

PR001
30-Aug-17

Preliminary Report of Accident

U.S. Department of Labor
Mine Safety and Health Administration



| | | | | | | | | | | |
|---|--|---|------------------------------------|---|--|---|----------------------------|---|--|--------------------------|
| 1. Accident Type: Fatal Injury | | 2. Accident Classification Powered Haulage | | 3. Date/Time of Accident 08/25/2017 12:08 PM | | 4. Date/Time of Death 08/25/2017 12:08 PM | | 5. Fatal Case No 12 | | |
| 6. Mine Information : | | | | | | | | | | |
| a) Mining Company Name Carter Roag Coal Company | | | b) Mine Name Pleasant Hill Mine | | | c) Parent of Mining Company Metinvest U.S., Inc. | | | | |
| 7. Mine Location : | | a) City Mill Creek | | b) County RANDOLPH | | c) State WV | | 8. Mine ID Number: 46-08194 | | 9. Union: NO |
| 10. Primary Mineral Mined: BITUMINOUS COAL UNDERGROUND | | 11. Number of Mine Employees: | | a) Total 183 | | b) Underground 167 | | c) Open Pit/Quarry 16 | | d) Mill/Prep Plant 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 | | 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: 60 | | b) Contractor Employees: 0 | | | 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) | | |
| <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 | | Feet Inches 4 0 | | |
| 21. Nonfatal Injuries: 0 | | 22. Fatal Injuries: 1 | | | | | | | | |
| 23. Victim Information : | | | | | | | | | | |
| a) Name Owen M. Jones | | | | b) Age 51 | | | | | | |
| c) Regular Job Title: Mine Examiner | | | | d) Activity at Time of Accident: Mine Examiner | | | | <input checked="" type="checkbox"/> Mine Employee | | |
| 24. Experience : | | | | | | | | | | |
| Years | | Weeks | | Days | | Years | | Weeks | | Days |
| a) Total: 27 | | b) at the mine: 1 39 | | c) at activity (23d) 19 | | d) with Contractor | | | | |
| 25. Autopsy Performed: If Yes, Location | | | | | | 26. Mine Telephone No.: (304) 472-9717 | | | | |

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):
The victim was conducting an examination of the conveyor belt. It appears he attempted to cross over the moving No.1 conveyor belt near the transfer point with the No. 2 conveyor belt. He apparently lost his footing and fell onto the No. 1 conveyor belt; he received fatal injuries.

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.

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|--|--|---|------------|--------------------|------------------------------|
| 28. Equipment Manufacturer: | | | 29. Model: | | |
| 30. District: C0300 Morgantown | | 32. Field Office: Bridgeport WV | | | 33. Event Number: 6277202 |
| 34. Accident Investigator: Joedy N. Gutta | | 35. MSHA Person Notified: Michael P. Stark | | Date 08/25/2017 | Time 02:19 PM |
| 36. Type of Report: Amended | | 37. Name of Preparer and Date Prepared: AEW for Carlos T. Mosley | | | Date 08/26/2017 |
| 38. Reason For Amendment: Edited description of accident. | | | | | |

C. Mosley