

PR001
08-Jun-11

Preliminary Report of Accident

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



1. Accident Type: Fatal Injury		2. Accident Classification Slip or Fall of Person		3. Date/Time of Accident 06/04/2011 07:49 PM		4. Date/Time of Death 06/04/2011 07:49 PM		5. Fatal Case No 6		
6. Mine Information :										
a) Mining Company Name Fairbanks Gold Mining Inc			b) Mine Name Fort Knox Mine			c) Parent of Mining Company Kinross Gold Corp				
7. Mine Location : a) City Fairbanks			b) County Fairbanks North Star			c) State AK		8. Mine ID Number: 50-01616		9. Union: NO
10. Primary Mineral Mined: GOLD ORE MINING, N.E.C.			11. Number of Mine Employees: a) Total 529		b) Underground 317		c) Open Pit/Quarry 117		d) Mill/Prep Plant 95	
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 144					b) Underground 20		c) Open Pit/Quarry 1		d) Mill/Prep Plant 123	
17. Number of Persons in Mine at Time of Accident: a) Mine Employees: 144 b) Contractor Employees: 123					18. Number of Persons Unaccounted For: a) Mine Employees: 0 b) Contractor Employees: 0					
19) Location of Accident <input type="checkbox"/> 01-Underground <input type="checkbox"/> 02-Surface at Underground <input checked="" type="checkbox"/> 03-Open Pit <input type="checkbox"/> 06-Dredge Mining <input type="checkbox"/> 07-Advance Mining <input type="checkbox"/> 08-Retreat Mining <input type="checkbox"/> 30-Mill/Prep Plant <input type="checkbox"/> 99-Office Facility <input type="checkbox"/> Other (specify)								20. Mining Height: Feet Inches		
21. Nonfatal Injuries: 0			22. Fatal Injuries: 1							
23. Victim Information : a) Name Michael J. Murray					b) Age 39					
c) Regular Job Title: Mill Operator					d) Activity at Time of Accident: Cleaning floor <input checked="" type="checkbox"/> Mine Employee					
24. Experience : Years Weeks Days a) Total: 1 14 0 b) at the mine: 1 14 0 c) at activity (23d) 0 26 0 d) with Contractor 0 0 0										
25. Autopsy Performed: If Yes, Location YES Fairbanks, AK						26. Mine Telephone No.: (907) 490-2215				

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

The victim was sweeping in the crusher building when he fell through an opening in the floor approximately 60 feet to a floor below. The cover for the opening was not in place.

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: Not listed			29. Model:						
30. District: M7000 Western		32. Field Office: Anchorage AK			33. Event Number: 1140880				
34. Accident Investigator: Bart T. Wrobel			35. MSHA Person Notified: Randy Cardwell			Date 06/04/2011		Time 10:10 P	
36. Type of Report: Amended			37. Name of Preparer and Date Prepared: Mike Hancher <i>mh</i>			Date 06/07/2011			
38. Reason For Amendment: Item No. 23 (a), (b), 27									