

**Preliminary Report of Accident**  
PR001 08/19/2019

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



<b>1. Accident Type</b> F - Fatal Injury	<b>2. Accident Classification</b> 01 - Electrical	<b>3. Date/Time of Accident</b> 08/15/2019 11:38 AM	<b>4. Date/Time of Death</b> 08/15/2019 11:38 AM	<b>5. Fatal Case No</b> 16
<b>6. Mine Information</b>				
a) Mining Company Name: Compass Minerals Louisiana Inc.		b) Mine Name: Cote Blanche Mine		
c) Parent of Mining Company: Compass Minerals International, Inc.				
<b>7. Mine Location Information</b>			<b>8. Mine ID Number</b> 16-00358	<b>9. Union</b> Yes
a) City Franklin	b) County St. Mary	c) State LA		
<b>10. Primary Mineral Mined</b>		<b>11. Number of Employees</b>		
		a) Total 155	b) Underground 113	c) Open Pit/Quarry 0
		d) Mill/Prep Plant 24		e) Other 18
<b>12. Contractor Name</b> M C Electric Inc			<b>13. Contractor Union</b> No	<b>14. Contractor ID Number</b> Z2V
<b>15. Contractor Address</b>				
a) City Amelia	b) County	c) State LA	d) Zip Code 70340	
<b>16. Number of Contractor Employees</b>				
a) Total 2	b) Underground 2	c) Open Pit/Quarry 0	d) Mill/Prep Plant 0	e) Other 0
<b>17. Number of Persons in Mine at Time of Accident</b>		<b>18. Number of Persons Unaccounted for</b>		
a) Mine Employees 79	b) Contractor Employees 2	a) Mine Employees 0	b) Contractor Employees 0	
<b>19. Accident Location</b> 01 - Underground				<b>20. Mining Height</b> 25 Feet 0 Inches
<b>21. Nonfatal Injuries</b> 0	<b>22. Fatal Injuries</b> 1			
<b>23. Victims Information</b>				
<b>Shawn A Clements</b>				
a) First Name Shawn	a) MI A	a) Last Name Clements	b) Age 44	c) Regular Job Title Electrician
d) Activity at Time of Accident Wiring of a fire suppression system				Employee Contractor Employee
<b>24. Mining Experience</b>				
a) Total Experience 0 Years 10 Weeks 0 Days	b) Experience at the Mine 0 Years 10 Weeks 0 Days	c) Experience at the Activity at the Time of the Accident 0 Years 10 Weeks 0 Days		d) Experience with Contractor 0 Years 10 Weeks 0 Days
<b>25. Autopsy Performed</b> No		<b>If Yes, Location</b>		
<b>26. Mine Telephone No.</b> (337) 923-7514				
<b>27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations)</b> A contract electrician was working inside a fire suppression system's electrical panel when he contacted a 120V cable and was electrocuted.  <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>				
<b>28. Equipment Manufacturer</b>		<b>29. Model</b> N/A		
<b>30. District</b> M5000 - South Central District - Dallas		<b>32. Field Office</b> M5651 - Broussard LA Field Office		<b>33. Event Number</b> 6805982
<b>34. Accident Investigator</b>				
First Name O'Neal	MI	Last Name Robertson		
<b>35. MSHA Person Notified</b>				
First Name O'Neal	MI R	Last Name Robertson	Date/Time Notified 08/15/2019 11:38 AM	
<b>36. Type of Report</b> Amended	<b>37. Name of Preparer</b>		<b>Date Prepared</b>	
	Full Name O'Neal Robertson		08/15/2019	
<b>38. Reason for Amendment</b> Change number of employees at mine				