

Preliminary Report of Accident

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



PR001 06/10/2026

1. Accident Type F - Fatal Injury		2. Accident Classification 03 - Exploding Vessels under Pressure		3. Date/Time of Accident 05/21/2026 10:45 AM		4. Date/Time of Death 05/21/2026 10:45 AM		5. Fatal Case No FAI-F0388A2-1	
6. Mine Information									
a) Mining Company Name:		Nevada Ready Mix Corporation							
b) Mine Name:		Lone Mountain Pit							
c) Parent of Mining Company:		MCC Development Corporation							
7. Mine Location Information					8. Mine ID Number			9. Union	
a) City HENDERSON		b) County Clark		c) State NV	26-02142			Yes	
10. Primary Mineral Mined Construction Sand & Gravel Mining, N.E.C.					11. Number of Employees				
					a) Total 31	b) Underground	c) Open Pit/Quarry 12	d) Mill/Prep Plant 14	e) Other 5
12. Contractor Name Scotts Welding and Equipment Repair Inc						13. Contractor Union No		14. Contractor ID Number C9192	
15. Contractor Address									
a) City Henderson		b) County		c) State NV	d) Zip Code 89002				
16. Number of Contractor Employees									
a) Total 6		b) Underground 0		c) Open Pit/Quarry 0			d) Mill/Prep Plant 0		e) Other 6
17. Number of Persons in Mine at Time of Accident					18. Number of Persons Unaccounted for				
a) Mine Employees 12		b) Contractor Employees 1			a) Mine Employees 0		b) Contractor Employees 0		
19. Accident Location 03 - Open Pit								20. Mining Height 0 Feet 0 Inches	
21. Nonfatal Injuries 0		22. Fatal Injuries 1							
23. Victims Information									
Robert V Ozuna									
a) First Name Robert	a) MI V	a) Last Name Ozuna		b) Age 56	c) Regular Job Title Field Supervisor (Equipment)		d) Activity at Time of Accident Diagnosis and Repair of Auger		Employee Contractor Employee
24. Mining Experience									
a) Total Experience 3 Years 16 Weeks 0 Days		b) Experience at the Mine 0 Years 0 Weeks 1 Days			c) Experience at the Activity at the Time of the Accident 0 Years 0 Weeks 1 Days			d) Experience with Contractor 3 Years 16 Weeks 0	
25. Autopsy Performed Yes		If Yes, Location							
26. Mine Telephone No. (702) 395-1000									
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A contractor died when an explosion occurred while he was heating the flights on an auger used to load ammonium nitrate. <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					29. Model Unknown				
30. District M7000 - Vacaville District					32. Field Office M7841 - Henderson NV Field Office			33. Event Number F0388A2	
34. Accident Investigator									
First Name Benjamin		MI J	Last Name Gibson						
35. MSHA Person Notified									
First Name Jennifer		MI	Last Name Van Wey		Date/Time Notified 05/21/2026 11:10 AM				
36. Type of Report Initial		37. Name of Preparer							
		Full Name Benjamin J Gibson		Date Prepared 05/22/2026					
38. Reason for Amendment									