

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Falling, Rolling or Sliding Rock /Materl		3. Date/Time of Accident 08/12/2010 01:13 AM		4. Date/Time of Death 08/12/2010 01:13 AM		5. Fatal Case No 13					
6. Mine Information :													
a) Mining Company Name Barrick Goldstrike Mines Inc			b) Mine Name Meikle Mine			c) Parent of Mining Company Barrick Gold Corp							
7. Mine Location :		a) City Carlin		b) County Eureka		c) State NV		8. Mine ID Number: 26-02246		9. Union: NO			
10. Primary Mineral Mined: GOLD ORE MINING, N.E.C.			11. Number of Mine Employees:		a) Total 647	b) Underground 638	c) Open Pit/Quarry		d) Mill/Prep Plant	e) Other 9			
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		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: 160		b) Contractor Employees:			a) Mine Employees: 0		b) Contractor Employees:						
19) Location of Accident									20. Mining Height:				
<input checked="" type="checkbox"/> 01-Underground	<input type="checkbox"/> 03-Open Pit		<input type="checkbox"/> 07-Advance Mining		<input 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:			22. Fatal Injuries:		2								
23. Victim Information :				a) Name Joel E. Schorr		b) Age 38							
c) Regular Job Title: Underground Fixed Maintenance Tech			d) Activity at Time of Accident: Working in Shaft			<input checked="" type="checkbox"/> Mine Employee							
24. Experience :		Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days					
a) Total:		3 10 2		b) at the mine:		3 10 2		c) at activity (23d)		2 10 2		d) with Contractor	
25. Autopsy Performed: If Yes, Location NO							26. Mine Telephone No.: (775) 778-1729						

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

The victims were working from the top of the conveyance in the Meikle ventilation shaft, attempting to locate and free a blockage in the aggregate delivery pipe to the rock box at the 860 level (depth from collar.) While the conveyance was near the 820 foot level, the hydraulic pressure for the hoist spiked and contact with the miners stopped. They were located at the 1330 level of the shaft.

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: M7000 Western		32. Field Office: Elko NV				33. Event Number: 1148152		
34. Accident Investigator: Stephen A. Cain			35. MSHA Person Notified: Rodney Gust			Date 08/12/2010		Time 02:13 AM
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>				Date 08/16/2010		
38. Reason For Amendment:								

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<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:			22. Fatal Injuries:			2					
23. Victim Information :											
a) Name Daniel Noel				b) Age 47							
c) Regular Job Title: Mine Operations Miner					d) Activity at Time of Accident: Working in Shaft					<input checked="" type="checkbox"/> Mine Employee	
24. Experience :											
Years Weeks Days			Years Weeks Days			Years Weeks Days			Years Weeks Days		
a) Total:	21 31 0		b) at the mine:	7 9 4		c) at activity (23d)	0 0 0		d) with Contractor		
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