

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Machinery		3. Date/Time of Accident 01/28/2015 06:30 PM		4. Date/Time of Death 01/28/2015 08:00 PM		5. Fatal Case No 1		
6. Mine Information :										
a) Mining Company Name LCT Energy, LP			b) Mine Name Brubaker Mine			c) Parent of Mining Company JAZ Ventures LP				
7. Mine Location : a) City Hooversville			b) County Somerset		c) State PA		8. Mine ID Number: 36-09939		9. Union: NO	
10. Primary Mineral Mined: BITUMINOUS COAL UNDERGROUND			11. Number of Mine Employees: a) Total 77		b) Underground 68		c) Open Pit/Quarry		d) Mill/Prep Plant	e) Other 9
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: 22		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)		
<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		Feet	Inches	
21. Nonfatal Injuries: 0		22. Fatal Injuries: 1								
23. Victim Information : a) Name Rick Kline			b) Age 43							
c) Regular Job Title: Miner Operator			d) Activity at Time of Accident: Miner Operator				<input checked="" type="checkbox"/> Mine Employee			
24. Experience : Years Weeks Days a) Total: 10 47 0			b) at the mine: 0 47 0			c) at activity (23d) 7 24 0			d) with Contractor 0 0 0	
25. Autopsy Performed: NO						26. Mine Telephone No.: (814) 754-5900				

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

On January 28, 2015, at approximately 6:30 p.m., a 43 year old miner operator received fatal crushing injuries when he was pinned between the remote control continuous-miner conveyor boom and the right rib in the No. 5 Entry 55 feet inby survey station No. 2035 of the Lebeau Mains 001 MMU. The continuous-miner was being operated from a remote position in the No. 5 Entry for the next mining cycle when the accident occurred.

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: Joy Machinery Co. (Joy Manufacturing Co)			29. Model: 14CM09		
30. District: C0200 New Stanton		32. Field Office: Johnstown PA			33. Event Number: 4031156
34. Accident Investigator: Richard L. Gindlesperger		35. MSHA Person Notified: Ronald E. Hixson		Date 01/28/2015	Time 07:57 PM
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Michael G. Wess			Date 01/28/2015
38. Reason For Amendment:					