

Leak Survey

Operator / Area _____

Emp/ID _____

Date _____

Case _____

GOS _____

OO / exp: _____

<u>Equipment:</u>	<u>Calibration:</u>		<u>Bump test:</u>
Type	Id #	date	date

Line Characteristics:

	Pipe Mat.	Segment / Line name
1		
2		
3		
4		

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	Notes	SAT/UNSAT/NC
1. Using current procedure? <i>Date/version</i> Issues identified by OQ insp. corrected at operational level? 192.805		
2. Task performed in accordance with procedures? 192.805		
3. Individuals are currently qualified? 192.805(b)		
4. Individuals are cognizant of the AOCs? 192.805(b)		
5. Foreman has verified OQ, records current, checked id. prior? 192.805 Name/title of who checked qualification?		

Dist: 192.723 192.723 192.723 R 327
 192.706 192.711
 Trans: 192.706 192.707
 192.705(c) 192.703

Survey Characteristics:

#	Id/Address (from/to)	Business / Non-business	Freq: 4x/ 2x/ 1x/ 3yr/ 5yr	Walking/ Mobile/ Aerial	ROW adequate for survey type?	Line Marker	Leaks: Grade	AOC / Notes
					Y / N	Sat/Unsat/ NA		

Inspection Guidance: Request previous inspection. Request year of install and/or whether pipe is protected as needed.

192.705(a) Patrol: Observe surface conditions on and adjacent to the transmission line ROW for indications of leaks, construction activity, and other factors affecting safety and operations.

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					Y / N	Sat/Unsat/ NA		