

MCGEE, HANKLA, BACKES & DOBROVOLNY
A PROFESSIONAL CORPORATION

ORLIN W. BACKES
RICHARD H. MCGEE II
BRIAN W. HANKLA
COLLIN P. DOBROVOLNY
JON W. BACKES*
PETER B. HANKLA**
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JERRY D. NELSON, CPA
Business Manager

WALFRID B. HANKLA (Retired)
ROBERT A. WHEELER (Retired)
GEORGE A. MCGEE (1878-1953)
RICHARD H. MCGEE (1918-1992)

June 7, 2011

RECEIVED

JUL 12 2011

PUBLIC SERVICE COMMISSION

ALSO LICENSED IN:
*Colorado
**Minnesota

FAX: 701.328.2410

E-mail: pfahn@nd.gov

ATTN: Patrick Fahn

600 E. Boulevard, Dept. 408

Bismarck, ND 58505-0480

RE: Case No. GS-10-602


Copies of the following documents are attached:

- Qualification Program (Karlain Drader, Nancy Mueller, Jeff Leingang (H.A. Thompson & Sons) and Eric Knutson (H.A. Thompson & Sons); and
- List of costs incurred for qualification of individuals performing covered tasks (with supporting documentation).

This information is submitted in response to the Public Service Commission's May 5, 2011 Order. I believe the other information and documentation required by the May 5, 2011 Order have already been provided. However, if I am mistaken, please let me know.

If the Public Service Commission has any questions or concerns about the information and documentation submitted by the City, please contact Karlain Drader or Nancy Mueller at the City of Granville (701-728-6369)

Sincerely,
McGEE, HANKLA, BACKES & DOBROVOLNY, P.C.



Bryan Van Grinsven

E-mail: [bvangeinsven@mcgeelaw.com](mailto:bvangrinsven@mcgeelaw.com)

psc3

Enclosures

cc: City of Granville

13 **GS-10-602** Filed: 7/12/2011 Pages: 34
Compliance filing - qualification program and list of costs incurred for qualification of individuals performing covered tasks

City of Granville

Bryan Van Grinsven, Attorney

No.	Covered Task	Attended	Attended	Attended	Cert Date	Cert Date	Cert Date	Recert Yrs	Comments
38	Abandoning Facilities							5	
39	Safe Vault Entry (N/A)							N/A	
40	Inspecting and Maintaining Valves	9-26-10			10-11-10			5	
41	Inspecting Pressure Regulating and Limiting Stations							5	
42	System Uprating							5	
51	Job Site Protection	7-21-10			10-11-10			5	
52	Backhoe Safety	7-21-10			10-11-10			5	

No.	Covered Task	Attended	Attended	Attended	Cert Date	Cert Date	Cert Date	Recert Yrs	Comments
III.	LEAK SURVEY AND RESPONSE								
10	Leak Classification				10-1996			3	
11	Operating the Combustible Gas Indicator				10-1991			3	
12	Operating the Flame Ionization Unit (N/A)				N/A			N/A	
13	Emergency Response and Restoration of Service				10-1991			3	
14	Leak Surveys and Patrols				10-1991			5	
IV.	CUSTOMER SERVICE								
15	Customer Leak Investigation				10-1996			5	
16	Pressure Checks to Establish Gas Service				10-1996			5	
17	Establishing and Disconnecting Gas				10-1991			5	
V	CONSTRUCTION and MAINTENANCE								
18	Atmospheric Corrosion							5	
19	Odorization				04-1990			5	
20	Bar Hole Testing and Purging			07-2004				5	

City of Granville
Costs Incurred for Qualification of Individuals Performing Covered Tasks

Date	Check #	Name	Comments	Amount
8-3-10	10436	NDPGA	Books	\$ 78.12
8-16-10	10444	NDPGA	NDPGA	\$ 150.00
9-9-10	10478	Karlain Drader (Sponsor: Whiting Oil)	gas/locator school reimbursement	\$ 117.41
9-9-10	10484	NDPGA	Hazmat Training	\$ 50.00
10-4-10	10508	Karlain Drader (Sponsor: NDPGA)	Back to Basics training (Bismarck) reimbursement	\$ 389.89
11-10-10	10559	Karlain Drader (Sponsor: Mitchell Tech)	Plant operations / walk through (Hettinger) training reimbursement	\$ 387.98
2-16-11	10667	ND Fireman's Assoc (NDFA)	Propane Fire Training	\$ 40.00
2-16-11	10670	NDPGA	Plant operations Minot	\$ 125.00
3-7-11	10688	Northern Testing	Drug Test Annual Fee	\$ 20.00
3-7-11	10690	Karlain Drader (Sponsor: NDFA)	Propane Fire School expense reimbursement	\$ 119.13
3-7-11	10690	Karlain Drader (Sponsor: NACE)	cathodic protection (CP1) training airfare (PA) reimbursement	\$ 687.19
3-7-11	10691	Nancy Mueller (Sponsor: NACE)	Cathodic protection (CP1) registration fee reimbursement	\$1670.00
3-11-11	10692	Karlain Drader	Compliance & Safety Training (Sioux Falls, SD) motel reimbursement	\$ 523.14
3-11-11	10693	Rent A Wreck	Compliance & Safety Training (Sioux Falls, SD) car rental	\$ 364.55
4-5-11	10713	Karlain Drader	Compliance & Safety Training (Sioux Falls, SD) fuel expense reimbursement	\$ 133.79
4-8-11	10722	NDPGA	Books	\$ 42.70
5-3-11	10743	Karlain Drader	Cathodic protection (CP1) (PA) meals and lodging reimbursement	\$ 650.41
Total:				\$5549.31

NORTH DAKOTA PROPANE GAS ASSOCIATION

PO BOX 1956

BISMARCK, ND 58502-1956

Telephone (701) 223-3370

Fax (701) 223-5004

www.ndpropane.org

July 12, 2010

City of Granville
 PO Box 39
 Granville ND 58741

Item #	DESCRIPTION OF CHARGES	CHARGES
P.O. #		
009200	Basic Principles & Practices manual	\$27.05
00C402	Distribution Manual	\$34.35
005606	Propane Safety Booklet () x \$9.50	\$
009015	OSHA & DOT Employee Hazmat Training x \$21.95	\$
003004	NFPA #58 LP GAS CODE 2008 edition @ \$44.00	\$
003002	NFPA #54 National Fuel Gas Code 2009 edition @ \$46.00	\$
	Shipping & Handling	\$16.72
	Rush Order Fee	\$
	ND Sales Tax	exempt
	BALANCE DUE (net 15 days)	\$78.12

**CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT**

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: Locator School

Mileage: # 219 x \$0.50/mile = \$ 109.50

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ _____

Lunches: # _____ x \$ 7.50/meal = \$ _____

Suppers: # _____ x \$12.50/meal = \$ 7.91

Lodging: # _____ x \$55.00/night = \$ _____

Other: _____ \$ _____

TOTAL REQUESTED: \$ 117.41

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature: Karlain Drader Date: 8-12-10

Reimbursed Check #: 10478 Date: 9-9-10

1110 # 10508

CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: CETP

Mileage: # 300 x \$0.50/mile = \$ 150

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ _____

Lunches: # _____ x \$ 7.50/meal = \$ _____

Suppers: # 1 x \$12.50/meal = \$ 12.50
9.99 + tax

Lodging: # 1 x \$55.00/night = \$ total 77.39

Other: _____ \$ _____

TOTAL REQUESTED: \$ ~~237.38~~ 239.89

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature: Karlain Drader Date: 9-29-10

Reimbursed Check #: 10508 Date: 10-4-10

2056

10507

BROT
FORD

DATE 10/4/10

TO Ackerman Estrald

DEPOSITS

FOR Eng Fees - Water
Tower

TOTAL

THIS
CHECK

✓
1032 50
~~435 00~~

OTHER

TAX
DEDUCTIBLE

BALANCE

10508

DATE 10/4/10

TO Karlain Drader

DEPOSITS

FOR Propane School ^{150.00} 239.89

THIS
CHECK

Water School 44.00

✓
433 89

OTHER

TAX
DEDUCTIBLE

BALANCE

10509

DATE 10/4/10

TO Railroad Management

DEPOSITS

FOR Water pipeline
crossing

TOTAL

THIS
CHECK

✓
109 81

OTHER

TAX
DEDUCTIBLE

BALANCE

1573 84

0167 DKAOL check1 04/20/09 06:16

**CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT**

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: Hettinger Plant walk through

Mileage: # 539 x \$0.50/mile = \$ 269.50

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ 21.47

*→ Karlain
nancy +
Arland*

Lunches: # _____ x \$ 7.50/meal = \$ _____

Suppers: # _____ x \$12.50/meal = \$ _____

Lodging: # _____ x \$55.00/night = \$ 97.01

Other: _____ \$ _____

TOTAL REQUESTED: \$ 387.98

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature: Karlain Drader Date: 11-10-10

Reimbursed Check #: ~~11-10-10~~ 10559 Date: 11-10-10

Northwestern Firelighters

PO Box 6127

Richmond, ND 58506-6127

Richmond, ND 58506-6127

Renewal Fee

Last Name	First Name	Fee Description	Fee
		Member	\$40.00

Amount Due by Department \$40.00

Please return colored copy with payment.
Thank You

Northern Testing

3108 S. Broadway, Suite E
 Minot, ND 58701

Invoice

Date	Invoice #
2/15/2011	3381
Terms	Net 30

Invoice to:

City of Granville
 ATTN: Nancy Mueller
 PO Box 39
 Granville, ND 58741

Date of Service	Qty	Description	Price Each	Amount
2/15/2011	2	Consortium fee per employee, per calendar year 2011.	10.00	20.00
Phone # (701) 839-4730			Total \$20.00	

**CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT**

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: Propose Fire School (minot)

Mileage: # 196 x \$0.50/mile = \$ # 98⁰⁰

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ _____

Lunches: # 2 x \$ 7.50/meal = \$ 21.13

Suppers: # _____ x \$12.50/meal = \$ _____

Lodging: # _____ x \$55.00/night = \$ _____

Other: _____ \$ _____

TOTAL REQUESTED: \$ 119.13

I do hereby certify that the within bill, claim, or demand is just and true; that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid; that the goods therein charged were actually delivered and were of the value charged.

Signature: Karl Drader Date: 2-28-11

Reimbursed Check #: 10690 Date: 3-7-11

**CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT**

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: Catholic Protection Course - propane May 12-22nd 2011

Mileage: # _____ x \$0.50/mile = \$ _____

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ _____

Lunches: # _____ x \$ 7.50/meal = \$ _____

Suppers: # _____ x \$12.50/meal = \$ _____

Lodging: # _____ x \$55.00/night = \$ _____

Other: Flight \$ 304.10
Train \$ 136.⁰⁰
Car Rental & INS 247.99

TOTAL REQUESTED: \$ _____

\$687.19

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature: Karlain Drader Date: 3-3-11

Reimbursed Check #: 10690 Date: _____

**CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT**

Effective August 3, 2009

Employee: Nancy A Mueller

Reason/Event: _____

Mileage: # _____ x \$0.50/mile = \$ _____

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ _____

Lunches: # _____ x \$ 7.50/meal = \$ _____

Suppers: # _____ x \$12.50/meal = \$ _____

Lodging: # _____ x \$55.00/night = \$ _____

Other: Karlain- Propane School Registration - Penn \$ 1670.00

Fax - Tone Cartridge \$ 13.90

TOTAL REQUESTED: \$ 1683.90

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature: Nancy A Mueller Date: 3/7/11

Reimbursed Check #: 10691 Date: 3/7/11

CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: South Dakota/North Dakota Pipeline Safety Operator Training

Mileage: # _____ x \$0.50/mile = \$ _____

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # 3 x \$5.00/meal = \$ 15⁰⁰

Lunches: # 4 x \$7.50/meal = \$ 30⁰⁰

Suppers: # 3 x \$12.50/meal = \$ 37⁵⁰

Lodging: # _____ x \$55.00/night = \$ _____

Other: Room 4 x 112.41/night = \$ 449.64

TOTAL REQUESTED: \$ 523.14

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature: Karlain Drader Date: 3-9-11

Reimbursed Check #: 10692 Date: 3-11-11

**CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT**

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: Sioux Falls Propane Convention

Mileage: # _____ x \$0.50/mile = \$ _____

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ _____


Lunches: # _____ x \$ 7.50/meal = \$ _____

Suppers: # _____ x \$12.50/meal = \$ _____

Lodging: # _____ x \$55.00/night = \$ _____

Other: gas \$ ~~125.26~~ 125.26
vacuum cleaner bags 8.53
TOTAL REQUESTED: \$ 133.79

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature:  Date: 3-21-11

Reimbursed Check #: 10713 Date: 4-5-11

4-8-11 #10722

PACKING SLIP

Page Of



National Fire Protection Association

Fulfillment Center, 11 Tracy Drive, Avon, MA 02322
 Phone: 508-895-8300 • Fax: 508-895-8301 • www.nfpa.org

- This is not an Invoice -

BILLING I.D. NUMBER
2830214

SHIPPING I.D. NUMBER
2830214

OFFICE USE ONLY	
WGT:	0.310 lbs
SHIP VIA	UG / 01
OP/TYPE	WEB/INV
PRIORITY	W

MARY NAGEL
 NORTH DAKOTA PROPANE GAS ASSOC
 PO BOX 1956
 BISMARCK
 ND 58502

KARLAIN DRADER
 CITY OF GRANVILLE
 103 3RD STREET SW
 GRANVILLE
 ND 58741

CUSTOMER PURCHASE ORDER NUMBER	ORDER NUMBER	WEB ORDER NUMBER	INVOICE DATE	INVOICE NUMBER
	4094653	883368	04-01-11	5178951Y

LOCATION	QUANTITY	ITEM NUMBER	TITLE	LIST PRICE	DISCOUNT PRICE	EXT. PRICE
A06CID	1	5908	LP Gas Utility Plt 0	37.50	33.75	33.75



	TOTAL GOODS	33.75
	TAX	0.00
	SHIPPING	0.00
	HANDLING	8.95
	OTHER	0.00
	TOTAL	42.70

USE THIS LABEL TO RETURN MERCHANDISE

INVOICE NO. 5178951Y	INVOICE ID NO.	CUSTOMER P.O. NO.
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NFPA RETURNS DEPT.
 11 TRACY DRIVE
 AVON, MA 02322

**CITY OF GRANVILLE
REQUEST FOR REIMBURSEMENT**

Effective August 3, 2009

Employee: Karlain Drader

Reason/Event: CPI - PA

Mileage: # _____ x \$0.50/mile = \$ _____

Reimbursement will be for actual expenses when receipts are provided.
Otherwise, per diem rates will apply as follows:

Breakfasts: # _____ x \$ 5.00/meal = \$ _____

Lunches: # _____ x \$ 7.50/meal = \$ _____

Suppers: # _____ x \$12.50/meal = \$ _____

Lodging: # _____ x \$55.00/night = \$ _____

Other: car rental Gas \$ 32.00
car rental Difference \$ 49.75
Baggage check \$ 50.00

TOTAL REQUESTED: \$ 131.75

I do hereby certify that the within bill, claim, or demand is just and true: that the money therein charged was actually paid for the purpose therein stated; that the services therein charged were actually rendered and that no part of such bill, claim, account or demand has been paid: that the goods therein charged were actually delivered and were of the value charged.

Signature: Karlain Drader Date: 5-31-11

Reimbursed Check #: 10775 Date: 6-6-2011

gas
Bagcheck