Woodard, Marina (UTC)

From:

Faulkenberry, Mike [mike.faulkenberry@avistacorp.com]

Sent:

Friday, January 23, 2009 1:22 PM

To:

Woodard, Marina (UTC)

Subject:

Avista Utilities Reportable Incident, December 27, 2008

Attachments:

Document.pdf

<<Document.pdf>> Marina:

Attached is a written report for an Avista Reportable Incident.

Mike Faulkenberry, P.E. Chief Gas Engineer, Avista Utilities Office Phone (509) 495-8499 Cell Phone (509) 990-2386 mike.faulkenberry@avistacorp.com



1411 E. Mission St. PO Box 3727 Spokane, WA 99220-3727

JAN 23 2009

WUTC
Pipeline Safety Division

January 23, 2009

Ms. Anne Soiza
Director of Pipeline Safety
Washington Utilities and Transportation Commission
P.O. Box 47250
Olympia, WA. 98504-7250

Re: December 27th, 2008 Telephonic report, Avista Utilities

Dear Ms. Soiza,

This written response addresses the telephonic recorded message report Terry Barry of my staff made to the incident reporting hot line at 02:11 on December 27, 2008. This incident was assigned to Al Jones of your staff. Enclosed also is a copy of Form RSPA F 7100.1, Incident Report – Gas Distribution System, as submitted to the U.S. Department of Transportation. Additional information requested by Al Jones and David Lykken regarding this incident will be submitted at a later date under separate cover.

At approximately 22:15 on December 26, 2008, Avista Dispatch received a report of a structure fire and explosion at 206 N. Birch St. in Odessa, WA, Lincoln County. Avista personnel were dispatched at 22:17 and arrived at approximately 23:45. The leak was investigated, located, and secured by squeezing at 07:00 on December 27, 2008.

On December 26, 2008, a natural gas explosion occurred in a detached garage structure. Two individuals were injured directly by this incident, Roger Reyes, with severe burns requiring hospitalization and Cassandra McClure, requiring out-patient care. A third individual, Donald Hart, may have indirect personal injuries related to being evacuated from a neighboring residence. In addition, there is property damage to the garage and several vehicles, and possibly a dog. It appears that escaping natural gas migrated beneath frozen soil to the area of a garage



where it was ignited from an ignition source, suspected to be a cigarette. The building involved was not served with natural gas.

Avista personnel performed odorometer readings and a leak investigation and determined that gas was present in the surrounding soil. The two-inch diameter Aldyl PE gas main in the alley was found to have a crack as the result of suspected rock impingement. The damaged section of main was cut out and the remaining pipe was capped and abandoned in place. The system was operating at 40 psig at the time and has a 60 psig MAOP.

Several other structures and vehicles in the immediate area sustained damages. As outstanding claims against Avista exist, estimated costs are unavailable at this time, but are in excess of \$50,000.

Respectfully yours

Micheal J. Faulkenberry Chief Gas Engineer

Cc: Engineering Correspondence File Randy Chandler

Enclosure

NOTICE: This report is required by 49 CFR Part 191. Failure to report can result in a civil penalty not to exceed \$100,000 for each violation for each day the violation continues up to a maximum of \$1,000,000 for any related series of violations as provided in 49 USC 60122.

Form Approved OMB No. 2137-

Administration	Report Date				
INSTRUCTIONS					
Important: Please read the separate instructions for con and provide specific examples. If you do not Pipuline Safety Web Page at	mpleting this form before you begin. They clarify the information requested thave a copy of the instructions, you can obtain one from the Office Of				
PART A - GENERAL REPORT INFORMATION Check: XO	Original Report Supplemental Report Final Report				
Operator Name and Address					
a Operator's 5-digit Identification Number 31232					
b. If Operator does not own the pipeline, enter Owner's 5-digit li	Identification Number				
Name of Operator AVISTA CORP					
u Operator street address E. 1411 MISSION AVE					
e Operator address SPOKANE SPOKANE WA 99220					
City, County or Parish, State and Zip Cor					
2 Time and date of the incident	Consequences (check and complete all that apply) a. Fatality Total number of people: 0				
27.15 12/26/2008 fir month day year	Employees: 0 General Public: 0				
3 Incident Location	Non-employee Contractors: 9				
a. 206 N. BIRCH ST	b. 🛭 Injury requiring inpatient hospitalization				
Street or nearest street or road b ODESSA LINCOLN	Total number of people: 1				
City and County or Parish	Employees: 0 General Public: 1				
c. WA 99159	Non-employee Contractors: ⁰				
State and Zip Code	c. X Property damage/ loss (estimated) Total \$ 55200				
d. Latitude; 47.33 Longitude; -118 (if not available, see instructions for how to provide specific location)	Gas loss \$ 200 Operator damage \$ 5000				
e. Class location description Uclass 1	Public private property damage \$ 50000 d. ☑ Gas ignited				
Incident on Federal Land OYes ●No	<u> </u>				
4. Type of leak or rupture	e Gas did not ignite Explosion No Explosion				
Leak (Pinhole Connection Failure (complete sec. F5)	f. 🛭 Evacuation (general public only)5 people				
OPuncture, diameter or cross section (inches)	Evacuation Reason; Unknown				
Rupture (if applicable): Ocircumferential – Separation	 Emergency worker or public official ordered, precautionary Threat to the public 				
O Longitudinal	Company policy 6. Elapsed time until area was made safe:				
- Tear/ Crack, length (inches)	8 hr; 45 min.				
- Propagation Length, total, both sides (feet)	7. Telephone Report				
Other ROCK IMPINGEMENT CRACK	893436 12/27/2008				
A CONTRACTOR OF THE PARTY OF TH	NRC Report Number month day year				
	a. Estimated pressure at point and time of incident: 40				
	b. Max. allowable operating pressure (MAOP): 60 PSIG				
·	c. MÀOP established by: ■ Test Pressure 90 psig				
	049 CFR § 192. 619 (a)(3)				
PART B – PREPARER AND AUTHORIZED SIGNATURE					
MIKE FAULKENBERRY	5094958499				
type or print) Preparer's Name and Tide	Area Code and Telephone Number				
MIKE, FAULKENBERRY@AVISTACORP.COM	M Arga Copies and Equationity Millionia				
Preparer's E-mail Address	Area Code and Facsimile Number				
Nuthorized Signature (type or print) Name	and Title Date Area Code and Telephone Number				

PART C - ORIGIN OF THE INCIDENT	
Incident occurred on Main Meler Set Service Line Other Pressure Limiting and Regulating Facility Failure occurred on Body of pipe Pipe Seam	3 Material involved (pipe, litting, or other component) Steel Cast /Wrought Iron Polyethelene Plastic (complete all items that apply in a-c) Other Plastic (complete all items that apply in a-c) Plastic failure was: ☑ a.ductile ☐ b.brittle ☐ c.joint failure Other material:
Joint Jomponent Johns	4. Year the pipe or component which failed was installed: 1981
: O count.	4. Text the pipe of component which railed was installed.
PART D - MATERIAL SPECIFICATION (if applicable)	PART E - ENVIRONMENT
1. Nominal pipe size (NPS) 2	in. 1. Area of incident OIn open ditch OUnder pavement OAbove ground
2 Wall thickness	in: Sunder ground Sunder water
3 Specification PE 2406 SMYS	Inside under building Other:
4. Seam type	2. Depth of cover; 35 inches
5. Valve type	
Pipe or valve manufactured by UPONOR	in year 1981
PART F – APPARENT CAUSE cause of the incide the cause you indic	are 25 numbered causes in this section. Check the box to the left of the primary int. Check one circle in each of the supplemental llems to the right of or below cate. See the instructions for this form for guidance.
The state of the s	rrosion, ar F1 (2) Internal Corrosion is checked, complete all subparts a – e.
OBare Correction	Visual Examination c. Cause of Corrosion Cocalized Pitting Galvanic Stray Current Compared Corrosion Improper Cathodic Protection Cother Other
2:Unternal Corresion ONo Yes Que e. Was pipe previously dam ONo Yes Que e. Was pipe previously dam	refine considered to be under cathodic protection prior to discovering incident? Unknown Year Protection Started: haged in the area of corrosion? Unknown How long prior to incident: years months
F2 – NATURAL FORCES 3. ○Earth Movement ⇒ ○ Earthquake ○ Si	ubsidence () Landslide () Other:
4. ○Lightning	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
6. OTemperature ⇒ OThermal stress OFr 7. OHigh Winds	ost heave
F3 - EXCAVATION 8. Operator Excavation Damage (including their contractor)	ws)/ Not Third Party
9. OThird Party Excavation Damage (complete a-d)	
a. Excavator group General Public Government Gexcavator b. Type: Groad Work Pipeline Water Gele	r other than Operator subcontractor action (Sewer () Phone/ Cable Fiber () Landowner () Railroad
Building Construction Other: c. Did operator get prior notification of excavation ac	· · · · · · · · · · · · · · · · · · ·
ONo OYes: Date received:	·
Motification received from: CiOne C	Call System
d Was pipeline marked? No. Yes (If Yes, check applicable items i - h Temporary markings: ii. Permanent markings: iii. Marks were (check one) iv. Were marks made within required	v) gs ⊝Slakes ⊝Paint serate ⊝Not Accurate time?⊙Yes ⊖No
OFire/Explosion as primary cause of failure ⇒ Fire E OCar, truck or other vehicle not relating to excavation ac ORupture of Previously Damaged Pipe OVandalism	xplosion cause: O Man made O Natural Describe in Part G tivity damaging pipe

F5 - MATERIAL OR WE	LDS					
Material 14. ● Body of Pipe	>	⊃ _{Denl}	O Gouge	OWrinkle Bend	O Arc Burn	. Other: ROCK IMPINGEMENT CRA
15. a Component		Ü Valve	O Fitting	JVessel	OExtruded Outlet	Oother:
16. "JJoant	- 114 111 g	Ú Gasket	○ O-Ring	O Threads	J Fusion	
Weld				O THE COM	Or deform	Oother:
Sutt (ن 17	;	J Pipe	○ Fabrication			OOther:
18 ÜFillel	2.5	- J ∂ranch	O Hot Tap	OFitting	O Repair Sleeve	Oother:
19. ©Pipe Seam		ULF ERW	O DSAW O SAW	O Seamless O Spiral	O'Flash Weld	Oother:
Complete a-f if you	indic	ate any caus	e in part F5.	<u></u>		er e
a. Type of failure		fect = Poor		O Procedure not fo	illimited O Poor Co.	nstruction Procedures
Material D b Was failure du	efect e to pi	ice damage sust	lained in transportat	ion to the construction courred? • Yes, co	or fabrication elled	OYes No
d, Date of test: 8/			ou no oto madem o	counted: 🗢 res, co	mpiete a-t, tr known i s	one Andrews
e. Time held at te	st pre	ssure:	hr.			
f. Estimated test (oressu	ire at point of inc	cident;	90	PSIG	
F6 – EQUIPMENT OR OP 20. OMalfunction of Contr	ERAT of /Re	TONS lief Equipment	⇒ ⊜ Valve ⊝ i	Instrumentation OPre	essure Regulator	○ Other:
21 OThreads Stripped, B	oken	Pipe Coupling		Valve Threads: O-Me		Ó Other:
22. DLeaking Seals						-
23. Uncorrect Operation		**				the company of the control of the co
в Туре: О Inada	equate	Procedures. 🔾	Inadequate Safety	Practices OFailure	o Follow Procedures	Other:
				A The Control of the	Alcoho	l lest:
	olved	in incident qualif	ied per OQ rule?	Yès Ono	d. Hours on duty for p	erson involved:
F7 - OTHER 24 Miscellaneous, desci	ibe: _					
25. Unknown Unvestigation Co			ider Invéstigation (si	ubmit a supplemental	report when investigation	on is complete)
PART G - NARRATIVE DE						
ROCK IMPINGEME	ENT	APPEARS	TO HAVE C	AUSED CRAC	CK IN P.E. PIPE	WALL SNOW AND
-ROST IN GROUN	ID C	AUSED G	AS TO MIGR	ATE TO NEAF	RBY STRUCTU	RE GAS
ACCUMULATED IN	JVII.	IDERGRO	UND AREA (OF STRUCTU	RE AFTER PAS	SING THROUGH
A CIGARETTE WH	JVIE JVIE	KESIDEN	II STATED I	HAT HE ENTE	ERED GARAGE	STRUCTURE AND LIT
TOTALLIE WE	ICI I	(19. W990N)	ICU IU DE I	HE IGNITION	SOURCE.	
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