

# Preliminary Report of Accident

PR001 09/25/2019

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



<b>1. Accident Type</b> F - Fatal Injury	<b>2. Accident Classification</b> 01 - Electrical	<b>3. Date/Time of Accident</b> 09/17/2019 12:30 AM	<b>4. Date/Time of Death</b> 09/17/2019 4:30 AM	<b>5. Fatal Case No</b> 20
<b>6. Mine Information</b>				
a) Mining Company Name: Panther Creek Mining LLC		b) Mine Name: American Eagle Mine		
c) Parent of Mining Company: Blackhawk Mining LLC				
<b>7. Mine Location Information</b>			<b>8. Mine ID Number</b> 46-05437	<b>9. Union</b> No
a) City Dawes	b) County Kanawha	c) State WV		
<b>10. Primary Mineral Mined</b>		<b>11. Number of Employees</b>		
		a) Total 290	b) Underground 279	c) Open Pit/Quarry 0
		d) Mill/Prep Plant 0	e) Other 11	
<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 82	b) Contractor Employees	a) Mine Employees	b) Contractor Employees	
<b>19. Accident Location</b> 01 - Underground				<b>20. Mining Height</b> 5 Feet 6 Inches
<b>21. Nonfatal Injuries</b>	<b>22. Fatal Injuries</b> 1			
<b>23. Victims Information</b>				
Steven V Keeney				
a) First Name Steven	a) MI V	a) Last Name Keeney	b) Age 40	c) Regular Job Title Electrician
		d) Activity at Time of Accident Troubleshooting		Employee Mine Employee
<b>24. Mining Experience</b>				
a) Total Experience 9 Years 8 Weeks 0 Days	b) Experience at the Mine 8 Years 29 Weeks 0 Days	c) Experience at the Activity at the Time of the Accident 8 Years 29 Weeks 0 Days	d) Experience with Contractor 0 Years 0 Weeks 0 Days	
<b>25. Autopsy Performed</b>		If Yes, Location		
<b>26. Mine Telephone No.</b> (681) 221-8100 x 8846				
<b>27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)</b> An electrician was electrocuted while troubleshooting the electrical circuit for the scrubber on a continuous mining machine. He was working on the Number 1 Section, 007-0 MMU when the accident occurred.  <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> Joy Machinery Co. (Joy Manufacturing Co)		<b>29. Model</b>		
<b>30. District</b> C0400 - Mt. Hope, WV		<b>32. Field Office</b> C0402 - Mt. Carbon WV Field Office		<b>33. Event Number</b> 6314077
<b>34. Accident Investigator</b>				
First Name Larry	MI B	Last Name Hedrick		
<b>35. MSHA Person Notified</b>				
First Name Robert	MI	Last Name Hatfield	Date/Time Notified 09/17/2019 1:49 AM	
<b>36. Type of Report</b> Initial		<b>37. Name of Preparer</b> Full Name Pamela T Wilson		Date Prepared 09/17/2019
<b>38. Reason for Amendment</b>				