

Preliminary Report of Accident

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



PR001 04/14/2026

1. Accident Type F - Fatal Injury		2. Accident Classification 07 - Fall of Roof or Back		3. Date/Time of Accident 04/02/2026 5:05 PM		4. Date/Time of Death 04/02/2026 10:00 PM		5. Fatal Case No FAI-6322887-1															
6. Mine Information																							
a) Mining Company Name:		Marfork Coal Company																					
b) Mine Name:		Panther Eagle Mine																					
c) Parent of Mining Company:		Alpha Metallurgical Resources Inc																					
7. Mine Location Information			8. Mine ID Number			9. Union																	
a) City WHITESVILLE		b) County Raleigh		c) State WV		46-09212			No														
10. Primary Mineral Mined Bituminous Coal Underground Mining				11. Number of Employees		c) Open Pit/Quarry		d) Mill/Prep Plant		e) Other													
				a) Total 182		b) Underground 167				15													
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 40		b) Contractor Employees			a) Mine Employees		b) Contractor Employees																
19. Accident Location 01-08 - Underground Retreat Mining								20. Mining Height 5 Feet 1 Inches															
21. Nonfatal Injuries		22. Fatal Injuries 1																					
23. Victims Information																							
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">a) First Name</th> <th style="width: 5%;">a) MI</th> <th style="width: 20%;">a) Last Name</th> <th style="width: 10%;">b) Age</th> <th style="width: 15%;">c) Regular Job Title</th> <th style="width: 20%;">d) Activity at Time of Accident</th> <th style="width: 25%;">Employee</th> </tr> </thead> <tbody> <tr> <td>Aaron</td> <td>W</td> <td>Warrix</td> <td>53</td> <td>Shuttle Car Operator</td> <td>Installing turn posts</td> <td>Mine Employee</td> </tr> </tbody> </table>										a) First Name	a) MI	a) Last Name	b) Age	c) Regular Job Title	d) Activity at Time of Accident	Employee	Aaron	W	Warrix	53	Shuttle Car Operator	Installing turn posts	Mine Employee
a) First Name	a) MI	a) Last Name	b) Age	c) Regular Job Title	d) Activity at Time of Accident	Employee																	
Aaron	W	Warrix	53	Shuttle Car Operator	Installing turn posts	Mine Employee																	
24. Mining Experience																							
a) Total Experience 23 Years 26 Weeks 0 Days		b) Experience at the Mine 5 Years 44 Weeks 0 Days			c) Experience at the Activity at the Time of the Accident 5 Years 44 Weeks 0 Days		d) Experience with Contractor 0 Years 0 Weeks 0																
25. Autopsy Performed No		If Yes, Location																					
26. Mine Telephone No. (304) 854-4203																							
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)																							
At approximately 5:05 p.m. a shuttle car operator was installing turn timbers on the #3 retreat mining section when a rock fell from between the roof bolts striking the miner.																							
<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																		
30. District C0400 - Beckley District					32. Field Office C0401 - Beckley Field Office			33. Event Number 6322887															
34. Accident Investigator			MI			Last Name																	
First Name Steven		B	Redden																				
35. MSHA Person Notified			MI			Last Name				Date/Time Notified													
First Name Derrick		MI	Kiblinger			04/02/2026 6:34 PM																	
36. Type of Report Initial		37. Name of Preparer			Date Prepared																		
		Full Name Steven B Redden			04/02/2026																		
38. Reason for Amendment																							