



Pipeline Safety Division Investigation Report

Investigation regarding: **Ed Gaff & Son**

UPPAC Database Record ID: 3540

Investigator: Howard Friend

Report Date: 10/24/2012

Damage Date: 8/6/2012 3:44:34 PM

Damage Address: 102 W 1st North St

City: Versailles

County: Ripley

The Parties

Excavator: **Ed Gaff & Son**

Contact: Kathy Purdy

Address: 9650 York Ridge Rd, Guilford, In 47022

Telephone: (812) 623-4020

Facility Owner: Southeastern Indiana Natural Gas Company

Contact: Robert Wortman

Address: 106 E Main Street, Morristown, IN 46161-1007

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Distribution

Investigation regarding: Ed Gaff & Son

UPPAC Database Record ID: 3540

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: False

Number of Customers Affected: 0

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$528.75

Excavator Activities/Cause of damage information:

Excavator request locates: Yes Indiana 811 ticket Number: 1207240355

Type of Equipment: Hand Tools

Type of work performed: Curb / Sidewalk

Synopsis: A steel natural gas main was damaged during work to install a sidewalk.

Findings: Excavator was working with a valid, accurately marked locate request. Damage occurred when a concrete form stake was driven into it. Reported by Indiana 811; excavator signed for initial notice on 09/18/2012 but has not submitted a response.

Conclusion: Excavator failed to verify location and depth of main prior to setting forms.

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.



Date: 09/18/2012

MAIL MAIL:

The following is in response to your 09/18/2012 request for delivery information on your Certified Mail(TM)/RRE item number 9214 8901 0661 5400 0004 2836 96. The delivery record shows that this item was delivered on 09/18/2012 at 03:43 PM in GUILFORD, IN 47022. The scanned image of the recipient information is provided below.

Signature of Recipient:

Delivery Section	
Signature	<i>Jerome A. Gaff</i>
Printed Name	Jerome A. GAFF

Address of Recipient:

Address	9650 YORKRIDGE
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Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local Post Office or postal representative.

Sincerely,

United States Postal Service

The customer reference info shown below is not validated or endorsed by the United States Postal Service. It is solely for customer use.

3540
KATHY PURDY
ED GAFF & SON
9650 YORKRIDGE RD
GUILFORD IN 47022-9219

10

SOUTHEASTERN IN NATURAL GAS CO., INC

SE LEAK REPORT

Johannigman Excavating Inc

DATE: 8-6-12

REPORTED BY: Keith Moon RECEIVED BY: FR PHONE: IN PERSON: TIME: 8:45 AM/PM
CUSTOMER NAME: Ripley Co. Army Policy Behind HOME PHONE: ACCOUNT #: 95076.0001
ADDRESS OR LOCATION: 102 W. 1ST NORTH ST (W AND NORTH ST) TOWN: Vex

NATURE OF COMPLAINT: ODOR BLOWING GAS DEAD VEGETATION OTHER (DESCRIBE)
IS THE GAS ODOR OR SOUND INSIDE OUTSIDE OF RESIDENCE? LOCATION
HOW LONG HAVE YOU BEEN SMELLING OR HEARING GAS? WILL SOMEONE BE AT HOME FOR US TO CHECK THE LEAK YES NO
TO WHOM DISPATCHED: FR DATE 8-6-12 TIME AM/PM RADIO PHONE ORDER EVACUATION NECESSARY YES NO

INSTRUCTIONS:

CAUSE OF LEAK: STAKE DROVE INTO 2" STREET MATR - STAKE BEING USED FOR CONCRETE SIDEWALK
REPAIR DETAILS: installed 2"x12" Rebar clamp 8-6-12 / 8-10-12 Retained with weld crew and removed 2" clamp and installed weld 2" captin over damaged area!

LEAK LOCATION LEAK CLASS COMPONENT LEAKING CAUSE
 DISTRIBUTION MAIN 1-C PIPE TAP CONNECTION 1 CORROSION 6 EQUIPMENT
 DISTRIBUTION SERVICE 2-B VALVE CUSTOMER PIPING 2 NATURAL FORCES 7 OPERATIONS
 REGULATOR STATION 3-A FITTING CUSTOMER EQUIP 3 EXCAVATION 8 OTHER
 CUSTOMERS PREMISES REGULATOR 4 OUTSIDE FORCES 9 NON HAZARDOUS
5 MATERIAL OR WELDS 10 NO LEAKS

TELEPHONE REPORT TO D.O.T. REQUIRED? YES NO START TIME: 8:37 DATE: 8-6-12 SERVICEMAN: FR

IS WRITTEN REPORT TO D.O.T. REQUIRED? YES NO FINISH TIME: 10:00 DATE: 8-6-12 SERVICEMAN: FR

GAS LOSS OPENING SIZE 2" PRESSURE 30/60 MINUTES 40

IUPPS NUMBER 1207240355 LOCATED BY: 7-24-12 TIME AREA SAFE: 9:17 pm 8-6-12 JF AM/PM

Called IUPPS 8/6 CAMIEO # 1208063509

REEL PIPE & VALVE CO.

SINCE 1939

Contractor - called locate

EQUIPMENT USED:

ITEM:

2" x 12" malleable iron pipe used and returned "to stock"

QTY:

1

\$

Material + Time on Attach work

Johanningman Excavating
5869 S.W.S. 421
Gibbsburg

812-2802, 2800
fax 852-2801
1-800-466-1795 • Fax 317-634-8896

LABOR HOURS

EMPLOYEE N

1 Hr. 23 minutes

60 F.A.

1

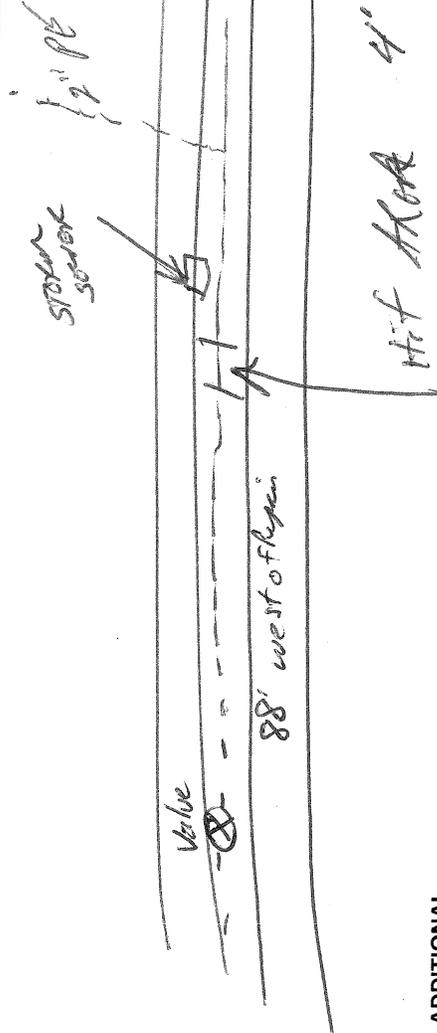
61 J.F.

7 1700-10
Z well begin

CONTRACTOR:

Annex BLDG

DIAGRAM SITE



ADDITIONAL COMMENTS:

Johanningman Exc. Equal addition main and Fred inspected for further damage no problems found!

Johanningman will backfill Accordingly to Gas Co. Specs.

MERRILEES TRUSTWORTHY SUPPLY

300 N. WARPATH DR.
MILAN, IN 47031
{812} 654-2880 FAX {812} 654-2793

Customer Copy

INVOICE

PLEASE REFER TO INVOICE NUMBER
ON ALL CORRESPONDENCE

Page: 1

Invoice: **30085309**

Special :		Time:	15:25:52
Instructions :		Ship Date:	08/06/12
:		Invoice Date:	08/06/12
Sale rep #:	BRANDON BRANDON BAYLOR	Acct rep code:	Due Date: 09/10/12

Sold To: SO. EASTERN IN NATURALGAS CO.	Ship To: SO. EASTERN IN NATURALGAS CO.
P.O. BOX 1007	() 654-2444 106 E MAIN STREET
MORRISTOWN, IN 46161	() 654-2444 MORRISTOWN, IN 46161

Customer #: 0003549

Customer PO:

Order By: FRED

popimg01

10TH
T 67

ORDER	SHIP	L	U/M	ITEM#	DESCRIPTION	Alt Price/Uom	PRICE	EXTENSION
1.00	1.00	P	EA	24530271	22023 STRT HEAD CHIP HAMMER	5.4900 EA	5.4900	5.49
1.00	1.00	P	EA	24950586	606-0 1/4"X12" CHISEL DRIFT PU	11.9900 EA	11.9900	11.99

used for leaks repair Ripley City Annex

annex bldg.

FILLED BY	CHECKED BY	DATE SHIPPED	DRIVER	Sales total	\$17.48
SHIP VIA INDIANA					
RECEIVED COMPLETE AND IN GOOD CONDITION				Taxable	17.48
X				Non-taxable	0.00
				Tax #	
				Tax	1.22

TOTAL \$18.70

Weight: 2 lbs.

2 - Customer Copy





DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: _____

Who is submitting this information?

Name of person providing this information: Fred Rohrig

Business address (number and street): 106 EAST MAIN ST P.O. BOX 1007

City, State, and ZIP code: MORRISTOWN, IN 46161

Telephone number (area code): 812-654-2444 - 1-765-763-6393

Fax number (area code): ~~812~~ 812-654-3834

E-mail address: _____

Excavator Information, if known

Full name: Ed Gaff & Son

Business address (number and street): 9650 York Ridge Rd

City, State, and ZIP code: Guilford, IN 47022

Telephone number (area code): 812-623-4020

Fax number (area code): _____

E-mail address: _____

Excavation or Demolition Information

Excavator type:

Excavation or demolition equipment: STEEL RODS

Type of work performed: sidewalk installation

Was the locate request completed within two working days? *YES*

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

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

Were facility marks visible in the area of excavation? *No - Removed due to construction*

Were facilities marked correctly? *YES*

Type of markings used: *PAINT - Flags*

If other, please specify: _____

Was site marked by "White Lining"? *No*

Were special instructions part of the locate request? *- had instructed MAIN NOT DEEP*

Were maps used to complete the locate request? *'*

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? *NO*

Description of Cause

Select from the list the most accurate cause for the damage:

*STEEL Rod - PROVE INTO MAIN^{2"}
Rod used FOR BRACE FOR
New sidewalk*

Additional Comments

Date and Location of Damage

Date of damage (month, day, year): 8-6-12

County: Ripley

City: Versailles, IN

Street address (number and street, city, state, and ZIP code):
102 W. 1st North St

Nearest intersection: 2nd North + at back - W 2nd North St.

Right of way where damage occurred: Road side

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? NO

If yes, how many affected? —

Time to restore service (in hours): —

Enter number of injuries, if applicable and known: NONE

Enter number of fatalities, if applicable and known: NONE

Property damage, Estimate \$ —

Affected Facility Information

What type of pipeline was damaged? 2" STEEL MAIN

What was the affected facility? —

What was the depth of the facility, in inches? 8" removed 8" LEFT

16" when started

Notification, Locating, Marking

Did excavator request locates prior to commencing work? YES

Enter Indiana 811 ticket number, if known: 1207240355

SOUTHEASTERN IN NATURAL GAS CO., INC

INVOICE NO. _____

WORK ORDER

NAME Ripley Co Army ACCOUNT NO. 0095 07600 001

ADDRESS 102 W 1st North St. PHONE # _____

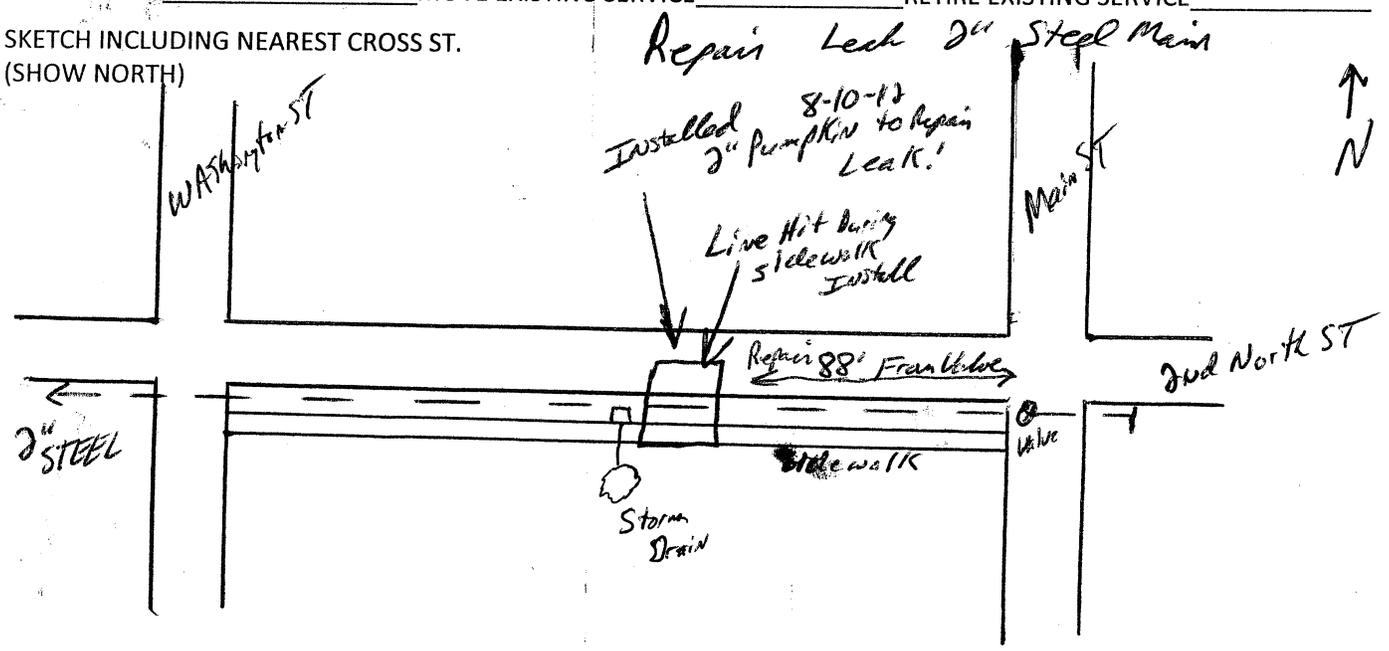
CITY Cassville TYPE OF SERVICE Leak Repair

LOCATION _____ CONTRACTOR C+H/M / SF.

COMMENTS repair damaged gas main

NEW SERVICE MOVE EXISTING SERVICE _____ RETIRE EXISTING SERVICE _____

SKETCH INCLUDING NEAREST CROSS ST.
(SHOW NORTH)



SKETCH PREPARED BY J.F. DATE 8-10-12

METER LOCATION N/A LOCATION STAKED YES/NO

CUSTOMER CONTACTED BY J.F. DATE 8-10-12

LENGTH FROM R.O.W. _____ COST _____ BILL CUSTOMER _____

PAYMENT RECEIVED DATE _____ AMOUNT _____ CHECK NO. _____

IUPPS LOCATE REF# Aug 7 8AM 1208070455 INSTALLATION PACKAGE REC'D _____

DATE OF INSTALLATION 8-10-12 FUSION BY _____ COMPANY SE Gas

PRESSURE TEST@ SOAP PSIG TIME ON _____ TIME OFF _____

ANODE(S) INSTALLED YES- IF YES, MARK LOCATION ON SKETCH

CONDITION OF EXISTING PIPE/COATING Great #166 well ODORANT Good

METER NUMBER _____ READING _____ PRESSURE _____

DATE SERVICE TURNED - ON _____ BY _____

COMPUTER UPDATED _____

SERVICE - 101-380

4-1.25 X0.75 TT
4-2.00 X .75 TT
4-3.00 X0.75 TT
4-4.00 X.075 TT
4-0.75 PIPE
4-0.75 COUP
5-RISER - 0.75
3-B.SER.VALVE-3 (BRASS)
9-TRACER WIRE
3-TAP-N-VALVE - SIZE _____

3-PUNCH-IT 0.75
5-XTION-0.75

6-0.75X12.00
6-0.75X _____
6-1.00X3.00
6-1.00X _____

*REGULATOR
2-043-92-7 - (7" w.c.)
2-043-92-0 - (2 psig)

*METER BAR
1M-M.BAR 1X20LT

*FARM TAP
2-627R
3-VALVE TEE-3:4
6-PIPE 0.75-40C (COATED)
6-0.75X (NIPPLE)
6-0.75X (NIPPLE)
6-0.75X (NIPPLE)
6-0.75X (NIPPLE)
6-0.75X (NIPPLE)
6-0.75 ELL
6-0.75 TEE
6.075 UNION
6-.075 PLUG

9-MARKING TAPE
8-ANODE 1#
8-ANODE 17#
9-SIGN-CARSON.
9-SIGN-METAL
9-SIGN-ST.POST

1 12" Full Seal used
and Returned to STOCK?

1 2" Pumpkin "Per Bob" Details
1 Bell Tap Cost
1 Attached Merrifield Receipt
1 1/4 x 12" chisel

GAS CO. LABOR

HOURS

NAME

2 1/4

J.F.

HOURS

EQUIPMENT

CONTRACTOR

C+HM

CREW SIZE

2

INC. WELD

Yes

2 1/4

HRS-CREW

@ 235.00

\$528.75

FT

TRENCH - SIZE

FT

TRENCH - SIZE

FT

BORE - SIZE

FT

BORE - SIZE

HRS

WELDER

Included

HRS

***INITIAL & DATE

O.M. REVIEW

DATE

INVENTORY ADJUSTED

DATE

CUSTOMER BILLED

DATE

DETAIL RECORDED

DATE

REVIEWED

DATE

SUBMITTED BY

Todd J. Fish

DATE

(TH)

(5/12)