

PR001
30-Apr-14

Preliminary Report of Accident

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



1. Accident Type: Fatal Injury		2. Accident Classification Slip or Fall of Person		3. Date/Time of Accident 02/27/2014 04:25 PM		4. Date/Time of Death 02/28/2014 09:37 AM		5. Fatal Case No 9							
6. Mine Information :															
a) Mining Company Name Martin Marietta Materials, Inc.			b) Mine Name AMES MINE			c) Parent of Mining Company Martin Marietta Materials Inc									
7. Mine Location :		a) City Ames		b) County Story		c) State IA		8. Mine ID Number: 13-00014		9. Union: NO					
10. Primary Mineral Mined: CRUSHED & BROKEN LIMESTONE		11. Number of Mine Employees:		a) Total 27	b) Underground 18	c) Open Pit/Quarry		d) Mill/Prep Plant 9	e) Other						
12. Contractor Name: Interstate Power Systems, Inc						13. Union NO		14. Contractor ID Number: T02							
15. Contractor Address:		a) City Minneapolis		b) County Hennipen		c) State MN		d) Zip Code 55425-5425							
16. Number of Contractor Employees:		a) Total 1		b) Underground 1		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: 20		b) Contractor Employees: 1			a) Mine Employees:		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"/> 04-Dredge Mining	<input type="checkbox"/> 05-Advance Mining	<input type="checkbox"/> 06-Retreat Mining	<input type="checkbox"/> 07-Mill/Prep Plant	<input type="checkbox"/> 08-Office Facility	<input type="checkbox"/> Other (specify)	Feet	Inches					
21. Nonfatal Injuries:		22. Fatal Injuries: 1													
23. Victim Information :				a) Name Courtney Johnston		b) Age 27									
c) Regular Job Title: Field Mechanic			d) Activity at Time of Accident: Repair work							<input checked="" type="checkbox"/> Contractor Employee					
24. Experience :	Years		Weeks		Days		Years		Weeks		Days				
a) Total:	2	32	0	b) at the mine:	1	0	0	c) at activity (23d)	1	26	0	d) with Contractor	3	4	0
25. Autopsy Performed: If Yes, Location YES Polk County						26. Mine Telephone No.: (515) 232-3363									

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

A contract mechanic was repairing a hydraulic pump on a scaler when he fell from the attached walkway approximately 5 feet to the ground. The victim was airlifted to a hospital where he died on February 28, 2014.

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: Gradall			29. Model: XL5110			
30. District: M4000 North Central		32. Field Office: Fort Dodge IA			33. Event Number: 6518238	
34. Accident Investigator: Thaddeus J. Sichmeller			35. MSHA Person Notified: Gerald D. Holeman		Date 02/27/2014	Time 04:31 P
36. Type of Report: Initial		37. Name of Preparer and Date Prepared Mike Hancher <i>MH</i>			Date 03/03/2014	
38. Reason For Amendment:						