

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Slip or Fall of Person		3. Date/Time of Accident 05/10/2016 02:15 PM		4. Date/Time of Death		5. Fatal Case No 6						
6. Mine Information :														
a) Mining Company Name Ash Grove Cement Company			b) Mine Name Ash Grove Cement Company			c) Parent of Mining Company Ash Grove Cement Company								
7. Mine Location :		a) City Midlothian		b) County Ellis		c) State TX		8. Mine ID Number: 41-00026		9. Union: NO				
10. Primary Mineral Mined:			11. Number of Mine Employees:		a) Total 120		b) Underground 0		c) Open Pit/Quarry 10		d) Mill/Prep Plant 107		e) Other 3	
12. Contractor Name:							13. Union		14. Contractor ID Number:					
15. Contractor Address:		a) City			b) County			c) State		d) Zip Code				
16. Number of Contractor Employees:			a) Total 31		b) Underground		c) Open Pit/Quarry		d) Mill/Prep Plant 31		e) Other			
17. Number of Persons in Mine at Time of Accident:						18. Number of Persons Unaccounted For:								
a) Mine Employees: 20			b) Contractor Employees: 31			a) Mine Employees: 0			b) Contractor Employees: 0					
19) Location of Accident										20. Mining Height:				
<input type="checkbox"/> 01-Underground		<input type="checkbox"/> 03-Open Pit		<input type="checkbox"/> 07-Advance Mining		<input checked="" type="checkbox"/> 30-Mill/Prep Plant		<input type="checkbox"/> Other (specify)		Feet	Inches			
<input type="checkbox"/> 02-Surface at Underground		<input type="checkbox"/> 06-Dredge Mining		<input type="checkbox"/> 08-Retreat Mining		<input type="checkbox"/> 99-Office Facility								
21. Nonfatal Injuries: 0			22. Fatal Injuries: 1											
23. Victim Information :														
a) Name Roderick Barnes					b) Age 46									
c) Regular Job Title: Maintenance			d) Activity at Time of Accident: Starting equipment				<input checked="" type="checkbox"/> Mine Employee							
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days						
a) Total:		8 36 5		b) at the mine:		8 36 5		c) at activity (23d)		6 3 0		d) with Contractor		
25. Autopsy Performed: If Yes, Location							26. Mine Telephone No.:							
							(972) 723-7230							

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

Employee went to top of Slurry Tank #2 to move or start Rake system & fell to the bottom 50 feet below.

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:				29. Model:					
30. District: M5000 South Central		32. Field Office: Dallas TX				33. Event Number: 6660098			
34. Accident Investigator: Robert Dreyer			35. MSHA Person Notified: William O'Dell			Date 05/10/2016		Time 03:59 PM	
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mac Burriss				Date 05/11/2016			
38. Reason For Amendment:									