



Pipeline Safety Division Investigation Report

Investigation regarding: **Randy Wolf**

UPPAC Database Record ID: 3098

Investigator: Jay Scherer

Report Date: 8/27/2012

Damage Date: 5/30/2012

Damage Address: 9522 Wolf River Pl

City: Fort Wayne

County: Allen

The Parties

Excavator: **Randy Wolf**

Contact:

Address: 14017 Raynham Rd, Fort Wayne, In 46814

Telephone: 260 625 4645

Facility Owner: NIPSCO

Contact: Kit Earle

Address: 101 West Ohio Street, Indianapolis, IN 46204

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Investigation regarding: Randy Wolf

UPPAC Database Record ID: 3098

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

Excavator Activities/Cause of damage information:

Excavator request locates: Yes Indiana 811 ticket Number: 1205223430

Type of Equipment: Trencher

Type of work performed: Natural Gas

Synopsis: Per the NIPSCo Operator Response, the excavator was installing a customer owned natural gas service line and damaged a NIPSCo owned service line.

Findings: Reported by Carrie Ludwig (NIPSCo); excavator did not respond to initial notice mailed July 13, 2012. The gas operator reports the excavator was digging outside the scope of the requested locate when the damage occurred..

Conclusion: Excavator failed to maintain the required clearance with mechanized equipment.

Violation: IC 8-1-26-20(b): Failure to plan excavation to avoid damage or interference with underground facilities; Failure to maintain two (2) feet clearance with mechanized equipment.



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Jun 6, 2012

Who is submitting this information?

Name of person providing this information: Carrie Ludwig

Business address (*number and street*): 3511 East 15th Ave

City, State, and ZIP code: Gary, IN 46403

Telephone number (*area code*): 219 962 0422

Fax number (*area code*): 219 962 0404

E-mail address: cludwig@nisource.com

Excavator Information, if known

Full name: Randy Wolf

Business address (*number and street*): 14017 Raynham Rd

City, State, and ZIP code: Fort Wayne, IN 46814

Telephone number (*area code*): 260 625 4645

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Trencher

Type of work performed: Unknown/Other

Date and Location of Damage

Date of damage (*month, day, year*): May 30, 2012

County: Allen

City: Fort Wayne

Street address (*number and street, city, state, and ZIP code*):
9522 Wolf River Pl Fort Wayne IN

Nearest intersection: Turf Ln

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 \$

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? 18

Notification, Locating, Marking

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1205223430

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: _____

Was site marked by "White Lining"? Yes

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

Were maps used to complete the locate request? Yes

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? No

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: --Wrong information provided

Additional Comments

Excavator dug outside scope of ticket

Emergency ticket #: 1205300819



101 West Ohio Street, Suite 1707
Indianapolis, IN 46204

August 13, 2012

Via Electronic Transmission – PipelineDamageCase@urc.in.gov

Pipeline Safety Division – Case No. 3098
Indiana Utility Regulatory Commission
101 West Washington Street, Suite 1500 East
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3098

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: 5/30/2012

Event Location: 9522 Wolf River Pl, Fort Wayne

Facility Owner: Northern Indiana Public Service Company

Excavator: Randy Wolf

Other Party: N/A

Pipeline Division Case No. 3098

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

IURC INFORMATION REQUEST	
Pipeline Safety Division Case No. 3098	
Date of Event	5/30/2012
Event Location	9522 Wolf River Pl, Fort Wayne
Facility Owner	Northern Indiana Public Service Company
Excavator	Randy Wolf
Date of IURC Information Request	7/13/2012
THE PARTIES	
EXCAVATOR:	
BUSINESS NAME	Randy Wolf
RESPONSIBLE PARTY PERSONAL NAME	Randy Rolf
TITLE (IF ANY)	
ADDRESS	14017 Raynham Road
CITY/ STATE/ZIP	Fort Wayne, IN 46814
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:	
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	LSELKING@NISOURCE.COM
LOCATOR SERVICE INFORMATION	
BUSINESS NAME	USIC Locating Service
RESPONSIBLE PARTY PERSONAL NAME	
TITLE (IF ANY)	
ADDRESS	9045 North River Road, Suite 300
CITY/ STATE/ZIP	Indianapolis, IN 46240
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	
TITLE (IF ANY)	

ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
UTILITY LINE IMPACT	
LOCATION OF DAMAGE	
ADDRESS	9522 Wolf River Place
CITY/STATE/ZIP	Fort Wayne, IN
NEAREST INTERSECTION	
PRODUCT TYPE (Select One)	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
FACILITY TYPE (Select One)	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	5/8 plastic
PRESSURE (PSIG/INCHES)	
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	
REPAIR COST (IF KNOWN) (\$)	
CAUSE OF DAMAGE INFORMATION:	
TYPE OF EQUIPMENT (Select One)	
Auger	
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trancher	X
Vacuum Equipment	
Unknown/Other	
TYPE OF WORK PERFORMED (Select One)	
Agriculture	
Cable TV	
Curb/Sidewalk	
Bldg. Construction	
Bldg. Demolition	
Drainage	
Driveway	
Electric	
Engineering/Surveying	
Fencing	
Grading	
Irrigation	
Landscaping	
Liquid Pipeline	
Milling	
Natural Gas	X – Installation of customer owned line
Pole	
Public Transit Authority	
Railroad Maintenance	
Road Work	
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)	Yes
IGNITION AND/OR FIRE (YES/NO)	No
EXCAVATOR NOTIFY 811 (YES/NO)	No
LOCATE INFORMATION:	
EXCAVATOR REQUEST LOCATE (YES/NO)	Yes

INDIANA 811 LOCATE TICKET NUMBER	1205223430
LOCATE MARKS VISIBLE (YES/NO)	No – not in area of work. NIPSCO line struck within 2' of riser. May have been disturbed.
LOCATE MARKS CORRECT (YES/NO)	Yes
EXCAVATOR "WHITE LINED" (YES/NO)	Yes
MAPS USED TO MARK FACILITIES (YES/NO)	Yes
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	No
INCIDENT IMPACT INFORMATION	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FACILITIES	0
FIRE DEPARTMENT RESPONSE (YES/NO)	
FPOLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
ADDITIONAL INFORMATION/COMMENTS	
Excavator dug outside scope of ticket.	

Fact Based Investigation Report

01820120530002
Northern IN
5/30/2012 9:00:00 AM
5/30/2012 9:24:36 AM
SHERRY Facility Owner
9522 WOLF RIVER PL
FT WAYNE
ST: IN ZIP:

NOTIFICATION ID:
DISTRICT:
DAMAGE DATE:
NOTIFICATION DATE:
NOTIFIED BY:
DAMAGE ADDRESS:
CITY:

NIPSCO

DAMAGED CUSTOMER:

05/30/2012
09:30:00
09:50:00

INVESTIGATION DATE:
FROM:
TO:

Homeowner
TRENCHING

EXCAVATOR INVOLVED:
TYPE OF EXCAVATION:

1205223430

ORIG. LOCATE REQ.:
START DATE/TIME:
TYPE OF TICKET:
LOCATE REQ. INFO N/A:

1205300819

DIG UP/DAMAGE REQ.:
START DATE/TIME:

RON STEPHENS
5/30/2012 9:40:00 AM
Digital
N/A

PICTURES TAKEN BY:
DATE/TIME:
PHOTOGRAPHY TYPE:
FRAME #:

123132

INVESTIGATOR EMP#:
INVESTIGATOR NAME:

RON STEPHENS
BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?
No

Fact Based Investigation Customer Information

01820120530002

NIPSCO

(optional)

NOTIFICATION ID:

SELECT A CUSTOMER:

CUSTOMER #:

LOWPROF

Gas Service

Stephens Ron - 123132

FACILITY DESCRIPTION:

FACILITY ID:

LOCATOR NAME & EMP #:

LOCATOR NOT KNOWN:

CHECK ALL THAT APPLY TO INVESTIGATION:

Contractor Dug Outside Marking Instructions

Other:

CHECK ALL THAT APPLY TO METHOD OF INVESTIGATION (at least one must be checked):

Visual, Facility Exposed At Time Of Investigation,
Investigation Results Verified By Utility Representative

INVESTIGATOR STATEMENT/CAUSAL FACTORS:

THE LOCATE CALLED FOR BACK YARD ONLY GAS WAS NOT IN BACK YARD CONTRACTOR STARTED TRENCHING IN FRONT OF GAS METER AGAINST THE HOUSE.

NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

N/A

NAMES OF EXCAVATOR'S REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:

RANDY ROLF SAID HE THOUGHT CALLED IN ENTIRE YARD NOT JUST THE BACK

LIST ANY OTHER INDIVIDUALS ON SITE:

N/A

WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL?

Yes

WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA?

Yes

WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?

Yes

EXTENT OF FACILITY DAMAGE

CUT SERVICE

REPLACEMENT FOOTAGE

3

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?

Yes

WHAT CONTRACTOR EQUIPMENT WAS USED?

N/A

IS THE FACILITY SHOWN ON THE UTILITY RECORDS?

No

IF YES, PLEASE LIST RECORD #(S)

N/A

NIPSCO 01105 IUPPSa 05/22/2012 16:04:50 1205223430-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1205223430 Date: 05/22/2012 Time: 15:57 Oper: LWORTON Chan:022

State: IN Cnty: ALLEN Twp: ABOITE
Cityname: FORT WAYNE Inside: Y Near: N
Subdivision: HAVERHILL

Address : 9522
Street : WOLF RIVER PL
Cross 1 : TURF LN Within 1/4 mile: Y
Location: LOCATE THE BACK YARD

:
Grids : 4102B8515A 4102B8516D
Boundary: n 41.045235 s 41.044029 w -85.270058 e -85.266602

Work type : INSTALLING A GAS LINE FOR A FIREPLACE
Done for : DERRICK ROBERTSON
Start date: 05/24/2012 Time: 16:15 Hours notice: 48/48 Priority: NORM
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N
Duration : 1 DAY Depth: 2 FEET

Company : RANDY ROLF Type: HOME
Co addr : 14017 RAYNHAM RD
City : FORT WAYNE State: IN Zip: 46814
Caller : DERRICK ROBERTSON Phone: (260)625-4645
Contact : DERRICK ROBERTSON CELL Phone:
BestTime:
Mobile : (260)249-8511

Remarks : All tickets are taken and processed on Eastern Daylight Time
Will you be white-lining the dig site area? YES
:

Submitted date: 05/22/2012 Time: 15:57
Members: AQUA CC FW ID5792 ID6111 ID8000 NIPSCO SM

3098

No Damage Ticket

IURC Damage Information Request

Complete at damage site. Please scan and email completed form to cludwig@nisource.com within 10 days of damage.

Date 5-30-12

City FORTWAYNE IN.

Address 9522 WOLFRIVER PL

Contractor RANDY ROLF HEATING + COOLING

Type of Equipment TRENCHER

Work Type FUEL LINE

Locate # 120 522 3430

Locates yes/ no

Accurate Locates yes/ no

Paint, flags or both

Release of Gas yes/ no

Detailed description of Event including equipment used WHILE TRENCHING NEW FUEL LINE
IN FOR GAS FIREPLACE, CREW HIT GAS SERVICE TO HOUSE
Depth of line 18"

Were locates performed in 2 working days yes/ no

Service or main and size of line 5/8 PL

Pressure (PSI) 40-50

Outage yes/ no

How many customers lost 1

Time to restore service 2

Evacuation yes/ no

How many evacuated NONE

Ignition of product yes/ no

Damage or leak J.O. #564379

CUT SERVICE



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Jun 6, 2012

Who is submitting this information?

Name of person providing this information: Carrie Ludwig

Business address (*number and street*): 3511 East 15th Ave

City, State, and ZIP code: Gary, IN 46403

Telephone number (*area code*): 219 962 0422

Fax number (*area code*): 219 962 0404

E-mail address: cludwig@nisource.com

Excavator Information, if known

Full name: Randy Wolf

Business address (*number and street*): 14017 Raynham Rd

City, State, and ZIP code: Fort Wayne, IN 46814

Telephone number (*area code*): 260 625 4645

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Trencher

Type of work performed: Unknown/Other

Date and Location of DamageDate of damage (*month, day, year*): May 30, 2012County: AllenCity: Fort WayneStreet address (*number and street, city, state, and ZIP code*):
9522 Wolf River Pl Fort Wayne INNearest intersection: Turf LnRight 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*): 2Enter number of injuries, if applicable and known: 0Enter number of fatalities, if applicable and known: 0Property damage, Estimate \$

Affected Facility InformationWhat type of pipeline was damaged? Natural GasWhat was the affected facility? Service/DropWhat was the depth of the facility, in inches? 18

Notification, Locating, MarkingDid excavator request locates prior to commencing work? YesEnter Indiana 811 ticket number, if known: 1205223430

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: _____

Was site marked by "White Lining"? Yes

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

Were maps used to complete the locate request? Yes

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? No

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: Other

Additional Comments

Excavator dug outside scope of ticket
Emergency ticket #: 1205300819