

Preliminary Report of Accident

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



PR001 10/05/2023

1. Accident Type F - Fatal Injury		2. Accident Classification 12 - Powered Haulage		3. Date/Time of Accident 10/02/2023 11:00 AM		4. Date/Time of Death 10/02/2023 2:41 PM		5. Fatal Case No FAI-4012032-1	
6. Mine Information									
a) Mining Company Name:		LCT Energy, LP							
b) Mine Name:		Maple Springs Mine							
c) Parent of Mining Company:		JAZ Ventures LP et al							
7. Mine Location Information				8. Mine ID Number		9. Union			
a) City Hollsopple		b) County Somerset		c) State PA		36-09973		No	
10. Primary Mineral Mined Bituminous Coal Underground Mining				11. Number of Employees		c) Open Pit/Quarry		d) Mill/Prep Plant	
				a) Total 52		b) Underground 46		e) Other 6	
12. Contractor Name						13. Contractor Union		14. Contractor ID Number	
15. Contractor Address									
a) City		b) County		c) State		d) Zip Code			
16. Number of Contractor Employees									
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 Persons Unaccounted for					
a) Mine Employees 16				b) Contractor Employees		a) Mine Employees 0		b) Contractor Employees	
19. Accident Location 07 - Advance Mining								20. Mining Height 4 Feet 2 Inches	
21. Nonfatal Injuries 0		22. Fatal Injuries 1							
23. Victims Information									
Brandon J Frederick									
a) First Name Brandon		a) MI J		a) Last Name Frederick		b) Age 37		c) Regular Job Title Roof Bolter	
								d) Activity at Time of Accident laborer	
								Employee Mine Employee	
24. Mining Experience									
a) Total Experience 13 Years 26 Weeks 0 Days		b) Experience at the Mine 1 Years 47 Weeks 0 Days		c) Experience at the Activity at the Time of the Accident 1 Years 47 Weeks 5 Days		d) Experience with Contractor Years Weeks Days			
25. Autopsy Performed Yes									
If Yes, Location Forensics DX, Windber PA									
26. Mine Telephone No. (814) 479-5151									
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A miner was fatally injured when he was struck by a shuttle car and pinned against the coal rib. <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>									
28. Equipment Manufacturer Not listed Highland Machinery Company					29. Model 10/21K-LA64HS				
30. District C0200 - Mt. Pleasant District					32. Field Office C0205 - Indiana PA Field Office			33. Event Number 4012032	
34. Accident Investigator									
First Name David		MI J		Last Name McDonald					
35. MSHA Person Notified									
First Name Sarah		MI J		Last Name Smith		Date/Time Notified 10/02/2023 11:19 AM			
36. Type of Report Initial		37. Name of Preparer Full Name Joseph M Patula			Date Prepared 10/03/2023				
38. Reason for Amendment									