## PART A – GENERAL INFORMATION

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Last revision Date</td>
<td>02/22/2006</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 1. Operator Name and Address
- Operator's 5-digit Identification Number: 18484
- If Operator does not own the pipeline, enter Owner's 5-digit Identification Number (when known): SOUTHERN CALIFORNIA GAS COMPANY
- Operator street address: 555 W FIFT ST
- Operator address: City LOS ANGELES
  - County or Parish: LOS ANGELES
  - State: CA
  - Zip code: 90013

### 2. Time and date of the incident
- Hour: 11:34
- Date of the incident: 06/29/2005

### 3. Location of incident
- Street or nearest street or road: 11832 DARLING RD
- City: VENTURA
- County or Parish: VENTURA
- State: CA
- Zip Code: 34.29293
- Mile Post/Valve Station: MP #12.34
- Survey Station No: 119.14254
- Onshore (Class Location): 1
- Offshore: N
- Area:  
- Block #:  
- State:  
- Outer Continental Shelf: N
- Accident on Federal Land other than Outer Continental Shelf: N

### 4. Type of leak or rupture
- Leak or Rupture: LEAK
- Type of Leak: PUNCTURE
- Puncture, diameter (inches): 3
- Tear/Crack, length (inches):  
- Propagation Length, total, both sides (feet):  
- Other (specify):  

### 5. Consequences
- Fatality: No
- Total number of people: 0
  - Employees: 0
  - General Public: 0
  - Non-employee Contractors: 0
- Injury requiring inpatient hospitalization: No
<table>
<thead>
<tr>
<th>Total number of people</th>
<th>0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employees</td>
<td>0</td>
</tr>
<tr>
<td>General Public</td>
<td>0</td>
</tr>
<tr>
<td>Non-employee Contractors</td>
<td>0</td>
</tr>
<tr>
<td>c. Property damage/loss (estimated)</td>
<td>Yes</td>
</tr>
<tr>
<td>Total</td>
<td>$70,000</td>
</tr>
<tr>
<td>Gas loss</td>
<td>$10,000</td>
</tr>
<tr>
<td>Operator damage</td>
<td>$60,000</td>
</tr>
<tr>
<td>Public/private property damage</td>
<td>$0</td>
</tr>
<tr>
<td>d. Release Occurred in a ‘High Consequence Area’</td>
<td>N</td>
</tr>
<tr>
<td>e. Gas Ignited / Gas did not ignite</td>
<td>Gas did not Ignite</td>
</tr>
<tr>
<td>f. Explosion / No Explosion</td>
<td>NO EXPLOSION</td>
</tr>
<tr>
<td>g. Evacuation (general public only)</td>
<td>N</td>
</tr>
<tr>
<td>Number of people</td>
<td>0</td>
</tr>
<tr>
<td>Elapsed time until area was made safe</td>
<td></td>
</tr>
<tr>
<td>Hours</td>
<td>0</td>
</tr>
<tr>
<td>Minutes</td>
<td>26</td>
</tr>
<tr>
<td>Telephone Report</td>
<td></td>
</tr>
<tr>
<td>NRC Report Number</td>
<td>763875</td>
</tr>
<tr>
<td>Date</td>
<td>06/29/2005</td>
</tr>
<tr>
<td>Pressure</td>
<td></td>
</tr>
<tr>
<td>a. Estimated pressure at point and time of incident (PSIG)</td>
<td>625.00</td>
</tr>
<tr>
<td>b. Max. allowable operating pressure (MAOP) (PSIG)</td>
<td>780.00</td>
</tr>
<tr>
<td>c. MAOP established by 49 CFR section</td>
<td>49 CFR 192.619(c)</td>
</tr>
<tr>
<td>d. Did an over pressurization occur relating to the incident?</td>
<td>N</td>
</tr>
<tr>
<td>Preparer's Name</td>
<td>W. JEFF KOSKIE</td>
</tr>
<tr>
<td>Preparer's Title</td>
<td></td>
</tr>
<tr>
<td>Area Code and Telephone Number</td>
<td>2132443283</td>
</tr>
<tr>
<td>Preparer's E-mail Address</td>
<td><a href="mailto:WKOSKIE@SEMPRAUTILITIES.COM">WKOSKIE@SEMPRAUTILITIES.COM</a></td>
</tr>
<tr>
<td>Area Code and Facsimile Number</td>
<td>2132448155</td>
</tr>
<tr>
<td>Origin of the Incident</td>
<td></td>
</tr>
<tr>
<td>1. Incident occurred on</td>
<td></td>
</tr>
<tr>
<td>2. Failure occurred on</td>
<td>BODY OF PIPE</td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>3. Material involved (pipe, fitting, or other component)</td>
<td>STEEL</td>
</tr>
<tr>
<td>Plastic failure was</td>
<td></td>
</tr>
<tr>
<td>a. ductile</td>
<td>N</td>
</tr>
<tr>
<td>b. brittle</td>
<td>N</td>
</tr>
<tr>
<td>c. joint failure</td>
<td>N</td>
</tr>
<tr>
<td>Material other than plastic or steel</td>
<td></td>
</tr>
<tr>
<td>4. Part of the system involved in incident</td>
<td>ONSHORE PIPELINE, INCLUDING VALVE SITES</td>
</tr>
<tr>
<td>Other (specify)</td>
<td></td>
</tr>
<tr>
<td>5. Year the pipe or component which failed was installed</td>
<td>1944</td>
</tr>
<tr>
<td>Material Specification</td>
<td></td>
</tr>
<tr>
<td>1. Nominal pipe size (NPS) (inches)</td>
<td>18.00</td>
</tr>
<tr>
<td>2. Wall thickness inches</td>
<td>0.31</td>
</tr>
<tr>
<td>3. Specification</td>
<td>X 45</td>
</tr>
<tr>
<td></td>
<td>SMYS 50</td>
</tr>
<tr>
<td>4. Seam type</td>
<td></td>
</tr>
<tr>
<td>5. Valve type</td>
<td></td>
</tr>
<tr>
<td>6. Pipe or valve manufactured by</td>
<td></td>
</tr>
<tr>
<td></td>
<td>in year 1944</td>
</tr>
<tr>
<td>Environment</td>
<td></td>
</tr>
<tr>
<td>1. Area of incident</td>
<td>UNDER GROUND</td>
</tr>
</tbody>
</table>
Other (specify)  
Depth of cover (inches) 22

**PART F – APPARENT CAUSE**

**F1 – CORROSION**
1. External Corrosion
2. Internal Corrosion

Complete items a-e where applicable

- **a. Pipe Coating**
- **b. Visual Examination**
  Other (specify)
- **c. Cause of Corrosion**
  Other (specify)
- **d. Was corroded part of pipeline considered to be under cathodic protection prior to discovering incident?**
- **Year Protection Started**
- **e. Was pipe previously damaged in the area of corrosion?**
  How long prior to incident? Years Months

**F2 – NATURAL FORCES**

3. Earth Movement
   Description
   Other (specify)
4. Lightning
5. Heavy Rains/Floods
   Description
   Other (specify)
6. Temperature
   Description
   Other (specify)
7. High Winds

**F3 – EXCAVATION**

8. Operator Excavation Damage (including their contractors) / Not Third Party
9. Third Party Excavation Damage Yes
   a. Excavator group PROFESSIONAL EXCAVATOR
   b. Type OTHER
   Other (specify) FARMING
   c. Did operator get prior notification of excavation activity? N
      Date received mo. day yr.
      Notification received from
   d. Was pipeline marked? Y
      Temporary markings
      Permanent markings Y
      Marks were ACCURATE
      Were marks made within required time?

**F4 – OTHER OUTSIDE FORCE DAMAGE**

10. Fire/Explosion as primary cause of failure
   Description
11. Car, truck or other vehicle not relating to excavation activity damaging pipe
12. Rupture of Previously Damaged Pipe
13. Vandalism

**F5 – MATERIAL AND WELDS**

Material
14. Body of Pipe
   Description
   Other (specify)
15. Component
   Description
Other (specify)

16. Joint
   Description
   Other (specify)

Weld
17. Butt
   Description
   Other (specify)
18. Fillet
   Description
   Other (specify)
19. Pipe Seam
   Description
   Other (specify)

Complete a-g if you indicate any cause in part F5
a. Type of failure
   Construction Defect
   NO DATA
   Description
   Material Defect
   NO DATA
b. Was failure due to pipe damage sustained in transportation to the construction or fabrication site?
c. Was part which leaked pressure tested before incident occurred?
d. Date of test
   Month
   Day
   Year
e. Test medium
   Other (specify)
f. Time held at test pressure hr
g. Estimated test pressure at point of incident (PSIG)

F6 – EQUIPMENT AND OPERATIONS
20. Malfunction of Control/Relief Equipment
   Description
   Other (specify)
21. Threads Stripped, Broken Pipe Coupling
   Description
   Other (specify)
22. Ruptured or Leaking Seal/Pump Packing
23. Incorrect Operation
   a. Type
   Other (specify)
b. Number of employees involved who failed post-incident test
   Drug test
   Alcohol test
c. Were most senior employee(s) involved qualified?
d. Hours on duty

F7 – OTHER
24. Miscellaneous
   Description
25. Unknown
   Description

PART G – NARRATIVE DESCRIPTION OF FACTORS CONTRIBUTING TO THE EVENT
DOT/CPUC REPORTABLE INCIDENT, 11832 DARLING ROAD, VENTURA, ON JUNE 29, 2005 AN 18" NATURAL GAS TRANSMISSION PIPELINE OPERATING AT APPROXIMATELY 625 POUNDS WAS DAMAGED BY A FARMER PERFORMING GRADING WORK. WHILE GRADING FIELDS FOR PLANTING, THE EXCAVATOR STRUCK AND DAMAGED THE MAIN, RESULTING IN FIVE OUTAGES. NO INJURIES OR PUBLIC PROPERTY DAMAGE RESULTED FROM THIS INCIDENT. ALL REPAIRS HAVE BEEN COMPLETED, AND FIVE CUSTOMERS WHO WERE OUT OF GAS HAVE BEEN
RESTORED. INVESTIGATION OF THE INCIDENT SHOWED THAT THE EXCAVATOR DID NOT HAVE A USA TICKET, BUT WAS AWARE OF PIPING DUE TO PERMANENT MARKERS IN THE AREA. THE INCIDENT WAS REPORTED TO DOT UNDER INCIDENT #763875, BASED UPON DAMAGE TO COMPANY FACILITIES EXCEEDING $50K. FOR ANY FURTHER QUESTIONS, CONTACT JEFF KOSKIE AT 213-244-3283.