South Dakota One Call Notification Board PO Box 187 Rapid City, SD 57709

IMPORTANT: This form is provided only as assistance in preparing your South Dakota One Call Complaint. Although it is not required, we encourage you to use this form. Please be as thorough as possible to assist the Enforcement Panel in making its determination. You may include additional information as necessary.

Complaint filed on behalf of or by:	RCS Construction
Contact Person:	RC Scull
Phone	(605) 342-3787
Name or Company Name	RCS Construction
Street Address or PO Box	PO Box 9337 Rapid City, South Dakota 57709 United States
Fax	605-348-4041
Email	rc@rcsconst.com
Date	Nov 24, 2020
Name of excavator / facility operator:	Montana-Dakota Utilities
Phone	(605) 355-4035
Name or Company Name	Montana-Dakota Utilities
Street Address or PO Box	PO Box 1060 Rapid City, South Dakota 57709 United States
Email	marcus.christensen@mdu.com
Is this party aware of your allegations?	Yes

Provide detail including whom you spoke with:

RCS notified Marcus Christensen at MDU of the issue and our intention of filing a complaint through 811 on November 7th.

ALL SPECIFIC STATUTES AND ADMINISTRATIVE RULES MUST BE STATED:

49-7A-8 - Location of Underground Facilities - Marking. MDU failed to located a 4" high-pressure gas main that was in the work area, connected to a line that was located and was visible above grade less than 25' from the cleared staked future excavation alignment.

Street Address / location	of
alleged violation:	

Canyon Street

CityLeadStateSouth DakotaDate of alleged violation:Nov 03, 2020

Time of alleged violation: 08:00 AM

Describe your allegation:

Were facilities marked?

MDU failed to located a 4" high-pressure gas main that was in the work area, which connected to a line that was located and was visible above grade less than 25' from the cleared staked future excavation alignment. During a pre-dig review, RCS identified the visible gas line and immediately contacted 811/MDU for a verification ticket. Had RCS not caught that the line was not located, it likely would have resulted in a damage with a high potential for injury to crew and residents in the area. This is the same line about 600' away that MDU previously failed to locate and RCS was charged by MDU and 811 for the damage. (MDU complaint #0C20-066). See the attached document for further details on the location and proximity to the previous incident.

document for further details on the location and proximity to the previous incident.	
Do you believe the alleged violation to be intentional?	No
Was a locate requested from SD One Call?	Yes
Locate ticket #:	2030130011
Start date on ticket:	Nov 02, 2020
Start time on ticket:	04:00 PM
Did the excavator wait until the start date / time on the ticket before commencing excavation?	Yes
Did the excavator maintain a minimum horizontal clearance of 18 inches between a marked facility and mechanical equipment?	NA
Explain RCS identified the issue prior to excavation.	
Were buried facilities exposed by hand or non-invasive equipment prior to excavation?	NA

No

Was the marking complete prior to the start time on the ticket?	NA
Did the excavator pre-mark with white paint?	NA
Was the facility marked accurately (within 18 inches)?	No
Did the excavator use reasonable care to maintain locate marks for the life of project?	NA
Type of facility involved:	4" Gas Main
Operator of facility (if known):	Montana-Dakota Utilities
Operator address (Street or PO Box):	PO Box 1060 Rapid City, South Dakota 57709 United States
Operator Phone	(605) 355-4035
Operator Phone Depth of Cover (If unsure put N/A)	(605) 355-4035 N/A
Depth of Cover (If unsure	
Depth of Cover (If unsure put N/A) Pressure: (If none, write	N/A
Depth of Cover (If unsure put N/A) Pressure: (If none, write none) Voltage: (If none, write	N/A High Pressure (Unknown)
Depth of Cover (If unsure put N/A) Pressure: (If none, write none) Voltage: (If none, write none) # of cable pairs: (If none,	N/A High Pressure (Unknown) None
Depth of Cover (If unsure put N/A) Pressure: (If none, write none) Voltage: (If none, write none) # of cable pairs: (If none, write none)	N/A High Pressure (Unknown) None None
Depth of Cover (If unsure put N/A) Pressure: (If none, write none) Voltage: (If none, write none) # of cable pairs: (If none, write none) Was the facility damaged? Were damages on public right of way or private	N/A High Pressure (Unknown) None None NA

Was operator service affected?	No
Was the one-call notification center immediately notified of the damage, dislocation, or disturbance?	Yes
Was the operator of the facility immediately notified of the damage, dislocation, or disturbance?	Yes
Was there an escape of any flammable, toxic, or corrosive gas or liquid?	No
Please provide a Fire Department or Emergency Services incident report, if available	Not Availiable
Attachment Information File names should not include symbols. Example:(\$, &, *, %.) etc.	
Attachment	11-3-2020 - Site Video - RCS Construction.MP4