

CAPITAL ELECTRIC COOP

MENOKEN SUB CCT 3 OUTAGE HISTORY

2009	2010	2011	2012	2013	2014
1	2	0	0	1	0

CAPITAL ELECTRIC COOPERATIVE

W/O#: Account: 3456902 SO Nbr: 523532 Cycle: 1 Date Needed: 06/03/2013

Srv Map Loc: 452808157

MISCELLANEOUS REQUEST

KRISTI D VETTER
2248 171ST ST NE
MENOKEN, ND 58558

Home Phone: (701)673-3142 Ext.
Work Phone: (701)663-6595 Ext. 4304
Mobile Phone: NONE LISTED

Form containing fields for Electrician, Service Desc, Block, Lot, Permit #, Subdivision, Inspection, Builder, Builder Ph, TRANSFORMER, METERS, and INSTALLED sections.

DESCRIPTION:

NO POWER REPORTED. C PHASE BREAKER WAS OPEN IN SUB, UNDERGROUND FAULT BETWEEN V4071 AND V1 AT STERLING SUB.

LD MH 6-2-13

FIELD COMMENTS:

Man Hours:
Unit/Mile:
Time Out:
Time On:
Completed By:
Date:



Dispatched To:
Job Briefing :
Close Date: 6/20/13
Taken By: ln 06/03/2013

CAPITAL ELECTRIC COOPERATIVE

W/O#: _____ Account: _____ SO Nbr: 501160 Cycle: _____ Date Needed: 08/30/2010

Srv Map Loc: 45-33

GENERAL MAINT

Home Phone: NONE LISTED
 Work Phone: NONE LISTED
 Mobile Phone: NONE LISTED

Electrician:	Service Desc:	Block:	Lot:
Permit #:	Subdivision:		
Inspection:	Builder:	Builder Ph:	None Listed
TRANSFORMER			
Transformer Loc#:	Sub:	Circuit:	Line Sect:
Serial #:	KVA:		Phase:
INSTALLED:			
Serial #:	KVA:		Phase:
METERS			
Serial #:	TWACS:	Port:	LV Rdg:
Reading:	Demand:	Mult:	Dials:
			Rate:
INSTALLED:			
Serial #:	TWACS:	Type:	Port:
Reading:	Demand:	Mult:	Dials:

DESCRIPTION:

B PHASE BREAKER OPEN IN MENOKEN SUB CCT3. ISOLATED LINE URD FAULT BETWEEN V1 SEC.27 AND V1 SEC.25. CLOSED BREAKER IN SUB AND CLOSED NORMAL OPEN AT 47-30 V1.

JOHN MIKE DALE STEVE K 8-27-10

FIELD COMMENTS:

Man Hours: _____

Unit/Mile: _____

Time Out: _____

Time On: _____

Completed By: _____

Date: _____

Dispatched To: _____

Job Briefing : _____

Close Date: 9/1/10

Taken By: ln 08/30/2010



CAPITAL ELECTRIC COOPERATIVE

W/O#: _____ Account: _____ SO Nbr: 500657 Cycle: _____ Date Needed: 08/16/2010

Srv Map Loc: 45-33

POWER INTERRUPTION

Home Phone: NONE LISTED
 Work Phone: NONE LISTED
 Mobile Phone: NONE LISTED

Electrician:	Service Desc:	Block:	Lot:
Permit #:	Subdivision:		
Inspection:	Builder:	Builder Ph:	None Listed

TRANSFORMER

Transformer Loc#:	Sub:	Circuit:	Line Sect:
Serial #:	KVA:		Phase:
INSTALLED:			
Serial #:	KVA:		Phase:

METERS

Serial #:	TWACS:	Port:	LV Rdg:	L V Rdg Dt:
Reading: _____	Demand: _____		Mult: _____	Dials: _____ Rate: _____
INSTALLED:				
Serial #:	TWACS:	Type:	Port:	
Reading: _____	Demand: _____	Mult: _____	Dials: _____	

DESCRIPTION:

8-16-10 1413 hrs no power was reported. OCR open in menoken sub 15-3-3

FAULT BETWEEN V1 ,AP 46 SEC 26 AND V2 SEC 25 CABLE IS PARKED ON BOTH ENDS. C PHASE

DUG UP FAULT AND SPLICED IT. IT HAD SPLICES, SO WE DUG UP OTHER SPLICE PIT 96FT TO THE WEST OF THIS ONE AND PUT NEW SPLICE ON IT. WE ALSO DUG UP THE THIRD SPLICE PIT 40 FT TO THE WEST OF THE SECOND ONE AND THAT ONE HAD A NEW SPLICE ON IT.

LES SETH BRAD STEVE K 8-16-10

FIELD COMMENTS:

Man Hours: _____

Unit/Mile: _____

Time Out: _____

Time On: _____

Completed By: _____

Date: _____

Dispatched To: _____

Job Briefing : _____

Close Date: 8/20/10

Taken By: lw 08/16/2010



fw

OUTAGE AND JOB ORDER

Const. No. _____ Retire No. _____ Office Ph. _____
Home Ph. _____

Name Line Outage
Address _____ Dispatched To _____
City _____ State & Zip _____
Area _____ Block _____ Lot _____
Electrician _____ Affidavit No. _____ Rate Class _____
Location: Map 45 Section 33 Detail _____ Account _____
Time Out 12:00 Am Time Reported _____
Time On 2:00 Am Members Affected 135
Miles Driven 43 Man-hours Required 9 1/2

Removed		TRANSFORMERS	Installed	
Number _____		Number _____		
KVA _____		KVA _____		
		<input type="checkbox"/> AØ	<input type="checkbox"/> BØ	<input type="checkbox"/> CØ

METERS

Number _____		Number _____	
Reading _____		Reading _____	
Multiplier _____	Dials _____	Multiplier _____	Dials _____
Demand _____		Demand _____	
TWACS Number _____		TWACS Number _____	
<input type="checkbox"/> Job Briefing Conducted	TWACS Meter	<input type="checkbox"/> 1 port	<input type="checkbox"/> 3 port <input type="checkbox"/> _____

Description: No Power

Field Report: CØ ocr open in menoken sub CCT3
URD Fault between V1 Sec. 33 Map 45 And V1
Sec 30 Map 47

Disconnect: _____ Acct No. _____
Connect: _____ Acct No. _____

Received by: SRS Completed by: Brad, Rick, Matt
Date: 6-16-09 Date: 6-16-09

15-3-3