

# Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Machinery		3. Date/Time of Accident 09/21/2016 08:23 AM		4. Date/Time of Death 09/21/2016 12:45 PM		5. Fatal Case No 13							
6. Mine Information :															
a) Mining Company Name Holston River Quarry Inc			b) Mine Name Holston River Quarry Inc			c) Parent of Mining Company Doug Dalton									
7. Mine Location :		a) City Dublin		b) County Pulaski		c) State VA		8. Mine ID Number: 44-06134		9. Union: NO					
10. Primary Mineral Mined: CRUSHED & BROKEN LIMESTONE M			11. Number of Mine Employees:		a) Total 12	b) Underground 0	c) Open Pit/Quarry 7	d) Mill/Prep Plant 4	e) Other 1						
12. Contractor Name: Gilliam and Mundy Drilling Co.						13. Union NO		14. Contractor ID Number: X7B							
15. Contractor Address:		a) City Buchanan		b) County Botetourt		c) State VA		d) Zip Code 24066							
16. Number of Contractor Employees:		a) Total 1		b) Underground 0		c) Open Pit/Quarry 1		d) Mill/Prep Plant 0		e) Other 0					
17. Number of Persons in Mine at Time of Accident:					18. Number of Persons Unaccounted For:										
a) Mine Employees: 9		b) Contractor Employees: 1			a) Mine Employees: 0		b) Contractor Employees: 0								
19) Location of Accident								20. Mining Height:							
<input type="checkbox"/> 01-Underground	<input type="checkbox"/> 02-Surface at Underground	<input type="checkbox"/> 03-Open Pit	<input type="checkbox"/> 06-Dredge Mining	<input type="checkbox"/> 07-Advance Mining	<input type="checkbox"/> 08-Retreat Mining	<input type="checkbox"/> 30-Mill/Prep Plant	<input checked="" type="checkbox"/> Other (specify) Maintenance Shop	Feet 50	Inches 0						
21. Nonfatal Injuries: 0		22. Fatal Injuries: 1													
23. Victim Information :															
a) Name Donald L. Layton			b) Age 52												
c) Regular Job Title: Drill Operator				d) Activity at Time of Accident: Performing maintenance on drill.						<input checked="" type="checkbox"/> Contractor Employee					
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days							
a) Total:	30	12	5	b) at the mine:	4	6	4	c) at activity (23d)	4	6	4	d) with Contractor	4	6	4
25. Autopsy Performed: If Yes, Location YES Roanoke, Virginia								26. Mine Telephone No.: (540) 674-1120							

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

At the time of the accident, the victim was performing maintenance on a truck-mounted rotary drill. The victim was attempting to remove the spindle cap from the top of the drill head while standing on the drilling deck. The victim was using a modified pipe wrench in an attempt to loosen the spindle cap using the machine's drill rotation hydraulics by reaching into the operator's compartment. As the victim activated the drill rotation lever, the wrench swung and struck him. The force of the impact knocked him against the operator's cab, denting the frame and breaking the side window while the rotating wrench pierced his abdomen. As the victim attempted to climb down an adjacent step ladder, he was observed falling to the ground and striking his head. The victim was transported to a local hospital and died later that day as a result of his injuries.

The information provided in this notice is based on preliminary data ONLY and does not represent final determinations regarding the nature of the incident or conclusions regarding the cause of the accident.

28. Equipment Manufacturer: Ingersoll-Rand Co.				29. Model: T4BH					
30. District: M2000 Northeastern		32. Field Office: Staunton VA				33. Event Number: 6753049			
34. Accident Investigator: Thomas J. Shilling				35. MSHA Person Notified: Kevin H. Abel		Date 09/21/2016		Time 08:39 AM	
36. Type of Report: Amended		37. Name of Preparer and Date Prepared: Joseph M. Denk				Date 09/23/2016			

38. Reason For Amendment:

Item 24 Total Mining Experience and Item 27 Description of Accident have been changed. These items were changed to reflect facts found during the