



## Pipeline Safety Division Investigation Report

### Investigation regarding: Dale Miller

UPPAC Database Record ID: 3297

Investigator: John McLaughlin

Report Date: 8/27/2012

Damage Date: 6/30/2012 11:08:52 AM

Damage Address: 67835 In Rt 13

City: Millersburg

County: Elkhart

### The Parties

Excavator: **Dale Miller**

Contact: Dale Miller

Address: 67835 St Rd 13, Millersburg, In 46543

Telephone:

Facility Owner: NIPSCO

Contact: Kit Earle

Address: 101 West Ohio Street, Indianapolis, IN 46204

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

**Investigation regarding: Dale Miller**

UPPAC Database Record ID: 3297

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 41

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$

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

Excavator request locates: No    Indiana 811 ticket Number:

Type of Equipment: Auger

Type of work performed: Fencing

**Synopsis:** The gas operator reported a natural gas line was damaged while performing auger fencing excavation.

**Findings:** Reported by Indiana 811; excavator did not respond to initial notice mailed July 13, 2012. The excavator initiated no locates requests prior to work beginning. The contracted locate service investigation states, "HOMEOWNER PUTTING IN A FENCE DRILLED INTO THE TOP OF A 2" PLASTIC MAIN CONTRACTOR DID NOT HAVE A LOCATE REQUEST/ NO TICKET..."

**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 DIVISION

State Form 54122 (R2 / 7-11)

INDIANA UTILITY REGULATORY COMMISSION

Submitted to IURC-Pipeline Safety on: Aug 3, 2012

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### Who is submitting this information?

Name of person providing this information: Carrie Ludwig (NIPSCo)

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

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### Excavator Information, if known

Full name: Dale D Miller

Business address (*number and street*): 67835 IN RT 13 & CO RT 44

City, State, and ZIP code: Millersburg, IN

Telephone number (*area code*): 260 894 4210

Fax number (*area code*): \_\_\_\_\_

E-mail address: \_\_\_\_\_

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### Excavation or Demolition Information

Excavator type: Occupant

Excavation or demolition equipment: Auger

Type of work performed: Fencing

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**Date and Location of Damage**

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

County: Elkhart

City: Millersburg

Street address (*number and street, city, state, and ZIP code*):  
67835 IN RT 13 & CO RT 44 Millersburg, IN

Nearest intersection: Co Rt 44

Right of way where damage occurred: Public - Other

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? 41

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 \$ \_\_\_\_\_

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**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? 32

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**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? Unknown/Other

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: Other

If other, please specify: no locates \_\_\_\_\_

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? Yes

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### **Description of Cause**

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

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### **Additional Comments**

Nipsco emergency repair ticket # 1206300119

Excavator reported this damage to IN811 in Spreadsheet CI. MAO 8/3/2012.



101 West Ohio Street, Suite 1707  
Indianapolis, IN 46204

August 13, 2012

*Via Electronic Transmission – [PipelineDamageCase@urc.in.gov](mailto:PipelineDamageCase@urc.in.gov)*

Pipeline Safety Division – Case No. 3297  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 3297

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: 6/30/2012

Event Location: 67835 In Rt 13, Millersburg

Facility Owner: Northern Indiana Public Service Company

Excavator: Earnest Miller

Other Party: N/A

Pipeline Division Case No. 3297

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](mailto:cearle@nisource.com)

<b>IURC INFORMATION REQUEST</b>	
<b>Pipeline Safety Division Case No. 3297</b>	
Date of Event	6/30/2012
Event Location	67835 In Rt 13, Millersburg
Facility Owner	Northern Indiana Public Service Company
Excavator	Earnest Miller
Date of IURC Information Request	7/13/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	DALE MILLER
RESPONSIBLE PARTY PERSONAL NAME	DALE MILLER
TITLE (IF ANY)	PROPERTY OWNER
ADDRESS	67835 ST 13
CITY/ STATE/ZIP	MILLERSBURG, IN 46543
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<b>FACILITY INFORMATION - OWNER/OPERATOR OF UTILITY LINE:</b>	
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	<a href="mailto:LSELKING@NISOURCE.COM">LSELKING@NISOURCE.COM</a>
<b>LOCATOR SERVICE INFORMATION</b>	
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	
<b>OTHER (WITNESS, POLICE, FIRE, OTHER) INFORMATION</b>	
PERSONAL CONTACT	
BUSINESS/ORGANIZATION NAME	
TITLE (IF ANY)	

ADDRESS	
CITY/ STATE/ZIP	
PREFERRED TELEPHONE	
CELL PHONE TELEPHONE	
EMAIL ADDRESS	
<b>UTILITY LINE IMPACT</b>	
<b>LOCATION OF DAMAGE</b>	
ADDRESS	67835 SR 13
CITY/STATE/ZIP	MILLERSBURG, IN 46543
NEAREST INTERSECTION	CR 44
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	X
GATHERING	
SERVICE/DROP	
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	2"
PRESSURE (PSIG/INCHES)	45
INTERRUPTION IN SERVICE (YES/NO)	Yes
NUMBER OF CUSTOMERS AFFECTED	41
EVACUATION (YES/NO)	No
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	X
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	
Milling Equipment	
Probing Device	

Trencher	
Vacuum Equipment	
Unknown/Other	
<b>TYPE OF WORK PERFORMED (Select One)</b>	
Agriculture	
Cable TV	
Curb/Sidewalk	
Bldg. Construction	
Bldg. Demolition	
Drainage	
Driveway	
Electric	
Engineering/Surveying	
Fencing	X
Grading	
Irrigation	
Landscaping	
Liquid Pipeline	
Milling	
Natural Gas	
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)	Yes 1206300117
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	No

INDIANA 811 LOCATE TICKET NUMBER	N/A
LOCATE MARKS VISIBLE (YES/NO)	N/A
LOCATE MARKS CORRECT (YES/NO)	N/A
EXCAVATOR "WHITE LINED" (YES/NO)	
MAPS USED TO MARK FACILITIES (YES/NO)	N/A
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	No
<b>INCIDENT IMPACT INFORMATION</b>	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FACILITIES	
FIRE DEPARTMENT RESPONSE (YES/NO)	Yes MILLERSBURG FD
FPOLICE DEPARTMENT RESPONSE (YES/NO)	Yes MILLERSBURG PD
AMBULANCE RESPONSE (YES/NO)	
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
<p>No notification made to the one-call center  Nipsco emergency repair ticket #: 1206300119</p>	

# Fact Based Investigation Report

01820120630004  
Northern IN  
6/30/2012 10:59:00 AM  
6/30/2012 11:10:10 AM  
EARNEST MILLER  
67835 IN RT 13  
MILLERSBURG  
ST: IN ZIP:

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

NIPSCO

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DAMAGED CUSTOMER:

06/30/2012  
12:00:00  
13:00:00

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INVESTIGATION DATE:  
FROM:  
TO:

Homeowner  
FENCE POST

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EXCAVATOR INVOLVED:  
TYPE OF EXCAVATION:

Yes

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

M55268785

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

MIKEOBERLIN  
6/30/2012 12:30:00 PM  
Digital

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

113397

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INVESTIGATOR EMP#:  
INVESTIGATOR NAME:

MIKEOBERLIN  
**BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?**  
No

## Fact Based Investigation Customer Information

01820120630004

NIPSCO

(optional)

**NOTIFICATION ID:**

**SELECT A CUSTOMER:**

**CUSTOMER #:**

LOWPROF

main - 2"

Yes

**FACILITY DESCRIPTION:**

**FACILITY ID:**

**LOCATOR NAME & EMP #:**

**LOCATOR NOT KNOWN:**

**CHECK ALL THAT APPLY TO INVESTIGATION:**

No Locate Req. By Contractor

**Other:**

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

Visual, Facility Exposed At Time Of Investigation

**INVESTIGATOR STATEMENT/CAUSAL FACTORS:**

HOMEOWNER PUTTING IN IN A FENCE DRILLED INTO THE TOP OF A 2" PLASTIC MAIN CONTRACTOR DID NOT HAVE A LOCATE REQUEST/ NO TICKET- POSSIBLE 25 RELIGHTS

**NAMES OF UTILITY REPRESENTATIVES CONTACTED OR ON SITE AND STATEMENT:**

NO TICKET

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

U/K

**LIST ANY OTHER INDIVIDUALS ON SITE:**

U/K

**WERE ANY MARKINGS VISIBLE ON THE DAMAGE SITE UPON ARRIVAL?**

No

**WERE ANY OTHER INDICATORS OF FACILITY PRESENT IN THE AREA?**

Yes

**WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?**

No

**EXTENT OF FACILITY DAMAGE**

2: PLASTIC MAIN

**REPLACEMENT FOOTAGE**

3'

**WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?**

No

**WHAT CONTRACTOR EQUIPMENT WAS USED?**

**IS THE FACILITY SHOWN ON THE UTILITY RECORDS?**

Yes

**IF YES, PLEASE LIST RECORD #(S)**

NIMS

NIPSCO 00054 IUPPSa 06/30/2012 11:08:55 1206300117-00A EMER DAMG GRID

DAMAGE

# 3297

Ticket : 1206300117 Date: 06/30/2012 Time: 10:59 Oper: LSTEVENSON Chan:018

State: IN Cnty: ELKHART Twp: BENTON  
Cityname: MILLERSBURG Inside: N Near: Y  
Subdivision:

Address : 67835  
Street : IN RT 13  
Cross 1 : CO RT 44 Within 1/4 mile: Y  
Location: LOCATE THE AREA BETWEEN THE ROAD AND THE BARN  
:  
Grids : 4130B8541B 4130A8541B 4130B8541A 4130A8541A  
Boundary: n 41.516506 s 41.510342 w -85.696396 e -85.692818

Work type : INSTALL POST  
Done for : DALE MILLER  
Start date: 06/30/2012 Time: 11:03 Hours notice: 0/0 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 1 DAY Depth: 3 FEET

Company : EARNEST MILLER Type: OTHR  
Co addr : 1410 WEST UNION STREET  
City : LIGONIER State: IN Zip: 46767  
Caller : EARNEST MILLER Phone: (260)894-4210  
Contact : NO Phone:  
BestTime:

Remarks : All tickets are taken and processed on Eastern Daylight Time  
NIPSCO GAS LINE WAS HIT ON THE EAST SIDE OF THE BARN APPROX 10 FEET OFF THE  
ROAD---GAS LINE IS BLOWING---CAN BE HEARD AND SMELLED--NO DISCRPTION OF THE  
LINE---CREW IS NO LONGER ON SITE---NIPSCO AND 911 HAVE BEEN CALLED---NO PREVIOUS  
TICKET NUMBER

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

:

Submitted date: 06/30/2012 Time: 10:59  
Members: ID2034 ID2178 NIPSCO ID5857

NORTHERN INDIANA PUBLIC SERVICE COMPANY

FACILITY DAMAGE REPORT

COMPLETE FORM FOR ALL DAMAGES TO NIPSCO FACILITIES

Elkhart Co  
Benton-twp.

REPORTING OPERATING AREA 110 Goshen MAXIMO WO # M498717

OPERATING AREA CONTACT K. Adams JOB ORDER # 546588

TRACKING NUMBER 018 2012 06 30 005 LOCATE REF # \_\_\_\_\_

Locate Performed By: \_\_\_\_\_

DATE AND TIME OF ACCIDENT 06-30-12 @ 10:49 AM DATE OF REPORT 06-30-2012

PLACE OF DAMAGE (INCLUDE CITY) 67835 STATE ROAD 13 MILLERSBURG

DAMAGE WAS TO:

ELECTRIC - POLE / TRANSFORMER: # \_\_\_\_\_ SIZE \_\_\_\_\_ YEAR INSTALLED \_\_\_\_\_ BROKEN YES ( ) NO ( )

OTHER (DESCRIBE) \_\_\_\_\_

GAS: SERVICE ( ) MAIN  SIZE 2" MATERIAL: PLASTIC  STEEL ( ) METER ( ) REG STATION ( ) STUB ( )

OTHER (DESCRIBE) \_\_\_\_\_

DEPTH OF FACILITY (Inches) 32" PRESSURE (PSI) 45 Lbs. Med

RELEASE OF GAS: YES  NO ( ) IGNITION OF GAS: YES ( ) NO  EVACUATION REQUIRED: YES ( ) # \_\_\_\_\_ NO

INTERRUPTION OF SERVICE: YES  NO ( ) NUMBER OF CUSTOMERS LOST: 41

DURATION OF INTERRUPTION: TIME REPORTED 1049 TIME RESTORED \_\_\_\_\_

DIAMETER/MEASUREMENT OF HOLE IN GAS FACILITY: 8"

LOCATE MARKS ON SITE: YES ( ) DISTANCE BETWEEN FACILITY AND LOCATE MARKS \_\_\_\_\_ NO

HOW LOCATED: PAINT ( ) FLAGS ( ) BOTH ( ) WHITE LINED ( )

PARTY THAT CAUSED DAMAGES (NAME) Dale D. Miller

ADDRESS OF PARTY (INCLUDE CITY) 67835 STATE ROAD 13 MILLERSBURG

WHO WAS IN CHARGE OF THE WORK SITE AT TIME OF DAMAGE HOME OWNER DALE D. MILLER

WITNESS NAME AND ADDRESS \_\_\_\_\_

WITNESS REMARKS \_\_\_\_\_

AGENCIES NOTIFIED / ONSITE: POLICE  AGENCY MILLERSBURG REPORT # \_\_\_\_\_

FIRE  AGENCY MILLERSBURG REPORT # \_\_\_\_\_

OTHER ( ) \_\_\_\_\_ Any Injuries? ( ) YES # \_\_\_\_\_ ( ) NO

PHOTOS TAKEN: YES ( ) NO  TAKEN BY: \_\_\_\_\_ (ATTACH PHOTOS TO REPORT)

MEDIA ON SITE YES ( ) NO

WORK IN PROGRESS WHEN FACILITY DAMAGED - CHECK APPROPRIATE CHOICE BELOW

- AGRICULTURE/FARMING
- BLDG CONSTRUCTION
- DRIVEWAY
- FENCING
- LANDSCAPING
- POLE/SIGN POST
- CABLE TV
- DEMOLITION
- ELECTRIC
- GRADING
- PIPELINE
- ROAD WORK
- CURB/SIDEWALK
- DRAINAGE
- SURVEYING
- IRRIGATION
- MILLING
- SEWER
- TELECOMMUNICATIONS
- WATER
- DRAINS/GULVERTS
- MOWING
- OTHER \_\_\_\_\_

TYPE OF EQUIPMENT USED - CHECK APPROPRIATE CHOICE BELOW

- AUGER
- MILLING EQUIPMENT
- EXPLOSIVES
- VACCUUM EQUIPMENT
- HAND TOOLS
- PROBING DEVICE
- TRENCHER
- GRADER
- BACKHOE/TRACKHOE
- BORING / DRILLING
- FARM EQUIPMENT
- OTHER \_\_\_\_\_

REASON DAMAGE OCCURRED - CHECK APPROPRIATE CHOICE BELOW

- NO NOTIFICATION
- AUTOMOTIVE ACCIDENT
- EXCAVATING BEFORE LOCATES DUE
- CARELESS MACHINE OPERATOR
- MARKS DISTURBED
- STUB
- OTHER \_\_\_\_\_

SEE REVERSE SIDE FOR COMMENTS AND DIAGRAM

COMMENTS: Customer was Augering Post Holes  
For Fence with Bobcat, Drilled into 2"  
Plastic GAS Main with out locates

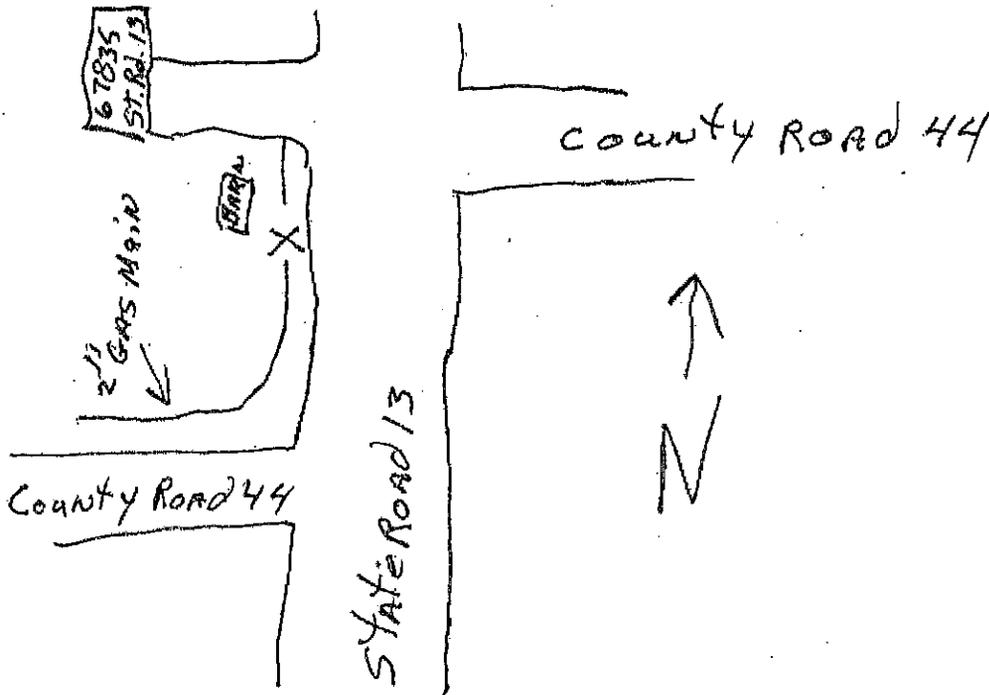
PERSON PREPARING REPORT K. Adams 117197

FIELD SUPERVISOR Bob Somers 124906

FIELD MANAGER F. JAKUBOWICZ GOSHEN *Kelly*

- ORIGINAL REPORT AND SUPPORTING INFORMATION IS TO BE SENT TO FACILITY DAMAGE RECOVERY
- COPY OF REPORT IS TO BE SENT TO DAMAGE PREVENTION

SKETCH: - Show position of all pertinent information



FOR OFFICE USE ONLY:

- |   |     |    |
|---|-----|----|
| • DID EXCAVATION OCCUR BEFORE LOCATES WERE DUE  | YES | NO |
| • NO IN 811 LOCATE CALLED IN                    | YES | NO |
| • DAMAGE CAUSED FROM EXCAVATION WITHIN 24" ZONE | YES | NO |
| • EXPIRED LOCATE                                | YES | NO |
| • WAS WHITE LINING INDICATED ON LOCATE REQUEST  | YES | NO |

COMPLETED BY: Keith Adams DATE: 06-30-2012