The Commonwealth of Massachusetts

DEPARTMENT OF PUBLIC UTILITIES

PIPELINE ENGINEERING AND SAFETY DIVISION

INCIDENT REPORT

3 Magnolia Way, Peabody Massachusetts
March 8, 2007

PIPELINE ENGINEERING AND SAFETY DIVISION

Accident File 07 - 00

Location: Peabody, Massachusetts

Date of Accident: March 8, 2007

Gas Company: KeySpan Energy Delivery, New England

Estimated Property Damage: Over $100,000 *

Injuries: 0

Report Issued - September, 2008

* Estimated by KeySpan Energy Delivery New England

TABLE OF CONTENTS

I. INTRODUCTION

A. Scope of this Investigation

The Pipeline Engineering and Safety Division ("Pipeline Division") of the Massachusetts Department of Public Utilities ("Department"), formerly known as the Department of Telecommunications and Energy, pursuant to G.L. c. 164, § 105A and G.L. c. 82, § 40 ("Dig Safe"), has investigated a natural gas ("gas") fire at 3 Magnolia Way, Peabody, which occurred on March 8, 2007 ("Incident").[1] The operator of the pipeline was KeySpan Energy Delivery, New England ("KeySpan" or "Operator").[2] In a report[3] to the United States Department of Transportation ("U.S. DOT") KeySpan reported the damages in excess of $100,000 (Exh. 1). There were no injuries as a result of the Incident (id.).

As part of the Department's annual certification process by the U.S. DOT, the Department must report to the U.S. DOT:

> [e]ach accident or incident . . . involving a fatality, personal

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1 "*Incident* means any of the following events:
(1) An event that involves a release of gas from a pipeline or of liquefied natural gas or gas from an LNG facility and
(I) A death, or personal injury necessitating in-patient hospitalization; or
(ii) Estimated property damage, including cost of gas lost, of the operator or others, or both, of $50,000 or more.
(2) An event that results in an emergency shutdown of an LNG facility.
(3) An event that is significant, in the judgement of the operator, even though it did not meet the criteria of paragraphs (1) or (2)." 49 C.F.R. §191.3.

2 As a result of a merger completed in 2007, KeySpan is part of the National Grid utility system.

3 Form F 7100.1 is an incident report form that operators must tender to U.S. DOT within 30 days of an incident.

> injury requiring hospitalization, or property damage or loss more than an amount the Secretary establishes, any other accident the [Department] considers significant, and a summary of the investigation by the authority of the cause and circumstances surrounding the accident or incident.

49 U.S.C. § 60105(c)

The purpose of this report is to inform the U.S. DOT of the cause and circumstances surrounding the Incident.

The Department has established procedures for determining the nature and extent of violations of codes and regulations pertaining to the safety of pipeline facilities and the transportation of gas, including but not limited to, 220 C.M.R. §§ 101.00 through 113.00. See 220 C.M.R. § 69.00 et seq. The Department also enforces the U.S. DOT safety standards for gas pipeline systems as set forth in 49 C.F.R. Part 192 ('Part 192"), G.L. c. 164, § 105A.

B. Overview of Incident

On March 8, 2007, at 1:33 p.m., the Peabody Fire Department ("Fire Department") received an alarm for a fire at 3 Magnolia Way (Exh. 2). The Fire Department was at the scene at 1:40 p.m (id.). The Fire Department, upon their arrival, found the fire extended three stories on the exterior building into the cockloft area (id.). They also believed that a natural gas service line to the building was on fire at the base of the building (id.). A search of the building was conducted and there were no occupants found (id.).

KeySpan was notified of the fire at 1:47 p.m (id.). KeySpan was onsite at 2:10 p.m. to shutoff the service line to 3 Magnolia Way (Exh. 3). The service person was unsure whether the shutoff valve in the area of the building was a main or service valve, and requested

assistance (id.). The fire department shutoff the gas at the riser at 2:20 p.m (Exh. 2). The Fire Department reported that shutting the gas off at the riser stopped the flow of gas (id.). At approximately, 2:25 p.m., KeySpan service personnel shut the curb valve to secure the area (Exh. 3).

At 3:57 p.m., KeySpan notified the Pipeline Division of the fire at 3 Magnolia Way, Peabody (Exh. 3). The Department dispatched two investigators to the scene.

II. THE DEPARTMENT'S INVESTIGATION

A. Description of the Site

Magnolia Way is located in a residential area in Peabody. The area is comprised of several apartment residences. The structure at 3 Magnolia Way is a three-story wood building (Exh. 2). The building is comprised of four units, nos. 325, 326, 335 and 336 (Exh. 3). A two-inch plastic gas main, installed in 2005, underlies Magnolia Way (Exh. 4). The operating pressure of the main at the time of the incident was approximately 55 pounds per square inch gauge ("psig")[4] (Exh. 5). A one-inch plastic service line was installed to 3 Magnolia Way in 2005 (Exh. 4). The service line was installed at a depth of three (3) feet (id.). The outside service riser contained a manual shut off valve (Exh. 3). The service regulator[5] was mounted downstream of the valve along with four gas meters (Exh. 7). The regulator set point was 13

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4 Pounds per square inch gage refers to the pressure expressed in points exerted on one square inch of surface area. The designation "gauge" indicates the readings are already adjusted to ignore the surrounding atmospheric pressure, which is 14.7 psi at sea level. If a psig gauge was not connected to any pressure source, it would read zero, even though it is actually sensing 14.7 psi at sea level.

5 A service regulator is a valve which reduces the pressure in the service line from the pressure in the main to the pressure provided to the customer

inches water column ("in. wc") (Exh. 4).[6] The maximum inlet pressure to the regulator was 125 psig (id.). The gas meters were installed on October 6, 2006 (Exh. 4). A curb valve had also been installed on the service line (Exh. 3). Approximately fifteen feet from the service installation was a Comcast cable vault (Exh. 6).

B. Description of the Scene

On March 8, 2007, at about 6:00 p.m., two investigators from the Department's Pipeline Engineering and Safety Division ("Division") arrived at 3 Magnolia Way. Representatives from KeySpan, Peabody Fire Department, and the State Fire Marshal's Office were already at the scene.

The building had fire damage directly above KeySpan's gas facilities servicing this building. The damaged area included the side of the building and a portion of the roof (Exh. 6). KeySpan's facilities consisted of an outside service riser, regulator and four meters (Exh. 7). The regulator and meters suffered extensive fire damage. Approximately 15 feet from the gas facilities was a Comcast Cable vault and two air-conditioning units (Exh. 6). The vault suffered fire damage. The gas service line was initially shutoff at the riser by the fire department. KeySpan then shutoff the gas service at the curb valve (Exh. 8).

On the following day, the Division investigators requested that KeySpan pressure test the portion of the service line from the exposed curb valve to the service riser valve. The service line did not hold the 10 psig pressure test. The investigators observed leakage on the service riser valve and the insulating fitting above the valve (Exh. 6). Upon excavation of the

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6 Inches water column is a measurement of pressure with 27.71 inches of water column equal to one psig.

service line riser and associated piping, the inspectors noticed what appeared to be a hole in the black rubber that encased the plastic service pipe (Exh. 9). There was also a section of corrugated steel that was exposed on the service (id.). The tracer wire that is used to locate the service pipe was found wrapped around the pipe. A section of the tracer wire had fused itself to the black rubber on the riser (Exh. 10). There were bubbled sections of the riser that was also located on the riser (Exh. 11). There were also other underground facilities in the area of KeySpan's facilities (Exh. 12). The next test the Division investigators requested involved excavating the service at the building wall. The test included pressure testing the service line from the curb valve to the building. The service riser was removed. The pressure test held at 62 psig for 23 minutes (Exh. 6). The service riser with shutoff, insulator, remains of the regulator, four meter manifolds and the melted meters were taken into custody by the State Fire Marshal's Office (Exh. 13).

III. ODORIZATION

The state regulation, 220 C.M.R. § 101.06(20), requires operators to odorize gas in their distribution systems. Gas must be "readily perceptible to the normal or average olfactory senses of a person coming from fresh uncontaminated air into a closed room containing [0.15 percent gas in air]." 220 C.M.R. § 101.06(20)(a). Operators are also required to conduct periodic sampling of odorant concentrations throughout their system (id.). KeySpan conducts odorant sampling on a monthly basis.

On March 8, 2007, odor level tests were conducted at 3 Magnolia Way, Peabody after the fire (Exh. 14). The result of the test is as follows:

1. 3 Magnolia Way @ 9:30 p.m. - Odor level @ 0.09 percent gas in air

2. 3 Magnolia Way @ 9:30 p.m. - Odor level @ 0.06 percent gas in air

(Note: Readings taken by two different employees)

The odor detectability levels of gas in air ranged from 0.090 percent to 0.060 percent gas in air, indicating that the odorant levels were within the prescribed state regulation.

IV. LEAK INVESTIGATIONS AND MAINTENANCE ACTIVITY

A review of the submitted maintenance records indicates KeySpan did not perform any maintenance or repair work on the main and service at 3 Magnolia Way, Peabody (Exh. 15). In addition, there were no service calls to the four accounts at 3 Magnolia Way, Peabody (Exh. 16).

V. LEAKAGE SURVEY

In order to determine if other leak sources were contributing factors to the Incident, the Department reviewed the leak history of the mains and service to 3 Magnolia Way. Leakage surveys of gas main and services are required by federal and state regulations. See Part 192 § 192.723(a) and 220 C.M.R. § 101.06(21). The week of August 25, 2006, a walking survey of the main and service was performed (Exh. 17). There were no leaks detected. After the Incident, KeySpan conducted a leak survey. The Operator detected no gas readings on the main or service to or in the area of 3 Magnolia Way (Exh. 18).

VI. FAILURE ANALYSIS OF PIPE SAMPLE

Massachusetts Materials Research, Inc. ("MMR") conducted the failure analysis of the 3 Magnolia Way pipe samples. The pipe samples included the following: meter manifold;

service standpipe; pigtail portion of service line; high pressure cock; regulator; tracer wire; regulator and meter remnants. The purpose of the testing was to determine if there were any failures in the pipe segments examined, and ascertain the probable cause of the failure. MMR's analysis included visual inspection, leak test, chemical analysis, fracture analysis, and radiographic inspection.

On April 15, 2008, MMR submitted it results to the Department[7]. MMR's findings and conclusions are summarized below:

- The damage to the black polymer pigtail cover was OD-initiated, or "outside-in." This damage did not affect the gas-transporting yellow plastic pipe within the pigtail.
- The yellow plastic pipe was intact from the base of the pigtail to the transition fitting. The yellow plastic pipe was breached within the transition fitting. This and other internal transition fitting damage was consistent with melting caused by the heat of the fire. Firefighters statements that shutting off the high pressure cock stopped the flow of gas indicate that this damage may have resulted from latent heat after the fire was put out. This also indicates that the transition fitting did not fail prior to the incident.
- The high pressure cock did not fail, as indicated by the firefighter ability to stop the flow of gas by turning this valve to the "off" position.
- Differential melting of meters revealed that the source of the fire was at or very near the vertical standpipe assembly side of the gas equipment.
- Apparent heat damage on the upstream corner of the regulator mounting pad (facing down in service) indicates that the fire source may have been upstream of the regulator. In-situ photographs of the standpipe assembly after the fire revealed a non-plumb alignment of this region of piping, with the assembly bent at the universal joint union. Loss of meter assembly support during the fire would cause this bend, as the nylon gasket is less strong than the steel piping. However, if this joint was misaligned during installation, or shifted later prior to the incident, the resulting stresses on the gasket

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7 The Department incorporates by reference the MMR Report, "Analysis of Jurisdictional Piping and Appurtenances From the 3 Magnolia Way, Peabody, MA, Incident (MMR Project No. 63797)". Copies of this report may be obtained by contacting MMR at 508-835-6262.

would encourage cracking, especially during cold weather.

- The yellow plastic pipe was medium density polyethylene, as intended.
- The black polymer pigtail cover was an aromatic polyester, likely poly(phthalate).
- The universal joint gasket material was Nylon 6, 6-co-6. This is the same material as the exemplar universal joint gasket.

Based on the results, MMR also concluded the following:

- No anomalies in the available gas equipment were revealed by this investigation that could have caused the release of natural gas at 3 Magnolia Way.
- Of the equipment available for investigation, only the universal joint gasket was too damaged to examine.
- The regulator and all four meters were melted in the fire.

VII. FINDINGS AND CONCLUSIONS

A. Findings

1. A two-inch plastic main was laid under Magnolia Way in 2005.
2. A one-inch plastic service line to 3 Magnolia Way was installed in 2005.
3. The structure at 3 Magnolia Way is comprised of four units. The meters servicing those units were installed in 2006.
4. The Peabody Fire Department received an alarm at 1:33 pm. They arrived onsite at 1:40 p.m.
5. The fire at 3 Magnolia Way extended three stories on the exterior of the building into the cockloft area.
6. KeySpan was notified of the fire at 1:47 p.m. They were onsite at 2:10 p.m.
7. The fire department shutoff the gas at the riser at 2:20 p.m.
8. KeySpan shut the curb valve on the service to secure the area at 2:25 p.m.
9. KeySpan notified the Division of the fire at 3 Magnolia Way, Peabody at 3:57 p.m.
10. Approximately 15 feet from the gas facilities was a Comcast Cable vault and two air-conditioning units. The vault suffered fire damage.
11. KeySpan pressure test the portion of the service line from the curb valve to the service riser valve. The service line did not hold the 10 psig pressure test. There was leakage on the service riser valve and the insulating fitting above the

valve.

12. KeySpan removed the service riser from the service line and tested the service from the building to the curb valve. The pressure test held at 62 psig for 23 minutes.
13. KeySpan met the odorization requirements of the state and federal pipeline safety regulations.
14. KeySpan did not perform any maintenance or repair work on the main and service at 3 Magnolia Way.
15. There were no service calls to the four accounts at 3 Magnolia Way, Peabody
16. KeySpan conducted a walking survey of its mains and services on Magnolia Way the week of August 25, 2006.
17. After the Incident, KeySpan conducted a leak survey of the main and service to 3 Magnolia Way and no leaks were detected

B. Conclusions

1. The analysis in the MMR report was based upon substantial evidence and the report conclusions are reasonable.
2. MMR concludes that the source of fire may have been upstream of the regulator, but it was at or very near to the vertical standpipe assembly side of the gas equipment.
3. The MMR report stated that there were no anomalies in the available gas equipment that could have caused the release of natural gas at 3 Magnolia Way.
4. The breach in the transition fitting on the service line may have resulted from latent heat after the fire was put out.
5. MMR determined that the high pressure cock on the service line did not fail.

Exhibits

1. United States Department of Transportation Incident Report dated April 6, 2007
2. Peabody Fire Department Report
3. KeySpan Post Incident Preliminary Report (March 15, 2007)
4. Installation Records for the main and services near 3 Magnolia Way
5. Pressure in main at time of incident
6. Accident Investigation Memo from Paul Grieco - March 15, 2007
   Photos: 3 Magnolia Way - Fire Damage
7. Photos: Service Riser, Regulator and Four Meters
8. Photo: Gas Service Curb Valve
9. Photos: Damage to Service Riser
10. Photo: Melted Tracer Wire
11. Photo: Bubbled Section of the Service Riser
12: Photo: Underground Facilities
13. Evidence and Custody Log
14. Odorant levels near 3 Magnolia Way on or after March 8, 2007
15. Main maintenance history
16. Service calls to 3 Magnolia Way
17. Leakage Survey results before March 8, 2007
18. Leakage Survey results after March 8, 2007

EXHIBIT 1

United States Department of Transportation Incident Report
dated April 6, 2007

EXHIBIT 1

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: Counsel

IR-PL-1

Q. Provide a copy of the incident reporting form that KeySpan submitted to the U. S. Department of Transportation.

A. Attached please find a copy of the incident reporting forms filed with the U.S Department of Transportation. (Exhibit 1)

KEYSPAN ENERGY

KEYSPAN
Legal Department
52 Second Avenue, 4th Fl.
Waltham, MA 02451
Facsimile (781) 290-4965

FAX

FROM: Thomas R. Teehan DATE: April 6, 2007 Phone: 781-466-5137 NUMBER OF PAGES TRANSMITTED INCLUDING COVER SHEET: 4 If you did not receive the indicated number of pages, or if any pages are illegible, please call (781) 466-5135.	CONFIDENTIALITY NOTICE This facsimile transmission and the accompanying documents contain legally privileged confidential information. The information is intended only for the use of the recipient named below. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or exploitation of or the taking of any action in, reliance on, the contents of this facsimile is strictly prohibited. If you have received this facsimile in error, please notify us immediately by telephone to arrange for return of the original documents to us at our expense.

TO: Jefferson Tancil

COMPANY: Office of Pipeline Safety

FAX #: 202-366-4566

MESSAGE:

Attached is Incident Report – Gas Distribution System regarding Peabody, MA.

FACSIMILE TRANSMITTAL SHEET

TRANSACTION REPORT

P. 01

APR-06-2007 FRI 11:08 AM

DATE START	RECEIVER	TX TIME	PAGES	TYPE	NOTE	M#	DF
APR-06 11:07 AM	12023664566	1'36"	4	SEND	OK	330	

TOTAL : 1M 36S PAGES: 4

KEYSPAN ENERGY

KEYSPAN
Legal Department
52 Second Avenue, 4th Fl.
Waltham, MA 02451
Facsimile (781) 290-4965

FAX

FROM: Thomas R. Teehan

DATE: April 6, 2007

Phone: 781-466-5137

NUMBER OF PAGES TRANSMITTED INCLUDING COVER SHEET: 4

If you did not receive the indicated number of pages, or if any pages are illegible, please call (781) 466-5135.

TO: Jefferson Tancil

NOTICE: This report is required by 49 CFR Part 191. Failure to report can result in a civil penalty not to exceed $100,000 for each violation for each day the violation continues up to a maximum of $1,000,000 for any related series of violations as provided in 49 USC 60122.

Form Approved OMB No. 2137-0522

U.S. Department of Transportation
Pipeline and Hazardous Materials Safety Administration

INCIDENT REPORT - GAS DISTRIBUTION SYSTEM

Report Date _____
No. _____ (DOT Use Only)

INSTRUCTIONS

Important: *Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the Office Of Pipeline Safety Web Page at* http://ops.dot.gov.

PART A – GENERAL REPORT INFORMATION

Check: **X Original Report** ☐ **Supplemental Report** ☐ **Final Report**

1. Operator Name and Address

a. Operator's 5-digit Identification Number / 1 / 6 / 4 / 0 / /

b. If Operator does not own the pipeline, enter Owner's 5-digit Identification Number / / / / / /

c. Name of Operator Boston Gas Company d/b/a KeySpan Energy Delivery New England

d. Operator street address 52 Second Avenue

e. Operator address Waltham, Middlesex County, MA 02451
City, County or Parish, State and Zip Code

2. Time and date of the incident

/ 1 / 3 / 4 / 7 / hr. / 0 / 3 / month / 0 / 8 / day / 0 / 7 year

3. Incident Location

a. Building 3, Units 325, 326, 335, and 336, Magnolia Way
Street or nearest street or road

b. Peabody
City and County or Parish

c. Massachusetts
State and Zip Code

d. Latitude: / / / / / / Longitude: / / / / / /
(if not available, see instructions for how to provide specific location)

e. Class location description
O Class 1 O Class 2 X Class 3 Class 4

f. Incident on Federal Land O Yes X No

4. Type of leak or rupture

O Leak: O Pinhole O Connection Failure *(complete sec. F5)*

O Puncture, diameter or cross section *(inches)*____

O Rupture (if applicable):

O Circumferential – Separation

O Longitudinal

- Tear/Crack, length *(inches)* _____

- Propagation Length, total, both sides *(feet)* _____

O N/A

X Other: At the site of a building fire, meters and regulators were found melted. Evidence of burn damage was also observed on the above-ground riser valve and insulating union and on the below ground riser sweep.

5. Consequences *(check and complete all that apply)*

a. Fatality Total number of people: / / / /

Employees: / / / / *General Public:* / / / /

Non-employee Contractors: / / / /

b. ☐ Injury requiring inpatient hospitalization

Total number of people: / / / /

Employees: / / / / *General Public:* / / / /

Non-employee Contractors: / / / /

c. X Property damage/loss *(estimated)* Total in excess of $100,000

Gas loss $_____ Operator damage $_____

Public/private property damage $_____

d. ☐ Gas ignited O Explosion O No Explosion

e. Gas did not ignite O Explosion O No Explosion

f. ☐ Evacuation *(general public only)* / / / / / people

Evacuation Reason:

O Unknown

O Emergency worker or public official ordered, precautionary

O Threat to the public

O Company policy

6. Elapsed time until area was made safe:

/ / / hr. / 2 / 6 / min.

7. Telephone Report

/ 8 / 2 / 8 / 6 / 4 NRC Report Number / 0 / 3 / month / 0 / 9 / day / 0 / 7 / year

8. a. Estimated pressure at point and time of incident:

55 *PSIG*

b. Max. allowable operating pressure *(MAOP):* *60 PSIG*

c. MAOP established by:

X Test Pressure 90 psig

X 49 CFR § 192. 619 (a)(3)

PART B – PREPARER AND AUTHORIZED SIGNATURE

Thomas R. Teehan, Snr Counsel
(type or print) Preparer's Name and Title

(781) 466-5137
Area Code and Telephone Number

TTeehan@keyspanenergy.com
Preparer's E-mail Address

781-290-4965
Area Code and Facsimile Number

Authorized Signature

Thomas Teehan Snr Counsel
(type or print) Name and Title

4/6/07
Date

781-466-5137
Area Code and Telephone Number

PART C – ORIGIN OF THE INCIDENT

1. Incident occurred on
   - O Main
   - O Service
   - O Pressure Limiting and Regulating Facility
   - O Meter Set
   - O Other: __
2. Failure occurred on
   - O Body of Pipe
   - O Joint
   - O Other: _____
   - O Pipe Seam
   - O Component
3. Material involved *(pipe, fitting, or other component)*
   - O Steel
   - O Cast/Wrought Iron
   - O Polyethelene Plastic (complete all items that apply in a-c)
   - O Other Plastic (complete all items that apply in a-c)
     Plastic failure was: ☐ a.ductile ☐ b.brittle ☐ c.joint failure
   - O Other material: _____
4. Year the pipe or component which failed was installed: /__/__/__/__/

PART D – MATERIAL SPECIFICATION (if applicable)

1. Nominal pipe size *(NPS)* /__/__/__/__/ in.
2. Wall thickness /__/__/__/__/ in.
3. Specification _____ SMYS /__/__/__/__/__/
4. Seam type _____
5. Valve type _____
6. Pipe or valve manufactured by _____ in year /__/__/__/__/

PART E – ENVIRONMENT

1. Area of incident
   - O Under pavement
   - X Under ground
   - Inside/under building
   - O In open ditch
   - X Above ground
   - O Under water
   - O Other: _____
2. Depth of cover: _____ inches

PART F – APPARENT CAUSE

Important: There are 25 numbered causes in this section. Check the box to the left of the primary cause of the incident. Check one circle in each of the supplemental items to the right of or below the cause you indicate. See the instructions for this form for guidance.

F1 – CORROSION

If either F1 (1) External Corrosion, or F1 (2) Internal Corrosion is checked, complete all subparts a – e.

1. ☐ External Corrosion
2. ☐ Internal Corrosion

a. Pipe Coating
- O Bare
- O Coated
- O Unknown

b. Visual Examination
- O Localized Pitting
- O General Corrosion
- O Other: _____

c. Cause of Corrosion
- O Galvanic
- O Stray Current
- O Improper Cathodic Protection
- O Microbiological
- O Other: _____

d. Was corroded part of pipeline considered to be under cathodic protection prior to discovering incident?
O No O Yes O Unknown Year Protection Started: /__/__/__/__/

e. Was pipe previously damaged in the area of corrosion?
O No O Yes O Unknown How long prior to incident: /__/__/__/ years /__/__/ month

F2 – NATURAL FORCES

3. ☐ Earth Movement ⇒ O Earthquake O Subsidence O Landslide O Other: _____
4. ☐ Lightning
5. ☐ Heavy Rains/Floods ⇒ O Washouts O Flotation O Mudslide O Scouring O Other: _____
6. ☐ Temperature ⇒ O Thermal stress O Frost heave O Frozen components O Other: _____
7. ☐ High Winds

F3 – EXCAVATION

8. ☐ Operator Excavation Damage *(including their contractors)* / Not Third Party
9. ☐ Third Party Excavation Damage *(complete a-d)*
   a. Excavator group
      O General Public O Government O Excavator other than Operator/subcontractor
   b. Type: O Road Work O Pipeline O Water O Electric O Sewer O Phone/Cable/Fiber O Landowner O Railroad
      O Building Construction O Other: _____
   c. Did operator get prior notification of excavation activity?
      O No O Yes: Date received: /__/__/ mo. /__/__/ day /__/__/ yr.
      Notification received from: O One Call System O Excavator O General Contractor O Landowner
   d. Was pipeline marked?
      O No O Yes *(If Yes, check applicable items i – iv)*
      i. Temporary markings: O Flags O Stakes O Paint
      ii. Permanent markings: O Yes O No
      iii. Marks were *(check one)* O Accurate O Not Accurate
      iv. Were marks made within required time? O Yes O No

F4 – OTHER OUTSIDE FORCE DAMAGE

10. ☐ Fire/Explosion as primary cause of failure ⇒ Fire/Explosion cause: O Man made O Natural *Describe in Part G*
11. ☐ Car, truck or other vehicle not relating to excavation activity damaging pipe
12. ☐ Rupture of Previously Damaged Pipe
13. ☐ Vandalism

F5 – MATERIAL OR WELDS

Material

14. ☐ Body of Pipe ⇒ O Dent O Gouge O Wrinkle Bend O Arc Burn O Other: _____
15. ☐ Component ⇒ O Valve O Fitting O Vessel O Extruded Outlet O Other: _____
16. ☐ Joint ⇒ O Gasket O O-Ring O Threads O Fusion O Other: _____

Weld

17. ☐ Butt ⇒ O Pipe O Fabrication O Other: _____
18. ☐ Fillet ⇒ O Branch O Hot Tap O Fitting O Repair Sleeve O Other: _____
19. ☐ Pipe Seam ⇒ O LF ERW O DSAW O nless O Flash Weld O Other: _____
O HF ERW O SAW O Spiral

*Complete a-f if you indicate **any** cause in part F5.*

a. Type of failure:

☐ Construction Defect ⇒ O Poor Workmanship O Procedure not followed O Poor Construction Procedures

☐ Material Defect

b. Was failure due to pipe damage sustained in transportation to the construction or fabrication site? O Yes O No

c. Was part which leaked pressure tested before incident occurred? O Yes, *complete d-f, **if known*** O No

d. Date of test: / / / mo. / / / day / / / yr.

e. Time held at test pressure: / / / hr.

f. Estimated test pressure at point of incident: _____ *PSIG*

F6 – EQUIPMENT OR OPERATIONS

20. ☐ Malfunction of Control/Relief Equipment ⇒ O Valve O Instrumentation O Pressure Regulator O Other: _____
21. ☐ Threads Stripped, Broken Pipe Coupling ⇒ O Nipples O Valve Threads O Mechanical Couplings O Other: _____
22. ☐ Leaking Seals

23. ☐ Incorrect Operation

a. Type: O Inadequate Procedures O Inadequate Safety Practices O Failure to Follow Procedures O Other: _____

b. Number of employees involved in incident who failed post-incident drug test: / / / / Alcohol test: / / / /

c. Was person involved in incident qualified per OQ rule? O Yes O No d. Hours on duty for person involved: / / /

F7 – OTHER

24. Miscellaneous, *describe:* _____

25. X Unknown

O Investigation Complete X Still Under Investigation *(submit a supplemental report when investigation is complete)*

PART G – NARRATIVE DESCRIPTION OF FACTORS CONTRIBUTING TO THE EVENT

(Attach additioanl sheets as necessary)

At 1347 KeySpan received a call from the Peabody Fire Department to shut off gas to 19 Dearborn Road, Peabody, MA due to a working fire. Dispatch was able to determined the correct address to be on Magnolia Way, and a PFR tech was dispatched at 1354, arriving at approximately 1410. Fire Department personnel shut off gas at the riser at approximately 1420. The PFR tech shut off the service valve in the street. The Peabody Fire Department, Massachusetts Dept. of Telecommunications and Energy (DTE), and State Fire Marshal personnel conducted an onsite investigation. Units 325, 326, 335, and 336 at the building were fed by a one-inch plastic service to four outside meters through a two-inch manifold. The meters and regulator were melted. Evidence of burn damage was also observed on the above-ground riser, valve and insulating union and on the below-ground riser sweep. Under the direction of the DTE and fire officials, subsequent pressure testing from the service valve to the riser valve revealed leakage at the riser valve possibly from the fire. Approximately 35 feet of underground service line was pressure tested from the service valve to approximately five feet from the riser valve, and it held. The remaining five feet of underground service to the riser valve, the regulator, the above-ground riser, and the meter manifold were removed from the site by the Fire Marshal. Per DTE request, the removed equipment will be examined and tested.

KEYSPAN
Energy Delivery

KeySpan Energy Delivery
52 Second Avenue
Waltham, MA 02451
Tel 781 466-5137
Fax 781 290-4965
E-mail tteehan@keyspanenergy.com

Via Federal Express

Thomas R. Teehan
Senior Counsel

April 24, 2007

Angela Dow
Office of Pipeline Safety
Information Resource Manager
DPS-13
407th Street, S.W.
Washington, DC 20590

Re: Magnolia Way, Peabody

Dear Ms. Dow:

Per your request, I have enclosed a supplemental incident report regarding the above-captioned matter.

Please note that I had tried to fax this to you for (2) days unsuccessfully at fax number 202-366-4566.

Thank you.

Very truly yours,

Thomas R. Teehan

Thomas R. Teehan

TRT/dmo
Enclosure

NOTICE: This report is required by 49 CFR Part 191. Failure to report can result in a civil penalty not to exceed $100,000 for each violation for each day the violation continues up to a maximum of $1,000,000 for any related series of violations as provided in 49 USC 60122. Form Approved OMB No. 2137-0522

U.S. Department of Transportation
Pipeline and Hazardous Materials Safety Administration

INCIDENT REPORT - GAS DISTRIBUTION SYSTEM

Report Date / No. (DOT Use Only)

INSTRUCTIONS

Important: *Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the Office Of Pipeline Safety Web Page at* http://ops.dot.gov.

PART A - GENERAL REPORT INFORMATION

Check: **Original Report** **X Supplemental Report** ☐ **Final Report**

1. Operator Name and Address

a. Operator's 5-digit Identification Number / 1 / 6 / 4 / 0 / /

b. If Operator does not own the pipeline, enter Owner's 5-digit Identification Number / / / / / / /

c. Name of Operator Boston Gas Company d/b/a KeySpan Energy Delivery New England

d. Operator street address 52 Second Avenue

e. Operator address Waltham, Middlesex County, MA 02451
City, County or Parish, State and Zip Code

2. Time and date of the incident

/ 1 / 3 / 4 / 7 / (hr.) / 0 / 3 / (month) / 0 / 8 / (day) / 0 / 7 (year)

3. Incident Location

a. Building 3, Units 325, 326, 335, and 336, Magnolia Way
Street or nearest street or road

b. Peabody
City and County or Parish

c. Massachusetts
State and Zip Code

d. Latitude: / / / / / / Longitude: / / / / / / /
(if not available, see instructions for how to provide specific location)

e. Class location description
O Class 1 O Class 2 X Class 3 Class 4

f. Incident on Federal Land O Yes X No

4. Type of leak or rupture

O Leak: O Pinhole O Connection Failure *(complete sec. F5)*

O Puncture, diameter or cross section *(inches)*____

O Rupture (if applicable):

O Circumferential – Separation

O Longitudinal

- Tear/Crack, length *(inches)* _____

- Propagation Length, total, both sides *(feet)* _____

O N/A

X Other: At the site of a building fire, meters and regulators were found melted. Evidence of burn damage was also observed on the above-ground riser valve and insulating union and on the below ground riser sweep.

5. Consequences *(check and complete all that apply)*

a. Fatality Total number of people: / / / /

Employees: / / / / *General Public:* / / / /

Non-employee Contractors: / / / /

b. ☐ Injury requiring inpatient hospitalization

Total number of people: / / / /

Employees: / / / / *General Public:* / / / /

Non-employee Contractors: / / / /

c. X Property damage/loss *(estimated)* Total in excess of $100,000

Gas loss $0.00 Operator damage $0.00
Public/private property damage $ in excess of $100,000

d. ☐ Gas ignited O Explosion O No Explosion

e. Gas did not ignite O Explosion O No Explosion

f. ☐ Evacuation *(general public only)* / / / / / people

Evacuation Reason:
O Unknown
O Emergency worker or public official ordered, precautionary
O Threat to the public
O Company policy

6. Elapsed time until area was made safe:

/ / / hr. / 2 / 6 / min.

7. Telephone Report

/ 8 / 2 / 8 / 6 / 4 (NRC Report Number) / 0 / 3 / (month) / 0 / 9 / (day) / 0 / 7 / (year)

8. a. Estimated pressure at point and time of incident:

55 *PSIG*

b. Max. allowable operating pressure *(MAOP): 60 PSIG*

c. MAOP established by:
X Test Pressure 90 psig
X 49 CFR § 192. 619 (a)(3)

PART B - PREPARER AND AUTHORIZED SIGNATURE

Thomas R. Teehan, Snr Counsel
(type or print) Preparer's Name and Title

(781) 466-5137
Area Code and Telephone Number

TTeehan@keyspanenergy.com
Preparer's E-mail Address

(781) 290-4965
Area Code and Facsimile Number

T R Teehan Snr Counsel
Authorized Signature (type or print) Name and Title

4/23/07 (781) 466-5137
Date Area Code and Telephone Number

F5 – MATERIAL OR WELDS

Material

14. ☐ Body of Pipe ⇒ O Dent O Gouge O Wrinkle Bend O Arc Burn O Other:

15. ☐ Component ⇒ O Valve O Fitting O Vessel O Extruded Outlet O Other:

16. ☐ Joint ⇒ O Gasket O O-Ring O Threads O Fusion O Other:

Weld

17. ☐ Butt ⇒ O Pipe O Fabrication O Other:

18. ☐ Fillet ⇒ O Branch O Hot Tap O Fitting O Repair Sleeve O Other:

19. ☐ Pipe Seam ⇒ O LF ERW O DSAW O Seamless O Flash Weld
O HF ERW O SAW O Spiral O Other:

*Complete a-f if you indicate **any** cause in part F5.*

a. Type of failure:

☐ Construction Defect ⇒ O Poor Workmanship O Procedure not followed O Poor Construction Procedures

☐ Material Defect

b. Was failure due to pipe damage sustained in transportation to the construction or fabrication site? O Yes O No

c. Was part which leaked pressure tested before incident occurred? O Yes, *complete d-f, if known* O No

d. Date of test: /__/__/ mo. /__/__/ day /__/__/__/ yr.

e. Time held at test pressure: /__/__/ hr.

f. Estimated test pressure at point of incident: ______________ *PSIG*

F6 – EQUIPMENT OR OPERATIONS

20. ☐ Malfunction of Control/Relief Equipment ⇒ O Valve O Instrumentation O Pressure Regulator O Other:

21. ☐ Threads Stripped, Broken Pipe Coupling ⇒ O Nipples O Valve Threads O Mechanical Couplings O Other:

22. ☐ Leaking Seals

23. ☐ Incorrect Operation

a. Type: O Inadequate Procedures O Inadequate Safety Practices O Failure to Follow Procedures O Other:

b. Number of employees involved in incident who failed post-incident drug test: /__/__/__/ Alcohol test: /__/__/__/

c. Was person involved in incident qualified per OQ rule? O Yes O No d. Hours on duty for person involved: /__/__/

F7 – OTHER

24. Miscellaneous, *describe:*

25. X Unknown

O Investigation Complete X Still Under Investigation *(submit a supplemental report when investigation is complete)*

PART G – NARRATIVE DESCRIPTION OF FACTORS CONTRIBUTING TO THE EVENT *(Attach additioanl sheets as necessary)*

At 1342 KeySpan received a call from the Peabody Fire Department to shut off gas to 19 Dearborn Road, Peabody, MA due to a working fire. Dispatch was able to determine the correct address to be [illegible] Magnolia Way, and a PTR tech was dispatched at 1354, arriving at approximately 1410. Fire Department personnel shut off gas at the riser at approximately 1420. The PTR tech shut off the service valve in the street. The Peabody Fire Department, Massachusetts Dept. of Telecommunications and Energy (DTE), and State Fire Marshal personnel conducted an onsite investigation. Units 325, 326, 335, and 336 at the building were fed by a one-inch plastic service to four outside meters through a two-inch manifold. The meters and regulator were melted. Evidence of burn damage was also observed on the above ground riser valve and insulating union and on the below ground riser sweep. Under the direction of the DTE and fire officials, subsequent pressure testing from the service valve to the riser valve revealed leakage at the riser valve possibly from the fire. Approximately 35 feet of underground service line was pressure tested from the service valve to approximately five feet from the riser valve and it held. The remaining five feet of underground service to the riser valve, the regulator, the above ground riser, and the meter manifold were removed from the site by the Fire Marshal. Per DTE request, the removed equipment will be examined and tested.

EXHIBIT 2

Peabody Fire Department Report

A

FDID *	State *	MM Incident Date *	DD Incident Date *	YYYY Incident Date *	Station	Incident Number *	Exposure *
09229	MA	03	08	2007		07-0001320	000

☐ Delete ☐ Change ☐ No Activity

NFIRS -1 Basic

B Location *

☐ Check this box to Indicate that the address for this incident is provided on the Wildland Fire Module In Section B "Alternative Location Specification". Use only for Wildland fires.

Census Tract ____ - ____

☒ Street address
☐ Intersection
☐ In front of
☐ Rear of
☐ Adjacent to
☐ Directions

Number/Milepost	Prefix	Street or Highway	Street Type	Suffix
3		MAGNOLIA WAY		

Apt./Suite/Room	City	State	Zip Code
	PEABODY	MA	01960 -

Cross street or directions, as applicable

C Incident Type *

111 Building fire

Incident Type

D Aid Given or Received *

1 ☒ Mutual aid received
2 ☐ Automatic aid recv.
3 ☐ Mutual aid given
4 ☐ Automatic aid given
5 ☐ Other aid given
N ☐ None

Their FDID: 09164 Their State: MA

Their Incident Number: 07220

E1 Date & Times

Midnight is 0000

Check boxes if dates are the same as Alarm Date.

	Month	Day	Year	Hr Min Sec
ALARM always required				
Alarm *	03	08	2007	13:33:12
ARRIVAL required, unless canceled or did not arrive				
☐ Arrival *	03	08	2007	13:40:01
CONTROLLED Optional, Except for wildland fires				
☐ Controlled				
LAST UNIT CLEARED, required except for wildland fires				
☐ Last Unit Cleared	03	08	2007	17:59:00

E2 Shift & Alarms

Local Option

Shift or Platoon	Alarms	District
2	01	

E3 Special Studies

Local Option

Special Study ID#	Special Study Value

F Actions Taken *

20 Search & rescue, Other — Primary Action Taken (1)

11 Extinguishment by fire — Additional Action Taken (2)

12 Salvage & overhaul — Additional Action Taken (3)

G1 Resources *

☐ Check this box and skip this section if an Apparatus or Personnel form is used.

	Apparatus	Personnel
Suppression		0001
EMS		
Other	0009	0011

☐ Check box if resource counts include aid received resources.

G2 Estimated Dollar Losses & Values

LOSSES: Required for all fires if known. Optional for non fires. None

Property $ 001 , 000 , 000 ☐
Contents $, 200 , 000 ☐

PRE-INCIDENT VALUE: Optional

Property $ 008 , 000 , 000 ☐
Contents $, 000 , 000 ☐

Completed Modules

☒ Fire-2
☒ Structure-3
☐ Civil Fire Cas.-4
☐ Fire Serv. Cas.-5
☐ EMS-6
☐ HazMat-7
☐ Wildland Fire-8
☒ Apparatus-9
☒ Personnel-10
☐ Arson-11

H1 * Casualties ☒ None

	Deaths	Injuries
Fire Service		
Civilian		

H2 Detector

Required for Confined Fires.

1 ☐ Detector alerted occupants
2 ☐ Detector did not alert them
U ☐ Unknown

H3 Hazardous Materials Release

N ☐ None
1 ☐ Natural Gas: slow leak, no evacuation or HazMat actions
2 ☐ Propane gas: <21 lb. tank (as in home BBQ grill)
3 ☐ Gasoline: vehicle fuel tank or portable container
4 ☐ Kerosene: fuel burning equipment or portable storage
5 ☐ Diesel fuel/fuel oil: vehicle fuel tank or portable
6 ☐ Household solvents: home/office spill, cleanup only
7 ☐ Motor oil: from engine or portable container
8 ☐ Paint: from paint cans totaling < 55 gallons
0 ☐ Other: Special HazMat actions required or spill > 55gal.. Please complete the HazMat form

I Mixed Use Property

NN ☐ Not Mixed
10 ☐ Assembly use
20 ☐ Education use
33 ☐ Medical use
40 ☐ Residential use
51 ☐ Row of stores
53 ☐ Enclosed mall
58 ☐ Bus. & Residential
59 ☐ Office use
60 ☐ Industrial use
63 ☐ Military use
65 ☐ Farm use
00 ☐ Other mixed use

J Property Use * Structures

131 ☐ Church, place of worship
161 ☐ Restaurant or cafeteria
162 ☐ Bar/Tavern or nightclub
213 ☐ Elementary school or kindergarten
215 ☐ High school or junior high
241 ☐ College, adult education
311 ☐ Care facility for the aged
331 ☐ Hospital
341 ☐ Clinic, clinic type infirmary
342 ☐ Doctor/dentist office
361 ☐ Prison or jail, not juvenile
419 ☐ 1-or 2-family dwelling
429 ☒ Multi-family dwelling
439 ☐ Rooming/boarding house
449 ☐ Commercial hotel or motel
459 ☐ Residential, board and care
464 ☐ Dormitory/barracks
519 ☐ Food and beverage sales
539 ☐ Household goods, sales, repairs
579 ☐ Motor vehicle/boat sales/repair
571 ☐ Gas or service station
599 ☐ Business office
615 ☐ Electric generating plant
629 ☐ Laboratory/science lab
700 ☐ Manufacturing plant
819 ☐ Livestock/poultry storage (barn)
882 ☐ Non-residential parking garage
891 ☐ Warehouse

Outside

124 ☐ Playground or park
655 ☐ Crops or orchard
669 ☐ Forest (timberland)
807 ☐ Outdoor storage area
919 ☐ Dump or sanitary landfill
931 ☐ Open land or field
936 ☐ Vacant lot
938 ☐ Graded/care for plot of land
946 ☐ Lake, river, stream
951 ☐ Railroad right of way
960 ☐ Other street
961 ☐ Highway/divided highway
962 ☐ Residential street/driveway
981 ☐ Construction site
984 ☐ Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:

Property Use 429

Multifamily dwelling

NFIRS-1 Revision 03/11/99

K1 Person/Entity Involved

Local Option

Business name (if applicable) | Area Code | Phone Number

☐ Check This Box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs. | First Name | MI | Last Name | Suffix

Number | Prefix | Street or Highway | Street Type | Suffix

Post Office Box | Apt./Suite/Room | City

State | Zip Code

☐ More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary

K2 Owner

☐ Same as person involved? Then check this box and skip The rest of this section.

Local Option

Business name (if Applicable) | Area Code | Phone Number

☐ Check this box if same address as incident location. Then skip the three duplicate address lines.

Mr.,Ms., Mrs. | First Name | MI | Last Name | Suffix

Number | Prefix | Street or Highway | Street Type | Suffix

Post Office Box | Apt./Suite/Room | City

State | Zip Code

L Remarks

Local Option

```
rransom ; 2007/03/08 13:40:01 - CAR_2 AT EVENT MANNING IS 1
rransom ; 2007/03/08 13:40:16 - E3 AT EVENT MANNING IS 2
rransom ; 2007/03/08 13:43:35 - T1 AT EVENT MANNING IS 1
rransom ; 2007/03/08 13:43:42 - E5 AT EVENT MANNING IS 3
rransom ; 2007/03/08 13:45:36 - E1 AT EVENT MANNING IS 4
rransom ; 2007/03/08 13:45:40 - L1 AT EVENT MANNING IS 3
rransom ; 2007/03/08 13:48:49 - E7 AT EVENT MANNING IS 4
ransom ; 2007/03/08 13:49:28 - CAR_1 AT EVENT MANNING IS 1
rransom ; 2007/03/08 13:51:21 - _LFD-E AT EVENT MANNING IS 4
rransom ; 2007/03/08 13:58:54 - E4 AT EVENT MANNING IS 3
rransom ; 2007/03/08 14:05:14 - _LYN-E AT EVENT MANNING IS 3
ddean ; 2007/03/08 14:36:18 - _SAL_E AT EVENT MANNING IS 0

ddean ; 2007/03/08 14:19:30 - GAS COMPANY NOTIFIED
ddean ; 2007/03/08 14:22:51 - ELECTRIC LIGHT NOTIFIED
ddean ; 2007/03/08 14:27:35 - BUILDING INSPECTOR NOTIFIED

interfaces ; 2007/03/08 13:33:12
ALARM SIGNAL: HIGHLANDS (19 MAGNOLIA WAY), 875, MB875
rransom ; 2007/03/08 13:49:43
C-4 STATES FIRE SHOWING ON D SIDE OF BUILDING
ddean ; 2007/03/08 14:19:47
GAS SHUT DOWN BY GAS COMPANY
ddean ; 2007/03/08 14:20:09
C-4 STATES EXTERIOR FIRE EXTINGUISHED
```

L Authorization

Officer in charge ID	Signature	Position or rank	Assignment	Month	Day	Year
6675	Nelson, Richard P	DC	Car 2	03	10	2007

Check Box if same as Officer charge.	Member making report ID	Signature	Position or rank	Assignment	Month	Day	Year
☐	2107	Desmond, Thomas M	FF	E4	03	08	2007

FDID *	State *	MM Incident Date *	DD Incident Date *	YYYY Incident Date *	Station	Incident Number *	Exposure *	Complete Narrative
09229	MA	3	8	2007		07-0001320	000	

Narrative:

rransom ; 2007/03/08 13:40:01 - CAR_2 AT EVENT MANNING IS 1
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GAS SHUT DOWN BY GAS COMPANY
ddean ; 2007/03/08 14:20:09
C-4 STATES EXTERIOR FIRE EXTINGUISHED
ddean ; 2007/03/08 14:21:12
C-4 OVERHAULING D SIDE
ddean ; 2007/03/08 14:55:30
ALL COMPANIES DOING OVERHAUL, ENGINE 4 DOING SECONDARY SEARCH
ddean ; 2007/03/08 15:06:54
C-4 STATES SECONDARY SEARCH ALL CLEAR.

Peabody Fire receives MB 875 for the Highland Apts. at Dearborn Road with E-1-3 and L-1 responding with C-4. Enroute several calls reporting possible explosion and reports of a working fire from route 128 by vehicle passer byes. C-4 on scene finds three story wood frame attached Apt. building on fire on the D side exterior of the building. The fire is two fold with the natural gas main to the building on fire at the base of the building and extension up three levels of the exterior and entering the cockloft area on the D side. E-7 (fourth pump called to the scene initially named RIC team later changed to advance line to Division 2 . Fifth pump E-4 to scene named RIC team after activating E-7. E-3 was first pump in located past the A/D corner tagged the hydrant on the A/D corner found inoperable (frozen) . L-1 set up on the A/D corner behind E-3. E-5 on arrival assisted laying LDH into second hydrant appox. 500 ft before fire building to E-3 pump truck.

First tactical assignment was primary search of building L-1 Division 3, E-1 Division 2 and 1 getting all clear report after forcing entry to several apts. E-3 and L-1 assigned to attic Division with 1 3/4 inch line to cut fire off in the D side cockloft. E-7 has 1 3/4 line to Division 2 for fire attack. E-5 stretches 2 1/2 line as a backup to attic Division. E-1 assists other crews in the attic division relieving E-5.

Keyspan Energy was notified to come to the scene shortly after initial size up. Approx . fifteen minutes into the incident after second call to Keyspan initial tactic to have Gas company shut the flow of gas off at the street C-4 consulted with Safety Officer Capt. MaGuire about secondary plan to stop flow using one company with fog pattern shutting down flow at petcock. Shortly after Keyspan arrival E-4 three man crew used fog pattern and tool to shut gas down at petcock stopping flow and extinguishing the fire. E-4 wet down Dside of the building and would later conduct secondary search all clear as its last tactical activity. The fire was cut off in the attic and extinguished by several companies with the truss structure weakened on Division 3 by fire and heavy water load.

The fire building was a sprinkled building on division 1-3 and no sprinklers present in

FDID *	State *	MM Incident Date *	DD	YYYY	Station	Incident Number *	Exposure *	Complete Narrative
09229	MA	3	8	2007		07-0001320	000	

Narrative:

the attic. The sprinkler system was supported by E-3 with one head reported operating cn division 2 . Supporting of the sprinkler system for this incident was not effective from extinguishing standpoint due to the main body of the fire on the exterior or in the cockloft. Fire Alarm was active on arrival. The Fire is currently under investigation through the State Fire Marshalls Office and Peabody Fire Dept. Damages Estimated at $1 million .

Resources on scene:

C-1 Chief Steven Pasdon assisted in tactical deployment
K-1 Capt. Sampson Fire Prevention Investigator
K-2 Inspector Joe DiFranco Fire Prevention Investigator
State Fire Marshalls Office Trooper Peter Cummings and Trooper Bossy
Numerous Keyspan Reps.
T-1 Safety Officer Capt. Jeff MaGuire

FDID *	State *	MM Incident Date *	DD Incident Date *	YYYY Incident Date *	Station	Incident Number *	Exposure *	
09229	MA	3	8	2007		07-0001320	000	Complete Narrative

Narrative:

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C-4 OVERHAULING D SIDE
ddean ; 2007/03/08 14:55:30
ALL COMPANIES DOING OVERHAUL, ENGINE 4 DOING SECONDARY SEARCH
ddean ; 2007/03/08 15:06:54
C-4 STATES SECONDARY SEARCH ALL CLEAR.

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Keyspan Energy was notified to come to the scene shortly after initial size up. Approx . **fifteen** minutes into the incident after second call to Keyspan initial tactic to have Gas company shut the flow of gas off at the street C-4 consulted with Safety Officer Capt. MaGuire about secondary plan to stop flow using one company with fog pattern shutting down flow at petcock. Shortly after Keyspan arrival E-4 three man crew used fog pattern and tool to shut gas down at petcock stopping flow and extinguishing the fire. E-4 wet down Dside of the building and would later conduct secondary search all clear as its last tactical activity. The fire was cut off in the attic and extinguished by several companies with the truss structure weakened on Division 3 by fire and heavy water load.

The fire building was a sprinkled building on division 1-3 and no sprinklers present in the attic. The sprinkler system was supported by E-3 with one head reported operating on Division 2. Supporting of the sprinkler system for this incident was not effective from

A | 09229 (FDID *) | MA (State *) | MM 03 | DD 08 | YYYY 2007 (Incident Date *) | Station | 07-0001320 (Incident Number *) | 000 (Exposure *) | ☐ Delete ☐ Change ☐ No Activity | NFIRS -2 Fire

B Property Details

B1 0042 ☐ Not Residential
Estimated Number of residential living units in building of origin whether or not all units became involved

B2 001 ☐ Buildings not involved
Number of buildings involved

B3 ☐ Acres burned (outside fires) ☒ None ☐ Less than one acre

C On-Site Materials or Products

☒ None

Complete if there were any significant amounts of commercial, industrial, energy or agricultural products or materials on the Property, whether or not they became involved

Enter up to three codes. Check one or more boxes for each code entered.

NNN | None — On-site material (1)
1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service

☐ | ☐ — On-site material (2)
1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service

☐ | ☐ — On-site material (3)
1 ☐ Bulk storage or warehousing
2 ☐ Processing or manufacturing
3 ☐ Packaged goods for sale
4 ☐ Repair or service

D Ignition

D1 76 | Wall surface: exterior — Area of fire origin *

D2 UU | Undetermined — Heat source *

D3 UU | Undetermined — Item first ignited * | 1 ☐ Check Box if fire spread was confined to object of origin

D4 UU | Undetermined — Type of material first ignited | Required only if item first ignited code is 00 or <70

E1 Cause of Ignition

☐ Check box if this is an exposure report. Skip to section G

1 ☐ Intentional
2 ☐ Unintentional
3 ☐ Failure of equipment or heat source
4 ☐ Act of nature
5 ☒ Cause under investigation
U ☐ Cause undetermined after investigation

E2 Factors Contributing To Ignition

☒ None

UU | Undetermined — Factor Contributing To Ignition (1)

☐ | ☐ — Factor Contributing To Ignition (2)

E3 Human Factors Contributing To Ignition

Check all applicable boxes

1 ☐ Asleep ☒ None
2 ☐ Possibly impaired by alcohol or drugs
3 ☐ Unattended person
4 ☐ Possibly mental disabled
5 ☐ Physically Disabled
6 ☐ Multiple persons involved
7 ☐ Age was a factor

Estimated age of person envolved ☐

1 ☐ Male 2 ☐ Female

F1 Equipment Involved In Ignition

☐ None If Equipment was not involved, Skip to Section G

☐ | ☐ — Equipment Involved

Brand ☐

Model ☐

Serial # ☐

Year ☐

F2 Equipment Power

☐ | ☐ — Equipment Power Source

F3 Equipment Portability

1 ☐ Portable
2 ☐ Stationary

Portable equipment normally can be moved by one person, is designed to be use in multiple locations, and requires no tools to install.

G Fire Suppression Factors

Enter up to three codes. ☐ None

723 | Ice — Fire suppression factor (1)

714 | Temperature, low — Fire suppression factor (2)

452 | Hydrants — Fire suppression factor (3)

H1 Mobile Property Involved

☐ None

1 ☐ Not involved in ignition, but burned
2 ☐ Involved in ignition, but did not burn
3 ☐ Involved in ignition and burned

H2 Mobile Property Type & Make

☐ | ☐ — Mobile property type

☐ | ☐ — Mobile property make

☐ — Moblie property model | ☐ — Year

☐ — License Plate Number | ☐ — State | ☐ — VIN Number

Local Use

☐ Pre-Fire Plan Available

Some of the information presented in this report may be based upon reports from other Agencies

☐ Arson report attached
☐ Police report attached
☐ Coroner report attached
☐ Other reports attached

NFIRS-2 Revision 01/19/99

I1 Structure Type *
If fire was in enclosed building or a portable/mobile structure complete the rest of this form

1 [X] Enclosed Building
2 [ ] Portable/mobile structure
[ ] Open structure
[ ] Air supported structure
5 [ ] Tent
6 [ ] Open platform (e.g. piers)
7 [ ] Underground structure (work areas)
8 [ ] Connective structure (e.g. fences)
0 [ ] Other type of structure

I2 Building Status *

1 [ ] Under construction
2 [X] Occupied & operating
3 [ ] Idle, not routinely used
4 [ ] Under major renovation
5 [ ] Vacant and secured
6 [ ] Vacant and unsecured
7 [ ] Being demolished
0 [ ] Other
U [ ] Undetermined

I3 Building Height *
Count the ROOF as part of the highest story

004 Total number of stories at or above grade

[ ] Total number of stories below grade

I4 Main Floor Size *
NFIRS-3 Structure Fire

[ ] , 006 , 000 Total square feet

OR

[ ] , 100 BY [ ] , 060
Lenght in feet Width in feet

J1 Fire Origin *

[ ] Below Grade

001 Story of fire origin

J2 Fire Spread *

1 [ ] Confined to object of origin
2 [ ] Confined to room of origin
3 [ ] Confined to floor of origin
4 [X] Confined to building of origin
5 [ ] Beyond building of origin

J3 Number of Stories Damaged By Flame
Count the ROOF as part of the highest story

[ ] Number of stories w/ minor damage (1 to 24% flame damage)

001 Number of stories w/ significant damage (25 to 49% flame damage)

001 Number of stories w/ heavy damage (50 to 74% flame damage)

[ ] Number of stories w/ extreme damage (75 to 100% flame damage)

K Material Contributing Most To Flame Spread

[ ] Check if no flame spread OR same as material first ignited OR unable to determine — Skip To Section L

K1 12 Exterior wall covering
Item contributing most to flame spread

K2 63 Sawn wood, including
Type of material contributing most of flame spread
Required only if item contributing code is 00 or<70

L1 Presence of Detectors *
(In area of the fire)

N [ ] None Present — Skip to section M
1 [X] Present
U [ ] Undetermined

L2 Detector Type

1 [X] Smoke
2 [ ] Heat
3 [ ] Combination smoke - heat
4 [ ] Sprinkler, water flow detection
5 [ ] More than 1 type present
0 [ ] Other _____
U [ ] Undetermined

L3 Detector Power Supply

1 [ ] Battery only
2 [ ] Hardwire only
3 [ ] Plug in
4 [X] Hardwire with battery
5 [ ] Plug in with battery
6 [ ] Mechanical
7 [ ] Multple detectors & power supplies
0 [ ] Other _____
U [ ] Undetermined

L4 Detector Operation

1 [ ] Fire too small to activate
2 [X] Operated (Complete Section L5)
3 [ ] Failed to Operate (Complete Section L6)
U [ ] Undetermined

L5 Detector Effectiveness
Required if detector operated

1 [X] Alerted Occupants, occupants responded
2 [ ] Occupants failed to respond
3 [ ] There were no occupants
4 [ ] Failed to alert occupants
U [ ] Undetermined

L6 Detector Failure Reason
Required if detector failed to operate

1 [ ] Power failure, shutoff or disconnect
2 [ ] Improper installation or placement
3 [ ] Defective
4 [ ] Lack of maintenance, includes cleaning
5 [ ] Battery missing or disconnected
6 [ ] Battery discharged or dead
0 [ ] Other _____
U [ ] Undetermined

M1 Presence of Automatic Extinguishment System *

N [ ] None Present
1 [X] Present — Complete rest of Section M

M2 Type of Automatic Extinguishment System *
Required if fire was within designed range of AES

1 [X] Wet pipe sprinkler
2 [ ] Dry pipe sprinkler
3 [ ] Other sprinkler system
4 [ ] Dry chemical system
5 [ ] Foam system
6 [ ] Halogen type system
7 [ ] Carbon dioxide (CO_2) system
0 [ ] Other special hazard system
U [ ] Undetermined

M3 Automatic Extinguishment System Operation
Required if fire was within designed range

1 [ ] Operated & effective (Go to M4)
2 [X] Operated & not effective (M4)
3 [ ] Fire too small to activate
4 [ ] Failed to operate (Go to M5)
0 [ ] Other
U [ ] Undetermined

M4 Number of Sprinkler Heads Operating
Required if system operated

001 Number of sprinkler heads operating

M5 Automatic Extinguishment System Failure Reason
Required if system failed

1 [ ] System shut off
2 [ ] Not enough agent discharged
3 [ ] Agent discharged but did not reach fire
4 [ ] Wrong type of system
5 [ ] Fire not in area protected
6 [ ] System components damaged
7 [ ] Lack of maintenance
8 [ ] Manual Intervention
0 [X] Other _____
U [ ] Undetermined

NFIRS-3 Revision 01/19/99

A

FDID *	State *	MM Incident Date *	DD Incident Date *	YYYY Incident Date *	Station	Incident Number *	Exposure *	Delete / Change	NFIRS - 9 Apparatus or Resources
09229	MA	3	8	2007		07-0001320	000	☐ Delete ☐ Change	

B Apparatus or * Resource	Date and Times (Check if same as alarm date)	Month	Day	Year	Hour	Min	Sent [X]	Number of * People	Use (Check ONE box for each apparatus to indicate its main use at the incident.)	Actions Taken
1 ID: Car 1 Type: 92	Dispatch ☐	3	8	2007	13:49		X	1	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:49					
	Clear ☐	3	8	2007	15:20					
2 ID: Car 2 Type: 92	Dispatch ☐	3	8	2007	13:33		X	1	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:40					
	Clear ☐	3	8	2007	17:59					
3 ID: E1 Type: 11	Dispatch ☐	3	8	2007	13:33		X	0	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:45					
	Clear ☐	3	8	2007	15:44					
4 ID: E3 Type: 11	Dispatch ☐	3	8	2007	13:33		X	2	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:40					
	Clear ☐	3	8	2007	17:00					
5 ID: E4 Type: 11	Dispatch ☐	3	8	2007	13:58		X	0	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:58					
	Clear ☐	3	8	2007	15:34					
6 ID: E5 Type: 11	Dispatch ☐	3	8	2007	13:35		X	4	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:43					
	Clear ☐	3	8	2007	15:44					
7 ID: E7 Type: 11	Dispatch ☐	3	8	2007	13:48		X	1	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:48					
	Clear ☐	3	8	2007	15:30					
8 ID: L1 Type: 12	Dispatch ☐	3	8	2007	13:33		X	3	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:45					
	Clear ☐	3	8	2007	15:58					
9 ID: T1 Type: 10	Dispatch ☐	3	8	2007	13:43		X	0	☐ Suppression ☐ EMS ☒ Other	
	Arrival ☐	3	8	2007	13:43					
	Clear ☐	3	8	2007	16:47					

Type of Apparatus or Resources

Ground Fire Suppression
- 11 Engine
- 12 Truck or aerial
- 13 Quint
- 14 Tanker & pumper combination
- 16 Brush truck
- 17 ARF (Aircraft Rescue and Firefighting)
- 10 Ground fire suppression, other

Heavy Ground Equipment
- 21 Dozer or plow
- 22 Tractor
- 24 Tanker or tender
- 20 Heavy equipment, other

Aircraft
- 41 Aircraft: fixed wing tanker
- 42 Helitanker
- 43 Helicopter
- 40 Aircraft, other

Marine Equipment
- 51 Fire boat with pump
- 52 Boat, no pump
- 50 Marine apparatus, other

Support Equipment
- 61 Breathing apparatus support
- 62 Light and air unit
- 60 Support apparatus, other

Medical & Rescue
- 71 Rescue unit
- 72 Urban Search & rescue unit
- 73 High angle rescue unit
- 75 BLS unit
- 76 ALS unit
- 70 Medical and rescue unit,other

More Apparatus? Use Additional Sheets

Other
- 91 Mobile command post
- 92 Chief officer car
- 93 HazMat unit
- 94 Type 1 hand crew
- 95 Type 2 hand crew
- 99 Privately owned vehicle
- 00 Other apparatus/resource

- NN None
- UU Undetermined

NFIRS-9 Revision 11/17/98

EXHIBIT 3

KeySpan Post Incident Preliminary Report (March 15, 2007)

KEYSPAN
Energy Delivery

Date: Thursday, March 15, 2007

To: John Higgins, Director Field Operations – NE Maintain
Doc Kildare, Director Field Operations – NE Service

From: William E. Costigan, Manager Field Operations – North Shore Div.

RE: ***Fire Incident – Highlands at Dearborn, #3 Magnolia Way, Peabody***

PRELIMINARY – PENDING METALURGICAL TEST RESULTS

At 13:47 hrs on Thursday March 8, 2007, KED NE Dispatcher Mark Connolly received a call from the Peabody Fire Department to shut off gas service to #19 Dearborn Rd, Peabody due to a working fire. Serviceperson Steve Mahoney was dispatched at 13:54 hrs and arrived on-site at 14:10 hrs. The Serviceperson immediately reported back that natural gas could have contributed to the fire and requested management personnel be dispatched to the scene. Maintain Supervisor Glen McIntosh, Service Supervisor Scott Crooker, Field Operations Manager Bill Costigan and Senior Investigator John Gatherum all reported to the scene to investigate. Also at the scene were State Fire Marshall Peter Cummings, Massachusetts Department of Telecommunications and Energy Inspector Paul Grieco. Media coverage was also in the area.

Upon arrival, Serviceman Mahoney was shown a location of a shutoff in the general area of the building at was on fire. Unsure if this shut-off was a main or service valve; Serviceman Mahoney requested assistance from his Supervisor and Operations Engineering. Con-currently, Peabody Fire Department personnel shut the gas flow at the riser valve at approximately 14:20 hrs. At approximately 14:25, Serviceman Mahoney shut the service valve to secure the area.

The State Fire Marshall and Local Fire Department personnel denied KED personnel access to the site until approximately 17:30 hrs. When allowed the opportunity to investigate, KED Field Manager Bill Costigan and Supervisor Scott Crooker were the only persons allowed by the State Fire Marshall to view the scene. Upon visual observation, it was determined the units in question were #325, #326, #335 and #336 Building #3 Magnolia Way. These units were fed by a 1" HP (60#) plastic service to four (4) outside meters fed through a 2" manifold. All meters and regulator were melted, thus we were unable to obtain actual meter numbers (Exhibit#1). Meter numbers were obtained by review of meter set records.

KED records show the main and service was installed in October, 2005 by R.J. Devereaux. This development was an E.B.B.O. (excavate and backfill by other) job. All four (4) meters were installed on October 6, 2006. Observations made while uncovering the service to perform the pressure test revealed the service to be approximately two and a half feet (2.5') deep at the service valve and approximately two feet (2') deep at the riser.

The service from the valve to the riser was properly bedded in sand with tracing wire and caution tape installed to Company specifications. The riser and riser sweep were backfilled with gravel material.

KED Service personnel performed leakage survey of the area. This leakage survey was performed after the service valve was shut-off and with the valve still in the 'off' position. Survey results found no leaks. KED Pressure Control personnel performed odorant level checks. Odorant level checks were within acceptable limits. The system pressure was reported by Engineering to be operating at approximately 55# at the time of the incident.

At approximately 18:30 hrs, Mass D.T.E. Inspector Grieco requested KED personnel to report back on site on Friday March 9, 2007 at 08:00 hrs to perform a pressure test on the 1" plastic service.

On Friday, March 9, 2007 at 08:00 hrs KED Service and Maintain personnel, Supervisors McIntosh and Crooker, Legal Investigator Gatherum, Field Operations Manager Bill Costigan and QA/QC Manager Kevin Mahoney reported to assist in the investigation under the observation of the State Fire Marshall's Office, City of Peabody Fire Department and Mass D.T.E. inspectors Paul Grieco, Bill Stevens and Ron Danielson.

At 09:00 hrs, Peabody Fire Department Inspector Joseph DiFranco and the Mass D.T.E. Inspector Paul Grieco requested the KED Maintain Crew excavate and cut-off the 1" plastic service at the service valve. The service was tested at 10# between the service valve and the riser valve (Exhibit #2). The air test failed immediately. Soap testing of the riser valve revealed leakage due to the prior heat endured during the fire. The failure of the riser valve was not unexpected and clearly communicated to the Peabody Fire Investigator Joseph DiFranco and Mass D.T.E. Inspector Paul Grieco prior to the test. It is possible for leakage at the core of the valve body if exposed to high heat (Exhibit#3).

Next, the riser was excavated by hand and cut and capped at the base of the riser sweep. The service was tested between the service valve and an end cap at 62# for approximately 15 minutes. The test held with no leakage on this section of the service.

Note – there remains approximately four (4) feet of 1" plastic not pressure tested (Exhibit#4). The section not tested is between the base of the plastic riser sweep and the stab fitting at the base of the riser valve. State Fire Marshall Cummings confiscated the meter manifold and the remaining riser section not tested as evidence for further testing.

Evidence of burn damage was observed on the above ground riser valve, the insulating union and on the below ground riser sweep (Exhibit#5, Exhibit#6, Exhibit #7).

The burn damage of the below ground riser sweep appears to be in an area where the tracer wire also revealed burn damage (Exhibit#6). Melting of the riser sweep coating at this location indicated a high heat source. The condition of the 1" plastic service beneath was could not be determined through visual inspection. Please note this burn pattern could not have been the result of the above ground fire.

Exhibit#6 clearly shows an isolated burn pattern with unaffected sheathing above and below the affected area. This section of service piping was approximately two feet (2') below grade and protected from direct impact of any above ground flames.

A focal point of fire officials during their investigation was a cable television amplifier located approximately three (3) feet to the right of the last meter in the four meter manifold. A 2'x3' vented utility box containing a cable amplifier and electrical leads was found extremely damaged by an obvious powerful force. This area was a likely ignition source and potential cause for the unexplained damage to the below ground riser sweep (Exhibit#8).

The riser and manifold are currently at a DTE approved independent metallurgical testing lab for analysis. Results are expected in the near future.

Legal Investigator John Gatherum was able to take the pictures detailing the entire chronology stated above.

Cc: Steve Bell, Manager Emergency Dispatch – NE
Kevin Mahoney, QA/QC Manager, NE
Glen McIntosh, Senior Supervisor – North Shore Div.
Scott Crooker, Senior Supervisor – North Shore Div.
John Gatherum, Senior Investigator

KEYSPAN ENERGY

DTE INCIDENT REPORT

TODAY'S DATE: March 15, 2007
DATE/TIME OF INCIDENT: March 8, 2007 @ 1347

Mr. Christopher Bourne
Department of Telecommunications and Energy
Pipeline Safety and Engineering Division
One South Station
Boston, MA 02110

INCIDENT LOCATION	TYPE OF INCIDENT	# PEOPLE AFFECTED	DATE/TIME CALLED	DOT NOTIFIED
Building 3 Units 325, 326, 335, and 336 Magnolia Way Peabody, MA	Leak: X Outage: Evacuation: Time Out: Time In:	Unknown	To Dispatch: 13:47 To DTE: 15:57	Yes X Date 3/9/07 No.: 82864

PROBABLE CAUSE: At 1347 KeySpan received a call from the Peabody Fire Department to shut off gas to 19 Dearborn Road, Peabody, MA due to a working fire. Dispatch was able to determined the correct address to be on Magnolia Way, and a PFR tech was dispatched at 1354, arriving at approximately 1410. Fire Department personnel shut off gas at the riser at approximately 1420. The PFR tech shut off the service valve in the street. The Peabody Fire Department, DTE, and State Fire Marshal personnel conducted an onsite investigation. Units 325, 326, 335, and 336 at the building were fed by a one-inch plastic service to four outside meters through a two-inch manifold. The meters and regulator were melted. Evidence of burn damage was also observed on the above-ground riser valve and insulating union and on the below-ground riser sweep. Under the direction of the DTE and fire officials, subsequent pressure testing from the service valve to the riser valve revealed leakage at the riser valve possibly from the fire. Approximately 35 feet of underground service line was pressure tested from the service valve to approximately five feet from the riser valve, and it held. The remaining five feet of underground service to the riser valve, the regulator, the above ground riser, and the meter manifold were removed from the site by the Fire Marshal. Per DTE request, the removed equipment will be examined and tested.

PERSON(S) INJURED	TYPE OF EMERGENCY CARE
N/A	

PROPERTY DAMAGES:

LOCATION OF DAMAGE	TYPE OF DAMAGE
Exterior wall and the attic roof of building	Fire, smoke, and water

KEYSPAN ENERGY DELIVERY NEW ENGLAND
LEGAL SERVICES
(781) 466-5137

KEYSPAN Energy Delivery

INCIDENT / LEAK FORM

Date	Time	Reported By	Taken By	Area	Job #	Leak #	Grade
3-8	14:35	S. Mahoney	21853				

Customer Name	Street #	Pre	Street Name	Suf	Suite	Town
	3		Silver Leaf	Way		Pea

@ INTERSECTION OF:	Pre	Intersecting Street	Suf

Remarks
Gas service was on fire - No meters here yet. Shut off @ gate.

S–rep
Mahoney

Crew Name/Number	Time	Ref By	Dig Safe #	Time	Ref By
Supervisor G. McFatrich	Time 13:47	Ref By 21853	Legal Dept	Time	Ref By
Supervisor G. Lagherro	Time 14:35	Ref By 21853	Public Relations	Time	Ref By
Dispatch Manager	Time	Ref By	Gas Supply	Time	Ref By
Director	Time	Ref By	Fire Dept	Time	Ref By
V.P.	Time	Ref By	Police Dept	Time	Ref By
Damage Prevention	Time	Ref By	Other/Follow–up	Time	Ref By

Repair Information

EXHIBIT 4

Installation Records for the main and services
near 3 Magnolia Way

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: Stephen J. Morse

IR-PL-5

Q. Provide all installation records for the main and service near 3 Magnolia Way.

A. Attached please find installation records for the main and service near 3 Magnolia Way. (Exhibit 3).

BLDG.3-RISER 1

SERVICE INFORMATION FORM

S# 1442902

NEW	STUB	STUB EXT.	INSERT	RELAY	RELOCATE	RECONNECT	ABANDON			
							AT MAIN	WITH MAIN	AT VALVE	OTHER LOC.
✓										

Service Address: No.: 3 Street: MAGNOLIA WAY Town: PEABODY

Service No.: _____ Street: _____ Date: 10 / 12 / 05 (MM / DD / YYYY)

Tap From:

SERVICE DATA							INSTALLED FOOTAGE	PRESSURE TEST	MINUTES	PRESSURE
	1"	PL	1"			60lb.	86.6		19	96

ABANDON/ SLEEVE PIPE DATA	SIZE	MATERIAL	FOOTAGE	VINTAGE	MAIN DATA	SIZE	MATERIAL	DEPTH
						2"	PL	3'

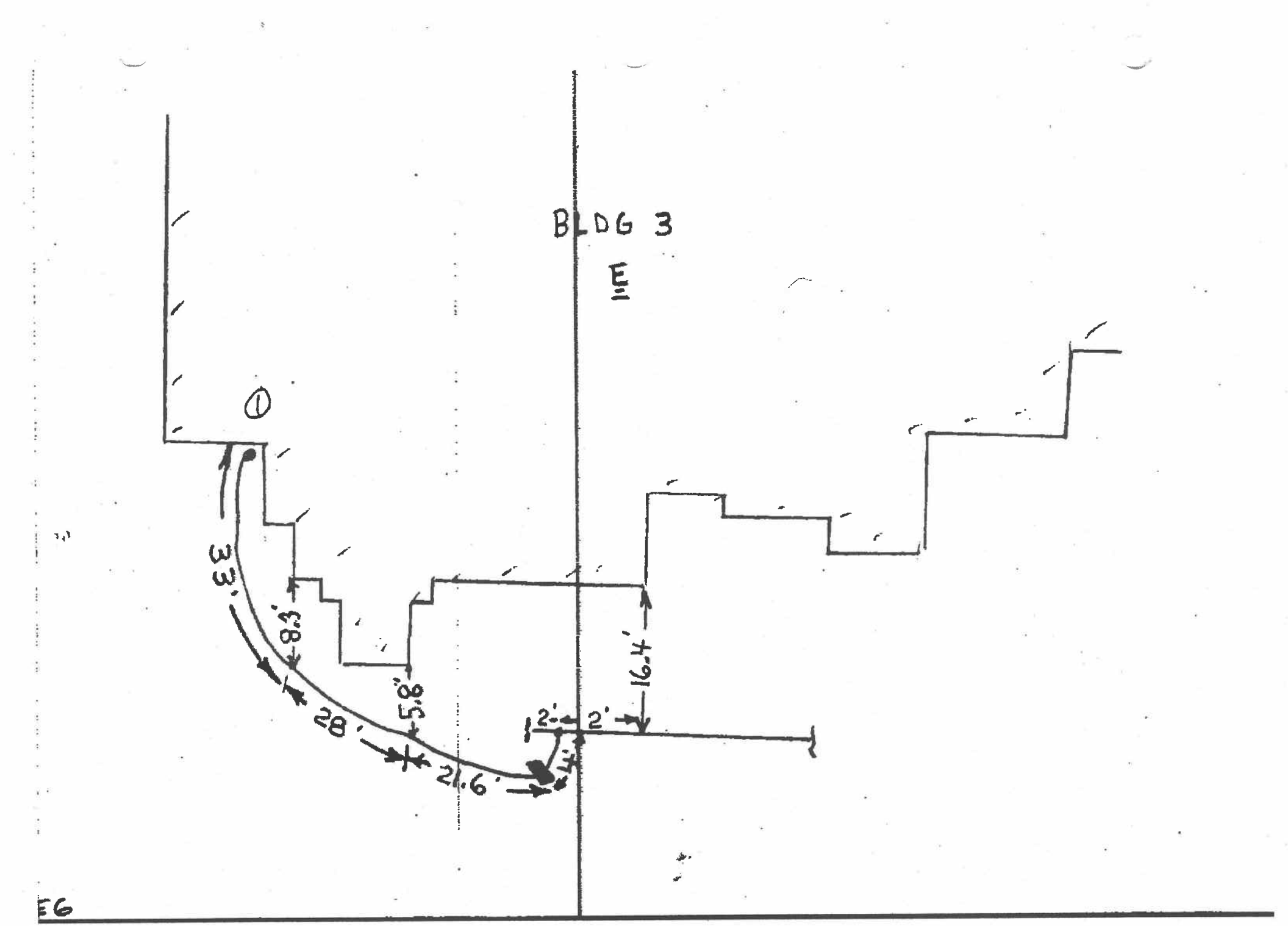
Installer: DEVCO Work Order# 4129401 Task 7521 OP

METER	LOCATION		PROTECTION			NO. OF ACTIVE METERS	EXCESS FLOW VALVE		ANODE		INSULATED		
	IN	OUT	YES	NO	DATE MM DD YYYY		YES	NO	RISER	T.S.	MAIN	RISER	METER
		✓			__/__/__			✓					

Other Data: Main to Bldg.

Form No. 246 Rev. 11/04

6


BLDG 3
E
1
33'
8.3'
28'
5.8'
21.6'
2'
2'
16.4'
4'
E6

SERVICE INFORMATION FORM

BLDG. 3 - RISER 2   S# 1442900

NEW	STUB	STUB EXT.	INSERT	RELAY	RELOCATE	RECONNECT	ABANDON			
							AT MAIN	WITH MAIN	AT VALVE	OTHER LOC.
X										

Service Address: No.: ~~Bld #3 B~~   Street: 3 ~~Silver Leaf Wy~~ MAGNOLIA WY / ~~Dearborn Rd~~   Town: Peabody

~~Service No:~~ 3   Street: MAGNOLIA WY   Date: 10 / 13 / 2005 (MM DD YYYY)

~~Tap From:~~

SERVICE DATA	SIZE	MAT'L	TAP SIZE	LP	IP	HP	INSTALLED FOOTAGE	PRESSURE TEST	MINUTES	PRESSURE
	1"	P/A	1"			X			16	97

ABANDON/ SLEEVE PIPE DATA	SIZE	MATERIAL	FOOTAGE	VINTAGE	MAIN DATA	SIZE	MATERIAL	DEPTH
						2"	P/A	31

Installer: Pevco   Work Order# 4 1 2 9 4 1   Task 7 5 2 1   OP

METER	LOCATION		PROTECTION			NO. OF ACTIVE METERS	EXCESS FLOW VALVE		ANODE		INSULATED		
	IN	OUT	YES	NO	DATE (MM DD YYYY)		YES	NO	RISER	T.S.	MAIN	RISER	METER
		✓			__/__/__			✓					

Other Data: ___ Main to Bldg.

Form No. 246   Rev. 11/04

BLDG. 3 - RISER 6

SERVICE INFORMATION FORM

S# 1442890

NEW	STUB	STUB EXT.	INSERT	RELAY	RELOCATE	RECONNECT	ABANDON			
							AT MAIN	WITH MAIN	AT VALVE	OTHER LOC.
✓										

Service Address: No.: 3 Street: MAGNOLIA WAY Town: PEABODY

Service Tap From: No.: _____ Street: _____ Date: 10 / 12 / 06 (MM / DD / YYYY)

DATA					IP	LMS	INSTALLED FOOTAGE	PRESSURE TEST	MINUTES	PRESSURE
	1"	PL	1"			60 16	20.5		18	97

ABANDON/ SLEEVE PIPE DATA	SIZE	MATERIAL	FOOTAGE	VINTAGE	MAIN DATA	SIZE	MATERIAL	DEPTH
						2"	PL	3'

Installer: DEVCO

Work Order#: 4129483

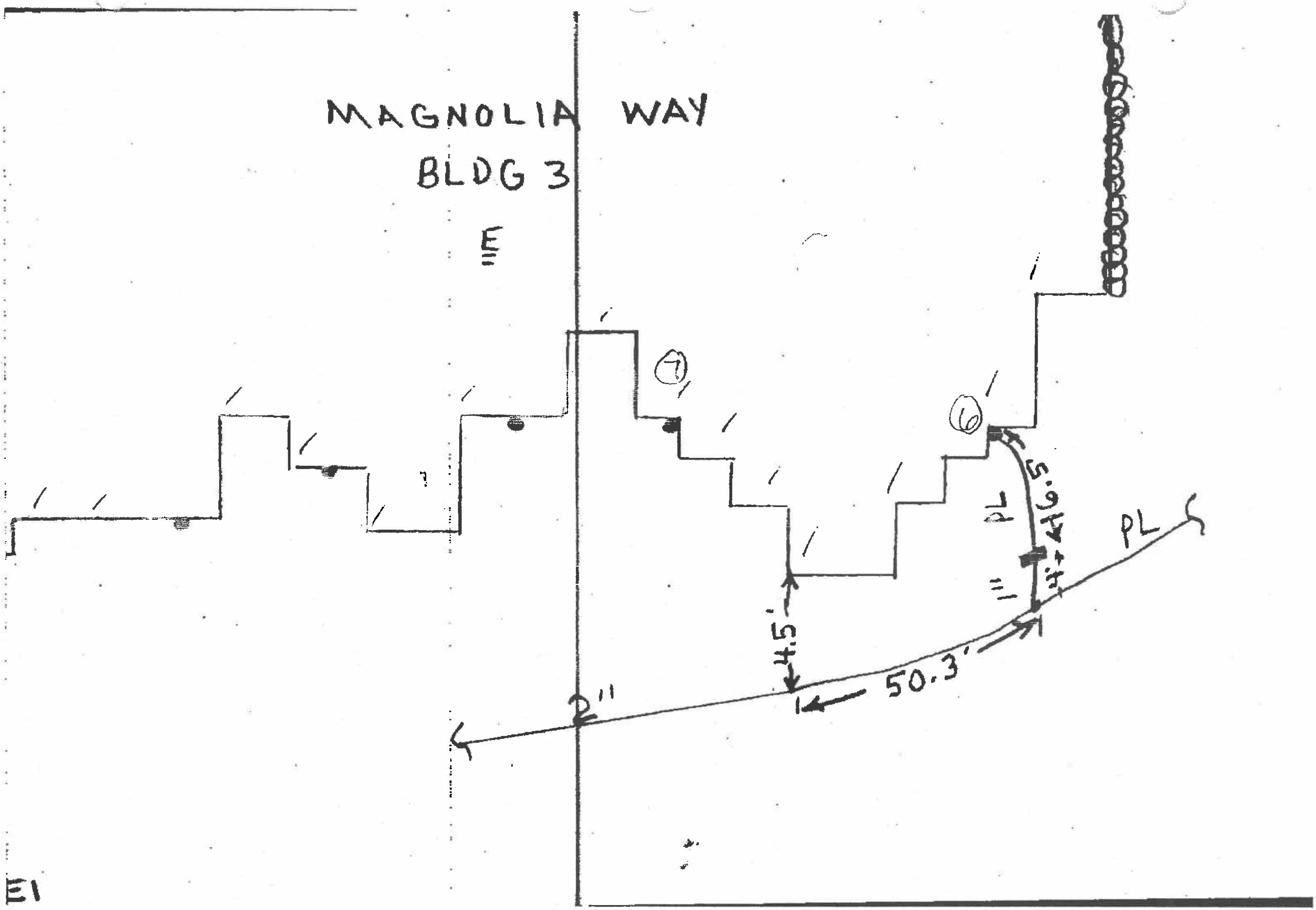
Task: 7521

OP: _____

METER	LOCATION		PROTECTION			NO. OF ACTIVE METERS	EXCESS FLOW VALVE		ANODE		INSULATED		
	IN	OUT	YES	NO	DATE (MM DD YYYY)		YES	NO	RISER	T.S.	MAIN	RISER	METER
		✓			__/__/__			✓					

Other Data: Main to Bldg.

Form No. 246 Rev. 11/04


MAGNOLIA WAY
BLDG 3
E
7
6
PL
PL
4.5'
50.3'
4'+46.5
2"
1"
E1

BLDG. 3-RISER 7

SERVICE INFORMATION FORM

#1442889

NEW	STUB	STUB EXT.	INSERT	RELAY	RELOCATE	RECONNECT	ABANDON			
							AT MAIN	WITH MAIN	AT VALVE	OTHER LOC.
✓										

Service
Address: No.: 3 Street: MAGNOLIA WAY Town: PEABODY

Service No.: _____ Street: _____ Date: 10 / 12 / 05
Tap From: MM DD YYYY

	SIZE	MAT'L	TAP SIZE	LP	IP	HP	INSTALLED	PRESSURE TEST	MINUTES	PRESSURE
DATA	1"	PL	1"			60 lb	14.5'		17	98

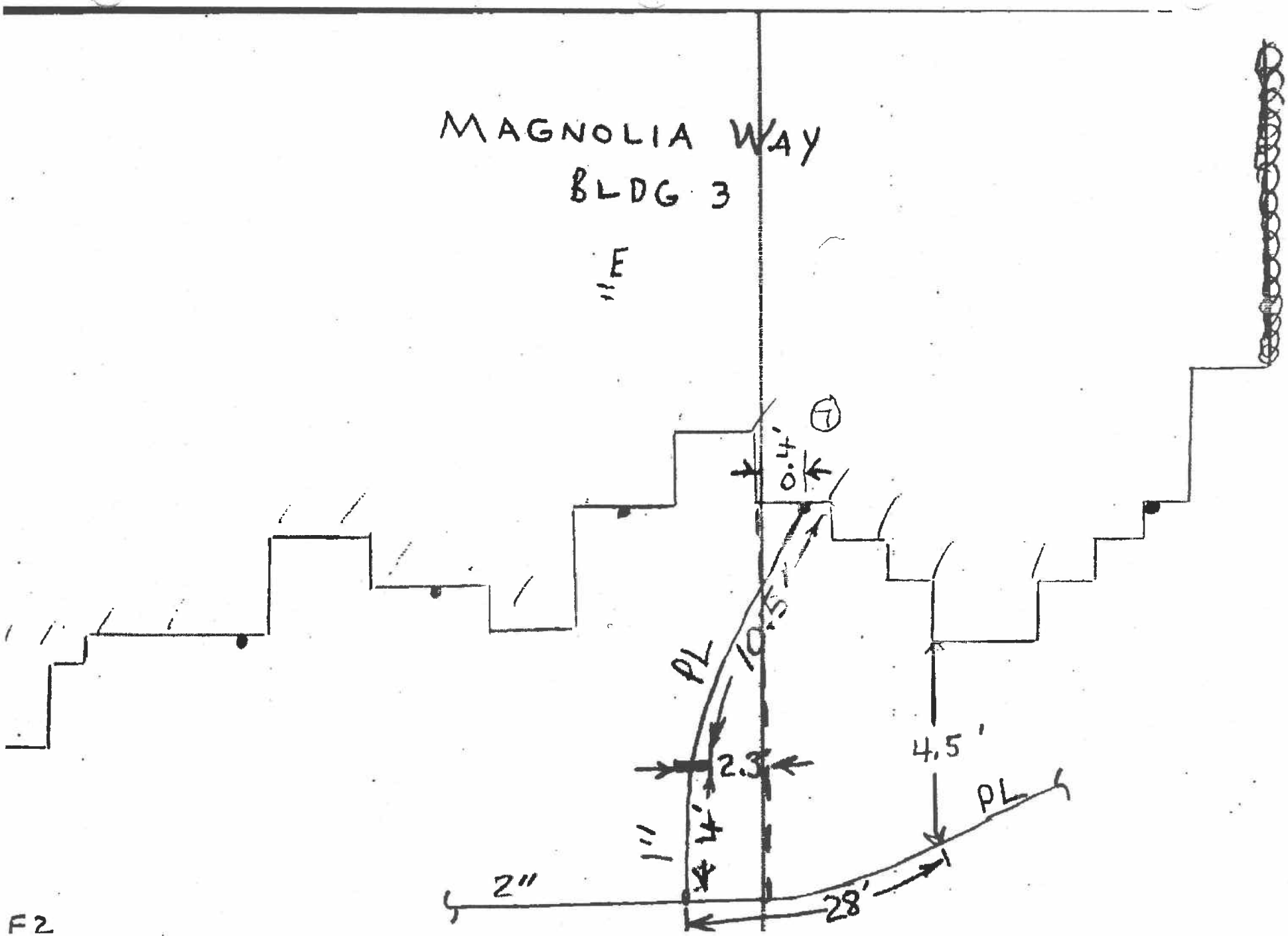
ABANDON/RENEW PIPE DATA	SIZE	MATERIAL	FOOTAGE	VINTAGE	MAIN DATA	SIZE	MATERIAL	DEPTH
						2"	PL	3'

Installer: DEVCO Work Order# 4129449 Task 7521 OP

METER	LOCATION		PROTECTION			NO. OF ACTIVE METERS	EXCESS FLOW VALVE		ANODE		INSULATED		
	IN	OUT	YES	NO	DATE MM DD YYYY		YES	NO	RISER	T.S.	MAIN	RISER	METER
		✓			__/__/__			✓					

Other Data: Main to Bldg.

Form No. 246 Rev. 11/04



F2

BLDG.3-RISER 8

SERVICE INFORMATION FORM

S# 1442489

NEW	STUB	STUB EXT.	INSERT	RELAY	RELOCATE	RECONNECT	ABANDON			
							AT MAIN	WITH MAIN	AT VALVE	OTHER LOC.
✓										

Service

Address: No.: 3 Street: MAGNOLIA WAY Town: PEABODY

Date: 10/12/05 (MM DD YYYY)

	INSTALLED FOOTAGE	PRESSURE	MINUTES	PRESSURE
			10	71
			MATERIAL	
	DATA		PL	3"

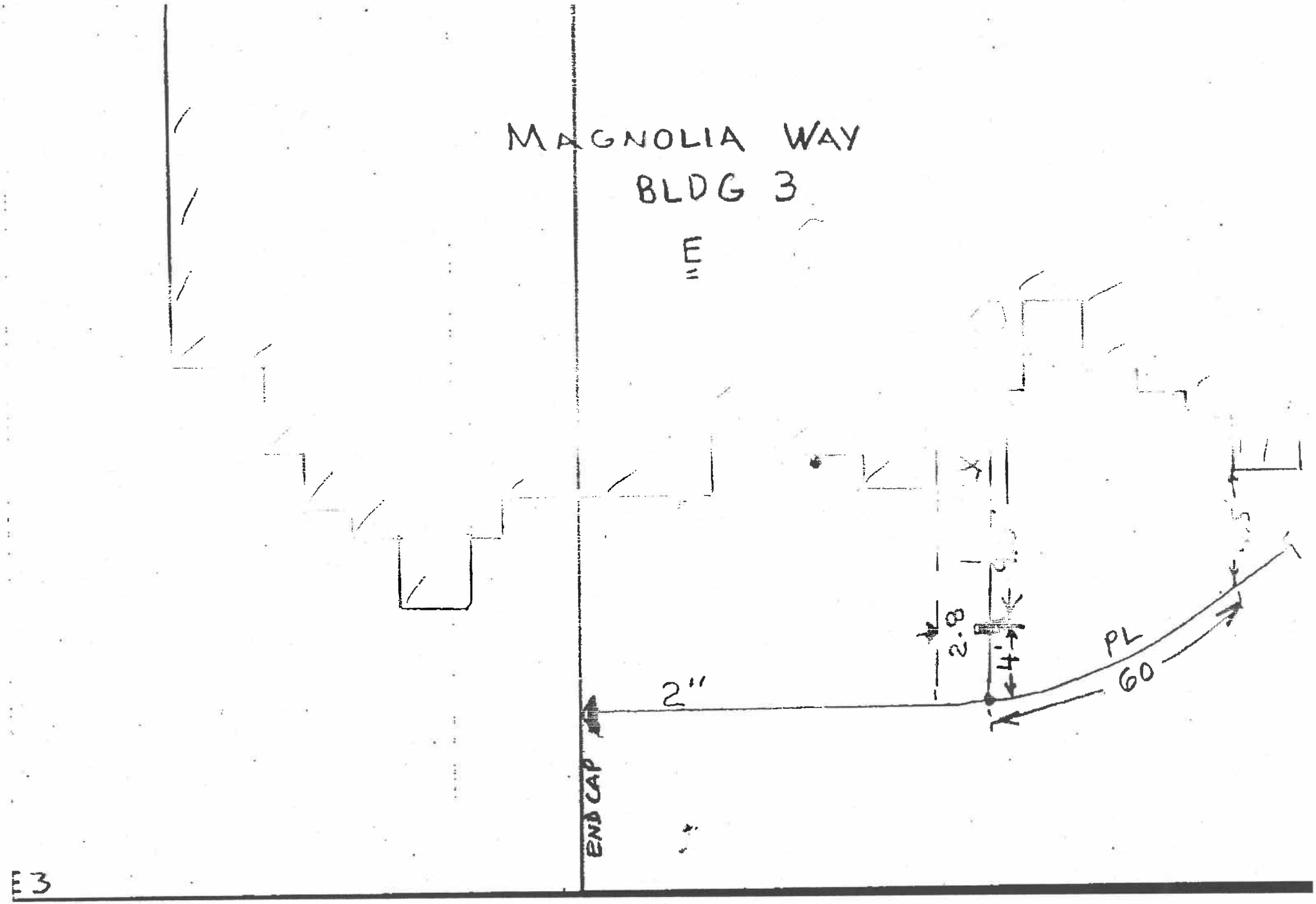
Installer: DEKCO Work Order# 4129571 Task 7521 OP

METER	LOCATION		PROTECTION			NO. OF ACTIVE METERS	EXCESS FLOW VALVE		ANODE		INSULATED		
	IN	OUT	YES	NO	DATE MM DD YYYY		YES	NO	RISER	T.S.	MAIN	RISER	METER
		✓			__/__/____			✓					

Other Data: Main to Bldg.

Form No. 246 Rev. 11/04

F3


MAGNOLIA WAY
BLDG 3
E
2'-8"
4"
PL
60
2"
END CAP
E3

BLDG. 3 - RISER 9

SERVICE INFORMATION FORM S# 1442488

NEW	STUB	STUB EXT.	INSERT	RELAY	RELOCATE	RECONNECT	ABANDON			
							AT MAIN	WITH MAIN	AT VALVE	OTHER LOC.
✓										

Service Address: No.: 3 Street: MAGNOLIA WAY Town: PEABODY

Service No.: _____ Street: _____ Date: 12 / 12 / 05 (HH / DD / YYYY)

							FOOTAGE	PRESSURE TEST	MINUTES	PRESSURE
DATA	1"	PL	1"			60 lb	14.7'		19	91
PIPE DATA							MAIN DATA	SIZE	MATERIAL	DEPTH
								2"	PL	3'

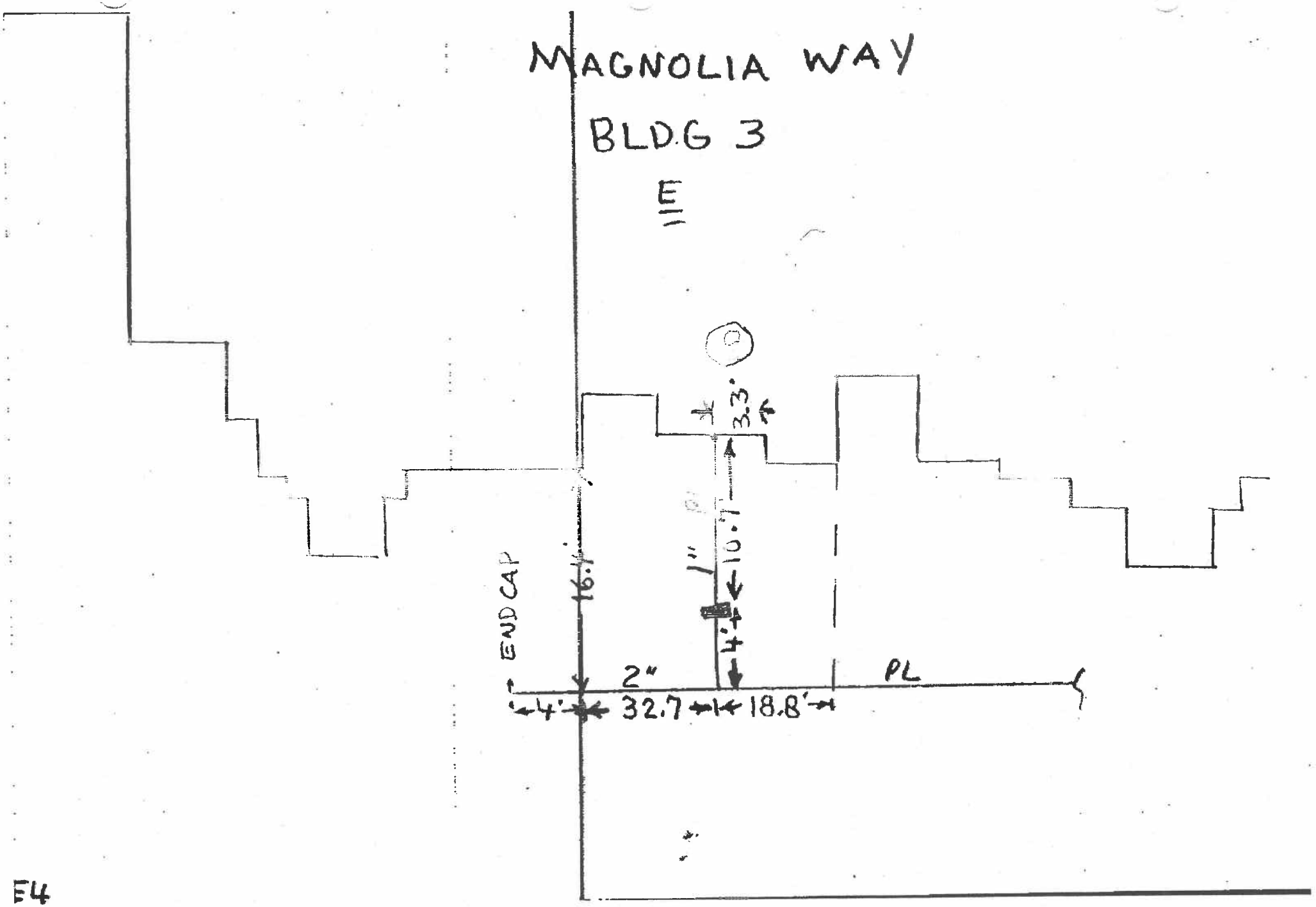
Installer: DERCO Work Order# 4 1 2 9 5 2 Task 7 5 2 1 OP

METER	LOCATION		PROTECTION			NO. OF ACTIVE METERS	EXCESS FLOW VALVE		ANODE		INSULATED		
	IN	OUT	YES	NO	DATE (MM DD YYYY)		YES	NO	RISER	T.S.	MAIN	RISER	METER
		✓			__/__/____			✓					

Other Data: Main to Bldg.

Form No. 246 Rev. 11/04

E4



E4

BLDG. 3 - RISER 10

SERVICE INFORMATION FORM

S# 1442487

NEW	STUB	STUB EXT.	INSERT	RELAY	RELOCATE	RECONNECT	ABANDON			
							AT MAIN	WITH MAIN	AT VALVE	OTHER LOC.
✓										

Service Address: No.: 3 Street: MAGNOLIA WAY Town: PEABODY

Service No.: ______ Street: ______ Date: 10 / 12 / 05 (MM DD YYYY)

SIZE	MATL	PLASTIC	LP	IP	HP	INSTALLED FOOTAGE	PRESSURE TEST	MINUTES	PRESSURE
					60#	16.4		19	93

SERVICE PIPE DATA					MAIN DATA	SIZE	MATERIAL	DEPTH
						2"	PL	3'

Installer: DEVCO

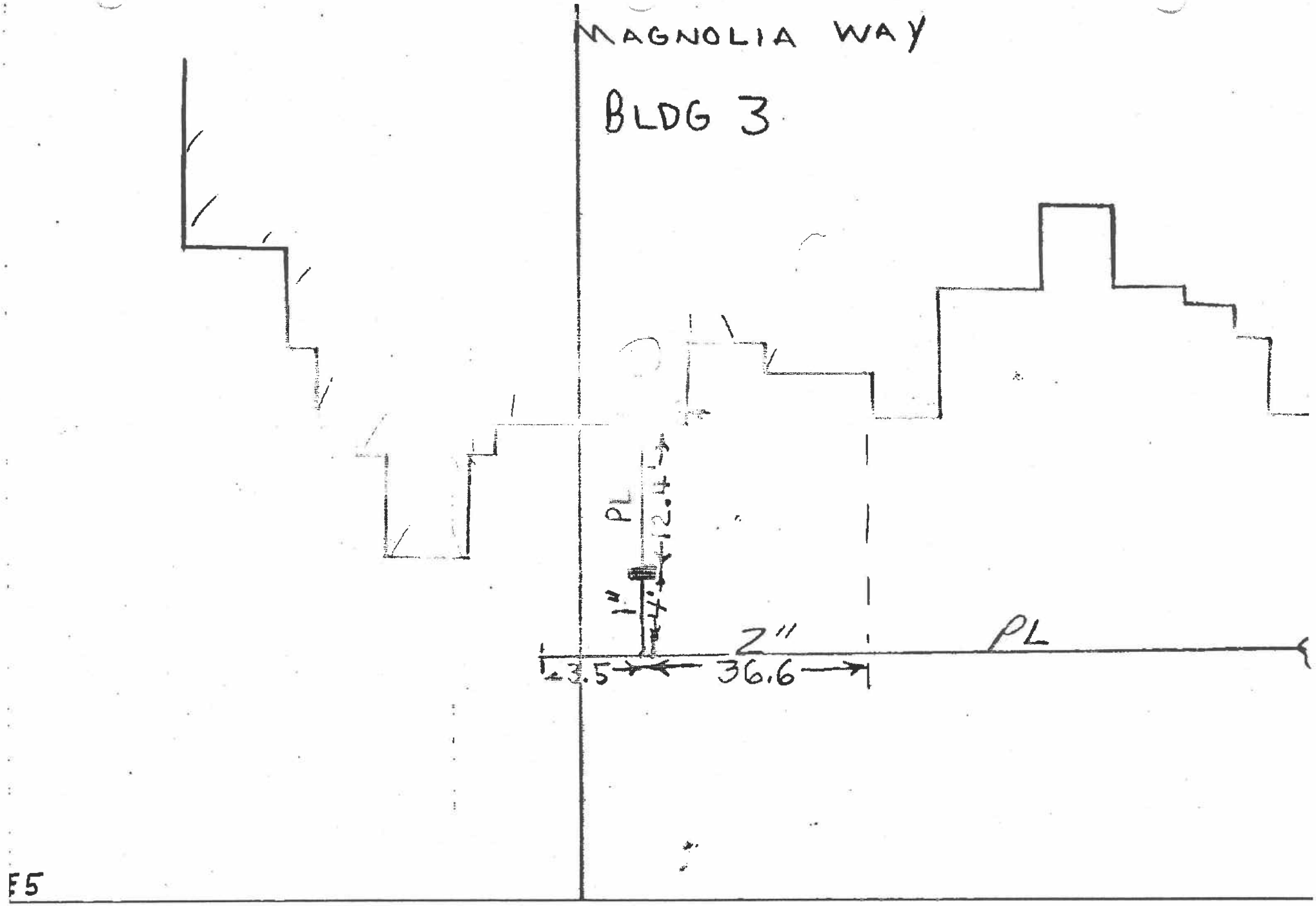
Work Order# 4 / 1 2 9 5 4 Task 7 5 2 / OP ______

METER	LOCATION		PROTECTION			NO. OF ACTIVE METERS	EXCESS FLOW VALVE		ANODE		INSULATED		
	IN	OUT	YES	NO	DATE MM DD YYYY		YES	NO	RISER	T.S.	MAIN	RISER	METER
		✓			__/__/__			✓					

Other Data: ______ Main to Bldg.

Form No. 246 Rev. 11/04

F5


MAGNOLIA WAY
BLDG 3
PL
12.4'
1"
4'
2"
PL
3.5
36.6
F5

RESTORATIONS (OPENINGS)

Opening Site #1

Opening Site — Paving
- ☐ Street — Contr. ☐ Yes
- ☐ Sidewalk — Notified ☐ No
- ☐ Lawn (Priv. Prop.)

Original Surface — Length: ____ ft.
- ☐ Asphalt
- ☐ Concrete — Width: ____ ft.
- ☐ Gravel
- ☐ Cobblestone — Thickness: ___ in.
- ☐ Grass
- ☐ Brick — # DCP Drops: ___
- ☐ Conc. & Asph.
- ☐ Brick & Cobble. — # of Lifts: ____

Paving Method _____

Opening Site #2

Opening Site — Paving
- ☐ Street — Contr. ☐ Yes
- ☐ Sidewalk — Notified ☐ No
- ☐ Lawn (Priv. Prop.)

Original Surface — Length: ____ ft.
- ☐ Asphalt
- ☐ Concrete — Width: ____ ft.
- ☐ Gravel
- ☐ Cobblestone — Thickness: ___ in.
- ☐ Grass
- ☐ Brick — # DCP Drops: ___
- ☐ Conc. & Asph.
- ☐ Brick & Cobble. — # of Lifts: ____

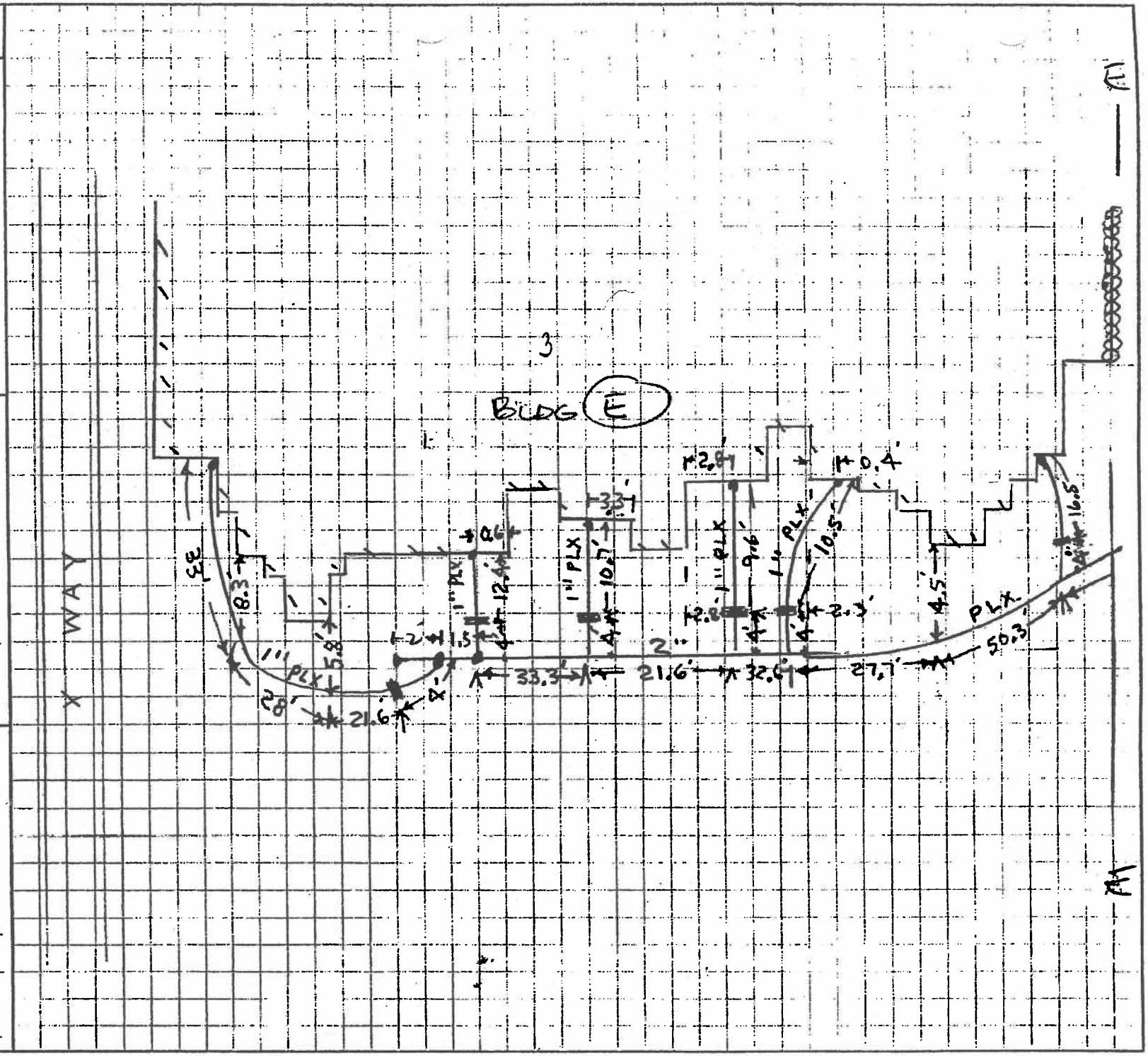
Paving Method _____

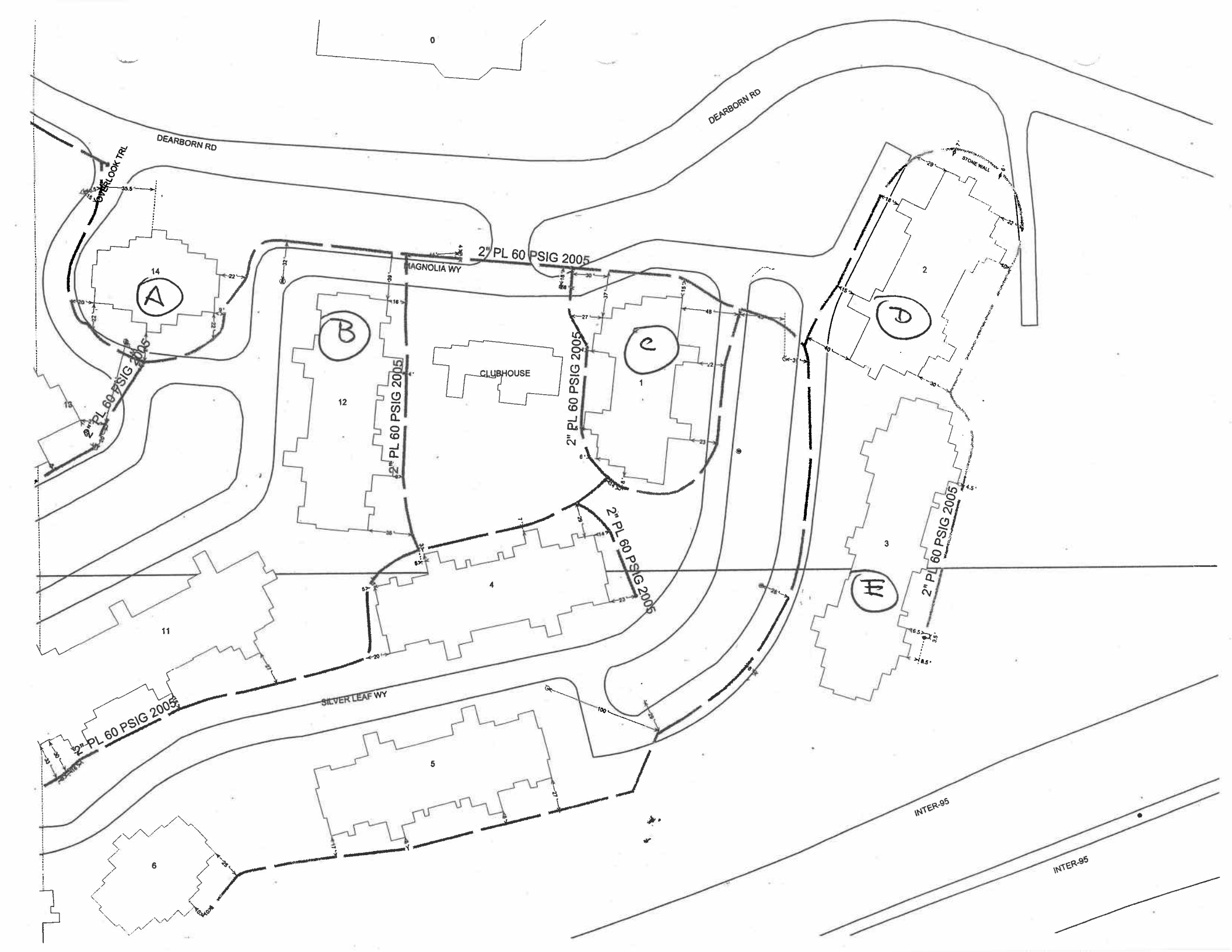
Opening Site #3

Opening Site — Paving
- ☐ Street — Contr. ☐ Yes
- ☐ Sidewalk — Notified ☐ No
- ☐ Lawn (Priv. Prop.)

Original Surface — Length: ____ ft.
- ☐ Asphalt
- ☐ Concrete — Width: ____ ft.
- ☐ Gravel
- ☐ Cobblestone — Thickness: ___ in.
- ☐ Grass
- ☐ Brick — # DCP Drops: ___
- ☐ Conc. & Asph.
- ☐ Brick & Cobble. — # of Lifts: ____

Paving Method _____




DEARBORN RD
DEARBORN RD
OVERLOOK TRL
MAGNOLIA WY
2" PL 60 PSIG 2005
2" PL 60 PSIG 2005
2" PL 60 PSIG 2005
2" PL 60 PSIG 2005
2" PL 60 PSIG 2005
2" PL 60 PSIG 2005
2" PL 60 PSIG 2005
CLUBHOUSE
SILVER LEAF WY
STONE WALL
INTER-95
INTER-95
A
B
C
D
H
0
1
2
3
4
5
6
11
12
13
14

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: William Costigan

IR-PL-10

Q. Provide information concerning the type of service regulator installed at 3 Magnolia Way, including the set point and maximum inlet pressure.

A. Regulator installed: Actaris B42R with 3/16" orifice and Blue Outlet spring (8-14" w.c., part # 762646). Set Point = 13" w.c. MAOP of this unit is 125#. Blanket 1703 requesting set point of 13"w.c. available.

EXHIBIT 5

Pressure in main at time of incident

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
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KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: William Costigan

IR-PL-9

Q. Provide documentation of the pressure in the main or service at the time of the fire.

A. Closest Take Station = Danversport Take Station. Average outlet pressure at Danversport between 12pm and 2pm on 3/8/2006 = 54.96 p.s.i.

EXHIBIT 6

Accident Investigation Memo from Paul Grieco - March 15, 2007
Photos: 3 Magnolia Way - Fire Damage

Department of Telecommunications and Energy
Pipeline Safety Division
MEMO

DATE: March 15,2007

TO: Christopher Bourne
FROM: Paul Grieco
RE: 19 Dearborn Rd, Peabody

On March 8, 2007 at 4:00 PM I was notified of a fire and possible explosion at 19 Dearborn Road, Peabody. I arrived at the location at 6:00 PM and made contact with the State Fire Marshall, the Peabody FD and KeySpan. At this time I did not notice any evidence of an explosion.

The building was a wood frame three story apartment complex with twelve or more units. The damage to the building was directly above the keySpan facilities. There was an outside service riser with a regulator and four meters. The regulator and meters were melted by the fire. The fire destroyed the side of the building and a portion of the roof. There was a Comcast cable vault and two air conditioning units within 15 feet of the gas facilities. The Comcast vault was melted. The gas was initially shut off at the service riser and then shut off at the curb valve. KeySpan stated that the operating pressure in this area of Peabody was 60 PSI. KeySpan also stated that a leakage survey was conducted and no leakage was discovered and odorant testing will be conducted either on this date or on March 9, 2007.

At this time it was agreed to return on the next day to continue the investigation. A fire Dept and Police Dept detail were assigned for overnight security.

On March 9, 2007 it was agreed by all parties to pressure test the service. The service was .5" plastic. KeySpan excavated the service at the curb valve and tested the service from downstream of the valve to the service riser valve. The test did not hold at 10 psig. There were soap bubbles on the service riser valve and the insulating fitting above the valve.

The service was then excavated at the building. The next test would be from near the curb valve area to the building. The service riser was removed with the intension of having a lab conduct further testing. The new test was adequate, the service line held pressure at 62 psig for 23 minutes.

The State Police took custody of the KeySpan facilities for storage. Arrangements will have to be made to move the facilities to the lab.

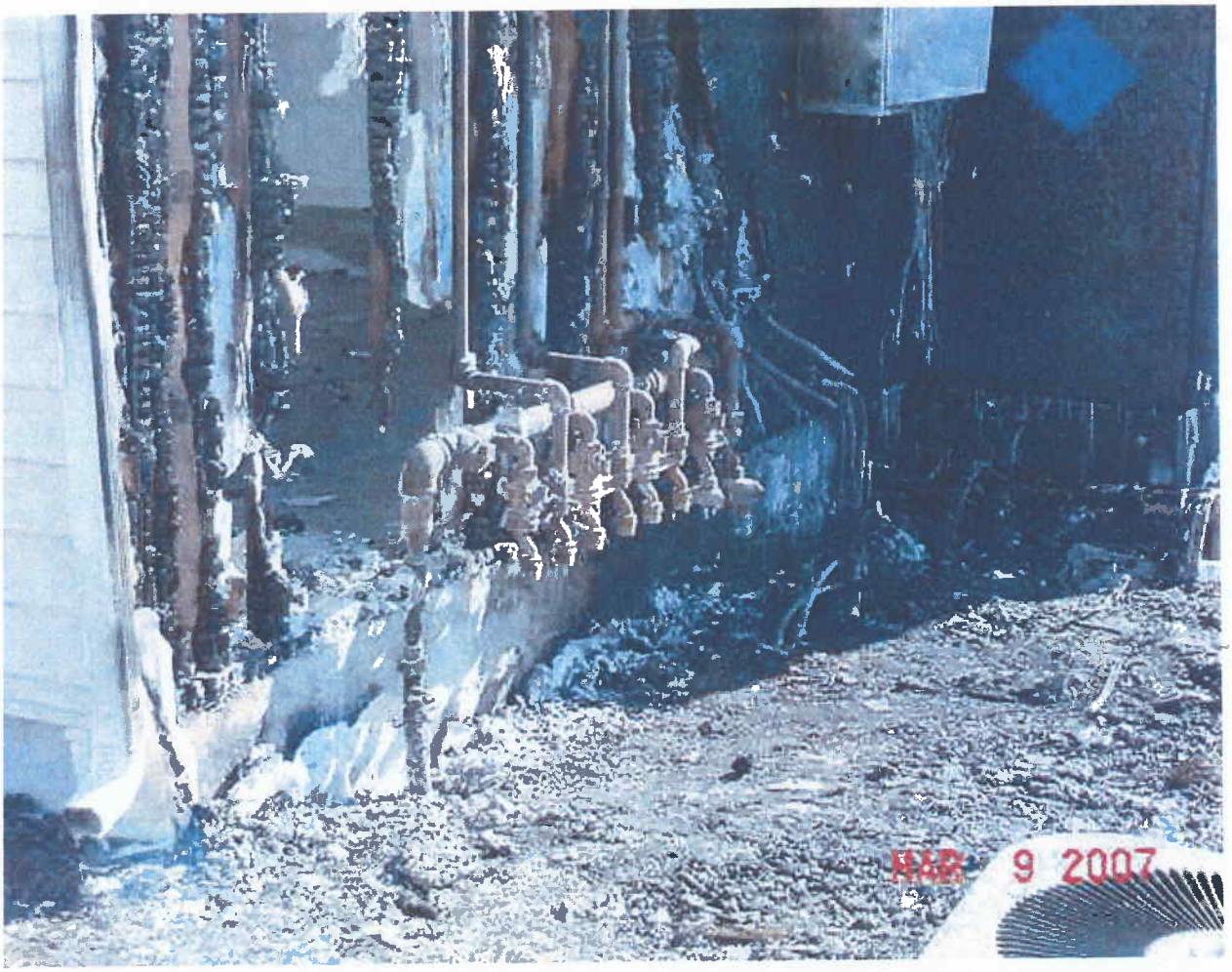
3 Magnolia Way - Fire Damage

3 Magnolia Way - Fire Damage

Service Riser Valve and Insulating Fitting

EXHIBIT 7

Photo: Service Riser, Regulator and Four Meters



Service Riser, Regulator and Four Meters

Service Riser, Regulator and Four Meters

EXHIBIT 8

Photo: Gas Service Curb Valve

Gas Service Curb Valve

EXHIBIT 9

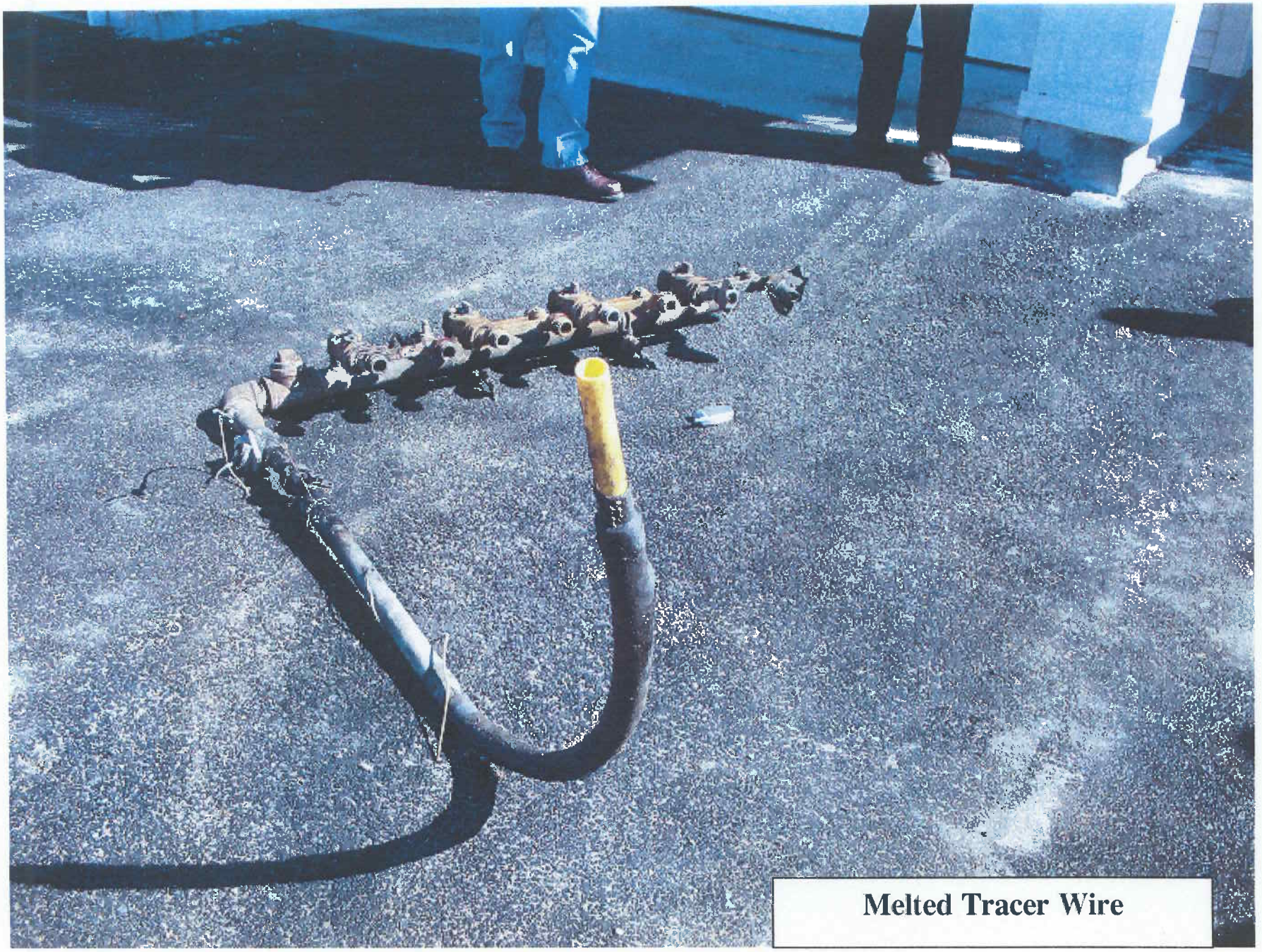
Photo: Damage to Service Riser

Damage to Service Riser

Damage to Service Riser

EXHIBIT 10

Photo: Melted Tracer Wire



Melted Tracer Wire

EXHIBIT 11

Photo: Bubbled Section of the Service Riser

Figure 25: A split and bubbled region on the pigtail cover.

Figure 26: A bubbled region with mark that fits the tracer wire, arrow.

EXHIBIT 12

Photo: Underground Facilities

Underground Facilities

EXHIBIT 13

Evidence and Custody Log

The Commonwealth of Massachusetts

DEPARTMENT OF TELECOMMUNICATIONS AND ENERGY

EVIDENCE AND CUSTODY LOG	
Incident date/location:	March 8, 2007, reported as 19 Dearborn Rd, Peabody
Date Collected:	March 9, 2007
Collected By:	Pete Cummings, State Trooper, State Police, Fire Marshal
Operator:	KeySpan Energy
Disposition: Where the evidence is to be taken and by whom (e.g. origin; destination; shipper). As evidence custody is transferred, each receiver shall sign form and identify their agency.	Received From: Peter Cummings Peter C Cummings Received By: Paul Grieco Paul Grieco Date: 3/28/07 Time: 11:50AM Received From: PAUL GRIECO Paul Grieco Received By: Vicki-Anne Ulickas Vicki-Anne Ulickas Date: 4-12-07 12 April 2007 Time: 945 AM Received From: Received By: Date: Time: Received From: Received By: Date: Time:
Item Description and Notes	Service riser with shut off valve, an insulator, remains of the regulator, four meter manifold and the melted meters.

The Commonwealth of Massachusetts Department of State Police

DEVAL L. PATRICK
GOVERNOR

TIMOTHY P. MURRAY
LIEUTENANT GOVERNOR

KEVIN M. BURKE
SECRETARY

COLONEL MARK F. DELANEY
SUPERINTENDENT

Fire & Explosion Investigation Section
Box 1025 State Road
Stow, Mass. 01775

Evidence Return Receipt

Case Number: 2007-117-0371
Incident Address: 3 Magnolia Way Peabody, MA
Case Officer: Tpr. Donald R. Bossi #2130

Item #	Description
1.	gas line and meter feeds (containing four melted meters);
2.	gas line riser and "elephant nose" connector (service risers);
3.	one cardboard box containing various gas line/PVC connections and debris and various meter debris.

Paul Grieco
Released to (Print)

DTE
Agency

Paul Grieco
Released to (Signature)

3-28-07
Date

Peter C. Cummings, Trooper, M.S.P.

A Subsidiary of THE MMR GROUP, INC.

Massachusetts Materials Research, Inc.

P.O. BOX 810 • 1500 CENTURY DRIVE • WEST BOYLSTON, MA 01583 • TEL. 508-835-6262 • FAX 508-835-9025

EVIDENCE OF TRANSFER DOCUMENTATION

Re: 3 Silver Leaf Way, Peabody, MA
Outside Service Riser, Water Manifold, Meter Remnants

I, Veda-Anne Ulčickas, have received the referenced sample from Paul Grieco of Department of Telecommunications & Energy, One South Station, Boston, MA 02110 on this 12th day of April 2007.

Released by:

Paul Grieco — 4-12-07

Paul Grieco
Department of Telecommunications & Energy

Date

Received by:

Veda-Anne Ulčickas — 12 April 2007

Veda-Anne Ulčickas
Senior Materials Engineer
Massachusetts Materials Research, Inc.

Date

EXHIBIT 14

Odorant levels near 3 Magnolia Way on or after March 8, 2007

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: John Barrett

IR-PL-2

Q. Provide odorant level readings taken near 3 Magnolia Way on or after March 8, 2007.

A. Attached please find results of odorant levels taken near 3 Magnolia Way on or after March 8, 2007. (Exhibit 2)

KEYSPAN
Energy Delivery

Inter-office Memo
Instrumentation & Regulation NE

To: File

From John Barrett

Date: March 12, 2007

Subject: **3 Magnolia Way, Peabody**

On March 8, 2007 at approximately 7:00 p.m. Tim Driscoll, Instrumentation and Regulation Supervisor, was notified of a possible gas related incident at 3 Magnolia Way, Peabody. Jacque Moron and Jim Muldowney (Instrumentation & Regulation Control Technicians) and Tim Driscoll went to the site. Distinct Odor Level tests were conducted at 3 Magnolia Way, Peabody. This condo is located next to the affected condos at the complex.

The results of these tests are listed below:

Date	Time	Location	Threshold Odor Level (% Gas in Air)	Distinct Odor Level (% Gas in Air)	Test Equip. ID	Test Equip. Calibration Date	Test By
3/8/2007	9:30 p.m.	3 Magnolia Way	0.06	0.09	1991-3	3/2006	Moron
		Peabody	0.01	0.06	1991-3	3/2006	Muldowney

cc: J. Higgins
W. Kildare
T. Vigeant

EXHIBIT 15

Main maintenance history

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: William Costigan

IR-PL-8

Q. Provide documentation of any and all maintenance history for the main and service to 3 Magnolia Way.

A. None.

EXHIBIT 16

Service calls to 3 Magnolia Way

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: Margaret Dunne

IR-PL-7

Q. Provide documentation of any and all service calls to the four accounts at 3 Magnolia Way.

A. None.

EXHIBIT 17

Leakage Survey results before March 8, 2007

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: Philip Quan

IR-PL-3

Q. Provide leakage survey results for any leakage survey completed on the main or service for 3 Magnolia Way before March 8, 2007.

A. KeySpan conducted a walking survey of the main and service for 3 Magnolia Way the week of August 25, 2006. No leaks were found.

EXHIBIT 18

Leakage Survey results after March 8, 2007

COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF PUBLIC UTILITIES
PIPELINE ENGINEERING AND SAFETY DIVISION

FIRST SET OF INFORMATION REQUESTS FROM
THE PIPELINE ENGINEERING AND SAFETY DIVISION OF
THE DEPARTMENT OF PUBLIC UTILITIES TO
KEYSPAN ENERGY DELIVERY

RE: Investigation of Incident at 3 Magnolia Way, Peabody – March 8, 2007

Respondent: William Costigan

IR-PL-4

Q. Provide leakage survey results for any leakage survey completed on the main or service for 3 Magnolia Way on or after March 8, 2007

A. On March 8, 2007, KeySpan performed leakage survey of the area and found no leaks.