

Job Description: LS Downtown Market Green St - 2nd St to 3rd St

Maximo Work Order: 27201123

Region: South

TownCode: 0901

Sector: 0606

Project #: 805869



SYSTEM PLANNING:

- FLOW ARROWS REFLECT GAS FEED PRIOR TO THIS WO

GAS CONTROL

- THERE ARE NO SYSTEM CONTROL CONCERNS WITH THIS WO

CONSTRUCTION ENGINEERING:

- THERE ARE NO CONSTRUCTION ENGINEERING CONCERNS FOR THIS WORK ORDER

1. INSTALL AND ABANDON STEEL AND PLASTIC MAIN AND SERVICES PER SPIRE OPM STANDARDS.
2. SEE STD. 200.0 FOR PRESSURE TESTING PIPING REQUIREMENTS
3. SEE STD. 180.B FOR EFV AND/OR MANUAL SHUTOFF VALVE INSTALLATION REQUIREMENTS
4. SEE STD. 170.I AND 190.G FOR TRACE WIRE AND TEST STATION INSTALLATION INFORMATION.
5. CORROSION PROTECTION INSPECTOR TO CHECK CATHODIC PROTECTION OF ALL EXISTING CATHODICALLY PROTECTED FACILITIES EXPOSED AND PROTECTED FACILITIES EXPOSED AND DIRECT STEPS NECESSARY TO MAINTAIN PROPER ISOLATION AND CATHODIC PROTECTION AS REQUIRED. A PIPE OBSERVATION REPORT IS TO BE CREATED IN MAXIMO ON READINGS
6. INSTALL ANODES PER STD. 190.C AND/OR TEST STATIONS PER STD. 190.G PER INSTRUCTIONS FROM CORROSION PROTECTION INSPECTOR.
7. CONDUCT INITIAL CATHODIC PROTECTION SURVEY FOR NEW STEEL INSTALLATION. (See 190.I for Cathodic Protection at Tie Ins)
8. CREATE PIPE OBSERVATIONS IN MAXIMO TO DOCUMENT EXPOSED PIPE CONDITIONS PER STD. 190.A, External Corrosion. 0.
9. FOR UTILITY LOCATES, CALL ONE-CALL SYSTEM "811"OR (1-800-344-7483), AND ALL OTHER AFFECTED UTILITIES
10. CONTACT GIS DEPARTMENT FOR NECESSARY FIELD NOTES AT 314-349-2963.
11. CONTACT ROW TO SECURE NECESSARY EASEMENTS AND FOR ANY SURVEY WORK@ (314-658-5497 OR 314-349-2933)
12. SEE STD. 170.J FOR SQUEEZE-OFF PROCEDURE
13. SEE STD. 170.A FOR GAS INTERRUPTION PROCEDURE REQUIREMENTS. CONTACT SYSTEM CONTROL AT 314-658-5486 OR 314-658-5488 PRIOR TO ANY WORK
14. SEE STD. 150.A and 150.E FOR RADIOGRAPHIC EXAMINATION REQUIREMENTS
15. SPIRE PERSONNEL SHOULD FOLLOW STANDARD PRECAUTIONS REGARDING THE POTENTIAL FOR DRIP OIL TO BE PRESENT IN ACTIVE GAS MAINS AND ADHERE TO APPROVED PROCEDURES FOR MANAGEMENT/DISPOSAL OF ANY PIECES OF PIPE GENERATED IN THE COURSE OF ABANDONMENT. ANY DOCUMENTED DRIPS SHOULD BE CLEARED AND DRAINED BEFORE ABANDONMENT.

PIPE SYSTEM
PRESSURE SYS - C-002
MOP - 50 PSIG
MAOP - 58 PSIG
DESIGNED MAOP - 60 PSIG
TEST PRESSURE - 100 PSIG

ENVIRONMENTAL:

- Please contact Environmental Compliance at the number below, at least two weeks before the crew mobilizes.

Adam Watkins 816-520-6496

PIPELINE SAFETY AND COMPLIANCE/ CP:

- THERE ARE NO PIPELINE SAFETY AND COMPLIANCE CONCERNS FOR THIS WORK ORDER

Main & Service

- Existing
- Install
- Proposed
- Abandon
- Gas Pipe Casing

Gas Valve

- ⊗ Ball
- ⊗ Butterfly
- ⊗ Gate
- ⊗ Plug
- ⊗ Blow Down



Take Point



Drip



Test Station



Regulator Station



Meter Setting



Marker Post



Electronic Marker



Service Tee



Stopper / Bottom Outlet



Coupling



Insulated Coupling



Trace Wire Box

• End Cap

|| Flange

|| Insulated Flange

+ Cross

▷ Reducer

┴ Tee

∩ Vertical Ell

• Bend

— Exposed Pipe

∇ Rectifier

— Rectifier Cable

— SteamLines

Street Car Tracks

RCP Reinforced Concrete Pipe

CMP Corrugated Metal Pipe

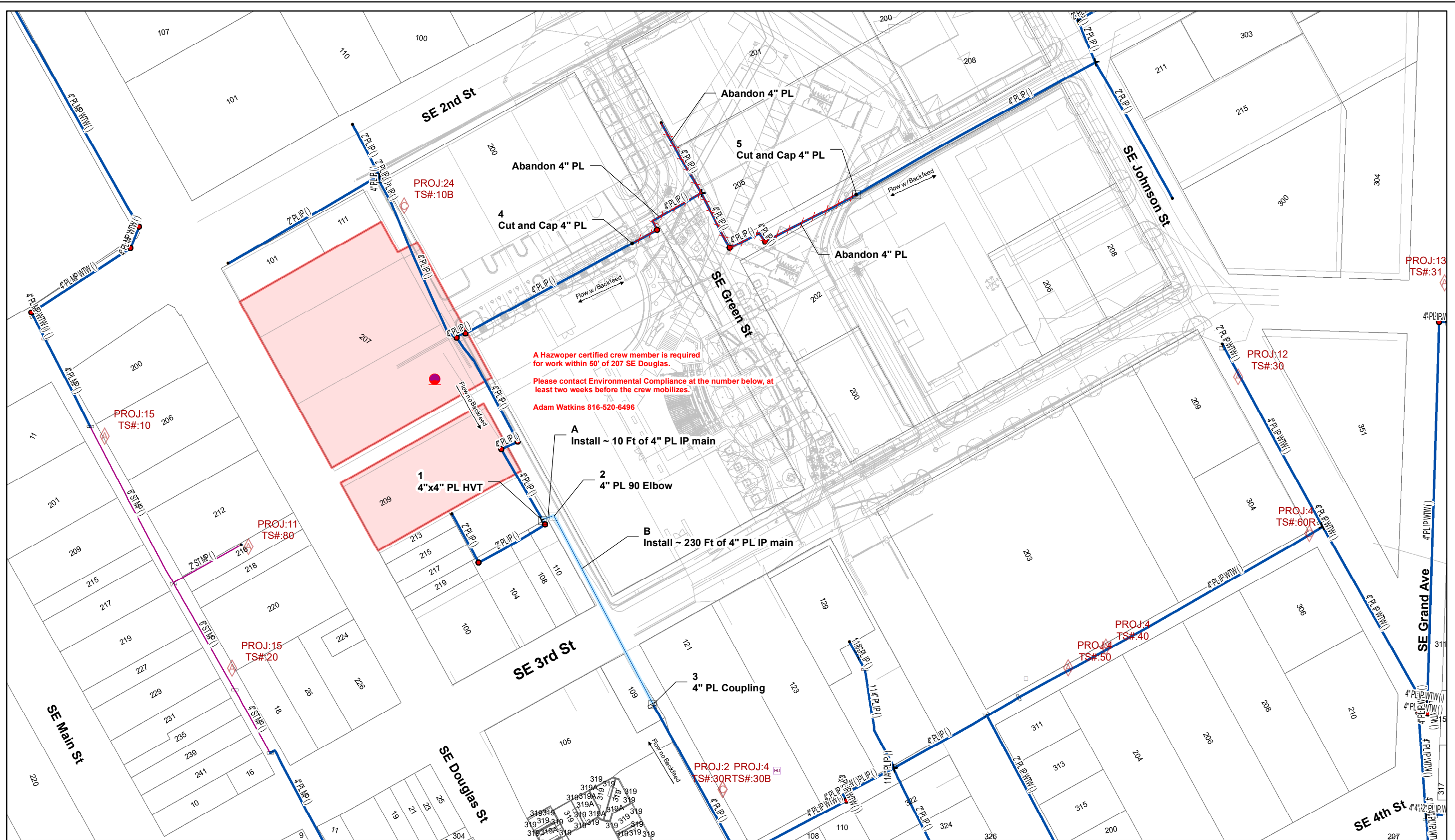
Contamination

DNR Tanks

DNR Remediation

**Check for
Work Order Authorization**

Designer :	Revision Date(s):
BKW	
Original Date:	
5-12-23	





PRESSURE TEST OF GAS MAINS
(One Test Per Sheet)

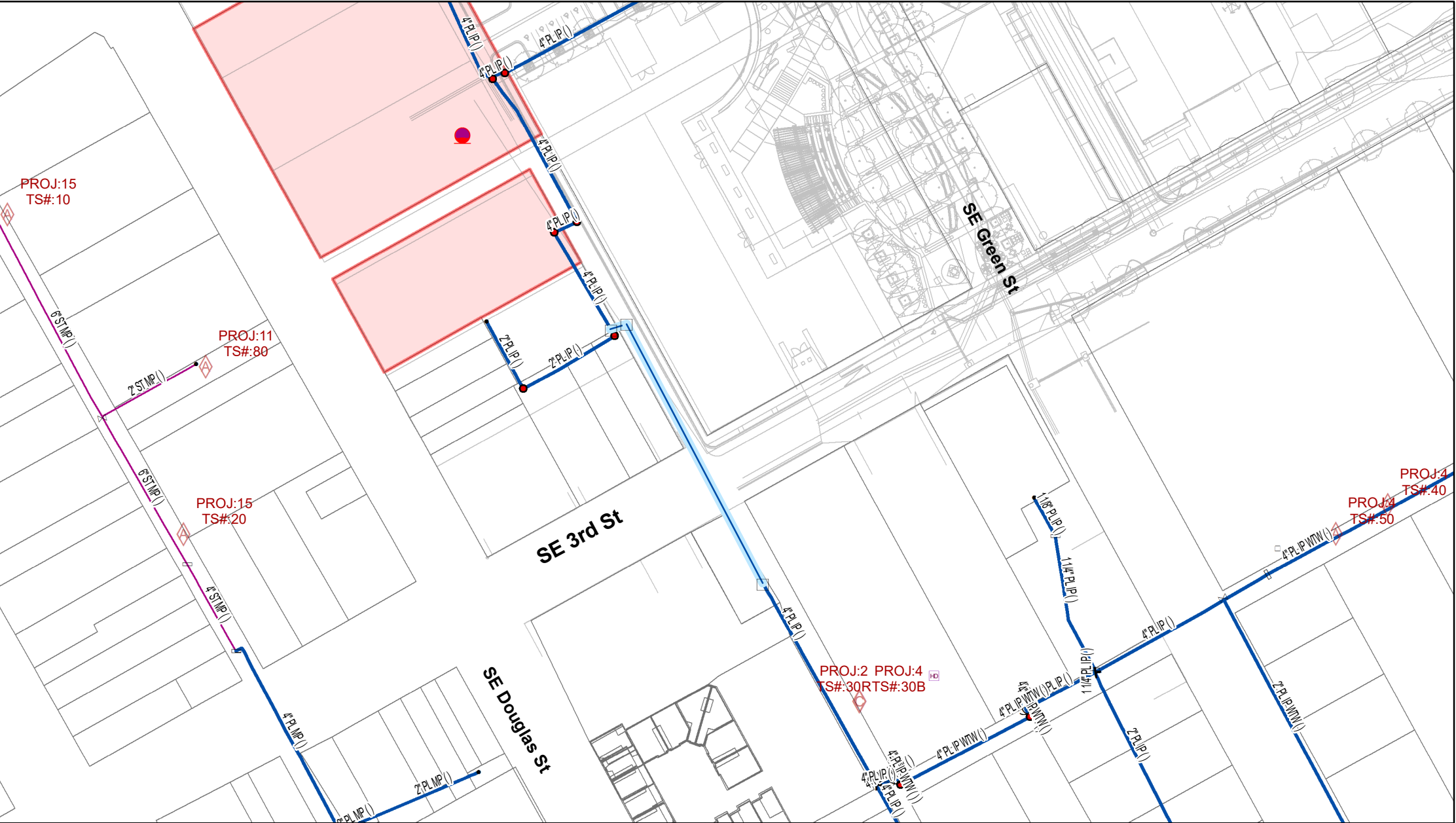
Tie-in Number _____
Soap Test ☐ Yes ☐ No
Date: _____
Time: _____
System Gauge Pressure: _____
Signature: _____

Tie-in Number _____
Soap Test ☐ Yes ☐ No
Date: _____
Time: _____
System Gauge Pressure: _____
Signature: _____

Tie-in Number _____
Soap Test ☐ Yes ☐ No
Date: _____
Time: _____
System Gauge Pressure: _____
Signature: _____

Tie-in Number _____
Soap Test ☐ Yes ☐ No
Date: _____
Time: _____
System Gauge Pressure: _____
Signature: _____

Tie-in Number _____
Soap Test ☐ Yes ☐ No
Date: _____
Time: _____
System Gauge Pressure: _____
Signature: _____



Pipe Size: _____

Length (ft): _____

Pipe Size: _____

Length (ft): _____

Pipe Size: _____

Length (ft): _____

Pressure System: TF \ SF \ FP \ HP \ IP \ MP \ LP

Test Medium: Water \ Air \ Gas Other: _____

Gauge Type:

Recording

Indicating

Dead Weight

Gauge I.D. :

Calib. Date :

Test Date:

Start Time:

End Time:

Start Press.:

End Press. :

Start Temp.*:

End Temp.*:

* Water or Pipe temperature, not ambient

If Discharge volume is over 1,000 gallons - Contact Lab for sample collection.

Note all leaks or failures, including cause, and corrective action taken in comments below.

SEE STD #200.0 FOR PRESSURE TESTING OF MAIN REQUIREMENTS.

FOR ANY QUESTIONS REGARDING THE STANDARD, PLEASE CONTACT PIPELINE SAFETY AND COMPLIANCE AT 314-341-0537 OR 816-266-3033.

Conducted By:

Comments: _____

Signature: _____

Date: _____

Printed Name: _____

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