



Pipeline Safety Division Investigation Report

Investigation regarding: **Joe Luhring**

UPPAC Database Record ID: 54

Investigator: Howard Friend

Telephone: 317-232-2717

Report Date: 01/20/2012

Damage Date: 03/22/2011

Damage Address: 212 S Depot Street

City: Batesville

County: Ripley

The Parties

Excavator: **Joe Luhring**

Contact:

Address: 212 S Depot Street, Batesville, In

Telephone: 812-212-2634

Facility Owner: Batesville Water & Gas

Contact: Scott Bauer

Address: 7 N Eastern Avenue, Batesville, IN 47006

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Investigation regarding: Joe Luhring

UPPAC Database Record ID: 54

Damage Impact

Product release: No

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$220

Excavator Activities/Cause of damage information:

Excavator request locates: No Indiana 811 ticket Number:

Type of Equipment: Grader/Scraper

Type of work performed: Driveway

Synopsis: A 3/4" steel natural gas service was damaged while grading for a driveway. Service was not broken, but was replaced with a new plastic service three days later.

Findings: Reported by operator; excavator signed for initial notice but did not date the card and has not responded to information request. Excavator did not call to request that the gas service be located and marked.

Conclusion: There was a failure to call to request locates.

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

Joe Luhring currently has no other reports of damages in the record.

NO

LOCATE

TICKET

PROVIDED

Information Request

Pipeline Safety Division Indiana Utility Regulatory Commission

Case No. 54

The Pipeline Safety Division of the Indiana Utility Regulatory Commission requests any and all information you can provide regarding the following criteria:

The Parties:

Excavator Information:

Business Name:

Responsible Party Personal Name: Joe Luhring

Title (if any):

Address: 212 S. Depot St.

City, State Zip: Batesville, IN. 47006

Preferred Telephone:

Cell Phone Number: 812-212-2634

Email Address:

Facility Information:

Business Name: Batesville Water & Gas Utility

Responsible Party Personal Name: Scott Bauer

Title (if any): Gas Manager

Address: 7 N. Eastern Ave. P.O. Box 97

City, State, Zip: Batesville, IN. 47006

Preferred Telephone: 1-812-934-3811

Cell Phone Number: 1-812-212-0058

Email Address: sbauer@batesvilleindiana-us

Locator Service Information:

Business Name: Batesville Water & Gas Utility

Responsible Party Personal Name: Ted Merkel

Title (if any): Serviceman

Address: 7 N. Eastern Ave.

City, State Zip: Batesville

Preferred Telephone: 812-934-3811

Cell Phone Number: 812-212-0053

Email Address:

Other (Witness, Police, Fire, Other) Information:

Personal Contact:

Business/Organization Name:

Title (if any)

Address:

City, State, Zip:

Preferred Telephone:

Cell Phone Number:

Email Address:

Utility Line Impact:

Location of Damage:

Address: 212 S. Depot St.

City, State Zip: Batesville, IN. 47006

Nearest Intersection: South St.

Product Type (circle one):

Natural Gas

Liquid Pipeline

Unknown/Other

Facility Type (circle one):

Distribution

Gathering

Service/Drop

Transmission

Unknown/Other

Size (Diameter/etc.): 3/4"

Pressure (PSIG/Inches): 30 psi

Interruption in Service: Yes No Number of Customers Affected: 0

Evacuation: Yes No If yes, How Many Evacuated? _____

Repair Cost (if known): \$ 219.63

Cause of Damage Information:

Type of Equipment (circle one):

Auger
Backhoe/Trackhoe
Boring /Drilling
Directional Drilling
Explosives
Farm Equipment
Grader/Scrapper
Hand Tools
Milling Equipment
Probing Device
Trencher
Vacuum Equipment
Unknown/Other

Type of Work Performed (circle one):

Agriculture
Cable TV
Curb/Sidewalk
Bldg. Construction
Bldg. Demolition
Drainage
Driveway
Electric
Engineering/Surveying
Fencing
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

Ignition and/or Fire: Yes / No

Excavator Notify 811: Yes / No

Locate Information:

Excavator Request Locate: Yes / No

Indiana 811 Locate Ticket Number: None called

Locate Marks Visible: Yes / No

Locate Marks Correct: Yes/No

Excavator "White Lined": Yes / No

Maps Used to Mark Facilities: Yes / No

Was Locate Provided within Two (2) Working Days: Yes / No

Operator Employees On-site during Excavation: Yes / No

Incident Impact Information:

Number of Outpatient Treated: 0

Number of Inpatient Treated: 0

Number of Fatalities: 0

Fire Department Response: Yes / No

Police Department Response: Yes / No

Ambulance Response: Yes / No

Additional Information/Comments:

No locates called. Customer assumed service went another direction. Service tested OK. Replaced with plastic on 3/25 & charged to customer.

YOUR PIPELINE SAFETY DIVISION CASE NO. 54

YOUR FULL NAME: Scott Bauer

FULL NAME OF BUSINESS/ENTITY (if applicable): Batesville Water & Gas Utility

YOUR BUSINESS TITLE (if applicable): Gas Manager

ADDRESS: 7 N. Eastern Ave. P.O. Box 97

CITY: Batesville STATE: IN ZIP CODE: 47006

YOUR TELEPHONE NUMBER: (812) 934 - 3811 SECOND NO. (812) 212 - 0058

YOUR EMAIL ADDRESS: sbauer@batesvilleindiana.us

TODAY'S DATE: 11-17-11

YOUR SIGNATURE: Scott Bauer TITLE (if any) _____

Please return your Narrative Statement and Answers to the above questions to:

**Pipeline Safety Division – Case No. 54
Indiana Utility Regulatory Commission
101 West Washington Street, # 1500E
Indianapolis, IN 46204**

Or scan document(s) and Email to:

PipelineDamageCase@urc.in.gov

BATESVILLE GAS UTILITY

LEAK REPORT AND REPAIR FORM

(PRINT CLEARLY)

DATE: 3/22/11 TIME: 11:06 am pm NO: _____

REPORTED BY: Joe Luhring RECEIVED BY: Mari Thielking

HOW RECEIVED: PHONE IN PERSON LETTER RADIO

CUSTOMER NAME: Joe Luhring PHONE #: 212-2634 ACCOUNT #: 70082360

ADDRESS OR LOCATION: 212 S. Depot

INSTRUCTIONS: Hit gas line with skid loader

TO WHOM DISPATCHED: Mark E. DATE DISPATCHED: 3/22/11

TIME DISPATCHED: 11:07 am pm HOW DISPATCHED ORDER PHONE RADIO

LEAK LOCATION:	COMPONENT LEAKING	CAUSE
<input type="checkbox"/> 1-DISTRIBUTION MAIN	<input type="checkbox"/> 1-PIPE <input type="checkbox"/> 6-REGULATOR	<input type="checkbox"/> 1-CORROSION
<input type="checkbox"/> 2-DISTRIBUTION SERVICE	<input type="checkbox"/> 2-VALVE <input type="checkbox"/> 7-TAP CONNECTION	<input type="checkbox"/> 2-DAMAGE BY OUTSIDE FORCES
<input type="checkbox"/> 3-TRANSMISSION SYSTEM	<input type="checkbox"/> 3-FITTING <input type="checkbox"/> 8-CUSTOMER'S PIPING	<input type="checkbox"/> 3-CONSTRUCTION DEFECT
<input type="checkbox"/> 4-CUSTOMER'S PREMISES (OUTSIDE)	<input type="checkbox"/> 4-METER <input type="checkbox"/> 9-CUSTOMER'S APPLIANCE	<input type="checkbox"/> 4-MATERIAL FAILURE
<input type="checkbox"/> 5-CUSTOMER'S PREMISES (INSIDE)	<input type="checkbox"/> 5-OTHER	<input type="checkbox"/> 5-OTHER

LEAK CLASSIFICATION A NON HAZARDOUS B PROBABLE HAZARD C IMMEDIATE HAZARD

DESCRIPTION OF LEAK OR CAUSE OF LEAK, ETC: Digging out for driveway
scraped to of gas service. Meter, service, main &
house piping checked with gas Sentry. no leaks found.

HOW REPAIRED Steel Service replaced with pe on 3-25-11

TESTED WITH Kuhlman PSI 90 psi

IS TELEPHONE REPORT TO D.O.T. REQUIRED? YES NO
 IS WRITTEN REPORT TO D.O.T. REQUIRED? YES NO

RECHECKED LEAK
BY: _____

WORK STARTED DATE: 3-22-11 TIME: 11:15
 WORK FINISHED DATE: 3-22-11 TIME: 12:05

DATE: _____

WORK DONE BY: Mark E. & Ted M.



NO
EXCAVATOR
RESPONSE
PROVIDED