PR001 29-Sep-14

Preliminary Report of Accident

U.S. Department of Labor

Mine Safety and Health Administration

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1. Accident Type:	2. Acciden	t Classificati	ion		3. Date/Time	of Accide	nt	4. Date/T	ime of De	ath	5. Fatal Case No
Fatal Injury	Powere	d Haulage			09/26/201	14 07:0	5 AM	09/26	6/2014	07:30 AM	19
6. Mine Information :											
a) Mining Company Name			b) Mine Name				c)	Parent of	Mining C	ompany	
United Salt Corporation	HOCKLEY MINE				Texas United Corp						
7. Mine Location : a) City			b) C	c) State 8. Mine			. Mine ID	e ID Number: 9.		9. Union:	
Hockley			Harris	TX		41	41-02478		NO		
10. Primary Mineral Mined: SALT MINING		11.	Number of Mine Employees:	a) Total b) 55	Underground 30	c) O _l	pen Pit/C	Quarry (d) M	ill/Prep Plai 16	e) Other
12. Contractor Name:							13. Uni	on		14. Contr	actor ID Number:
15. Contractor Address:	a)	City		b)	County			c) Sta	te	d) :	Zip Code
16. Number of Contractor En	nployees:	a) To	otal b)	Underground	c) Ope	en Pit/Qua	ırry	d) Mill/Pro	ep Plant	e) Other
17. Number of Persons in Min	ne at Time o	of Accident:			18. Number	of Person	s Unacc	ounted Fo	r:		
a) Mine Employees:	30	b) Co	ntractor Employe	es:	a) Mine E	imployees:		0	b) Co	ntractor En	iployees:
19) Location of Accident 01-Underground		03-Op	on Dit	07-Advance	Mining	30 Mi	ill/Prep	Dlant	Othe	er (specify)	20. Mining Height:
X 02-Surface at Undergrou	und		edge Mining	08-Retreat			fice Fac		Out	i (specify)	Feet Inches
21. Nonfatal Injuries:		22. Fatal Inj		00-Ketteat	woung))-(A	inc rac	inty			
21. Notifiatal Injuries.			1								
23. Victim Information :		a) Na Wark G. B			b) Age 55						
c) Regular Job Title:			d) Activity	at Time of Acci						X	Mine Employee
Maintenance Me	echanic				Repairing	Forklift					
Maintenance Me	echanic eeks Days		Years We	eks Days	Repairing		s Weeks	Days			Years Weeks Days
Maintenance Me	eeks Days	b) at the			Repairing activity (23d)	Year	s Weeks	Days	d) with	Contractor	
Maintenance Me 24. Experience: Years W	eeks Days					Year		2	Telepho	ne No.:	Years Weeks Days
Maintenance Me 24. Experience : Years W a) Total: 1 4 25. Autopsy Performed: YES	eeks Days 9 2 If Yes, L	ocation	mine: 1 49) 2 c) at	activity (23d)	Year 1	49	2 26. Mine	Telephor (713)		Years Weeks Days
Maintenance Me 24. Experience: Years W	eeks Days 9 2 If Yes, L	ocation	e mine: 1 49	2 c) at	activity (23d)	Year 1 scue and r	49	2 26. Mine operation	(713)	ne No.:) 877-2600	Years Weeks Days
Maintenance Me 24. Experience: Years W a) Total: 1 4 25. Autopsy Performed: YES 27. Description of Accident (in the victim was performing) The information provided in the regarding the cause of the accident (in the victim).	eeks Days 9 2 If Yes, L nclude equip ng mainter this notice is	ocation pment involv nance on a	ed, the exact locate forklift in the r	ion in the mine, a	activity (23d) and status of re- nen the forklit	Year 1 scue and r ft moved	49 recovery forwar	2 26. Mine operation d, pinnir	e Telephoi (713) s): ng him a	ne No.:) 877-2600 gainst a w	Years Weeks Days
Maintenance Me 24. Experience: Years W a) Total: 1 4 25. Autopsy Performed: YES 27. Description of Accident (in The victim was performing) The information provided in the second se	eeks Days 9 2 If Yes, L nclude equip ng mainter this notice is ident.	ocation pment involv nance on a	ed, the exact locate forklift in the r	ion in the mine, a	activity (23d) and status of re- nen the forklit	Year 1 scue and r ft moved	49 recovery forwar	2 26. Mine operation d, pinnir	e Telephor (713) ss): ng him a	ne No.:) 877-2600 gainst a w	Years Weeks Days
Maintenance Me 24. Experience: Years W a) Total: 1 4 25. Autopsy Performed: YES 27. Description of Accident (in The victim was performing the victim was performing the cause of the accident that the performance of the performa	eeks Days 9 2 If Yes, L nclude equip ng mainter this notice is ident.	pment involv	ed, the exact locate forklift in the r	2 c) at ion in the mine, a nill building wh	activity (23d) and status of re- nen the forklit	Year 1 scue and r ft moved	49 recovery forwar	2 26. Mine operation d, pinnir	e Telephor (713) s): ng him a	e of the incid	Years Weeks Days
Maintenance Me 24. Experience: Years W a) Total: 1 4 25. Autopsy Performed: YES 27. Description of Accident (in The victim was performing the victim was performing the cause of the accident that the performance of the performa	eeks Days 9 2 If Yes, L nclude equip ng mainter this notice is ident.	pment involv	ed, the exact local	2 c) at ion in the mine, a nill building wh	activity (23d) and status of remember the forklit t represent fina	Year 1 scue and r ft moved	49 recovery forwar	2 26. Mine operation d, pinnir	e Telephor (713) s): ng him a	e of the incid 30T7 It Number:	Years Weeks Days cooden support pole. dent or conclusions 4913 Time
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Maintenance Me 24. Experience: Years W a) Total: 1 4 25. Autopsy Performed: YES 27. Description of Accident (in The victim was performing to the victim was performed to the victim was per	eeks Days 9 2 If Yes, L nclude equip ng mainter this notice is ident.	pment involvenance on a	ed, the exact local	on in the mine, and ill building when the mine when the mi	activity (23d) and status of remember the forklith trepresent final Springs LA son Notified: eichen	Year 1 scue and r ft moved	49 recovery forwar	2 26. Mine operation d, pinnir	the nature FD8 33. Even	gainst a w e of the incid 30T7 t Number: 660	Years Weeks Days cooden support pole. lent or conclusions 4913 Time 07:26 A