## **Preliminary Report of Accident**

2. Accident Classification

12 - Powered Haulage

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

4. Date/Time of Death

08/07/2025 02:57 PM



5. Fatal Case No

FAI-F016CD5-1

## PR001 08/14/2025

1. Accident Type F - Fatal Injury

6. Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	Highpoint San 202501 Nick Trapp et	d and Gravel L	LC						
7. Mine Location Information	ine Location Information			8. Mine ID Number			9. Union		
<ul><li>a) City</li><li>Rockland</li></ul>			State 47-03973 MI		No				
	Ontone	iyan	1						
10. Primary Mineral Mined Construction Sand & Gravel Mining, N.E.C.			a) Total	Employees b) Underground	c) Open Pit/Quarr	<b>y d) Mi</b> l	II/Prep Plant	e) Other	
12. Contractor Name Falcon Drilling & Blasting Inc				13. Contractor Union No		14. Contractor ID Number XSM			
15. Contractor Address a) City Eureka	b) County		c) State WI		<b>d) Zip Code</b> 54963				
16. Number of Contractor Employ a) Total 2			c) Open Pit/Quarry		d) Mill/Prep Plant			e) Other	
17. Number of Persons in Mine at Time of Accident a) Mine Employees b) Contractor Employees 1 2			18. Number of Persons Unaccounted for a) Mine Employees b) Contractor Employees 0 0						
19. Accident Location 03 - Open Pít							Mining Height 50 Feet 0 Inches		
21. Nonfatal Injuries	22. Fatal Injuries								
23. Victims Information									
Terry Johnson									
	) MI a) Last Nai	ne	b) Age c) Re	gular Job Title	d) Activity at Time of Acc	ident E	mployee		
Terry	, Johnson			aster	Operating front-end load		Contractor Emp	oloyee	
24. Mining Experience a) Total Experience 33 Years 0 Weeks 0 Days	rience b) Experience at the Mine c			c) Experience at the Activity at the Time of the Accident 0 Years 0 Weeks 3 Days			ce with Contracto Weeks 6	or	
25. Autopsy Performed No									
<b>26. Mine Telephone No.</b> (715) 892-2040								<u></u>	
27. Description of Accident (inclu A miner died when the front-end									
The information provided in this thecause of the accident.	s notice is based on pr	eliminary data (	ONLY and does no	t represent final dete	ermination regarding the nat	ure of the incid	ent or conclusion	s regarding	
28. Equipment Manufacturer John Deere				<b>29. Model</b> 544E					
30. District M4000 - Duluth District			32. Field Office M4641 - Mai	rquette MI Field Offi	e		33. Event Number F016CD5		
34. Accident Investigator First Name Cory	МІ	Last Name Niemi				·			
35. MSHA Person Notified First Name Nicholas	MI J	Last Name Hurkman		Date/Time Noti 08/07/2025 2:30					
36. Type of Report Initial	37. Name of Preparer Full Name Roscoe J Clarke		Date Prepared 08/07/2025						
38. Reason for Amendment									

3. Date/Time of Accident

08/07/2025 2:15 PM