footage</b>	4'
<b>Was contractor assistance required? If yes, who?</b>	No
<b>What contractor equipment was used?</b>	
<b>Is the facility shown on the utility records?</b>	Yes
<b>If yes, list record numbers</b>	

# Facility Damage Report-test

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## NIPSCO Facility Damage Report

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**Local Operating Area (LOA) and Regional Manager:** Gary LOA - John Todd

**Field or Crew Supervisor:** Matt Gray - Gary Gas Street Supv.

**Facility Damage Reporter:** Robert Hayward, Damage Prevention Field Coordinator

**E-mail of Damage Reporter:** rhayward@nisource.com

**Job Order Number:** 477215

**Report Date and Evaluation Start Time:** Tuesday, April 9, 2013 01:25 PM

**Date and Evaluation End Time:** Tuesday, April 9, 2013 05:03 PM

**Total Investigative Hours (including drive time and reporting hours):** 3.5

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### Contact Information

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**Excavator Company Name:** Rieth Riley Construction Co.

**Company Address:** 7500 W 5th Ave  
Gary , IN 46406

**Phone Number:** (219)-977-0722

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**Damage Information**

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**Date and Time of Accident:** Tuesday, April 9, 2013 11:47 AM

**Place of Accident:** US Hwy 30 and Cleveland PL  
Merrillville , IN 46410

**Damage occurred ABOVE ground:**

**Damage occurred BELOW ground:**

**Damage occurred UNDER water:**

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**Right of Way (ROW) Where Event Occurred**

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**Public ROW:** City Street

**Power or transmission line:**

**Dedicated public utility easement:**

**Data not collected:**

**Unknown:**

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**Damage to Gas Facility**

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**Site Photos**

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**Photo Discription:** Flowers on city street.

**Photo**



**USIC Tracking** 018 2013 0409 007

**Number:**

**811 Original** 1304033361

**Excavator Locate**

**Ticket Number:**

**Excavator 811** 1304093372

**Damage Locate**

**Ticket Number:**

**Main type** Distribution

**(distribution or  
transmission):**

**Distribution type** Main

**(main, service, or  
private):**

**Size of line** 2"

**(inches):**

**Material (plastic or** Plastic

**steel):**

**Meter damage:**

**Reg station**   
**damage:**

**Stub:**

**Gas was released:**

**Gas was NOT**   
**released:**

**Evacuation** No

**required (yes or  
no):**

**Evacuation** 0

**number:**

Service was NOT interrupted:

Service was interrupted:

Number of customers lost: 0

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**Locate Assesment**

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Does this job site have a valid locate number?

Yes:

No:

Distance (in feet) between locate marks and the facility: 2"

White-lined:

Locate marks visible:

Paint:

Flagged:

Incomplete:

Partial:

Complete:

Satisfactory:

Unsatisfactory:

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**Field Observations**

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**Name and phone number of person in charge of work site at time of damages:** Scott Brow - Project Supt. / (219)712-2477

**E-mail of person in charge:** sbroe@rieth-riley.com

**Name and phone number of party that caused damages :** Dave Henrich - (802)-516-1407

**Type of excavator:** Contractor

**Name of Witness #1 and Phone Number:** Scott Broe - (219)-712-2477

**E-mail of Witness #1:** sbroe@rieth-riley.com

**Witness # 1 Remarks:**

Scott advised me that the gas line that was hit was not marked and I thanked him for his information.

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**Agencies Notified**

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**Fire Department NOT notified:**

**Fire Department notified:**

**Was the fire agency on site? (yes or no):** Yes

**Name of Fire Department on scene:** Merrillvill Fire

**Police NOT notified:**

Police notified:

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**Media On Site**

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Yes:

No:

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**Work in Progress When Damage Occurred**

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Agriculture or farming:

Building construction:

Cable TV:

Driveway:

Curb or sidewalk:

Demolition:

Electric:

Fencing:

Grading:

Irrigation:

Landscaping:

Milling:

Mowing:

Petroleum pipeline:

Liquid pipeline:

Pole or sign post:

Road work:

Sewer:

Surveying:

Storm Drains or  
culverts:

Telecommunications:

Water:

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**Type of Equipment Used**

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Auger:

Backhoe or track  
hoe:

Boring:

Directional drill:

Drilling:

Explosives:

Farm equipment:

Grader or scraper:

Hand tools:

Milling equipment:

Probing device:

Trencher:

Vacuum  
equipment:

Unknown:

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**Contractor Assessment**

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Located:

No locate:

Expired locate:

Observed 2'  
hand-dig zone:

Hand-exposed:

Locate number  
available on site:

Unsatisfactory:

Satisfactory:

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**Root Cause**

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Automotive  
accident:

Deliberate:

Digging before  
locate complete  
(some locates  
exist):

Excavating before  
locates due (not  
respecting the  
48-hour window):

**Failed to call 811**   
**(no notification):**

**Failed to hand**   
**expose:**

**Inaccurate locate:**

**Marks disturbed:**

**Negligent machine**   
**operator:**

**Stub:**

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### Summary

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#### Summary Notations:

After interviewing the person in charge for the excavator and the USIC locator, I have come to the Root Cause of Negligent Operator due to the fact that the contractor had already removed approximately 30" of top cover and had contacted the locator to come back out to the location because they were now ready to work in this particular section. The locator told them he would be there in 30 minutes. Upon his arrival he found them already digging WITHOUT marks and he asked the operator to STOP because he had a gas main and phone cables in the location he was digging. The locator promptly marked out the the 4" steel main running E ro w along the N side of US 30 and the 2"PL main that "T's" off of the 4" and runs N along the W side of Cleveland Pl. once done marking the locator stated that he had just completed taking his photos and turned to go back to his truck and got about 15 steps away and heard the pop noise and heard the gas blowing and could immediately smell it. As my photos reflect, there was only about 8" of top ground cover still left over the main and the operator proceeded to use mechanized equipment DIRECTLY over the new fresh marks just put down. I had an opportunity to review USIC's photos on-site and they support exactly what the locator had told me had transpired. Had the contractor hand exposed the main within the 2' tolerance zone in accordance with the Indiana Dig Law, they would have found the 2"PL stub that was from the old section of main that had to be rerouted for this project

**Field or Crew** Matt Gray - Gary Gas Street Supv.  
**Supervisor (name):**

**Send this original report to the Facility Damage Recovery team.**

**Send a copy of this report to the Damage Prevention team.**

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**Items Distributed**

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Business card:

Door hanger:

Excavator  
Handbook:

811 QA:

Utility ID cards:

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For Office Use Only

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For Office Use Only

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Excavation occurred before locates were due.

Yes:

No:

The IN-811 locate was NOT called in.

Yes:

No:

Damage was caused from excavation within the 24-inch zone.

Yes:

No:

The locate markers were expired.

Yes:

No:

White lining was indicated on the locate request.

Yes:

No:







**INITIAL RESPONSE - EXCAVATOR**



**INFORMATION REQUEST**

State Form 54909 (2-12)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

**Case Number:** 4617

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*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.*

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**The Parties**

**Excavator Information:**

Business Name: Rieth-Riley Construction Co., Inc.

Responsible Party Personal Name: Kim Beard

Title (if any): Risk Manager

Address (number and street): P.O. Box 477

City, State and ZIP Code: Goshen, IN 46527

Preferred Telephone Number (area code): (574) 875-5183 ext. 20214

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: kbeard@rieth-riley.com

**Facility Information:**

Business Name: \_\_\_\_\_

Responsible Party Personal Name: \_\_\_\_\_

Title (if any): \_\_\_\_\_

Address (number and street): \_\_\_\_\_

**INITIAL RESPONSE - EXCAVATOR**

City, State and ZIP Code: \_\_\_\_\_

Preferred Telephone Number (area code): \_\_\_\_\_

Cellular Telephone Number (area code): \_\_\_\_\_

Email Address: \_\_\_\_\_

**Locator Service Information:**

Business Name: \_\_\_\_\_

Responsible Party Personal 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: \_\_\_\_\_

**Cause of Damage Information**

**Type of Equipment (*select one*):** Backhoe/Trackhoe

**Type of Work Performed (*select one*):** Road Work

**Other Information (Witness, Police, Fire, Other):**

Personal Contact: \_\_\_\_\_

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*): 81st (Rt. 30)

City, State and ZIP Code: Ross Lake County

Nearest Intersection: Cleveland Place

**Product Type (*select one*):** Natural Gas

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

**Size (Diameter/etc.):** \_\_\_\_\_

**Pressure (PSIG/Inches):** \_\_\_\_\_

**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:** 1304033361 & 1304093372

- 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

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**Incident Impact Information**

Number of Outpatient Treated: None

Number of Inpatient Treated: None

Number of Fatalities: None

Fire Department Response:  Yes  No

Police Department Response:  Yes  No

Ambulance Response:  Yes  No

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**Additional Information / Comments**

Excavator Operator was written up for digging after instructed to stop

NARRATIVE STATEMENT

Your Pipeline Safety Division Case Number: 4617

Your Full Name: Kim Beard

Full Name of Business / Entity (if applicable): Rieth-Riley Construction Co., Inc.

Your Business Title (if applicable): Risk Manager

Address (number and street): P.O. Box 477

City: Goshen State: IN ZIP Code: 46527

Your E-mail Address: kbeard@rieth-riley.com

Today's Date (month, day, year): July 15, 2013

Your Signature: Kim Beard Title (if any) Risk Manager

Please return your Narrative Statement to:

**Pipeline Safety Division – Case Number 4617  
Indiana Utility Regulatory Commission  
101 West Washington Street, 1500E  
Indianapolis, IN 46204**

Or scan the statement and Email to:

**PipelineDamageCase@urc.in.gov**

**From:** Boyd, William  
**To:** ["Christina Bonham"](#)  
**Subject:** RE: IURC Case # 4617  
**Date:** Tuesday, June 04, 2013 10:40:23 AM

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Ms. Bonham,

I have your request and see no issues with an extension. I have updated the record in the database to reflect the extension. Thank you for your diligence in these matters.

Respectfully,  
William Boyd  
317-232-2718

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**From:** Christina Bonham [mailto:[cbonham@rieth-riley.com](mailto:cbonham@rieth-riley.com)]  
**Sent:** Thursday, May 30, 2013 2:58 PM  
**To:** Boyd, William  
**Cc:** Poon, DeAnna  
**Subject:** IURC Case # 4617  
**Importance:** High

Mr. Boyd:

Please consider this correspondence our official request to extend the response time for the initial excavator's documents for the above referenced case by 1 month, making the new deadline through and including Friday, June 28th. We are still conducting our investigation of this matter. Thank you in advance for your assistance with this matter.

**Christina M. Bonham**

PARALEGAL

RIETH-RILEY CONSTRUCTION CO., INC.

P.O. Box 477

Goshen, IN 46527

(574)875-5183 ext. 20248

(574)875-8405 fax