| Operator: | McChord Pipeline Company |
|------------|--------------------------|
| Op ID (s): | <u>31049</u> |

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

Field Verification Inspection

Integrity Management Program 49 CFR Part 195.452

General Notes:

- 1. This Field Verification Inspection is performed on specific field activities being performed by an Operator in support of their Integrity Management Program (IMP).
- 2. 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.
- 3. This form may be combined with the "IOCS Activity Report" to fulfill the Post Inspection Memo requirement.
- 4. This is a two part inspection:
 - 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 IMP 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.

Name of Operator: McChord Pipeline Co

Integrity Management

Inspection Form for Field Verification

| Headquarters Address: | 3001 Marshall Avenue Tacoma, Washington 98 | 421 | | |
|-----------------------|-----------------------------------------------|-------------------------------------|--------------|--------------|
| Company Official: | Corey G. Herrick | • | | |
| Phone Number: | 253-680-6653 | | | |
| Fax Number: | 253-272-2495 | | | |
| Operator ID: | 31049 | | | |
| Activity ID: | | | | |
| | | | | |
| Persons Inte | erviewed | Title | Phone No. | E-Mail |
| Corey G. I | lerrick | Chief Engineer (Primary Contact) | 253-680-6653 | cgh@usor.com |
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| OPS/State Representative(s): _ | Al Jones / UTC Washington | Dates of Inspection: August 5-7, 200 | <u> 19</u> |
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| | | | |
| Inspector Signature: | | | |
| System Descriptions: | | | |

Pipeline consists of approximately 14.5 miles of 6-inch diameter (steel with tape wrap), Control Center, a pump station with duel pumps (150 Hp centrifugal), one rectifier unit, 3 block valves and one check valve, flow meters located at pump station and at McChord AFB.

Site Location of field activities:

Street intersection located at East 72nd and Waller Road; Tacoma, Washington in Pierce County. Approximately 18.5 linear feet of 6-inch pipeline was remover to extract an in-line inspection tool (ILI). The removed section of pipe was previously repaired in 2004 with a clock spring wrap at a dent/gouge located on the bottom of the pipeline where the ILI stopped. Two probable violations and one area of concern were identified.

Key Documents Reviewed:

| Document Title | Document No. | Rev. No | Date |
|----------------------------------------------------------------|--------------|---------|-----------|
| Welding Procedure from Puget Sound Energy | | | 3/1/2009 |
| PM Testing Laboratory Certificate of NDT Training & Experience | | | 5/23/2009 |
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Part 1 - Performance of Integrity Assessments

| In-Line Inspection (Protocol 3.04 & 3.05) | I. I | T., . | · · | 1 | 1 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------|-------------|--------|--------|
| requirements (e.g. launching/receiving tools) for performance of ILI were followed. 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 toeling performed, as appropriate. Verify ILI complied with Operator's procedural requirements for performance of a successful assessment (e.g. speed of travel within limits), as appropriate. Document ILI Tool Vendor and Tool type (e.g. MFL, Deformation). Document other pertinent information about Vendor and Tool, as appropriate Other: Hydrostatic Pressure Testing (Protocol 3.06) No Issue Issue N/A Verify that hydrostatic pressure tests complied with Part 195 Subpart E requirements. 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 determination of the cause of hydrostatic test failures, as appropriate. Document Hydrostatic Pressure Test Vendor and equipment used, as appropriate. Other: Other Assessment Technologies (Protocol 3.07) No Issue Issue N/A Notes: Verify that application of "Other Assessment Technology" requirements, that appropriate and was collected. Review documentation of notification to OPS of Operator's application of "Other Assessment Technology". Verify compliance with Operator's procedural requirements and performance of assessment within parameters originally submitted to OPS. Verify that appropriate tests are being performed and appropriate data is being collected, as appropriate. | | No Issue | Issue | N/A | Notes: |
| 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), as appropriate. Document ILI Tool Vendor and Tool type (e.g. MFL, Deformation). Document other pertinent information about Vendor and Tool, as appropriate Other: | | | | | |
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| Other. | 0.1 | | | | |
| ŀ | Other. | | | | |
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Part 3 - Preventive and Mitigative Actions

| Installed Leak Detection System Information (Protocol 6.05) | No Issue | Issue | N/A | Notes: |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------|--------|--------|
| Identify installed leak detection systems on pipelines and facilities that can affect an HCA. | | | Х | , i |
| Document leak detection system components installed on sycapabilities, as appropriate. | stem to er | hance | | |
| Document the frequency of monitoring of installed leak dete connection of installed components to leak detection monitor appropriate, | | | verify | |
| Other: | | | | |
| Installed Emergency Flow Restrictive Device (Protocol 6.06) | No Issue | Issue | N/A | Notes: |
| Verify additional preventive and mitigative actions implemented by Operator. | | | X | |
| Document Emergency Flow Restrictive Device (EFRD) comsystem. | ponent(s) | installe | d on | |
| Note that EFRD per §195.450 means a check valve or remot follows: (1) Check valve means a valve that permits fluid to flow and contains a mechanism to automatically prevent flow in t (2) Remote control valve or RCV means any valve that location remote from where the valve is installed. The RCV the supervisory control and data acquisition (SCADA) system the pipeline control center and the RCV may be by fiber optitelephone lines, or satellite. | freely in he other of is operate is usually n. The lir | one dire lirection. d from a operated kage bet | i by | |
| Document the frequency of monitoring of installed EFRDs a installed components to monitoring/operating system, as app | | connecti | on of | |
| Comment on the perceived effectiveness of the EFRD in mit consequences of a release on the HCA that it is designed to p | | e | | |
| Other: | | | | |
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Part 2 - Remediation of Anomalies

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| Remedial Actions – Process (Protocol 4.1) | No Issue | Issue | N/A | Notes: |
| Verify that remedial actions complied with the Operator's | | | X | |
| procedural requirements. Witness anomaly remediation and verify documentation of r | omodiatio | n (o a | l | 4 |
| | | | :£. | |
| Exposed Pipe Reports, Maintenance Report, any Data Acqui | | | riiy | |
| compliance with Operator's O&M Manual and Part 195 requ | iiremenis. | | | |
| Verify that Operator's procedures were followed in exposing | the enen | alv (a a | 0011 | - |
| required pressure reductions, line location, excavation, coati | | | any | |
| required pressure reductions, fine location, excavation, coati | iig reiliova | 11 <i>)</i> . | | |
| Verify that procedures were followed in measuring the anon | alv deter | mining t | ho | |
| severity of the anomaly, and determining remaining strength | | | ne | |
| severity of the anomaly, and determining remaining strength | or the pip | ic. | | |
| Other: | | | | |
| Ouler. | | | | |
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| Remediation - Implementation (Protocol 4.02) | No Issue | Issue | N/A | Notes: |
| Verify that the operator has adequately implemented its | | | | · · |
| remediation process and procedures to effectively remediate | | | v | |
| conditions identified through integrity assessments or | | | X | |
| | | | | |
| intormation analysis. | 1 | | | |
| information analysis. Verify that repairs were completed in accordance with the or | perator's | rioritize | d | |
| Verify that repairs were completed in accordance with the operation and within the time frames allowed in §195.452(h) | | orioritize | d | |
| Verify that repairs were completed in accordance with the operation of schedule and within the time frames allowed in §195.452(h) | • | | | |
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Part 4 - Field Investigations (Additional Activities as appropriate)

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| Field Inspection for Verification of HCA Locations | No Issue | Issue | N/A | Notes: |
| Review HCAs locations as identified by the Operator. Utilize NPMS, as appropriate. | x | | | |
| Verify population derived HCAs in the field are as they apper and NPMS, as appropriate. Document newly constructed (we population and/or commercial areas that could be affected by appropriate. Note that population derived HCAs are defined in §195.450. Verify drinking water and ecological HCAs in the field are a Operator's maps and NPMS, as appropriate. Document new water sources and/or ecological resources areas (within last 2 affected by a pipeline release. Note that unusually sensitive areas (USAs) are defined in §19. | ithin last a pipelir s they apply establic 2-3 years) | 2-3 years ne release pear on shed drin that cou | s) e, as king ld be | |
| Verify commercially navigable waterway HCAs in the field of Operator's maps and NPMS, as appropriate. Document any nature) that could affect the waterways status as a commercial waterway, as appropriate. Note that commercially navigable waterway HCAs are defined. | activity (| commerc able | | |
| Field Inspection for Verification of Anomaly Digs | No Issue | Issue | N/A | Notes: |
| Verify repair areas, ILI verification sites, etc. Identify anomaly dig sites in the area, if possible, that will not of this field activity (e.g. three other digs to be performed in this inspection) | | | | |
| Field Inspection to Verify adequacy of the Cathodic | \ | T . | 27/4 | Notes: |
| Protection System | No Issue | Issue | N/A | |
| In case of hydrostatic pressure testing, Cathodic Protection (CP) systems must be evaluated for general adequacy. | | | X | · |
| Review records of CP readings from CIS and/or annual surve code requirements are being met, if available. | ey to ensu | ire minin | num | |
| Review results of random field CP readings performed during minimum code requirements are being met, if possible. | g this acti | ivity to e | nsure | |
| Perform random rectifier checks during this activity and ensure rectifiers are operating correctly, if possible. | | | | · |
| Field inspection for general system characteristics | No Issue | Issue | N/A | Notes: |
| Through field inspection determine overall condition of pipeline and associated facilities for a general estimation of the effectiveness of the operator's IMP implementation. | 110 13340 | X | 11174 | Probable violations were issued for: (1) Company did not have a qualified welding procedure |
| Visit nearby pump stations, valve settings, aboveground cros minimum code requirements are being met, if possible and as | for maintenance activities (49CFR §195.402) | | | |
| Evaluate condition of the ROW to ensure minimum code requirements are being met, as appropriate. | | | | (2) Company's contractor NDT certificate was expired. (49CFR §195.505) Area of Concern was issued for clearance between McChord's |
| Comment on Operator's apparent commitment to the integrity and safe operation of their system, as appropriate. | | | | |
| Other | | | | pipeline and an existing 52-inch water main. (49CFR §195.250) |
| | | - | | |