UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF SAFETY AND ENVIRONMENTAL ENFORCEMENT GULF OF MEXICO REGION

ACCIDENT INVESTIGATION REPORT

For Public Release

1.	OCCURRED	
	DATE:	STRUCTURAL DAMAGE
	28-AUG-2013 TIME: 0700 HOURS	CRANE
		OTHER LIFTING DEVICE
2.	OPERATOR: Nexen Petroleum U.S.A. Inc.	DAMAGED/DISABLED SAFETY SYS.
	REPRESENTATIVE:	INCIDENT >\$25K
	TELEPHONE:	H2S/15MIN./20PPM
	CONTRACTOR:	REQUIRED MUSTER
	REPRESENTATIVE:	SHUTDOWN FROM GAS RELEASE
	TELEPHONE:	HOTHER
		and the second s
3.	OPERATOR/CONTRACTOR REPRESENTATIVE/SUPERVISOR	6. OPERATION:
	ON SITE AT TIME OF INCIDENT:	
		X PRODUCTION
		DRILLING
4.	LEASE: G01959	WORKOVER
	AREA: EI LATITUDE:	COMPLETION
	BLOCK: 258 LONGITUDE:	☐ HELICOPTER
		MOTOR VESSEL
5.	PLATFORM: A	PIPELINE SEGMENT NO.
	RIG NAME:	OTHER
		8. CAUSE:
6.	ACTIVITY: EXPLORATION (POE)	o. CAUSE:
	DEVELOPMENT/PRODUCTION (DOCD/POD)	EQUIPMENT FAILURE
7.	TYPE:	X HUMAN ERROR
		EXTERNAL DAMAGE
	HISTORIC INJURY	X SLIP/TRIP/FALL WEATHER RELATED
	x REQUIRED EVACUATION 1	LEAK RELATED
	LTA (1-3 days)	UPSET H20 TREATING
	LTA (>3 days X RW/JT (1-3 days) 1	OVERBOARD DRILLING FLUID
	RW/JT (>3 days)	OTHER
	Other Injury	_
		9. WATER DEPTH: 158 FT.
	FATALITY	
	POLLUTION	10. DISTANCE FROM SHORE: 48 MI.
	FIRE EXPLOSION	
		11. WIND DIRECTION:
	LWC HISTORIC BLOWOUT	SPEED: M.P.H.
	UNDERGROUND	
	SURFACE	12. CURRENT DIRECTION:
	DEVERTER	SPEED: M.P.H.
	SURFACE EQUIPMENT FAILURE OR PROCEDURES	
	COLLISION HISTORIC >\$25K <=\$25K	13. SEA STATE: FT.

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On 28 August 2013 at approximately 0700 hours, a report was received that a Galley hand (GH) injured his left leg, lower left abdomen, and lower back on left side and neck while attempting to dispose of a 30 to 35 lb. bag of trash into a trash compactor.

The GH had departed the stairway of the living quarters and swung the bag of trash over his right shoulder. The GH stated as he was walking toward the trash compactor he was observing an employee getting water from a cooler and as he did so, he stepped on a drain cover that slipped out from under him causing him to slip and fall on the deck. When personnel on the facility became aware that the GH had fallen they approached the scene to provide assistance. The GH stated he had pain in his leg, lower abdomen, and lower back on left side of neck. As the employees attempted to administer first aid the GH stated he did not want to be touched. A medic was transported from EI 258-C by motor vessel to EI 258-A to assist in the first aid treatment of the GH but the GH refused to allow the medic to touch or examine him. It was decided by the Lessee to transport the GH to a hospital by helicopter. The field pilot informed the Lessee that his aircraft was not equipped to carry a spine board. It was then decided to utilize Air-Med due to pain and discomfort being stated by the GH.

The GH was transported to a hospital in Lafayette, La. where he was met by management from the Lessee and his company. Hospital personnel examined, took X-rays, and CT scans of the GH's injuries but could find no abnormalities. An MRI was ordered but the GH refused to cooperate stating he wanted to see his own personal physician. The GH was released to full duty by the hospital physician. The GH left the hospital with someone without assistance.

18. LIST THE PROBABLE CAUSE(S) OF ACCIDENT:

The bolts holding the cover in place were missing at the time of the incident. Although the bolts were missing, attempts to move the drain cover by stepping on it and trying to slide it out were unsuccessful.

19. LIST THE CONTRIBUTING CAUSE(S) OF ACCIDENT:

The GH stated as he was walking toward the trash compactor, he was observing an employee getting water which could have caused a lack of concentration that may have contributed to this incident.

20. LIST THE ADDITIONAL INFORMATION:

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ESTIMATED AMOUNT (TOTAL): 22. RECOMMENDATIONS TO PREVENT RECURRANCE NARRATIVE: The BSEE Lafayette District office makes no recommendations to the Regional Office of Safety Management (OSM). 23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: NO 24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE: None 25. DATE OF ONSITE INVESTIGATION: 28-AUG-2013 29. ACCIDENT INVESTIGATION 26. ONSITE TEAM MEMBERS: -PANEL FORMED: Wade Guillotte / Seth Duhon / Andre Mounton / Gerald Gonzales / OCS REPORT: 30. DISTRICT SUPERVISOR: Elliott S. Smith

21. PROPERTY DAMAGED:

None -

APPROVED

NATURE OF DAMAGE:

N/A

DATE: 30-OCT-2013

INJURY/FATALITY/WITNESS ATTACHMENT

OPERATOR REPRESENTATIVE		INJURY	
CONTRACTOR REPRESENTATIVE		FATALITY	
OTHER		WITNESS	
NAME:			
HOME ADDRESS:			
CITY:		STATE:	
WORK PHONE: -	TOTAL OFFSHOR	RE EXPERIENCE:	YEARS
EMPLOYED BY:			

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INJURY/FATALITY/WITNESS ATTACHMENT

BUSINESS ADDRESS:		
CITY:	STATE:	
ZIP CODE:		
OPERATOR REPRESENTATIVE CONTRACTOR REPRESENTATIVE OTHER	INJURY FATALITY WITNESS	
NAME:		
HOME ADDRESS:		
CITY:	STATE:	
WORK PHONE:	TOTAL OFFSHORE EXPERIENCE:	Y
EMPLOYED BY:		
BUSINESS ADDRESS:		
CITY:	STATE:	

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