

Preliminary Report of Accident

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



PR001 07/13/2026

1. Accident Type F - Fatal Injury		2. Accident Classification 12 - Powered Haulage		3. Date/Time of Accident 07/06/2026 12:30 PM		4. Date/Time of Death 07/07/2026 03:50 AM		5. Fatal Case No F03BC39																																																		
6. Mine Information																																																										
a) Mining Company Name:		U.S. Lime Company-St. Clair																																																								
b) Mine Name:		U.S. Lime Company-St. Clair																																																								
c) Parent of Mining Company:		United States Lime & Minerals Inc																																																								
7. Mine Location Information			8. Mine ID Number			9. Union																																																				
a) City MARBLE CITY			b) County Sequoyah		c) State OK		34-00282		No																																																	
10. Primary Mineral Mined Lime, N.E.C.					11. Number of Employees																																																					
					a) Total 38		b) Underground 8		c) Open Pit/Quarry 0																																																	
							d) Mill/Prep Plant 26		e) Other 4																																																	
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 17					b) Contractor Employees																																																					
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					b) Contractor Employees																																																					
19. Accident Location 30 - Mill/Prep Plant								20. Mining Height Feet Inches																																																		
21. Nonfatal Injuries			22. Fatal Injuries 1																																																							
23. Victims Information																																																										
<table border="1"> <tr> <td>a) First Name</td> <td>a) MI</td> <td>a) Last Name</td> <td>b) Age</td> <td>c) Regular Job Title</td> <td>d) Activity at Time of Accident</td> <td>Employee</td> </tr> <tr> <td>Joseph</td> <td></td> <td>Ziemba</td> <td>52</td> <td>PLS/Rail Utility</td> <td>Moving rail cars</td> <td>Mine Employee</td> </tr> <tr> <td colspan="7">24. Mining Experience</td> </tr> <tr> <td colspan="2">a) Total Experience</td> <td colspan="2">b) Experience at the Mine</td> <td colspan="2">c) Experience at the Activity at the Time of the Accident</td> <td>d) Experience with Contractor</td> </tr> <tr> <td colspan="2">17 Years 49 Weeks 6 Days</td> <td colspan="2">17 Years 49 Weeks 6 Days</td> <td colspan="2">4 Years 8 Weeks 0 Days</td> <td>0 Years 0 Weeks 0</td> </tr> <tr> <td colspan="7">25. Autopsy Performed</td> </tr> <tr> <td colspan="7">No</td> </tr> </table>										a) First Name	a) MI	a) Last Name	b) Age	c) Regular Job Title	d) Activity at Time of Accident	Employee	Joseph		Ziemba	52	PLS/Rail Utility	Moving rail cars	Mine Employee	24. Mining Experience							a) Total Experience		b) Experience at the Mine		c) Experience at the Activity at the Time of the Accident		d) Experience with Contractor	17 Years 49 Weeks 6 Days		17 Years 49 Weeks 6 Days		4 Years 8 Weeks 0 Days		0 Years 0 Weeks 0	25. Autopsy Performed							No						
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26. Mine Telephone No. (918) 775-4466																																																										
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A miner died when he was crushed between a rail car and a structural beam. <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 EMD 012-LM3USLX109					29. Model SW14 1951 year																																																					
30. District M5000 - Dallas District					32. Field Office M5871 - Little Rock AR Field Office			33. Event Number F03BC39																																																		
34. Accident Investigator																																																										
First Name		MI	Last Name																																																							
Michael		E	Griffitts																																																							
35. MSHA Person Notified																																																										
First Name		MI	Last Name		Date/Time Notified																																																					
John			Powers		07/06/2026 12:39 PM																																																					
36. Type of Report		37. Name of Preparer			Date Prepared																																																					
Initial		Full Name																																																								
		Michael E. Griffitts			07/08/2026																																																					
38. Reason for Amendment																																																										