



2022

Navitas Gas Leak Data Report - 911 Call / Reported Damage / Maintenance

Section 1 - Required Information Section for any Telephonic Report Received

Taken by: OK Date: 1/17/23 Time: 1:30 AM/PM PM

Info Source: Call/Work Order/Other-Specify:

Person reporting or requesting: Zippy Kingaer Hansel Properties

Community: _____ City: Albany County: _____

Street: 1013 Cross St. Address #: _____ Apt #: _____ Zip Code: 12203

Phone Number: 606-346-1383 Cell Phone: 606-346-1383

Nearest Cross Street if no address: _____ @ _____

Location and description of Leak or Damage at above address: Smelling gas in main office of Hotel

Is leak: Inside / Outside / Both (NOTES: In the event of any reported gas leak, instruct the callers to)

Is odor: Strong / Mild / Random / No Odor (evacuate the area to a safe distance immediately - tell them not)

Does any sound accompany smell? Hissing / Whistling / Roaring (to use light switches or take any action that might create a)

How Long have you been smelling the leak or hearing the gas sound? 2 hrs (spark of any kind and to leave any doors)

(used to depart (if inside) open.)

Who dispatched? Steve Solly Time of Dispatch: 1:37 AM/PM PM

Work Site Evaluation and Observations by Dispatched Technician

Dispatched Person Arrival Time: 2:30 AM/PM PM Are any AOC's noted? No / Yes: Specify: _____

Is reporting party (if leak or damage call) on the scene? Yes / No

Leak or Damage found: Yes / No If Yes, Navitas side or customer side?

If the leak is on Navitas' side use form 1 to record leak.

Work Conclusion

Dispatched person declares repair complete, site safe and departing @ 3:15 AM/PM PM

Actions, Notes, comments or other details of activity on site if needed, including if follow up is needed and the type of follow up:

Used CGI inside and outside. Did not detect anything.

I did smell sewer inside and outside.

Signature of Investigator Steve Solly

Date 1-17-23 Name of System Albany

1/9/2023 OK

Acct. # 50314A Acct. Name Charles Atkinson SYSTEM: KY
Route# 12 Sequence# ~~02670~~ 02670 Phone# 606/478 3760
Service Address: 376 Stratton Br. Stanville DATE: 1-4-23

FORM 5

[illegible]

PIPELINE FIELD TEST REPORT 2023

NAVITAS UTILITY CORP.

SYSTEM: Betsy Layne KY

This form must be completed for each section of newly installed section of main or service line.

TEST DATA

Location of line: Stanville KY GPS: 37.565344, -82.642839 to 37.564358, -82.643300

Pipe information: 480' 2" SDR11 HDPE Tested @ 90 PSIG for 3 hours. Test Started @ 12:00 pm, Test Ended @ 3:00 pm

Size of pipe: 2 inches. Length of line: 480' Main ☒ Service ()

Pipe information: 260' 1" HDPE Tested @ 90 PSIG for 10 min. Test Started @ 3:00 pm, Test Ended @ 3:10 pm

Size of pipe: 1 inches. Length of line: 260' Main () Service ☒

Pipe information: _____

Size of pipe: _____ inches. Length of line: _____ Main () Service ()

Pipe information: _____

Size of pipe: _____ inches. Length of line: _____ Main () Service ()

Tested with: Air ☒ Natural Gas () Gauge #: BAC 200-25

Time started: 12:00 a.m./p.m. Time ended: 3:10 a.m./p.m.

Test pressure start: 90 psig

Test pressure stop: 90 psig

Line loss: Yes () No ☒

Remarks: _____

Signature: [Signature] Date: 3-17-23

2023

NUC / FCFA PIPELINE UPDATE WORK SHEETSYSTEM: Betsy Layne KY DATE: 3-23-23LOCATION: Betsy Layne KY (Stanville)GPS COORDINATES: LAT: 37.565344 LON: -82.642839Map update (Yes or No)☐ PIPELINE RETIREMENT

MAIN () SERVICE ()

TYPE OF PIPE: _____

SIZE OF PIPE: _____

LENGTH OF LINE: _____

REASON FOR RETIREMENT: _____

WAS LINE PURGED WITH AIR? Y / N % NG _____

☐ NEW PIPELINE INSTALLATIONMAIN () SERVICE (✓)TYPE OF PIPE: HDPESIZE OF PIPE: 1"LENGTH OF LINE: 260'CUSTOMER NAME IF SERVICE LINE: Stephanie WilliamsWAS LINE PURGED WITH NATURAL GAS? (Y) / N % NG 100☐ PIPELINE REPLACEMENTMAIN (✓) SERVICE ()TYPE OF EXISTING PIPE: HDPESIZE OF EXISTING PIPE: 3"TYPE OF NEW PIPE: HDPESIZE OF NEW PIPE: 2"LENGTH OF LINE BEING REPLACED: 480'WAS OLD LINE PURGED WITH AIR? (Y) / N % NG 0WAS NEW LINE PURGED WITH NATURAL GAS? (Y) / N % NG 100PIPE CONDITION REPORTINTERNAL CORROSION: Y / (N) SEVERITY: _____EXTERNAL CORROSION: Y / (N) SEVERITY: _____SIGNATURE: [Signature]

1/2/2019

DATE: 3-23-23

FORM 4

ENTERED 4/19/2023

Work Order

Work Order Code & Desc: RER - RE-READ METER

Information Assigned by Office			
Name:	DAVID SPRADLIN	Phone No:	(606)478-3231
Service Id:	50107	Issue Date:	04/18/2023 10:05
Account No:	50107	Process Date:	04/18/2023
Route:	12 READ SEQ:02470	Process Time:	10:30 AM
Address:	794 MARE CREEK STANVILLE	Requested By:	(606)478-3231
Meter No:	W953655	Assigned To:	By: TKG
Sequence No:	02470		
Comments: Please re-read this guy's meter.... Thank you!!			

Please re-read this guy's meter.... Thank you!!

Old Meter Reading: 3960 Old Meter No: W953655 Remote Meter No: _____
New Meter Reading: ~~3960~~ 0 New Meter No: 21P987322 Seal No: _____

got a ~~deal~~ ~~leak~~ leak on
his line change meter

Labor Charges			
Name	Rate	Hours	Amount
Total Labor Charges			

Equipment Charges			
Name	Rate	Hours	Amount
Total Equipment Charges			

Material Charges				
Part #	Item	Qty.	Unit Price	Total
Total Material Charges				

Equipment Charges			
Name	Rate	Hours	Amount
Total Equipment Charges			

Outside Vendor Charges			
Name	PO Number	Job Date	Amount
Total Vendor Charges			

Charge Summary	
Labor Charges	
Equipment Charges	
Material Charges	
Vendor Charges	
Total	

[illegible]

NAME OF SYSTEM:

Betsy Layne

2023

AOC ☒ LINE PATROL ___ 3 YEAR SURVEY ___ 5 YEAR SUREVY ___

NOTES Vehicle backed over meter

Date: 6-5-23 Inspector: Jimmy Lawson Area Marked: YES ___ NO ☒

Location: 156 KY Oil Village

Above Ground: ☒ Under Ground: [] Leak Status: Hazardous: ☒ Non-hazardous: ___

Nearest Building: 20 ft. Leak Class: 1 Service: ☒ Main: ___

Was Bar Hole Test Performed? Yes ☒ No ___

Cause of leak: Vehicle backed over meter

Natural forces() Excavation 1st Party: () Excavation 3rd Party: () Outside force: ☒ Mat. or weld: () Equipment: ()

Incorrect operation() Internal Corrosion: () External Corrosion: () Atmospheric Corrosion: () Other: ()

REPAIR REPORT

Type & size of pipe: Steel ___ PVC ___ PE ___

Year pipe installed: _____

Navitas locate request: Yes ___ No ___

CGI reading in ditch _____

Pipe condition:

External: smooth ___ badly pitted ___ flaking ___ deteriorated ___ bubble ___

Internal: smooth ___ badly pitted ___ flaking ___ deteriorated ___ bubble ___

Existing pipe info. _____ Photo: Yes ___ No ___

Repair crew: Jimmy Lawson

Report filed by: J. Lawson Date: 6-5-23

FORM 1

North



Natural Gas - Leak Data Report - Leak Call / Reported Damage / Maintenance

2023

Section 1 - Required Information Section for any Telephonic Report Received

Taken by: UL Date: 8/5/23 Time: 11:40 AM/PM
Info Source: Call / Work Order / Other - Specify: _____
Person reporting or requesting: Chris Tomlinson
Community: _____ City: _____ County: _____
Street: 1500 KY Oil Village Address #: _____ Apt #: _____ Zip Code: _____
Phone Number: _____ Cell Phone: 606 767 1385
Nearest Cross Street if no address: _____ @ _____
Location and description of Leak or Damage at above address: N Side of Office @ KY Oil
Office

Is leak: Inside / Outside / Both (NOTES: In the event of any reported gas leak, instruct the callers to)
Is odor: Strong / Mild / Random / No Odor (evacuate the area to a safe distance immediately - tell them not)
Does any sound accompany smell? Hissing / Whistling / Roaring (to use light switches or take any action that might create a)
How Long have you been smelling the leak or hearing the gas sound? 5 min (spark of any kind and to leave any doors)
(used to depart (if inside) open.)

Who dispatched? Jimmy Lawson Time of Dispatch: 11:42 AM/PM

Work Site Evaluation and Observations by Dispatched Technician

Dispatched Person Arrival Time: 12:32 AM / PM. Are any AOC's noted? No / Yes: Specify: 4:00

Is reporting party (if leak or damage call) on the scene? Yes / No

Leak or Damage found: Yes / No

If Yes, Navitas side or customer side?

If the leak is on Navitas' side use form 1 to record leak.

Work Conclusion

Dispatched person declares repair complete, site safe and departing @ 4:00 AM/PM

Actions, Notes, comments or other details of activity on site if needed, including if follow up is needed and the type of follow up:

Change regulator
Change RISER was Bent

Signature of Investigator Jimmy Lawson
Date 6-5-23 Name of System _____

5/3/2023

Work Order

Work Order Code & Desc: RER - RE-READ METER

Name:	LAKYN STAMBAUGH	
Service Id:	55650	
Account No:	55650A	
Route:	05	READ SEQ:00725
Address:	972 KY RT 1107 VAN LEAR	
Meter No:	2165518	
Sequence No:	00725	

Phone No: (606)793-0280
Issue Date: 04/17/2023 08:15
Process Date: 04/17/2023
Process Time: 08:30 AM
Requested By: Lakyn (606)793-0280
Assigned To: By: TKG

Could you re-read meter please? Her usage more than doubled this last billing. Thanks!!!
--

Old Meter Reading: 1943 Old Meter No: 2165518 Remote Meter No: _____
New Meter Reading: 02 New Meter No: 21P987549 Seal No: _____

[illegible]

Utility Notes: _____ Previous Read: 2023.00000 Date: 04/06/2023

Work Done By: Jimmy Lawson Date Completed: 4-18-23

		Material Charges			
Part #	Item	Qty.	Unit Price	Total	

Charge Summary	
Labor Charges	
Equipment Charges	
Material Charges	
Vendor Charges	
Total	

Outside Vendor Charges				
Name	PO Number	Job Date	Amount	
Total Vendor Charges				



Natural Gas - Leak Data Report / Leak Call / Reported Damage / Maintenance

2022

Section 1 - Required Information Section for any Telephonic Report Received

Taken by: Arenda Date: 6/14/23 Time: 9:05 AM/PM 2nd Call 7/11/2023
Info Source: Call/Work Order/Other- Specify: Call
Person reporting or requesting: Ruby Blanton
Community: Van Lear City: Van Lear County: Johnson
Street: McKenzie Addition Address #: 47 Apt #: Zip Code: 41265
Phone Number Cell Phone 606-789-4206

Nearest Cross Street If no address:

Location and description of Leak or Damage at above address: Smelling gas in the neighbor's yard - he is not on gas service.

Is leak: Inside / Outside / Both { NOTES: In the event of any reported gas leak, instruct the callers to }

Is odor: Strong / Mild / Random / No Odor { evacuate the area to a safe distance immediately -- tell them not }

Does any sound accompany smell? Hissing / Whistling / Roaring { to use light switches or take any action that might create a }

How Long have you been smelling the leak or hearing the gas sound? 2 wks { spark of any kind and to leave any doors }

Who dispatched? Jimmy Larson { used to depart (If Inside) open. }

Time of Dispatch: 9:10 AM / PM

Work Site Evaluation and Observations by Dispatched Technician

Dispatched Person Arrival Time: 10:20 AM / PM. Are any AOC's noted? No Yes: Specify:

Is reporting party (if leak or damage call) on the scene? Yes / No

Leak or Damage found: Yes / No If Yes, Navitas side or customer side?

If the leak is on Navitas' side use form 1 to record leak.

Work Conclusion

Dispatched person declares repair complete, site safe and departing @ 10:30 AM / PM

Actions, Notes, comments or other details of activity on site if needed, including if follow up is needed and the type of follow up:

No Leak

Signature of Investigator Jimmy Larson

Date 7-12-23

Name of System Navitas

2023

AOC ☒ LINE PATROL ___ 3 YEAR SURVEY ___ 5 YEAR SUREVY ___

NOTES _____

Date: 7-19-23 Inspector: Jimmy Lauson Area Marked: YES ___ NO ☒

Location: 78 Millers Cr.

Above Ground: [☒] Under Ground: [] Leak Status: Hazardous: ☒ Non-hazardous: ___

Nearest Building: 30 ft. Leak Class: 1 Service: ☒ Main: ___

Was Bar Hole Test Performed? Yes ☒ No ___

Cause of leak: Unknown - Meter damaged and smelling gas

Natural forces() Excavation 1st Party: () Excavation 3rd Party: () Outside force: (☒) Mat. or weld: () Equipment: ()

Incorrect operation() Internal Corrosion: () External Corrosion: () Atmospheric Corrosion: () Other: ()

REPAIR REPORT

Type & size of pipe: Steel ___ PVC ___ PE ___

Year pipe installed: _____

Navitas locate request: Yes ___ No ___

CGI reading in ditch _____

Pipe condition:

External: smooth ___ badly pitted ___ flaking ___ deteriorated ___ bubble ___

Internal: smooth ___ badly pitted ___ flaking ___ deteriorated ___ bubble ___

Existing pipe info. _____ Photo: Yes ___ No ___

Repair crew: Jimmy Lauson

Report filed by: Jimmy Lauson Date: 7-19-23

FORM 1

North

2023

NAVITAS UTILITY CORPORATION METER CHANGEOUT/PULLED METER FORM

Acct. # 44313 Acct. Name Van Lear Hist. Society SYSTEM: Johnson Co.
Route# 4 Sequence# 545 Phone# _____
Service Address: 78 Millers Cr. Rd DATE: 7-20-23

NEW METER

Meter# 20P295486 Temp. Comp. (Y) / N
Meter Make/Size AC/250 Proof Date 22
of Dials 4 Pressure: 4 (O2) / PSI
Pressure factor 1 READING 0

OLD METER/PULLED METER

Meter# 3502369
Meter Make/Size AC/250
READING 5338

Appliances on Gas (BTUs)

Hot water heater _____ Tankless water heater _____ Cook stove _____
Central heat ✓ Ventless heater _____ Gas fireplace _____
Clothes dryer _____ Generator _____ Total BTUs _____

SERVICE CONNECTION CHECKLIST

1. Natural gas odor detected? Y / (N)
2. Appliances/vents free of combustible material? (Y) / N
3. Any alterations from manufactures specifications? Y / (N)
4. Open line found? Y / (N)
5. Proper ventilation in residence? (Y) / N
6. Vent pipes vented above roofs? (Y) / N
7. Was meter lockup checked for 10 minutes? (Y) / N

Service: Turned on: ✓ Locked off: _____ Plugged: _____

Home entry denied: Customer signature: _____

Qty.	MATERIALS	Part#
1	Regulator 1" ounce (Non-T)	6006
1	AC/250 Meter	

LEAK TEST

Gas Detector: P / F Soap (P) / F

Signature: Jimmy Lausar

# Hours	EMPLOYEE NAME
# Hours	Truck #

PIPE CONDITION REPORT

Internal corrosion: Y / (N) Severity: _____

External corrosion: Y / (N) Severity: _____

Signature: Jimmy Lausar Date: 7-20-23

1/2/2020

FORM 5



Your 1st Priority - Protect Life and then Property EVERY TIME

Natural Gas – Leak Data Report – Leak Call / Reported Damage / Maintenance

Section 1 – Required Information Section for any Telephonic Report Received

Taken by: OK Date: 7/19/23 Time: 4:45 AM/PM (PM)
Info Source: Call/Work Order/Other- Specify:
Person reporting or requesting: Debbie Burton - Van Lear Historical Society
Community: _____ City: Van Lear County: Johnson Co.
Street: 78 Millers Cr. Address #: _____ Apt #: _____ Zip Code: 42665
Phone Number 666-491-5577 Cell Phone _____
Nearest Cross Street if no address: _____
Location and description of Leak or Damage at above address: Meter looks damaged and smelling gas.

Is leak: Inside (Outside) Both

Is odor: Strong (Mild) / Random / No Odor

Does any sound accompany smell? Hissing / Whistling / Roaring use light switches or take any action that might create a

How Long have you been smelling the leak or hearing the gas sound? 30 min. spark of any kind and to leave any doors

used to depart (if inside) open.

Who dispatched? Jimmy Lawson Time of Dispatch: 4:50 AM/PM (PM)

Work Site Evaluation and Observations by Dispatched Technician

Dispatched Person Arrival Time: 6:00 AM / PM. Are any AOC's noted? No / Yes: Specify: _____

Is reporting party (if leak or damage call) on the scene? Yes / No

Leak or Damage found: Yes / No (If Yes use form 1)

Work Conclusion

Dispatched person declares repair complete, site safe and departing @ 7:30 AM/PM (PM)

Actions, Notes, comments or other details of activity on site if needed, including if follow up is needed and the type of follow up:

regulator leak

Signature of Investigator Jimmy Lawson

Date 7-19-23



Natural Gas - Leak Data Report / Leak Call / Reported Damage / Maintenance

2023

Section 1 - Required Information Section for any Telephonic Report Received

Taken by: Orinda Date: 12/11/2023 Time: 12:01 AM/PM
Info Source: Call/Work Order/Other- Specify: Call
Person reporting or requesting: Charles Hutton
Community: Van Lear City: Van Lear County: Johnson
Street: 2336 KYRt 302 Address #: _____ Apt #: _____ Zip Code: 41265
Phone Number _____ Cell Phone: 606-789-4042
Nearest Cross Street if no address: _____
Location and description of Leak or Damage at above address: No leak outside of house

Is leak: Inside / Outside / Both { NOTES: In the event of any reported gas leak, instruct the callers to }
Is odor: Strong / Mild / Random / No Odor { evacuate the area to a safe distance immediately - tell them not }
Does any sound accompany smell? Hissing / Whistling / Roaring { to use light switches or take any action that might create a }
How Long have you been smelling the leak or hearing the gas sound? 2 hrs { spark of any kind and to leave any doors }
{ used to depart (if inside) open. }

Who dispatched? Jimmy Lawson Time of Dispatch: 1204 AM / PM

Work Site Evaluation and Observations by Dispatched Technician

Dispatched Person Arrival Time: 1:30 AM / PM. Are any AOC's noted? No / Yes: Specify: _____

Is reporting party (if leak or damage call) on the scene? Yes / No

Leak or Damage found: Yes / No If Yes, Navitas side or customer side?

If the leak is on Navitas' side use form 1 to record leak.

Work Conclusion

Dispatched person declares repair complete, site safe and departing @ 2:15 AM / PM

Actions, Notes, comments or other details of activity on site if needed, including if follow up is needed and the type of follow up:

No leak outside of Home Turn meter off
Leak in the ~~1200~~ Home

Signature of Investigator _____

Date _____

Name of System Jimmy Lawson

209 498