Preliminary Report of Accident

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

PR001 11/30/2020

1. Accident Type	2. Accident Classification	3. Date/Time of Accid	ent	4. Date/	Time of Death	5. Fatal Case No	
F - Fatal Injury	01 - Electrical	11/23/2020 1:13 PM		11/23	/2020 1:13 PM	FAI-6885246-1	
6. Mine Information			-			-	
a) Mining Company Name:	Excalibar Minerals LLC						
b) Mine Name: c) Parent of Mining Company:	Houston Plant Newpark Resources Inc						
	Newpark Resources IIIc						
7. Mine Location Information					ID Number	9. Union	
a) City	b) County	c) State		41-04	449	No	
Houston	Harris	TX					
10. Primary Mineral Mined		11. Number of Employ	•				
Barite/Barium Ore Mining		a) Total	b) Undergi	round	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other
		12	0		0	8	4
12. Contractor Name				13. Con	tractor Union	14. Contractor ID No	ımber
15. Contractor Address							
a) City	b) County	c) State			d) Zip Code		
16. Number of Contractor Employ	/ees						
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 Persor	ns Unaccount	ed for			
a) Mine Employees8	b) Contractor Employees	a) Mine Employees		b) Contractor Employees			
19. Accident Location	·				20. Mining Height		
30 - Mill/Prep Plant						Feet Inches	
21. Nonfatal Injuries	22. Fatal Injuries						
23. Victims Information	'						
John T Harris							
- John Friding							

John T Harris							
a) First Name John	a) MI ⊤	a) Last Name Harris	b) Age 39	, .	llar Job Title tenance Mechanic	d) Activity at Time of Accident Maintenance Mechanic	Employee Mine Employee
24. Mining Expe a) Total Expe 1 Years 7 V	rience	, ,	rience at the		c) Experience at t 1 Years 7 Week	he Activity at the Time of the Accident s 5 Days	d) Experience with Contractor Years Weeks Days
25. Autopsy Pe	rformed	If Yes, L Harris C	ocation ounty Medic	al Examin	ers Office		

26. Mine Telephone No.

(281) 864-9550

27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)

The victim was electrocuted while he was troubleshooting a disconnect box for classifier drive motor. The victim had the electrical disconnect box open and the main power supply was not de-energized.

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.

28. Equipment Manufacturer Not listed Abb Raymond			29. Model Turbine Classifier	
30. District M5000 - Dallas District			32. Field Office M5651 - Broussard LA Field Office	33. Event Number 6885246
34. Accident Investigator				
First Name	MI	Last Name		
John	S	Powers		
35. MSHA Person Notified				
First Name	MI	Last Name	Date/Time Notified	
Joel		Gerhard	11/23/2020 2:36 PM	
36. Type of Report	37. Name of P	reparer		
Initial	Full Name	-	Date Prepared	
	Jason Hoermann		11/23/2020	