



## Pipeline Safety Division Investigation Report

### Investigation regarding: **Rt Moore**

UPPAC Database Record ID: 2991

Investigator: Howard Friend

Report Date: 8/10/2012

Damage Date: 5/23/2012 1:21:04 PM

Damage Address: 15687 Viking Commander Way

City: Westfield

County: Hamilton

### The Parties

Excavator: **Rt Moore**

Contact: Megan Williams

Address: 6340 Lapaz Trail, Indianapolis, In 46268

Telephone:

Facility Owner: Vectren

Contact: Darlene Kulhanek

Address: 1 N Main Street, Evansville, IN 47702

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

**Investigation regarding: Rt Moore**

UPPAC Database Record ID: 2991

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$571.79999999999995

**Excavator Activities/Cause of damage information:**

Excavator request locates: Yes Indiana 811 ticket Number: 1205143644

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Water

**Synopsis:** A natural gas line was damaged during excavation for a water line.

**Findings:** Reported by Indiana 811; excavator did not respond to initial notice mailed 6/18/2012. Excavator had a valid locate request and the locate contractor provided locate markings.

**Conclusion:** There was a failure to maintain the locate marks by the excavator.

**Violation: IC 8-1-26-18(h): Knowingly moves, removes, damages or otherwise alters a facility marking.**

**Rt Moore** currently has 2 other reports of damages in the record, between 9/7/2011 11:00:58 AM and 5/23/2012 1:21:04 PM.



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

July 5, 2012

Ms. Darlene Kulhanek  
Vectren  
1 N Main Street  
Evansville, IN 47702

Subject: Investigation Request for Information

Date of Event: 5/23/2012

Event Location: 15687 Viking Commander Way, Westfield

Facility Owner: Vectren

Excavator: Rt Moore

Other Party: N/A

Pipeline Division Case No. 2991

Dear Ms. Kulhanek:

Pursuant to Indiana Code 8-1-26, the *Indiana Damage to Underground Facilities Act*, the Pipeline Safety Division of the Indiana Utility Regulatory Commission ("Pipeline Division") is required to investigate reported incidents of alleged statutory violations involving underground pipeline safety. The purpose of this statute is to promote excavation and pipeline safety and to reduce the imminent danger to life, health, property, or loss of service associated with unsafe digging practices. Please note that the investigation does not entail determining criminal liability or a civil determination of fault or damages; however, it does determine whether any statutory violations were committed regarding public safety.

The Pipeline Division received information regarding potential statutory violations regarding the date and location referenced above. You were identified as a person or entity that might have information that would assist the Pipeline Division in its investigation. Therefore, we have contacted you in order to receive the full account of information in order to make a fair determination related to the circumstances of this incident.

We have asked all involved parties, entities and witnesses to provide *written* information within *30 days* in order to meet legal deadlines to conclude our investigation. **Please consider this letter as a formal request to receive any and all information and evidence (including a narrative, documentation, maps, photographs or any other written information) you can access regarding anything you may know about the incident referenced above.**



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: 7-13-2012

### 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: RT Moore

Business address (*number and street*): 6340 Lapaz Trail

City, State, and ZIP code: Indianapolis, IN 46268

Telephone number (*area code*): 317-291-1052

Fax number (*area code*): 317-291-9949

E-mail address: Unknown

### Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Water

---

**Date and Location of Damage**

Date of damage (*month, day, year*): 5-23-2012

County: Hamilton

City: Westfield

Street address (*number and street, city, state, and ZIP code*):  
15687 Viking Commander Way, Westfield

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*): 1

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 571.8

---

**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? Yes

Enter Indiana 811 ticket number, if known: 1205143644

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? Unknown/Other

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? 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: --Failure to maintain the marks

---

### **Additional Comments**

1" plastic service severed by hoe. only marks remaining near riser and @ main. Failure to maintain marks and hand expose.

FDS 16270

Task No: 103,0510 Capital / Q & M (circle one)  
Date of Damage 5 / 23 / 12  
Cost Center # \_\_\_\_\_  
Time Occurred 11:20 am / pm  
Time Found 1:40 am / pm  
Latitude 40 05231 Longitude: -86.13571

Vectren Claim Number: \_\_\_\_\_  
Police Report / MO #: \_\_\_\_\_

Vectren Claims Camera:

# FACILITIES DAMAGE REPORT

## GAS

**VE01364**  
Form 3112

**DAMAGE SITE:**  
Address 15687 VIKING COMMANDER WAY Lot # 61  
County HAMILTON City WESTFIELD State IN Township WASHINGTON

**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 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  
 Offset  Paint  Stakes  Whiskers  
 Locate Marking Faded:  Yes  No  N/S  
 Wrong Address Requested  Yes  No  N/S

**TYPE OF MATERIAL:**  Cast Iron  Plastic (HDPE)  Plastic (MDPE)  Steel  
**DAMAGE TYPE:**  Severed  Not Cut  Severed  
 Size 1.00 x 1.00  
**PRESSURE:**  25 PSIG  40 PSIG  50 PSIG  55 PSIG  60 PSIG  
 6 WC (.2163)  7 WC (252)  Other \_\_\_\_\_

**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)

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

**PROTECTION IN PLACE:**  
 Building  Fence  None  
 Post  Rail  Vault  N/A  
 Other \_\_\_\_\_

**DURATION OF ESCAPING GAS:**  
 Minutes: 30

**LEAK REPORT NUMBER:** 13660

EFV Activated  Yes  No  N/S

Observation by (ID#): \_\_\_\_\_

**FEED TYPE:**  
 One-Way Feed  
 Two-Way Feed

Number of Customers Affected: 1  
 Total Hours Service Was Off: 1

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

**LOCATING ORGANIZATION:**  
 Contract Locator  
 Unknown / Other  
 Utility Owner

**SERVICE ORDER NUMBER:** N5255234

**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 WATER & SEWER

**NOTIFICATIONS AND OTHER DETAILS OF LOCATE:**

Locate Ticket: \_\_\_\_\_  
 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

**WORKING FOR:**  
 City  County  Developer  
 State  Property Owner  
 Utility

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.)

**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

- 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

**DAMAGING PARTY:**  
 Name: R.T. MOORE  
 Address: \_\_\_\_\_  
 City/ State/ Zip: IN  
 Phone: (317) 291-1052  
R. KERRING 5/23/12  
 Prepared / Investigated By: Date:

**PARTY TO INVOICE:**  
 Name: SAME  
 Address: \_\_\_\_\_  
 City/ State/ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
[Signature] 5-24-12  
 Reviewed by Field Supervisor: Date:

LOCATE FADED COULD ONLY SEE 6" OF PAINT @ RISER & 6" OF PAINT ON MAIN  
 ALL OTHER LOCATE GONE, R.T. MOORE SHOULD PAY.

## NORMAL NOTICE REMARK

Ticket : 1205143644 Date: 05/14/2012 Time: 15:29 Oper: DBROOKING Chan:008

State: IN Cnty: HAMILTON Twp: WASHINGTON  
Cityname: WESTFIELD Inside: N Near: Y  
Subdivision: VIKING MEADOWS Lot: 61Address : 15687  
Street : VIKING COMMANDER WAY  
Cross 1 : E 156TH ST Within 1/4 mile: Y  
Location: LOCATE ENTIRE PROPERTY--PLEASE PAINT AND FLAG--THANK YOU  
:  
Grids : 4000A8608C 4001D8608C 4000A8608B 4001D8608BWork type : INSTALL WATER AND SEWER LINES  
Done for : PULTE HOMES  
Start date: 05/16/2012 Time: 15:45 Hours notice: 48/048 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 1 DAY Depth: 8 FEETCompany : RT MOORE Type: CONT  
Co addr : 6340 LAPAZ TRAIL  
City : INDIANAPOLIS State: IN Zip: 46268  
Caller : MEGAN WILLIAMS Phone: (317)291-1052  
Contact : JOHN BURKHART--CELL Phone:  
BestTime:  
Mobile : (317)402-9450  
Fax : (317)291-9949  
Email : MWILLIAMS@RTMOORE.COMRemarks : All tickets are taken and processed on Eastern Daylight Time  
ALL UTILITIES PLEASE REMARK DUE TO CONSTRUCTION--PREVIOUS TICKET  
1205070877--THANK YOU  
Will you be white-lining the dig site area? NO  
:Submitted date: 05/14/2012 Time: 15:29  
Members: ID0002 ID0103 ID0202 ID0660 ID8000 ID9999 SBCIN SM

Member Name	Facility Types
AT&T - DISTRIBUTION	COMMUNICATIONS
BRIGHT HOUSE NETWORKS INDIANAPOLIS	CABLE TV
COMCAST NORTHEAST (NOBLESVILLE)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY	ELECTRIC
FRONTIER	TELEPHONE
VECTREN - NOBLESVILLE #1	GAS
WESTFIELD UTILITIES	SEWER & WATER

[View Map](#)[Close Map](#)

DAMAGE DAMAGE

Ticket : 1205232746 Date: 05/23/2012 Time: 13:19 Oper: RJOHNSON Chan:002

State: IN Cnty: HAMILTON Twp: WASHINGTON

Cityname: WESTFIELD Inside: N Near: Y

Subdivision: VIKING MEADOWS Lot: 61

Address : 15687

Street : VIKING COMMANDER WAY

Cross 1 : E 156TH ST Within 1/4 mile: Y

Location: LOCATE ENTIRE PROPERTY--PLEASE PAINT AND FLAG--THANK YOU

:

Grids : 4000A8608C 4001D8608C 4000A8608B 4001D8608B

Work type : INSTALL WATER AND SEWER LINES

Done for : PULTE HOMES

Start date: 05/23/2012 Time: 13:19 Hours notice: 0/000 Priority: EMER

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

Duration : 1 DAY Depth: 8 FEET

Company : RT MOORE Type: CONT

Co addr : 6340 LAPAZ TRAIL

City : INDIANAPOLIS State: IN Zip: 46268

Caller : MEGAN WILLIAMS Phone: (317)291-1052

Contact : JOHN BURKHART--CELL Phone:

BestTime:

Mobile : (317)402-9450

Fax : (317)291-9949

Email : MWILLIAMS@RTMOORE.COM

Remarks : All tickets are taken and processed on Eastern Daylight Time  
 GAS LINE HAS BEEN DAMAGED--VECTREN IS THE UTILITY COMPANY INVOLVED--GAS LINE IS  
 NOT BLOWING--LINE IS DAMAGED IN THE FRONT OF THE PROPERTY--UNKNOWN DESCRIPTION  
 OF THE DAMAGED LINE--HAVE CALLED 911--CREW IS ON SITE--HAVE NOT CALLED VECTREN  
 TO REPORT THE DAMAGED LINE--PREVIOUS TICKET 1205143644

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

:

Submitted date: 05/23/2012 Time: 13:19

Members: ID0002 ID0103 ID0202 ID0660 ID8000 ID9999 SBCIN SM

**Member Name****Facility Types**

AT&T - DISTRIBUTION	COMMUNICATIONS
BRIGHT HOUSE NETWORKS INDIANAPOLIS	CABLE TV
COMCAST NORTHEAST (NOBLESVILLE)	CABLE TV
DUKE ENERGY / FORMERLY CINERGY	ELECTRIC
FRONTIER	TELEPHONE
VECTREN - NOBLESVILLE #1	GAS
WESTFIELD UTILITIES	SEWER & WATER

[View Map](#)[Close Map](#)

# Service Order Status

Thursday, May 31, 2012

**Enter Service Order Number:**

5255234



**Banner Instance:**  CS03PROD  CS01PROD  CS02PROD

**Order Number:** N5255234

**Order Type:** LEAK

**Order Status:** Completed

**Customer:** 600537958 - PULTE HOMES OF INDIANA  
**Prem:** 5707859 - 15687 VIKING COMMANDER WAY

**Technician:** 2563 - Hottinger, Randy

**Order Dates and Times**

**Need Date:** 5/23/2012 1:37:00 PM  
**Time Created:** 5/23/2012 1:31:40 PM  
**Time Dispatched:** 5/23/2012 1:31:40 PM  
**Time In Route:** 5/23/2012 1:32:47 PM  
**Time On-Site:** 5/23/2012 1:39:41 PM  
**Tech Complete:** 5/23/2012 3:07:26 PM  
**Time Closed:** 5/23/2012 3:07:26 PM

**Events Performed/Completion Code**

LKOT - CMP

**Meter Information**

**Current ReadStatus**  
**Old Meter:** 0 Active  
**New Meter:**

**Completion Notes**

cut ser line ,called for crew to fix,--- hit by rt-moore-- ph 317-291-1052 truck #31

**Request Notes**

HIT LINE IN FRONT OF PROP PER MEGAN WITH R T MOORE EXCAVATING...HASCRIPIED OFF... CREW ONSITE...LINE S LOCATED....XST 156TH....HAMILTON CTY...PH 317-291-9913....THANKS

**MDSI Event Dates and Times**

Event	Date/Time	User
AsnAssignmentManualAck_evt	5/23/2012 1:32:08 PM	Hottinger, Randy
AsnAssignmentEnRoute_evt	5/23/2012 1:32:47 PM	Hottinger, Randy
AsnAssignmentOnSite_evt	5/23/2012 1:39:41 PM	Hottinger, Randy
OrdOrderComplete_evt	5/23/2012 3:07:26 PM	Hottinger, Randy

NOTE:The Reporting database replicates in near real-time; it has been approximately 1 minute(s) since the last transaction replicated.