

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Powered Haulage		3. Date/Time of Accident 07/26/2012 05:40 PM		4. Date/Time of Death 07/26/2012 05:40 PM		5. Fatal Case No 10		
6. Mine Information :										
a) Mining Company Name Strata Corporation			b) Mine Name Portable Crushing Plant #1			c) Parent of Mining Company James R Bradshaw				
7. Mine Location :		a) City Fairview		b) County Richland		c) State MT		8. Mine ID Number: 21-02843		9. Union: NO
10. Primary Mineral Mined: CONSTRUCTION SAND & GRAVEL M			11. Number of Mine Employees:		a) Total 4	b) Underground 0	c) Open Pit/Quarry 4	d) Mill/Prep Plant 0	e) Other 0	
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: 4		b) Contractor Employees: 0			a) Mine Employees: 0		b) Contractor Employees: 0			
19) Location of Accident									20. Mining Height:	
<input type="checkbox"/> 01-Underground	<input checked="" 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: 0		22. Fatal Injuries: 1								
23. Victim Information :										
a) Name Peter P. Faust				b) Age 49						
c) Regular Job Title: Equipment Operator				d) Activity at Time of Accident: Greasing head pulley				<input checked="" type="checkbox"/> Mine Employee		
24. Experience :										
Years Weeks Days			Years Weeks Days			Years Weeks Days			Years Weeks Days	
a) Total:		0 18 4	b) at the mine:		0 18 4	c) at activity (23d)		0 18 4	d) with Contractor	
25. Autopsy Performed: If Yes, Location NO						26. Mine Telephone No.: (406) 747-9926				

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

The victim was on the discharge end of a 150-foot stacker belt conveyor greasing the head pulley when the conveyor was energized. He fell off the conveyor approximately 60 feet to the ground below.

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: Superior			29. Model: Power stacker		
30. District: M6000 Rocky Mountain		32. Field Office: Rapid City SD			33. Event Number: 6557508
34. Accident Investigator: David J. Small		35. MSHA Person Notified: Melvin Lapin		Date 07/27/2012	Time 06:37 P
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>			Date 07/30/2012
38. Reason For Amendment:					