

Preliminary Report of Accident



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| 1. Accident Type: Fatal Injury | 2. Accident Classification Powered Haulage | 3. Date/Time of Accident 10/20/2010 10:20 PM | 4. Date/Time of Death 10/21/2010 09:34 AM | 5. Fatal Case No 19 |
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6. Mine Information :

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| a) Mining Company Name Oil-Dri Corp Of Georgia | b) Mine Name Simpson | c) Parent of Mining Company Oil Dri Corporation Of America |
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| 7. Mine Location : | a) City Ochlocknee | b) County Thomas | c) State GA | 8. Mine ID Number: 09-00114 | 9. Union: NO |
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| 10. Primary Mineral Mined: FULLER'S EARTH MINING | 11. Number of Mine Employees: | a) Total 296 | b) Underground 0 | c) Open Pit/Quarry 16 | d) Mill/Prep Plant 235 | e) Other 45 |
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| 12. Contractor Name: Ken Herman Trucking | 13. Union NO | 14. Contractor ID Number: ZZZ |
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| 15. Contractor Address: | a) City Knox | b) County Clarion | c) State PA | d) Zip Code 16232 |
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| 16. Number of Contractor Employees: | a) Total 1 | b) Underground | c) Open Pit/Quarry | d) Mill/Prep Plant | e) Other |
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| 17. Number of Persons in Mine at Time of Accident: | 18. Number of Persons Unaccounted For: |
| a) Mine Employees: 90 | a) Mine Employees: 0 |
| b) Contractor Employees: 1 | b) Contractor Employees: 0 |

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| 19) Location of Accident | <input checked="" type="checkbox"/> 03-Open Pit | <input type="checkbox"/> 07-Advance Mining | <input type="checkbox"/> 30-Mill/Prep Plant | <input type="checkbox"/> Other (specify) | 20. Mining Height: Feet Inches |
| <input type="checkbox"/> 01-Underground | <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 | |

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| 21. Nonfatal Injuries: | 22. Fatal Injuries: 1 |
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| 23. Victim Information : | a) Name Kenneth D. Herman | b) Age 63 |
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| c) Regular Job Title: Truck Driver | d) Activity at Time of Accident: Standing near loading dock | <input checked="" type="checkbox"/> Contractor Employee |
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| 24. Experience : | Years Weeks Days | Years Weeks Days | Years Weeks Days | Years Weeks Days |
| a) Total: | 41 0 0 | b) at the mine: | 2 0 0 | c) at activity (23d) |
| | | | 41 3 2 | d) with Contractor |
| | | | | 5 0 0 |

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| 25. Autopsy Performed: If Yes, Location NO | 26. Mine Telephone No.: (229) 574-5131 |
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27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):

A customer truck driver backed his trailer into a bay at the mine loading dock. The victim got out of his truck, walked to an adjacent bay, and spoke with the fork lift operator to get his trailer loaded. At that time, an empty trailer was being moved into the bay. The trailer struck the victim, pinning him against the loading dock.

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.

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| 28. Equipment Manufacturer: Walbash Trailer | 29. Model: |
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| 30. District: M3000 Southeastern | 32. Field Office: Macon GA | 33. Event Number: 6523700 |
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| 34. Accident Investigator: Donald Ratliff | 35. MSHA Person Notified: Sam Pierce | Date 10/21/2010 | Time 10:45 A |
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| 36. Type of Report: Initial | 37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i> | Date 10/25/2010 |
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38. Reason For Amendment: