

**US Department of Transportation
Pipeline and Hazardous Materials Safety Administration
Office of Pipeline Safety**

**Hazardous Liquid IMP Field Verification Inspection
49 CFR Parts 195.450 and 195.452**

General Notes:

1. This Field Verification Inspection is performed on field activities being performed by an Operator in support of their Integrity Management Program (IMP).
2. This is a two part inspection form:
 - i. A review of applicable Operations and Maintenance (O&M) and IMP processes and procedures applicable to the field activity being inspected to ensure the operator is implementing their O&M and IMP Manuals in a consistent manner.
 - ii. A Field Verification Inspection to determine that activities on the pipeline and facilities are being performed in accordance with written procedures or guidance.
3. Not all parts of this form may be applicable to a specific Field Verification Inspection, and only those applicable portions of this form need to be completed. The applicable portions are identified in the Table below by a check mark. Only those sections of the form marked immediately below need to be documented as either "Satisfactory"; "Unsatisfactory"; or Not Checked ("N/C"). Those sections not marked below may be left blank.

Operator Inspected: BP Olympic Pipe Line Company
Op ID: 1189

Perform Activity <i>(denoted by mark)</i>	Activity Number	Activity Description
	1A	In-Line Inspection
	1B	Hydrostatic Pressure Testing
	1C	Other Assessment Technologies
	2A	Remedial Actions
	2B	Remediation – Implementation
	3A	Installed Leak Detection System Information
	3B	Installed Emergency Flow Restrictive Device
X	4A	Field Inspection for Verification of HCA Locations
	4B	Field Inspection for Verification of Anomaly Digs
X	4C	Field Inspection to Verify adequacy of the Cathodic Protection System
X	4D	Field inspection for general system characteristics

Hazardous Liquid IMP Field Verification Inspection Form

Name of Operator: _____

Headquarters Address:

BP Pipe Line (North America) Inc.
28100 Torch Parkway
Warrenville, IL 60555

Company Official: James Lamanna, President

Phone Number: (630) 836-3452

Fax Number: (630) 836-3588

Operator ID: 30781

Persons Interviewed	Title	Phone No.	E-Mail
Dave Knoelke	Compliance Coordinator (Primary Contact)	(630) 452-9133	knoelkdg@bp.com
Scott Fitzgerald	DOT Compliance Adviser	(281)-366-4852	

OPS/State Representative(s): Kuang Chu/UTC **Dates of Inspection:** 5/11 – 5/15/2009

Inspector Signature: _____

Pipeline Segment Descriptions: *[note: Description of the Pipeline Segment Inspected. (Include the pipe size, wall thickness, grade, seam type, coating type, length, pressure, commodities, HCA locations, and Pipeline Segment boundaries.)]*

The pipeline is 14" with 0.281" wall thickness, API 5L grade X-52 ERW manufactured by US Steel in 1965 and with coal tar coating. The total length of the unit is 141 miles from Renton Station to the Columbia River. The MOP varies from section to section and is in the range of 1300 psi to 1440 psi. It transports refined petroleum products (gasoline, diesel and jet fuel). Most of the pipeline is in HCA due to population, drinking water source and navigable water ways.

Site Location of field activities: *[note: Describe the portion of the pipeline segment reviewed during the field verification, i.e. milepost/stations/valves/pipe-to-soil readings/river crossings/etc. In addition, a brief description and case number of the follow up items in any PHMSA compliance action or consent agreement that required field verification. Note: Complete pages 8 & 9 as appropriate.]*

The entire pipeline segment from Renton Station to the Columbia River was inspected. The field inspection included the pump stations, pipeline junctions, mainline block valves, cathodic protection test stations, rectifiers, road crossing casings, river crossings and right-of-way condition.

Summary:

This standard inspection included the field inspection from Renton Station (MP 112) to the Columbia River (MP 253). All three pump stations at Tacoma, Olympia and Castle Rock, and junctions at Tacoma and Vancouver where the laterals originated were inspected.

There were no field activities related to IMP during the inspection.

Findings:

The HCA locations of the entire pipeline were verified. The cathodic protection was adequate for the pipeline. The right-of-way condition was generally good except for some isolated sections where tree trimming would be required to give the fly-over pilot a clear view of the right-of-way.

Key Documents Reviewed:

Document Title	Document No.	Rev. No	Date
Cathodic protection annual surveys			2007/2008
Exposed pipe condition reports			2007/2008/2009
Mainline Valve inspection reports			2007/2008
Overpressure Safety Devices inspection reports			2007/2008
Inspection reports of underwater crossings of navigable waterways			2007/2008
Right-of-way inspection reports			2007/2008/2009
Emergency response personnel training records			2007/2008

Part 1 - Performance of Integrity Assessments

IA. In-Line Inspection (Protocol 3.04 & 3.05)	Satisfactory	Unsatisfactory	N/C	Notes:
Verify that Operator's O&M and IMP procedural requirements (e.g. launching/receiving tools) for performance of ILI were followed.	X			
Verify Operator's ILI procedural requirements were followed (e.g. operation of trap for launching and receiving of pig, operational control of flow), as appropriate.				
Verify ILI tool systems and calibration checks before run were performed to ensure tool was operating correctly prior to assessment being performed, as appropriate.				
Verify ILI complied with Operator's procedural requirements for performance of a successful assessment (e.g. speed of travel within limits, adequate transducer coverage), as appropriate.				
Document ILI Tool Vendor and Tool type (e.g. MFL, Deformation). Document other pertinent information about Vendor and Tool, as appropriate				
Verify that Operator's personnel have access to applicable procedures				
Other: <i>[Note: Add location specific information, as appropriate.]</i>				
IB. Hydrostatic Pressure Testing (Protocol 3.06)	Satisfactory	Unsatisfactory	N/C	Notes:
Verify that hydrostatic pressure tests complied with Part 195 Subpart E requirements.	X			
Review documentation of Hydrostatic Pressure Test parameters and results. Verify test was performed without leakage and in compliance with Part 195 Subpart E requirements.				
Review test procedures and records and verify test acceptability and validity.				
Review determination of the cause of hydrostatic test failures, as appropriate.				
Document Hydrostatic Pressure Test Vendor and equipment used, as appropriate.				
Other:				
IC. Other Assessment Technologies (Protocol 3.07)	Satisfactory	Unsatisfactory	N/C	Notes:
Verify that application of "Other Assessment Technology" complied with Operator's requirements, that appropriate notifications had been submitted to OPS, and that appropriate data was collected.	X			Notes: The operator has not used "Other Assessment Technology" for this inspection unit.
Review documentation of notification to OPS of Operator's application of "Other Assessment Technology", if available. Verify compliance with Operator's procedural requirements. If documentation of notification to OPS of Operator's application of "Other Assessment Technology" is available, verify performance of assessment within parameters originally submitted to OPS.				
Verify that appropriate tests are being performed and appropriate data is being collected, as appropriate.				
Other.				

Part 3 - Preventive and Mitigative Actions

3A. Installed Leak Detection System Information (Protocol 6.05)	Satisfactory	Unsatisfactory	N/C	Notes:
Identify installed leak detection systems on pipelines and facilities that can affect an HCA.	X			
Document leak detection system components installed on system to enhance capabilities, as appropriate.				
Document the frequency of monitoring of installed leak detection systems and verify connection of installed components to leak detection monitoring system, as appropriate,				
Other:				<i>[Note: Add location specific information, as appropriate.]</i>
3B. Installed Emergency Flow Restrictive Device (Protocol 6.06)	Satisfactory	Unsatisfactory	N/C	Notes:
Verify additional preventive and mitigative actions implemented by Operator.	X			
<p>Document Emergency Flow Restrictive Device (EFRD) component(s) installed on system.</p> <p>Note that EFRD per §195.450 means a check valve or remote control valve as follows:</p> <p>(1) Check valve means a valve that permits fluid to flow freely in one direction and contains a mechanism to automatically prevent flow in the other direction.</p> <p>(2) Remote control valve or RCV means any valve that is operated from a location remote from where the valve is installed. The RCV is usually operated by the supervisory control and data acquisition (SCADA) system. The linkage between the pipeline control center and the RCV may be by fiber optics, microwave, telephone lines, or satellite.</p>				
Document the frequency of monitoring of installed EFRDs and verify connection of installed components to monitoring/operating system, as appropriate.				
Verify operation of remote control valve by having operator send remote command to partially open or close the valve, as appropriate.				
Comment on the perceived effectiveness of the EFRD in mitigating the consequences of a release on the HCA that it is designed to protect.				<i>[Note: Add location specific information, as appropriate.]</i>
Other:				

Part 4 - Field Investigations (Additional Activities as appropriate)

				Notes:
4A. Field Inspection for Verification of HCA Locations	Satisfactory	Unsatisfactory	N/C	<p>Notes:</p> <p>[Note: Add location specific information, as appropriate.]</p>
Review HCAs locations as identified by the Operator. Utilize NPMS, as appropriate.	X			
<p>Verify population derived HCAs in the field are as they appear on Operator's maps and NPMS, as appropriate. Document newly constructed (within last 2-3 years) population and/or commercial areas that could be affected by a pipeline release, as appropriate. Note that population derived HCAs are defined in §195.450</p>				
<p>Verify drinking water and ecological HCAs in the field are as they appear on Operator's maps and NPMS, as appropriate. Document newly established drinking water sources and/or ecological resources areas (within last 2-3 years) that could be affected by a pipeline release, as appropriate. Note that unusually sensitive areas (USAs) are defined in §195.6</p>				
<p>Verify commercially navigable waterway HCAs in the field are as they appear on Operator's maps and NPMS, as appropriate. Document any activity (commercial in nature) that could affect the waterways status as a commercially navigable waterway, as appropriate. Note that commercially navigable waterway HCAs are defined in §195.450</p>				
4B. Field Inspection for Verification of Anomaly Digs	Satisfactory	Unsatisfactory	N/C	<p>Notes: There were no anomaly digs during the field inspection.</p> <p>[Note: Add location specific information, as appropriate.]</p>
Verify repair areas, ILI verification sites, etc.	X			
<p>Document the anomaly dig sites reviewed as part of this field activity and actions taken by the operator.</p>				
4C. Field Inspection to Verify adequacy of the Cathodic Protection System	Satisfactory	Unsatisfactory	N/C	<p>Notes:</p> <p>Cathodic Protection readings of pipe to soil at dig site (if available): On Potential: _____ mV Off Potential: _____ mV</p> <p>[Note: Add location specific information, as appropriate.]</p>
In case of hydrostatic pressure testing, Cathodic Protection (CP) systems must be evaluated for general adequacy.	X			
<p>The operator should review the CP system performance in conjunction with a hydrostatic pressure test to ensure the integrity assessment addressed applicable threats to the integrity of the pipeline. Has the operator reviewed the CP system performance in conjunction with the hydrostatic pressure test?</p>				
<p>Review records of CP readings from CIS and/or annual survey to ensure minimum code requirements are being met, if available.</p>				
<p>Review results of random field CP readings performed during this activity to ensure minimum code requirements are being met, if possible. Perform random rectifier checks during this activity and ensure rectifiers are operating correctly, if possible.</p>				
4D. Field inspection for general system characteristics	Satisfactory	Unsatisfactory	N/C	<p>Notes:</p>
Through field inspection determine overall condition of pipeline and associated facilities for a general estimation of the effectiveness of the operator's IMP implementation.	X			
<p>Evaluate condition of the ROW of inspection site to ensure minimum code requirements are being met, as appropriate.</p>				
<p>Comment on Operator's apparent commitment to the integrity and safe operation of their system, as appropriate.</p>				
<p>Other</p>				

Anomaly Evaluation Report *(to be completed as appropriate)*

Pipeline System and Line Pipe Information		
Operator (OpID and System Name):		
Unit ID (Pipeline Name)		
Pipe Manufacturer and Year:	Seam Type and Orientation:	
Pipe Nominal OD (inch):	Seam Orientation:	
Pipe Nominal Wall thickness (inch):	Coating Type:	
Grade of Pipe:	MOP:	
ILI Reported Information		
ILI Technology (e.g., Vendor, Tools):		
Anomaly Type (e.g., Mechanical, Metal Loss):		
Is anomaly in a segment that can affect an HCA? (Yes / No)		
Date of Tool Run (MM/DD/YY):	Date of Inspection Report (MM/DD/YY):	
Date of "Discovery of Anomaly" (MM/DD/YY):		
Type of "Condition" (e.g.; Immediate; 60-day; 180-day):		
Anomaly Feature (Int/Ext):	Orientation:	
Anomaly Details: Length (in):	Width (in):	Depth (in):
Anomaly Log Distance (ft):	Distance from Upstream weld (ft):	
Length of joint of pipe in which anomaly is identified (ft):		
Anomaly Dig Site Information Summary		
Date of Anomaly Dig (MM/DD/YY):		
Location Information:		
Mile Post Number:	Distance from A/G Reference (ft):	
Distance from Upstream weld (ft):		
GPS Readings (if available) Longitude:	Latitude:	
Anomaly Feature (Int/Ext):	Orientation:	
Length of joint of pipe in which anomaly is found (ft):		
For Mechanical Damage Anomaly		
Damage Type (e.g., original construction, plain dent, gouge):		
Length (in):	Width (in):	Depth (in):
Near a weld? (Yes / No):		
Gouge or metal loss associated with dent? (Yes / No):		
Did operator perform additional NDE to evaluate presence of cracks in dent? (Yes / No):		
Cracks associated with dent? (Yes / No):		
For Corrosion Metal Loss Anomaly		
Anomaly Type (e.g., pitting, general):		
Length (in):	Width (in):	Max. Depth (in):
Remaining minimum wall thickness (in):	Maximum % Wall Loss measurement(%):	
Safe pressure calculation (psi), as appropriate:		
For "Other Types" of Anomalies		
Describe anomaly (e.g., dent with metal loss, crack, seam defect, SCC):		
Length (in):	Width (in):	Max. Depth (in):
Other Information, as appropriate:		
Did operator perform additional NDE to evaluate presence of cracks? (Yes / No):		
Cracks present? (Yes / No):		

Anomaly Repair Report *(to be completed as appropriate)*

Repair Information		
Was a repair of the anomaly made? (Yes / No):		
Was defect ground out to eliminate need for repair? (Yes / No):		
If grinding used, complete the following for affected area:		
Length (in):	Width (in):	Depth (in):
If NO repair of an anomaly for which RSTRENG is applicable, were the Operator's RSTRENG calculations reviewed? (Yes / No):		
If Repair made, complete the following:		
Repair Type (e.g., Type B-sleeve, composite wrap)		
Length of Repair:		
Comments on Repair material, as appropriate (e.g., grade of steel):		
Pipe re-coating material used following excavation:		
General Observations and Comments		
Was a diagram (e.g., corrosion map) of the anomaly made? (Yes / No):		(Include in report if available)
Were pipe-to-soil cathodic protection readings taken? (Yes / No):		
If readings taken, Record: On Potential: _____		mV; Off Potential: _____ mV
Describe method used to locate anomaly (as appropriate):		
Comments regarding procedures followed during excavation, repair of anomaly, and backfill (as appropriate):		
General Observations and Comments <i>(Note: attach photographs, sketches, etc., as appropriate)</i> :		