

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: **18-AUG-2015** TIME: **1245** HOURS

2. OPERATOR: **Freeport-McMoRan Oil & Gas LLC**

REPRESENTATIVE:

TELEPHONE:

CONTRACTOR: **ROWAN COMPANIES INC.**

REPRESENTATIVE:

TELEPHONE:

- STRUCTURAL DAMAGE
- CRANE
- OTHER LIFTING DEVICE
- DAMAGED/DISABLED SAFETY SYS.
- INCIDENT >\$25K
- H2S/15MIN./20PPM
- REQUIRED MUSTER
- SHUTDOWN FROM GAS RELEASE
- OTHER

3. OPERATOR/CONTRACTOR REPRESENTATIVE/SUPERVISOR
ON SITE AT TIME OF INCIDENT:

6. OPERATION:

4. LEASE: **G10977**

AREA: **MC** LATITUDE: **28.884444**
BLOCK: **129** LONGITUDE: **-87.934722**

- PRODUCTION
- DRILLING
- WORKOVER
- COMPLETION
- HELICOPTER
- MOTOR VESSEL
- PIPELINE SEGMENT NO.
- OTHER

5. PLATFORM:

RIG NAME: **ROWAN RELENTLESS**

6. ACTIVITY:

- EXPLORATION(POE)
- DEVELOPMENT/PRODUCTION
(DOCD/POD)

8. CAUSE:

- EQUIPMENT FAILURE
- HUMAN ERROR
- EXTERNAL DAMAGE
- SLIP/TRIP/FALL
- WEATHER RELATED
- LEAK
- UPSET H2O TREATING
- OVERBOARD DRILLING FLUID
- OTHER _____

7. TYPE:

- HISTORIC INJURY
 - REQUIRED EVACUATION 1
 - LTA (1-3 days)
 - LTA (>3 days) 1
 - RW/JT (1-3 days)
 - RW/JT (>3 days)
 - Other Injury

- FATALITY
- POLLUTION
- FIRE
- EXPLOSION

- LWC
- HISTORIC BLOWOUT
 - UNDERGROUND
 - SURFACE
 - DEVERTER
 - SURFACE EQUIPMENT FAILURE OR PROCEDURES

COLLISION HISTORIC >\$25K <=\$25K

- 9. WATER DEPTH: **5304** FT.
- 10. DISTANCE FROM SHORE: **61** MI.
- 11. WIND DIRECTION: **NE**
SPEED: **12** M.P.H.
- 12. CURRENT DIRECTION: **S**
SPEED: **1** M.P.H.
- 13. SEA STATE: **3** FT.

On 18-Aug-2015 at approximately 12:45 p.m. onboard the drillship Rowan Relentless, an incident occurred involving a third party employee resulting in a fractured leg. The incident took place while the I.P. (injured person) was attempting to close the lid on a drill cuttings box.

At approximately 12:39 p.m. an announcement was made over the PA (public address) system that a helicopter was 20-minutes out. The I.P. stated that he knew that crane operations would be suspended prior to the helicopter's arrival. At 12:41 p.m. the I.P. made the decision himself to prepare the cuttings box for removal prior to the helicopter landing. NOTE: No other rig personnel or third party personnel were assisting the I.P. while he was conducting this operation (See JSA). After climbing on top of the cuttings box, the I.P. utilized a chain fall in an attempt to close the lid. With the chain fall hook on the lid, the I.P. lowered the lid. During this process, the lid did not completely close because the drill cuttings chute was preventing the lid from properly closing. (The drill cuttings chute carries the drill cuttings to the cuttings box from the shakers). The I.P. then proceeded to reopen the drill cuttings box lid with the chain fall. When he had the lid vertical, he slacked off of the chain fall and manually attempted to push the lid back open. At this time (12:45 p.m.), the chain fall hook came free from the cuttings box lid and fell back into the open position in an uncontrolled manner onto the I.P.'s right leg, pinning the I.P.'s right leg under the cuttings box lid.

Immediately after the incident took place, the bridge mobilized the Medic and the IP was taken to the rig hospital for evaluation where his leg was splinted and a Medivac flight was arranged. It was later determined that IP suffered a fractured right fibular requiring surgery.

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

- 1) Human Error
- 2) No safety clevis (clip) on the chain fall hook at the time of the incident.

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

- 1) Lack of supervision by rig management and third party supervisor of I.P.
- 2) Poor communication by all parties involved.
- 3) I.P. did not sign the JSA.

20. LIST THE ADDITIONAL INFORMATION:

21. PROPERTY DAMAGED:

NATURE OF DAMAGE:

ESTIMATED AMOUNT (TOTAL): \$

22. RECOMMENDATIONS TO PREVENT RECURRANCE NARRATIVE:

The BSEE New Orleans District makes no recommendations to the Agency.

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: **YES**

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE:

G-110 (C) 250.107 (A) After conducting an Incident Investigation that occurred on 18-Aug-2015 requiring evacuation, it was determined that the operator did not perform all operations in a safe and workmanlike manner.

G-132 (W) 250.188 While reviewing documentation pertaining to the incident that occurred on 18-Aug-2015, BSEE inspectors confirmed that the BSEE District Manager had not been verbally notified immediately following an incident resulting in injuries requiring evacuation. (Incident occurred at approximately 12:45 p.m. on 18-Aug-2015). It was reported to BSEE via e-mail at approximately 1500-hrs on 19-Aug-2015.

25. DATE OF ONSITE INVESTIGATION:

21-AUG-2015

26. ONSITE TEAM MEMBERS:

**Earl (Jerry) Roy / Frank Musacchia
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29. ACCIDENT INVESTIGATION

PANEL FORMED: **NO**

OCS REPORT:

30. DISTRICT SUPERVISOR:

David Trocquet

APPROVED

DATE: **15-JAN-2016**

INJURY/FATALITY/WITNESS ATTACHMENT

For Public Release

<input checked="" type="checkbox"/> OPERATOR REPRESENTATIVE	<input type="checkbox"/> INJURY
<input type="checkbox"/> CONTRACTOR REPRESENTATIVE	<input type="checkbox"/> FATALITY
<input type="checkbox"/> OTHER _____	<input checked="" type="checkbox"/> WITNESS

NAME :

HOME ADDRESS :

CITY :

STATE :

WORK PHONE :

TOTAL OFFSHORE EXPERIENCE :

YEARS

EMPLOYED BY :

BUSINESS ADDRESS :

CITY :

STATE :

ZIP CODE :

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INJURY/FATALITY/WITNESS ATTACHMENT

For Public Release

OPERATOR REPRESENTATIVE

INJURY

CONTRACTOR REPRESENTATIVE

FATALITY

OTHER _____

WITNESS

NAME :

HOME ADDRESS :

CITY :

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