



## Pipeline Safety Division Investigation Report

### Investigation regarding: **Brian Otten**

UPPAC Database Record ID: 3568

Investigator: Howard Friend

Report Date: 10/23/2012

Damage Date: 8/15/2012 10:43:02 AM

Damage Address: 406 Hillview Dr

City: Aurora

County: Dearborn

### The Parties

Excavator: **Brian Otten**

Contact: Brian Otten, Homeowner

Address: 406 Hillview Dr, Aurora, In 47001

Telephone: (812) 584-8090

Facility Owner: Aurora Utilities

Contact: Randolph Turner

Address: 110 Main Street, Aurora, IN 47001

### Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

**Investigation regarding: Brian Otten**

UPPAC Database Record ID: 3568

**Damage Impact**

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$20

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

Excavator request locates: No    Indiana 811 ticket Number:

Type of Equipment: Hand Tools

Type of work performed: Landscaping

**Synopsis:** A natural gas service at a depth of 20” was damaged during landscaping work.

**Findings:** Excavator failed to request that underground facilities be located and marked prior to beginning work. Reported by Indiana 811; excavator signed for initial notice on 09/17/2012 but has not submitted a response.

**Conclusion:** Excavator failed to request that the service be located and marked.

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



Date: 09/17/2012

MAIL MAIL:

The following is in response to your 09/17/2012 request for delivery information on your Certified Mail(TM)/RRE item number 9214 8901 0661 5400 0004 2839 93. The delivery record shows that this item was delivered on 09/17/2012 at 04:02 PM in AURORA, IN 47001. The scanned image of the recipient information is provided below.

Signature of Recipient:

Delivery Section	
ure	<i>Kyle Otten</i>
d	<i>K. Otten</i>

Address of Recipient:

y	<i>303 Hillview</i>
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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.

3568  
BRIAN OTTEN  
BRIAN OTTEN  
303 HILLVIEW DR  
AURORA IN 47001-1625

Was the locate request completed within two working days?

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?

Were facilities marked correctly?

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?

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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**

After all the fire trucks and being grilled by the 811 operator, its doubtful the kid will pick up a shovel ever again. If he does, our guys explained "Call Before You Dig" to him.

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**Date and Location of Damage**Date of damage (*month, day, year*): August 15th, 2012

County: Dearborn

City: Aurora

Street address (*number and street, city, state, and ZIP code*):  
406 Hillview Dr Aurora IN 47001

Nearest intersection: SR 148

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? \_\_\_\_\_

Was there a customer service interruption? Yes

If yes, how many affected? 1

Time to restore service (*in hours*): 1

Enter number of injuries, if applicable and known: \_\_\_\_\_

Enter number of fatalities, if applicable and known: \_\_\_\_\_

Property damage, Estimate \$<sup>20</sup> \_\_\_\_\_

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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? 20

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**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: \_\_\_\_\_



## DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: August 16th 2012

### Who is submitting this information?

Name of person providing this information: Randolph Turner

Business address (*number and street*): 110 Main St

City, State, and ZIP code: Aurora IN 47001

Telephone number (*area code*): 812-926-2745

Fax number (*area code*): 812-926-1763

E-mail address: waterman310@hotmail.com

### Excavator Information, if known

Full name: Brian Otten son of Eric Otten

Business address (*number and street*): 406 Hillview Dr

City, State, and ZIP code: Aurora IN 47001

Telephone number (*area code*): 812-584-8090

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

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

### Excavation or Demolition Information

Excavator type: Occupant

Excavation or demolition equipment: Hand Tools

Type of work performed: Landscaping

# TELEPHONIC REPORT OF CUSTOMER LEAK

City/Company: Aurora Utilities

## Customer Leak Information

Time Call Received: 9:55 a.m.  p.m.

Date: 8-15-12

Name of Caller: Brian Otten

Caller's Phone Number: 812-5848090

Name of Customer if not Caller: Home Owner Eric Otten

Address of Leak: 406 Hillview Dr. Aurora IN 47001

Nature of Complaint    Odor     Blowing Gas     Dead Vegetation   
Other (Describe): Hit line with shovel or pick ax

Is the gas odor or sound inside the residence?    Yes     No   
If yes, where is it located? (at the water heater, at the heating system, at the stove, in the hall, in the kitchen, etc.):

Is the gas odor or sound outside the residence?    Yes     No   
If yes, where is it located? (at the meter, near the street, at the house, in the ditch, at the pool, at the gas grill, etc.):

In yard

How long have you been smelling or hearing the gas? Just hit the line at 9:53 am

Will someone be home for us to check the leak?    Yes     No

## Leak Response Information

Time Investigator Dispatched: 9:55 a.m.  p.m.

Date: 8-15-12

Name of Investigator: G-V T-M

Time of Investigator Arrival at Scene of Leak: 10:00 a.m.  p.m.

Action Taken: Squeezed off line, fix line with two 3/4 couplings and a 20" piece of 3/4 line pressure tested to 100 lb.

Time of Investigator Completion at Scene of Leak: 1:25 a.m.  p.m.

Additional Follow-up Required?    Yes     No

If yes, what type of follow-up? Smell test with Pecator

Additional Remarks:

Investigator Signature: Tim Miller

# MOODY'S of Dayton, Inc.

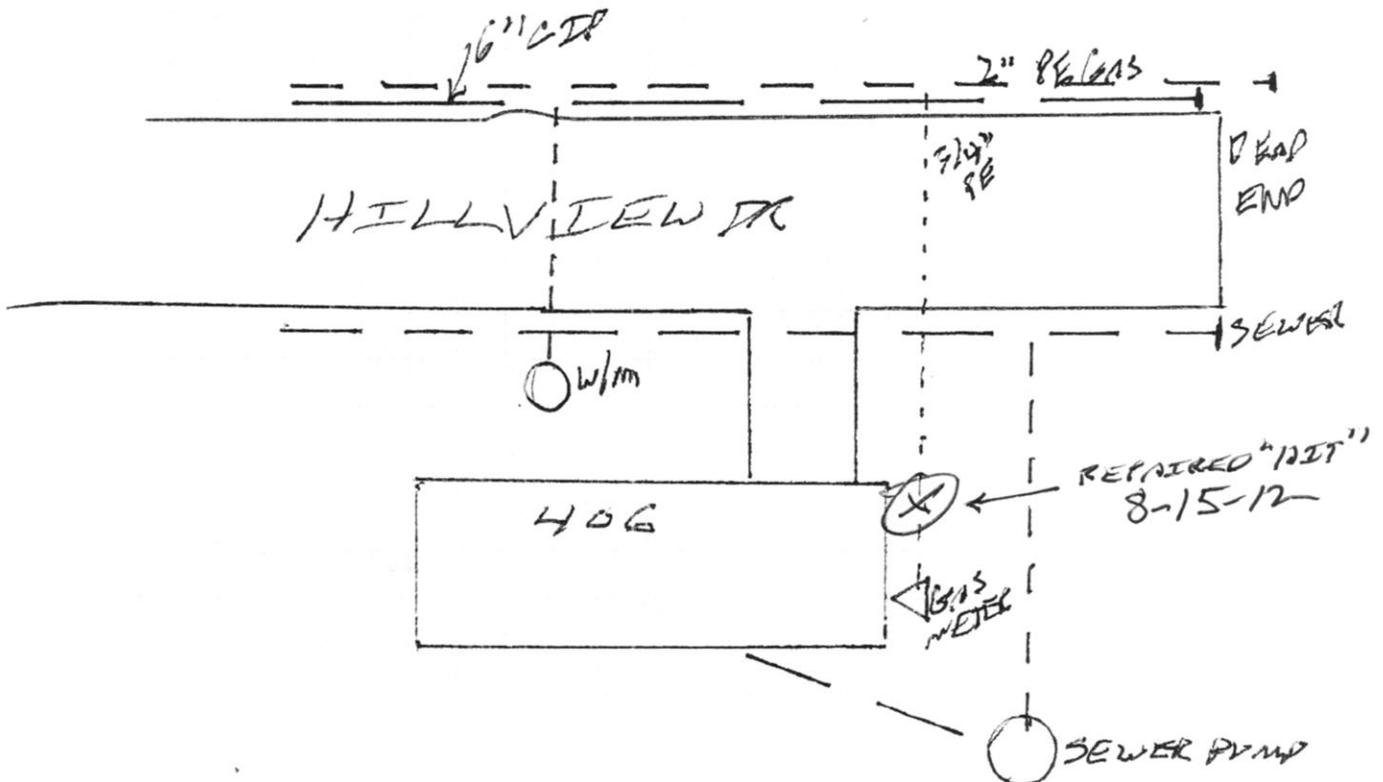
www.moodysofdayton.com

Ground Water Specialists

MIAMISBURG, OH 937-859-4482  
COLUMBUS, OH 614-443-3898



406 HILLVIEW DR		ERIC OTTEN	
GAS		WATER	SEWER
SIZE 3/4" PE	Ⓟ 3/4" PE	Ⓟ 1 1/2" PE	FORCED / PUMP
LENGTH 125'	Ⓛ 40'	Ⓛ 135'	
DEPTH 18"	Ⓛ 36"	Ⓛ 30"	
			MEYERS PUMP



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**Date and Location of Damage**

Date of damage (*month, day, year*): August 15th, 2012

County: Dearborn

City: Aurora

Street address (*number and street, city, state, and ZIP code*):  
406 Hillview Dr Aurora IN 47001

Nearest intersection: SR 148

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*): 1

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$<sup>20</sup>

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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? 20

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**Notification, Locating, Marking**

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: none

Message Confirmation Report

AUG-16-2012 06:30 AM THU

Fax Number : 8129261763  
Name : AURORA UTILITIES

Name/Number : 13172326758  
Page : 4  
Start Time : AUG-16-2012 06:30AM THU  
Elapsed Time : 00' 34"  
Mode : STD ECM  
Results : [O.K]

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OTTEN 8-15