

# Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Powered Haulage		3. Date/Time of Accident 02/12/2013 09:40 PM		4. Date/Time of Death 02/14/2013 03:27 PM		5. Fatal Case No 5							
6. Mine Information :															
a) Mining Company Name Consolidation Coal Company			b) Mine Name Loveridge #22			c) Parent of Mining Company CONSOL Energy Inc									
7. Mine Location :		a) City Fairview		b) County Marion		c) State WV		8. Mine ID Number: 46-01433		9. Union: YES					
10. Primary Mineral Mined: BITUMINOUS COAL UNDERGROUND			11. Number of Mine Employees:		a) Total 692	b) Underground 601	c) Open Pit/Quarry		d) Mill/Prep Plant	e) Other 91					
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:			b) Contractor Employees:		a) Mine Employees:			b) Contractor Employees:							
19) Location of Accident									20. Mining Height:						
<input checked="" type="checkbox"/> 01-Underground	<input type="checkbox"/> 03-Open Pit		<input type="checkbox"/> 07-Advance Mining		<input type="checkbox"/> 30-Mill/Prep Plant		<input type="checkbox"/> Other (specify)			Feet	Inches				
<input type="checkbox"/> 02-Surface at Underground	<input type="checkbox"/> 06-Dredge Mining		<input type="checkbox"/> 08-Retreat Mining		<input type="checkbox"/> 99-Office Facility					7	0				
21. Nonfatal Injuries:			22. Fatal Injuries:		1										
23. Victim Information :				a) Name Glen Clutter		b) Age 51									
c) Regular Job Title: General Inside Labor			d) Activity at Time of Accident: Motorman			<input checked="" type="checkbox"/> Mine Employee									
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days							
a) Total:		31 50 2		b) at the mine:		9 20 2		c) at activity (23d)		9 20 2		d) with Contractor		0 0 0	
25. Autopsy Performed: NO						26. Mine Telephone No.: (304) 986-6033									

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

On Tuesday, February 12, 2013, at approximately 9:40 P.M., the supply crew was transporting four shield carriers of longwall parts along the Main West track haulage. The crew experienced a derailment with four cars off track. While attempting to put one of the cars back on track, the victim was seriously injured. The shield carrier was raised with an air bag, and while trying to straighten the wheels and pry the wheel flange over the rail with a slate bar, the load quickly shifted hitting the slate bar. The slate bar flew back and struck the victim on the right side of his face. The victim was knocked unconscious and was transported to the surface where he was flown by Health Net to Ruby Memorial Hospital.

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: Erwin			29. Model:					
30. District: C0300 Morgantown		32. Field Office: Bridgeport WV			33. Event Number: 6256976			
34. Accident Investigator: Richard A. Vincent			35. MSHA Person Notified: John Hayes [DataTrac]		Date 02/12/2013		Time 10:10 PM	
36. Type of Report: Amended		37. Name of Preparer and Date Prepared: LS for Bob E. Cornett, DM			Date 02/15/2013			
38. Reason For Amendment: Mr. Glen Clutter died 2/14/2013 at 3:27 p.m.								