## Preliminary Report of Accident

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



## PR001 01/13/2025

6. Mining Company Name:       Wilson Creek Energy LLC Accise Use Mining Company.       Number of Rentry Mane:       0. Joint 2000 (State 2000)	1. Accident Type F - Fatal Injury	2. Accident Classification 12 - Powered Haulage	<b>3. Date/Time of Accident</b> 01/10/2025 12:55 PM	4. Date/Time of Death 01/10/2025 12:55 PM	5. Fatal Case No FAI-F008355-1	
a) City FRIEDBAS       b) County Somerset       c) State (1) Number of Employees (2) Contractor Union (2) Contractor Union (3) Coll (3) Contractor Union (3) MILIPrep Plant (4) Contractor Union (3) MILIPrep Plant (4) Contractor Union (3) MILIPrep Plant (4) Contractor Union (3) MILIPrep Plant (4) Contractor Employees (3) Contr	a) Mining Company Name: b) Mine Name:	Acosta Deep Mine	td et al			
Bituminous Coal Underground Mining         a) Total         b) Underground Signal         c) Open PI/Quarry         d) AlliPrep Plant         e) Other s2           12. Contractor Name         13. Contractor Vision         14. Contractor ID Number           15. Contractor Name         b) County         c) State         d) Zip Code	a) City		State 36-098		9. Union	
15. Contractor Address a) City       b) County       c) State       d) Zip Code         16. Number of Contractor Employees a) Total       b) Confraground       c) Open Pti/Quarry       d) Mill/Prep Plant       e) Other         17. Number of Persons In Mine at Time of Accident a) Mine Employees       b) Contractor Employees       20. Mining Height 3 Feet 10 Inches       e) Other         19. Accident Location 01:07 - Underground Advance Mining       22. Fatal Injuries       23. Mining Height 3 Feet 10 Inches         21. Nonfatal Injuries       22. Fatal Injuries       20. Mining Height 3 Feet 10 Inches       3 Feet 10 Inches         24. Mining Experience a) Total Experience a) Total Experience a) Total Experience a) Total Experience b) Experience at the Mine Thear 40 Weeks Days       c) Experience at the Mine Days 40 Weeks       c) Experience at the Accident Windber, PA       d) Activity at Time of Accident Carrier Operator       d) Experience with Contractor Years Weeks         24. Mine Telephone No. (B14) 443-1505       11 Years 40 Weeks Days Days       c) Experience at the Activity at the Time of the Accident Windber, PA       d) Experience with Contractor Years Weeks         25. Autopsy Performed Years       If Yes, Location Windber, PA       23. Mine Telephone No. (B14) 443-1505       31. Event Number Fold Accident (Include expirement Involved, the exact location in the mine, and status and recovery operations) Andbile bridge carrier operator died when he was printed between the mobile bridge carrier and the coal rib. The indromation provided in this notice is based on prelimina		lining	a) Total b) Underg			
a) City       (b) County       (c) State       (d) Jip Code         16. Number of Contractor Employees a) Total       0) Underground       c) Open Pit/Quarry       (d) Mill/Prep Piant       e) Other         17. Number of Persons in Mine at Time of Accident a) Mine Employees 34       18. Number of Persons Unaccounted for a) Mine Employees 34       18. Number of Persons Unaccounted for a) Mine Employees 0       20. Mining Height 3. Feet 10 Inches         18. Accident Location 0-0-7- Underground Advance       22. Fatal Injuries 1       22. Fatal Injuries 1       21. Nonfatal Injuries       20. Mining Height 3. Feet 10 Inches         21. Nonfatal Injuries 1       22. Fatal Injuries 1       22. Fatal Injuries 1       Employee 3       Employee 0         23. Victims Information       R       Mock       3. Age of Regular Job Tite 1       0) Activity at Time of Accident Mine Employee 1       Employee 0         24. Mining Experience 1       b) Experience at the Mine Vindoer, PA       c) Experience at the Activity at the Time of the Accident 1       d) Experience with Contractor Vears 40 Weeks Days       f) Experience with Contractor Vears 40 Weeks Days         25. Autops Performed Vears 40. Weeks Days       1 Years 40 Weeks Days       g)	12. Contractor Name			13. Contractor Union	14. Contractor ID Number	
a) Total       b) Underground       c) Open PI/Quarry       d) MIII/Prep Plant       e) Other         17. Number of Persons In Macounted for a) Mine Employees       13. Number of Persons Unacounted for a) Mine Employees       20. Mining Height 3 Feet 10 Inches         19. Accident Location 0-0-7 - Underground Advance Mining       22. Fatal Injuries       20. Mining Height 3 Feet 10 Inches       3 Feet 10 Inches         21. Nonfatal Injuries       22. Fatal Injuries       22. Fatal Injuries       22. Fatal Injuries       5 Feet 10 Inches         23. Victims Information       R       Mock       3 R       C perator       Mine Employee         24. Mining Experience 1 States       a) Mile States       C perator       C perator       Mine Employee         25. Autopsy Performed 1 States       If Yeas 40 Weeks Days       c) Experience at the Activity at the Time of the Accident 1 Years 40 Weeks Days       d) Experience with Contractor Years Weeks       d) Experience with Contractor Years Weeks         26. Autopsy Performed 1 States       If Yeas 40 Weeks Days       c) Experience at the Activity at the Time of the Accident 1 Years 40 Weeks Days       d) Experience with Contractor Years Weeks         27. Description of Accident (include equipment Involved, the exact location 1 Windber, PA       32. Field Offfice 1 States of the accident.       33. Event Number F008355         38. Equipment Manufacture William       Mine Last Name J       23. Field Offfice 1 States		b) County	c) State	d) Zip Code		
a) Mine Employees       b) Contractor Employees       a) Mine Employees       b) Contractor Employees         3       0 <td< td=""><td colspan="6">16. Number of Contractor Employees       a) Total       b) Underground       c) Open Pit/Quarry       d) Mill/Prep Plant       e) Other</td></td<>	16. Number of Contractor Employees       a) Total       b) Underground       c) Open Pit/Quarry       d) Mill/Prep Plant       e) Other					
01-07 - Underground Advance Mining       3 Feet 10 Inches         21. Nonfratal Injuries       1         1       1         23. Victims Information       1         23. Victims Information       1         24. Moning Experience a) First Name Joshua       a) Ma       a) Last Name Mock       b) Age 34       c) Regular Job Title Mobile Bridge Carrier Operator       d) Activity at Time of Accident Mone Employee       Employee Mine Employee         24. Mining Experience a) Total Experience at the Mine Days       1 Years 40 Weeks Days       c) Experience at the Accident 1 Years 40 Weeks Days       d) Experience with Contractor Years Weeks         25. Autopsy Performed Years 40 Weeks       1 Years 40 Weeks Days       c) Experience at the Accident de Veeks Days       d) Experience with Contractor Years Weeks         26. Mine Telephone No. (8/14) 443-1505       1 Years 40 Weeks Days       c) Experience at the Accident in the coal rib.       d) Experience with contractor Years Weeks         7. Description of Accident (Include equipment Involved, the exact location in the mobile bridge carrier and the coal rib.       The information provided in this notice is based on preliminary data       ONLV and does not represent final determination regarding the nature of the incident or conclusions regarding the cause of the accident         28. Equipment Manufacturer First Name       Mi       Last Name       J       S) Event Number Fo08355       J         30. District Minian	a) Mine Employees b) Contractor Employees a) Mine Employees b) Contractor Employees					
1         23. Victime Information         Joshua R Mock         a) First Name       a) Mi       a) Last Name       b) Age       c) Regular Job Title       d) Activity at Time of Accident       Employee         24. Mining Experience       a) Disprise of Regord       b) Experience at the Mine       c) Experience at the Mine       c) Experience at the Activity at the Time of the Accident       d) Experience with Contractor         1 Years 40 Weeks       b) Experience at the Mine       c) Experience at the Activity at the Time of the Accident       d) Experience with Contractor         25. Autopsy Performed       If Yes, Location       c) Experience at the mobile bridge carrier and the coal rib.       d) Experience with Contractor         7. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)       A mobile bridge carrier and the coal rib.       A mobile bridge carrier and the coal rib.         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.       33. Event Number         30. District       M1.       Last Name       Date/Time Notified       indiana PA       33. Event Number         34. Accident Investigator       J       Kibler, Jr.       Date/Time Notified       01/10/2025 12:59 PM       35. Ty		Mining	1			
Joshua R Mock       a) Mi a) Last Name B Mock       b) Age C Begular Job Title Mobile Bridge Carrier Operator       d) Activity at Time of Accident Mobile Bridge Carrier Mine Employee         24. Mining Experience A Total Experience I Years 40 Weeks Days       b) Experience at the Mine I Years 40 Weeks Days       c) Experience at the Activity at the Time of the Accident I Years Weeks       d) Experience with Contractor Years Weeks         25. Autopsy Performed Yes       If Yes, Location Years 40 Weeks Days       c) Experience at the Activity at the Time of the Accident I Years Weeks       d) Experience with Contractor Years Weeks         26. Mine Telephone No. (8/14) 443-1505       If Yes, Location In the mine, and status and recovery operations)       Annobile bridge carrier operator died when he was pinned between the mobile bridge carrier and the coal nb.         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 case of the accident I incident or conclusions regarding the case of the accident Incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident I incident or conclusions regarding the case of the accident	21. Nonfatal Injuries					
a) First Name Joshua       a) MI R       a) Last Name Mock       b) Age 34       c) Regular Job Title Mobile Bridge Carrier Operating a Mobile Bridge Operating a Mobile Bridge Carrier Operating       Employee Mine Employee         24. Mining Experience a) Total Experience b) Experience at the Mine 1 Years 40 Weeks Days       b) Experience at the Mine 1 Years 40 Weeks Days       c) Experience at the Activity at the Time of the Accident 1 Years 40 Weeks Days       d) Experience with Contractor Years Weeks         25. Autopsy Performed Yes       If Yes, Location Windber, PA       c) Experience at the Activity at the Time of the Accident 1 Years 40 Weeks Days       d) Experience with Contractor Years Weeks         26. Mine Telephone No. (814) 443-1505       If Yes, Location Windber, PA       verset of the Accident (Include equipment involved, the exact location in the mine, and status and recovery operations) A mobile bridge carrier operator died when he was pinned between the mobile bridge carrier and the coal rib. 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 thecause of the accident.         28. Equipment Manufacturer First Name Mill Accident Investigator First Name Imitial       MI Acast Name Mill Acast Name Mill Acast Name Mill Acast Name Mill Acast Name Mill Acast Name Mill Acast Name Millian J Kibler, Jr.       Dater/Time Notified 01/10/2025 12:59 PM       33. Event Number F008355         36. Type of Report Initial       37. Name of Preparer Full Name William J Kibler, Jr.       Date Prepared 01/10/2025       01/10/2025 <td>23. Victims Information</td> <td></td> <td></td> <td></td> <td></td>	23. Victims Information					
24. Mining Experience a) Total Experience b) Experience at the Mine 1 Years 40 Weeks Days       c) Experience at the Activity at the Time of the Accident 1 Years 40 Weeks Days       d) Experience with Contractor Years Weeks         25. Autopsy Performed Yeas       IY Yeas 40 Weeks Days       c) Experience at the Activity at the Time of the Accident 1 Years 40 Weeks Days       d) Experience with Contractor Years Weeks         26. Mine Telephone No. (814) 443-1505       If Yes, Location Windber, PA       vears Weeks       vears Weeks         27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A mobile bridge carrier operator died when he was pinned between the mobile bridge carrier and the coal rib.       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 thecause of the accident.         28. Equipment Manufacturer First Name William       MI       Last Name Kibler, Jr.         34. Accident Investigator First Name William       MI       Last Name Kibler, Jr.         35. Type of Report Initial       37. Name of Preparer William J Kibler, Jr.       Date Prepared 01/10/2025         36. Type of Report Initial       37. Name of Preparer William J Kibler, Jr.       Date Prepared 01/10/2025	Joshua R Mock					
a) Total Experience J Years 40 Weeks Days       b) Experience at the Miline 1 Years 40 Weeks Days       c) Experience at the Activity at the Time of the Accident 1 Years 40 Weeks       d) Experience with Contractor Years Weeks         25. Autopsy Performed Yes       If Yes, Location Windber, PA       1 Years 40 Weeks Days       years 40 Weeks Days         26. Mine Telephone No. (814) 443-1505       If Yes, Location in the mine, and status and recovery operations) A mobile bridge carrier operator died when he was pinned between the mobile bridge carrier and the coal rib. 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 thecause of the accident.       33. Event Number Foo8355         28. Equipment Manufacturer Caterpillar       23. Nodel 30CL       33. Event Number Foo8355       34. Accident Investigator First Name William       31. Event Number J Kibler, Jr.         35. MSHA Person Notified First Name William J Kibler, Jr.       MI Last Name Date Prepared 01/10/2025       Date/Time Notified 01/10/2025       14. Status and Prepared 01/10/2025			34 Mobile Bridge	Operating a Mobile Bri		
Windber, PA         26. Mine Telephone No. (814) 443-1505         27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A mobile bridge carrier operator died when he was pinned between the mobile bridge carrier and the coal rib. 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 thecause of the accident.         28. Equipment Manufacturer	a) Total Experience 1 Years 40 Weeks			t the Time of the Accident		
(814) 443-1505         27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A mobile bridge carrier operator died when he was pinned between the mobile bridge carrier and the coal nb. 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 thecause of the accident.         28. Equipment Manufacturer thecause of the accident       29. Model 30CL         30. District       Mt. Pleasant         30. District       MI         Mt. Pleasant       32. Field Office J Kibler, Jr.         33. Manuer       MI         Last Name William       MI         Last Name Timothy       MI         St. MSHA Person Notified First Name Timothy       MI         St. MSHA Person Notified First Name Timothy       37. Name of Preparer Full Name William J Kibler, Jr.         36. Type of Report Initial       37. Name of Preparer Full Name William J Kibler, Jr.       Date Prepared 01/10/2025						
A mobile bridge carrier operator died when he was pinned between the mobile bridge carrier and the coal rib.         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 thecause of the accident.         28. Equipment Manufacturer Caterpillar       29. Model 30CL         30. District Mt. Pleasant       32. Field Office Indiana PA       33. Event Number F008355         34. Accident Investigator First Name William       MI Last Name J Kibler, Jr.       Date/Time Notified 01/10/2025 12:59 PM         35. MSHA Person Notified First Name Timothy       MI Last Name Date/Time Notified 01/10/2025 12:59 PM         36. Type of Report Initial       Style Preparer Full Name William J Kibler, Jr.       Date Prepared 01/10/2025						
Index of the accident.       28. Equipment Manufacturer Caterpillar     29. Model 30CL       30. District Mt. Pleasant     32. Field Office Indiana PA     33. Event Number F008355       34. Accident Investigator First Name William     MI     Last Name J     Date/Time Notified First Name William       35. MSHA Person Notified First Name Timothy     MI     Last Name J     Date/Time Notified 01/10/2025 12:59 PM       36. Type of Report Initial     37. Name of Preparer Full Name William J Kibler, Jr.     Date Prepared 01/10/2025     Date Prepared 01/10/2025						
Caterpillar     30CL       30. District     Mt. Pleasant     32. Field Office     Indiana PA     33. Event Number F008355       34. Accident Investigator First Name William     MI     Last Name J     Kibler, Jr.       35. MSHA Person Notified First Name Timothy     MI     Last Name Horton     Date/Time Notified 01/10/2025 12:59 PM       36. Type of Report Initial     37. Name of Preparer Full Name William J Kibler, Jr.     Date Prepared 01/10/2025						
MI.     Last Name J     MI     Last Name Kibler, Jr.       35.     MSHA Person Notified First Name Timothy     MI     Last Name J       36.     Type of Report Initial     37.       37.     Name of Preparer Full Name William J Kibler, Jr.     Date Prepared 01/10/2025	28. Equipment Manufacturer Cat	terpillar				
First Name William     MI J     Last Name Kibler, Jr.       35. MSHA Person Notified First Name Timothy     MI     Last Name Horton     Date/Time Notified 01/10/2025 12:59 PM       36. Type of Report Initial     37. Name of Preparer Full Name William J Kibler, Jr.     Date Prepared 01/10/2025	30. District Mt. Pleasant		32. Field Office Indiana P	A		
First Name Timothy     MI     Last Name Horton     Date/Time Notified 01/10/2025 12:59 PM       36. Type of Report Initial     37. Name of Preparer Full Name William J Kibler, Jr.     Date Prepared 01/10/2025	First Name					
Initial Full Name Date Prepared William J Kibler, Jr. 01/10/2025	First Name					
38. Reason for Amendment		Full Name				
	38. Reason for Amendment					