

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Machinery		3. Date/Time of Accident 04/28/2014 11:30 AM		4. Date/Time of Death 04/28/2014 11:30 AM		5. Fatal Case No 10		
6. Mine Information :										
a) Mining Company Name KLONDEX MIDAS MINE INC			b) Mine Name Midas Mine			c) Parent of Mining Company KLONDEX MINES LTD				
7. Mine Location :		a) City Midas		b) County Elko		c) State NV		8. Mine ID Number: 26-02314		9. Union: NO
10. Primary Mineral Mined: GOLD ORE MINING, N.E.C.			11. Number of Mine Employees:		a) Total 102	b) Underground 74	c) Open Pit/Quarry		d) Mill/Prep Plant 25	e) Other 3
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: 25		b) Contractor Employees:			a) Mine Employees: 0		b) Contractor Employees: 0			
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: 0		22. Fatal Injuries: 1								
23. Victim Information :				a) Name Richard C. Otto		b) Age 53				
c) Regular Job Title: Miner			d) Activity at Time of Accident: Jackleg Drilling				<input checked="" type="checkbox"/> Mine Employee			
24. Experience :	Years Weeks Days		Years Weeks Days			Years Weeks Days		Years Weeks Days		
a) Total:	32 0 0		b) at the mine: 11 43 0			c) at activity (23d) 11 43 0		d) with Contractor		
25. Autopsy Performed: If Yes, Location YES Washoe County Medical Examiner, Reno, NV						26. Mine Telephone No.: (775) 529-0625				

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):
The miner was drilling with a jackleg drill when his clothing became entangled in the drill steel of the machine. Another miner found him unresponsive in the heading. The victim was transported to a local hospital where he was pronounced dead.

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: Midwestern			29. Model: P83		
30. District: M7000 Western		32. Field Office: Elko NV			33. Event Number: 6597617
34. Accident Investigator: Joel Dozier			35. MSHA Person Notified: James Fitch		Date 04/28/2014
					Time 12:52 P
36. Type of Report: Initial		37. Name of Preparer and Date Prepared Mike Hancher <i>MH</i>			Date 04/28/2014
38. Reason For Amendment:					