PR001 08-Feb-13

Preliminary Report of Accident

U.S. Department of Labor

Mine Safety and Health Administration

1. Accident Type:	2. Accident Classification				3. Date/Time	3. Date/Time of Accident 4. Date/T			ath	5. Fatal Case No	
Fatal Injury	Hoisting	Hoisting			02/07/20	02/07/2013 09:20 PM		02/07/2013 09:20 PM		3	
6. Mine Information :											
a) Mining Company Name b) Mine Name						c) Parent of Mining Company					
Affinity Coal Company	Affinity Mine			Metinvest B V							
7. Mine Location : a) City			b) Co	c) State	c) State 8. Mine II			D Number: 9. Union:			
Sophia			Raleigh	WV	wv		46-08878		NO		
10. Primary Mineral Mined:		11, 1			b) Underground	l c) Open Pit/Q		Quarry d) Mill/Prep Plant		e) Other	
BITUMINOUS Employees: 214 198 16										16	
12. Contractor Name:					13. Union		on	14. Contractor ID Number:			
15. Contractor Address: a) City				b) County	County		c) State	d) Zi	p Code		
16. Number of Contractor Employees: a) Total b) Underground c) Open Pit/Quarry d) Mill/Prep Plant e) Other											
17. Number of Persons in Mine at Time of Accident: 18. Number of Persons Unaccounted For:											
a) Mine Employees: 0 a) Mine Employees: U b) Contractor Employees: U 19) Location of Accident 20, Mining Height:											
X 01-Underground 03-Open Pit 07-Advance Mining 30-Mill/Prep Plant							Plant Oth	er (specify)	Feet Inches		
02-Surface at Underground 06-Dredge Mining 08-Retreat Mining 99-Office Facility								6			
21. Nonfatal Injuries: 22. Fatal Injuries:											
	0		1								
23. Victim Information : a) Name b) Age Edward L. Finney 43											
c) Regular Job Title: Utility d) Activity at Time of Accident: Operating Scoop											
24. Experience: Years Weeks Days Years Weeks Days Years Weeks Days Years Weeks Days								Years Weeks Days			
a) Total: 13		b) at the 1	mine: 0 30) () ()	at activity (23d)		0 30	0 d) with	Contractor,		
25. Autopsy Performed:	If Yes, Locat	ion	·· ·					26. Mine Telepho	ne No.:		
	·					(304	(304) 683-9097				
27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations): A utility man was in the deck of a scoop as two miners were unloading trash from the metal scoop bucket insert onto the hoist for removal from the mine. The scoop bucket was positioned over the hoist deck. The hoist suddenly elevated causing the scoop to lift up. The two miners unloading trash were able to run to safety. As the hoist elevated, the scoop slipped away from the hoist deck, causing it crash onto the mine floor. During the accident, the scoop operator cleared the operator's deck and was found with fatal crushing injuries beneath the scoop.											
The information avanided	in this native is base	ad on pre	liminary data O	NI V and deas	e pat vanyagant fi	al distance	aigu tione	recording the nature	e of the incides	nt or conclusions	
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: Lakeshore, Inc.						29, N	29, Model: LS-SE4-120-1.5				
30, District: CO400 Mt.	Mt. Hope 32. Field Office:				ope WV			33. Eve	33. Event Number: 6294587		
34. Accident Investigator:				Person Notified:	son Notified:			ite	Time		
Richard A. Hayhurst				ph C. Mackov	C. Mackowiak			2013	09:36 P		
36. Type of Report:			7. Name of Preparer and Date Prepared Joseph C. Mackowiak						Date		
38 Reason For Amendmen	f•										