

**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: **McChord Pipeline**
Op ID: **31049**

Perform Activity (denoted by mark)	Activity Number	Activity Description
X	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
	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: McChord Pipeline

Headquarters Address:

3001 Marshall Avenue
Tacoma, Washington 98421

Company Official: Al Cabodi, President

Phone Number: 253-383-1651

Fax Number: 253-383-9970

Operator ID: 31049

Persons Interviewed	Title	Phone No.	E-Mail
	Primary Contact		
Corey G. Herrick	Chief Engineer	253-680-6653	cgh@usor.com

OPS/State Representative(s): Al Jones / UTC, Washington

Dates of Inspection: August 5-7, 2009

Inspector Signature: Al Jones

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.)]*

Pipeline consists of approximately 14.5 miles of 6"x0.188" wall API 5L Gr. B, with tape wrap, Control Center, a pump station with dual 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.

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.]*

Approximately 18.5 linear feet of 6-inch pipeline was removed 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.

Summary:

A new segment of pipe was bent to conform to the 52-inch diameter water main and welded in place. Cathodic protection was evaluated by a NACE qualified engineer and isolation dielectric was used to mitigate the need for bonding the pipes.

Findings:

Two probable violations and one area of concern were identified for not having a qualified welding procedure for maintenance activities (49CFR 195.402) and company's contractor NDT certificate was expired (49CFR 195.505). The AOC was for clearance between McChord's pipeline and an existing 52-inch water main (49CFR 195.250).

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

Part 1 - Performance of Integrity Assessments

1A. 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:				[Note: Add location specific information, as appropriate.]
1B. 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:				
1C. 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	
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 2 - Remediation of Anomalies

2A. Remedial Actions – Process (Protocol 4.1)	Satisfactory	Unsatisfactory	N/C	Notes:
Verify that remedial actions complied with the Operator's procedural requirements.			X	
Witness anomaly remediation and verify documentation of remediation (e.g. Exposed Pipe Reports, Maintenance Report, any Data Acquisition Forms). Verify compliance with Operator's O&M Manual and Part 195 requirements.				
Verify that Operator's procedures were followed in locating and exposing the anomaly (e.g. any required pressure reductions, line location, identifying approximate location of anomaly for excavation, excavation, coating removal).				
Verify that procedures were followed in measuring the anomaly, determining the severity of the anomaly, and determining remaining strength of the pipe.				
Verify that Operator's personnel have access to applicable procedures.				
Other:				
2B. Remediation - Implementation (Protocol 4.02)	Satisfactory	Unsatisfactory	N/C	Notes:
Verify that the operator has adequately implemented its remediation process and procedures to effectively remediate conditions identified through integrity assessments or information analysis.			X	
If documentation is available, verify that repairs were completed in accordance with the operator's prioritized schedule and within the time frames allowed in §195.452(h).				
Review any documentation for this inspection site for an immediate repair condition (§195.452(h)(4)(i) where operating pressure was reduced or the pipeline was shutdown. Verify for an immediate repair condition that temporary operating pressure was determined in accordance with the formula in Section 451.7 of ASME/ANSI B31.4 or, if not applicable, the operator should provide an engineering basis justifying the amount of pressure reduction.				
Verify that repairs were performed in accordance with §195.422 and the Operator's O&M Manual, as appropriate.				
Review CP readings at anomaly dig site, if possible. (See Part 4 of this form – "Field Inspection to Verify adequacy of the Cathodic Protection System", as appropriate.				
Other:				Cathodic Protection readings of pipe to soil at dig site (if available): On Potential: _____ mV Off Potential: _____ mV
				<i>[Note: Add location specific information, as appropriate.]</i>

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	
Document Emergency Flow Restrictive Device (EFRD) component(s) installed on system. Note that EFRD per §195.450 means a check valve or remote control valve as follows: (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. (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.				
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.				
Other:				<i>[Note: Add location specific information, as appropriate.]</i>

Part 4 - Field Investigations (Additional Activities as appropriate)

4A. Field Inspection for Verification of HCA Locations				Satisfactory	Unsatisfactory	N/C	Notes:
Review HCAs locations as identified by the Operator. Utilize NPMS, as appropriate.						X	
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							
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							
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							[Note: Add location specific information, as appropriate.]
4B. Field Inspection for Verification of Anomaly Digs				Satisfactory	Unsatisfactory	N/C	Notes:
Verify repair areas, ILI verification sites, etc.						X	
Document the anomaly dig sites reviewed as part of this field activity and actions taken by the operator.							[Note: Add location specific information, as appropriate.]
4C. Field Inspection to Verify adequacy of the Cathodic Protection System				Satisfactory	Unsatisfactory	N/C	Notes:
In case of hydrostatic pressure testing, Cathodic Protection (CP) systems must be evaluated for general adequacy.				X			
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?							
Review records of CP readings from CIS and/or annual survey to ensure minimum code requirements are being met, if available.							
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.							Cathodic Protection readings of pipe to soil at dig site (if available): On Potential: _____ mV Off Potential: _____ mV [Note: Add location specific information, as appropriate.]
4D. Field inspection for general system characteristics				Satisfactory	Unsatisfactory	N/C	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.				X			
Evaluate condition of the ROW of inspection site to ensure minimum code requirements are being met, as appropriate.							
Comment on Operator's apparent commitment to the integrity and safe operation of their system, as appropriate.							
Other							

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

Pipeline System and Line Pipe Information		
Operator (OpID and System Name): McChord Pipeline		
Unit ID (Pipeline Name) 31049		
Pipe Manufacturer and Year:	1966	Seam Type and Orientation:
Pipe Nominal OD (inch):	6	Seam Orientation: Top Half
Pipe Nominal Wall thickness (inch):	0.188	Coating Type: Tar with tape wrapped
Grade of Pipe:	B	MOP: 720 psi
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): YES (Include in report if available)		
Were pipe-to-soil cathodic protection readings taken? (Yes / No): YES		
If readings taken, Record: On Potential: _____ mV; Off Potential: _____ mV		
Describe method used to Operator to locate anomaly (as appropriate): ILI tool was trapped at a pipe bend.		
Comments regarding procedures followed during excavation, repair of anomaly, and backfill (as appropriate):		
A pipe section about 18.5 feet was removed and replace with like material.		
General Observations and Comments <i>(Note: attach photographs, sketches, etc., as appropriate)</i> :		
Pipe section was successfully completed and company procedures were up dated for welding procedure.		