PR001 19-Nov-13	Pre	liminary Re	eport of	Accident		. Department o e Safety and Healtl		on 🐼
1. Accident Type:	2. Accident Classi	ification		3. Date/Time of	Accident	4. Date/Time of De	ath	5. Fatal Case No
Fatal Injury	Explosives ar	nd Breaking Agents		11/17/2013	07:00 AM	11/17/2013	07:30 AM	16
6. Mine Information :						•		
a) Mining Company Name		b) Mine Name			c) Parent of Mining	Company	
Star Mine Operations, LL	С	Revenue Mine	9		F	Rory Williams; Ja	mes Willian	าร
7. Mine Location :	a) City	b) C	ounty	c) State		8. Mine ID Number	:	9. Union:
Ou	ray	Ouray		со		05-03528		NO
10. Primary Mineral Mined: SILVER ORE MINING, N	1.E.C.	11. Number of Mine Employees:	a) Total 103	b) Underground 64	c) Open Pit/	(Quarry d) N	1ill/Prep Plant 36	e) Other 3
12. Contractor Name:		Į	100		13. Un	ion		tor ID Number:
15. Contractor Address:	a) City			b) County		c) State	d) Z	p Code
16. Number of Contractor En	nployees:	a) Total b)	Underground	c) Open l	Pit/Quarry	d) Mill/Pi	ep Plant	e) Other
17. Number of Persons in Mi	ie at Time of Accid	ent:		18. Number of	Persons Unacc	counted For:		
a) Mine Employees:	23 1	b) Contractor Employee	es:	a) Mine Emp	oloyees:	0 b) C	ontractor Emp	obyees: 0
19) Location of Accident 01-Underground 02-Surface at Undergrou		3-Open Pit 6-Dredge Mining		nce Mining] 30-Mill/Prep] 99-Office Fa		ner (specify)	20. Mining Height: Feet Inches
21. Nonfatal Injuries:	20 22. Fat	al Injuries: 2						
23. Victim Information :		a) Name as K. Cappanno		b) Age 33				
c) Regular Job Title:		d) Activit	y at Time of A	ccident:			X N	line Employee
Powderman Tra	nee			Walking tow	ards old wor	kings		
•	eeks Days	Years Wee	eks Days		Years Week	as Days		Years Weeks Days
		at the mine: 05	5 1 ¢)	at activity (23d)	0 0		Contractor	
25. Autopsy Performed: YES Montrose C	If Yes, Location	۱ 				26. Mine Teleph (97)	one No.:)) 325-7241	

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

A miner entered an area of the mine where an explosive had been previously detonated. When he did not emerge, the shift foreman went in to search for him. Eventually they were both found by other miners working in the area, and those miners immediately evacuated the mine. Mine rescue teams entered the mine and found the two miners. During the recovery operation, they detected fatal levels of carbon monoxide. The teams brought the victims to the surface. Twenty miners were taken to the hospital, and three were kept overnight. All 20 have since been released.

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 Man	ufacturer:		29. Model:			
30. District: M6000	Rocky Mountain	32. Field Offi	ce: Denver CO		33. Event Number 6f	r: 616214
34. Accident Investig Mike Tromble	•		35. MSHA Person Notified: Kenneth Valentine		Date 11/17/2013	Time 08:20 A
36. Type of Report:	Initial	37. Name of Preparer a	nd Date Prepared: Mike Harcher MA		ם 11/18/	Date 12013

38. Reason For Amendment:

MSHA Form 7000-13, March05 (revised)

Preliminary Report of Accident

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

19 1101 10												
1. Accident Type:	2. Accident Clas	sification			3. 1	Date/Time of	fAccident		4. Date/Time of D	eath	5. Fatal	Case No
Fatal Injury	Explosives a	and Breaking	Agents		1	1/17/2013	07:00 A	м	11/17/2013	07:30 AM	1	17
6. Mine Information :							·			·		
a) Mining Company Name		b) Min	e Name					c)	Parent of Mining	Сотрану		
Star Mine Operations, L	LC	Rever	nue Mine	Э				R	ory Williams; Ja	ames Willia	ims	
7. Mine Location :	a) City		b) C	County		c) State		8	. Mine ID Number	r:	9. Union:	
0	uray	(Duray			со			05-03528			NO
10. Primary Mineral Mined SILVER ORE MINING,		11. Nun Mine En		a) Total 103	,	erground 64	c) Open	Pit/Q	Quarry d) 🕅	Mill/Prep Plan 36	it e)) Other 3
12. Contractor Name:		_ I					13.	. Uni	on	14. Contra	actor ID Nu	ımber:
15. Contractor Address:	a) City				b) Cou	nty		_	c) State	d) 7	Zip Code	
16. Number of Contractor E	Employees:	a) Total	b)) Undergrou	ınd	c) Open	Pit/Quarry		d) Mil <i>V</i> P	rep Plant	e) Othe	r.
17. Number of Persons in M	iine at Time of Acci	ident:			18	8. Number o	fPersons U	nacco	ounted For:			
a) Mine Employees:	23	b) Contractor	Employe	es:		a) Mine En	ployees:		0 b) С	Contractor En	nployees:	0
19) Location of Accident X 01-Underground 02-Surface at Undergr		03-Open Pit 06-Dredge Mit	aina		lvance Min etreat Mini		30-Mill/F	•		her (specify)	20. M Fee	lining Height: t Inches
21. Nonfatal Injuries:		atal Injuries:	2					- TAC			<u> </u>	
23. Victim Information :	I	a) Name				b) Age						
	Rick	L. Williams				59						
c) Regular Job Title:			d) Activit	y at Time of						X	Mine Emp	nloyee
Shift Superviso	or				A	ttempting	to rescue	mine	er			
•	Weeks Days		Years We	eks Days			Years W	Veeks	Days		Years We	eks Days
	22 5 b) at the mine:	1 23	2 5	c) at activ	/ity (23d)	0	21	5 d) with	n Contractor		
25. Autopsy Performed:	If Yes, Locatio	on							26. Mine Teleph			
YES Montrose,	CO								(97	0) 325-7241		

YES Montrose CO

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

A miner entered an area of the mine where an explosive had been previously detonated. When he did not emerge, the shift foreman went in to search for him. Eventually they were both found by other miners working in the area, and those miners immediately evacuated the mine. Mine rescue teams entered the mine and found the two mners. During the recovery operation, they detected fatal levels of carbon monoxide. The teams brought the victims to the surface. Twenty miners were taken to the hospital, and three were kept overnight. All 20 have since been released.

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:	32. Field Office:	33. Event Number:
M6000 Rocky Mountain	Denver CO	6616214
34. Accident Investigator:	35. MSHA Person Notified:	Date Time
Mike Tromble	Kenneth Valentine	11/17/2013 08:20 A
36. Type of Report	37. Name of Preparer and Date Prepared:	Date
Initial	Mike Harcher M	11/18/2013

38. Reason For Amendment:

