

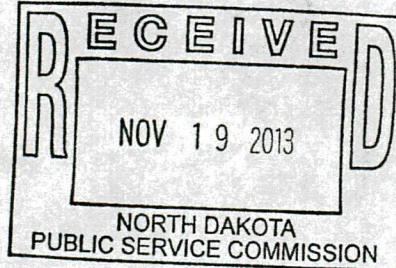


MONTANA-DAKOTA

UTILITIES CO.

A Division of MDU Resources Group, Inc.

220 2nd Ave East
P.O. Box 1407
Williston, ND 58802-1406
(701) 572-2152



November 19, 2013

Public Service Commission
600 E Blvd. Ave. Dept. 408
Bismarck, ND 58505-0480

To whom it may concern;

In response to the request at the bottom of the Third Party Damage Complaint form, SFN 59067 (11-12), regarding my authority to file a complaint on behalf of a company, please refer to the following information.

As the District Gas Superintendent for the Williston District of Montana-Dakota Utilities, I am “responsible for construction, operation, and maintenance of the gas transmission and distribution systems; and providing safe, reliable, economic service to our customers.” This includes responding to any problems found with excavators working in vicinity with our natural gas system.

If you have any questions, feel free to contact me.

Sincerely

Paul Riely
District Gas Superintendent
(701) 572-1614
paul.riely@mdu.com

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|----|---------------------------|------------------|----------|----|-------------------------------------|
| 32 | PU-14-671 | Filed 06/30/2015 | Pages: 4 | | |
| | Exhibit A6 | | | | |
| | Public Service Commission | | | 34 | GS-13-886 Filed 06/30/2015 Pages: 4 |
| | | | | | Exhibit A6 |
| | | | | | Public Service Commission |
| 35 | GS-14-230 | Filed 06/30/2015 | Pages: 4 | | |
| | Exhibit A6 | | | | |
| | Public Service Commission | | | 35 | GS-13-885 Filed 06/30/2015 Pages: 4 |
| | | | | | Exhibit A6 |
| | | | | | Public Service Commission |
| 35 | GS-14-229 | Filed 06/30/2015 | Pages: 4 | | |
| | Exhibit A6 | | | | |
| | Public Service Commission | | | 34 | GS-13-884 Filed 06/30/2015 Pages: 4 |
| | | | | | Exhibit A6 |
| | | | | | Public Service Commission |



Public Service Commission
SFN 59067 (11-12)

PART A – WHO IS SUBMITTING THIS COMPLAINT

Information Being Submitted By <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Company*	Company/Organization Montana-Dakota Utilities Co.	Person Filing Information Paul Riely	Position District Gas Superintendent	
Address of Person Filing Information 220 2nd Ave E	City Williston	State ND	Zip Code 58801	
Telephone Number 701-572-1614	Email Address paul.riely@mdu.com	Date 10-11-2013		

PART B – WHO ALLEGEDLY VIOLATED THE ONE-CALL REGULATIONS

Name of Excavator Northern Excavating Co., Inc		Telephone Number 701-252-5967	
Address 3420 82nd Avenue SE	City Jamestown	State ND	Zip Code 58102
Name of Entity for Which Excavation Was Performed City of Ross		Telephone Number 701-755-3262	
Address PO Box 4	City Ross	State ND	Zip Code 58776

PART C – TIME AND LOCATION OF THE EVENT

Date and Time of Event 10/15/13 @ 1140 hrs	Address of the Excavation and/or Damage Rail Road ave and West 3rd St		
County Mountrail	City Ross	State ND	Zip Code 58776

PART D – FACILITY INVOLVED

Type of Facility Involved Gas Distribution System	Operator of Facility and Contact Person (if known) Montana-Dakota Utilities		
Address 220 2nd Ave E, PO Box 1406	City Williston	State ND	Zip Code 58802-1406
Telephone Number 701-572-1600	Email Address (if known) paul.riely@mdu.com		
Brief Description of Facility Involved Natural Gas distribution main line			

PART E – DAMAGE (if applicable)

Fatalities None	Injuries None	Length of Hospitalization, If Applicable None
Estimated Value of Property Damage: \$ 743,38		Number of Customers Affected 3
Damaged Within <input checked="" type="checkbox"/> Public Property <input type="checkbox"/> Private Property		Photos of Damaged Facility <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If yes, please include copies)

PART F – EXCAVATION

Was a locate requested from North Dakota One-Call?	
<input type="checkbox"/> Yes Locate Ticket Number <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Start Date on Ticket <input type="text"/>
Did excavator wait until the start date/time on the ticket before commencing excavation?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> N/A	
Were buried facilities exposed by hand or non-invasive equipment prior to excavation?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> N/A	

PART G – MARKING

Were facilities marked?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> N/A
Were utility/facility marks visible in the area of excavation?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> N/A
Were the utility/facilities marked correctly?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> N/A
Was the marking complete prior to the start time on the ticket?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> N/A
Did the excavator pre-mark with white paint?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> N/A
Was the facility marked accurately within 24 inches horizontally?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> N/A
Did the excavator use reasonable care to maintain locate marks for the life of project?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> N/A

PART H – DESCRIPTION OF EVENT

<p>Description of Event</p> <p>On or about 11:40 am on October 15, 2013 the contractor struck 2 natural gas main line with a track-hoe. They were excavating in the area of the Grain Elevators West of the intersection of West 3rd Street and Rail Road Ave. The contractor was excavating with no valid locates.</p>
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Description of Event Continued

PART I – SIGNATURE

Signature of Person Filing Complaint <i>Paula Kiel</i>	Date <i>11/19/13</i>
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Please include additional documents and photos, if applicable.

***If you are filing on behalf of a company, please provide information supporting your authority to file this complaint.**

Send Completed, Original Complaint To:
Public Service Commission
600 E Boulevard Ave Dept 408
Bismarck ND 58505-0480
Telephone: (701) 328-2400

Email to the Commission