PR001 09-Feb-18

## **Preliminary Report of Accident**

U.S. Department of Labor

Mine Safety and Health Administration



1. Accident Type:	2. Accident Classification			3. Date/Time of Accident 4. I		4. Date/Time of	Death	5. Fatal Case No	
Fatal Injury	Fall of Face,	ib, Pillar or Highwall		02/06/2018 03:30 AM		02/06/2018 05:35 AM		01	
6. Mine Information :						<u> </u>		•	
a) Mining Company Name b) Mine Name c) Parent of Mining Company									
Wolf Run Mining LLC Sentinel M				Arch Co			pal Inc		
7. Mine Location : a) City b) Cou			ounty	c) State 8. Mine			ID Number: 9. Union:		
Philippi		Barbour	Barbour		WV		8	NO	
10. Primary Mineral Mined:		11. Number of Mine Employees:	a) Total b	) Underground	c) Open Pit	(Quarry d)	Mill/Prep Plant	e) Other	
BITUMINOUS COAL UND	ERGROUND	Employees:	325	271			24	30	
12. Contractor Name:					13. Un	ion NO	14. Contra	ctor ID Number:	
15. Contractor Address:		b) County			c) State d) Zip Code				
16. Number of Contractor Emp	loyees:	a) Total b)	Underground	c) Oper	n Pit/Quarry	d) Mill/	Prep Plant	e) Other	
·		6	6					0	
17. Number of Persons in Mine	at Time of Accid	dent:		18. Number o	of Persons Unacc	counted For:			
a) Mine Employees:	77	b) Contractor Employee	es: 6	a) Mine En	nployees:	0 b)	Contractor Em	ployees: 0	
19) Location of Accident  X 01-Underground		02 Onen Dit	X 07-Advanc	o Mining	30-Mill/Prep	Plant	ther (specify)	20. Mining Height:	
02-Surface at Underground					99-Office Fa		Teet menes		
		06-Dredge Mining	Uo-Ketreat	Willing	99-Office Fa	cinty		6 8	
21. Nonfatal Injuries:	22. Fa	ntal Injuries: 1							
23. Victim Information :	Leona	a) Name ard Griffith		b) Age 52					
c) Regular Job Title:	200.10		at Time of Acci				X N	Tine Employee	
Electrician				Servicing c	ontinuous-mir	ning machine			
24. Experience : Years Wee	eks Days	Years Wee	eks Days		Years Week	s Days		Years Weeks Days	
a) Total: 13	b)	at the mine: 3 3	3 1 c) a	t activity (23d)	3 3	1 d) wi	th Contractor		
25. Autopsy Performed:	If Yes, Location	n				26. Mine Telep	hone No.:		
NO					(30	04) 457-1895			
27. Description of Accident (inc	lude equipment	involved, the exact locat	ion in the mine,	and status of resc	ue and recovery	operations):			
On Tuesday, February 6, 2 machine. Part of a rib roll r transported to the Broaddu	neasuring 36 t	to 42-inches long, 28	inches high, a					•	
The information provided in th		on preliminary data ON	LY and does no	t represent final d	leterminations r	regarding the natu	re of the incider	nt or conclusions	
regarding the cause of the accident 28. Equipment Manufacturer:	lent.				29. Model:				
20. Equipment Manufacturer.					2). Model.				
30. District: C0300 Morgantown		32. Field Offi	32. Field Office: Bridgep		ort WV		33. Event Number: 6278587		
34. Accident Investigator:	THOUSE I		35. MSHA Per				Date	Time	
Michael Fasouletos			Steven				6/2018	04:14 AM	
36. Type of Report:			. JICYCII						
Initi	_1	37. Name of Preparer a	nd Date Prepare AEW for Car	ed:		02.70	Date 02/07/20		