

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Machinery		3. Date/Time of Accident 01/21/2013 11:50 AM		4. Date/Time of Death 01/21/2013 03:05 PM		5. Fatal Case No 2				
6. Mine Information :												
a) Mining Company Name Lhoist North America of Arizona Inc.			b) Mine Name Apex Quarry and Plant			c) Parent of Mining Company Lhoist Group						
7. Mine Location :		a) City N Las Vegas		b) County Clark		c) State NV		8. Mine ID Number: 26-00081		9. Union: NO		
10. Primary Mineral Mined: LIME, N.E.C.		11. Number of Mine Employees:		a) Total 128	b) Underground 0	c) Open Pit/Quarry 64		d) Mill/Prep Plant 34	e) Other 30			
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: 47		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 type="checkbox"/> 03-Open Pit	<input type="checkbox"/> 07-Advance Mining	<input checked="" 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 Kenneth Korakis				b) Age 54								
c) Regular Job Title: Mechanic				d) Activity at Time of Accident: Maintenance				<input checked="" type="checkbox"/> Mine Employee				
24. Experience :												
Years Weeks Days			Years Weeks Days			Years Weeks Days			Years Weeks Days			
a) Total:	6	7	4	b) at the mine:	6	7	4	c) at activity (23d)	6	7	4	d) with Contractor
25. Autopsy Performed: If Yes, Location YES Clark County, NV								26. Mine Telephone No.: (702) 643-7702				

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):
The victim went to the Kiln #2 pre-heat deck to repair a leaking hydraulic cylinder that activates the pusher arm on the southeast side of the kiln. He was found under the cylinder.

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: M7000 Western		32. Field Office: Henderson NV				33. Event Number: 1137960		
34. Accident Investigator: Jerry D. Hulsey				35. MSHA Person Notified: Bart T. Wrobel		Date 01/21/2013		Time 12:30 P
36. Type of Report: Amended		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>				Date 01/22/2013		
38. Reason For Amendment: Items: 24 a, b, c								