PR001 04-Aug-17

Preliminary Report of Accident

U.S. Department of Labor

Mine Safety and Health Administration

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1. Accident Type:	2. Acciden	t Classifica	tion	3. Date/Time of Accident 4. Date			ate/Time of Death		5. Fatal Case	No		
			Sliding Rock /M	aterl	08/03/2017 01:30 AM 08		И 08/03	08/03/2017 03:23 AM		11		
6. Mine Information :			-									
a) Mining Company Name			b) Mine Name	c) Parent o			of Mining Company					
Blue Mountain Energy Inc			Deserado Mine			Deseret (Generation & Transmission Co-operative			
7. Mine Location :	a) Cit	ty	b) C	ounty	c) State 8. Min		8. Mine ID	ne ID Number: 9. Union:		9. Union:		
Ra	angely		Rio Bland	0	CO		05	05-03505		YES	;	
10. Primary Mineral Mined:			1. Number of Mine Employees:	a) Total b) Underground	c) Open I	Pit/Quarry	d) M	ill/Prep Plant	e) Oth	er	
BITUMINOUS COAL UI	NDERGRO	DUND	Employees.	161	101	1			48		12	
12. Contractor Name:						13.	U nion		14. Contrac	ctor ID Numbe	::	
15. Contractor Address: a) City				b) County		c) Sta	te	d) Zi	p Code		
16. Number of Contractor E	mployees:	a) T	Cotal b)	Underground	c) Ope	en Pit/Quarry	d	l) Mill/Pre	ep Plant	e) Other		
			8	0		0			8	0		
17. Number of Persons in Mi	ine at Time o	f Accident:			18. Number	of Persons Un	accounted Fo	r:				
a) Mine Employees:	36	b) C	ontractor Employe	es: 8	a) Mine E	mployees:	0	b) Co	ontractor Emp	oloyees:	0	
19) Location of Accident 01-Underground		03.0	pen Pit	07-Advanc	o Mining	X 30-Mill/Pi	on Plant	Oth	er (specify)	20. Mining		
	3				Ü		•		er (specify)		Inches	
02-Surface at Undergro	ouna		redge Mining	08-Retreat	Mining	99-Office	racinty			10	0	
21. Nonfatal Injuries:	0	22. Fatal I	njuries: 1									
23. Victim Information :		a) N			b) Age							
c) Regular Job Title:	•	Jason D.		y at Time of Acci	32 donts				V 14	r: E 1		
Surface Mecha	nic		u) Activity	at Time of Acci	Cutting Me					line Employe		
24. Experience : Years Weeks Days		Years Weeks Days			Years Weeks Days			Years Weeks Days				
	20		ne mine: 6 20) c) at	activity (23d)	2 2	3		Contractor			
25. Autopsy Performed:	If Yes, L						26. Min	Telephor				
YES Community	/ Hospital, (Grand Jur	nction, Colorado					(970)	675-4346			
27. Description of Accident (On August 3, 2017, a mi plant.	• •	-	*	· ·					e coal filter a	it the prepara	tion	
The information provided in regarding the cause of the ac 28. Equipment Manufacture 30. District: C0900 Den 34. Accident Investigator: Tain Curtis	ccident. er:		32. Field Offi	ce: Craig C 35. MSHA Per Matt L	O rson Notified:	determination 29. Model:	s regarding t		nt Number: 64600		s	
regarding the cause of the ac 28. Equipment Manufacture 30. District:	ccident. er:			ce: Craig C 35. MSHA Per Matt L	O rson Notified:		s regarding t	33. Even	nt Number: 64600	002 Time 01:54 AM	s	