CAI-2008-19

#### UNITED STATES DEPARTMENT OF LABOR MINE SAFETY AND HEALTH ADMINISTRATION

#### COAL MINE SAFETY AND HEALTH

#### REPORT OF INVESTIGATION

Surface Coal Mine

Fatal Powered Haulage Accident August 22, 2008

> B & L Trucking (L444) Varney, WV

No. 65 Mine Double Bonus Coal Company Wyoming County, WV ID No.46-09020

Accident Investigators

Rodney Lusk Accident Investigator Coal Mine Safety and Health Inspector

Terry Marshall Mechanical Engineer Mechanical and Engineering Safety Division Approval and Certification Center

Originating Office Mine Safety and Health Administration District 4 100 Bluestone Rd Mt Hope, WV 25880 Robert G. Hardman, District Manager

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# **OVERVIEW**

On Friday, August 22, 2008, at approximately 11:00 p.m., Danny L. Jones, a 38-year old truck driver was fatally injured when he exited the coal haulage truck he was operating as it struck a berm, left the roadway, and ran over him with the rear tandem wheels.

The accident occurred because the RD 686SX Mack Coal Haulage Truck had numerous mechanical defects, the seat belt was missing, and the victim was not properly trained. The victim had three days experience operating a coal haulage truck at this site.

### **GENERAL INFORMATION**

B & L Trucking, (MSHA Contractor No. L444) was a subcontractor hired by Appalachian Leasing, (MSHA Contractor No. L572), to haul coal from the Double Bonus Coal Company, No. 65 underground mine, ID No. 46-09020, to the Keystone Service Industries Incorporated, Keystone No. 1 Plant, ID No. 46-03444. The victim was traveling mine haulage roads bonded by Bluestone Coal Corporation and maintained by M&P Services, (MSHA Contractor No. Q533), a subsidiary of Bluestone Coal Corporation.

The Double Bonus Coal Company, No. 65 mine, is a room and pillar mine in Wyoming County, West Virginia. The mine utilizes continuous mining machines

and shuttle car haulage to mine bituminous coal from the Fire Creek Seam. Two mining sections produce approximately 4,000 tons daily with three production shifts. Coal is produced utilizing both advance and retreat mining methods.

The principal officials for the mine at the time of the accident were:

| James C. Justice II | Controller   |
|---------------------|--------------|
| Kenny Lambert Sr    | President    |
| Frank Canterbury    | Mine Foreman |

The Keystone Service Industries Incorporated, Keystone No. 1 Preparation Plant, is located near the town of Keystone, in Wyoming County, West Virginia. The facility employs 33 persons and operates 24 hours per day, 6 days a week. The Preparation Plant receives raw coal from the Double Bonus No. 65 mine and other mines.

The principal officials for the Preparation Plant at the time of the accident were:

| James C. Justice II | President |
|---------------------|-----------|
| Bruce Lambert       |           |
| Raymond Rotenberry  | 1         |

Appalachian Leasing is located at Rocky Gap, Bland County, Virginia. Appalachian Leasing provides contract coal haulage for Bluestone Coal Corporation to haul coal from the Double Bonus Coal Company, No. 65 mine, to the Keystone No. 1 Preparation Plant, and from other mines on this property. Appalachian Leasing operates approximately 26 trucks, 24 hours per day, six days per week at this location.

The principal officials for Appalachian Leasing at the time of the accident were:

| Kenny Compton | General Manager |
|---------------|-----------------|
| Mike Taylor   | 0               |

The victim was employed by B&L Trucking which provided contract coal haulage via subcontract with Appalachian Leasing. The address for B&L Trucking is P.O. Box 129, Varney, Mingo County, West Virginia. B&L Leasing operates three trucks which haul coal from the Double Bonus Coal Company, No. 65 mine, to the Keystone No. 1 Preparation Plant.

The principal officials for B&L Trucking at the time of the accident were:

| Lucille Gibson | Owner                   |
|----------------|-------------------------|
| Earl Collins   | Foreman/Mechanic/Driver |

### **DESCRIPTION OF ACCIDENT**

On Friday, August 22, 2008, Danny L. Jones, and Johnny Ball, truck drivers, arrived at the shop area of B&L Trucking around 7:30 pm. Jones conducted a preoperational check of the Mack # 67 RD 686SX tandem axle coal haulage truck with assistance from Ball.

The truck drivers remained at the shop building for about two hours, refueling, checking tires, brakes, water, and other fluid levels. The two drivers then proceeded to the Double Bonus Coal Company, No. 65 mine to be loaded with coal for transport to the Keystone No. 1 Preparation Plant. Upon arrival at the No. 65 mine, at approximately 9:50 p.m., Ball's truck was loaded and he proceeded to the preparation plant. A few minutes later, Jones' truck was loaded and he proceeded from the mine to the preparation plant.

Jones was traveling some distance behind Ball along a mine haulage road that begins at No. 65 Mine and extends to the Keystone No. 1 Preparation Plant. The mine haulage road has varying grades, both uphill and downhill, but remains largely level or uphill for a distance of approximately three miles to the top of Burke Mountain. After crossing the top of Burke Mountain, the level dirt haulage road extended approximately four miles to a paved secondary road, known as Route 6.

Ball and Jones traveled to an intersection with Route 6, where an additional road leads to the Keystone No. 1 Preparation Plant. The first road, known as the Slate Dump Haul Road, leads to the plant via the plant's refuse disposal facility. The other road leading off Rt. 6 is known as the Pumpkin Patch Haul Road, which extends approximately two miles along a level grade, and then extends downhill and on to the preparation plant.

Ball and Jones traveled along the Pumpkin Patch Haul Road, with Ball leading the way. At approximately 11:00 p.m., the trucks traveled over the crest of a hill, and Jones' truck veered left of center for a distance of approximately 100 feet, striking the berm. Jones (victim) exited the truck as the truck continued along the berm, and the rear tandem wheels ran over him. The truck continued approximately 400 feet along the berm, crossed a ditch and a gas well access road, and ultimately struck the hillside. The truck remained in the upright position, and the force of the impact caused the left front wheel assembly to break away.

Ball was in front of Jones and slowed, as he saw in his mirror, the lights of Jones' truck go left down the road and hit the hill side. Ball immediately walked to the victim's truck and discovered Jones was not there. He then backtracked along the truck's path and found Jones between the berm and the haul road, approximately 400 feet upgrade from the truck.

Upon reaching the victim, Mr. Ball went into shock. Another coal truck was coming up the Pumpkin Patch Road to the accident scene, and the driver called by CB Radio for help. The McDowell County Ambulance Authority, along with the West Virginia State Police, arrived at the accident scene. The victim was transported to Welch Community Hospital and pronounced dead by the McDowell County Medical Examiner.

### INVESTIGATION OF ACCIDENT

MSHA was notified by the MSHA Call Center that a fatal accident had occurred at the Bluestone Coal Corporation. MSHA personnel were immediately dispatched to the accident site and arrived on August 22, 2008. A 103(k) Order was issued to ensure the safety of all persons during the accident investigation.

The investigation was conducted with cooperation from the West Virginia Office of Miners' Health, Safety, and Training, MSHA Technical Support, Bluestone Coal Corporation, Double Bonus Coal Company, Appalachian Leasing, and B&L Trucking employees.

# DISCUSSION

# Truck Information

### <u>General</u>

The truck involved in the accident was a 1978 Mack, Model RD686SX Tandem Axle Drive. The maximum Gross Vehicle Axle Weight Rating (GVAWR) was 61,700 pounds. Weigh tickets indicated the empty truck weighed approximately 21,200 pounds. The weight of the load on the truck at the time of the accident was estimated to be at least 52,360 pounds. This is equivalent to an estimated gross vehicle weight of 73,560 pounds, approximately 18 percent above the GVAWR of the truck.

The coal from the victim's truck was transferred by an excavator to a truck operated by Appalachian Leasing Coal truck and taken to the Preparation Plant and weighed. Actual weight of coal was 48,360 pounds. It was estimated that one ton was left in the truck and 1 ton spilled on the ground.

The truck RD686SX was in poor mechanical condition. The defects found on the day of the accident were:

- 1. No seat belts provided;
- 2. No properly operating door latches for either side of the truck;
- 3. No audible warning device for low air pressure;
- 4. Air pressure gauge needles (green and orange) that measure the primary and secondary air braking system pressure, were plumbed backwards;

- 5. Air pressure gauge that measures the primary and secondary air braking system was reading 15 to 20 psi higher than actual pressure;
- 6. No tachometer or speedometer;
- 7. The transmission's 4<sup>th</sup> and 5<sup>th</sup> gears would automatically disengage (jump out of gear) without constant pressure applied to the gear shift lever;
- 8. The engine brake (Jacob Engine Brake) was wired straight through from a toggle switch by-passing the clutch and throttle pedal solenoids;
- 9. The throttle pedal was mounted to a removable floor pan that was not secured to the cab of the truck;
- 10. No functional starter switch. The truck engine was started by touching two wires together;
- 11. The dual circuit air braking system was defeated due to incorrect plumbing and a defective check valve for the secondary air tank. If one side failed, the entire system failed; and,
- 12. No back-up alarm.

The truck defects found on the day of the accident were known by the foreman of B & L Trucking. The defects listed above were obvious to the foreman and were not corrected, recorded, or reported before putting the truck into service. The truck was not maintained in safe operating condition and should have been removed from service.

During the investigation, no oversight was indicated being done by Appalachian Leasing. No records of this truck being maintained in safe operating condition were found, nor records showing that defects had been corrected, nor that the truck had been removed from service.

### **Transmission**

The truck was equipped with a 6-speed Maxitorque transmission model number TRXL107, which has six forward speeds and five reverse speeds. The transmission has two gear shift levers, one for speed selection and one for range selection (low, direct, reverse, and neutral). During the initial field evaluation, the main box gearshift lever (speed selection) was found in neutral and the (rear compound) gearshift lever was found in low. The transmission was removed from the truck to allow visual inspection of the internal components. Visual inspection revealed that a weld repair of the shifting rail assembly for the 4<sup>th</sup>/5<sup>th</sup> gear sliding clutch had failed. This condition would cause the transmission to disengage or jump out of gear when the 4<sup>th</sup> or 5<sup>th</sup> gear position was selected, unless constant downward hand pressure was maintained on the gear shift lever. This weld repair was inconsistent with the original design and is considered an improper repair of this critical mechanical component.

### Engine Brake

The engine brake had two selectable modes using a toggle switch on the dash panel, including "off" and "on." It was determined that the dash panel switch for the engine brake was wired directly to the engine brake solenoid. A clutch pedal switch for the engine brake system was present on the clutch pedal linkage, but had been electrically bypassed. An accelerator linkage switch was not found on the accelerator linkage. These switches are normally used in mechanical type engine brake control systems (the type installed in the accident truck) to deactivate the engine brake when either the clutch pedal is depressed or the accelerator pedal is depressed. If a clutch pedal switch is not used in a mechanical type engine brake control system it leaves the truck vulnerable to an engine stall if the engine brake is not manually turned off by the driver before the clutch is depressed to shift the transmission.

### Service Brakes

An inspection of the braking system was conducted with exception of the left front steering axle brake, which was damaged when the wheel assembly came off during the impact with the hillside. The brakes were not within the manufacturer's specifications. Four of the five service brakes evaluated were determined to be compromised due to brake chamber issues, including internal defects and/or over stroke conditions which adversely affected the reserve stroke of the brake chambers. These brake chambers would be highly susceptible to bottoming out at elevated brake temperatures from expansion of the brake drum and ultimately would not produce any effective braking force during prolonged, heavy braking conditions.

# <u>Haulroad</u>

The accident occurred on the Pumpkin Patch Haul Road approximately 2 miles from County Route 6. The victim traveled from the Double Bonus Coal Company, No. 65 mine, to the accident site, a distance of 10.1 miles. Weather conditions at the time of the accident were dry with good visibility. After being loaded at Double Bonus, the victim traveled approximately ½ mile level grade, then 10% down grade for ½ mile. At that point, the haul road went upgrade approximately 2 miles to the top of the mountain. At the top of the mountain, the victim traveled four miles on level dirt road and one mile on County Route 6 (paved secondary road). The Pumpkin Patch Haul Road was maintained by M & P Services, a subsidiary of Bluestone Coal Corporation. Nearly all the roads, including state roads, were maintained by M & P Services. This came about from a court settlement in the 1980's. The West Virginia Department of Highways did not maintain or regulate the trucks on these roads.

# <u>Training</u>

Adequate New Miner, Hazard, and Task Training were not provided to the victim. During interviews, Collins stated the victim was task trained when he rode with the victim during the initial trip, instructing him in proper operation of the truck. Training provided to the victim was inadequate and incorrect in the following ways:

- 1. The task training did not instruct the victim in safety aspects and safe operating procedures. Collins was driving the same truck involved in the fatal accident while he "trained" the victim who was sitting in the cab next to him. Since this truck had the numerous defects mentioned above, several aspects of the "training" were inadequate and/or incorrect.
- 2. The task training did not involve the victim practicing the assigned tasks, while being supervised, during times when production was not the primary objective.
- 3. The task training did not involve direct and immediate supervision of the victim operating the truck while transporting a load.

Additionally, Task Training forms could not be produced during the investigation.

Furthermore, the victim did not receive Hazard Training from No. 65 Mine. The victim was hired on Wednesday, August 20, 2008. He worked three shifts before his death on August 22, 2008.

The victim did not receive the full required 24 hours of Newly Employed Miner Training before being assigned work duties. The victim received the initial 8 hours of class room training and approximately 8 hours of inadequate Task Training. With only approximately 16 hours of the required 24 hours of training, the victim received his work duties and was allowed to work without the required close supervision of an experienced miner while operating a coal haulage truck on August 21–22, 2008.

# **ROOT CAUSE ANALYSIS**

An analysis was conducted to identify the most basic causes of the accident that were correctable through reasonable management controls. During the analysis, root causes were identified that, if eliminated, would have either prevented the accident or mitigated its consequences. Listed below are these root causes and their corresponding corrective actions implemented to prevent a recurrence of a similar accident:

**<u>Root Cause</u>**: Management of B & L Trucking, Appalachian Leasing, No. 65 Mine, and Keystone No. 1 Plant did not have an effective procedure in place to ensure

that mobile equipment was properly maintained. Multiple defects were found on the truck.

**Corrective Action:** Management of B & L Trucking, Appalachian Leasing, No. 65 Mine, and Keystone No. 1 Plant shall provide in writing, a plan for regular examinations, maintenance and repairs for all equipment. This plan must include recording and reporting defects that affect safety to the mine operator.

**<u>Root Cause</u>**: Management of B & L Trucking, Appalachian Leasing, No. 65 Mine, and Keystone No. 1 Plant failed to assure that adequate New Miner, Hazard, and Task Training were provided to the victim.

<u>Corrective Action</u>: Management of B & L Trucking, Appalachian Leasing, No. 65 Mine, and Keystone No. 1 Plant shall provide in writing a plan for proper New Miner, Hazard, and Task Training. This must include proper documentation of the training. Management will assure that trainers are aware of the requirements affecting miners to be trained.

<u>**Root Cause:</u>** An improper preoperational examination was performed and management failed to require miners to correct defects affecting safety prior to placing equipment in service.</u>

<u>Corrective Action</u>: Management shall develop a plan, with proper documentation, to ensure that 77.1606 (c) is followed and require defects affecting safety be corrected before equipment is placed in service.

#### CONCLUSION

Danny L. Jones, a 38-year old truck driver, was fatally injured when he exited the coal haulage truck he was operating as it struck a berm and ran over him with the rear tandem wheels.

The accident occurred because the truck was not properly maintained and had numerous safety defects. The truck was missing a seat belt, the door latches were missing, and a critical transmission component was broken. Additionally, the victim was not properly trained and sufficient management oversight was not provided to assure safety defects were corrected prior to placing the truck into service.

Approved by:

Robert G. Hardman District Manager

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### **ENFORCEMENT ACTIONS**

- 1. A 103(k) Order No. 6623866, was issued on August 22, 2008, to assure the safety of all persons using the Pumpkin Patch Haul Road. Only those persons designated, Company, State, Union, and MSHA representatives, are allowed in this area until the area has been inspected and deemed safe for travel.
- 2. A 104(d) (1) Citation No. 6623922, was issued to B & L Trucking for violation of 30 CFR, §77.1606(a).

The 1978 Mack Model RD686SX Tandem Drive Axle Truck, Vin # RD686SX4910 being used by this subcontractor to haul coal from Double Bonus Coal Company, across Bluestone Coal Corporation haul roads to Keystone Service Industries preparation plant, had defects affecting safety that were not recorded or reported to the operator by the subcontractor. The truck was involved in a fatal accident that occurred on August 22, 2008.

Defects found to exist on the day of the accident are as follows:

- a. No seat belts were provided;
- b. No properly operating door latches were provided for either side of the truck;
- c. No audible warning device for low air pressure;
- d. Air pressure gauge needles (green and orange) that measure the primary and secondary air braking system pressure, were plumbed backwards;
- e. Air pressure gauge that measures the primary and secondary air braking system were reading 15 to 20 psi higher than actual pressure;
- f. No tachometer or speedometer was provided;
- g. The transmissions' 4<sup>th</sup> and 5<sup>th</sup> gears would automatically disengage (jump out of gear) without constant pressure applied to the gear shift lever;
- h. The engine brake (Jacob Engine Brake) was wired straight through from a toggle switch by-passing the clutch and throttle pedal solenoids;
- i. The throttle pedal was mounted to a removable floor pan that was not secured to the cab of the truck;
- j. No functional starter switch was provided;
- k. The dual circuit air braking system was defeated due to incorrect plumbing and a defective check valve for the secondary air tank; and,
- l. No back-up alarm was provided.

This is an unwarrantable failure to comply with a mandatory standard and constitutes reckless disregard by the subcontractor. B & L Trucking foreman, Earl Collins, had driven the truck, rode in the truck with the victim, and allowed the victim to operate the truck with these conditions present. These defects were easily observable and were present on the truck prior to the truck being placed in operation.

3. A 104(d)(1) Order No. 6623923, was issued to B & L Trucking, for violation of 30 CFR, §77.1606(c).

Defects affecting safety existed on the 1978 Mack Model RD686SX Tandem Axle Truck, VIN # RD686SX4910 that was being used by this subcontractor to haul coal from Double Bonus Coal Company to Keystone Service Industries Inc., preparation plant. The truck was involved in a fatal accident that occurred on August 22, 2008.

Defects found to exist on the day of the accident are as follows:

- a. No seat belts were provided;
- b. No properly operating door latches were provided for either side of the truck;
- c. No audible warning device for low air pressure;
- d. Air pressure gauge needles (green and orange) that measure the primary and secondary air braking system pressure, were plumbed backwards;
- e. Air pressure gauge that measures the primary and secondary air braking system were reading 15 to 20 psi higher than actual pressure;
- f. No tachometer or speedometer was provided;
- g. The transmissions' 4<sup>th</sup> and 5<sup>th</sup> gears would automatically disengage (jump out of gear) without constant pressure applied to the gear shift lever;
- h. The engine brake (Jacob Engine Brake) was wired straight through from a toggle switch by-passing the clutch and throttle pedal solenoids;
- i. The throttle pedal was mounted to a removable floor pan that was not secured to the cab of the truck;
- j. No functional starter switch was provided;
- k. The dual circuit air braking system was defeated due to incorrect plumbing and a defective check valve for the secondary air tank; and,
- l. No back-up alarm was provided.

This is an unwarrantable failure to comply with a mandatory standard and constitutes reckless disregard by the subcontractor. B & L Trucking

foreman, Earl Collins, had driven the truck, rode in the truck with the victim, and allowed the victim to operate the truck with these conditions present. These defects were easily observable and were present on the truck prior to the truck being placed in operation.

4. A 104(d)(1) Order No. 6623924, was issued to B & L Trucking, for violation of 30 CFR, §48.25.

Danny L. Jones (victim) did not fully receive the required 24 hours of newly employed miner training before being assigned work duties. Mr. Jones received the initial 8 hours of class room training from a certified instructor. After less than the required additional 16 hours of training, some of which was riding with Mr. Collins, foreman, Mr. Jones was assigned work duties and began performing these duties on the second day of employment without close supervision. This is an unwarrantable failure to comply with a mandatory standard and constitutes aggravated conduct by the operator.

5. A 104(d)(1) Order No. 6623925, was issued to B & L Trucking, for violation of 30 CFR, §48.27(a)(1).

Employee Danny L. Jones did not receive proper task training before being assigned to operate the coal haulage truck, Vin # RD686SX4910. The employee was involved in a fatal accident on August 22, 2008, while he was operating the truck. Training provided to the victim was inadequate in the following ways:

- a. The victim was not instructed in the safety aspects and safe operating procedures of the truck.
- b. Supervised practice operating the truck during non-production was not provided.
- c. Supervised operation of the truck during production was not provided.
- 6. A 104(a) Citation No. 8084148, was issued to Appalachian Leasing, Inc., for violation of 30 CFR, §77.1606(a).

The 1978 Mack Model RD686SX Tandem Drive Axle Truck, Vin # RD686SX4910 being used by this subcontractor to haul coal from Double Bonus Coal Company, across Bluestone Coal Corporation Haul Roads to Keystone Service Industries preparation plant, had defects affecting safety that were not recorded or reported to the operator by the subcontractor. The truck was involved in a fatal accident that occurred on August 22, 2008. Defects found to exist on the day of the accident are as follows:

- a. No seat belts were provided;
- b. No properly operating door latches were provided for either side of the truck;
- c. No audible warning device for low air pressure;
- d. Air pressure gauge needles (green and orange) that measure the primary and secondary air braking system pressure, were plumbed backwards;
- e. Air pressure gauge that measures the primary and secondary air braking system were reading 15 to 20 psi higher than actual pressure;
- f. No tachometer or speedometer was provided;
- g. The transmission's 4<sup>th</sup> and 5<sup>th</sup> gears would automatically disengage (jump out of gear) without constant pressure applied to the gear shift lever;
- h. The engine brake (Jacob Engine Brake) was wired straight through from a toggle switch by-passing the clutch and throttle pedal solenoids;
- i. The throttle pedal was mounted to a removable floor pan that was not secured to the cab of the truck;
- j. No functional starter switch was provided;
- k. The dual circuit air braking system was defeated due to incorrect plumbing and a defective check valve for the secondary air tank; and,
- l. No back-up alarm was provided.

B & L Trucking foreman, Earl Collins, had driven the truck, rode in the truck with the victim, and allowed the victim to operate the truck with these conditions present. These defects were easily observable and were present on the truck prior to the truck being placed in operation.

7. A 104(a) Citation No. 8084149, was issued to Appalachian Leasing, Inc., for violation of 30 CFR, §77.1606(c).

Defects affecting safety existed on the 1978 Mack Model RD686SX Tandem Axle Truck, VIN # RD686SX4910 that was being used by this subcontractor to haul coal from Double Bonus Coal Company to Keystone Service Industries Inc., preparation plant. The truck was involved in a fatal accident that occurred on August 22, 2008. Defects found to exist on the day of the accident are as follows;

- a. No seat belts were provided;
- b. No properly operating door latches were provided for either side of the truck;
- c. No audible warning device for low air pressure;
- d. Air pressure gauge needles (green and orange) that measure the primary and secondary air braking system pressure, were plumbed backwards;
- e. Air pressure gauge that measures the primary and secondary air braking system were reading 15 to 20 psi higher than actual pressure;
- f. No tachometer or speedometer was provided;
- g. The transmissions' 4<sup>th</sup> and 5<sup>th</sup> gears would automatically disengage (jump out of gear) without constant pressure applied to the gear shift lever;
- h. The engine brake (Jacob Engine Brake) was wired straight through from a toggle switch by-passing the clutch and throttle pedal solenoids;
- i. The throttle pedal was mounted to a removable floor pan that was not secured to the cab of the truck;
- j. No functional starter switch was provided;
- k. The dual circuit air braking system was defeated due to incorrect plumbing and a defective check valve for the secondary air tank; and,
- 1. No back-up alarm was provided.

B & L Trucking foreman, Earl Collins, had driven the truck, rode in the truck with the victim, and allowed the victim to operate the truck with these conditions present. These defects were easily observable and were present on the truck prior to the truck being placed in operation.

8. A 104(a) Citation No. 8084150, was issued to Appalachian Leasing, Inc., for violation of 30 CFR, §48.27(a)(1).

Employee Danny L. Jones did not receive proper task training before being assigned to operate the coal haulage truck, Vin **#** RD686SX4910. The employee was involved in a fatal accident on August 22, 2008, while he was operating the truck. Training provided to the victim was inadequate in the following ways:

- a. The victim was not instructed in the safety aspects and safe operating procedures of the truck.
- b. Supervised practice operating the truck during non-production was not provided.
- c. Supervised operation of the truck during production was not provided.

- 9. A 104(a) Citation No. 8084151, was issued to Appalachian Leasing, Inc., for violation of 30 CFR, §48.25.
  Danny L. Jones (victim) did not fully receive the required 24 hours of newly employed miner training before being assigned work duties. Mr. Jones received the initial 8 hours of class room training from a certified instructor. After less than the required additional 16 hours of training, some of which was riding with Mr. Collins, foreman, Mr. Jones was assigned work duties and began performing these duties on the second day of employment without close supervision.
- 10. A 104(a) Citation No. 8084152, was issued to Double Bonus Coal Company, for violation of 30 CFR, §77.1606(a).

The 1978 Mack Model RD686SX Tandem Drive Axle Truck, Vin # RD686SX4910 being used by this subcontractor to haul coal from Double Bonus Coal Company, across Bluestone Coal Corporation Haul Roads to Keystone Service Industries preparation plant, has defects affecting safety that were not recorded or reported to the operator by the subcontractor. The truck was involved in a fatal accident that occurred on August 22, 2008.

Defects found to exist on the day of the accident are as follows:

- a. No seat belts were provided;
- b. No properly operating door latches were provided for either side of the truck;
- c. No audible warning device for low air pressure;
- d. Air pressure gauge needles (green and orange) that measure the primary and secondary air braking system pressure, were plumbed backwards;
- e. Air pressure gauge that measures the primary and secondary air braking system were reading 15 to 20 psi higher than actual pressure;
- f. No tachometer or speedometer was provided;
- g. The transmissions' 4<sup>th</sup> and 5<sup>th</sup> gears would automatically disengage (jump out of gear) without constant pressure applied to the gear shift lever;
- h. The engine brake (Jacob Engine Brake) was wired straight through from a toggle switch by-passing the clutch and throttle pedal solenoids;
- i. The throttle pedal was mounted to a removable floor pan that was not secured to the cab of the truck;
- j. No functional starter switch was provided;

- k. The dual circuit air braking system was defeated due to incorrect plumbing and a defective check valve for the secondary air tank; and,
- l. No back-up alarm was provided.

B & L Trucking foreman, Earl Collins, had driven the truck, rode in the truck with the victim, and allowed the victim to operate the truck with these conditions present. These defects were easily observable and were present on the truck prior to the truck being placed in operation.

11. A 104(a) Citation No. 8084153 was issued to Double Bonus Coal Company, for violation of 30 CFR, §77.1606(c).

Defects affecting safety existed on the 1978 Mack Model RD686SX Tandem Axle Truck, VIN # RD686SX4910 that was being used by this subcontractor to haul coal from Double Bonus Coal Company to Keystone Service Industries Inc., preparation plant. The truck was involved in a fatal accident that occurred on August 22, 2008.

Defects found to exist on the day of the accident are as follows:

- a. No seat belts were provided;
- b. No properly operating door latches were provided for either side of the truck;
- c. No audible warning device for low air pressure;
- d. Air pressure gauge needles (green and orange) that measure the primary and secondary air braking system pressure, were plumbed backwards;
- e. Air pressure gauge that measures the primary and secondary air braking system were reading 15 to 20 psi higher than actual pressure;
- f. No tachometer or speedometer was provided;
- g. The transmissions' 4<sup>th</sup> and 5<sup>th</sup> gears would automatically disengage (jump out of gear) without constant pressure applied to the gear shift lever;
- h. The engine brake (Jacob Engine Brake) was wired straight through from a toggle switch by-passing the clutch and throttle pedal solenoids;
- i. The throttle pedal was mounted to a removable floor pan that was not secured to the cab of the truck;
- j. No functional starter switch was provided;
- k. The dual circuit air braking system was defeated due to incorrect plumbing and a defective check valve for the secondary air tank; and,

l. No back-up alarm was provided.

Easily observable defects were present on the truck. B & L Trucking foreman, Earl Collins, had driven the truck, rode in the truck with the victim, and allowed the victim to operate the truck with these conditions.

12. A 104(a) Citation No. 8084154, was issued to Double Bonus Coal Company, for violation of 30 CFR, §48.31.

Danny L. Jones (victim) an employee of subcontractor B & L Trucking, who was performing coal haulage services at the No. 65 Mine on August 20-22, 2008, did not receive hazard training prior to commencing work duties. The employee was involved in a fatal accident on August 22, 2008, while he was operating a coal haulage truck.

13. A 104(a) Citation No. 8084155, was issued to Double Bonus Coal Company, for violation of 30 CFR, §48.27(a)(1).

Employee Danny L. Jones did not receive proper task training before being assigned to operate the coal haulage truck, Vin **#** RD686SX4910. The employee was involved in a fatal accident on August 22, 2008, while he was operating the truck. Training provided to the victim was inadequate in the following ways:

- a. The victim was not instructed in the safety aspects and safe operating procedures of the truck.
- b. Supervised practice operating the truck during non-production was not provided.
- c. Supervised operation of the truck during production was not provided.
- 14. A 104(a) Citation No. 8084156 was issued to Double Bonus Coal Company, for violation of 30 CFR, § 48.25.

Danny L. Jones (victim) did not fully receive the required 24 hours of newly employed miner training before being assigned work duties. Mr. Jones received the initial 8 hours of class room training from a certified instructor. After less than the required additional 16 hours of training, some of which was riding with Mr. Collins, foreman, Mr. Jones was assigned work duties and began performing these duties on the second day of employment without close supervision.

# APPENDIX A

# Persons Participating in the Investigation

# **Bluestone Coal Corporation**

| Patrick Graham | .Safety Director |
|----------------|------------------|
| Gilbert Whitt  | .Safety Director |

## **Keystone Service Industries**, Inc.

| Eddie Ford | Sa | fety | Co | ordina | ator |
|------------|----|------|----|--------|------|
|------------|----|------|----|--------|------|

### Contractor

### **Appalachian Leasing**

| Kenny Compton | General Manager |
|---------------|-----------------|
| Mike Taylor   | 0               |
| infine rugior | of circuit      |

# **B&L** Trucking

| Lucille Gibson     | Owner                   |
|--------------------|-------------------------|
| James Earl Collins | Foreman/Mechanic/Driver |

# **DA-King Training**

| Raymond DawsonInstru | actor |
|----------------------|-------|
|----------------------|-------|

# WV Office of Miners Health Safety & Training

| C. A. Phillips      | Inspector |
|---------------------|-----------|
| Donald L. Dickerson |           |
| Fred B. Stinson     |           |
| John Szoke          | 1         |
|                     | 1         |

### Mine Safety & Health Administration

| Richard Kline   | Assistant District Manager                                     |
|-----------------|--|
| Terry Marshall. | Mechanical Engineer - Technical Support                        |
| Rodney Lusk     |  |
| Rickey Boggs    | Coal Mine Safety & Health Inspector/Educational Field Services |

# APPENDIX B

| Vettim Information       1       2. Sax       3. Woln'n's Age       4. Degree of Pipury:         Damy L. 2002       Dam met 2000       Dams and  | Accident Investigation Data - Victim Information   | U.S. Department of Labor<br>Mine Safety and Health Administration |
|---|--|---|
| 1. Name of Injunckill Employee:         2. Sax         4. Underwise App.         4. Degree of Muny:           2. Deter OM/202006         5. Time 23.00         8. Work Activity when Injunct.         6. Date of 0022/2008 b. Time: 19:30         8. Work Activity when Injunct.         8. Work Activity when Injunct.         9. Was this work activity part of regul           7.76.         Marke RD 200 String: Transm Arke         0.05         Operative contraktings track         19. Was this work activity part of regul           7.76.         Marke RD 200 String: Transm Arke         0.05         0.05         Mine: 0         3. Mine: 0         3. Mine: 0         3. Mine: 0         3. Mine: 0         0         3. Mine: 0         3. Mine: 0         0         3. Mine: 0         3. Mine: 0         0 <td></td> <td>Mille Galety and Health Administration</td>   |  | Mille Galety and Health Administration                            |
| Date         M         36         Of         Faint           Date/MMD/DDV/T         6. Date and Time Startad:         6. West bis work activity part of regul           10. Experience         8. Work Activity when injured:         0. West bis work activity part of regul         9. West bis work activity part of regul           10. Experience         0. 3         3. Work Activity when injured:         0. West bis work activity part of regul           10. Experience         0. 3         3. Mork to 0         3. Mork to 0         3. Mork to 0           10. Experience         0. 3         3. Mork to 0         3. Mork to 0         3. Mork to 0           10. Total Track Tandem Axie Tree         12. Neture of Injury or Times         0. Or 10. Total Track Tandem Axie Tree         12. Neture of Injury or Times           11. Tracking         11. Wont Directify Track Tandem Axie Tree         170         Annual:         Task:         X           12. Neture of Injury or Times         11. Mork Clear Professional:         None         1444           13. Tracking         12. Neture of Injury or Times         1444           14. Company of End treetment:         None         None         1444           14. Some of Injury or Times (A treet Market Treetmant)         None   |  | - Alexan  |
| S Date/MMDDYDY and Time 22 H1 (J O Death:<br>a Date: 0402/2008 b. Time: 20.00              6. Use and Time Started:<br>a. Date: 0402/2008 b. Time: 19:30               8. West his work activity part of regul<br>a. Date: 0402/2008 b. Time: 19:30               8. West his work activity part of regul<br>ves   X   ho  <br>Ves   X   ho  <br>Ves   X  <br>Ves   X   ho  <br>Ves  |  |   |
| a Date: 08/22/2009       b. Time: 22:00       a. Date: 08/22/2008       b. Time: 19:30         . Regular Alob Time:       0. Work Activity when Injured:       0. Weat his work activity part of regularization for the second healings fruct.       0. Weat his work activity part of regularization for the second healings fruct.       0. Weat his work activity part of regularization for the second healings fruct.       0. Weat his work activity part of regularization for the second healings fruct.       0. Weat his work activity part of regularization for the second healings fruct.         10. Experiance       0. 3       John Time:       0       3       Minne:       0       3       Minne  |  |   |
| Regular Job Tifle:       B. Work Activity when lujenct:       005 Operative coal haudage fruick:       Budy & State Property and | • • • •  |   |
| Napus Dor Time:         Years         Years <thyears< th="">         Years</thyears<>   |  |   |
| 0. Expanding         Years         Weeks         Days         b. Regular         Years         Weeks         Days         d. Total         Years  |  |   |
| a. This         C. This <t< td=""><td></td><td></td></t<>   |  |   |
| Wark Analyse         0         3         Mone:         0         3         Mining:         0         3         Mining:         0         0           10. What Directly Indicated Injury of Ilmes/<br>corr Coarly Landsman Axie Tres         17. Wining Deficiencies:         17. Wining Mining Mining         17. Wining Mining Mining         14.444           16. Oracle Schwartz (form 7000-1)         17. Union Affiliation of Victim:         9999         None (No Union Affiliation)           Victim Information:         1. Name of Injury:         5. Date and Trine Started:         9. Wore Activity when hyured:         0. Was this work activity part of reginance (form 7000-1)           10. Experimence:         2. Sex:         3. Work Activity when hyured:         0. Was this work activity part of reginance (form 7000-1)           10. Experimence:         2. Sex:         3. Work Activity when hyured:         0. Was this work activity part of reginance (form 7000-1)           10. Experimence:         2. Sex:         3. Work Activity when hyured:         0. Was this work activity part o   |  | Days Years Weeks Days Years Weeks Da<br>c: This d. Total          |
| 11. What Directly Indicade Injury or Illness?       12. Nature of Injury or Illness?       170 Run Over by Truck (Rear Wheels )         13. Treining Deficiencies:<br>Hizzard,   X         New/Ner/by-Employed Experienced Miner;         Annual:         Task:   X           14. Compary of Endpointe(I of Inference) Marked Treatment:<br>Not Applicable:         First-Add:   X         Annual:         Task:   X           15. On-site Emergency Madical Treatment:<br>Not Applicable:         First-Add:   X         Medical Professional:         None:           16. Part 50 Document Control Number: (form 7000-1)       17. Union Affiliation of Victim: 9899       None:         None:           16. Date and Times Of Injured/III Employee:       2. Sex: 3. Victim's Age       4. Degree of Injury:       Is. Date and Time Started:       .         7. Regular Job Title:       8. Work Activity when Injured?       Is. Date and Time Started:       .       .       .         10. Experience:       9. Werk Activity when Injured?       12. Nature of Injury or Illness:       .       .       .       .         11. Vhat Directing Inflated Injury or Illness?       12. Nature of Injury or Illness:       . <td< td=""><td></td><td>3 Mine: 0 0 3 Mining: 0 0 3</td></td<>   |  | 3 Mine: 0 0 3 Mining: 0 0 3                                       |
| 0.07       Coal Track Tandom Axis Tries       170       Fund Queficiencies:         13. Training Deficiencies:       NewlNewly-Employed Experienced Miner:       Annual:       Task:       X         14. Company of Employment. (f different from production operator)       B41. Tracking       Independent Contractor ID: (f) applicable)       L444         15. On-site Emergency Medical Treatment:       None.       None.       None.       Independent Contractor ID: (f) applicable)       L444         16. Part 50 Document Control Number. (form 7000-1)       17. Union Affiliation of Victim:       9999       None. (No Union Affiliation)         Victim Information:   | in the second se | 12. Nature of Injury or Illness:                                  |
| Hazard:         New/New/Semployed Experienced Miner.         Annual:         Task:         X           44. Compary of Employment:         (f) different from production operator)         Independent Contractor ID:         (f) applicable)         L444           55. On-site Emergency Medical Treatment:         None:         None:         None:         None:         None:         L444           16. Part SD Document Control Number.         (f) Applicable         P (F) Advit X         OPR:         EMT:         Medical Professional:         None:         None:         L444           50. Date for Monomation:         Intermed Injundfill Employee:         2. Sex:         3. Victim SAge         4. Degree of Injuny:         5. Date(MMDD/Y) and Time(24 Hr.) Of Death:         6. Date and Time Started:         Preve         Non:         None:         None:         None:         None:         None:         None:         None:         None:         Non:         No:         No: <t< td=""><td>087 Coal Truck Tandem Axle Tires</td><td>170 Run Over by Truck (Rear Wheels )</td></t<>  | 087 Coal Truck Tandem Axle Tires   | 170 Run Over by Truck (Rear Wheels )                              |
| Image: Name       Independent Contractor ID: (if applicable)       L444         A Company of Employment: (if different from production operator)       Independent Contractor ID: (if applicable)       L444         Storate Emergency Medical Treatment:       None:       Independent Contractor ID: (if applicable)       L444         Storate Emergency Medical Treatment:       Prist-Adt:       X       OPR:       EMT:       Medical Professional:       None:       Independent Contractor ID: (if applicable)       L444         16. Part 50 Document Control Number: (form 7000-1)       17. Union Affiliation of Victim:       9999       None (No Union Affiliation)         Victim Information:       1       Name of figured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:         3. Date(MMDD/YY) and Time(24 Hr.) Of Death:       0. Experience:       9. Was this work activity part of reg       Years       Week       Days       d. Total       Years       Week         10. Experience:       Years       Weeks       Days       d. Total       Years       Week       Mining:       11. What Directly inflicted Injury or Illness?       12. Netword Timess:       13. Training Deficiencies:       Hazard:       Annual:       Task:       Image:       Image:       Task:       Image:       Task:       Image:       Image:       Image:       Image  | 3. Training Deficiencies:  | · · · · ·   |
| Bit. Trucking       Independent Contractor ID: (if applicable)       L144         15. On-site Emergency Medical Professional:       None:       No       No       No       No   | Hazard: X New/Newly-Employed Experienced Miner:  | Annual: Task: X   |
| NetApplicable:       First-Ald:       X       CPR:       EMT:       Medical Professional:       None:         6. Part 60 Document Control Number. (form 700-1)       17. Union Affiliation of Victim: 9099       None (No Union Affiliation)         Victim Information:       12. Sex       3. Victim's Age       4. Degree of Injury:         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:  | B&L Trucking   | Independent Contractor ID: (if applicable) L444                   |
| 16. Part 60 Document Control Number: (form 700-1)       17. Union Affiliation of Victim: page       None (No Union Affiliation)         Victim Information:       1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:         5. Date(MM/DD/YY) and Time(24 Hr:) Of Death:       6. Date and Time Started:       9. Was this work activity part of regination of Victim:         7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of regination of Injury or Illness:         10. Experience:       Years       Weeks       Days       c. This         Work Activity:       Job Title:       8. Work Activity when Injured:       9. Was this work activity part of regination of Injury or Illness:         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       12. Nature of Injury or Illness:         13. Training Deficiencies:       Hazard:       None:// CPR:       EMT:       Medical Professional:       None:         14. Company of Employee       2. Sex       3. Victim's Age       4. Degree of Injury:       17. Union Affiliation of Victim:         15. On-site Emergency Medical Treatment:       Not Activity when Injured:       17. Union Affiliation of Victim:       17. Union Affiliation of Victim:         16. Date and Time Started:       First-Atti:       CPR:       EMT:       Medical Professional:       None:  | E. I.  |   |
| Victim Information:       1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:       8. Work Activity when Injured:       9. Was this work activity part of reg.         7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of reg.         10. Experience:       Years       Veeks       Days       0. This         3. This       b. Regular Years       Weeks       Days       c: This Years       Week         4. Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       13. Training Deficiencies:       4. Degree of Injury:       12. Nature of Injury or Illness:         13. Training Deficiencies:       Haw/Newly-Employed Experienced Miner.       Annual:       Task:       14. Company of Employment. (If different from production operator)       Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:       None:       17. Union Affiliation of Victim:       Victim to Manufact         16. Part SO Document Contractor ID: (if applicable)       17. Union Affiliation of Vicim:       Vicim:       Vicim:         17. Name of Injure(24 Hr.) Of Death:       6. Date and Time Started:       None:       Vicim:         18. Part SO Document Contractor ID: (if applicable)       16. Date and Time Started:       None:       Vic   |  |   |
| 1. Name of injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death: <ul> <li>B. Work Activity when Injured:</li> <li>Date(MM/DD/YY) and Time(24 Hr.) Of Death:</li> <li>Experience:</li> <li>S. Work Activity when Injured:</li> <li>P. Was this work activity part of regination of the second secon</li></ul>  | 16. Part 50 Document Control Number: (form 7000-1)   | 17. Union Affiliation of Victim: 9999 None (No Union Affiliation) |
| 5. Date(MMDD/YY) and Time(24 Hr.) Of Death:          6. Date (MMDD/YY) and Time(24 Hr.) Of Death: <ul> <li>e. Date and Time Started:</li> <li>e. Date and Time Started:</li> <li>e. Work Activity when Injured:</li> <li>e. Was this work activity part of regineration of the started:</li> <li>f. Regular Job Title:</li> <li>e. This</li> <li>e. This</li> <li>e. This</li> <li>e. Week</li> <li>Days</li> <li>b. Regular</li> <li>Mork Activity when Injured:</li> <li>e. This</li> <li>f. Total</li> <li>f. Total</li> <li>f. Compare of Employment:</li> <li>f. Regular 7000-1)</li> <li>f. Union Affiliation of Victim:</li> </ul> <ul> <li>f. Compare of Employment:</li> <li>f. Sex</li> <li>f. Nore of Injury:</li> <li>f. Nore of Injury:</li> <li>f. Sex</li> <li>f. Ore site Emergency Medical Treatment:</li> <li>Nore of Injury:</li> <li>f. Name of Injury:</li> <li>f. Name of Injury:</li> <li>f. Name of Injury:</li> <li>f. Sex</li> <li>f. Name of Injury:</li> <li>f. Date and Time Started:</li> <li>f. Name of Injury or Illness:</li> <li>f. Name of Injury or Illness:</li> <li>f. Non</li> <li>f. Regular J</li></ul>  | Victim Information:  |   |
| 7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of reg<br>Yes       No         10. Experience:       Years       Weeks       Days       d. Total       Years       Week         10. Experience:       Job Title:       Job Title:       Mine:       Min   | I. Name of Injured/III Employee: 2. Sex 3. Victim's Age 4. Degree  | ) of Injury:  |
| Year       Week         10. Experience:       A. This       Job Title:       Mine:       Mining:       Mining:       Mining:       Mining:       Mining:       Mine:       Mining:       Mine:  | 5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:   | 6. Date and Time Started:   |
| a. This       Teals       Vectors       Dept       C. This       Teals       C. This       Teals       Mining:         Work Activity:       Job Title:       Mine:       Mine:       Mining:         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       13. Training Deficiencies:         Hazard:       New/Newly-Employed Experienced Miner:       Annual:       Task:   | 7. Regular Job Title: 8. Work Activity when  |   |
| 11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:         13. Training Deficiencies:       New/Newly-Employed Experienced Miner:       Annual:       Task:         14. Company of Employment: (If different from production operator)       Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:       None:       None:         Not Applicable:       First-Aid:       CPR:       EMT:       Medical Professional:       None:         16. Part 50 Document Control Number: (form 7000-1)       17. Union Affiliation of Victim:       Victim:       Victim Information:         1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:       9. Was this work activity part of reg         5. Date(MM//DD/YY) and Time(24 Hr.) Of Death:               6. Date and Time Started:       9. Was this work activity part of reg         10. Experience:       Years       Weeks       Days       C. This       d. Total         Work Activity:       Job Title:       Mine:       Mining:       Years       Years         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       13. Training Deficiencles:       Annual:       Task:       14. Company of Employment: (If different from production operator)       Independent Contractor ID: (If applicable)       15. On-site Emergency Medical T  | a. This b. Regular   | c: This d. Total  |
| 13. Training Deficiencies:<br>Hazard:         New/Newly-Employed Experienced Miner:         Annual:         Task:           14. Company of Employment: (If different from production operator)       Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:<br>Not Applicable:         First-Atd:         CPR:         EMT:         Medical Professional:         None:           16. Part S0 Document Control Number: (form 7000-1)       17. Union Affiliation of Victim:       Vettim Information:       .         1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:       .         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:               6. Date and Time Started:         Yeas       No         10. Experience:       Years       Weeks       Days       c: This       Mine:       Mining:         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       12. Nature of Injury or Illness:       13. Training Deficiencies:       Hazard:         New/Newly-Employed Experienced Miner:         Annual:         Task:           14. Company of Employment: (If different from production operator)       Independent Contractor ID: (if applicable)       14. Company of Employment: (If different from production operator)  |  |   |
| Hazard:       New/Newly-Employed Experienced Miner:       Annual:       Task:         14. Company of Employment: (if different from production operator)       Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:       None:       Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:       None:       None:       Independent Contractor ID: (if applicable)         16. Part 50 Document Control Number: (form 7000-1)       17. Union Affiliation of Victim:       None:       Independent Contractor ID: (if applicable)         17. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:       5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:       6. Date and Time Started:       Independent Contractor ID: (if applicable)         10. Experience:       Years       Weeks       Days       c. This       Moing         10. Experience:       Years       Veeks       Days       d. Total       Years         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       13. Training Deficiencies:       Annual:       Task:       14. Company of Employment: (If different from production operator)         14. Company of Employment: (If different from production operator)       Independent Contractor ID: (if applicable)       14. Company of Employment: (If different from production operator)         14. Compa  |  |   |
| Hazard:       Termberly Employee Experiments in a production operator)         14. Company of Employment: (if different from production operator)       Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:       None:       None:         Not Applicable;       First-Aid;       CPR:       EMT:       Medical Professional:       None:         16. Part 50 Document Control Number; (form 7000-1)       17. Union Affiliation of Victim:       Victim Information:  |  |   |
| Independent Contractor ID: (if applicable)         Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:       CPR:       EMT:       Medical Professional:       None:         16. Part 50 Document Control Number: (form 7000-1)       17. Union Affiliation of Victim:       Victim Information:       Victim Information:         1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:       6. Date and Time Started:         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:       6. Date and Time Started:       9. Was this work activity part of reg         7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of reg         10. Experience:       Years       Weeks       Days       C. This         Mo       10. Experience:       Years       Weeks       Days       d. Total         Years       Use This       Job Title:       Mine:       Mining:       4. Total         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       13. Training Deficiencies:       Annual:       Task:       14. Company of Employment: (If different from production operator)       Independent Contractor ID: (if applicable)       15. On-site Emergency Medical Treatment:       None:       14. Company of EmployMedical Treatment:       None:  | Hazard: New/Newly-Employed Experienced Miner:  | Annual: Task:   |
| Not Applicable:       First-Aid:       CPR:       EMT:       Medical Professional:       None:         16. Part 50 Document Control Number: (form 7000-1)       17. Union Affiliation of Victim:       Victim Information:         1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:       6. Date and Time Started:  | 14. Company of Employment: (If different from production operator)   | Independent Contractor ID: (if applicable)                        |
| Nor Applicable;       First-Au.       Or RC       Date:       Interview       Interview <thinterview< th="">       Interview</thinterview<>   |  |   |
| Victim Information:         1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:       6. Date and Time Started:   | Not Applicable.  | : Medical Professional: None:                                     |
| 1. Name of Injured/III Employee:       2. Sex       3. Victim's Age       4. Degree of Injury:         5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:       6. Date and Time Started:         7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of reg         10. Experience:       Years       Years       Years       Years         10. Experience:       Years       Days       Total       Years       Years         10. Experience:       Years       Days       C: This       Days       d. Total       Years       Years       Week         10. Experience:       Years       Use this work activity and to free       Mine:       Days       d. Total       Years       Years       Week         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       12. Nature of Injury or Illness:       13. Training Deficiencies:       Annual:       Task:       14. Company of Employment: (If different from production operator)       Independent Contractor ID: (if applicable)       15. On-site Emergency Medical Treatment:       None:       15. On-site Emergency Medical Treatment:       None:       15. Mone:       15. On-site Emergency Medical Treatment:       None:       15. Mone:       16. One:   | 16. Part 50 Document Control Number: (form 7000-1)   | 17. Union Affiliation of Victim:                                  |
| 5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:       6. Date and Time Started:         7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of reg         10. Experience:       Years       Years       Years       Years         a. This       b. Regular       Years       Years       Years       Years         Work Activity:       Job Title:       Mine:       Mining:       Years       Years         11. What Directly Inflicted Injury or Illness?       12. Nature of Injury or Illness:       13. Training Deficiencies:       Annual:       Task:       14. Company of Employment: (If different from production operator)         14. Company of Employment: (If different from production operator)       Independent Contractor ID: (if applicable)       15. On-site Emergency Medical Treatment:       None:       15. On-site Emergency Medical Treatment:       None:       16. Date and Time Started:   | Victim Information:  |   |
| 7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of reg         10. Experience:       Years       Ye   | 1. Name of Injured/III Employee: 2. Sex 3. Victim's Age 4. Degre   | e of injury:  |
| 7. Regular Job Title:       8. Work Activity when Injured:       9. Was this work activity part of reg         10. Experience:       Years       Ye   |  |   |
| Year     Year     No       10. Experience:     Years     Weeks     Days     Vears     Week       a. This     b. Regular     Years     Weeks     Days     Job Title:       Work Activity:     Job Title:     Mine:     Mining:     Years       11. What Directly Inflicted Injury or Illness?     12. Nature of Injury or Illness:     13. Training Deficiencies:     Annual:     Task:       Hazard:     New/Newly-Employed Experienced Miner:     Annual:     Task:     14. Company of Employment: (if different from production operator)       15. On-site Emergency Medical Treatment:     Not Applicable:     First-Aid:     CPR:     EMT:     Medical Professional:     None:   | 5. Date(MM/DD/YY) and Time(24 Hr.) Of Death:   | 6. Date and Time Started:   |
| Year     Year     No       10. Experience:     Years     Weeks     Days     Vears     Week       a. This     b. Regular     Years     Weeks     Days     Job Title:       Work Activity:     Job Title:     Mine:     Mining:     Years       11. What Directly Inflicted Injury or Illness?     12. Nature of Injury or Illness:     13. Training Deficiencies:     Annual:     Task:       Hazard:     New/Newly-Employed Experienced Miner:     Annual:     Task:     14. Company of Employment: (if different from production operator)       15. On-site Emergency Medical Treatment:     Not Applicable:     First-Aid:     CPR:     EMT:     Medical Professional:     None:   |  |   |
| 10. Experience:       Years       Weeks       Days       Years       Weeks       Days       If International Internation Internation International Internationa International                                     | 7. Regular Job Title: 8. Work Activity wh  |   |
| a. This     b. Regular     c: This     d. Total       Work Activity:     Job Title:     Mine:     Mining:       11. What Directly Inflicted Injury or Illness?     12. Nature of Injury or Illness:     13. Training Deficiencies:       Hazard:     New/Newly-Employed Experienced Miner:     Annual:     Task:       14. Company of Employment: (If different from production operator)     Independent Contractor ID: (if applicable)       15. On-site Emergency Medical Treatment:     Not Applicable:     First-Aid:  |  |   |
| 11. What Directly Inflicted Injury or Illness?     12. Nature of Injury or Illness:       13. Training Deficiencies:<br>Hazard:     New/Newly-Employed Experienced Miner:     Annual:     Task:       14. Company of Employment: (If different from production operator)     Independent Contractor ID: (if applicable)       15. On-site Emergency Medical Treatment:     Not Applicable:     First-Aid:   | a. This b. Regular   | c: This d. Total  |
| 13. Training Deficiencies:<br>Hazard:     New/Newly-Employed Experienced Miner:     Annual:     Task:       14. Company of Employment: (If different from production operator)     Independent Contractor ID: (If applicable)       15. On-site Emergency Medical Treatment:     Not Applicable:     First-Aid:     CPR:     EMT:     Medical Professional:     None:   |  |   |
| Hazard:     New/Newly-Employed Experienced Miner:     Annual:     Task:       14. Company of Employment: (If different from production operator)     Independent Contractor ID: (if applicable)       15. On-site Emergency Medical Treatment:     Not Applicable:     First-Aid:       Not Applicable:     First-Aid:     CPR:     EMT:     Medical Professional:     None:  | 11. What Directly Inflicted Injury or Illness?   | 12. Nature of injury or illness:                                  |
| 14. Company of Employment: (if different from production operator)       Independent Contractor ID: (if applicable)         15. On-site Emergency Medical Treatment:       Not Applicable:         Not Applicable:       First-Aid:       CPR:  |  | Annual: Task:   |
| Not Applicable: First-Aid: CPR: EMT: Medical Professional: None:  |  | Independent Contractor ID: (if applicable)                        |
| Not Applicable.   |  |   |
| 16. Part 50. Document Control Number: (form 7000-1) 17. Union Affiliation of Victim:  | Not Applicable: First-Aid: CPR: El   | AT: Medical Professional: None:                                   |
|   | 16. Part 50 Document Control Number: (form 7000-1)   | 17. Union Affiliation of Victim:                                  |
| MSHA Form 7000-50b, Mar 2008 Printed 04/29/2009 9:37:42 AM  |  | Drinked 04/20/2000 0:27:42 AM                                     |