PR001 15-Jun-17

Preliminary Report of Accident

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

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1. Accident Type:	2. Accident C	2. Accident Classification				me of Accid	lent	4. Date/Time of De	ath	5. Fatal Case No
Fatal Injury	Machinery		is.			06/13/2017 08:50 PM		06/13/2017 09:00 PM		3. Patal Case No
6. Mine Information :			2	1	1 00/10/1	-017 00	.001101	00/13/2017	33.00 FW	0
a) Mining Company Name			b) Mine Name				C	Parent of Mining C	omnony	
Rockwell Mining LLC			Gateway Ea	gle Mine			c) Parent of Mining Company BLACKHAWK MINING, LLC			
7. Mine Location :	a) City	-	b)	c) Sta				ne ID Number: 9. Union:		
V		Boone			WV				YES	
10. Primary Mineral Miner		11	. Number of Mir	ne a) Total	b) Undergrou	nd c) (Open Pit/	Quarry d) M	ill/Prep Plant	e) Other
BITUMINOUS COAL U	JNDERGROU	ND	Employees:	112	109					3
12. Contractor Name:							13, Uni	on	14. Contrac	tor ID Number:
15. Contractor Address:	a) Cit	У		,	b) County			c) State	d) Zi	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 M	line at Time of A	ocidont.	3	3	1.0 5.		-			
a) Mine Employees:	38		ntractor Employ	ees: 3	No.			ounted For:		
19) Location of Accident		<i>b)</i> C01	utractor Employ	ees: 3	a) Mine	e Employee	s:	b) Coi	itractor Empl	7
X 01-Underground		03-Ор	en Pit	X 07-Advar	ice Mining	30-N	Iill/Prep	Plant Othe	r (specify)	20. Mining Height:
02-Surface at Undergr	ound	06-Dre	edge Mining	08-Retrea	at Mining		ffice Fac		(1)	Feet Inches
21. Nonfatal Injuries:	22.	Fatal Inj	uries:		,		-			
23. Victim Information :	Rod	a) Name b) Age Iney S. Osborne 32					, , , , , , , , , , , , , , , , , , , ,			
c) Regular Job Title:		,		ty at Time of Ac	32				V 34	
Continuous Mi	ning Machine (Operato	or			ng contini	uous mi	ning machine	A MI	ne Employee
24. Experience : Years	Weeks Days	e Suchice Builder	Years Wo	eeks Days			rs Weeks)	ears Weeks Days
a) Total: 10		b) at the	mine: 2	0 c):	at activity (23d)	12	3 d) with C	ontractor	a podnice victor - 1940 provide disensa Provide di Sensa - 1940 provide di Sen
25. Autopsy Performed:	If Yes, Locati	ion						26. Mine Telephone	No.: 340-1732	
27. Description of Accident (include equipmen	ıt involve	ed, the exact loca	tion in the mine	and status of	monana and			010 1102	
On Tuesday, June 13, 2 remote controlled contin the accident occurred.	2017, a 32-year	r-old co	ntinuous mini	na machine o	nerator was	fatally ini	urod wh	on haaa:	d between t e from the v	he cutter head of a vorking face when
The information provided in	aluin a air air a			Materials to the						
The information provided in regarding the cause of the ac	cident.	a on pre	liminary data O	NLY and does n	ot represent fir	ıal determi	nations re	garding the nature of	f the incident	or conclusions
28. Equipment Manufacturer: Joy Machinery Co. (Joy Manufacturing Co) 29. Mc								14CM	15	
30. District: C1200 Pine		32. Field Office:				33. Event	33. Event Number:			
,	viile		Pineville WV				20 mm	700311	3	
34. Accident Investigator:			35. MSHA Person Notified:				Date		Time	
Mark Muncy		Joseph I 37. Name of Preparer and Date Prepared			Presley	resley			17 0	8:51 P
36. Type of Report:	itial	37. Nai							Date	
Initial Tracy Calloway					av	06/14/2017				