Preliminary Report of Accident

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

PR001 08/14/2020

1. Accident Type F - Fatal Injury	2. Accident Classification 12 - Powered Haulage	3. Date/Time of Accident 07/29/2020 10:08 AM	4. Date/Time of Death 08/05/2020 9:30 PM	5. Fatal Case No FAI-6486652-1
6. Mine Information a) Mining Company Name: b) Mine Name: c) Parent of Mining Company:	Fox Creek Aggregates Gravel Pit James S. Peterson	320/2020 10.00 / Will	5350/E2E0 5.50 1 III	6166652 1
7. Mine Location Information			8. Mine ID Number	9. Union
a) City MTN. GROVE	b) County Wright	c) State MO	23-02361	No
10. Primary Mineral Mined Gravel Mining		11. Number of Employees a) Total b) Undo	erground c) Open Pit/Quarry	d) Mill/Prep Plant e) Other
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 Employ a) Total	ees b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other
17. Number of Persons in Mine at a) Mine Employees b	Time of Accident b) Contractor Employees	18. Number of Persons Unacco a) Mine Employees	unted for b) Contractor Employees	
19. Accident Location 00 - Other Plant area of a S	and and Gravel Mine			20. Mining Height 3 Feet 0 Inches
21. Nonfatal Injuries	22. Fatal Injuries			'
23. Victims Information				
Matt G Blanchette				
a) First Name a) MI a Matt G	, , , ,	ular Job Title d) Activity at 1 t Operator Plant Opera	Fime of Accident tor	Employee Mine Employee
24. Mining Experience a) Total Experience 6 Years 0 Weeks 0 Days	b) Experience at the Mine 6 Years 0 Weeks 0 Days	c) Experience at the Activity at the 6 Years 0 Weeks 0 Days		xperience with Contractor Years 0 Weeks 0 Days
25. Autopsy Performed No	If Yes, Location			
26. Mine Telephone No.				
	de equipment involved, the exact lo			

A front-end loader operator was attempting to clear a buildup of sand from a stacker conveyor belt's tailpiece when his arm became entangled The victim was air lifted to a trauma center where he died a week later.

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.

28. Equipment Manufacturer Not listed Hydraulic opera	ated conveyor		29. Model na	
30. District C1000 - Madisonville District			32. Field Office C1004 - Rolla MO Field Office	33. Event Number 6486652
34. Accident Investigator				
First Name	MI	Last Name		
Michael	R	VanDorn		
35. MSHA Person Notified				
First Name	MI	Last Name	Date/Time Notified	
David		West	08/07/2020 12:03 PM	
36. Type of Report	37. Name of	Preparer		
Initial	Full Name	9	Date Prepared	
	Michael R VanDorn		08/12/2020	