



Pipeline Safety Division Investigation Report

Investigation regarding: Mahurin Bore Pro Inc

UPPAC Database Record ID: 3113

Investigator: Howard Friend

Report Date: 8/13/2012

Damage Date: 5/29/2012 2:05:46 PM

Damage Address: Memorial Knoll Dr

City: Brownsburg

County: Hendricks

The Parties

Excavator: **Mahurin Bore Pro Inc**

Contact: Dustin Mahurin

Address: 2425 Mellen Road, Indianapolis, In 46231

Telephone:

Facility Owner: Vectren

Contact: Darlene Kulhanek

Address: 1 N Main Street, Evansville, IN 47702

Pipeline Facility

Facility Type: Natural Gas

Facility Function: Service/Drop

Investigation regarding: Mahurin Bore Pro Inc

UPPAC Database Record ID: 3113

Damage Impact

Product release: Yes

Ignition: No

Service Interruption: True

Number of Customers Affected: 1

Injuries: 0

Fatalities: 0

Repair Cost (if known): \$1228

Excavator Activities/Cause of damage information:

Excavator request locates: No Indiana 811 ticket Number:

Type of Equipment: Hand Tools

Type of work performed: Telecommunications

Synopsis: A natural gas service was damaged during excavation to install a telecommunication line.

Findings: Reported by Indiana 811; excavator did not respond to initial notice mailed July 13, 2012.. The excavator was working under locates for American Utility Corp. The excavator was trying to expose the marked facility by hand and damaged the line.

Conclusion: There was a failure to provide notice of excavation.

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



INDIANA UTILITY REGULATORY COMMISSION
101 W. WASHINGTON STREET, SUITE 1500E
INDIANAPOLIS, INDIANA 46204-3407

<http://www.in.gov/iurc>
Office: (317) 232-2701
Facsimile: (317) 232-6758

July 13, 2012

Ms. Darlene Kulhanek
Vectren
1 N Main Street
Evansville, IN 47702

Subject: Investigation Request for Information

Date of Event: 5/29/2012

Event Location: Memorial Knoll Dr, Brownsburg

Facility Owner: Vectren

Excavator: American Utility Corporation

Other Party: N/A

Pipeline Division Case No. 3113

Dear Ms. Kulhanek:

Pursuant to Indiana Code 8-1-26, the *Indiana Damage to Underground Facilities Act*, the Pipeline Safety Division of the Indiana Utility Regulatory Commission ("Pipeline Division") is required to investigate reported incidents of alleged statutory violations involving underground pipeline safety. The purpose of this statute is to promote excavation and pipeline safety and to reduce the imminent danger to life, health, property, or loss of service associated with unsafe digging practices. Please note that the investigation does not entail determining criminal liability or a civil determination of fault or damages; however, it does determine whether any statutory violations were committed regarding public safety.

The Pipeline Division received information regarding potential statutory violations regarding the date and location referenced above. You were identified as a person or entity that might have information that would assist the Pipeline Division in its investigation. Therefore, we have contacted you in order to receive the full account of information in order to make a fair determination related to the circumstances of this incident.

We have asked all involved parties, entities and witnesses to provide *written* information within *30 days* in order to meet legal deadlines to conclude our investigation. **Please consider this letter as a formal request to receive any and all information and evidence (including a narrative, documentation, maps, photographs or any other written information) you can access regarding anything you may know about the incident referenced above.**



DAMAGE INFORMATION REPORT – PIPELINE SAFETY DIVISION

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

Submitted to IURC-Pipeline Safety on: 07-19-2012

Who is submitting this information?

Name of person providing this information: Darlene Kulhanek

Business address (*number and street*): 1 Main Street

City, State, and ZIP code: Evansville, IN 47711

Telephone number (*area code*): 812-491-4227

Fax number (*area code*): 812-491-4504

E-mail address: dkulhanek@vectren.com

Excavator Information, if known

Full name: Mahurin Bore Pro Inc. (American Utility Corp)

Business address (*number and street*): 6218 S Carroll Road

City, State, and ZIP code: Indianapolis, IN 46259

Telephone number (*area code*): 317-945-4357

Fax number (*area code*): Unknown

E-mail address: Unknown

Excavation or Demolition Information

Excavator type: Contractor

Excavation or demolition equipment: Hand Tools

Type of work performed: Telecommunications

Date and Location of Damage

Date of damage (*month, day, year*): 5-29-2012

County: Hendricks

City: Brownsburg

Street address (*number and street, city, state, and ZIP code*):
10386 Memorial Knoll Drive, Indianapolis, IN

Nearest intersection: Unknown

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? 1

Time to restore service (*in hours*): 1.5

Enter number of injuries, if applicable and known: 0

Enter number of fatalities, if applicable and known: 0

Property damage, Estimate \$ 1,227.86

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? _____

Notification, Locating, Marking

Did excavator request locates prior to commencing work? No

Enter Indiana 811 ticket number, if known: 1205231181 (American Utility Corp)

Was the locate request completed within two working days? Yes

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

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? Yes

Type of markings used: Paint

If other, please specify: _____

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

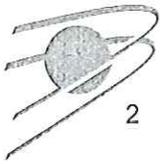
Did the excavator notify 911 in the event of a release of product? Unknown/Other

Description of Cause

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

Additional Comments

1" plastic service damaged by shovel. Did not request locates.



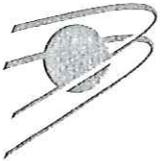
2 VECTREN ENERGY DELIVERY OF INDIANA - NORTH

NOW DUE
\$1,227.86

MAHURIN BORE PRO INC
6218 S CARROLL ROAD
INDIANAPOLIS, IN 46259

Type: GAS
Invoice: FDS0016294
BillToID: 32000
Billing Date: 7/19/2012
Date of Loss: 5/29/2012
5953 103.0510

Please return this portion with your remittance.



Mail Payment To: VECTREN ENERGY DELIVERY OF INDIANA - NORTH
Vectren Utilities Holding Group, Inc.
1239 Reliable Parkway
Chicago, IL 60686-0012
Inquiries: 1-877-902-2934, Mon.-Fri., 8-5
Risk Management/Claims Department

NOW DUE
\$1,227.86

MAHURIN BORE PRO INC
6218 S CARROLL ROAD
INDIANAPOLIS, IN 46259

Type: GAS
Invoice: FDS0016294
BillToID: 32000
Billing Date: 7/19/2012
Date of Loss: 5/29/2012

Invoice For Costs to Repair and Reconstruct Damaged Property

Address: 10386 MEMORIAL KNOLL DR, INDIANAPOLIS
1" PLASTIC SERVICE PUNCTURED BY SHOVEL. DID NOT REQUEST LOCATES.

Material:	\$78.70
Company Labor:	\$1,017.28
Contract Labor:	\$0.00
Transportation/Equipment:	\$78.74
Misc:	\$0.00
Gas Loss:	\$53.14
Adjustments:	\$0.00
Payments:	\$0.00
<hr/> Total:	\$1,227.86

5953 103.0510

Remember, call two (2) working days before digging. Contact I.U.P.P.S. at 1-800-382-5544.

Madwin Base Pro

Vectren Corporation
Form 3112 (Rev.0711) (CIS 10/11)

FDS 0016294

Task No: 103.0510 Capital O & M (circle one)
Date of Damage 5/29/12
Cost Center # 5953
Time Occurred 7:40 2:14 am/pm
Time Found 6:46 2:25 am/pm
Latitude 39.85820 Longitude: 86.34026

Vectren Claim Number: _____
Police Report /MO #: _____

Vectren Claims Camera:

FACILITIES DAMAGE REPORT

VE01726
Form 3112

GAS

DAMAGE SITE:
Address 10386 MEMORIAL Knoll Dr. Lot # _____
County HENRICKS City INDIANAPOLIS State IN Township LINCOLN

FACILITY TYPE:

- Distribution Propane
 Service Storage
 Transmission: (include supplemental report)

FACILITIES DAMAGED:	ORIFICE SIZE(S):	(1)	(2)	(3)
<input type="checkbox"/> Farm Tap	0.50 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heater	5/8 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Main	0.75 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Residential)	1.00 inch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Meter (Industrial / Commercial)	1.25 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Odorizer	2.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Regulator Station	3.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Relief Valve	4.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Riser	5.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Service Line	6.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Valve	10.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	12.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	16.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	20.00 inch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____				

VISUAL OBSERVATION AT DAMAGE SITE:

- Visual Observation: Above Ground Below Ground 5/29
- Locate Applicable Yes No N/S
- Facilities Properly Marked Yes No N/S
- Marking Methods: Conventional Flags None
 Offset Paint Stakes Whiskers
- Locate Marking Faded: Yes No N/S
- Wrong Address Requested Yes No N/S

Facilities Improperly Located:

- Qualified Locator Could Not Have Accurately Located
- Inaccurate Maps / Cards
- Broken or No Tracer Wire (Plastic)
- Insulation Preventing Accurate Locate

Locator Error:

- Failure to Follow Policy
- Inappropriate Site Markings
- Incomplete Locate
- No Locates Performed
- Qualified Locator Could Have Accurately Located
- Wrong Address Located
- Marking Off By: _____ (Feet / Inches)

TYPE OF MATERIAL:	DAMAGE TYPE:	PRESSURE:
<input type="checkbox"/> Cast Iron	<input type="checkbox"/> Severed	<input type="checkbox"/> 25 PSIG
<input type="checkbox"/> Plastic (HDPE)	<input type="checkbox"/> Not Cut	<input type="checkbox"/> 40 PSIG
<input checked="" type="checkbox"/> Plastic (MDPE)	<input checked="" type="checkbox"/> Severed Puncture	<input type="checkbox"/> 50 PSIG
<input type="checkbox"/> Steel	Size <u>.5" x .5"</u>	<input type="checkbox"/> 55 PSIG
		<input checked="" type="checkbox"/> 60 PSIG
		<input type="checkbox"/> 6 WC (2163)
		<input type="checkbox"/> 7 WC (252)
<input type="checkbox"/> Other _____		<input type="checkbox"/> Other _____

- PROTECTION IN PLACE:
- Building Fence None
- Post Rail Vault N/A
- Other _____

DURATION OF ESCAPING GAS:

Minutes: 31

LEAK REPORT NUMBER: 08980

EFV Activated Yes No N/S

- FEED TYPE:
- One-Way Feed
- Two-Way Feed

Number of Customers Affected: 1

Total Hours Service Was Off: 1.50

SERVICE ORDER NUMBER: 5260088

- DAMAGED BY:
- Company Crew
- Contractor
- County
- Developer
- Farmer
- Municipality
- Property Owner/ Tenant
- Railroad
- State
- Unknown
- Utility
- Vehicle Accident
- Other _____

TYPE OF CONSTRUCTION:

- Agriculture
- Building Construction
- Building Demolition
- Cable TV
- Curbs / Sidewalk
- Drainage
- Driveway
- Electric
- Engineering / Surveying
- Fencing
- Grading
- Irrigation
- Landscaping
- Liquid Pipeline
- Milling
- Pole
- Natural Gas
- Public Transit Authority
- Railroad Maintenance
- Other PHONE

- WORKING FOR:
- City County Developer
- State Property Owner
- Utility

NOTIFICATIONS AND OTHER DETAILS OF LOCATE:

Locate Ticket: 120523/181

Date: 5/29/12 Time: _____ am / pm

TYPE OF REQUEST:

- Regular Request Emergency Request
- Locate Company Notified

Contact Name: _____

Time Called: _____ am / pm

Time Locator Arrived at the Site: _____ am / pm

Company Notified of Locate Near Critical Facilities

Yes No N/S

Copy of Mark Out Request Provided Within 2 Working Days

Yes No N/S

ONE-CALL CENTER:

- IUPPS
- OUPS
- Unknown

CONTINUE ON BACK - INCLUDE ANY OBSERVATIONS / DIAGRAMS

Vectren Claim Number: _____

TYPE OF EQUIPMENT:

- Auger
- Backhoe / Track hoe
- Boring
- Drilling
- Explosives
- Farm Equipment
- Grader / Scraper
- Hand Tools
- Milling Equipment
- Plow
- Probing Device
- Trencher
- Vacuum Equipment
- Vehicle
- Other _____

ROOT DAMAGING CAUSE:

- Abandoned Facility
- Deteriorated Facility
- Facility Could Not be Found/ Located
- Facility Was Not Located / Marked
- Failure to Maintain Clearance
- Failure to Maintain Marks
- Failure to Support Exposed Facility
- Failure to Use Hand Tools Where Required
- Improper Backfilling
- Incorrect Records / Maps
- Marking or Location Not Sufficient
- No Notification Made to One-Call
- One-Call Notification Error
- Previous Damage
- Wrong Information Provided
- Other DAMAGE while HAND Digging To split Gas line

CONTRACTOR REPAIRS:

- Contractor Working for Vectren Made Repairs at Own Expense
 - Yes No N/S
- Contractor Repaired Damage
 - Yes No N/S

Name of Contractor: _____
 # of Regular Hours; _____
 # of Overtime Hours; _____
 # of Regular Hours; _____
 Crew Type: _____

MATERIALS OR ROAD WORK:

- Meter was replaced _____ (Stores Code)
- Regulator Was Replaced _____ (Stores Code)
- Temporary Asphalt Repair: _____ (sq. ft.)
- Permanent Asphalt Repair: _____ (sq. ft.)

Did Excavator Notify You

- Yes No

Excavation Required

- Yes No

Media at Site

- Yes No

Was There Ignition of Gas?

- Yes No

RIGHT OF WAY:

- Dedicated Utility Easement
- Federal Utility Easement
- Pipeline
- Power / Transmission Line
- Private - Business
- Private - Easement
- Private - Land Owner
- Public - County Road
- Public - Interstate Highway
- Public - Other
- Public - State Highway
- Public - City Street
- Unknown

INVOICE:

- Yes No N/S

DAMAGING PARTY:

Name: MAHURIN BorePro INC
 Address: _____
 City/ State/ Zip: INDIANAPOLIS IN
 Phone: (317) 945-4357
 Prepared / Investigated By: _____ Date: _____

PARTY TO INVOICE:

Name: _____
 Address: _____
 City/ State/ Zip: _____
 Phone: () _____
 Reviewed by Field Supervisor: Alexander Date: 6-1-12

They where HAND Digging to Find Gas Service. Hand Broun, and Hit Service with HAND tool.

NORMAL NOTICE

Ticket : 1205231181 Date: 05/23/2012 Time: 09:49 Oper: JELEWITZ Chan:086

State: IN Cnty: HENDRICKS Twp: LINCOLN
Cityname: BROWNSBURG Inside: Y Near: N
Subdivision: EAGLE CROSSING

Address :

Street : MEMORIAL KNOLL DR
Cross 1 : EAGLE CROSSING BLVD Within 1/4 mile: Y
Location: STARTING ON THE NORTHEAST CORNER OF THE ABOVE INTERSECTION -- LOCATE
THE NORTH SIDE OF MEMORIAL KNOLL DRIVE GOING EAST FOR APPROX 150 FEET ENDING AT
PEDESTAL NUMBER 10386
***Boring Where = UNDER THE RIGHT OF WAY AND DRIVEWAYS
:
Grids : 3951C8620C 3951B8620C

Work type : BURYING TELEPHONE SERVICE

Done for : AT&T

Start date: 05/25/2012 Time: 10:00 Hours notice: 48/048 Priority: NORM

Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: N

Duration : 2 DAYS Depth: 5 FEET

Company : AMERICAN UTILITY CORPORATION Type: CONT

Co addr : 2425 MELON ROAD

City : INDIANAPOLIS State: IN Zip: 46231

Caller : MARK MORRON Phone: (317)484-2333

Contact : MARK MORRON - CELL Phone:

BestTime:

Mobile : (317)710-2459

Fax : (317)484-2331

Email : AUC5543@SBCGLOBAL.NET

Remarks : All tickets are taken and processed on Eastern Daylight Time

Will you be white-lining the dig site area? YES

:

Submitted date: 05/23/2012 Time: 09:49

Members: CV ID1451 ID1501 ID3463 ID4471 ID5555 ID9999 SBCIN SM

Member Name**Facility Types**

AQUA INDIANA HENDRICKS	
AT&T - DISTRIBUTION	COMMUNICATIONS
BRIGHT HOUSE NETWORKS INDIANAPOLIS	CABLE TV
CITIZENS WATER / FORMERLY VEOLIA WATER	WATER
COMCAST CABLEVISION - INDIANAPOLIS	CABLE TV
ENTERPRISE PRODUCTS OPERATING , LLC (IND)	PIPELINE
INDIANAPOLIS POWER & LIGHT COMPANY	ELECTRIC
VECTREN - DANVILLE	GAS

[View Map](#)[Close Map](#)

DAMAGE SEE REMARKS

Ticket : 1205293076 Date: 05/29/2012 Time: 14:04 Oper: SPOPE Chan:044

State: IN Cnty: HENDRICKS Twp: LINCOLN
 Cityname: BROWNSBURG Inside: N Near: Y
 Subdivision: EAGLE CROSSING

Address :

Street : MEMORIAL KNOLL DR
 Cross 1 : EAGLE CROSSING BLVD Within 1/4 mile: Y
 Location: STARTING ON THE NORTHEAST CORNER OF THE ABOVE INTERSECTION -- LOCATE
 THE NORTH SIDE OF MEMORIAL KNOLL DRIVE GOING EAST FOR APPROX 150 FEET ENDING AT
 PEDESTAL NUMBER 10386

***Boring Where = UNDER THE RIGHT OF WAY AND DRIVEWAYS

:
 Grids : 3951C8620C 3951B8620C

Work type : BURYING TELEPHONE SERVICE
 Done for : AT&T
 Start date: 05/29/2012 Time: 14:04 Hours notice: 0/000 Priority: EMER
 Ug/Oh/Both: U Blasting: N Boring: Y Railroad: N Emergency: Y
 Duration : 2 DAYS Depth: 5 FEET

Company : AMERICAN UTILITY CORPORATION Type: CONT
 Co addr : 2425 MELON ROAD
 City : INDIANAPOLIS State: IN Zip: 46231
 Caller : DUSTIN MAHURIN Phone: (317)484-2333
 Contact : MARK MORRON - CELL Phone:
 BestTime:
 Mobile : (317)710-2459
 Fax : (317)484-2331
 Email : AUC5543@SBCGLOBAL.NET

Remarks : All tickets are taken and processed on Eastern Daylight Time
 CITIZEN GAS LINE HAS BEEN CUT--LINE IS BLOWING--ADVISED TO CALL 911--LINE WAS
 CUT IN FRONT OF 10386 MEMORIAL KNOLL DR--YELLOW 3/4 INCH LINE--CREW ON
 SITE--PREV TICKET 1205231181--THANK YOU
 Will you be white-lining the dig site area? YES

:
 Submitted date: 05/29/2012 Time: 14:04
 Members: CV ID1451 ID1501 ID3463 ID4471 ID5555 ID9999 SBCIN SM

Member Name	Facility Types
AQUA INDIANA HENDRICKS	
AT&T - DISTRIBUTION	COMMUNICATIONS
BRIGHT HOUSE NETWORKS INDIANAPOLIS	CABLE TV
CITIZENS WATER / FORMERLY VEOLIA WATER	WATER
COMCAST CABLEVISION - INDIANAPOLIS	CABLE TV
ENTERPRISE PRODUCTS OPERATING , LLC (IND)	PIPELINE
INDIANAPOLIS POWER & LIGHT COMPANY	ELECTRIC
VECTREN - DANVILLE	GAS

[View Map](#)

[Close Map](#)

Service Order Status

Enter Service Order Number:

5260088



Print Form

Refresh Data

Banner Instance: CS03PROD CS01PROD CS02PROD
Order Number: N5260088
Order Type: LEAK
Order Status: Completed

Customer: 620959904 - PATEL RUCHITA
Prem: 5712841 - 10386 MEMORIAL KNOLL DR

Technician: 5606 - Poore, Rusty

Order Dates and Times

Need Date: 5/29/2012 2:22:00 PM
Time Created: 5/29/2012 2:14:16 PM
Time Dispatched: 5/29/2012 2:14:16 PM
Time In Route: 5/29/2012 2:14:49 PM
Time On-Site: 5/29/2012 2:27:32 PM
Tech Complete: 5/29/2012 3:08:00 PM
Time Closed: 5/29/2012 3:08:00 PM

Events Performed/Completion Code

LKOT - CMP

Meter Information

Current Read Status

Old Meter: 7789 Inactive
New Meter:

Completion Notes

**CONTRACTOR HIT 1"PL SERVICE, COMPANY CREW ONSITE MAKING REPAIRS, LEFT OK, RPOO RE

Request Notes

PER AMBER W/811 HIT LINE 3/4" YELLOW/ BLOWING/ XST EAGLE CROSSING/ CONT PERSONMARK @ 317-710-2459..O RIG# 1205231181/DAM# 1205293076 CNTY HENDRICKS/TOWNSHIP IS LINCOLN

MDSI Event Dates and Times

Event	Date/Time	User
AsnAssignmentManualAck_evt	5/29/2012 2:14:46 PM	Poore, Rusty
AsnAssignmentEnRoute_evt	5/29/2012 2:14:49 PM	Poore, Rusty
AsnAssignmentOnSite_evt	5/29/2012 2:27:32 PM	Poore, Rusty
OrdOrderComplete_evt	5/29/2012 3:08:00 PM	Poore, Rusty

NOTE:The Reporting database replicates in near real-time; it has been approximately 1 minute(s) since the last transaction replicated.