



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: Lebanon Utilities

UPPAC Database Record ID: 5150

Report Date: 11/25/2013

Investigator: Mike Orr

Damage Date: 7/11/2013

Damage Address: 1001 Campbell Street, Lebanon, In, Lebanon, Boone

### The Parties

Excavator: **Lebanon Utilities**

Address: 401 S. Meridian Street, Lebanon, In 46052

Facility Owner: **Vectren**

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Type of Equipment: Trencher

Type of Work Performed: Electric

### Damage Impact

Product Release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$750

### Excavator Activities/Cause of Damage Information:

Excavator Request Locates: No

Indiana 811 Ticket Number: Original Start Date:

Locate Instructions:

Follow-Up Locate Instructions (if applicable):

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

**Findings:** Reported by Darlene Kulhanek; excavator's response to initial notice was received on 10/7/2013. The excavator failed to provide notice of excavation to the association (IN811).

**Conclusion:** There was a failure to provide notice of excavation.

**Violation: IC 8-1-26-16(g) Failure to provide notice of excavation.**



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

INITIAL DOCUMENTS -  
OPERATOR

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: Lebanon Utilities

Business address (number and street): 401 S Meridian Street

City, State, and ZIP code: Lebanon, IN 46052

Telephone number (area code): Unknown

Fax number (area code): Unknown

E-mail address: Unknown

**Excavation or Demolition Information**

Excavator type: Utility

Excavation or demolition equipment: Trencher

Type of work performed: Electric

**Date and Location of Damage**

Date of damage (month, day, year): 7-11-2013

County: Boone

City: Lebanon

Street address (number and street, city, state, and ZIP code):  
1001 Campbell Street, Lebanon, IN

Nearest intersection: Unknown

Right of way where damage occurred: Dedicated Public Utility Easement

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): 9.5

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 750

**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 commencing work? No

Enter Indiana 811 ticket number, if known: \_\_\_\_\_

Was the locate request completed within two working days? Unknown/Other

If locates were performed, were they done so by a contractor or pipeline employee? Data Not Collected

If a contractor locator, enter the company name, if known: \_\_\_\_\_

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? No

Type of markings used: Other

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? Yes

---

### Description of Cause

Select from the list the most accurate cause for the damage: --No notification made to the one-call center

---

### Additional Comments

3/4" saddle pulled from main with trencher. did not request locates.

Fds 0018068

Date of Damage 7/11/2013 **Facilities Damage Report**

Cost Center Danville

**Gas**

Vectren Claims Camera:

Time Occurred 1000  am /  pm

Time Found 1010  am /  pm

Task No: 163.0509 Capital / O & M (Circle One)

Latitude \_\_\_\_\_ Longitude: \_\_\_\_\_

40.055470 - 86.290330

VE04116

**DAMAGE SITE:**

Address 1001 Campbell St Lot # \_\_\_\_\_  
County Boone City Lebanon State IN Township Center

**FACILITY TYPE:**

- Distribution
- Service
- Transmission: (include supplemental report)
- Propane
- Storage

**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 checked="" type="checkbox"/> Main                     | 0.75 inch        | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Relief Station                      | 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 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 checked="" type="checkbox"/> Other <u>service tap</u> |                  |                                     |                          |                          |

*1.643*

**VISUAL OBSERVATION AT DAMAGE SITE:**

- Visual observation
- Locate Applicable
- Facilities Properly Marked
- Marking Methods:
  - None
  - Offset
  - Paint
  - Stakes
- Locate Marking Faded:
  - Wrong Address Requested
  - 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)

*7/11/13*

*JUL 17 2013*

*83.643*

**TYPE OF MATERIAL:**

- Cast Iron
- Plastic (HDPE)
- Plastic (MDPE)
- Steel Size
- Other \_\_\_\_\_

**DAMAGE TYPE:**

- Severed
- Not Cut
- Punctured

**PRESSURE:**

- 25 PSIG
- 40 PSIG
- 50 PSIG
- 55 PSIG
- 60 PSIG
- 6 WC (.2163)
- 7 WC (.252)
- Other \_\_\_\_\_

*3" x 3/4" SERV. TAP*

**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

**FEED TYPE:**

- One-Way Feed
- Two-Way Feed

Number of Customers

Affected; 1

Total Hours Service 9.5 hrs

Was Off: \_\_\_\_\_

SERVICE ORDER #: 5726708

**TYPE OF CONSTRUCTION:**

**DAMAGED BY:**

- Company Crew
- Contractor
- County
- Developer
- Farmer
- Municipality
- Property Owner/ Tenant
- Railroad
- State
- Unknown
- Utility
- Vehicle Accident
- Other \_\_\_\_\_

- Agriculture
- Building Construction
- Building Demolition
- Cable TV
- Curbs / Sidewalk
- Drainage
- Driveway
- Electric
- Engineering / Surveying
- Fencing
- Grading
- Irrigation
- Landscaping
- Milling
- Natural Gas
- Pole
- Railroad Maintenance
- Sewer
- Telecommunications
- Water
- Other \_\_\_\_\_

**WORKING FOR:**

- City
- County
- Developer
- State
- Property Owner
- Utility
- Other: \_\_\_\_\_

- Were Facility Marks Visible  Yes  No
- Was Area White Lined  Yes  No
- Positive Response  Yes  No
- Tolerance Zone Violated  Yes  No
- Part of Project  Yes  No

Company Representative On-Site  Yes  No

Observation by: \_\_\_\_\_

Name of Locator: \_\_\_\_\_

**LOCATING ORGANIZATION:**

- Contract Locator
- Unknown / Other
- Utility Owner
- Copy of Mark Out Request Provided Within 2 Working Days
- Yes  No  N/S

**NOTIFICATIONS AND OTHER DETAILS OF LOCATE**

Locate Ticket: NONE  
Date: \_\_\_\_\_ Time: \_\_\_\_\_ am / pm

- Regular Request
- Emergency Request

Contact Name: \_\_\_\_\_  
Time Called: \_\_\_\_\_ am / pm  
Time Locator Arrived at the Site: \_\_\_\_\_ am / pm

- Locate Company Notified  Yes  No  N/S
- Liquid Pipeline Company Notified of Locate Near Critical Facilities
- 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 \_\_\_\_\_

**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: Miller Piping Co  
 # of Regular Hours: 27 hrs. (3 man crew 9 hrs LWB)  
 # of Overtime Hours: \_\_\_\_\_  
 # of Regular Hours: \_\_\_\_\_  
 Crew Type: Service crew (BSC1)

**MATERIALS OR ROAD WORK:**

- Meter was replaced \_\_\_\_\_ (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 - Easement
- Public - Interstate Highway
- Public - Other
- Public - State Highway
- Public - City Street
- Unknown

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

INVOICE:  Yes  No  N/S

**DAMAGING PARTY:**  
 Name: Lebanon Utilities  
 Address: 401 S. Meridian St.  
 City/ State/ Zip: Lebanon Indiana 46052  
 Phone: \_\_\_\_\_  
Steel Smith 7-11-2013  
 Prepared / Investigated By: Date:

**PARTY TO INVOICE:**  
 Name: Same  
 Address: \_\_\_\_\_  
 City/ State/ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
Alexander 7/12/13  
 Reviewed by Supervisor: Date:

317-997-3996

Lebanon Utilities Tried To Repair Damaged Street  
 Light Wiring And Didnt Can For Locates  
 Used Locate marks for sewer job someone  
 Else had called for - utility workers  
 stuck A stick in the hole on service  
 Tap To stop the flow of gas  
 so it blew a little off air on

Wednesday, July 24, 2013

# Service Order Status

**Enter Service Order Number:**

5726708



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

**Banner Instance:**  CS03PROD  CS01PROD  CS02PROD

**Order Number:** N5726708

**Order Type:** LEAK

**Order Status:** Completed

**Customer:** 600174378 - REEVES JACK L

**Prem:** 5507788 - 1001 CAMPBELL ST

**Technician:** 2822 - Steelsmith, Greg

**Order Dates and Times**

**Need Date:** 7/11/2013 11:57:00 AM  
**Time Created:** 7/11/2013 10:10:00 AM  
**Time Dispatched:** 7/11/2013 11:35:13 AM  
**Time In Route:** 7/11/2013 11:37:10 AM  
**Time On-Site:** 7/11/2013 11:37:14 AM  
**Tech Complete:** 7/11/2013 11:36:00 AM  
**Time Closed:** 7/11/2013 11:36:00 AM

**Events Performed/Completion Code**

LKOT - CMP

**Meter Information**

**Current Read Status**

**Old Meter:** 6110 Inactive  
**New Meter:**

**Completion Notes**

damaged service crew onsite/to repair///2822

**Request Notes**

07/11/13 HIT LINE BLOWING...CORRECTED ADDRESS PER TECH ON SITE...SEE S.O. 5726555 & 5726558...ASSIGN TO GREG STEELSMITH

**MDSI Event Dates and Times**

Event	Date/Time	User
AsnAssignmentEnRoute_evt	7/11/2013 11:37:10 AM	Steelsmith, Greg
AsnAssignmentManualAck_evt	7/11/2013 11:37:13 AM	Steelsmith, Greg
AsnAssignmentOnSite_evt	7/11/2013 11:37:14 AM	Steelsmith, Greg
OrdOrderComplete_evt	7/11/2013 12:37:20 PM	Steelsmith, Greg

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

Wednesday, July 24, 2013

# Service Order Status

**Enter Service Order Number:**

5726555



Clear Filter

Refresh Data

**Banner Instance:**  CS03PROD  CS01PROD  CS02PROD

**Order Number:** N5726555

**Order Type:** LEAK

**Order Status:** Completed

**Customer:** 009999999 - OWNER UNKNOWN

**Prem:** 5751116 - CAMPBELL ST & W LAFAYETTE ST

**Technician:** 2822 - Steelsmith, Greg

**Order Dates and Times**

**Need Date:** 7/11/2013 10:08:00 AM  
**Time Created:** 7/11/2013 10:07:13 AM  
**Time Dispatched:** 7/11/2013 10:07:13 AM  
**Time In Route:** 7/11/2013 11:35:49 AM  
**Time On-Site:** 7/11/2013 11:35:51 AM  
**Tech Complete:** 7/11/2013 11:36:00 AM  
**Time Closed:** 7/11/2013 11:36:54 AM

**Events Performed/Completion Code**

LKNS - CMP

**Meter Information**

**Current ReadStatus**

**Old Meter:**  
**New Meter:**

**Completion Notes**

called disp and gave correct address

**Request Notes**

PER MIKE WITH LEBANON UTILITY THEY HAVE HIT A GAS LINE IN A MOBILEHOME PARK...THIS IS THE HOOSIER MH P...POC GARY 765-481-9477

**MDSI Event Dates and Times**

Event	Date/Time	User
AsnAssignmentEnRoute_evt	7/11/2013 10:07:50 AM	Steelsmith, Greg
AsnAssignmentManualAck_evt	7/11/2013 10:07:54 AM	Steelsmith, Greg
AsnAssignmentOnSite_evt	7/11/2013 10:09:53 AM	Steelsmith, Greg
OrdOrderSuspend_evt	7/11/2013 10:23:13 AM	Steelsmith, Greg
AsnAssignmentEnRoute_evt	7/11/2013 11:35:49 AM	Steelsmith, Greg
AsnAssignmentOnSite_evt	7/11/2013 11:35:51 AM	Steelsmith, Greg
OrdOrderComplete_evt	7/11/2013 11:36:54 AM	Steelsmith, Greg

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

# Service Order Status

**Enter Service Order Number:**

5726558



Clear Form

Refresh Data

**Banner Instance:**  CS03PROD  CS01PROD  CS02PROD

**Order Number:** N5726558

**Order Type:** LEAK

**Order Status:** Completed

**Customer:** 621266729 - REEVES VICKI L

**Prem:** 5452198 - 921 CAMPBELL ST

**Technician:** 2822 - Steelsmith, Greg

**Order Dates and Times**

**Need Date:** 7/11/2013 10:12:00 AM  
**Time Created:** 7/11/2013 10:10:28 AM  
**Time Dispatched:** 7/11/2013 10:10:28 AM  
**Time In Route:** 7/11/2013 10:23:10 AM  
**Time On-Site:** 7/11/2013 10:23:15 AM  
**Tech Complete:** 7/11/2013 11:35:38 AM  
**Time Closed:** 7/11/2013 11:35:38 AM

**Events Performed/Completion Code**

LKOT - CMP

**Meter Information**

**Current ReadStatus**

**Old Meter:** 0000 **Active**  
**New Meter:**

**Completion Notes**

wrong address given 1001 campbell correct address to complete notes on that order  
 r//2822

**Request Notes**

07/11/13 CUT LINE BLOWING PER ART W / BOONE CO 911...TX 765-482-1412... XST IS YATES...UNITS ON SITE  
 ...

**MDSI Event Dates and Times**

Event	Date/Time	User
AsnAssignmentEnRoute_evt	7/11/2013 10:23:10 AM	Steelsmith, Greg
AsnAssignmentManualAck_evt	7/11/2013 10:23:13 AM	Steelsmith, Greg
AsnAssignmentOnSite_evt	7/11/2013 10:23:15 AM	Steelsmith, Greg
OrdOrderComplete_evt	7/11/2013 11:35:38 AM	Steelsmith, Greg

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 / 3-13)

INDIANA UTILITY REGULATORY COMMISSION – PIPELINE SAFETY DIVISION

Case Number: 5150

Date of Damage (month, day, year): 7/11/2013

---

### Location of Damage:

Address (number and street): 1001 Campbell Street

City, State and ZIP Code: Lebanon, Indiana 46052

Nearest Intersection: Bibler Street

---

### Excavator Information:

Business Name: Lebanon Utilities

Responsible Party Personal Name: Michael E. Martin

Title (if any): General Manager

Address (number and street): 401 South Meridian Street

City, State and ZIP Code: Lebanon, Indiana 46052

Preferred Telephone Number (area code): 765-482-5100

Email Address: mmartin@lebanon-utilities.com

---

### Utility Information:

Utility Name: Lebanon Utilities

Contact Person: Michael Adams

Title (if any): madams@lebanon-utilities.com

**Cause of Damage Information**

Type of Equipment (*select one*):

Backhoe/Trackhoe

Type of Work Performed (*select one*):

Electric

Repair Cost: \$ \$4,170.99 fro Vectron to repair and relight customers

- 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

---

**Locate Information**

- Excavator Request Locate:  Yes  No
- Indiana 811 Locate Ticket Number: \_\_\_\_\_
- 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 Electric Department had a report of a Street Light not operating and dispatched a Serviceman to investigate, when reporting to the location he noticed locates on site due to work another city utility had scheduled. The Serviceman and Foreman discussed the light repair and took it upon themselves to repair the light without a locate call. While mechanically digging with a backhoe the Serviceman scrapped the top of a gas line tee breaking it off and causing a gas leak. As a result of this incident we have investigated the facts leading to and surrounding the event we had a meeting collectively with our Serviceman, Foreman, Senior Utility Management and Vectren Gas representatives regarding the seriousness of this matter and have a clear understanding of the locate and dig laws. We also have a member of our utility who sits on the IUPPS board and we take this very seriously. We are currently planning a training session by the UPPS organization with our utility staff regarding the process and procedures and to further impress upon them the importance of the locate and dig laws.

Printed Name: Michael Adams

Signature: 

Date (month, day, year): 10/03/2013

*\*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](mailto: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**