

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF SAFETY AND ENVIRONMENTAL ENFORCEMENT
GULF OF MEXICO REGION

ACCIDENT INVESTIGATION REPORT

1. OCCURRED

DATE: 08-JUL-2012 TIME: 1030 HOURS

2. OPERATOR:

GOM Shelf LLC

REPRESENTATIVE:

TELEPHONE:

CONTRACTOR: Performance Energy Service, LLC

REPRESENTATIVE:

TELEPHONE:

- STRUCTURAL DAMAGE
- CRANE
- OTHER LIFTING DEVICE
- DAMAGED/DISABLED SAFETY SYS.
- INCIDENT >\$25K
- H2S/15MIN./20PPM
- REQUIRED MUSTER
- SHUTDOWN FROM GAS RELEASE
- OTHER Failed Communication

3. OPERATOR/CONTRACTOR REPRESENTATIVE/SUPERVISOR
ON SITE AT TIME OF INCIDENT:

6. OPERATION:

4. LEASE: 00175

AREA: GI LATITUDE: 29.000682
BLOCK: 43 LONGITUDE: -89.858304

- PRODUCTION
- DRILLING
- WORKOVER
- COMPLETION
- HELICOPTER
- MOTOR VESSEL
- PIPELINE SEGMENT NO.
- OTHER Construction

5. PLATFORM: AS-SEP

RIG NAME:

6. ACTIVITY:

- EXPLORATION (POE)
- DEVELOPMENT/PRODUCTION (DOCD/POD)

8. CAUSE:

7. TYPE:

HISTORIC INJURY

- REQUIRED EVACUATION 1
- LTA (1-3 days)
- LTA (>3 days) 1
- RW/JT (1-3 days)
- RW/JT (>3 days)
- Other Injury

- EQUIPMENT FAILURE
- HUMAN ERROR
- EXTERNAL DAMAGE
- SLIP/TRIP/FALL
- WEATHER RELATED
- LEAK
- UPSET H2O TREATING
- OVERBOARD DRILLING FLUID
- OTHER _____

- FATALITY
- POLLUTION
- FIRE
- EXPLOSION

- LWC
- HISTORIC BLOWOUT
 - UNDERGROUND
 - SURFACE
 - DEVERTER
 - SURFACE EQUIPMENT FAILURE OR PROCEDURES

9. WATER DEPTH: 110 FT.
10. DISTANCE FROM SHORE: 17 MI.
11. WIND DIRECTION: W
SPEED: 0 M.P.H.
12. CURRENT DIRECTION:
SPEED: M.P.H.
13. SEA STATE: FT.

COLLISION HISTORIC >\$25K <=\$25K

17. INVESTIGATION FINDINGS:

On 8 July 2012, at approximately 10:30 hours, during construction operations, a third-party contractor, employed by Performance Energy Service (PES) was injured when he was struck by a plumbers plug. At the time of the incident, two PES contractors were in the process of removing the plumbers plug from a 20" process line. Contractor #1 began the pressure bleed-off process from the plug when thermal pressure caused the plug to eject and project approximately 9 feet, hitting the platform's support beam and striking contractor #2 in the right leg. The PES contractor failed to communicate with the GOM Shelf consultant prior to removing the plumbers plug. The contractor did not have a proper Job Safety Analysis (JSA) for this specific job scope that identified the potential threat of thermal pressure build-up, projectile hazards, body placement and safety warnings when working with plugs. The Injured Person (IP) was evacuated for medical evaluation and was diagnosed with a fractured tibia.

18. LIST THE PROBABLE CAUSE(S) OF ACCIDENT:

A. Failure to check for thermal pressure. The build-up of thermal pressure in the 20" line caused the plumbers plug to eject.

19. LIST THE CONTRIBUTING CAUSE(S) OF ACCIDENT:

- A. Improper JSA for the job scope that failed to identify potential hazards.
- B. Failure to communicate with the GOM Shelf Consultant who could have overseen safety.
- C. Failure to read the warning labels for plug as the JSA should have directed.
- D. Personnel standing in a hazardous area that the JSA should have precluded.

20. LIST THE ADDITIONAL INFORMATION:

Plug Information:

- A. The plug traveled 9' from the end of the flange opening to the support beam.
- B. The plug is 2' 11" in length, 12" diameter deflated, 24" inflated.
- C. The airline and support line to inflate and deflate the plug is 20' in length.
- D. The plug was completely inserted into the 20" diameter pipe.
- E. The 20" pipe had an open thread-o-let 9"-10" from flange opening.
- F. Plumbers plugs were ordered for this shut-in by another contractor (DII).

21. PROPERTY DAMAGED:

None

NATURE OF DAMAGE:

None

ESTIMATED AMOUNT (TOTAL):

N/A

22. RECOMMENDATIONS TO PREVENT RECURRENCE NARRATIVE:

The BSEE New Orleans District makes no recommendations to the Agency.

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: **YES**

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE:

G-110 - Operation of removing plumbers plug was not conducted in a safe and workmanlike manner causing injury to personnel.

25. DATE OF ONSITE INVESTIGATION:

24-JUL-2012

26. ONSITE TEAM MEMBERS:

**Kimberly Criddle / Otho Barnes /
Darryl Williams /**

29. ACCIDENT INVESTIGATION

PANEL FORMED: **NO**

OCS REPORT:

30. DISTRICT SUPERVISOR:

David J. Trocquet

APPROVED

DATE: **15-AUG-2012**

INJURY/FATALITY/WITNESS ATTACHMENT

OPERATOR REPRESENTATIVE

CONTRACTOR REPRESENTATIVE

OTHER _____

INJURY

FATALITY

WITNESS

NAME:

HOME ADDRESS:

CITY:

STATE:

WORK PHONE:

TOTAL OFFSHORE EXPERIENCE:

YEARS

EMPLOYED BY:

BUSINESS ADDRESS:

CITY:

STATE:

ZIP CODE:

OPERATOR REPRESENTATIVE

CONTRACTOR REPRESENTATIVE

OTHER _____

INJURY

FATALITY

WITNESS

NAME:

HOME ADDRESS:

CITY:

STATE:

WORK PHONE:

TOTAL OFFSHORE EXPERIENCE:

YEARS

EMPLOYED BY:

BUSINESS ADDRESS:

CITY:

STATE:

ZIP CODE:

