PR001
27-Apr-11

# Preliminary Report of Accident

U.S. Department of Labor
Mine Safety and Health Administration

| 1. Accident Type: | 2. Accident Classification | 3. Date/Time of Accident | 4. Date/Time of Death | 5. Fatal Case No |
|---|---|---|---|---|
| Fatal Injury | Fall of Roof or Back | 04/25/2011 01:45 AM | 04/25/2011 01:45 AM | 5 |

6. Mine Information :

| a) Mining Company Name | b) Mine Name | c) Parent of Mining Company |
|---|---|---|
| Subtropolis Mining Co. | Subtropolis | W Thomas Mackall |

| 7. Mine Location : a) City | b) County | c) State | 8. Mine ID Number: | 9. Union: |
|---|---|---|---|---|
| Petersburg | Mahoning | OH | 33-04547 | NO |

| 10. Primary Mineral Mined: | 11. Number of Mine Employees: a) Total | b) Underground | c) Open Pit/Quarry | d) Mill/Prep Plant | e) Other |
|---|---|---|---|---|---|
| Crushed, Broken Limestone NEC | 26 | 11 | | 11 | 4 |

| 12. Contractor Name: | 13. Union | 14. Contractor ID Number: |
|---|---|---|
| | | |

| 15. Contractor Address: a) City | b) County | c) State | d) Zip Code |
|---|---|---|---|
| | | | |

| 16. Number of Contractor Employees: a) Total | b) Underground | c) Open Pit/Quarry | d) Mill/Prep Plant | e) Other |
|---|---|---|---|---|
| | | | | |

| 17. Number of Persons in Mine at Time of Accident: | | 18. Number of Persons Unaccounted For: | |
|---|---|---|---|
| a) Mine Employees: 5 | b) Contractor Employees: 0 | a) Mine Employees: 0 | b) Contractor Employees: 0 |

19) Location of Accident

- [X] 01-Underground
- [ ] 02-Surface at Underground
- [ ] 03-Open Pit
- [ ] 06-Dredge Mining
- [ ] 07-Advance Mining
- [ ] 08-Retreat Mining
- [ ] 30-Mill/Prep Plant
- [ ] 99-Office Facility
- [ ] Other (specify)

20. Mining Height: Feet Inches

| 21. Nonfatal Injuries: | 22. Fatal Injuries: |
|---|---|
| | 1 |

| 23. Victim Information : a) Name | b) Age |
|---|---|
| Jason E. Gudat | 31 |

| c) Regular Job Title: | d) Activity at Time of Accident: | [X] Mine Employee |
|---|---|---|
| Roof & Rib Drill Operator | Walking toward drill | |

| 24. Experience : | Years Weeks Days | | Years Weeks Days | | Years Weeks Days | | Years Weeks Days |
|---|---|---|---|---|---|---|---|
| a) Total: | 6 | b) at the mine: | 6 | c) at activity (23d) | 4 | d) with Contractor | |

| 25. Autopsy Performed: | If Yes, Location | 26. Mine Telephone No.: |
|---|---|---|
| YES | Mahoning County, OH | (330) 542-2670 |

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

The victim was walking from 1 North 4 thru 34 X-cut toward the drill located at 1 North 5 when a slab of roof fell, striking him.

The information provided in this notice is based on preliminary data ONLY and does not represent final determinations regarding the nature of the incident or conclusions regarding the cause of the accident.

| 28. Equipment Manufacturer: | 29. Model: |
|---|---|
| | |

| 30. District: | 32. Field Office: | 33. Event Number: |
|---|---|---|
| M2000 Northeastern | Hebron OH | 0907369 |

| 34. Accident Investigator: | 35. MSHA Person Notified: | Date | Time |
|---|---|---|---|
| Thomas J. Shilling | Brian P. Goepfert | 04/25/2011 | 02:15 A |

| 36. Type of Report: | 37. Name of Preparer and Date Prepared: | Date |
|---|---|---|
| Initial | Mike Hancher MH | 04/27/2011 |

38. Reason For Amendment: