

Preliminary Report of Accident

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



PR001 07/25/2025

1. Accident Type F - Fatal Injury		2. Accident Classification 12 - Powered Haulage		3. Date/Time of Accident 01/10/2025 12:55 PM		4. Date/Time of Death 01/10/2025 03:19 PM		5. Fatal Case No FAI-F00835-01	
6. Mine Information									
a) Mining Company Name:		Wilson Creek Energy LLC							
b) Mine Name:		Acosta Deep Mine							
c) Parent of Mining Company:		Quintana Capital Group GP Ltd et al							
7. Mine Location Information			8. Mine ID Number		9. Union				
a) City FRIEDENS			b) County Somerset		c) State PA				
10. Primary Mineral Mined Bituminous Coal Underground Mining				11. Number of Employees					
				a) Total 90		b) Underground 82		c) Open Pit/Quarry	
						d) Mill/Prep Plant		e) Other 8	
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 34		b) Contractor Employees			a) Mine Employees 0		b) Contractor Employees		
19. Accident Location 01-07 - Underground Advance Mining								20. Mining Height 3 Feet 10 Inches	
21. Nonfatal Injuries		22. Fatal Injuries 1							
23. Victims Information									
Joshua R Mock									
a) First Name Joshua		a) MI R	a) Last Name Mock		b) Age 34	c) Regular Job Title Mobile Bridge Carrier Operator		d) Activity at Time of Accident Mobile Bridge Carrier Operator	
Employee Mine Employee									
24. Mining Experience									
a) Total Experience 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									
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. <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 Simmons Equipment Company					29. Model 30CL				
30. District C0200 - Mt. Pleasant District					32. Field Office C0205 - Indiana PA Field Office			33. Event Number F008355	
34. Accident Investigator									
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				
38. Reason for Amendment									