



## Pipeline Safety Division Investigation Report

### Investigation regarding: **South Bend Waterworks**

UPPAC Database Record ID: 2940

Investigator: Mike Orr

Report Date: 10/30/2012

Damage Date: 5/9/2012 1:49:29 PM

Damage Address: 1417 Sunnymede Ave

City: South Bend

County: St Joseph

### The Parties

Excavator: **South Bend Waterworks**

Contact: Ryan Dustin

Address: 915 South Olive Street, South Bend, In 46619

Telephone:

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: South Bend Waterworks**

UPPAC Database Record ID: 2940

### **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: 1204262571

Type of Equipment: Hand Tools

Type of work performed: Water

**Synopsis:** A natural gas service drop was damaged while work was performed for a water project.

**Findings:** Reported by Indiana 811; excavator did not respond to initial notice mailed 6/21/2012. Excavator reported having a valid locate; however, the gas operator self-reported a failure to locate or providing incorrect locate markings.

**Conclusion:** The gas operator, after having a notice served requesting additional information, having been allowed time to respond; the resulting determination is an OPERATOR VIOLATION.

**Violation: IC 8-1-26-18(f): Operator failed to locate or provided incorrect locate markings.**



101 West Ohio Street, Suite 1707  
Indianapolis, IN 46204

July 25, 2012

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

Pipeline Safety Division – Case No. 2940  
Indiana Utility Regulatory Commission  
101 West Washington Street, Suite 1500 East  
Indianapolis, Indiana 46204

RE: Investigation Request for Information; Pipeline Division Case No. 2940

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: 5/9/2012

Event Location: 1417 Sunnymede Ave, South Bend

Facility Owner: Northern Indiana Public Service Company

Excavator: South Bend Waterworks

Other Party: N/A

Pipeline Division Case No. 2940

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. 2940</b>	
Date of Event	5/9/2012
Event Location	1417 Sunnymede Ave, South Bend
Facility Owner	Northern Indiana Public Service Company
Excavator	South Bend Waterworks
Date of IURC Information Request	7/5/2012
<b>THE PARTIES</b>	
<b>EXCAVATOR:</b>	
BUSINESS NAME	South Bend Water Works
RESPONSIBLE PARTY PERSONAL NAME	Ryan Dustin
TITLE (IF ANY)	
ADDRESS	915 South Olive St
CITY/ STATE/ZIP	South Bend, IN 46619
PREFERRED TELEPHONE	574 235 9464
CELL PHONE TELEPHONE	574 235 9464
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
RESPONSIBLE PARTY PERSONAL NAME	Morgan Thompson
TITLE (IF ANY)	Claims Coordinator
ADDRESS	9045 N. River Rd. Suite 300
CITY/ STATE/ZIP	Indianapolis, IN 46240
PREFERRED TELEPHONE	1-317-538-7301
CELL PHONE TELEPHONE	Same
EMAIL ADDRESS	morganthompson@usicinc.com
<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	1424 Sunnymede Avenue
CITY/STATE/ZIP	South Bend
NEAREST INTERSECTION	S Twyckenham Dr
<b>PRODUCT TYPE (Select One)</b>	
NATURAL GAS	X
LIQUID PIPELINE	
UNKNOWN/OTHER	
<b>FACILITY TYPE (Select One)</b>	
DISTRIBUTION	
GATHERING	
SERVICE/DROP	X
TRANSMISSION	
UNKNOWN/OTHER	
SIZE (DIAMETER/ETC.)	1 ¼"
PRESSURE (PSIG/INCHES)	35
INTERRUPTION IN SERVICE (YES/NO)	Y
NUMBER OF CUSTOMERS AFFECTED	1
EVACUATION (YES/NO)	N
IF YES, HOW MANY EVACUATED	0
REPAIR COST (IF KNOWN) (\$)	
<b>CAUSE OF DAMAGE INFORMATION:</b>	
<b>TYPE OF EQUIPMENT (Select One)</b>	
Auger	
Backhoe/Trackhoe	
Boring/Drilling	
Directional Drilling	
Explosives	
Farm Equipment	
Grader/Scraper	
Hand Tools	X hand tools
Milling Equipment	
Probing Device	

Trancher	
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	
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	X
Waterway Improvement	
Unknown/Other	
RELEASE OF PRODUCT (YES/NO)	Y
IGNITION AND/OR FIRE (YES/NO)	N
EXCAVATOR NOTIFY 811 (YES/NO)	Y
<b>LOCATE INFORMATION:</b>	
EXCAVATOR REQUEST LOCATE (YES/NO)	Y

INDIANA 811 LOCATE TICKET NUMBER	1204262571
LOCATE MARKS VISIBLE (YES/NO)	Y
LOCATE MARKS CORRECT (YES/NO)	N
EXCAVATOR "WHITE LINED" (YES/NO)	N
MAPS USED TO MARK FACILITIES (YES/NO)	Y
OPERATOR EMPLOYEES ON-SITE DURING EXCAVATION (YES/NO)	N
<b>INCIDENT IMPACT INFORMATION</b>	
NUMBER OF OUTPATIENT TREATED	0
NUMBER OF INPATIENT TREATED	0
NUMBER OF FACILITIES	
FIRE DEPARTMENT RESPONSE (YES/NO)	
FPOLICE DEPARTMENT RESPONSE (YES/NO)	
AMBULANCE RESPONSE (YES/NO)	
<b>ADDITIONAL INFORMATION/COMMENTS</b>	
Facility was not located or marked Damage ticket #: 1205092426	



# DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: Jun 26, 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: South Bend Waterworks

Business address (*number and street*): 915 South Olive St

City, State, and ZIP code: South Bend, IN 46619

Telephone number (*area code*): 574 235 9464

Fax number (*area code*): 574 235 5594

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

## Excavation or Demolition Information

Excavator type: Municipality

Excavation or demolition equipment: Backhoe/Trackhoe

Type of work performed: Water

**Date and Location of Damage**

Date of damage (month, day, year): May 9, 2012

County: St Joseph

City: South Bend

Street address (number and street, city, state, and ZIP code):  
1424 Sunnymede Avenue South Bend IN

Nearest intersection: S Twyckenham Dr

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): \_\_\_\_\_

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? Service/Drop

What was the depth of the facility, in inches? 24

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**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? Yes

Enter Indiana 811 ticket number, if known: 1204262571

Was the locate request completed within two working days? Yes

If locates were performed, were they done so by a contractor or pipeline employee? Utility Owner

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? No

Type of markings used: Paint and Flags

If other, please specify: \_\_\_\_\_

Was site marked by "White Lining"?

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? Unknown/Other

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

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### **Description of Cause**

Select from the list the most accurate cause for the damage: --Facility was not located or marked

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### **Additional Comments**

Damage ticket #: 1205092426

NIPSCO 00785 IUPPSa 05/09/2012 13:49:41 1205092426-00A EMER DAMG STRT

DAMAGE SEE REMARKS

Ticket : 1205092426 Date: 05/09/2012 Time: 13:43 Oper: DMEYER Chan:034

#2940

State: IN Cnty: ST JOSEPH Twp: PORTAGE  
Cityname: SOUTH BEND Inside: Y Near: N  
Subdivision:

Address : 1417  
Street : SUNNYMEDE AVE  
Cross 1 : S TWYCKENHAM DR Within 1/4 mile: Y  
Location: LOCATE THE FRONT OF PROPERTY

Grids : 4140C8613C 4140C8613B 4140C8613A  
Boundary: n 41.672729 s 41.671471 w -86.231483 e -86.224945

Work type : REPAIR WATER SHUT OFF  
Done for : SOUTH BEND WATERWORKS  
Start date: 05/09/2012 Time: 13:43 Hours notice: 0/0 Priority: EMER  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: Y  
Duration : 1 DAY Depth: 6 FEET

Company : SOUTH BEND WATERWORKS Type: MEMB  
Co addr : 915 SOUTH OLIVE STREET  
City : SOUTH BEND State: IN Zip: 46619  
Caller : RYAN DUSTIN Phone: (574)235-9464  
Contact : JIM MOLNAR--OFFICE Phone:  
BestTime:  
Mobile : (574)235-9464  
Fax : (574)235-5594

Remarks : All tickets are taken and processed on Eastern Daylight Time  
PER RYAN DUSTIN --- HIT A NIPSCO GAS LINE-- LINE WAS BLOWING ---DIGGING IN THE  
TREE LAWN IN FRONT OF PROPERTY --- SMALL 1/2 INCH LINE - PLASTIC - CREW IS  
STILL ON SITE - LINE HAS BEEN CLAMPED --- PREVIOUS TICKET 1204262571  
Will you be white-lining the dig site area? NO  
:

Submitted date: 05/09/2012 Time: 13:43  
Members: AEPIN COMCN ID2601 ID5610 ID7053 NIPSCO SBCIN SM ID2600

NIPSCO 00911 IUPPSa 04/26/2012 14:45:15 1204262571-00A NORM NEW STRT

NORMAL NOTICE

Ticket : 1204262571 Date: 04/26/2012 Time: 14:43 Oper: SPOPE Chan:044

#2940

State: IN Cnty: ST JOSEPH Twp: PORTAGE  
Cityname: SOUTH BEND Inside: Y Near: N  
Subdivision:

Address : 1417  
Street : SUNNYMEDE AVE  
Cross 1 : S TWYCKENHAM DR Within 1/4 mile: Y  
Location: LOCATE THE FRONT OF PROPERTY  
:  
Grids : 4140C8613C 4140C8613B 4140C8613A  
Boundary: n 41.672729 s 41.671471 w -86.231483 e -86.224945

Work type : REPAIR WATER SHUT OFF  
Done for : SOUTH BEND WATERWORKS  
Start date: 04/30/2012 Time: 15:00 Hours notice: 96/48 Priority: NORM  
Ug/Oh/Both: U Blasting: N Boring: N Railroad: N Emergency: N  
Duration : 1 DAY Depth: 6 FEET

Company : SOUTH BEND WATERWORKS Type: MEMB  
Co addr : 915 SOUTH OLIVE STREET  
City : SOUTH BEND State: IN Zip: 46619  
Caller : JIM MOLNAR Phone: (574)235-9464  
Contact : JIM MOLNAR--OFFICE Phone:  
BestTime:  
Mobile : (574)235-9464  
Fax : (574)235-5594

Remarks : All tickets are taken and processed on Eastern Daylight Time  
Will you be white-lining the dig site area? NO  
:

Submitted date: 04/26/2012 Time: 14:43  
Members: AEPIN COMCN ID2601 ID5610 ID7053 NIPSCO SBCIN SM ID2600

# Fact Based Investigation Report

01820120509009  
Northern IN  
5/9/2012 1:43:00 PM  
5/9/2012 1:55:09 PM  
RYAN DUSTIN  
1417 SUNNYMEDE AVE  
SOUTH BEND  
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:

05/09/2012  
14:10:00  
15:45:00

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INVESTIGATION DATE:  
FROM:  
TO:

SOUTH BEND WATER  
Repair valve

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EXCAVATOR INVOLVED:  
TYPE OF EXCAVATION:

1204262571

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

M49233278

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

Allen O'Donnell  
5/9/2012 2:05:00 PM  
Digital

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

116375

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INVESTIGATOR EMP#:  
INVESTIGATOR NAME:

Joe Hendrickson  
**BASED ON YOUR INVESTIGATION, IS FURTHER INVESTIGATION NEEDED?**  
No

## Fact Based Investigation Customer Information

01820120509009

NIPSCO

(optional)

NOTIFICATION ID:

SELECT A CUSTOMER:

CUSTOMER #:

LOWPROF

Gas Service

O'Donnell Allen - 124207

FACILITY DESCRIPTION:

FACILITY ID:

LOCATOR NAME & EMP #:

LOCATOR NOT KNOWN:

### CHECK ALL THAT APPLY TO INVESTIGATION:

Other

Other: Not Marked

### 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:

This gas service was not marked. It is the property to the east of the house across the street from the requested house. This gas service hugs the house then crosses the street at an angle into the dig area. It does not go to the main closest to the property but down crossing on the neighboring property.

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

N/A

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

N/A

### 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?

No

WAS THE EXCAVATION WITHIN THE TOLERANCE ZONE OF MARKS?

No

EXTENT OF FACILITY DAMAGE

Cut gas service

REPLACEMENT FOOTAGE

N/A

WAS CONTRACTOR ASSISTANCE REQUIRED? IF YES, WHO?

No N/A

WHAT CONTRACTOR EQUIPMENT WAS USED?

Backhoe

IS THE FACILITY SHOWN ON THE UTILITY RECORDS?

No

IF YES, PLEASE LIST RECORD #(S)

N/A