U.S. Department of Labor

11/11/2018

(6)
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PK001		Prelir	minar	v Re	nort of	Acciden	t		-	ment or			//300	
14-Nov-18		110111		y ite	port or	ricciach		Mine	Safety aı	nd Health.	Administrat	ion	>//	
1. Accident Type:	2. Accident Classification					3. Date/Time	3. Date/Time of Accident 4. Date/				th	5. Fatal Case No		
Fatal Injury	Power	Powered Haulage					11/11/2018 02:15 PM 11/			1/2018 0	6:10 PM	16	16	
6. Mine Information :	•					•		•						
a) Mining Company Na	ime		b) Mine	Name				c)	Parent of	Mining Co	ompany			
Newmont USA Limit	ted		Pete B	ajo				Ne	ewmont	Mining C	orp			
7. Mine Location :	a) (City b) County c					c) State 8. Mine l			Number:		9. Union:		
	Carlin		E	ureka		NV			26	-02689		Υ	ES	
10. Primary Mineral M		1	11. Number Employ		a) Total	b) Underground	c) Ope	n Pit/Q	uarry	d) Mi	ll/Prep Plan	t e) C	ther	
GOLD ORE MINING	3, N.E.C.		Employ	vees.	95	94			0		0		1	
12. Contractor Name:						1	3. Unio	n		14. Contra	ctor ID Num	ber:		
15. Contractor Address		a) City				b) County			c) Sta	uto	d) 7	ip Code		
13. Contractor Address	•	а) Спу				b) County			C) Sta	itt	u) z	ip Code		
16. Number of Contract	tor Employees:	a) T	Total	b) 1	Underground	c) Op	en Pit/Quar	ry	(l) Mill/Pre	p Plant	e) Other		
		,	17	,	17	, .	0	•			0	0		
17. Number of Persons	in Mine at Time	of Accident:	:			18. Number	of Persons l	Unacco	unted Fo	r:				
a) Mine Employees:	23	b) C	Contractor l	Employee	s: 0	a) Mine	Employees:		0	b) Co	ntractor Em	ployees:	0	
19) Location of Acciden	t											20. Min	ing Height:	
X 01-Underground			pen Pit		_	nce Mining	30-Mill	-		Othe	r (specify)	Feet	Inches	
02-Surface at Und	erground		redge Mini	ng	08-Retre	at Mining	99-Offi	ce Faci	lity			17	0	
21. Nonfatal Injuries:	0	22. Fatal I	njuries:	1										
23. Victim Information	:	· · · · · ·	lame			b) Age								
c) Regular Job Title:		Romney I		Activity	at Time of Ac	45					V x	Æ El-		
, 0	nd Technician	 d) Activity at Time of Accident: Mucker Operator 								X Mine Employee				
24. Experience : Ye	ars Weeks Days		Y	ears Weel	ks Days		Years	Weeks	Days			Years Week	s Days	
a) Total:	8 12 0	b) at th	he mine:	4 24	0 c)	at activity (23d)	4	24	0	d) with (Contractor			
25. Autopsy Performed	If Yes,	Location							26. Min	e Telephon				
										(775)	778-2172			
27. Description of Accid	lent (include equ	ipment invol	lved, the ex	act locati	on in the mine	e, and status of re	scue and rec	overy o	peration	s):				
A miner was fatally in	njured when h	e was run c	over by LI	HD load	er he was op	perating underg	ground.							
The information provid		is based on p	oreliminary	data ONI	LY and does n	ot represent fina	l determinat	ions re	garding t	he nature o	of the incide	nt or conclusi	ons	
regarding the cause of t 28. Equipment Manufa							29. Mode	el:						
pent intuitata		Caterpillar					25.11000			R160	00			
30. District:		32. Field Off							33. Event Number:					
	Western				Elko N						6822			
34. Accident Investigate	or:					erson Notified:				Dat		Time	1	
Randy Cardwelll 36. Type of Report:		Lan	Name - CD			n Palmer				11/11/2		02:28 PM	ı	
		13/.	rvame of Pi	eparer ar	1d Date Prepa	u eu:					Date			

Patrick L. Barney

38. Reason For Amendment:

Initial