

**Preliminary Report of Accident**  
PR001 09/06/2019

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



<b>1. Accident Type</b> F - Fatal Injury		<b>2. Accident Classification</b> 06 - Fall of Face, Rib, Pillar or Highwall		<b>3. Date/Time of Accident</b> 08/29/2019 7:05 PM		<b>4. Date/Time of Death</b> 08/29/2019 7:56 PM		<b>5. Fatal Case No</b> 18			
<b>6. Mine Information</b>											
a) Mining Company Name:		Consol Pennsylvania Coal Company LLC									
b) Mine Name:		Enlow Fork Mine									
c) Parent of Mining Company:		CONSOL Energy Inc									
<b>7. Mine Location Information</b>					<b>8. Mine ID Number</b>		<b>9. Union</b>				
a) City PROSPERITY		b) County WASHINGTON		c) State PA		36-07416					
<b>10. Primary Mineral Mined</b>				<b>11. Number of Employees</b>							
				a) Total 640		b) Underground 500		c) Open Pit/Quarry		d) Mill/Prep Plant	
										e) Other 140	
<b>12. Contractor Name</b>						<b>13. Contractor Union</b>		<b>14. Contractor ID Number</b>			
<b>15. Contractor Address</b>											
a) City		b) County			c) State			d) Zip Code			
<b>16. Number of Contractor Employees</b>											
a) Total		b) Underground			c) Open Pit/Quarry			d) Mill/Prep Plant		e) Other	
<b>17. Number of Persons in Mine at Time of Accident</b>					<b>18. Number of Persons Unaccounted for</b>						
a) Mine Employees 185		b) Contractor Employees			a) Mine Employees 0		b) Contractor Employees				
<b>19. Accident Location</b> 01-08 - Underground Retreat Mining								<b>20. Mining Height</b> 9 Feet 6 Inches			
<b>21. Nonfatal Injuries</b> 0		<b>22. Fatal Injuries</b> 1									
<b>23. Victims Information</b>											
<b>Tanner McFarland</b>											
<b>a) First Name</b> Tanner		<b>a) MI</b> McFarland	<b>a) Last Name</b> McFarland		<b>b) Age</b> 25	<b>c) Regular Job Title</b> Longwall Foreman		<b>d) Activity at Time of Accident</b> Longwall Foreman		<b>Employee</b> Mine Employee	
<b>24. Mining Experience</b>											
a) Total Experience 6 Years 12 Weeks 0 Days		b) Experience at the Mine 6 Years 12 Weeks 0 Days			c) Experience at the Activity at the Time of the Accident 3 Years 0 Weeks 0 Days			d) Experience with Contractor 0 Years 0 Weeks 0 Days			
<b>25. Autopsy Performed</b> No		<b>If Yes, Location</b>									
<b>26. Mine Telephone No.</b> (724) 948-5010											
<b>27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)</b> A longwall foreman was fatally injured while exiting the longwall face on the MMU 010-0, G-1 longwall section. The victim was struck and covered by a section of mine rib measuring 25 feet in length, 3 feet in depth, and 8.5 feet in height.  <i>The information provided in this notice is based on preliminary data ONLY and does not represent final determination regarding the nature of the incident or conclusions regarding the cause of the accident.</i>											
<b>28. Equipment Manufacturer</b>					<b>29. Model</b>						
<b>30. District</b> C0200 - New-Stanton, PA					<b>32. Field Office</b> C0201 - Waynesburg PA Field Office			<b>33. Event Number</b> 6227688			
<b>34. Accident Investigator</b>											
<b>First Name</b> Andrew		<b>MI</b> T	<b>Last Name</b> Whiteman								
<b>35. MSHA Person Notified</b>											
<b>First Name</b> Paul		<b>MI</b>	<b>Last Name</b> Pelesky			<b>Date/Time Notified</b> 08/29/2019 7:18 PM					
<b>36. Type of Report</b> Initial		<b>37. Name of Preparer</b> <b>Full Name</b> Andrew T Whiteman			<b>Date Prepared</b> 08/29/2019						
<b>38. Reason for Amendment</b>											