

# Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Powered Haulage		3. Date/Time of Accident 09/16/2014 01:39 AM		4. Date/Time of Death 09/16/2014 01:39 AM		5. Fatal Case No 11		
6. Mine Information :										
a) Mining Company Name West Ridge Resources Inc			b) Mine Name West Ridge Mine			c) Parent of Mining Company Robert E Murray				
7. Mine Location :		a) City East Carbon		b) County Carbon		c) State UT		8. Mine ID Number: 42-02233		9. Union: NO
10. Primary Mineral Mined: BITUMINOUS COAL UNDERGROUND			11. Number of Mine Employees:		a) Total 186	b) Underground 174	c) Open Pit/Quarry 0		d) Mill/Prep Plant 0	e) Other 12
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: 43		b) Contractor Employees: 0				a) Mine Employees: 0		b) Contractor Employees: 0		
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		8	0		
21. Nonfatal Injuries: 0		22. Fatal Injuries: 1								
23. Victim Information :										
a) Name Alejandro Ramirez					b) Age 46					
c) Regular Job Title: Shuttle Car Operator				d) Activity at Time of Accident: Longwall Support				<input checked="" type="checkbox"/> Mine Employee		
24. Experience :										
Years Weeks Days			Years Weeks Days			Years Weeks Days			Years Weeks Days	
a) Total:	10 35 2		b) at the mine:	5 31 6		c) at activity (23d)	2 1 6		d) with Contractor	
25. Autopsy Performed: If Yes, Location YES Salt Lake City, UT						26. Mine Telephone No.: (435) 888-4000				

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

On Tuesday, September 16, 2014, at approximately 1:39 a.m., a miner was fatally injured when the Wagner ST-2D mobile diesel can-setter he was operating articulated, crushing him. The accident occurred at the entrance to the 23rd East Longwall section. There were no witnesses to the accident.

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: Wagner				29. Model: ST-2D					
30. District: C0900 Denver		32. Field Office: Price UT			33. Event Number: 4482825				
34. Accident Investigator: Thomas E. Barrington				35. MSHA Person Notified: Peter Saint		Date 09/16/2014		Time 02:14 AM	
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Thomas Barrington				Date 09/17/2014			
38. Reason For Amendment:									