Preliminary Report of Accident

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



PR001 10/04/2023

1. Accident Type F - Fatal Injury	2. Accident Classification 21 - Other Accident Drowning	3. Date/Time of 08/18/2023 9:		4. Date/Time of Death 08/18/2023 11:40 PM	5. Fatal Case No FAI-7047541-1		
Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	Twin State Mining, Inc. Mine No. 39 Cleveland-Cliffs Inc						
7. Mine Location Information a) City Gary	b) County Mcdowell	c) State WV	8. Mine ID Num 46-09261	ber	9. Union No		
Primary Mineral Mined Bituminous Coal Underground Mining		11. Number of E a) Total 126	Employees b) Undergroun 114	d c) Open Pit/Quarry	y d) Mill/Prep Plant	e) Other 12	
12. Contractor Name				13. Contractor Union	14. Contractor IE	Number	
15. Contractor Address a) City	b) County	c) State		d) Zip Code			
16. Number of Contractor Employ a) Total	yees b) Underground	c) Open I	Pit/Quarry	d) Mill/Pro	ep Plant	e) Other	
17. Number of Persons in Mine at a) Mine Employees b) C	t Time of Accident Contractor Employees	18. Number of F a) Mine Emp	Persons Unaccou loyees	nted for b) Contractor Employees			
19. Accident Location 01 - Underground					20. Mining Heigh 7 Feet 0 Inches		
21. Nonfatal Injuries	22. Fatal Injuries				·		
23. Victims Information	I						
Christopher R Finley							
) MI a) Last Name R Finley		gular Job Title	d) Activity at Time of Acc Installing hose for dewa		yee	
24. Mining Experience a) Total Experience 15 Years 0 Weeks 0 Days	b) Experience at the Mine 0 Years 9 Weeks 0 Days			Time of the Accident	d) Experience with Contr Years Weeks Days	actor	
25. Autopsy Performed Yes	If Yes, Location Charleston, W						
26. Mine Telephone No. (304) 448-2677							
27. Description of Accident (incluance) A miner was installing hose for a The information provided in this the cause of the accident.	a dewatering pump when he wa	as found lying in water and	d mud on the mine	floor.	ture of the incident or conclus	sions regarding	
28. Equipment Manufacturer	29. Model						
30. District C1200 - Pineville District			eville WV Field Offic	ce	33. Event Number 7047541	33. Event Number 7047541	
34. Accident Investigator First Name James	MI Last Na L Grimme						
35. MSHA Person Notified First Name Kenneth	MI Last Na Butcher		Date/Time Not 08/18/2023 10:				
36. Type of Report Initial	37. Name of Preparer Full Name James L Grimmett		Date Prepared 09/19/2023				
38. Reason for Amendment							