## **Preliminary Report of Accident**

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



## PR001 06/20/2025

1. Accident Type F - Fatal Injury	2. Accident Classification 17 - Machinery	3. Date/Time of Accident 06/15/2025 7:46 AM		4. Date/Time of Death 06/15/2025 07:46 PM		5. Fatal Case No FAI-F028DB9-1		
6. Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	P&K Stone LLC Coleman Quarry Peter R Dawson							
7. Mine Location Information a) City McKinney					9. Unio No	on		
10. Primary Mineral Mined Crushed & Broken Limestone Mining, N.E.C.		11. Number of Employees a) Total b) Underground		c) Open Pit/Quarry 2		d) Mill/Prep Plant	e) Other	
12. Contractor Name				13. Contractor Union		14. Contractor ID Nur	nber	
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 a) Mine Employees b) Contractor Employees 1  18. Number of Persons Unaccounted for a) Mine Employees b) Contractor Employees 0 0								
19. Accident Location 03 - Open Pit						20. Mining Height Feet Inches		
21. Nonfatal Injuries	22. Fatal Injuries					1		
23. Victims Information								
John B Bird								
a) First Name a John	a) MI a) Last Name I B Bird		gular Job Title hintenance / Tech	d) Activity at Time of Acc Moving suction hose	cident	Employee Mine Employee		
24. Mining Experience a) Total Experience 1 Years 32 Weeks 0 Days	24. Mining Experience a) Total Experience b) Experience at the Mine 1 Years 32 Weeks 0 0 Years 4 Weeks 0 Days 0 Years 4 Weeks 0 Days 0 Years 4 Weeks 0 Days 0 Years 0 Weeks 0							
25. Autopsy Performed Yes	If Yes, Location Oklahoma City, Oklahoma							
26. Mine Telephone No. (903) 209-5604								
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A miner died after the telehandler he was operating to move a suction hose turned over onto him.								
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 Not listed GEHL		<b>29. Model</b> TH10-55						
30. District M5000 - Dallas District		32. Field Office M5861 - Norr	man OK Field Offic	e		33. Event Number F028DB9		
34. Accident Investigator First Name James	MI Last Name Redwine	ı						
35. MSHA Person Notified First Name James	MI Last Name D Redwine		<b>Date/Time Not</b> 06/15/2025 6:4					
36. Type of Report Initial	37. Name of Preparer           Full Name         Date Prepared           James Redwine         06/16/2025							
38. Reason for Amendment	•							