OPERATOR QUALIFICATION FIELD INSPECTION PROTOCOL FORM

Inspection Date(s):	March 9, 2010
Name of Operator:	Weyerhaeuser
Operator ID (OPID):	22515
Inspection Location(s):	3401 Industrial Way, Long view, WA 98632
Supervisor(s) Contacted:	Ron Kosloski
# Qualified Employees Observed:	1
# Qualified Contractors Observed:	1

Individual Observed	Title/Organization	Phone Number	Email Address
Ron Kosloski	Weyerhaeuser	360 636 6540	Ron.kosloski@weyerhaeus er.com
Vic Meder	NW Fabrication	360 636 6540	vmeder@nwmfp.com

 $To \ add \ rows, \ press \ TAB \ with \ cursor \ in \ last \ cell.$

PHMSA/State Representative	Region/State	Email Address
Patti Johnson	Washington	pjohnson@utc.wa.gov

To add rows, press TAB with cursor in last cell.

Remarks:

A table for recording specific tasks performed and the individuals who performed the tasks is on the last page of this form. This form is to be uploaded on to the OQBD for the appropriate operator, then imported into the file.

9.01 Covered Task Performance

Verify the qualified individuals performed the observed covered tasks in accordance with the operator's procedures or operator approved contractor procedures.

	Inspection Results an X in exactly one cell below)	Inspection Notes
X	No Issue Identified	
	Potential Issue Identified (explain)	
	N/A (explain)	
	Not Inspected	

9.02 Qualification Status

Verify the individuals performing the observed covered tasks are currently qualified to perform the covered tasks.

4.7	Inspection Results an X in exactly one cell below)	Inspection Notes
X	No Issue Identified	
	Potential Issue Identified (explain)	
	N/A (explain)	
	Not Inspected	

9.03 Abnormal Operating Condition Recognition and Reaction

Verify the individuals performing covered tasks are cognizant of the AOCs that are applicable to the tasks observed.

	Inspection Results an X in exactly one cell below)	Inspection Notes
X	No Issue Identified	
	Potential Issue Identified (explain)	
	N/A (explain)	
	Not Inspected	

9.04 Verification of Qualification

Verify the qualification records are current, and ensure the personal identification of all individuals performing covered tasks are checked, prior to task performance.

	Inspection Results an X in exactly one cell below)	Inspection Notes
x	No Issue Identified	
	Potential Issue Identified (explain)	
	N/A (explain)	
	Not Inspected	

9.05 Program Inspection Deficiencies

Have potential issues identified by the headquarters inspection process been corrected at the operational level?

9.05 Inspection Results (type an X in exactly one cell below)		Inspection Notes
X.	No Issue Identified	
	Potential Issue Identified (explain)	
	N/A (explain)	
·	Not Inspected	

Field Inspection Notes

The following table is provided for recording the covered tasks observed and the individuals performing those tasks.

		Nam	ne/ID of Individual Obse	erved	
		Ron Kosloski	Vic Meder		
No	Task Name	Correct Performance (Y/N)	Correct Performance (Y/N)	Correct Performance (Y/N)	Comments
1	Shut down valve	yes			
2	Sniff test		yes		
3					
4		,			
5					
6					
7					
8					

PHMSA Drug and Alcohol Questions (To be used in conjunction with other inspections)

Name of Ope Interviewed:		Weyer	haeuser				Op ID:	22515
	Nos. covered by the tors D & A Plan:	e						
Any Consort (C/TPA)	tium or Third Party	Admini	strator	C/TPA Po	int of Contact			
Co. Name:	Weyerhaeuser			Name:	Janice Carte	er		
Ph. No.:	Cell (360) 430-941	4		Ph. No.:	(360) 414 39	25		•
Co. Name: V Ph. No.: C Address: 3	3401 Industrial War Long view, WA 98	•		PHMSA (I Represent	•	Patti Johnson, State of WA		of WA
	·			Date of In	spection:	3-9-10		
Plan. Refer	er employees perform to the operator's mo vailable, have the ope	ost recei	nt Management	Information	System (MIS)	report, if ava	ilable.	4 weyerhaeusr and 3 NW Fab contractor
Total numbe	er of operator's (Op.	ID Nos	. listed above) er	nployees.				4

Operator's Drug Program Mgr	/ DER Janice Carter	Phone:	(360) 425 2150
Operator Employee Interviewed Position/Title:	l: Ron Kosloski	Phone:	Cell (360) 430-9414
Others Present:	Title	Pl	hone No.
Bob Cosentino	Cosentino Consultant "Corp	(530	604-3868
Ron Kosloski	Pipeline Operations Managers	, ,	0-9414 Pager (360) 39-3236
Janice Carter	Occupational Health Nurse	(360	0) 425 2150

Interview Questions for the Operator

§199	Pipeline Safety Regulations Drug and Alcohol Testing	Yes Sat.	No UnSat.
.3 .101 .201 .245	Does the company have a plan for drug and alcohol testing employees performing covered functions? (i.e., operations, maintenance, or emergency-response as well as verify that their contract employees are also under an appropriate drug and alcohol plan?	x	
vicycinacus	er has program for all employees including the 4 gas employees.		
Weverhaeus	or has program for all ampleyees including the 4 gas ampleyees		
.3 .105(c) .225(b)	2. Does the company perform random drug testing and on-suspicion alcohol testing (unless they are in a FMCSA pool where it's random) of employees performing covered functions? If no to either test, please explain? If yes on drug testing, how many times per year and how many individuals each time?	x	

PHMSA Drug and Alcohol Questions

(To be used in conjunction with other inspections)

§199	Pipeline Safety Regulations Drug and Alcohol Testing	Yes Sat.	No UnSat.
For the 4 gas	employees they pull quarterly. 2009 tested 75% of employees.		
.3 .105(b)	3. Does the company conduct post-accident testing for affected covered function employees following every accident/incident? If no, please explain? If yes, who or whom would be involved in the determination for performing such testing		
	and is there a time limit for making this decision? (A field supervisor should clearly know if they are responsible for making these decisions.)	, x	
	do post accident test. If an incident occurred, with Weyerhaeuser employees or contract em doccur. Weyerhaeuser uses for cause to prevent accidents also.	ployees po	est accident
.113(c) .117(a)(4) .227(b)(2) .241	4. Does the company provide any training for Supervisors on the detection of potential drug abuse and alcohol misuse? If so, when or how often? (This applies to reasonable cause/reasonable suspicion determinations. The operator must provide at least 60 minutes of training each on the detection of drug use and alcohol misuse.)	X	
Comments: Did a Weyer	haeuser company wide training in 2006. Reviewed Jance and Ron certificates. In house prog	gram was 6	0 minutes.
.3	5. Does the company provide an Employee Assistance Program. If so, how are		
.113(b) .117(a)(4) .239(b)(11)	covered function employees made aware of the program, especially on the use of prohibited drugs or alcohol misuse? (The operator must display and distribute informational material (can be a video), a hotline number, and the operator's policy regarding the use of prohibited drugs.)	x	
	including (Including any of inspector's additional findings/comments)		
	m, part of new employee training, pamphlets in every building, and on Weyerhaeuser of loyees have access to.	computer s	ystem
		•	

Inspector Guidance: Ask the above listed drug and alcohol questions in conjunction with all other inspections or investigations. If the company representative cannot answer a question, please make a note and request the operator provide Stanley Kastanas with the information within 7 business days via e-mail or the telephone number noted below. This should not take more than 15-30 minutes. Do not ask the company to have a drug and alcohol expert available for this portion of your inspection.

The above does not constitute a full drug and alcohol inspection rather it help prioritize companies for PHMSA'a comprehensive drug and alcohol inspection. Please refer the company to Stan Kastanas at 202-550-0629 for any in-depth drug and alcohol questions.

Upon return to your office, please email (scanned if handwritten) this form to Stanley.Kastanas@DOT.GOV.

Note to Inspector: Expanded guidance is posted as a PHP on the Intranet along with a list of operators who have already been interviewed and for whom this form is not required.

Inspectors: An expanded guidance and a list of the operators already surveyed are posted on the PHMSA/OPS SharePoint at: Expanded Guidance for Form 13