DOT	US Department of Transportation
PHMSA	Pipeline and Hazardous Materials Safety Administration
OPS	Office of Pipeline Safety
	Eastern Region

Principal Investigator	Chris D'Souza
Senior Accident Investigator	Michael Yazemboski
Region Director	Byron Coy
Date of Report	7/12/2013
Subject	Failure Investigation Report – Williams Gas Pipeline-Transco-
	North Bergen, NJ, 72 <sup>nd</sup> Street Interstate Trans Lateral Leak

### **Operator, Location, & Consequences**

Date of Failure4/2/2012		
Commodity Released	Natural Gas	
City/County & State	North Bergen, Hudson County, New Jersey	
OpID & Operator Name	19570 – Williams Gas Pipeline-Transco	
Unit # & Unit Name	181 – Princeton Division Office NJ	
SMART Activity #	139107	
Milepost / Location	MP 2.5, 72 <sup>nd</sup> Street Lateral	
	Latitude: 40.7981737 Longitude: 74.01659992	
Type of Failure	Leak Due to Crack in Pipe Caused by Rock Impingement	
Fatalities	0	
Injuries	0	
Description of Area Impacted	Class 3, High Consequence Area (HCA)	
Total Costs	\$295,000—total estimated cost of lost gas is \$5,467	

#### Failure Investigation Report -

Williams Gas Pipeline-Transco; North Bergen, NJ, 72<sup>nd</sup> Street Interstate Trans Lateral Leak Failure Date: 4/2/2012

#### **Executive Summary**

On April 2, 2012, Transcontinental Gas Pipeline Company, LLC (Transco), owned by Williams Partners, reported a leak on their 72<sup>nd</sup> Street Interstate Transmission Lateral located in North Bergen, New Jersey (NRC Report #1007578). The leak was discovered by contractor personnel during the process of excavating for an anomaly that was identified during an in-line-inspection tool run conducted on March 3, 2012. The contractor performing the work for Transco was the Napp-Grecco Company. During the excavation process, workers discovered a rock in contact with the bottom of the pipe at the 7-o'clock position. Upon removing the rock, the pipeline began to leak. Upon further investigation, a 1.5 percent dent with a gouge and crack was identified. The pipeline was taken out of service, and the leaking segment was cut out and replaced with new pipe. There was no fire or injuries reported as a result of this incident. There were no service interruptions as a result of this incident.

#### **System Details**

The Transcontinental Gas Pipeline Company (Transco) transports natural gas through over 10,000 miles of pipeline extending from South Texas to New York City through 12 states. Transco's 72<sup>nd</sup> Street Lateral, located in New Jersey, is approximately 2.73 miles in length and interconnects with their Mainline-B (Appendix A-Leak Location Map). This lateral is fed by Transco's main line system and serves Consolidated Edison's distribution system that supplies natural gas to New York City.

The 72<sup>nd</sup> Street lateral consists of API-5L 36-inch-diameter, 0.5-inch-thick wall, X52 grade pipe that was installed in 1959 and is coated with an asphalt coating material. At the time of the leak, the pressure in the pipeline was approximately 272 psia, which is below the maximum allowable operating pressure (MAOP) of 350 psia. The line is cathodically protected using an impressed current system.

There are no previous operational issues on this lateral, and no system factors contributed to the physical circumstances of the inner wall crack.

#### **Events Leading up to the Failure**

On April 2, 2012, at approximately 2:00 p.m., contractor personnel removed a rock that was in contact with the pipe at approximately the 7-o'clock position while excavating an anomaly on the 72<sup>nd</sup> Street Interstate Lateral Pipeline (Appendix B-Photos). Upon removing the rock, the pipeline began to leak. At the time of the leak, the line was operating at 272, psia which is below the maximum allowable operating pressure (MAOP) of 350 psia for the pipeline. Pressure records for the Central Manhattan metering and regulating station (upstream of the leak) and for the J246 Hudson River Valve Station (downstream) confirmed the 272 psia operating pressure at the time of the incident. According to operating personnel and records reviewed as part of the investigation, the leak did not exist prior to the excavation. Gas detection equipment was used on-site to detect traces of natural gas prior to and during the excavation process. No gas was initially detected prior to or during the excavation process.

**Failure Investigation Report** – Williams Gas Pipeline-Transco; North Bergen, NJ, 72<sup>nd</sup> Street Interstate Trans Lateral Leak Failure Date: 4/2/2012

#### **Emergency Response**

Upon discovering the leak, Transco notified Consolidated Edison of the need to take their line out of service and adjusted their facilities accordingly to accommodate the line outage needed for the anomaly excavation and cut out.

Date / Time	Action
4/2/2012 7:00 a.m.	North Bergen Police Department shut down 70th St. and Smith St. The contractor, Napp-Grecco Company, began removing rock from under the pipeline in preparation for anomaly inspection.
4/2/2012 9:00 a.m.	Pipeline Integrity showed up on site to evaluate the anomaly.
4/2/2012 2:33 p.m.	While removing rock from under the pipe at the location of the anomaly, the pipe began leaking, work was immediately shut down, and all equipment and ignition sources in the area were shutdown at 2:33p.m. The North Bergen Police Department was notified, shut down the work area to pedestrian traffic, and called in the North Bergen Fire Department as a precaution. The fire department arrived on-site as added precaution.
4/2/2012 2:35 p.m.	The Chief Inspector notified the Station 240 crew of the incident, and key personnel were sent to valve locations in preparation of taking the line out of service. The line was isolated at approximately 6:00 p.m. by closing valves J246 and J249 downstream of the leak and J518 upstream of the leak location. The distance between the upstream and downstream valves is approximately 3.68 miles.
4/2/2012 3:00 p.m.	An Incident Notification was made to the NRC by Transcontinental Gas Pipeline Company, LLC (Appendix C- NRC Report 1007578).
4/2/2012 6:33 p.m.	The line pressure was down to 163 psig, and the leak at the anomaly location could no longer be heard.
4/2/12 7:46 p.m.	The pressure in the line was down to 0 psig. The line was purged of gas. The site was secured for the night.
4/3/2012 7:00 a.m.	The North Bergen Police Department shut down 70th St. and Smith St., and the contractor began removing plates from the street and excavated upstream and downstream of the anomaly to establish bell holes in preparation to cut out the line.
4/4/2012 7:00 a.m.	The North Bergen Police Department shut down 70th St. and Smith Street in preparation for the remediation activities. The contractor checked the pipe for gas using a gas detector and checked for liquids. The contractor cut out 7 feet of pipe where the anomaly was located and an additional 6 feet of pipe downstream of the anomaly in preparation for the tie-in. Temporary caps were welded on the upstream and downstream exposed ends of the pipe. The excavation was covered with steel street plates for the night.

#### Failure Investigation Report –

Williams Gas Pipeline-Transco; North Bergen, NJ, 72<sup>nd</sup> Street Interstate Trans Lateral Leak Failure Date: 4/2/2012

#### Summary of Return-to-Service

Approximately 7 feet of pipe containing the dent and crack was removed from the pipeline. An additional 6 feet downstream of this section was also removed to accommodate the tie-in. The final tie-in was made on April 5, 2012, and the line was returned to service.

#### **Investigation Details**

The past three in-line inspections (ILI) on the 72<sup>nd</sup> Street Lateral were performed on April 21, 2005, (Magnetic Flux Leakage (MFL)/Geometric Inspection (GEO) tool), September 30, 2011, (MFL tool), and March 3, 2012 (GEO tool). The 2005 run detected a minor dent; however, there was no metal loss identified and thus further inspection was not needed. The 2011 MFL inspection detected metal loss, and a follow-up run with the GEO tool in 2012 detected a 2.2 percent dent, which triggered the ILI vendor to notify the operator that "Immediate" dig criteria had been met.

The 2005 ILI run resulted in two digs being performed near the current incident location. The first anomaly dig, (dig #12) located 696 feet upstream, resulted in a 2 percent dent with no metal loss. No remediation was necessary, and the exposed section of line was recoated. The second dig (dig #13), located 185 feet downstream, and resulted in a 2.4 percent dent that was cut out due to the sharp geometry of the dent. This section of line that contained the dent was replaced with new pipe.

A visual inspection of the dent and the surrounding area showed no signs of external corrosion. The pipe coating appeared to be in good condition with no disbonding (except where the rock contacted the pipe) (Appendix B-Photos).

Metallurgical analysis of the pipe section was performed by Anderson and Associates, located in Houston, Texas (Appendix E-Lab Analysis Report). The results of the analysis, received on May 24, 2012, indicated the following:

- 1. A magnetic particle inspection was completed in the dent area, and a tight crack indication was found. No other crack indications were found.
- 2. The dent/gouge was seen on the outside of the pipe. The crack was not visible on the outside of the pipe until the magnetic particle inspection was performed. On the inside of the pipe, the crack was visible and gaped open slightly.
- 3. Results concluded the pipe material was proper in all respects.
- 4. Based on the degree of fracture detail lost due to corrosion, it was concluded the dent and crack were present prior to excavation. The crack was likely caused by impact during installation in 1959 (this is the lab's opinion, as it is not possible to "date" the crack). The source of the indentation (rock) created a pure shear crack to approximately the centerline. The remainder of the crack was more of a tensile fracture.
- 5. The crack remained tightly closed in the pure shear area. This fact, along with the tightly packed dirt/soil/fill, and the existence of the rock tightly pressed up against the dent/crack area, would have minimized gas leakage.

#### **Findings and Contributing Factors**

As a result of the investigation conducted by PHMSA, no issues were identified regarding the implementation of the operator's Emergency Plans or coordination with the police or fire department in

#### Failure Investigation Report -

Williams Gas Pipeline-Transco; North Bergen, NJ, 72<sup>nd</sup> Street Interstate Trans Lateral Leak Failure Date: 4/2/2012

response to this incident. In addition, all applicable Operations and Maintenance procedures, including applicable construction procedures, were followed by the operator during the remediation process.

The cause of the leak was due to a rock impinging against the pipe wall at approximately the 7-o'clock position, which resulted in a 1.5 percent dent measuring 14 inches long and 8 inches wide. The dent contained a slight gouge with a crack.

Root Cause Analysis (Appendix F-WGP Root Cause Analysis Report):

- 1. The ILI vendor stated that in 2005, the dent was discovered, but the metal loss indication was not reported due to analyst error. Because of this, the indication was never inspected in 2005.
- 2. Poor construction practices in the 1950s likely allowed for the pipe to be installed in rocky subsoil conditions.
- 3. The geological movement of Palisades Sill over the past 50 years may have contributed to subsoil rock movement and damage to the pipe.

#### **Appendices**

- A Leak Location Map
- B Photos
- C NRC Report #1007578
- D Williams Incident Report Form 7100
- E Laboratory Analysis from Anderson and Associates
- F WGP Root-Cause Analysis Report

# Appendix A Map Removed File Available at PHMSA









#### 139107 Appendix B - Photos





NATIONAL RESPONSE CENTER 1-800-424-8802 \*\*\* For Public Use \*\*\* Information released to a third party shall comply with any applicable federal and/or state Freedom of Information and Privacy Laws

Incident Report # 1007578

INCIDENT DESCRIPTION

\*Report taken at 16:38 on 02-APR-12 Incident Type: PIPELINE Incident Cause: EQUIPMENT FAILURE Affected Area: The incident was discovered on 02-APR-12 at 14:00 local time. Affected Medium: AIR ATMOSPHERE

#### SUSPECTED RESPONSIBLE PARTY

Organization:

WILLIAMS GAS PIPELINE TRANSCO HOUSTON, TX 77056

Type of Organization: PRIVATE ENTERPRISE

INCIDENT LOCATION INTERSECTION OF 70TH AND SMITH AVE County: HUDSON City: N. BERGEN State: NJ

RELEASED MATERIAL(S)

CHRIS Code: ONG Official Material Name: NATURAL GAS Also Known As: Qty Released: 0 UNKNOWN AMOUNT

#### DESCRIPTION OF INCIDENT

THE CALLER REPORTED THAT A LEAKING PIPELINE WAS DISCOVERED WHILE INVESTIGATING AN ANOMALY.

#### INCIDENT DETAILS

Pipeline Type: TRANSMISSION DOT Regulated: YES Pipeline Above/Below Ground: BELOW Exposed or Under Water: NO Pipeline Covered: UNKNOWN

		DA	AMAGES	
Fire Involv	ed:	NO Fire Extinguished:	UNKNOWN	
INJURIES:		NO Hospitalized:	Empl/Crew:	Passenger:
FATALITIES:		NO Empl/Crew:	Passenger:	Occupant:
EVACUATIONS	:	NO Who Evacuated:	Radius/Area:	
Damages:		NO		
			Length of	Direction of
<u>Closure Type</u>	e	Description of Closure	<u>Closure</u>	<u>Closure</u>
Air:	N			
Road:	Y	PORTION OF 70TH ST.		Major Artery:
Waterway:	N			
Track:	N			

Passengers Transferred: NO Environmental Impact: UNKNOWN N

Media Interest: NONE Community Impact due to Material: REMEDIAL ACTIONS REDUCTION OF PRESSURE ON THE LINE/ THE LEAKING SECTION IS BEING ISOLATED AND WILL BE BLOWN DOWN Release Secured: UNKNOWN Release Rate: Estimated Release Duration: WEATHER Weather: UNKNOWN, °F ADDITIONAL AGENCIES NOTIFIED Federal: PHMSA NONE State/Local: State/Local On Scene: NONE State Agency Number: NONE NOTIFICATIONS BY NRC ATLANTIC STRIKE TEAM (MAIN OFFICE) 02-APR-12 16:43 USCG ICC (ICC ONI) 02-APR-12 16:43 DOT CRISIS MANAGEMENT CENTER (MAIN OFFICE) 02-APR-12 16:43 U.S. EPA II (MAIN OFFICE) 02-APR-12 17:10 NATIONAL INFRASTRUCTURE COORD CTR (MAIN OFFICE) 16:43 02-APR-12 NJ DEPT OF HEALTH & SENIOR SVC (COMMAND CENTER) 02-APR-12 16:43 NJ OFC HMLND SECURITY & PREPAREDNES (COMMAND CENTER) 02-APR-12 16:43 NJ STATE POLICE (MARINE SERVICES BUREAU) 02-APR-12 16:43 NOAA RPTS FOR NJ (MAIN OFFICE) 02-APR-12 16:43 BUREAU TOXIC SUBSTANCE (MAIN OFFICE) 02-APR-12 16:43 PIPELINE & HAZMAT SAFETY ADMIN (OFFICE OF PIPELINE SAFETY (AUTO)) 02-APR-12 16:43 NJ DEP POC: DUTY OFFICER (MAIN OFFICE) 02-APR-12 16:43 USCG DISTRICT 1 (COMMAND CENTER) 02-APR-12 16:43

139107 Appendix C - NRC Report 1007578

NONE.

ADDITIONAL INFORMATION

\*\*\* END INCIDENT REPORT # 1007578 \*\*\*

NOTICE: This report is required by 49 CFR Part 191. Failure to report can result in a exceed 100,000 for each violation for each day that such violation persists except that penalty shall not exceed \$1,000,000 as provided in 49 USC 60122.	a civil penalty not to at the maximum civil	OMB NO: 2137-0522 EXPIRATION DATE: 01/3	1/2014
<b>N</b>	Report Date:	04/18/2012	2
US Department of Transportation	No.	20120040 - 15	5568
Pipeline and Hazardous Materials Safety Administration		(DOT Use Onl	 v)
INCIDENT REPORT - GAS TRANSMISSION AND GATHERING PIPELINE SYSTEMS			
A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0522. Public reporting for this collection of information is estimated to be approximately 10 hours per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE. Washington, D.C. 20590.			
INSTRUCTIONS			
<b>Important:</b> Please read the separate instructions for completing this form before you examples. If you do not have a copy of the instructions, you can obtain one from the <u>http://www.phmsa.dot.gov/pipeline</u> .	u begin. They clarify the PHMSA Pipeline Safety	information requested and pro / Community Web Page at	vide specific
PART A - KEY REPORT INFORMATION			
Report Type: (select all that apply)	Original:	Supplemental:	Final:
Last Revision Date:	07/25/2012	Yes	Yes
1. Operator's OPS-issued Operator Identification Number (OPID):	19570		
2. Name of Operator	TRANSCONTINEN	TAL GAS PIPE LINE COM	PANY, LLC
3. Address of Operator:			
3a. Street Address	2800 POST OAK E	BOULEVARD	
3b. City	HOUSTON		
3c. State	Texas		
3d. Zip Code:	77056		
4. Local time (24-hr clock) and date of the Incident:	04/02/2012 02:00		
5. Location of Incident:	40 70004707		
Latitude:	40.79801737		
Longitude:	-74.01659992		
<ul> <li>National Response Center Report Number (in applicable).</li> <li>Local time (24-hr clock) and date of initial telephonic report to the National Response Center (if applicable).</li> </ul>	04/02/2012 03:00		
8 Incident resulted from:	Reasons other that	n release of das	
9 Gas released: (select only one based on predominant volume			
released)			
- Other Gas Released Name:			
10. Estimated volume of commodity released unintentionally - Thousand Cubic Feet (MCF):			
11. Estimated volume of intentional and controlled release/blowdown - Thousand Cubic Feet (MCF)	2,677.00		
12. Estimated volume of accompanying liquid release (Barrels):			
13. Were there fatalities?	No		
- If Yes, specify the number in each category:			
13a. Operator employees			
13b. Contractor employees working for the Operator			
13c. Non-Operator emergency responders			
13a. workers working on the right-of-way, but NOT			
13a General public			
13f Total fatalities (sum of above)			
14. Were there injuries requiring inpatient hospitalization?	No		
- If Yes, specify the number in each category:			
14a. Operator employees			
14b. Contractor employees working for the Operator			
14c. Non-Operator emergency responders			
14d. Workers working on the right-of-way, but NOT			
associated with this Operator			
14e. General public			
14f. Total injuries (sum of above)			
15. Was the pipeline/facility shut down due to the incident?	Yes		

- If No. Explain:		
- If Yes, complete Questions 15a and 15b; (use local time, 24-hr clock	<i>k</i> )	
15a Local time and date of shutdown		
15b Local time pipeline/facility restarted		
- Still shut down? (* Supplemental Report Required)		
16 Did the gas ignite?	No	
17. Did the gas synlede?	No	
17. Did the gas explode?		
10. Time converse (use local time 24 hour clock)	0	
19. Time sequence (use local time, 24-hour clock):		
19a. Local time operator identified Incident	04/02/2012 02:00	
19b. Local time operator resources arrived on site	04/02/2012 02:00	
PART B - ADDITIONAL LOCATION INFORMATION		
1. Was the origin of the Incident onshore?	Vac	
Vac (Complete Quee	tions 2, 12)	
- Tes (Complete Ques	(10115 2-12)	
- NO (Complete Quest	10/18 13-15)	
If Onshore:		
2. State:	New Jersey	
3. Zip Code:	0/04/	
4. City	North Bergen	
5. County or Parish	Hudson	
6. Operator designated location	Milepost/Valve Station	
Specify:	2.5	
7. Pipeline/Facility name:	72 nd Street lateral	
8. Segment name/ID:	72 nd Street lateral	
9. Was Incident on Federal land, other than the Outer Continental Shelf	No	
10 Location of Incident :	Pipeline Right-of-way	
11. Area of Incident (as found) :	Underground	
TT. Alea of Incluent (as found) .		
Specily.		
Other – Describe:		
Depth-of-Cover (in):	48	
12. Did Incident occur in a crossing?	Yes	
- If Yes, specify type below:		
- If Bridge crossing –		
Cased/ Uncased:		
- If Railroad crossing –		
Cased/ Uncased/ Bored/drilled		
If Pood crossing	Vec	
- II Kodu Clossify -	Pered/drilled	
Cased/ Uncased/ Bored/drilled	Borea/ariilea	
- If Water crossing –		
Cased/ Uncased		
Name of body of water (If commonly known):		
Approx. water depth (ft) at the point of the Incident:		
Select:		
If Offshore:		
13. Approx. water depth (ft) at the point of the Incident:		
14. Origin of Incident:		
- If "In State waters":		
- State:		
- Area		
- Block/Tract #		
- Diouvi Haui #.		
- INEGRESE COURTY/Fallsti.		
- II ON THE OUTER CONTINENTAL SHEIT (OCS)":		
- Area:		
Block #:		
15. Area of Incident:		
PART C - ADDITIONAL FACILITY INFORMATION		
1 is the pipeline or facility: - Interstate - Intrastate	Interstate	
2 Part of system involved in Incident:	Onshore Pipeline, Including Valvo Sitos	
2. Fait of System involved in incluent:	Disco Pipeline, including valve Sites	
s. nem involved in incident:		
- If Pipe – Specify:	Pipe Body	
3a. Nominal diameter of pipe (in):	36	
3b. Wall thickness (in):	.5	
3c SMXS (Specified Minimum Vield Strength) of pipe (psi):	52 000	

3d Pipe specification	API5I
3e Pine Seam - Specify:	DSAW
- If Other Describe	
3f. Pipe manufacturer:	Bethleham Corp.
3g. Year of manufacture:	1959
3h. Pipeline coating type at point of Incident – Specify:	Asphalt
- If Other, Describe:	
- If Weld, including heat-affected zone – Specify:	
- If Other, Describe:	
- If Valve – Specify:	
- If Mainline – Specify:	
- If Other, Describe:	
3i. Mainline valve manufacturer:	
3j. Year of manufacture:	
- If Other, Describe:	
4. Year item involved in Incident was installed:	2012
5. Material involved in Incident:	Carbon Steel
- If Material other than Steel or Plastic – Specify:	
6. Type of Incident involved:	Leak
- If Mechanical Puncture – Specify Approx. size:	
Approx. size: in. (in axial) by	
In. (circumferential)	Orașli
- II Leak - Select Type.	Grack
- If Other – Describe:	
- II Rupture - Select Orientation.	
- If Other – Describe:	
hv in (length circumferentially or axially):	
If Other Describe:	
- II Other – Describe.	
PART D - ADDITIONAL CONSEQUENCE INFORMATION	
1. Class Location of Incident:	Class 3 Location
Class Location of Incident:     Did this Incident occur in a High Consequence Area (HCA)?	Class 3 Location Yes
Class Location of Incident:     Did this Incident occur in a High Consequence Area (HCA)?     If Yes:     One Constitute Mathematication identification (HCA):	Class 3 Location Yes
Class Location of Incident:     Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:         2a. Specify the Method used to identify the HCA:         What is the DIP (Detential Impact Reduct) for the leastice of this	Class 3 Location Yes Method2
1. Class Location of Incident:     2. Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:     2a. Specify the Method used to identify the HCA:     3. What is the PIR (Potential Impact Radius) for the location of this     Incident?     Eeet:	Class 3 Location Yes Method2 647
1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?	Class 3 Location Yes Method2 647
1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         Feet:         4. Were any structures outside the PIR impacted or otherwise damaged	Class 3 Location Yes Method2 647
1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         Feet:         4. Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?	Class 3 Location Yes Method2 647 No
1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         Feet:         4. Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?         5. Were any structures outside the PIR impacted or otherwise damaged	Class 3 Location Yes Method2 647 No
1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         Feet:         4. Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?         5. Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?	Class 3 Location Yes Method2 647 No No
1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         Feet:         4. Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?         5. Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?         6. Were any of the fatalities or injuries reported for persons located	Class 3 Location Yes Method2 647 No No
1. Class Location of Incident:     2. Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:     2a. Specify the Method used to identify the HCA:     3. What is the PIR (Potential Impact Radius) for the location of this     Incident?     Feet:     4. Were any structures outside the PIR impacted or otherwise damaged     due to heat/fire resulting from the Incident?     5. Were any structures outside the PIR impacted or otherwise damaged     NOT by heat/fire resulting from the Incident?     6. Were any of the fatalities or injuries reported for persons located     outside the PIR?	Class 3 Location Yes Method2 647 No No
1. Class Location of Incident:     2. Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:     2a. Specify the Method used to identify the HCA:     3. What is the PIR (Potential Impact Radius) for the location of this     Incident?     Feet:     4. Were any structures outside the PIR impacted or otherwise damaged     due to heat/fire resulting from the Incident?     5. Were any structures outside the PIR impacted or otherwise damaged     NOT by heat/fire resulting from the Incident?     6. Were any of the fatalities or injuries reported for persons located     outside the PIR?     7. Estimated Property Damage :     7. Estimated sect of public and per Operator private	Class 3 Location Yes Method2 647 No No
1. Class Location of Incident:     2. Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:     2a. Specify the Method used to identify the HCA:     3. What is the PIR (Potential Impact Radius) for the location of this     Incident?     Feet:     4. Were any structures outside the PIR impacted or otherwise damaged     due to heat/fire resulting from the Incident?     5. Were any structures outside the PIR impacted or otherwise damaged     NOT by heat/fire resulting from the Incident?     6. Were any of the fatalities or injuries reported for persons located     outside the PIR?     7. Estimated Property Damage :     7a. Estimated cost of public and non-Operator private     property damage	Class 3 Location Yes Method2 647 No No No \$ 0
1. Class Location of Incident:     2. Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:     2a. Specify the Method used to identify the HCA:     3. What is the PIR (Potential Impact Radius) for the location of this     Incident?     Feet:     4. Were any structures outside the PIR impacted or otherwise damaged     due to heat/fire resulting from the Incident?     5. Were any structures outside the PIR impacted or otherwise damaged     NOT by heat/fire resulting from the Incident?     6. Were any of the fatalities or injuries reported for persons located     outside the PIR?     7. Estimated cost of public and non-Operator private     property damage     7b. Estimated cost of Operator's property damage & repairs	Class 3 Location Yes Method2 647 No No No \$ 0 \$ 280 000
1. Class Location of Incident:     2. Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:     2a. Specify the Method used to identify the HCA:     3. What is the PIR (Potential Impact Radius) for the location of this     Incident?     Feet:     4. Were any structures outside the PIR impacted or otherwise damaged     due to heat/fire resulting from the Incident?     5. Were any structures outside the PIR impacted or otherwise damaged     NOT by heat/fire resulting from the Incident?     6. Were any of the fatalities or injuries reported for persons located     outside the PIR?     7. Estimated Property Damage :     7a. Estimated cost of public and non-Operator private     property damage     7b. Estimated cost of Operator's property damage & repairs     7c. Estimated cost of Operator's emergency response	Class 3 Location Yes Method2 647 No No No \$ 0 \$ 280,000 \$ 0
1. Class Location of Incident:     2. Did this Incident occur in a High Consequence Area (HCA)?     - If Yes:     2a. Specify the Method used to identify the HCA:     3. What is the PIR (Potential Impact Radius) for the location of this     Incident?     Feet:     4. Were any structures outside the PIR impacted or otherwise damaged     due to heat/fire resulting from the Incident?     5. Were any structures outside the PIR impacted or otherwise damaged     NOT by heat/fire resulting from the Incident?     6. Were any of the fatalities or injuries reported for persons located     outside the PIR?     7. Estimated Property Damage :     7a. Estimated cost of public and non-Operator private     property damage     7b. Estimated cost of Operator's property damage & repairs     7c. Estimated cost of Operator's emergency response     7d. Estimated other costs	Class 3 Location Yes Method2 647 No No No \$ 0 \$ 280,000 \$ 0 \$ 15,000
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1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         4. Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?         5. Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?         6. Were any of the fatalities or injuries reported for persons located outside the PIR?         7. Estimated Property Damage :         7a. Estimated cost of public and non-Operator private property damage         7b. Estimated cost of Operator's property damage & repairs         7c. Estimated cost of Operator's emergency response         7d. Estimated other costs         Describe:         7e. Total estimated property damage (sum of above)	Class 3 Location Yes Method2 647 No No No \$ 0 \$ 280,000 \$ 0 \$ 15,000 Final costs updated 7-25-12 \$ 295,000
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1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         4. Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?         5. Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?         6. Were any of the fatalities or injuries reported for persons located outside the PIR?         7. Estimated Property Damage :         7a. Estimated cost of public and non-Operator private property damage         7b. Estimated cost of Operator's property damage & repairs         7c. Estimated cost of Operator's emergency response         7d. Estimated other costs         Describe:         7e. Total estimated property damage (sum of above)         Cost of Gas Released         7f. Estimated cost of gas released unintentionally         7g. Estimated cost of gas released during intentional and controlled blowdown	Class 3 Location Yes Method2 647 No No No \$ 0 \$ 280,000 \$ 0 \$ 280,000 \$ 0 \$ 15,000 Final costs updated 7-25-12 \$ 295,000 \$ 0 \$ 5,467
1. Class Location of Incident:         2. Did this Incident occur in a High Consequence Area (HCA)?         - If Yes:         2a. Specify the Method used to identify the HCA:         3. What is the PIR (Potential Impact Radius) for the location of this Incident?         4. Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?         5. Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?         6. Were any of the fatalities or injuries reported for persons located outside the PIR?         7. Estimated Property Damage :         7a. Estimated cost of public and non-Operator private property damage         7b. Estimated cost of Operator's property damage & repairs         7c. Estimated cost of Operator's emergency response         7d. Estimated other costs         Describe:         7e. Total estimated property damage (sum of above)         Cost of Gas Released         7f. Estimated cost of gas released unintentionally         7g. Estimated cost of gas released during intentional and controlled blowdown         7h. Total estimated cost of gas released (sum of 7.f & 7.g above)	Class 3 Location Yes Method2 647 No No No \$ 0 \$ 280,000 \$ 0 \$ 280,000 \$ 0 \$ 15,000 Final costs updated 7-25-12 \$ 295,000 \$ 0 \$ 5,467 \$ 5,467
<ol> <li>Class Location of Incident:</li> <li>Did this Incident occur in a High Consequence Area (HCA)?         <ul> <li>If Yes:</li> <li>2a. Specify the Method used to identify the HCA:</li> <li>What is the PIR (Potential Impact Radius) for the location of this Incident?</li> <li>Feet:</li> </ul> </li> <li>Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?</li> <li>Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?</li> <li>Were any of the fatalities or injuries reported for persons located outside the PIR?</li> <li>Estimated Property Damage :             <ul> <li>7a. Estimated cost of public and non-Operator private property damage</li> <li>7b. Estimated cost of Operator's property damage &amp; repairs</li> <li>7c. Estimated other costs</li> <li>Describe:</li> <li>7e. Total estimated property damage (sum of above)</li> </ul> </li> <li>Cost of Gas Released         <ul> <li>7f. Estimated cost of gas released unintentionally</li> <li>7g. Estimated cost of gas released during intentional and controlled blowdown</li> <li>7h. Total estimated cost of gas released (sum of 7.f &amp; 7.g above)</li> </ul> </li> </ol>	Class 3 Location         Yes         Method2         647         No         No         No         \$ 0         \$ 280,000         \$ 0         \$ 15,000         Final costs updated 7-25-12         \$ 295,000         \$ 0         \$ 5,467         \$ 5,467
<ol> <li>Class Location of Incident:</li> <li>Did this Incident occur in a High Consequence Area (HCA)?         <ul> <li>If Yes:</li> <li>2a. Specify the Method used to identify the HCA:</li> <li>What is the PIR (Potential Impact Radius) for the location of this Incident?</li> <li>Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?</li> </ul> </li> <li>Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?</li> <li>Were any of the fatalities or injuries reported for persons located outside the PIR?</li> <li>Estimated Property Damage :             <ul> <li>Ta. Estimated cost of public and non-Operator private property damage</li> <li>Tb. Estimated cost of Operator's property damage &amp; repairs</li> <li>Tc. Estimated cost of Operator's emergency response</li> <li>Td. Estimated other costs</li> <li>Describe:</li> </ul> </li> <li>Te. Total estimated property damage (sum of above)</li> <li>Cost of Gas Released</li> <li>Tf. Estimated cost of gas released unintentionally</li> <li>Tg. Estimated cost of gas released during intentional and controlled blowdown</li> <li>Th. Total estimated cost of gas released (sum of 7.f &amp; 7.g above)</li> </ol>	Class 3 Location         Yes         Method2         647         No         No         No         \$ 0         \$ 280,000         \$ 0         \$ 15,000         Final costs updated 7-25-12         \$ 295,000         \$ 0         \$ 5,467         \$ 5,467
<ol> <li>Class Location of Incident:</li> <li>Did this Incident occur in a High Consequence Area (HCA)?         <ul> <li>If Yes:</li> <li>2a. Specify the Method used to identify the HCA:</li> </ul> </li> <li>What is the PIR (Potential Impact Radius) for the location of this Incident? Feet:         <ul> <li>Were any structures outside the PIR impacted or otherwise damaged due to heat/fire resulting from the Incident?</li> <li>Were any structures outside the PIR impacted or otherwise damaged NOT by heat/fire resulting from the Incident?</li> <li>Were any of the fatalities or injuries reported for persons located outside the PIR?</li> <li>Estimated Property Damage :                 <ul> <li>Ta. Estimated cost of public and non-Operator private property damage</li> <li>Tb. Estimated cost of Operator's property damage &amp; repairs</li></ul></li></ul></li></ol>	Class 3 Location         Yes         Method2         647         No         No         No         \$ 0         \$ 280,000         \$ 0         \$ 15,000         Final costs updated 7-25-12         \$ 295,000         \$ 0         \$ 5,467         \$ 5,467         273.00
<ol> <li>Class Location of Incident:         <ol> <li>Did this Incident occur in a High Consequence Area (HCA)?                 <ul> <li>If Yes:</li></ul></li></ol></li></ol>	Class 3 Location         Yes         Method2         647         No         No         No         \$ 0         \$ 280,000         \$ 0         \$ 15,000         Final costs updated 7-25-12         \$ 295,000         \$ 0         \$ 5,467         \$ 5,467         273.00
<ol> <li>Class Location of Incident:         <ol> <li>Did this Incident occur in a High Consequence Area (HCA)?                 <ul> <li>If Yes:</li></ul></li></ol></li></ol>	Class 3 Location         Yes         Method2         647         No         No         No         \$ 0         \$ 280,000         \$ 0         \$ 15,000         Final costs updated 7-25-12         \$ 295,000         \$ 0         \$ 5,467         \$ 5,467         273.00         350.00
<ol> <li>Class Location of Incident:         <ol> <li>Did this Incident occur in a High Consequence Area (HCA)?                 <ul> <li>If Yes:</li></ul></li></ol></li></ol>	Class 3 Location         Yes         Method2         647         No         No         No         \$ 0         \$ 280,000         \$ 0         \$ 280,000         \$ 0         \$ 280,000         \$ 0         \$ 280,000         \$ 0         \$ 280,000         \$ 0         \$ 5,000         Final costs updated 7-25-12         \$ 295,000         \$ 0         \$ 5,467         \$ 5,467         273.00         350.00

4. Not including pressure reductions required by PHMSA regulations	
(such as for repairs and pipe movement), was the system or facility	
relating to the Incident operating under an established pressure	No
restriction with pressure limits below those normally allowed by the	
MAOP?	
- If Yes - (Complete 4a and 4b below)	1
4a. Did the pressure exceed this established pressure	
restriction?	
4b. Was this pressure restriction mandated by PHMSA or the	
State?	
5. Was "Onshore Pipeline, Including Valve Sites" OR "Offshore Pipeline,	Yes
Including Riser and Riser Bend" selected in PART C, Question 2?	100
- If Yes - (Complete 5a 5f. below):	
5a. Type of upstream valve used to initially isolate release source:	Remotely Controlled
5b. Type of downstream valve used to initially isolate release	Automatic
source:	
5c. Length of segment isolated between valves (ft):	19,430
5d. Is the pipeline configured to accommodate internal inspection	Yes
tools?	
<ul> <li>If No – Which physical features limit tool accommodation? (select all the select al</li></ul>	nat apply)
- Changes in line pipe diameter	
<ul> <li>Presence of unsuitable mainline valves</li> </ul>	
<ul> <li>Tight or mitered pipe bends</li> </ul>	
- Other passage restrictions (i.e. unbarred tee's, projecting	
instrumentation, etc.)	
- Extra thick pipe wall (applicable only for magnetic flux	
leakage internal inspection tools)	
- Other	
- If Other, Describe:	
5e. For this pipeline, are there operational factors which	
significantly complicate the execution of an internal inspection tool	No
run?	
- If Yes, which operational factors complicate execution? (select all that	apply)
<ul> <li>Excessive debris or scale, wax, or other wall build-up</li> </ul>	
- Low operating pressure(s)	
- Low flow or absence of flow	
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity	
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other	
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:	
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - Other     - If Other, Describe:     5f. Function of pipeline system:	Transmission System
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based	Transmission System Yes
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?	Transmission System Yes
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:	Transmission System Yes
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?	Transmission System Yes Yes
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?	Transmission System Yes Yes Yes
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?     6c. Did SCADA-based information (such as alarm(s), alert(s),	Transmission System Yes Yes Yes
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?     6c. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume or pack calculations) assist with the	Transmission System Yes Yes No
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?     6c. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume or pack calculations) assist with the     detection of the Incident?	Transmission System       Yes       Yes       No
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?     6c. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume or pack calculations) assist with the     detection of the Incident?     6d. Did SCADA-based information (such as alarm(s), alert(s),	Transmission System       Yes       Yes       No
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?     6c. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume or pack calculations) assist with the     detection of the Incident?     6d. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume calculations) assist with the confirmation of	Transmission System Yes Yes Yes No No
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?     6c. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume or pack calculations) assist with the     detection of the Incident?     6d. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume calculations) assist with the confirmation of     the Incident?	Transmission System       Yes       Yes       No
<ul> <li>Low operating pressure(s)</li> <li>Low flow or absence of flow</li> <li>Incompatible commodity</li> <li>Other</li> <li>If Other, Describe:</li> <li>5f. Function of pipeline system: <ul> <li>a Supervisory Control and Data Acquisition (SCADA)-based system in place on the pipeline or facility involved in the Incident?</li> <li>If Yes:</li> <li>Ga. Was it operating at the time of the Incident?</li> <li>6b. Was it fully functional at the time of the Incident?</li> <li>6c. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume or pack calculations) assist with the detection of the Incident?</li> <li>6d. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the confirmation of the Incident?</li> </ul> </li> <li>7. How was the Incident initially identified for the Operator?</li> </ul>	Transmission System         Yes         Yes         Yes         No         No         Local Operating Personnel, including contractors
<ul> <li>Low operating pressure(s)</li> <li>Low flow or absence of flow</li> <li>Incompatible commodity</li> <li>Other</li> <li>If Other, Describe:</li> <li>5f. Function of pipeline system:</li> <li>6. Was a Supervisory Control and Data Acquisition (SCADA)-based system in place on the pipeline or facility involved in the Incident?</li> <li>If Yes:</li> <li>6a. Was it operating at the time of the Incident?</li> <li>6b. Was it fully functional at the time of the Incident?</li> <li>6c. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume or pack calculations) assist with the detection of the Incident?</li> <li>6d. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the confirmation of the Incident?</li> <li>7. How was the Incident initially identified for the Operator?</li> <li>If Other – Describe:</li> </ul>	Transmission System         Yes         Yes         Yes         No         No         Local Operating Personnel, including contractors
- Low operating pressure(s)     - Low flow or absence of flow     - Incompatible commodity     - Other     - If Other, Describe:     5f. Function of pipeline system:     6. Was a Supervisory Control and Data Acquisition (SCADA)-based     system in place on the pipeline or facility involved in the Incident?     - If Yes:     6a. Was it operating at the time of the Incident?     6b. Was it fully functional at the time of the Incident?     6c. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume or pack calculations) assist with the     detection of the Incident?     6d. Did SCADA-based information (such as alarm(s), alert(s),     event(s), and/or volume calculations) assist with the confirmation of     the Incident?     7. How was the Incident initially identified for the Operator?         - If Other – Describe:         7a. If "Controller", "Local Operating Personnel, including	Transmission System         Yes         Yes         Yes         No         No         Local Operating Personnel, including contractors
<ul> <li>Low operating pressure(s)</li> <li>Low flow or absence of flow</li> <li>Incompatible commodity</li> <li>Other</li> <li>If Other, Describe:</li> <li>5f. Function of pipeline system:</li> <li>Was a Supervisory Control and Data Acquisition (SCADA)-based system in place on the pipeline or facility involved in the Incident?</li> <li>If Yes:</li> <li>Ga. Was it operating at the time of the Incident?</li> <li>Gb. Was it fully functional at the time of the Incident?</li> <li>Gc. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume or pack calculations) assist with the detection of the Incident?</li> <li>Gd. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the confirmation of the Incident?</li> <li>T. How was the Incident initially identified for the Operator?</li> <li>Ta. If "Controller", "Local Operating Personnel, including contractors", "Air Patrol", or "Ground Patrol by Operator or its</li> </ul>	Transmission System         Yes         Yes         Yes         No         No         Local Operating Personnel, including contractors         Operator employee
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<ul> <li>Low operating pressure(s)</li> <li>Low flow or absence of flow</li> <li>Incompatible commodity</li> <li>Other</li> <li>If Other, Describe:</li> <li>5f. Function of pipeline system:</li> <li>6. Was a Supervisory Control and Data Acquisition (SCADA)-based system in place on the pipeline or facility involved in the Incident?</li> <li>If Yes:</li> <li>6a. Was it operating at the time of the Incident?</li> <li>6b. Was it fully functional at the time of the Incident?</li> <li>6c. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume or pack calculations) assist with the detection of the Incident?</li> <li>6d. Did SCADA-based information (such as alarm(s), alert(s), event(s), and/or volume calculations) assist with the confirmation of the Incident?</li> <li>7. How was the Incident initially identified for the Operator?</li> <li>If Other – Describe:</li> <li>7a. If "Controller", "Local Operating Personnel, including contractors", "Air Patrol", or "Ground Patrol by Operator or its contractor" is selected in Question 7, specify the following:</li> <li>8. Was an investigation initiated into whether or not the controller(s) or control room issues were the cause of or a contributing factor to the Incident?</li> <li>If No, the operator did not find that an investigation of the controller(s) actions or control room issues was necessary due to: (provide an explanation for why the operator did not investigate)</li> </ul>	Transmission System         Yes         Yes         Yes         No         No         Local Operating Personnel, including contractors         Operator employee         No, the Operator did not find that an investigation of the controller(s) actions or control room issues was necessary due to: (provide an explanation for why the Operator did not investigate)         Operator employees were on site of an investigative anamoly dig, as the soil around the pipe was being removed the leak was discovered. The leak prompted the operator to take the pipeline out of service for repair.
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<ul> <li>Investigation did NOT review work schedule rotations,</li> </ul>	
continuous hours of service (while working for the Operator)	
and other factors associated with fatigue	
- Provide an explanation for why not:	
<ul> <li>Investigation identified no control room issues</li> </ul>	
<ul> <li>Investigation identified no controller issues</li> </ul>	
<ul> <li>Investigation identified incorrect controller action or</li> </ul>	
controller error	
<ul> <li>Investigation identified that fatigue may have affected the</li> </ul>	
controller(s) involved or impacted the involved controller(s)	
response	
<ul> <li>Investigation identified incorrect procedures</li> </ul>	
<ul> <li>Investigation identified incorrect control room equipment</li> </ul>	
operation	
<ul> <li>Investigation identified maintenance activities that affected</li> </ul>	
control room operations, procedures, and/or controller	
response	
<ul> <li>Investigation identified areas other than those above –</li> </ul>	
Describe:	
PART F - DRUG & ALCOHOL TESTING INFORMATION	
1. As a result of this Incident, were any Operator employees tested	
under the post-accident drug and alcohol testing requirements of DOT's	No
Drug & Alcohol Testing regulations?	
- If Ves:	
1a. Doccribo how many word toctod:	
the Describe how many foiled:	
TD. Describe now many failed.	
2. As a result of this incident, were any Operator contractor employees	No
tested under the post-accident drug and alconol testing requirements of	NO
DOT's Drug & Alconol Testing regulations?	
- If Yes:	
2a. Describe how many were tested:	
2b. Describe how many failed:	
PART G - APPARENT CAUSE	
PART G - APPARENT CAUSE Select only one box from PART G in the shaded column on the left repres questions on the right. Describe secondary, contributing, or root causes of	enting the APPARENT Cause of the Incident, and answer the the Incident in the narrative (PART H).
PART G - APPARENT CAUSE Select only one box from PART G in the shaded column on the left repres questions on the right. Describe secondary, contributing, or root causes of Apparent Cause:	enting the APPARENT Cause of the Incident, and answer the the Incident in the narrative (PART H). G8 - Other Incident Cause
PART G - APPARENT CAUSE         Select only one box from PART G in the shaded column on the left represe questions on the right. Describe secondary, contributing, or root causes of Apparent Cause:         G1 - Corrosion Failure - only one sub-cause can be picked from shaded from sha	enting the APPARENT Cause of the Incident, and answer the the Incident in the narrative (PART H). G8 - Other Incident Cause ded left-hand column
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at the point of the incident?	
If "Voc. CP Annual Survey" Most recent year conducted:	
If tes, CF Annual Survey – Most recent year conducted.	
If "Yes, Close Interval Survey" – Most recent year conducted:	
If "Yes, Other CP Survey" – Most recent year conducted:	
- If No:	
4d. Was the failed item externally coated or painted?	
5. Was there observable damage to the coating or paint in the vicinity of	
the corrosion?	
- If Internal Corrosion:	
6. Results of visual examination:	
- If Other, Describe:	
7. Cause of corrosion (select all that apply):	
- Corrosive Commodity	
- Water drop-out/Acid	
- Microbiological	
- Erosion	
- Other	
- If Other, Describe:	
8. The cause(s) of corrosion selected in Question 7 is based on the follow	ing (select all that apply):
- Field examination	
- Determined by metallurgical analysis	
- Other	
- If Other, Describe:	
9. Location of corrosion (select all that apply):	
- Low point in pipe	
- Elbow	
- Drop-out	
- Other	
- If Other. Describe:	
10. Was the gas/fluid treated with corrosion inhibitors or biocides?	
11. Was the interior coated or lined with protective coating?	
12. Were cleaning/dewatering pigs (or other operations) routinely	
utilized?	
13. Were corrosion coupons routinely utilized?	
Complete the following if any Corrosion Failure sub-cause is selected	AND the "Item Involved in Incident" (from BART C
Complete the following if any Corrosion Failure sub-cause is selected	AND the "Item Involved in Incident" (from PART C,
Complete the following if any Corrosion Failure sub-cause is selected Question 3) is Pipe or Weld.	AND the "Item Involved in Incident" (from PART C,
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Complete the following if any Corrosion Failure sub-cause is selected Question 3) is Pipe or Weld. 14. Has one or more internal inspection tool collected data at the point of the Incident? 14a. If Yes, for each tool used, select type of internal inspection tool - Magnetic Flux Leakage Tool Most recent year run: - Ultrasonic - Ultrasonic - Caliper - Caliper - Caliper - Crack Most recent year run: - Crack Most recent year run: - Crack Most recent year run: - Combination Tool - Transverse Field/Triaxial Most recent year run: - Other Most recent year run: - Other Most recent year run: - Transverse Field/Triaxial Most recent year run: - Other Most recent year run: - If Yes, Most recent year tested: Test pressure (psig): 16. Has one or more Direct Assessment been conducted on this	AND the "Item Involved in Incident" (from PART C, and indicate most recent year run:
Complete the following if any Corrosion Failure sub-cause is selected Question 3) is Pipe or Weld. 14. Has one or more internal inspection tool collected data at the point of the Incident? 14a. If Yes, for each tool used, select type of internal inspection tool - Magnetic Flux Leakage Tool Most recent year run: - Ultrasonic Ultrasonic Geometry - Geometry - Caliper - Caliper - Crack Most recent year run: - Crack Most recent year run: - Crack Most recent year run: - Crack Most recent year run: - Combination Tool Most recent year run: - Transverse Field/Triaxial Most recent year run: - Other Most recent year run: - Other 15. Has one or more hydrotest or other pressure test been conducted since original construction at the point of the Incident? - If Yes, Most recent year tested: Test pressure (psig): 16. Has one or more Direct Assessment been conducted on this segment?	AND the "Item Involved in Incident" (from PART C, and indicate most recent year run:
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Complete the following if any Corrosion Failure sub-cause is selected Question 3) is Pipe or Weld. 14. Has one or more internal inspection tool collected data at the point of the Incident? 14a. If Yes, for each tool used, select type of internal inspection tool - Magnetic Flux Leakage Tool Most recent year run: - Ultrasonic Most recent year run: - Geometry Most recent year run: - Caliper Most recent year run: - Crack Most recent year run: - Crack Most recent year run: - Crack Most recent year run: - Combination Tool Most recent year run: - Transverse Field/Triaxial Most recent year run: - Other Most recent year run: - Other Most recent year run: - If Other, Describe: 15. Has one or more hydrotest or other pressure test been conducted since original construction at the point of the Incident? - If Yes, Most recent year tested: Test pressure (psig): 16. Has one or more Direct Assessment been conducted on this segment? - If Yes, and an investigative dig was conducted at the point of the Incident?	AND the "Item Involved in Incident" (from PART C, and indicate most recent year run:

17. Has one or more non-destructive examination been conducted at the point of the incident since January 1, 2002?       Most recent year examination was conducted.         17. Cent Year Me examination was conducted.       - Radiography       Most recent year examined:         - Radiography       Most recent year examined:       -         - Guided Wave Ultrasonic       Most recent year examined:       -         - Handheid Ultrasonic Tool       -       -         - Handheid Ultrasonic Tool       Most recent year examined:       -         - Vext Magnetic Particle Test       Most recent year examined:       -         - Opt Magnetic Particle Test       Most recent year examined:       -         - Other       Most recent year examined:       -       -       -         - Other       Most recent year examined:       -       -       -       -       -       -       -       -       -       -       -       -       -       -       -       -       -       -	Most recent year conducted:           17. Has one or more-destructive examination bein conducted at the point of the incident since January 1, 2002;           17. Has one or more-destructive examination and indicate most tream year in the examination was conducted.           - Rediography           4. Rediography           - Guided Wave Ultrasonic           - Guided Wave Ultrasonic Tool           - Handheld Ultrasonic Tool           - Handheld Ultrasonic Tool           - Wet Magnetic Particle Test           Most recent year examined:           - Other           - Other           Most recent year examined:           - If Other, Describe:           - If Hany Rains				
In point of the Incident since January 1, 2002 IT a. If Yes, for each examination conducted since January 1, 2002, select type of non-destructive examination and indicate most recent year the examination and indicate most recent year the examination and indicate most recent year the examination and indicate most recent year examined:  I - Radopaphy Most recent year examined:  - Handheid Ultrasonic Tool Most recent year examined:  - Wet Magnetic Particle Test Most recent year examined:  - Other Most recent year examined:  - If Cher, Describe: <b>C2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column</b> Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - only one sub-cause in the picket from shaded left-handed column Natural Force Damage - only one sub-cause in the picket from shaded left-handed column Natural Force Damage - only one sub-cause in the picket from shaded left-handed column Natural Force Damage - only one sub-cause is selected. <b>If Haph StandSToods:</b> - If Other, Describe: - If Lightning: - If Other, Describe: - If Uphring: - If Other, Describe: - If Uphring: - If Other, Describe: - If Haph StandSTood - If Other, Describe: - If Lightning: - If Other, Describe: - If Other, Describe: - If Uphring: - If Other, Describe: - If Uphring: - If Other, Describe: - If Uphring: - If Other, Describe: - If Oth	the point of the Incident since January 1, 2002 176. If Yes, for each examination conducted since January 1, 2002, select type of non-destructive examination and indicate most recent year the examination was conducted. - Roadiography - Guided Wave Ultrasonic - Handheid Ultrasonic - Handheid Ultrasonic - Most recent year examined: - Unter Magnetic Particle Test - Most recent year examined: - Other - Most recent year examined: - Most recent	Most recent year conducted:           17. Has one or more non-destructive examination been conducted at			
readingraphy     Most recent year examined:     - Guided Wave Ultrasonic     - Guided Wave Ultrasonic     - Ultrasonic Tool     Most recent year examined:     - Ultrasonic Tool     - Wet Magnetic Particle Test     Most recent year examined:     - Dry Magnetic Particle Test     Most recent year examined:     - Other     Most recent year examined:     - Other, Describe:     - If Barth Movement, NOT due to Heavy Rains/Floods:     - If Other, Describe:     - Other     - If Other, Describe:     - If Other, Describe:     - If Other, Describe:     - If Other	recent year the examination was conducted: - Radiography Most recent year examined: - Guided Wave Utrasonic - Handheld Utrasonic Tool - Handheld Utrasonic Tool - Wet Magnetic Particle Test - Other - If Other, Describe: - If Other,	the point of the Incident since January 1, 2002? 17a. If Yes, for each examination conducted since January 1, 2002.	select type of non-destructive examination and indicate most		
Most and the second secon	Most recent year examined: Guided Wave Ultrasonic Most recent year examined: Handheid Ultrasonic Tool Most recent year examined: - Unter Magnetic Particle Test Most recent year examined: - Other Most recent year examined: - Specify: - If Other, Describe: - If Harpy Rains/Floods: - Specify: - If Other, Describe: - If Harpy Rains/Floods: - Specify: - If Other, Describe: - If High Winds: - If Other, Natural Force Damage: - Specify: - If Other Natural Force Damage: - Specify: - If Other Natural Force Damage: - If Other Natural Force Damage: - Specify: - If Other Natural Force Damage: - Specify: - If Other Natural Force Damage: - If Other Natural Force Damage: - Specify: - If Other Natural Force Damage: - Tornado - Other - Tornado - Other - If Other, Describe: - Other - Tornado - Other - Tornado - Other - Tornado - Other - Tornado - Other - Tornado - Other - Tornado - Other - If Other, Describe: - If Exeavation Damage Dy Operator's Contractor (Second Party): - If Exeavation Damage Dy Operator's Contractor (Second Party): - If Exeavation Damage Dy Operator's Contractor (Second Party): - If Exeavation Dam	recent year the examination was conducted:			
Oulded Wave Ultrasonic     Most recent year examined:     Handheid Ultrasonic Tool     Most recent year examined:     Wet Magnetic Particle Test     Most recent year examined:     Ony Magnetic Particle Test     Most recent year examined:     Other     Most recent year examined:     If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:     If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:     If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:     If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:     If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Other, Describe:     If Harth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Other, Describe:     If High Winds:         If Other, Describe:     If High Winds:         If Other Natural Force Damage:         Specify:         If Other, Describe:         If High Winds:         If Other, Describe:         If Other Natural Force Damage:         Specify:         If Other, Describe:         If Other, Describ	Guided Wave Ultrasonic     Most recent year examined:     Handheid Ultrasonic Tool     Most recent year examined:     Wet Wagnetic Particle Test     Most recent year examined:     Other     Other     Most recent year examined:     Other     Other     Other Describe:     Other     Other Describe:     Other     Other     Other Natural Force Damage:     Other Natural Force Damage sub-cause is selected.     Other     Oth	Most recent year examined:			
- Subset Warssonic     - View Magnetic Particle Tool     - Wet Magnetic Particle Test     - Wet Magnetic Particle Test     - Other     - Most recent year examined:     - Other     - Other Describe:     - If Other, Describe:     - If Other, Describe:     - If Other, Describe:     - If Other, Describe:     - If Other Natural Force Damage:     - If Other, Describe:     - If Other Natural Force Damage:     - Other     - If Other, Describe:     - If Other Natural Force Damage:     - Other     - If Other, Describe:     - If Other Natural Force Damage:     - Other     - Other     - If Other, Describe:     - If Other Natural Force Damage sub-cause is selected.     - Other     - If Other, Describe:     - If Other Natural Force Damage sub-cause is selected.     - Other     - If Other	Guided were durasonic     Guided were durasonic Tool     Guided were durasonic tool context of the durasonic tool c	Widst recent year examined.			
Most recent year examined:  - Handheld Ultrasonic Tool  Most recent year examined:  - Othy Magnetic Particle Test  - Other  - Other  - Other  Most recent year examined:  - Other  Most recent year examined:  - Other  - Other  Most recent year examined:  - Other  - Other  Most recent year examined:  - Other  - Other - Most recent year examined:  - Other  - Other  - Other  - Other  - Other  - Other  - Other - Most recent year examined: - Other - If Other, Describe: Other - If Other, Describe: - If Hany Rains/Floods: If Other, Describe: If Hany Rains/Floods:	Most recent year examined: - Handheid Ultrasonic Tool Most recent year examined: - Dry Magnetic Particle Test Most recent year examined: - Other Most recent year examined: - Other - Other - Other - Other - If Earth Movement, NOT due to Heavy Rains/Floods: - Specify: - If Other, Describe: - If Heavy Rains/Floods: - Specify: - If Other, Describe: - If Lightning: - Specify: - If Other, Describe: - If Lightning: - Specify: - If Other, Natural Force Damage: - Specify: - If Other, Natural Force Damage: - Specify: - If Other, Natural Force Damage: - If Other, Natural Force Damage: - Describe: - Complete the following if any Natural Force Damage sub-cause is selected. - Were the natural forces causing the Incident generated in conjunction with an extrem exerter event? - Other - Tropical Stom - Tropical Stom - Tomado - Other - If Other, Dascribe: - If Other, Dascribe: - If Excavation Damage only one sub-cause can be picked from shaded left-hand column Excavation Damage - Sub-Cause: - If Excavation Damage by Operator (First Party): - If Excavation Damage by Operator's Contractor (Second Party): - If Excavation Damage by Operator's Contractor (Second Party): - If Excavation Damage by Depatator's Contractor (Second Party): - If Excavation Damage by Third Party: - If Particus Tool Used (at at the point of he Incident", - Magnetic Fibus Leakage 	- Guided Wave Ultrasonic			
- Handheid Ultrasonic Tool     Most recent year examined:     - Wet Magnetic Particle Test     Most recent year examined:     - Ory Magnetic Particle Test     Most recent year examined:     - Ory Magnetic Particle Test     Most recent year examined:     - Other     Most recent year examined:     - Other     Most recent year examined:     - Other     Most recent year examined:     If Other, Describe:     If Coher, Describe:     If Each Movement, NOT due to Heavy Rains/Floods:     Specify:     - If Other, Describe:     If Heavy Rains/Floods:     Specify:     - If Other, Describe:     - If High Winds:     - If Other, Describe:     Specify:     - If Other Natural Force Damage:     So Describe:     - If High Winds:     - If Other Natural Force Damage:     So Describe:     - If Heavy Rains/ If the Counting the Incident generated in conjunction     with an extreme weather event?     Ga. Urge at Unstange the Incident generated in conjunction     with an extreme weather event?     - Tornado     - Other     - Tornado     - Other     - Tornado     - Other     - If Other, Describe:     - If Other, Describe:     - If Excavation Damage only one sub-cause can be picked from shaded left-hand column Excavation Damage Only one sub-cause can be picked from shaded left-hand column Excavation Damage Only one sub-cause can be picked from shaded left-hand column     - Tornado     -	- Handheid Ultrasonic Tool     Most recent year examined:     - Wet Magnetic Particle Test     Most recent year examined:     - Dry Magnetic Particle Test     Most recent year examined:     - Other     Most recent year examined:     forter, Describe:     fort	Most recent year examined:			
Most recent year examined:         • Wet Magnetic Particle Test         • Dry Magnetic Particle Test         • Other         Most recent year examined:         • Other         Most recent year examined:         If Other Josense:         G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column         Natural Force Damage - Sub-Cause:         If Other, Describe:         If Stependy:         • If Other, Describe:         If Heavy Rains/Floods:         2. Speadly:         • If Other, Describe:         If Heavy Rains/Floods:         2. Speadly:         • If Other, Describe:         If Other, Describe:         If High Winds:         • If Other, Describe:         If Other, Natural Force Damage:         6. Were the natural Force Damage:         6. Were the natural force causing the Incident generated in conjunction with an extreme weather event?         • If Other, Describe:         • If Other, Describe:         • If Other, Speadly:         • If Other, Speadly:         • If Other Natural Force Damage sub-cause is selected.         6. Were the natural forces causing the Incident generated in conjunction with an extreme weathere event?         6. Ware the natural f	Most recent year examined:  - Wet Magnetic Particle Test Most recent year examined:  - Othor Most recent year examined: - Othor - If Other Secribe: - If Cher, Describe: - If Other, Describe: - If Uphning: - Specify: - If Other, Describe: - If Uphning: - Specify: - If Other, Describe: - If Other, Describe: - If Uphning: - Specify: - If Other, Describe: - If Other, Natural Force Damage - Specify: - If Other, Describe: - If Other, Natural Force Damage - Specify: - If Other, Describe: - If Other, Natural Force Damage - Specify: - If Other, Describe: - If Other, Natural Force Damage - Specify: - If Other, Describe: - If Other Natural Force Damage - Specify: - If Other, Describe: - If Other Natural Force Damage - Specify: - If Other, Describe: - If Other, Describe: - If Other, Describe: - If Other Natural Force Damage - If Other, Describe: - If Other Natural Force Damage - Specify: - If Other, Describe: - If Other, Describe: - If Other Natural Force Damage - Specify: - If Other, Describe: - If Other, Describe: - If Other, Describe: - If Other, Describe: - If Other Natural Force Damage - Specify: - If Other, Describe: - If Other	- Handheld Ultrasonic Tool			
- Wet Magnetic Particle Test     Most recent year examined:     - Dry Magnetic Particle Test     Most recent year examined:     - Other     - For example:     - If Other, Describe:     - If Other Atural Force Damage:     - Specify:     - If Other, Describe:     - If Other, Describe:     - If Other Atural Force Damage:     - Specify:     - If Other, Describe:     - If Other Atural Force Damage:     - Specify:     - If Other, Describe:     - T	Wet Magnetic Particle Test     Most recent year examined:     Dry Magnetic Particle Test     Most recent year examined:     Dry Magnetic Particle Test     Most recent year examined:     Other     Most recent year examined:     If Other, Describe:     G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:     If Earth Movement, NOT due to Heavy Rains/Floods:     Specify:     If Earth Movement, NOT due to Heavy Rains/Floods:     Specify:     If Cother, Describe:     If Hapt Movement, NOT due to Heavy Rains/Floods:     Specify:     If Other, Describe:     If Hapt Movement, NOT due to Heavy Rains/Floods:     Specify:     If Other, Describe:     If Hapt Mindg:     Specify:     If Other, Describe:     If Hapt Mindg:     Specify:     If Other, Describe:     If Hapt Mindg:     If Other Natural Force Damage:     Specify:     If Other Natural Force Damage:     Specify:     If Other Natural Force Damage:     Describe:     If Hapt Winds:     If Other, Cescribe:     If Hapt Winds:     If Other Natural Force Damage:     Specify:     If Other Natural Force Damage:     Specify:     If Other Natural Force Damage:     Specify:     If Other Natural Force Damage sub-cause is selected.     Gornbet the following if any Natural Force Damage sub-cause is selected.     Gornbet the following if any Natural Force Damage sub-cause is selected.     Gornbet Complex Cause:     If Cother, Describe:     G3 - Excavation Damage - Sub-Cause:     If Other, Describe:     If Other, Describe:     G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column Excavation Damage - Sub-Cause:     If Excavation Damage by Operator (First Party):     If Excavation Damage by Operato	Most recent year examined:			
• Ory Magnetic Particle Test       Most recent year examined:         • Oher       Most recent year examined:         • Other       If Other, Describe:         • If Earth Movement, NOT due to Heavy Rains/Floods:       1.         • Specify:       • If Other, Describe:         • If Heavy Rains/Floods:       2.         • Specify:       • If Other, Describe:         • If Ughtning:       3.         3. Specify:       • If Other, Describe:         • If Uther Natural Force Damage:       6.         6. Describe:       If Mitting:         • If Other, Describe:       If Other, Describe:         • If Other Natural Force Damage:       6.         6. Describe:       If Other, Describe:         • Orbor Natural Forces causing the Incident generated in conjunction         with an exterme weather event?       6.         6. Ures the natural forces causing the Incident generated in conjunction         • Heant the exame weather event?	Most recent year examined:         • Orly Magnetic Particle Test         • Other         Most recent year examined:         • If Dinr, Describe:         • If Earth Movement, NOT due to Heavy Rains/Floods:         • Specify:         • If Other, Describe:         • If Heavy Rains/Floods:         • Specify:         • If Other, Describe:         • If Lightning:         • Specify:         • If Other, Describe:         • If High Winds:         • If Other, Describe:         • If High Winds:         • If Other, Describe:         • If High Winds:         • If Other Natural Force Damage:         • Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         6. Were the natural forces causing the Incident generated in conjunction with an externe weather event?         • Topical Storm         • Torado         • Other<	- Wet Magnetic Particle Test			
Ory Magnetic Particle Test     Most recent year examined:     Other     Most recent year examined:     Other     Most recent year examined:     G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:     If Earth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Earth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Heavy Rains/Floods:         Sequely:         If Other, Describe:     If Ughtning:         Specify:         If Other, Describe:     If Heavy Rains/Floods:     Specify:         If Heavy Rains/Floods:     If Other, Describe:     If Heavy Rains/Floods:     Specify:         If Other, Describe:     If High Winds:     If Other, Describe:     If High Winds:     If Other, Describe:     If Other, Describe:     If Other Autural Force Damage:     Specify:         If Other, Describe:     If Other Autural Force Damage:     Specify:         If Other, Describe:     If Other Autural Force Damage:     Specify:         If Other, Describe:     If Other Autural Force Damage:     Specify:         If Other, Describe:     If Other Autural Force Damage:     Specify:         If Other, Describe:     If Other Autural Force Damage:     Specify:         If Other Autural Force Damage sub-cause is selected.     Swerthe natural forces causing the Indednt generated in conjunction     With an externe weather event?     Ga. If yes, specify: (select all that apply):         Huriticane         Tropical Storm	Dry Magnetic Particle Test     Most recent year examined:     Other     Most recent year examined:     G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:     If Dther, Describe:     G2 - Natural Force Damage - Sub-Cause:     If Seth Novement, NOT due to Heavy Rains/Floods:     Specify:         If Earth Novement, NOT due to Heavy Rains/Floods:     Specify:         If Other, Describe:     If High Winds:         If Other, Describe:     If High Winds:         If Other, Describe:     If High Winds:         If Other Natural Force Damage sub-cause is selected.     Specify:         If Other Natural Force Damage sub-cause is selected.     Specify:         If Other Natural Force Damage sub-cause is selected.     Specify:         If Other, Describe:     If Other Natural Force Damage sub-cause is selected.     Specify:         If Other, Complete the following if any Natural Force Damage sub-cause is selected.     Specify:         If Other, Security = Other Secu	Most recent year examined:			
Other     Most recent year examined:         Other         Most recent year examined:         If Other, Describe:         Second and the second the second and the second and the second and the sec	- Other Model and a fact free model and a fact free standing in the second	- Dry Magnetic Particle Test			
• Other       Most recent year examined. If Other, Describe:         G2 - Natural Force Damage - Sub-Cause:       If Other, Describe:         If Barth Movement, NOT due to Heavy Rains/Floods:       If Specify:         1. Specify:       - If Other, Describe:         If Heavy Rains/Floods:       - If Other, Describe:         If Other Natural Force Damage:       - If Other, Describe:         Specify:       - If Other, Describe:         If Other Natural Force Damage:       - If Other, Describe:         So Describe:       - If Other Natural Force Damage sub-cause is selected.         G. Wore the natural force causing the Incident generated in conjunction with an extreme weather event?       - If Other, Describe:         - Other       - Tropical Storm       - Tropical Storm         - Tropical Storm       - If Other, Describe:       - Tropical Storm         - Other       - If Other, Describe:       - Startation Damage only one sub-cause can be picked from shaded left-hand column	Other     Most recent year examined:     If Other, Describe:     G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:     If Earth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Other, Describe:     If Heavy Rains/Floods:     Specify:         If Other, Describe:     If Johning:     Specify:         If Other, Describe:     If Other, Describe:     If Other Natural Force Damage sub-cause is selected.     Specify:         If Other Natural Force Damage sub-cause is selected.     Specify:         If Other Natural Force Damage sub-cause is selected.     Specify:         If Other, Describe:     If Steamation Damage only one sub-cause can be picked from shaded left-hand column     Excavation Damage only one sub-cause can be picked from shaded left-hand column     Excavation Damage only one sub-cause can be picked from Shaded left-hand column     If Excavation Damage by Operator (First Party):     If Excavation Damage by Operator Scontractor (Second Party):     If Excavation Damage by Operator Scontractor (Second Party):     If Excavation Damage by Operator Contractor	- Dry Wagnetic Fanticle Test			
Other     Most recent year examined:     If Other, Describe:     G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:     If Barth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Barth Movement, NOT due to Heavy Rains/Floods:         Specify:         If Barth Movement, NOT due to Heavy Rains/Floods:         Specify:         If Heavy Rains/Floods:         Specify:         If Heavy Rains/Floods:         Specify:         If Other, Describe:         If Heavy Rains/Floods:         Specify:         If Other, Describe:         If Hight Ninds:         If Other, Describe:         If Other, Describe:         If Other Natural Force Damage:         Specify:         If Other, Describe:         If Other Natural Force Damage:         Specify:         If Other, Describe:         If Other Natural Force Damage:         Specify:         If Other, Describe:         If Other Natural Force Cause generated in conjunction         with an extreme weather event?         Ga. If yes, specify: (second all that apply):             - Hurricane             - Tornado             - Other             - If Other, Describe:         If Other, Describe:         If Cother of ther of Down of the Incident generated in conjunction         with an extreme weather event?         Ga. If yes all that apply):             - Hurricane             - Tornado             - Other             - Tornado             - Other             - If Other, Describe:         If Excavation Damage only one sub-cause can be picked from shaded left-hand column Excavation Damage - Sub-Cause:             - If Other, Describe:             - If Excavation Damage by Operator (First Party):             - If Excavation Damage only one sub-cause can be picked from Part C, Question 3) is Pipe or Weld.         T. Has one or more internal inspection tock city it:             - Market Chuster 15 ONL If the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         T. Has one or m	Other     Most recent year examined:     If Other, Describe:     G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:     If Earth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Earth Movement, NOT due to Heavy Rains/Floods:     Specify:         If Other, Describe:     If Hay Rains/Floods:     Specify:         If Other, Describe:     If Ughtning:     Specify:         If Other, Describe:     If Highthing:     Specify:         If Other, Describe:     If Highthing:     Specify:         If Other, Describe:     If Highthing:     Specify:         If Other, Describe:     If Other, Describe:     If Hight Winds:     If Other, Describe:     If Other Natural Force Damage:     Specify:         Specify:         If Other Autural Force Damage:     Specify:         Specify:         If Other, Describe:     If Other, Describe:     If Other Natural Force Damage:     Specify:         S	Most recent year examined.			
Most recent year examined: If Other, Describe:         G2 - Natural Force Damage - Sub-Cause:         If Earth Movement, NOT due to Heavy Rains/Floods:         1. Specify:         If Barth Movement, NOT due to Heavy Rains/Floods:         1. Specify:         If Heavy Rains/Floods:         2. Specify:         If Heavy Rains/Floods:         2. Specify:         If Heavy Rains/Floods:         2. Specify:         If Other, Describe:         If Heavy Rains/Floods:         2. Specify:         If Other, Describe:         If High Winds:         If Other, Describe:         If High Winds:         - If Other, Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         6. Were the natural forces causing the Incident generated in conjunction with an extreme weather event?         6a. If yes, specify: (select all that apply):         - Tropical Storm         - Tropical Storm         - Tropical Storm         - Other         - Tropical Storm         - Other         - Tropical Storm         - Ot	Most recently ear examined: If Other, Describe:         G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column         Natural Force Damage - Sub-Cause:         - If Earth Movement, NOT due to Heavy Rains/Floods:         1. Specify:         - If Other, Describe:         - If Heavy Rains/Floods:         2. Specify:         - If Other, Describe:         - If Lightning:         3. Specify:         - If Other, Describe:         - If Heavy Rains/Floods:         3. Specify:         - If Other, Describe:         - If High Winds:         - If Other, Describe:         - If Other Natural Force Damage:         5. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         6. Were the natural forces causing the Incident generated in conjunction with an extreme weather event?         6a. If yes, specify: (select all that apply):         - Fromado         - Tornado         - Tornado         - Tornado         - Tornado         - Other         - If Other, Describe:              G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column            If Excav	- Other			
If Other, Describe:          G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column         Natural Force Damage - Sub-Cause:         • If Barth Movement, NOT due to Heavy Rains/Floods:         1. Specify:         • If Garth Movement, NOT due to Heavy Rains/Floods:         2. Specify:         • If Uptring:         3. Specify:         • If Uptring:         3. Specify:         • If Temperature:         4. Specify:         • If Other, Describe:         • If Jennerature:         4. Specify:         • If Other, Describe:         • If Heavy Rains/Floods:         2. Specify:         • If Temperature:         4. Specify:         • If Other, Describe:         • If Other Natural Force Damage:         5. Describe:         • If Other Natural Force Damage:         6. Bergies, specify: (select all that apply):         • Heavie Natural Force Causing the Incident generated in conjunction         with an extreme weather event?         6a. If yes, specify: (select all that apply):         • Hurricane         • Tornado         • Other         • Tornado         • Other         • If Other, Describe: <td< td=""><td>If Other, Describe:  G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:  If Earth Movement, NOT due to Heavy Rains/Floods:  Secoly:  If Other, Describe:  If Heavy Rains/Floods:  Secoly:  If Uther, Describe:  If Uther, Describe:  If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Other, Describe: If Excavation Damage only one sub-cause can be picked from shaded left-hand column If Other, Describe: If Excavation Damage only one sub-cause can be picked from shaded left-hand column If Other, Describe: If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Other, Describe: If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage on to co</td><td>Most recent year examined:</td><td></td></td<>	If Other, Describe:  G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column Natural Force Damage - Sub-Cause:  If Earth Movement, NOT due to Heavy Rains/Floods:  Secoly:  If Other, Describe:  If Heavy Rains/Floods:  Secoly:  If Uther, Describe:  If Uther, Describe:  If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Uther, Describe: If Other, Describe: If Excavation Damage only one sub-cause can be picked from shaded left-hand column If Other, Describe: If Excavation Damage only one sub-cause can be picked from shaded left-hand column If Other, Describe: If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Other, Describe: If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage only one sub-cause can be picked from Shaded left-hand column If Xata If Excavation Damage on to co	Most recent year examined:			
G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column         Natural Force Damage - Sub-Cause:         • If Earth Movement, NOT due to Heavy Rains/Floods:         1: Specify:         • If Heavy Rains/Floods:         2: Specify:         • If Ughtning:         3: Specify:         • If Temperature:         4: Specify:         • If Other, Describe:         • If High Winds:         • If Other, Describe:         • If High Winds:         • If Other Autural Force Damage:         5: Describe:         • If Other Autural Force Damage:         5: Describe:         • If Other Autural Force Damage:         6: Were the natural forces causing the incident generated in conjunction with an extreme weather event?         64: If yes, specify:         • - Tornado         • Other         • Tornado         • Other         • If Other, Describe:           G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column           Excavation Damage only one sub-cause can be picked from shaded left-hand column           Excavation Damage only one sub-cause can be picked from shaded left-hand column   Excavation Damage by Operator	G2 - Natural Force Damage - only one sub-cause can be picked from shaded left-handed column         Natural Force Damage - Sub-Cause:         - If Earth Movement, NOT due to Heavy Rains/Floods:         1. Specify:       - If Other, Describe:         - If Heavy Rains/Floods:         2. Specify:       - If Other, Describe:         - If Lightning:       - If Other, Describe:         3. Specify:       - If Other, Describe:         - If Temperature:       -         4. Specify:       - If Other, Describe:         - If High Winds:       -         - If Other Atural Force Damage:       -         5. Describe:       -         Complete the following if any Natural Force Damage sub-cause is selected.       -         6. Were the natural forces causing the Incident generated in conjunction       -         with an extreme weather event?       -         - Tornado       -         - Other       - If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         If Excavation Damage by Operator (First P	If Other, Describe:			
Natural Force Damage – Sub-Cause:         • If Earth Movement, NOT due to Heavy Rains/Floods:         1. Specify:       - If Other, Describe:         • If Heavy Rains/Floods:         2. Specify:         • If Uther, Describe:         • If Lightning:         3. Specify:         • If Temperature:         4. Specify:         • If Other, Describe:         • If High Winds:         • If Other Natural Force Damage:         5. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         6. Wret for natural force causing the Incident generated in conjunction with an extreme weather event?         6a. If yes, specify: (select all that apply):         - Introduce         - Tropical Storm         - Tropical Storm         - Tornado         - Other         - Other         - If Uther, Describe:             G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column           Excavation Damage by Operator (First Party):           - If Excavation Damage by Operator's Contractor (Second Party):       - If Excavation Damage by Operator's Contractor (Second Party):                  (If Pre	Natural Force Damage – Sub-Cause:         • If Earth Movement, NOT due to Heavy Rains/Floods:         1. Specify:       - If Other, Describe:         • If Heavy Rains/Floods:         2. Specify:       - If Other, Describe:         • If Lightning:         3. Specify:       - If Other, Describe:         • If Ughtning:         3. Specify:       - If Other, Describe:         • If Temperature:         4. Specify:       - If Other, Describe:         • If High Winds:         • If Other Natural Force Damage:         5. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         6. Were the natural forces causing the Incident generated in conjunction with an extreme weather event?         6a. If yes, specify: (seleci all that apply):         • Hurricane         • Tropical Storm         • Topical Storm         • Topical Storm         • Other         • If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage by Operator (First Party):         • If Excavation Damage by Operator (Second Party):         • If Excavation Damage by Operator is Contractor (Sec	G2 - Natural Force Damage - only one sub-cause can be picked fror	n shaded left-handed column		
If Earth Movement, NOT due to Heavy Rains/Floods:         1. Specify:	If Earth Movement, NOT due to Heavy Rains/Floods:	Natural Force Damage – Sub-Cause:			
I Meary Rains/Floods:     If Other, Describe:     If Heavy Rains/Floods:     Specify:         If Other, Describe:     If Lightning:         Specify:         If Temperature:     If Temperature:     If Temperature:     If Temperature:     If Other, Describe:     If Other, Describe:     If Other Natural Force Damage:         If Other, Describe:     If Other Natural Force Damage:         Specify:         Spe	I Specify: I Heavy Rains/Floods: I Hother, Describe: I Hother, Describe: I Heavy Rains/Floods: Second Seco	If Farth Movement, NOT due to Heavy Paine/Flooder			
I define the following if any Natural Force Damage sub-cause is selected.  I they support of the the angle only one sub-cause can be picked from shaded left-hand column  Excavation Damage only one sub-cause can be picked from shaded left-hand column  Excavation Damage by Operator's Contractor (Second Party):  I f Excavation Damage by Operator's Contractor (Second Party):  I f Excavation Damage by Deprator's Contractor (Second Party):  I f Excavation Damage by Diff Party:  I f Previous Damage Due to Excavation Activity:  Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.  I has one or more internal inspection tool collected data at the point of the Incident?  I as one of the angle by Character of the many of t	I Other, Describe: If Other, Describe: If Ughtning: Second Secon	1 Specify:			
If Heavy Rains/Floods:     If Unter, Describe:     If Lightning:         If Cher, Describe:         If Temperature:         If Temperature:         If Temperature:         If Temperature:         If Temperature:         If Other, Describe:         If Other, Describe:         If Other, Describe:         If Temperature:         If Other, Describe:         If Other, Natural Force Damage:         S. Describe:         If Other Natural Force Damage:         S. Describe:         If Other Natural Force Damage:         S. Describe:         If Other Natural Force Damage sub-cause is selected.         Se Use Specify: (select all that apply):             - If Other, Describe:             - If Other, Describe:             - Torpical Storm             - Torpical Storm             - Tornado             - Other             - If Other, Describe:             - If Other, Describe:             - Tornado             - Other             - If Other, Describe:             - If Excavation Damage only one sub-cause can be picked from shaded left-hand column Excavation Damage - Sub-Cause:             - If Excavation Damage by Operator (First Party):             - If Excavation Damage by Operator (First Party):             - If Excavation Damage by Operator's Contractor (Second Party):             - If Excavation Damage Due to Excavation Activity:             - Uther or more internal inspection tool collected data at the point of	If Heavy Rains/Floods:     Specify:         If Other, Describe:         If Other, Describe:         If Lightning:         S. Specify:         If Temperature:         If Temperature:         If Temperature:         If Other, Describe:         If Other Natural Force Damage:         S. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         S. Were the natural forces causing the Incident generated in conjunction         with an extreme weather event?         Ga. If yes, specify: (select all that apply):             - Hurricane             - Tornado             - Other             - Tornado             - Other             - If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column Excavation Damage - Sub-Cause:             - If Other, Describe:         If Excavation Damage by Operator's Contractor (Second Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Previous Damage Due to Excavation Activity:         Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         1. Has one more internal inspection tool collected data at the point of         the Incident?         - If Itex Leakage             - Ultrasonic             - Ultrasonic             - Year:             - Ultrasonic             - Ultrasonic             - Year:             - Ultrasonic             - Year:             - Ultrasonic             - Year:             - Ultrasonic				
If Heavy Rains/Floods:         Specify:         - If Other, Describe:         If Uther, Describe:         If Other, Describe:         If Temperature:         Specify:         If Other, Describe:         If Other Natural Force Damage:         S. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         S. Were the natural forces causing the Incident generated in conjunction         with an extreme weather event?         Sa. If yes, specify: (select all that apply):             - Hurricane             - Tropical Storm             - Tornado             - Other             - If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage by Operator (First Party):         - If Excavation Damage by Operator (First Party):         - If Excavation Damage by Operator (First Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Excavation Damage by Third Party:         - If Previous Damage Due to Excavation Activity:         Complete Questions 1-5 ONLY If the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         - I. Has one or more inte	If Heavy Rains/Floods:     Specify:         - If Other, Describe:         If Lightning:         Specify:         - If Other, Describe:         If High Winds:         - If Temperature:         If High Winds:         - If Other, Describe:         If High Winds:         - If Other Natural Force Damage:         Specify:         - If Other, Describe:         If Other Natural Force Damage:         Specify:         - If Other Natural Force Damage:         Specify:         - If Other Natural Force Damage:         Specify:         Specify:         - If Other Natural Force Damage:         Specify:	- It Other, Describe:			
Specify:         If Ughtning:         If Other, Describe:         If Other, Describe:         If Other, Describe:         If Temperature:         If Specify:         If Other, Describe:         If Other, Describe:         If High Winds:         If Other Natural Force Damage:         If Other Natural Force Damage:         If Other Natural Force Damage:         S. Describe:         If Other Natural Force Damage sub-cause is selected.         S. Were the following if any Natural Force Damage sub-cause is selected.         S. Were the natural forces causing the Incident generated in conjunction         with an extreme weather event?         Ga. If yes, specify: (select all that apply):             -If Other, Describe:             G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only operator (First Party):         - If Excavation Damage by Operator (First Party):         - If Excavation Damage by Operator (Second Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Previous Damage by Other to collected data at the point of         the Interval inspection tool collected data at the point of         the Interval inspection tool collected data at the point of         the Interval inspection tool collected data at the point of         the Interval inspection tool and indicate most recent year run:         - Magnetic Flux Leakage         Year:         - Geometry	2. Specify: - If Other, Describe: - If Lightning: 3. Specify: - If Other, Describe: - If High Winds: - If Other, Describe: - If Other, Describe: - If Other Natural Force Damage: - If Other Natural Force Damage sub-cause is selected Other - If Other, Describe: - If Cause: - If Other, Describe: - If Excavation Damage only one sub-cause can be picked from shaded left-hand column Excavation Damage by Operator's Contractor (Second Party): - If Excavation Damage by Operator's Contractor (Second Party): - If Excavation Damage by Operator's Contractor (Second Party): - If Excavation Damage Due to Excavation Activity: - Other Part C, Question 3) is Pipe or Weld I. Has one or more internal inspection tool collected data at the point of the Incident? - Nagnetic Flux Leakage - Vear: - Ultrasonic - Vear: - Other Ultrasonic - Vear: - Other	- If Heavy Rains/Floods:			
If Lightning:     If Other, Describe:     If Other, Describe:     If Temperature:     If Temperature:     If Temperature:     If Temperature:     If Temperature:     If Other, Describe:     If Other, Describe:     If Other, Describe:     If Other, Describe:     If Other Natural Force Damage:     If Other Natural Force Damage sub-cause is selected.     If Wes, Specify: (select all that apply):         - If Uther, Describe:     If Set Bytes, Specify: (select all that apply):         - If Uther, Describe:     If Other, Describe:     If Excavation Damage only one sub-cause can be picked from shaded left-hand column     Excavation Damage - Sub-Cause:     If Excavation Damage by Operator's Contractor (Second Party):     If Excavation Damage by Operator's Contractor (Second Party):     If Excavation Damage by Operator's Contractor (Second Party):     If Previous Damage by Third Party:     If Previous Damage Due to Excavation Activity:     Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.     I. Has one or more internal inspection tool collected data at the point of     the Incident?         Agnetic Flux Leakage	If Other, Describe:     If Other, Describe:     If Other, Describe:     If Temperature:     Specify:     If Temperature:     If Temperature:     If Other, Describe:     If Other, Describe:     If Other Natural Force Damage:     If Other, Describe:     If Other Natural Force Damage:     If Other Natural Force Damage sub-cause is selected.     If Other Natural Force Damage sub-cause is selected.     If Secondary Seconda	2. Specify:			
If Lightning:         Specify:         If Other, Describe:         If Other Natural Force Damage:         Specify:	If Lightning:         Specify:         If Temperature:         If Temperature:         If Other, Describe:         If Other, Describe:         If Other Natural Force Damage:         Specify:	- If Other, Describe:			
Sective     Specify:	Specify:     If Temperature:     Specify:         If Other, Describe:         If Other, Describe:         If Other Natural Force Damage:         If Other, Describe:         If Other Natural Force Damage:         If Other Natural Force Damage:         If Other Natural Force Damage:         Secribe:         If Other Natural Force Damage sub-cause is selected.         Secribe:         Secrib:         Secribe:	- If Lightning:			
3. Specify:       -         If Temperature:       -         4. Specify:       - If Other, Describe:         -       If Ather Natural Force Damage:         5. Describe:       -         Complete the following if any Natural Force Damage sub-cause is selected.         6. Were the natural forces causing the Incident generated in conjunction with an extreme weather event?         6a. If yes, specify:       (select all that apply):         -       - Horizane         -       Tropical Storm         -       - Torpical Storm         -       - If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage – Sub-Cause:         -       - If Excavation Damage by Operator (First Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Excavation Damage by Operator's Contractor (Second Party):         - If Excavation Damage by Third Party:         - If Previous Damage Due to Excavation Activity:         Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         1. Has one or more internal inspection tool collected data at the point of the Incident?         - Magnetic Flux Leakage       Year:         - Ultrasonic       Year: <t< td=""><td>3. specify:       - If Other, Describe:         4. Specify:       - If Other, Describe:         • If High Winds:       -         • If Other Natural Force Damage:       -         5. Describe:       -         Complete the following if any Natural Force Damage sub-cause is selected.       -         6. Were the natural forces causing the Incident generated in conjunction with an extreme weather event?       -         6a. If yes, specify: (select all that apply):       -         • Hurricane       -         • Tropical Storm       -         • Other       - If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage by Operator (First Party):         • If Excavation Damage by Operator (Scontractor (Second Party):         • If Excavation Damage by Operator's Contractor (Second Party):         • If Previous Damage Due to Excavation Activity:         Complete Questions 15 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         1. Has one or more internal inspection tool collected data at the point of the Incident?         14. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:         • Algenetic Flux Leakage       Year:</td><td></td><td></td></t<>	3. specify:       - If Other, Describe:         4. Specify:       - If Other, Describe:         • If High Winds:       -         • If Other Natural Force Damage:       -         5. Describe:       -         Complete the following if any Natural Force Damage sub-cause is selected.       -         6. Were the natural forces causing the Incident generated in conjunction with an extreme weather event?       -         6a. If yes, specify: (select all that apply):       -         • Hurricane       -         • Tropical Storm       -         • Other       - If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage only one sub-cause can be picked from shaded left-hand column         Excavation Damage by Operator (First Party):         • If Excavation Damage by Operator (Scontractor (Second Party):         • If Excavation Damage by Operator's Contractor (Second Party):         • If Previous Damage Due to Excavation Activity:         Complete Questions 15 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         1. Has one or more internal inspection tool collected data at the point of the Incident?         14. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:         • Algenetic Flux Leakage       Year:				
If Temperature:         If Other, Describe:         If Other, Describe:         If Other, Natural Force Damage:         If Other, Describe:         If Other Natural Force Damage:         If Other Natural Force Damage:         S. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         S. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         S. Were the natural forces causing the Incident generated in conjunction         with an extreme weather event?         Sa. If yes, specify: (select all that apply):             - If Other, Describe:             - Torpical Storm             - Torpical Storm             - Tornado             - Other             - If Other, Describe:         G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column  Excavation Damage - Sub-Cause:             - If Excavation Damage by Operator (First Party):             - If Excavation Damage by Operator's Contractor (Second Party):             - If Excavation Damage by Third Party:             - If Previous Damage by Third Party:             - If Previous Damage by Third Party:             - If Previous Damage Due to Excavation Activity:             Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.             1. Has one or more internal inspection tool collected dat at the point of             the Incident?             - Magnetic Flux Leakage             - Wear:             - Geometry	If Temperature:	3. Specity:			
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If Other Natural Force Damage:     S. Describe:     Complete the following if any Natural Force Damage sub-cause is selected.     S. Were the natural forces causing the Incident generated in conjunction     with an extreme weather event?     Ga. If yes, specify: (select all that apply):         - Hurricane         - Tropical Storm         - Tornado         - Other         - If Other, Describe:     G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column     Excavation Damage only one sub-cause can be picked from shaded left-hand column     Excavation Damage only one sub-cause can be picked from shaded left-hand column     if Excavation Damage by Operator (First Party):         - If Excavation Damage by Operator (Second Party):         - If Excavation Damage by Operator (Second Party):         - If Excavation Damage Due to Excavation Activity:         Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         1. As one or more internal inspection tool collected data at the point of         the Incident?         1a. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:         - Magnetic Flux Leakage         Year:         - Ultrasonic         Year:         - Geometry	If Other Natural Force Damage:         5. Describe:         Complete the following if any Natural Force Damage sub-cause is selected.         6. Were the natural forces causing the Incident generated in conjunction         with an extreme weather event?         6a. If yes, specify: (select all that apply):				
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- Tropical Storm     - Tornado     - Other     - If Other, Describe:  G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column  Excavation Damage – Sub-Cause:     - If Excavation Damage by Operator (First Party):     - If Excavation Damage by Operator's Contractor (Second Party):     - If Excavation Damage by Operator's Contractor (Second Party):     - If Excavation Damage by Third Party:     - If Previous Damage Due to Excavation Activity: Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.  1. Has one or more internal inspection tool collected data at the point of the Incident?     1a. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:     - Magnetic Flux Leakage	Tropical Storm     Tornado     Tornado     Other     Tornado     Other     If Other, Describe:  G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column  Excavation Damage – Sub-Cause:     If Excavation Damage by Operator (First Party):     If Excavation Damage by Operator's Contractor (Second Party):     If Excavation Damage by Operator's Contractor (Second Party):     If Excavation Damage by Operator's Contractor (Second Party):     If Excavation Damage by Third Party:     If Previous Damage Due to Excavation Activity:     Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.  I. Has one or more internal inspection tool collected data at the point of the Incident?     Ia. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:         - Magnetic Flux Leakage         Year:         - Ultrasonic         Year:         - Geometry	- Hurricane			
- Tornado     - Other     - Other     - If Other, Describe:     G3 - Excavation Damage only one sub-cause can be picked from shaded left-hand column     Excavation Damage – Sub-Cause:     - If Excavation Damage by Operator (First Party):     - If Excavation Damage by Operator (First Party):     - If Excavation Damage by Operator's Contractor (Second Party):     - If Excavation Damage by Third Party:     - If Excavation Damage Due to Excavation Activity:     Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.     1. Has one or more internal inspection tool collected data at the point of     the Incident?     1a. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:         - Magnetic Flux Leakage         Year:         - Ultrasonic         Year:         - Geometry	- Tornado     - Other     - Other     - Other     - If Other, Describe:     - If Other, Describe:     - Geometry     - If Other, Describe:     - If Other, Describe:     - If Other, Describe:     - If Other, Describe:     - If Excavation Damage only one sub-cause can be picked from shaded left-hand column     Excavation Damage – Sub-Cause:     - If Excavation Damage by Operator (First Party):     - If Excavation Damage by Operator (First Party):     - If Excavation Damage by Operator's Contractor (Second Party):     - If Excavation Damage by Operator's Contractor (Second Party):     - If Excavation Damage by Operator's Contractor (Second Party):     - If Excavation Damage by Third Party:     - If Excavation Damage by Third Party:     - If Previous Damage Due to Excavation Activity:     Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld. 1. Has one or more internal inspection tool collected data at the point of the Incident?     1a. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:         - Magnetic Flux Leakage         Year:         - Ultrasonic         Year:         - Oeometry	- Tropical Storm			
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Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         1. Has one or more internal inspection tool collected data at the point of the Incident?       1         1a. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run: <ul> <li>Magnetic Flux Leakage</li> <li>Ultrasonic</li> <li>Year:</li> <li>Geometry</li> </ul>	Complete Questions 1-5 ONLY IF the "Item Involved in Incident" (From Part C, Question 3) is Pipe or Weld.         1. Has one or more internal inspection tool collected data at the point of the Incident?       1         1a. If Yes, for each tool used, select type of internal inspection tool and indicate most recent year run:	- II FIEVIOUS Damage Due to Excavation Activity:			
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- Magnetic Flux Leakage     - Ultrasonic     - Geometry	- Magnetic Flux Leakage     - Ultrasonic     - Geometry	1. If Vac for each tool used select time of internal increation tool or	l nd indicate most recent year run:		
- Magnetic Flux Leakage Year: - Ultrasonic Year: - Geometry	- Magnetic Flux Leakage Year: - Ultrasonic - Geometry	ra. In res, for each tool used, select type of internal inspection tool an	iu muicate most recent year run.		
Year:       - Ultrasonic       Year:       - Geometry	Year: - Ultrasonic Year: - Geometry	- Magnetic Flux Leakage			
- Ultrasonic Year: - Geometry	- Ultrasonic Year: - Geometry	Year:			
Year: - Geometry	Year: - Geometry	- Ultrasonic			
- Geometry	- Geometry	Year <sup>.</sup>			
		- Geometry			
Year	Year:	Year			

- Caliper	
Year:	
- Crack	
Year:	
- Hard Spot	
Year:	
- Combination Tool	
Year:	
- Transverse Field/Triaxial	
Year:	
- Other:	
Year:	
Describe:	
2. Do you have reason to believe that the internal inspection was	
3. Has one or more hydrotest or other pressure test been conducted	
- II TES.	
Most recent year tested:	
l est pressure (psig):	
4. Has one or more Direct Assessment been conducted on the pipeline segment?	
- If Yes, and an investigative dig was conducted at the point of the Inc	sident:
Most recent year conducted:	
- If Yes, but the point of the Incident was not identified as a dig site:	
Most recent year conducted:	
5. Has one or more non-destructive examination been conducted at the	
point of the Incident since January 1, 2002?	
5a. If Yes, for each examination conducted since January 1, 2002, se	lect type of non-destructive examination and indicate most
recent year the examination was conducted.	neer type of non destructive examination and indicate most
- Radiography	
Vear	
Guided Waye Ultrasonic	
- Guideu Wave Olitasonic	
tedi.	
Year:	
- Wet Magnetic Particle Test	
Year:	
- Dry Magnetic Particle Test	
Year:	
- Other	
Year:	
Describe:	
Complete the following if Excavation Damage by Third Party is select	ed as the sub-cause.
6. Did the energiest and prior patification of the execution activity?	
6. If Ves. Notification reseived from (select all that apply)	
ba. If Yes, Notification received from (select all that apply).	
- Une-Call System	
- EXCAVATOR	
- Contractor	
- Landowner	
Complete the following mandatory CGA-DIRT Program questions if any	/ Excavation Damage sub-cause is selected.
7. Do you want PHMSA to upload the following information to CGA-	
DIRT (www.cga-dirt.com)?	
8. Right-of-Way where event occurred (select all that apply):	1
- Public	
- If Public Specify:	
- Private	
- If Privata Spacify:	
- Pineline Property/Essement	
- Kalliudu Dadiootad Dublio Utility Economet	
- Dedicated Public Utility Easement	
- Data not collected	
- Unknown/Other	
9. Type of excavator :	
10. Type of excavation equipment :	
11. Type of work performed :	

12. Was the One-Call Center notified? - Yes - No	
12a. If Yes, specify ticket number:	
12b. If this is a State where more than a single One-Call Center	
exists, list the name of the One-Call Center notified:	
13. Type of Locator:	
14. Were facilities marked correctly?	
16. Did the damage cause an interruption in service?	
16. If Yes specify duration of the interruption: (hours)	
47 Description of the CCA DIBT Best Course (select only the one model	I mineret first level CCA DIPT Deet Course and then where
<ol> <li>Description of the CGA-DIRT Root Cause (select only the one predo available as a choice, then one predominant second level CGA-DIRT</li> </ol>	minant first level CGA-DIR   Root Cause and then, where root Cause as well):
<ul> <li>Predominant first level CGA-DIRT Root Cause:</li> </ul>	
<ul> <li>If One-Call Notification Practices Not Sufficient, Specify:</li> </ul>	
<ul> <li>If Locating Practices Not Sufficient, Specify:</li> </ul>	
<ul> <li>If Excavation Practices Not Sufficient, Specify:</li> </ul>	
- If Other/None of the Above, Explain:	
G4 - Other Outside Force Damage - only one sub-cause can be se	elected from the shaded left-hand column
Other Outside Force Damage – Sub-Cause:	
- If Nearby Industrial, Man-made, or Other Fire/Explosion as Primary	Cause of Incident:
K Demone by Car Truck or Other Metaded Methods / Product 10	T Engaged in Everyotics
- If Damage by Car, Truck, or Other Motorized Venicle/Equipment NO	I Engaged in Excavation:
1. Venicie/Equipment operated by:	
<ul> <li>If Damage by Boats, Barges, Drilling Rigs, or Other Maritime Equips Their Mooring:</li> </ul>	nent or Vessels Set Adrift or Which Have Otherwise Lost
2. Select one or more of the following IF an extreme weather event was a	a factor:
- Hurricane	
- Tropical Storm	
- Tornado	
- Heavy Rains/Flood	
- Other	
lf Othern Describer	
- If Other, Describe:	
- If Other, Describe: - If Routine or Normal Fishing or Other Maritime Activity NOT Engage	ed in Excavation:
If Routine or Normal Fishing or Other Maritime Activity NOT Engage	ed in Excavation:
If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:	ed in Excavation:
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:	ed in Excavation:
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from	ed in Excavation: PART C. Question 3) is Pipe or Weld.
If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:         If Previous Mechanical Damage NOT Related to Excavation:         Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from         3. Has one or more internal inspection tool collected data at the point of         the Instance.	PART C, Question 3) is Pipe or Weld.
If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?	PART C, Question 3) is Pipe or Weld.
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If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a             - Magnetic Flux Leakage             Most recent year run:	PART C, Question 3) is Pipe or Weld.
If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.
If Other, Describe:     If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.
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If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag      If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
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If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a             - Magnetic Flux Leakage             Most recent year run:             - Ultrasonic             Most recent year run:             - Caliper             Most recent year run:             - Crack             Most recent year run:             - Crack             Most recent year run:             - Cambination Tool             Most recent year run:             - Combination Tool             Most recent year run:             - Combination Tool	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag      If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a             - Magnetic Flux Leakage             Most recent year run:             - Ultrasonic             Most recent year run:             - Caliper             Most recent year run:             - Crack             Most recent year run:             - Crack             Most recent year run:             - Cambination Tool             Most recent year run:             - Combination Tool             Most recent year run:             - Transverse Field/Triaxial	PART C, Question 3) is Pipe or Weld.  nd indicate most recent year run:
If Conter, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag      If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a             - Magnetic Flux Leakage	PART C, Question 3) is Pipe or Weld.  PART C, Question 3) is Pipe or Weld.  Ind indicate most recent year run:
If Other, Describe:     If Routine or Normal Fishing or Other Maritime Activity NOT Engag     If Electrical Arcing from Other Equipment or Facility:     If Previous Mechanical Damage NOT Related to Excavation:     Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from     3. Has one or more internal inspection tool collected data at the point of     the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a             - Magnetic Flux Leakage             Most recent year run:             - Ultrasonic             - Ultrasonic             - Geometry             Most recent year run:             - Caliper             Most recent year run:             - Crack             Most recent year run:             - Crack             Most recent year run:             - Crack             Most recent year run:             - Transverse Field/Triaxial             Most recent year run:             - Transverse Field/Triaxial	PART C, Question 3) is Pipe or Weld.  PART C, Question 3) is Pipe or Weld.  Ind indicate most recent year run:
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If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:         If Previous Mechanical Damage NOT Related to Excavation:         Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from         3. Has one or more internal inspection tool collected data at the point of         the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  PART C, Question 3) is Pipe or Weld.  Ind indicate most recent year run:
If Routine or Normal Fishing or Other Maritime Activity NOT Engage     If Electrical Arcing from Other Equipment or Facility:         If Previous Mechanical Damage NOT Related to Excavation:         Complete Questions 3-7 ONLY IF the "Item Involved in Incident" (from         3. Has one or more internal inspection tool collected data at the point of         the Incident?         3a. If Yes, for each tool used, select type of internal inspection tool a	PART C, Question 3) is Pipe or Weld.  PART C, Question 3) is Pipe or Weld.  Ind indicate most recent year run:

1	cines evisional construction of the point of the locident?		
	since original construction at the point of the incident?		
	- If Yes:		
	Most	recent year tested:	
	Τε	est pressure (psig):	
	6. Has one or more Direct Assessment been conducte segment?	d on the pipeline	
	- If Yes, and an investigative dig was conducted a	t the point of the Incid	ent ·
	Most recent	vear conducted.	
	If Yes, but the point of the Incident was not ider	tified as a dig site:	
	- If Tes, but the point of the incident was not dei	nineu as a uly sile.	
	point of the Incident since January 1, 2002?	conducted at the	
	7a. If Yes, for each examination conducted since recent year the examination was conducted:	elect type of non-destructive examination and indicate most	
	- Radiography		
	Most recent	year conducted:	
	- Guided Wave Ultrasonic		
	Most recent	vear conducted:	
	- Handheld I litrasonic Tool	,	
	Most recent	voor oondustad.	
	wost recent	year conducted:	
	- Wet Magnetic Particle Test		
	Most recent	year conducted:	
	- Dry Magnetic Particle Test		
	Most recent	vear conducted:	
	- Other	,	
	Most recent	vear conducted.	
	Mostrecent		
		Describe.	
lf	- If Intentional Damage:		
	8. Specify:		
	-	If Other, Describe:	
	- If Other Outside Force Damage:		
	9. Describe:		
	G5 – Material Failure of Pipe or Weld	Use this section to Incident" (from PA	o report material failures ONLY IF the "Item Involved in IRT C, Question 3) is "Pipe" or "Weld."
	G5 – Material Failure of Pipe or Weld	Use this section to Incident" (from PA *Only one sub-cau	o report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause:	Use this section to Incident" (from PA *Only one sub-cau	o report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a	o report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a	o report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a	o report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis" Describe	o report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required)	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation	p report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted:	p report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply)	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted:	p report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related:	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted:	p report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related:	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted:	p report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
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	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - - Mechanical Stress - Other	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe:	preport material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other	Use this section to Incident" (from P/ *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe:	preport material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld." se can be selected from the shaded left-hand column pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - - Mechanical Stress - Other	Use this section to Incident" (from P/ *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe:	report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld."      se can be selected from the shaded left-hand column      ply):
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	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other - If Original Manufacturing-related (NOT girth weld 2. List contributing factors: (select all that apply) - If Eatique or Vibration related:	Use this section to Incident" (from P/ *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe: If Other, Describe:	o report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."         se can be selected from the shaded left-hand column         pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - - Mechanical Stress - Other - If Original Manufacturing-related (NOT girth weld 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related:	Use this section to Incident" (from P/ *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe: If Other, Describe:	o report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."         se can be selected from the shaded left-hand column         pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other - If Original Manufacturing-related (NOT girth weld 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related:	Use this section to Incident" (from P/ *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: If Other, Describe: If Other, Describe: If Other, Describe: If Other Describe:	o report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."         se can be selected from the shaded left-hand column         pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other - If Original Manufacturing-related (NOT girth weld 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress	Use this section to Incident" (from P/ *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: If Other, Describe: If Other, Describe: If Other, Describe: If Other, Describe: Specify: If Other, Describe:	o report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."         se can be selected from the shaded left-hand column         pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under ( <i>Supplemental Report required</i> ) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other - Mechanical Stress -	Use this section to Incident" (from P/ *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: If Other, Describe: If Other, Describe: or other welds for Specify: If Other, Describe:	o report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."         se can be selected from the shaded left-hand column         pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other - Mechanical Stress - Other - Mechanical Stress - Other	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe: If Other, Describe: If Other, Describe: Specify: If Other, Describe:	o report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."         se can be selected from the shaded left-hand column         pply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other - If Fatigue or Vibration related: - Mechanical Stress - Other - Mechanical Stress - Other - Mechanical Stress - Other - If Fatigue or Vibration related: - If Fatigue or Vibrat	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe: or other welds form Specify: If Other, Describe: f Other, Describe:	report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."      se can be selected from the shaded left-hand column      ply):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - Mechanical Stress - Other - Mechanical Stress - Other - Mechanical Stress - Other - If Fatigue or Vibration related: - If Environmental Cracking-related:	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe: If Other, Describe: f Other, Describe: f Other, Describe:	b report material failures ONLY IF the "Item Involved in ART C, Question 3) is "Pipe" or "Weld."  se can be selected from the shaded left-hand column  pply):  med in the field):
	G5 – Material Failure of Pipe or Weld Material Failure of Pipe or Weld – Sub-Cause: 1. The sub-case selected below is based on the follor - Field Examination - Determined by Metallurgical Analysis - Other Analysis - Other Analysis - If "Other - Sub-cause is Tentative or Suspected; Still Under (Supplemental Report required) - If Construction-, Installation- or Fabrication- rela 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - - Mechanical Stress - Other - - If Original Manufacturing-related (NOT girth weld 2. List contributing factors: (select all that apply) - If Fatigue or Vibration related: - - Mechanical Stress - Other - - If Environmental Cracking-related: - - If Environmental Cracking-related: - - Sub-cause is Tentative or Suspected: - - If Environmental Cracking-related: - - - - If Environmental Cracking-related: - - - - - - - - - - - - -	Use this section to Incident" (from PA *Only one sub-cau wing (select all that a Analysis", Describe Investigation ted: Specify: If Other, Describe: If Other, Describe: Specify: If Other, Describe: Specify: If Other, Describe:	b report material failures ONLY IF the "Item Involved in NRT C, Question 3) is "Pipe" or "Weld."         se can be selected from the shaded left-hand column         pply):

Complete the following if any Material Failure of Pipe or Weld sub-cause is selected.		
4. Additional Factors (select all that apply):		
- Dent		
- Gouge		
- Pipe Bend		
- Arc Burn		
- Crack		
- Lack of Fusion		
- Lamination		
- Buckle		
- Wrinkle		
- Misalignment		
- Burnt Steel		
- Other		
- If Other, Describe:		
5. Has one or more internal inspection tool collected data at the point of		
the incident?	ad indicate most recent year run.	
5a. If Yes, for each tool used, select type of internal inspection tool an	id indicate most recent year run.	
Most recent year run:		
- Ultrasonic		
Most recent year run:		
- Geometry		
Most recent year run:		
- Caliper		
Most recent year run:		
Crack		
Most recent year run:		
- Hard Spot		
Most recent year run:		
- Combination Tool		
Most recent year run:		
- Transverse Field/Triaxial		
Most recent vear run:		
- Other		
Most recent year run:		
Describe:		
Describe.		
b. Has one or more hydrotest or other pressure test been conducted since original construction of the point of the locident?		
If Voo:		
- II Tes.		
Test pressure (psin):		
7 Has one or more Direct Assessment been conducted on the nineline		
segment?		
- If Yes, and an investigative dig was conducted at the point of the Incide	ent:	
Most recent year conducted:		
<ul> <li>If Yes, but the point of the Incident was not identified as a dig site:</li> </ul>		
Most recent year conducted:		
8. Has one or more non-destructive examination(s) been conducted at		
the point of the Incident since January 1,2002?		
8a. If Yes, for each examination conducted since January 1, 2002, se	elect type of non-destructive examination and indicate most	
recent year the examination was conducted:		
- Radiography		
Most recent year conducted:		
- Guided Wave Ultrasonic		
Most recent year conducted:		
- Handheld Ultrasonic Tool		
Most recent year conducted		
- Wet Magnetic Particle Test		
- vvet iviagiletit Fatticle 1851		
iviost recent year conducted:		
- Dry Magnetic Particle Test		
Most recent year conducted:		
- Other		
Most recent year conducted:		

Describe:			
G6 - Equipment Failure - only one sub-cause can be selected from the shaded left-hand column			
Equipment Failure – Sub-Cause:			
- If Malfunction of Control/Relief Equipment:			
1. Specify:			
- Control Valve			
- Instrumentation - SCADA			
- Communications			
- Block Valve			
- Check Valve			
- Relief Valve			
- Power Failure			
- Stopple/Control Fitting			
- ESD System Failure			
- Other			
- If Other, Describe:			
- If Compressor or Compressor-related Equipment:			
2. Specify:			
- If Other, Describe:			
It Threaded Connection/Coupling Failure:			
J. Specily.			
- If Non-threaded Connection Failure:			
4. Specify:			
- If Other, Describe:			
- If Defective or Loose Tubing or Fitting:			
- If Failure of Equipment Body (except Compressor), Vessel Plate, or	other Material:		
- If Other Equipment Failure:	Ι		
5. Describe:			
Complete the following if any Equipment Failure sub-cause is selected	l.		
6. Additional factors that contributed to the equipment failure (select all th	at apply)		
- Excessive vibration			
- Overpressurization			
- No support or loss of support			
- Manufacturing defect			
- Loss of electricity			
- Improper installation			
- Mismatched items (different manufacturer for tubing and tubing			
fittings)			
- Dissimilar metals			
- Breakdown of soft goods due to compatibility issues with			
transported gas/fluid			
<ul> <li>Valve vault or valve can contributed to the release</li> </ul>			
- Alarm/status failure			
- Misalignment			
- Thermal stress			
- Other			
- If Other, Describe:			
G7 – Incorrect Operation - only one sub-cause can be selected from	n the shaded left-hand column		
Incorrect Operation – Sub-Cause:			
- If Damage by Operator or Operator's Contractor NOT Related to Excavation and NOT due to Motorized Vehicle/Equipment Damage:			
- If Underground Gas Storage, Pressure Vessel, or Covers Allowed a	r Causad to Overpressure:		
- In Underground Gas Storage, Pressure vessel, or Cavern Allowed C			

If Other Describer			
- If Other, Describe:			
If Valve Left or Placed in Wrong Position, but NOT Resulting in an Overpressure:			
K Dineline en Environent Overneesevred			
- If Pipeline or Equipment Overpressured:			
K Environment Net Installed Dreverby			
- If Equipment Not Installed Properly:			
If Wrong Equipment Specified or Installed			
- If wrong Equipment Specified or Installed:			
K Other Incorrect Onerstien:			
- If Other Incorrect Operation:			
2. Describe.			
Complete the following if any Incorrect Operation sub-cause is selecte	d.		
3. Was this Incident related to: (select all that apply)			
- Inadequate procedure			
- No procedure established			
- Failure to follow procedure			
- Other:			
- If Other, Describe:			
4. vvnat category type was the activity that caused the Incident:			
5. vvas the task(s) that led to the incident identified as a covered task in your Operator Qualification Program?			
5a. If Ves, were the individuals performing the task/s) qualified for			
the task(s)?			
G8 - Other Incident Cause - only one sub-cause can be selected from	om the shaded left-hand column		
Other Incident Cause – Sub-Cause:	Miscellaneous		
- If Miscellaneous:			
	During an anamoly investigation dig, operator employees		
	removed a large rock from underneath the pipeline and this		
	personel to take the pipeline out of service. The pipe		
	segment was cutout and replaced with new pipe.		
- If Unknown:			
2. Specify:			
	т		
PART - IN NARRATIVE DESCRIPTION OF THE INCIDEN			
Operator employees and third party contractors were on site of an	anomaly investigation dig, Operator employees were		
removing soil around the pipeline when operator employees smelle	ed an odor coming from the anamoly pie. The pipeline		
was taken out of service and an investigation was initiated . The re	esults of the leak investigation showed a dent on the		
pipe due to a rock underneath the pipe. The rock underneath the p	pipe was the cause of a small crack where the leak		
initiated. The pipe anamoly segment was cutout and replaced with	new pipe.		
File Full Name			
PARTI-PREPARER AND AUTHORIZED SIGNATURE			
Preparer's Name	Johnny Lopez		
Preparer's Title	Pipelie Safety Specialist		
Preparer's Telephone Number	7132152995		
Preparer's E-mail Address	johnny.lopez@williams.com		
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Date	07/25/2012		

## Appendix E Lab Analysis Removed

### File Available at PHMSA

## Appendix F Root Cause Analysis Removed

### File Available at PHMSA