



Pipeline Safety Division Investigation Report

Investigation regarding: J D Brown Excavating LLC

UPPAC Database Record ID: 4938

Report Date: 9/17/2013

Investigator: Mike Orr

Damage Date: 6/17/2013 12:47:17 PM

Damage Address: 1111 Division St, Attica, Fountain

The Parties

Excavator: J D Brown Excavating LLC

Address: 4672 W 1200 S, Covington, In 47932

Facility Owner: Vectren

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Backhoe/Trackhoe

Type of Work Performed: Sewer

Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$1962

Excavator Activities/Cause of Damage Information:

Excavator Request Locates: Yes
6/10/2013

Indiana 811 Ticket Number: 1306062166

Original Start Date:

Locate Instructions: LOCATE ENTIRE PROPERTY

Follow-Up Locate Instructions (if applicable):

Synopsis: Excavator struck and damaged an underground natural gas live in-service stub while performing sewer work.

Findings: Reported by Indiana 811; excavator's response to initial notice was received on 7/23/2013. Excavator had a valid locate ticket; however, the gas operator self reported a failure to provide accurate facility locate markings of a live in-service gas stub.

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

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



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)
INDIANA UTILITY REGULATORY COMMISSION

INITIAL DOCUMENTS -
OPERATOR
CASE 4938

Submitted to IURC-Pipeline Safety on: 07/31/2013

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: JD Brown Excavating

Business address (*number and street*): 4672 W County Rd 1200 S

City, State, and ZIP code: Covington, IN 47932

Telephone number (*area code*): 765-793-4049

Fax number (*area code*): Unknown

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Sewer (Sanitary/Storm)

Date and Location of Damage

Date of damage (month, day, year): 6-14-2013

County: Fountain

City: Attica

Street address (number and street, city, state, and ZIP code):
1111 Division Street, Attica, IN

Nearest intersection: Unknown

Right of way where damage occurred: Private - Land Owner

Was there a release of product? Yes

If yes, was there an ignition of product? No

Were evacuations necessary as a result of release? No

If yes, how many evacuated? 0

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (in hours): 2

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 1,962.12

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? ..

Notification, Locating, Marking

Did excavator request locates prior to commeneing work? Yes

Enter Indiana 811 ticket number, if known: 1306062166

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: Paint and Flags

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? No

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? Yes

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: Abandoned facility

Additional Comments

3/4" stub severed by backhoe. Retired line at main.

Vectren Claim Number: _____
Police Report / MO #: _____

FDS0017949

Task No: 103.0810 Capital / O & M (circle one)
Date of Damage 6/14/2013
Cost Center # 5956
Time Occurred 2:43 am/pm
Time Found 2:50 am/pm
Latitude: 40.281810 Longitude: -87.330630

FACILITIES DAMAGE REPORT

GAS

Vectren Claims Camera:

VE02316

DAMAGE SITE:
Address 7111 Division St. Lot # _____
County Polk City Atter State IA Township Logan

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

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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Residential)	1.00 inch	<input 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: 6/14

Visual Observation: Above Ground Below Ground

Locate Applicable: Yes No N/S

Facilities Properly Marked: Yes No N/S

Marking Methods: Conventional Flags None

Offset Paint Stakes Whiskers

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 NO CARD

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

DAMAGE TYPE: Severed Not Cut Severed

Size 3/4 x 3/4

PRESSURE: 25 PSIG 40 PSIG 50 PSIG 55 PSIG 60 PSIG 6 WC (2163) 7 WC (252) Other 22 psig

PROTECTION IN PLACE: Building Fence None Post Rail Vault N/A Other _____

DURATION OF ESCAPING GAS: Minutes: 1 hr 30 min

LEAK REPORT NUMBER: 10009514

EFV Activated Yes No N/S

FEED TYPE: One-Way Feed Two-Way Feed

Number of Customers Affected: 0 old service stub

Total Hours Service Was Off: 1

Were Facility Marks Visible: Yes No

Was Area White Lined: Yes No Destroyed

Positive Response: Yes No Destroyed

Tolerance Zone Violated: Yes No

Part of Project: Yes No

Company Representative On-Site: Yes No

Observation by (ID#): 259

Name of Locator: MSR

LOCATING ORGANIZATION: Contract Locator Unknown / Other Utility Owner

SERVICE ORDER NUMBER: _____

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 sewer

NOTIFICATIONS AND OTHER DETAILS OF LOCATE:

Locate Ticket: 130606 2166

Date: 6-8-13 Time: 11:00 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

WORKING FOR: City County Developer State Property Owner Utility

ONE-CALL CENTER: JUPPS 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 _____

CONTRACTOR REPAIRS:

- Contractor Working for Vectren Made Repairs at Own Expense
 - Yes No N/S
- Contractor Repaired Damage
 - 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 _____ (Stores Code)
- Regulator Was Replaced _____ (Stores Code)
- Temporary Asphalt Repair: _____ (sq. ft.)
- Permanent Asphalt Repair: _____ (sq. ft.)

- Did Excavator Notify You Yes No
- Excavation Required Yes No
- Media at Site Yes No
- Was There Ignition of Gas? Yes No

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

INVOICE: Yes No N/S

DAMAGING PARTY:
 Name: J.D Brown Excavating
 Address: 4672 W 1200 S
 City/ State/ Zip: Covington TN 37932
 Phone: () _____
 Prepared / Investigated By: William C. Haddock Date: 6-11-2013

PARTY TO INVOICE:
 Name: HA
 Address: _____
 City/ State/ Zip: _____
 Phone: _____
 Reviewed by Field Supervisor: [Signature] Date: 6/19/13

3/4" SWL service was an unknown gas line on the property of 1111 Division St. -
 No known record of this service line found.

Ticket Portal Production

Ticket Text **Photos**

Ticket Text

ID5958 01052 IUPPSa 06/17/2013 12:51:12 1306062166-01A NORM 2NDR STRT
 SECOND NOTICE SECOND NOTICE
 Ticket : 1306062166 Date: 06/17/2013 Time: 12:47 Oper: STURNER Chan:000
 Old Tkt: 1306062166 Date: 06/06/2013 Time: 12:35 Oper: EBAYENS Rev: 00A
 State: IN Cnty: FOUNTAIN Twp: LOGAN
 Cityname: ATTICA Inside: Y Near: N
 Subdivision:
 Address : 1111
 Street : DIVISION ST
 Cross 1 : ELM ST Within 1/4 mile: Y
 Location: LOCATE ENTIRE PROPERTY
 :
 Grids : 4016A8714A 4016A8715D 4017D8714A 4017D8715D
 Boundary: n 40.284604 s 40.283140 w -87.250572 e -87.248995
 Work type : REPLACE SEWER LINE
 Done for : MITCHELL MCCALL
 Start date: 06/10/2013 Time: 12:45 Hours notice: 0/000 Priority: NORM
 Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
 Duration : 1 DAY Depth: 4 FEET
 Company : J D BROWN EXCAVATING LLC Type: CONT
 Co addr : 4672 W 1200 S
 City : COVINGTON State: IN Zip: 47932
 Caller : JODEE BROWN Phone: (765)793-4049
 Contact : JODEE BROWN CELL Phone:
 BestTime:
 Mobile : (765)230-6130
 Email : JDBROWNEXCAVATING@YAHOO.COM
 Remarks : All tickets are taken and processed on Eastern Daylight Time
 PER JODEE: NEEDS VECTERN TO RETURN AND VERIFY THE MARKINGS ASAP -- CREW IS
 ONSITE
 Will you be white-lining the dig site area? NO
 :
 Submitted date: 06/17/2013 Time: 12:47
 Members: ID0002 ID2555 ID5958 ID9488 SBCIN SM

 Email_From: irth@iupps.org
 Email_Subject: IUPPS ID5958 2013/06/17 #01052 1306062166-01A NORM 2NDR
 Email_Sent_Date: 2013-06-17 11:51:12 CDT
 Email_host: tickets6.811tickets.com
 Email_user: 811.in.oc-vvc
 Email_To: 811.in.oc-vvc@tickets.811tickets.com
 Email_ContentType: text/plain; charset=us-ascii

Friday, July 19, 2013

Service Order Status

Enter Service Order Number:

5691237



[Clear Form](#) [Refresh Data](#)

Banner Instance: CS03PROD CS01PROD CS02PROD

Order Number: N5691237

Order Type: LEAK

Order Status: Completed

Customer: 600517248 - MCCALL MITCHELL

Prem: 5283249 - 1111 DIVISION ST

Technician: 2443 - Whiteaker, Pat

Order Dates and Times

Need Date: 6/14/2013 3:22:00 PM
Time Created: 6/14/2013 2:50:01 PM
Time Dispatched: 6/14/2013 2:50:01 PM
Time In Route: 6/14/2013 2:51:18 PM
Time On-Site: 6/14/2013 3:29:53 PM
Tech Complete: 6/14/2013 7:02:21 PM
Time Closed: 6/14/2013 7:02:21 PM

Events Performed/Completion Code

LKOT - CMP

Meter Information

Current ReadStatus

Old Meter: 7057 **Active**
New Meter:

Completion Notes

found this line was a old stub that went to nothing .contractor digging found it, retired at main by crew.whiteaker

Request Notes

HIT BLOWING LINE PER BRENDA W/ ATTICA 911..FIRE DEPT ONSITE..XST: CEDAR ST765-762-2449

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	6/14/2013 2:50:38 PM	Whiteaker, Pat
AsnAssignmentEnRoute_evt	6/14/2013 2:51:18 PM	Whiteaker, Pat
AsnAssignmentOnSite_evt	6/14/2013 3:29:53 PM	Whiteaker, Pat
OrdOrderComplete_evt	6/14/2013 7:02:21 PM	Whiteaker, Pat

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



INFORMATION REQUEST

State Form 54909 (R / 9-13)

INDIANA UTILITY REGULATORY COMMISSION - PIPELINE SAFETY DIVISION

RECEIVED
JUL 23 2013
INDIANA UTILITY
REGULATORY COMMISSION

Case Number: 4938

Date of Damage (month, day, year): 6/17/2013

Location of Damage:

Address (number and street): 1111 Division Street

City, State and ZIP Code: Attica, IN 47918

Nearest Intersection: Division & Cedar

Excavator Information:

Business Name: JD Brown Excavating LLC

Responsible Party Personal Name: Jodee Brown

Title (if any): Owner/Operator

Address (number and street): 4672 W 1200 S

City, State and ZIP Code: Covington, IN

Preferred Telephone Number (area code): 765-230-6130

Email Address: jdbrownexcavating@yahoo.com

Utility Information:

Utility Name: Vectren

Contact Person: _____

Title (if any): _____

Cause of Damage Information

Type of Equipment (select one):

Mini Excavator with 12" bucket

Type of Work Performed (select one):

Repair Sewer Line

Repair Cost: \$ _____

Did a leak result from damage: Yes No

Was there ignition: Yes No

Excavator Notify 911 due to leak: Yes No

Excavator Notify 811 upon damage: Yes No

Excavator Notify Utility upon Damage: Yes No - 911 Dispatch said they would contact Vectren.

Locate Information

Excavator Request Locate: Yes No

Indiana 811 Locate Ticket Number: 1308062166

Locate Marks Visible: Yes No

Locate Marks Correct: Yes No

Excavator "White Lined?": Yes No

Was Locate Provided within Two (2) Working Days: Yes No

Utility Employees On-site during Excavation: Yes No

Incident Information:

Fire Department Response: Yes No

Police Department Response: Yes No

Ambulance Response: Yes No

Additional Information / Comments

The Damage 811 Ticket # is 1306172505. The 4th bucket full of dirt moved hit an unmarked 1" gas line. Gas was spraying out into the air. I immediately called 911. They sent Police and Fire out to the area and stated they would notify Vectren. Police and Fire evacuated the nearby houses. They took our information down for their report. 3 hours after the line had been leaking gas 811 locator and Vectren showed up on site. 4 hours after hitting the line Vectren had the pipe plugged and began to dig up to disconnect this unmarked line. I waited a couple of days and received the clear from Vectren and 811 that I could dig again. 811 can verify my original request for a locate on the backside of the house ticket# 1306061473, then I called to change the request to an all property locate just to be sure ticket # 1306062166. There was no need to mark anything with white lines since it was the whole property and we were trying to locate the sewer line and were unable to tell which direction it ran. I also provided the Damage ticket # above. Please let me know if you need any additional information. I take pride in the fact that I do not dig under any circumstances without a locate being done first!

Printed Name: Jodee J. Brown

Signature: 

Date (month, day, year): 7/22/2013

**If submitting this form electronically, typing your name in the signature box will act as an electronic signature.*

Please return completed form to:**PipelineDamageCase@urc.in.gov****Or mail to:****Indiana Utility Regulatory Commission
Pipeline Safety Division - Case Number _____
101 West Washington Street, 1500E
Indianapolis, IN 46204****Or fax to:
317-233-2410**