

# Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Explosives and Breaking Agents		3. Date/Time of Accident 03/27/2013 02:42 PM		4. Date/Time of Death 03/27/2013 04:07 PM		5. Fatal Case No 3				
6. Mine Information :												
a) Mining Company Name Fred Weber Inc			b) Mine Name NORTH STONE			c) Parent of Mining Company Fred Weber, Inc.						
7. Mine Location :		a) City Maryland Heights		b) County St Louis		c) State MO		8. Mine ID Number: 23-00220		9. Union: YES		
10. Primary Mineral Mined: CRUSHED & BROKEN LIMESTONE M		11. Number of Mine Employees:		a) Total 45	b) Underground	c) Open Pit/Quarry 26	d) Mill/Prep Plant 18		e) Other 1			
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 17		b) Contractor Employees			a) Mine Employees		b) Contractor Employees					
19) Location of Accident								20. Mining Height:				
<input type="checkbox"/> 01-Underground	<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)				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 0		22. Fatal Injuries 1										
23. Victim Information :												
a) Name William R. Sievert					b) Age 61							
c) Regular Job Title: Loader Operator				d) Activity at Time of Accident: Operating Loader				<input checked="" type="checkbox"/> Mine Employee				
24. Experience :	Years		Weeks		Days		Years		Weeks		Days	
a) Total:	23	50	1	b) at the mine:	10	0	0	c) at activity (23d)	10	0	0	d) with Contractor
25. Autopsy Performed: If Yes, Location YES Saint Louis Mediical Examiner								26. Mine Telephone No.: (314) 344-0070				

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

The victim was in a front-end loader about 65 feet from the base of a highwall when a blast was initiated. Broken rock covered the loader and the victim was missing for about one hour. The rock was removed from the loader and the victim was recovered about 10 hours after the blast was initiated.

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: Caterpillar				29. Model: 992G				
30. District: M5000 South Central		32. Field Office: Rolla-South MO				33. Event Number: 6607436		
34. Accident Investigator: David Weaver			35. MSHA Person Notified: Michael Franklin			Date 03/27/2013		Time 04:02 P
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>				Date 03/28/2013		
38. Reason For Amendment:								