Preliminary Report of Accident

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

PR001 11/13/2026

1. Accident Type	2. Accident Classification	3. Date/Time of Accident	4. Date/Time of Death	5. Fatal Case No
F - Fatal Injury	12 - Powered Haulage	11/09/2026 7:10 AM	11/09/2026 07:10 AM	FAI-F0016C2-1

6. Mine Information
- **a) Mining Company Name:** Nally & Hamilton Enterprises Inc
- **b) Mine Name:** Cranks Creek
- **c) Parent of Mining Company:** Thomas R Hamilton et al

7. Mine Location Information			8. Mine ID Number	9. Union
a) City	b) County	c) State		
Cranks Creek	Harlan	KY	15-19858	No

10. Primary Mineral Mined	11. Number of Employees				
	a) Total	b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other
Bituminous	29		29		

12. Contractor Name	13. Contractor Union	14. Contractor ID Number
Wolf Hill Energy Solutions, LLC	No	C7916

15. Contractor Address			
a) City	b) County	c) State	d) Zip Code
castlewood		VA	24224

16. Number of Contractor Employees				
a) Total	b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other
2		2		

17. Number of Persons in Mine at Time of Accident		18. Number of Persons Unaccounted for	
a) Mine Employees	b) Contractor Employees	a) Mine Employees	b) Contractor Employees
18	2	0	0

19. Accident Location	20. Mining Height
03 - Open Pit	Feet Inches

21. Nonfatal Injuries	22. Fatal Injuries
0	1

23. Victims Information

Benjamin Slusher

a) First Name	a) MI	a) Last Name	b) Age	c) Regular Job Title	d) Activity at Time of Accident	Employee
Benjamin		Slusher	25	Coal Truck Driver	Driving Coal Truck	Contractor 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
7 Years 0 Weeks 0 Days	0 Years 5 Weeks 1 Days	7 Years 0 Weeks 0 Days	0 Years 7 Weeks 1

25. Autopsy Performed	If Yes, Location

26. Mine Telephone No.
(606) 302-0855

27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)
A contractor died after he lost control of the coal truck he was operating.

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.

28. Equipment Manufacturer	29. Model
Kenworth	2013

30. District	32. Field Office	33. Event Number
C0700 - Barbourville District	C0702 - Harlan KY Field Office	F0016C2

34. Accident Investigator

First Name	MI	Last Name
Jeffrey	D	Brock

35. MSHA Person Notified

First Name	MI	Last Name	Date/Time Notified
George		Jackson	11/09/2026 7:26 AM

36. Type of Report	37. Name of Preparer	
	Full Name	Date Prepared
Initial	Larry B Boggs	11/09/2026

38. Reason for Amendment