

Preliminary Report of Accident

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



PR001 08/26/2022

1. Accident Type F - Fatal Injury	2. Accident Classification 17 - Machinery	3. Date/Time of Accident 08/23/2022 1:57 AM	4. Date/Time of Death 08/23/2022 3:44 AM	5. Fatal Case No FAI-6468534-1
6. Mine Information				
a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:		El Segundo Coal Company, LLC El Segundo Peabody Energy		
7. Mine Location Information			8. Mine ID Number	9. Union
a) City GRANTS	b) County Mckinley	c) State NM	29-02257	No
10. Primary Mineral Mined Bituminous Coal And Lignite Surface Mining		11. Number of Employees		
		a) Total 228	b) Underground 189	c) Open Pit/Quarry 11 d) Mill/Prep Plant 28 e) Other
12. Contractor Name Apex Solutions LLC			13. Contractor Union No	14. Contractor ID Number B7995
15. Contractor Address				
a) City Sheridan	b) County	c) State WY	d) Zip Code 82801	
16. Number of Contractor Employees				
a) Total 41	b) Underground 0	c) Open Pit/Quarry 34	d) Mill/Prep Plant 0	e) Other 7
17. Number of Persons in Mine at Time of Accident		18. Number of Persons Unaccounted for		
a) Mine Employees 37	b) Contractor Employees 14	a) Mine Employees 0	b) Contractor Employees 0	
19. Accident Location 03 - Open Pit				20. Mining Height 8 Feet 4 Inches
21. Nonfatal Injuries 0	22. Fatal Injuries 1			

23. Victims Information

David E Warren						
a) First Name David	a) MI E	a) Last Name Warren	b) Age 24	c) Regular Job Title Mechanic/Welder	d) Activity at Time of Accident Mechanic/Welder	Employee Contractor Employee
24. Mining Experience						
a) Total Experience 3 Years 16 Weeks 4 Days		b) Experience at the Mine 1 Years 5 Weeks 3 Days		c) Experience at the Activity at the Time of the Accident 1 Years 5 Weeks 3 Days		d) Experience with Contractor 1 Years 16 Weeks 4 Days
25. Autopsy Performed						
If Yes, Location Yes						

26. Mine Telephone No.

(505) 285-3093

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

A contractor was fatally injured when he was pinned between the bucket door and back edge of the bucket of an electric rope shovel.

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 Bucyrus-Erie (BE)		29. Model 495 BII		
30. District C0900 - Lakewood District		32. Field Office C0902 - Farmington NM Field Office		33. Event Number 6468534
34. Accident Investigator				
First Name Brady	MI D	Last Name Huntsman		
35. MSHA Person Notified				
First Name Ahmad	MI Z	Last Name Mdazmi	Date/Time Notified 08/23/2022 2:15 AM	
36. Type of Report Initial	37. Name of Preparer			
	Full Name Gary Boyd	Date Prepared 08/24/2022		

38. Reason for Amendment