



Pipeline Safety Division Investigation Report

Investigation regarding: City Of Attica

UPPAC Database Record ID: 3252

Investigator: Mike Enlow

Report Date: 8/23/2012

Damage Date: 6/12/2012

Damage Address: 110 Susie Ln.

City: Attica

County: Fountain

The Parties

Excavator: **City Of Attica**

Contact:

Address: 200 S. McDonald St., Attica, In, 47918

Telephone: 7657622467

Facility Owner: Vectren

Contact: Darlene Kulhanek

Address: 1 N Main Street, Evansville, IN 47702

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Investigation regarding: City Of Attica

UPPAC Database Record ID: 3252

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 119

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$8527

Excavator Activities/Cause of damage information:

Excavator request locates: No Indiana 811 ticket Number: No locate requested

Type of Equipment: Backhoe/Trackhoe

Type of work performed: Curb/Sidewalk

Synopsis: The excavator (City of Attica), cut a 2” distribution gas main during excavation for Curb/Sidewalk installation.

Findings: Reported by John Burke; excavator did not respond to initial notice mailed July 13, 2012. The excavator (City of Attica Municipality) failed to provide a notice to Indiana 811 prior to excavating.

Conclusion: Failed to provide a notice to Indiana 811.

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



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Jun 13, 2012

Who is submitting this information?

Name of person providing this information: John Burke

Business address (*number and street*): 1995 E. Main St.

City, State, and ZIP code: Danville, IN, 46122

Telephone number (*area code*): 3177765566

Fax number (*area code*): 3177183677

E-mail address: jburke@vectren.com

Excavator Information, if known

Full name: City of Attica

Business address (*number and street*): 200 S. McDonald St.

City, State, and ZIP code: Attica, IN, 47918

Telephone number (*area code*): 7657622467

Fax number (*area code*): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type: Municipality

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Curb/Sidewalk

Date and Location of Damage

Date of damage (*month, day, year*): Jun 12, 2012

County: Fountain

City: Attica

Street address (*number and street, city, state, and ZIP code*):
110 Susie Ln.

Nearest intersection: Main St. (SR 28)

Right of way where damage occurred: Public - City Street

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?

Was there a customer service interruption? Yes

If yes, how many affected? 125

Time to restore service (*in hours*):

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 5,000

Affected Facility Information

What type of pipeline was damaged? Natural Gas

What was the affected facility? Distribution

What was the depth of the facility, in inches? 18

Notification, Locating, Marking

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: No locate requested

Was the locate request completed within two working days?

If locates were performed, were they done so by a contractor or pipeline employee? Unknown/Other

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

Were facility marks visible in the area of excavation? No

Were facilities marked correctly? Unknown/Other

Type of markings used:

If other, please specify: _____

Was site marked by "White Lining"?

Were special instructions part of the locate request?

Were maps used to complete the locate request?

Were pipeline company representatives on site during excavation?

Did the excavator notify the operator in the event of this damage?

Did the excavator notify Indiana 811 in the event of this damage?

Did the excavator notify 911 in the event of a release of product?

Description of Cause

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

Additional Comments



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 13, 2012

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

Subject: Investigation Request for Information

Date of Event: 6/12/2012

Event Location: 110 Susie Ln., Attica

Facility Owner: Vectren

Excavator: City Of Attica

Other Party: N/A

Pipeline Division Case No. 3252

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: 07-18-2012

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: City of Attica

Business address (*number and street*): 200 S McDonald Street

City, State, and ZIP code: Attica, IN 47918

Telephone number (*area code*): 765-762-2467

Fax number (*area code*): Unknown

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Municipality

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Curb/Sidewalk

Date and Location of Damage

Date of damage (*month, day, year*): 6-12-12

County: Fountain

City: Attica

Street address (*number and street, city, state, and ZIP code*):
110 Suzie Lane, Attica, 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? 119

Time to restore service (*in hours*): 2.5

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 8,527.05

Affected Facility Information

What type of pipeline was damaged? Natural Gas

What was the affected facility? Distribution

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? Unknown/Other

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? No

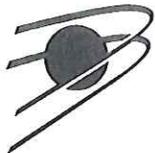
Did the excavator notify 911 in the event of a release of product? Unknown/Other

Description of Cause

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

Additional Comments

2" steel main damaged by hoe. Did not request locates.



2 VECTREN ENERGY DELIVERY OF INDIANA - NORTH



\$8,527.05

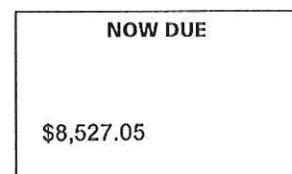
ATTICA, CITY OF
305 E MAIN ST,
ATTICA, IN 47918

Type: GAS
Invoice: FDS0016380
BillToID: 32148
Billing Date: 7/13/2012
Date of Loss: 6/12/2012
5956 103.0509

Please return this portion with your remittance.



Mail Payment To:
Vectren Utilities Holding Corp. DELIVERY OF INDIANA - NORTH
1239 Reliable Parkway
Chicago, IL 60686-0012
Inquiries: 1-877-902-2934, Mon.-Fri., 8-5
Risk Management/Claims Department



ATTICA, CITY OF
305 E MAIN ST,
ATTICA, IN 47918

Type: GAS
Invoice: FDS0016380
BillToID: 32148
Billing Date: 7/13/2012
Date of Loss: 6/12/2012

Invoice For Costs to Repair and Reconstruct Damaged Property

Address: 110 SUZIE LANE, ATTICA

2" STEEL MAIN DAMAGED BY HOE. DID NOT REQUEST LOCATES.

Material:	\$46.99
Company Labor:	\$7,202.09
Contract Labor:	\$0.00
Transportation/Equipment:	\$1,055.48
Misc:	\$0.00
Gas Loss:	\$222.49
Adjustments:	\$0.00
Payments:	\$0.00
Total:	\$8,527.05

5956 103.0509

Remember, call two (2) working days before digging. Contact I.U.P.S. at 1-800-382-5544.

Task No: 103.0509 Capital/O & M (circle one)

Vectren Claim Number: _____

Date of Damage 6/1/12

Police Report / MO #: _____

Cost Center # 5955 5956

Time Occurred 2:20 am / pm

Time Found _____ am / pm

Latitude 40.2887 N Longitude: -87.24073 W

FACILITIES DAMAGE REPORT GAS

Vectren Claims Camera:

VE01079
Form 3112

DAMAGE SITE:
Address 110 Suzie Ln Lot # _____
County Fountain City Attica State IN 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 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 checked="" 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 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"/>
<input type="checkbox"/> Other _____	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"/>
	Other _____			

2.067

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 Whiskers
 Offset Paint Stakes No
 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
 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)

6/25 Peterson
6/13

JUN 25 2012

TYPE OF MATERIAL: Cast Iron Plastic (HDPE) Plastic (MDPE) Steel Other _____

DAMAGE TYPE: Severed Not Cut Severed Size _____ x _____

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

25.379
208.874

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

DURATION OF ESCAPING GAS:
 Minutes: 85

LEAK REPORT NUMBER: 09003

EFV Activated Yes No N/S

FEED TYPE:
 One-Way Feed Two-Way Feed

Number of Customers Affected: 119
 Total Hours Service: _____
 Was Off: 2 1/2 hrs

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 _____

WORKING FOR:
 City County Developer State Property Owner Utility

NOTIFICATIONS AND OTHER DETAILS OF LOCATE:

Locate Ticket: None

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

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 NA (Stores Code)
- Regulator Was Replaced NA (Stores Code)
- Temporary Asphalt Repair: NA (sq. ft.)
- Permanent Asphalt Repair: NA (sq. ft.)

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

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

DAMAGING PARTY:

Name: City of Attica
 Address: 200 S McDowd ST.
 City/ State/ Zip: Attica In. 47918
 Phone: (765) 762-2467
Daryl Harmon 6-12-12
 Prepared / Investigated By: _____ Date: _____

PARTY TO INVOICE:

Name: same
 Address: _____
 City/ State/ Zip: _____
 Phone: _____
B. Kell 6/13/12
 Reviewed by Field Supervisor: _____ Date: _____

Service Order Status

Wednesday, July 18, 2012

Enter Service Order Number:

5276571



Clear Form

Refresh Data

Banner Instance: CS03PROD CS01PROD CS02PROD

Order Number: N5276571

Order Type: LEAK

Order Status: Completed

Customer: 600198133 - BLANKENSHIP TRAVIS

Prem: 5505275 - 110 SUZIE LN

Technician: 1976 - Harmon, Daryl

Order Dates and Times

Need Date: 6/12/2012 3:06:00 PM
Time Created: 6/12/2012 2:23:08 PM
Time Dispatched: 6/12/2012 2:23:08 PM
Time In Route: 6/12/2012 2:23:50 PM
Time On-Site: 6/12/2012 2:49:41 PM
Tech Complete: 6/12/2012 9:41:47 PM
Time Closed: 6/12/2012 9:41:47 PM

Events Performed/Completion Code

LKOT - CMP

Meter Information

Current ReadStatus

Old Meter: 0000 Active

New Meter:

Completion Notes

found 2 inch cut stl main--call hall--crew in route to repair

Request Notes

6-12-12 BRENA WITH ATTICA FIRE DISPATCH REPORTING A RUPTUREED GAS LINE AND GAS IS SPEWING CONT# 765-762-2449 FIRE DEPT EN ROUTE XST SHERRY

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	6/12/2012 2:23:45 PM	Harmon, Daryl
AsnAssignmentEnRoute_evt	6/12/2012 2:23:50 PM	Harmon, Daryl
AsnAssignmentOnSite_evt	6/12/2012 2:49:41 PM	Harmon, Daryl
OrdOrderComplete_evt	6/12/2012 9:41:47 PM	Harmon, Daryl

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