

# Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Fall of Face, Rib, Pillar or Highwall		3. Date/Time of Accident 03/20/2012 02:00 AM		4. Date/Time of Death 03/20/2012 02:00 AM		5. Fatal Case No 4				
6. Mine Information :												
a) Mining Company Name Mike Roberts			b) Mine Name Vortex Mine			c) Parent of Mining Company Mike D Roberts						
7. Mine Location :		a) City Great Falls		b) County Judith Basin		c) State MT		8. Mine ID Number: 24-01835		9. Union: NO		
10. Primary Mineral Mined: GEMSTONES MINING, N.E.C.			11. Number of Mine Employees:		a) Total 4	b) Underground 4	c) Open Pit/Quarry		d) Mill/Prep Plant	e) Other		
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: 1		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							
21. Nonfatal Injuries:			22. Fatal Injuries:		1							
23. Victim Information :												
a) Name Michael D. Roberts			b) Age 54									
c) Regular Job Title: Owner				d) Activity at Time of Accident: Mining			<input checked="" type="checkbox"/> Mine Employee					
24. Experience :	Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days					
a) Total:	1	51	3	b) at the mine:	1	51	3	c) at activity (23d)	1	51	3	d) with Contractor
25. Autopsy Performed: If Yes, Location NO								26. Mine Telephone No.:				

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

The victim was found approximately 250 feet inside the mine. He was working alone and had been struck by a fall of rib.

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: M6000 Rocky Mountain		32. Field Office: Helena MT			33. Event Number: 6558704		
34. Accident Investigator: Sidney J. Garay			35. MSHA Person Notified: Dustan W. Crelly		Date 03/20/2012	Time 01:10 P	
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>			Date 03/22/2012		
38. Reason For Amendment:							