

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Powered Haulage		3. Date/Time of Accident 11/30/2012 01:20 AM		4. Date/Time of Death 11/30/2012 03:30 AM		5. Fatal Case No 18				
6. Mine Information :												
a) Mining Company Name WHITE BUCK COAL COMPANY			b) Mine Name Pocahontas Mine			c) Parent of Mining Company Alpha Natural Resources, Inc.						
7. Mine Location :		a) City Rupert		b) County Greenbrier		c) State WV		8. Mine ID Number: 46-09154		9. Union: NO		
10. Primary Mineral Mined: BITUMINOUS COAL UNDERGROUN		11. Number of Mine Employees:		a) Total 97	b) Underground 91	c) Open Pit/Quarry 0	d) Mill/Prep Plant 0		e) Other 6			
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: 18		b) Contractor Employees: 0			a) Mine Employees: 0		b) Contractor Employees: 0					
19) Location of Accident								20. Mining Height:				
<input checked="" type="checkbox"/> 01-Underground	<input type="checkbox"/> 02-Surface at Underground	<input type="checkbox"/> 03-Open Pit	<input type="checkbox"/> 06-Dredge Mining	<input checked="" type="checkbox"/> 07-Advance Mining	<input type="checkbox"/> 08-Retreat Mining	<input type="checkbox"/> 30-Mill/Prep Plant	<input type="checkbox"/> 99-Office Facility	Other (specify)	Feet	Inches		
									5	6		
21. Nonfatal Injuries:		22. Fatal Injuries:		1								
23. Victim Information :												
a) Name Steven A. O'Dell				b) Age 27								
c) Regular Job Title: Electrician				d) Activity at Time of Accident: Electrician				<input checked="" type="checkbox"/> Mine Employee				
24. Experience :												
Years Weeks Days			Years Weeks Days			Years Weeks Days			Years Weeks Days			
a) Total:	3	2	0	b) at the mine:	1	35	0	c) at activity (23d)	1	4	1	d) with Contractor
25. Autopsy Performed: If Yes, Location NO								26. Mine Telephone No.: (304) 392-5807				

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

At approximately 1:20 a.m., on Friday, November 30, 2012, a 27-year old section electrician was fatally injured when he was caught between the maintenance scoop and the ripper head of the continuous mining machine. The accident occurred on the No. 2 section, 006 mechanized mining unit. As he was performing maintenance on the continuous mining machine, the maintenance scoop traveled through a ventilation curtain in the No. 6 right crosscut, striking the victim.

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: Fairchild			29. Model: Maintenance Scoop		
30. District: C0400 Mt. Hope		32. Field Office: Summersville WV		33. Event Number: 6291631	
34. Accident Investigator: Jerome K. Stone		35. MSHA Person Notified: Shane Adkins		Date 11/30/2012	Time 02:05 A
36. Type of Report: Initial		37. Name of Preparer and Date Prepared Larry T. Metz		Date 11/30/2012	
38. Reason For Amendment:					