NOTICE: This report is required by 49 CFR Part 195. Failure to report can result in a civil penalty not to exceed \$25,000 for each violation for each violation persists except that the maximum civil penalty shall not exceed \$500,000 as provided in 49 USC 60122

OMB No. 2137-0047

U.S. Department of Transportation Pipeline and Hazardous Materials

## ACCIDENT REPORT – HAZARDOUS LIQUID PIPELINE SYSTEMS

Report Date	
No	

Pipeline and Hazard		PIPELINE	O Y O I EIVIO	No.			
Safety Administratio	n			110.	(DOT Use Only)		
INSTRUCTION	S				· ·		
Important:	information requeste	e read the separate instructions for completing this form before you begin. They clarify the ation requested and provide specific examples. If you do not have a copy of the instructions, in obtain one from the Office Of Pipeline Safety Web Page at <a href="http://ops.dot.gov">http://ops.dot.gov</a> .					
PART A – GEN	IERAL REPORT INFORM	ATION Check: Origin	nal Report □ Suppleme	ntal Repor	rt □ Final Report		
b. If Operator c. Name of 0 d. Operator e. Operator IMPORTANT: THIS PAGE OF	or does not own the pipeline Departor street address address City, Cou	nty, State and Zip Code THAT IS, THE AMOUNT IS A	Identification Number (if known	S LESS THAN	N 5 BARRELS, COMPLETE		
hr.  3. Location of a (If offshore, of a Latitude: (if not available) b. City, a C. State d. Mile post (whice	Longitude:	d. See Part C.1)  ovide specific location)  station no. O	5. Losses (Estimated)  Public/Community Loss  Public/Private property da  Cost of emergency responded to the cost of environmental results (describe)  Operator Losses:  Value of product lost  Value of operator property Other Costs  (describe)	amage \$ onse phase \$ mediation \$ \$ ory damage \$ \$	6 6		
4. Telephone re	eport	//_///	Total Costs	\$	<b>5</b>		
(If Yes, comple a. Name of c b. Classificat O HVLs / O CO <sub>2</sub> or	other non-flammable, non- ne, diesel, fuel oil or other p	• • •	conditions mbient conditions	involved :  O Barrels  O Gallons less the	s (check only if spill is an one barrel)		
<b>CAUSES FOR</b>	SMALL SPILLS ONLY (5	gallons to under 5 barrels)	: (For large spills [5	barrels or gre	eater] see Part H)		
O Corrosion	O Natural Forces	O Excavation Damage	O Other Outside Fo	rce Damage			
_	d/or Weld Failures	O Equipment	O Incorrect Operation	•	O Other		
		· · ·	O incorrect Operation	<u> </u>	O Guilei		
PAKI B - PRE	PARER AND AUTHORIZE	D SIGNATURE					
(type or print) Pre	parer's Name and Title			Area Code and	I Telephone Number		

Authorized Signature
Form PHMSA F 7000-1 (01-2001)

Preparer's E-mail Address

Area Code and Facsimile Number

Area Code and Telephone Number

(type or print) Name and Title

PART C – ORIGIN OF THE ACCIDENT (Check all that apply)				
Additional location information	Offshore: O Yes O No (complete d if offshore)			
a. Line segment name or ID     b. Accident on Federal land other than Outer Continental	d. Area Block #			
Shelf O Yes O No	State / / or Outer Continental Shelf			
c. Is pipeline interstate? O Yes O No	State 1 1 1 Or Otter Continental Shell			
Location of system involved (check all that apply)	a. Type of leak or rupture			
☐ Operator's Property	OLeak: O Pinhole O Connection Failure (complete sec. H5)			
☐ Pipeline Right of Way	O Puncture, diameter (inches)			
☐ High Consequence Area (HCA)?  Describe HCA	ORupture: O Circumferential – Separation			
	O Longitudinal – Tear/Crack, length (inches)			
Part of system involved in accident     O Above Ground Storage Tank	Propagation Length, total, both sides (feet)			
O Cavern or other below ground storage facility	ON/A			
O Pump/meter station; terminal/tank farm piping and	O0ther			
equipment, including sumps	b.Type of block valve used for isolation of immediate section:			
O Other Specify:	Upstream: ☐ Manual ☐ Automatic ☐ Remote Control ☐ Check Valve			
O Onshore <b>pipeline</b> , including valve sites	Downstream: ☐ Manual ☐ Automatic ☐ Remote Control			
O Offshore <b>pipeline</b> , including platforms	☐ Check Valve			
If failure occurred on <b>Pipeline</b> , complete items a - g:	c. Length of segment isolatedft			
4. Failure occurred on	d. Distance between valvesft			
O Body of Pipe O Pipe Seam O Scraper Trap	e. Is segment configured for internal inspection tools? OYes O No			
O Pump O Sump O Joint	f. Had there been an in-line inspection device run at the point of failure? O Yes O No O Don't Know			
O Component O Valve O Metering Facility	O Not Possible due to physical constraints in the system			
O Repair Sleeve O Welded Fitting O Bolted Fitting O Girth Weld	g. If Yes, type of device run (check all that apply)			
Other (specify)	☐ High Resolution Magnetic Flux tool Year run:			
Year the component that failed was installed: /_ / / / /	☐ Low Resolution Magnetic Flux tool Year run:			
5. Maximum operating pressure (MOP)	UT tool Year run:			
Estimated pressure at point and time of accident:     PSIG	Geometry tool Year run:			
b. MOP at time of accident:	☐ Caliper tool Year run: ☐ Crack tool Year run:			
PSIG PSIG	☐ Hard Spot tool Year run:			
c. Did an overpressurization occur relating to the accident?  OYes O No	☐ Other tool Year run:			
PART D – MATERIAL SPECIFICATION	PART E – ENVIRONMENT			
1. Nominal pipe size (NPS) / / / / in.				
2. Wall thickness / / / / in.	Area of accident     O In open ditch     O Above ground			
3. Specification SMYS / / / / /	O Underground O Under water			
· —	O Inside/under building O Other			
4. Seam type				
5. Valve type	2. Depth of cover: inches			
6. Manufactured by in year / / / / /  PART F - CONSEQUENCES				
Consequences (check and complete all that apply)				
a. Fatalities Injuries	c. Product ignited OYes O No d. Explosion OYes O No			
Number of operator employees:	e. D Evacuation (general public only) / / / / people			
Contractor employees working for operator:	Reason for Evacuation:			
General public:	O Precautionary by company			
Totals:	O Evacuation required or initiated by public official			
b. Was pipeline/segment shutdown due to leak? OYes O No	f. Elapsed time until area was made safe:			
If Yes, how long? days hours minutes	/ / / hr. / / min.			
2. Environmental Impact				
a. Wildlife Impact: Fish/aquatic O Yes O No	e. Water Contamination: O Yes O No (If Yes, provide the following)			
Birds O Yes O No	Amount in water barrels			
Terrestrial O Yes O No	Ocean/Seawater O No O Yes			
b. Soil Contamination O Yes O No	Surface O No O Yes			
If Yes, estimated number of cubic yards: c. Long term impact assessment performed: O Yes O No	Groundwater O No O Yes  Drinking water O No O Yes (If Yes, check below.)			
d. Anticipated remediation O Yes O No	O Private well O Public water intake			
If Yes, check all that apply: \( \Pi \) Surface water \( \Pi \) Groundwater				

PART G – LEAK DETECTION	INFORMATION			
Computer based leak detection	ion capability in place?	O Yes O No		
2. Was the release initially dete	ected by? (check one):	O CPM/SCADA-based syster O Static shut-in test or other p O Local operating personnel, O Remote operating personne O Air patrol or ground surveilla O A third party	oressure or leak test procedures or equipment el, including controllers	
S. Estimated leak duration da	ays hours			
PART H – APPARENT CAUSE	primary cause		this Part H. Check the box corresponding to the e in each of the supplemental categories corresponding for guidance.	
H1 – CORROSION	a. Pipe Coating	b. Visual Examination	c. Cause of Corrosion	
1. External Corrosion	O Bare O Coated	O Localized Pitting O General Corrosion O Other	· ·	
2. Internal Corrosion			O Stress Corrosion Cracking O Selective Seam Corrosion	
(Complete items a – e where			O Other	
applicable.)	d. Was corroded part of	pipeline considered to be under	cathodic protection prior to discovering accident?	
O No O Yes, Year Protection Started: / / / / /				
e. Was pipe previously damaged in the area of corrosion?  ○ No ○ Yes ⇒ Estimated time prior to accident: /// / years /// / months Unknown □				
H2 – NATURAL FORCES	O NO O res ⇒ Esi	umated time prior to accident. <u>7</u>	1 1 years 1 1 1 months Unknown	
3. Earth Movement	⇒ O Earthquake	O Subsidence O Landsl	lide O Other	
4. Lightning				
5. Heavy Rains/Floods	s ⇒ O Washouts	O Flotation O Mudsli	ide O Scouring O Other	
6. Temperature	⇒ O Thermal stress		n components O Other	
7. High Winds	,			
7. — Tilgit VVIIIds				
H3 — EXCAVATION DAMAG	E			
8. D Operator Excavation	n Damage (including thei	r contractors/Not Third Party)		
9. Third Party <i>(comple</i> a. Excavator group O Gene	· _	nent O Excavator other than C	Operator/subcontractor	
b. Type: O Road	Work O Pipeline O	Water O Electric O Sewer	O Phone/Cable	
	owner-not farming related			
		n pipeline operator or their contra Other	ctor	
		ub-strata (boring, directional drilli	ng. etc)	
d. Excavation was an ongoing activity (Month or longer) OYes O No If Yes, Date of last contact ///				
e. Did operator get	prior notification of excav	- '		
Notification received from: O One Call System O Excavator O Contractor O Landowner				
f. Was pipeline marked as result of location request for excavation? O No O Yes (If Yes, check applicable items i - iv)				
i. Temporary i ii. Permanent		S O Stakes O Paint		
	(check one): O Accu	rate O Not Accurate		
iv. Were marks H4 – OTHER OUTSIDE FORG	s made within required tin	ne? O Yes O No		
_		⇒ Fire/Explosion cause: O Ma	an made O Natural	
_	-			
<ul><li>11.  Car, truck or other vehicle not relating to excavation activity damaging pipe</li><li>12.  Rupture of Previously Damaged Pipe</li></ul>				
13. Vandalism				

Material	K VV⊨L	.D FAILUKES				
14. D Body of Pipe	$\Rightarrow$	O Dent	O Gouge	O Bend	O Arc Burn	O Other
15. Component	$\Rightarrow$	O Valve	O Fitting	O Vessel	O Extruded Outlet	O Other
16. D Joint	$\Rightarrow$	O Gasket	O O-Ring	O Threads		O Other
Weld						
17. 🗖 Butt	$\Rightarrow$	O Pipe	O Fabrication			O Other
18.  Fillet	$\Rightarrow$	O Branch	O Hot Tap	O Fitting	O Repair Sleeve	O Other
19. Pipe Seam	$\Rightarrow$	O LF ERW	O DSAW	O Seamless	O Flash Weld	
		O HF ERW	O SAW	O Spiral		O Other
Complete a-g if you	indic	ate <b>anv</b> cause	in nart H5			
a. Type of failure		ato <b>arry</b> caaco	in part 110.			
	n Defe	ect ⇒ O Poor W	orkmanship O F	Procedure not follower	ed O Poor Construc	ction Procedures
b. Was failure de	ue to p	ipe damage susta	ined in transportation	on to the construction	n or fabrication site?	Yes O No
c. Was part which	h leak	ed pressure tested	d before accident or	ccurred? O Yes,	complete d-g O No	
d. Date of test:			r. <u>/ / /</u> mo.			
e. Test medium:			rt Gas O Other			
f. Time held at t			/ hr.		50/0	
	st pres	sure at point of ac	cident:		PSIG	
H6 – EQUIPMENT		No Port Englishment	0.0000000000000000000000000000000000000	O la et	-1-1' O 00ABA	0.0000000000000000000000000000000000000
20. Malfunction of Co	ntrol/F	Relief Equipment	<ul><li>⇒ O Control va</li><li>O Block valv</li></ul>		entation O SCADA alve O Power failure	O Communications  O Other
21. Threads Stripped	Broke	en Pipe Coupling		O Valve Threads		
22.  Seal Failure	, 2.0	on the coupling	⇒ O Gasket	O O-Ring	O Seal/Pump Packin	
H7 – INCORRECT OPER	ATION	1				9 - 0
<u> </u>		-				
23. Incorrect Operation a. Type: O Inadeq		rocedures O In:	adequate Safety Pr	actices O Failure	to Follow Procedures	
b. Number of employees	s involv	ved who failed a p	ost-accident test:	drug test: //	// alcohol test /_	
H8 – OTHER						
24. Miscellaneous, d	escribe	o:				
25. Unknown	_					
O Investigation  PART I – NARRATIVE DI					tal report when investigated (Attach additional)	ntion is complete) sheets as necessary)
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