

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Fall of Rib		3. Date/Time of Accident 04/11/2014 08:45 AM		4. Date/Time of Death 04/11/2014 08:45 AM		5. Fatal Case No 5			
6. Mine Information :											
a) Mining Company Name Mississippi Lime Company			b) Mine Name Mississippi Lime Company-Ste. Genevieve			c) Parent of Mining Company Margaret J Heckman					
7. Mine Location :		a) City Ste Genevieve		b) County Ste Genevieve		c) State MO		8. Mine ID Number: 23-00542		9. Union: YES	
10. Primary Mineral Mined: LIME, N.E.C.			11. Number of Mine Employees:		a) Total 559	b) Underground 128	c) Open Pit/Quarry 386		d) Mill/Prep Plant 45	e) Other 45	
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:		72		b) Contractor Employees:		a) Mine Employees:		0		b) Contractor Employees:	
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 type="checkbox"/> 07-Advance Mining	<input type="checkbox"/> 08-Retreat Mining	<input type="checkbox"/> 30-Mill/Prep Plant	<input type="checkbox"/> 99-Office Facility	<input type="checkbox"/> Other (specify)	Feet	Inches	
21. Nonfatal Injuries:			22. Fatal Injuries:			2					
23. Victim Information :		a) Name Chris R. Rawson			b) Age 29						
c) Regular Job Title: Scaler		d) Activity at Time of Accident: Scaling					<input checked="" type="checkbox"/> Mine Employee				
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days			
a) Total:		7 45 3		b) at the mine:		6 12 4		c) at activity (23d)		17 2	d) with Contractor
25. Autopsy Performed: If Yes, Location YES Mineral Area Hospital, Farmington MO								26. Mine Telephone No.: (573) 883-4020			

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):
The victims were scaling from a man basket on a boom truck when large slabs of rock struck the boom causing it to separate from the truck.

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: International			29. Model:		
30. District: M5000 South Central		32. Field Office: Rolla-South MO			33. Event Number: 6609900
34. Accident Investigator: William O'Dell			35. MSHA Person Notified: Elwood M. Burriss		Date 04/11/2014
					Time 09:00 A
36. Type of Report: Amended		37. Name of Preparer and Date Prepared Mike Hancher <i>MH</i>			Date 04/13/2014
38. Reason For Amendment: Items 3; 11a,b,de,e; 17a					

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6. Mine Information :									
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7. Mine Location : a) City Ste Genevieve			b) County Ste Genevieve		c) State MO	8. Mine ID Number: 23-00542		9. Union: YES	
10. Primary Mineral Mined: LIME, N.E.C.		11. Number of Mine Employees:		a) Total 559	b) Underground 128	c) Open Pit/Quarry	d) Mill/Prep Plant 386	e) Other 45	
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: 72		b) Contractor Employees:			a) Mine Employees: 0		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: 2							
23. Victim Information :									
a) Name John E. Hahl			b) Age 53						
c) Regular Job Title: Scaler				d) Activity at Time of Accident: Scaling			<input checked="" type="checkbox"/> Mine Employee		
24. Experience :									
Years	Weeks	Days	Years	Weeks	Days	Years	Weeks	Days	Years
a) Total:	8	16	6	b) at the mine:	7	43	6	c) at activity (23d)	3
									16
									0
									d) with Contractor
25. Autopsy Performed: If Yes, Location YES Mineral Area Hospital, Farmington MO							26. Mine Telephone No.: (573) 883-4020		

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