

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification: Powered Haulage		3. Date/Time of Accident: 10/27/2010 07:50 AM		4. Date/Time of Death: 10/27/2010 07:50 AM		5. Fatal Case No: 46							
6. Mine Information :															
a) Mining Company Name River View Coal LLC			b) Mine Name River View Mine			c) Parent of Mining Company Alliance Resource Partners LP									
7. Mine Location :		a) City Waverly		b) County Union		c) State KY		8. Mine ID Number: 15-19374		9. Union: NO					
10. Primary Mineral Mined: BITUMINOUS COAL UNDERGROUN			11. Number of Mine Employees:		a) Total 514	b) Underground 498	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other 16						
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 9		b) Underground 9		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: 175		b) Contractor Employees: 4				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 checked="" 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				5	0					
21. Nonfatal Injuries: 0		22. Fatal Injuries: 1													
23. Victim Information :															
a) Name James J. Falk				b) Age 39											
c) Regular Job Title: Miner Helper				d) Activity at Time of Accident: Installing curtain				<input checked="" type="checkbox"/> Mine Employee							
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days							
a) Total:	4	32	1	b) at the mine:	0	10	0	c) at activity (23d)	0	10	0	d) with Contractor	0	0	0
25. Autopsy Performed: If Yes, Location YES Madisonville KY Medical Examiners Office								26. Mine Telephone No.: (270) 389-6700							

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):
On October 27, 2010 a miner helper was fatally injured, when struck by a shuttle car, while installing a ventilation curtain outby the last open crosscut on the No. 6 Working Section operating in the KY #11 coal seam. Accident Investigators are onsite conducting the investigation jointly with the Office of Mine Safety and Licenses (OMSL).

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: Auxier Welding Inc. (AWI)				29. Model: CT27-B-5-64	
30. District: C1000 Madisonville		32. Field Office: Morganfield KY			33. Event Number: 4485832
34. Accident Investigator: Timothy D. Gardner			35. MSHA Person Notified: Charles W. Jones		Date 10/27/2010
					Time 08:00 A
36. Type of Report: Initial		37. Name of Preparer and Date Prepared Troy K. Davis			Date 10/27/2010
38. Reason For Amendment:					