

Preliminary Report of Accident



1. Accident Type: Fatal Injury	2. Accident Classification Slip or Fall of Person	3. Date/Time of Accident 02/26/2012 01:15 AM	4. Date/Time of Death 02/26/2012 01:15 AM	5. Fatal Case No 2
-----------------------------------	--	---	--	-----------------------

6. Mine Information :

a) Mining Company Name SCH Terminal Co., Inc.	b) Mine Name Calvert City Terminal LLC	c) Parent of Mining Company John F Hunt III
--	---	--

7. Mine Location :	a) City Calvert City	b) County Marshall	c) State KY	8. Mine ID Number: 15-18639	9. Union: YES
--------------------	-------------------------	-----------------------	----------------	--------------------------------	------------------

10. Primary Mineral Mined: BITUMINOUS	11. Number of Mine Employees:	a) Total 50	b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other 50
--	-------------------------------	----------------	----------------	--------------------	--------------------	----------------

12. Contractor Name: Wepher Marine	13. Union NO	14. Contractor ID Number:
---------------------------------------	-----------------	---------------------------

15. Contractor Address:	a) City Calvert City	b) County Marshall	c) State KY	d) Zip Code 42029
-------------------------	-------------------------	-----------------------	----------------	----------------------

16. Number of Contractor Employees:	a) Total 3	b) Underground	c) Open Pit/Quarry	d) Mill/Prep Plant	e) Other 3
-------------------------------------	---------------	----------------	--------------------	--------------------	---------------

17. Number of Persons in Mine at Time of Accident:	18. Number of Persons Unaccounted For:
a) Mine Employees: 10	a) Mine Employees:
b) Contractor Employees: 2	b) Contractor Employees:

19) Location of Accident	20. Mining Height:
<input type="checkbox"/> 01-Underground	Feet Inches
<input type="checkbox"/> 02-Surface at Underground	
<input type="checkbox"/> 03-Open Pit	
<input type="checkbox"/> 04-Advance Mining	
<input type="checkbox"/> 05-Mill/Prep Plant	
<input checked="" type="checkbox"/> 06-Other (specify)	River Barge Load
<input type="checkbox"/> 07-Dredge Mining	
<input type="checkbox"/> 08-Retreat Mining	
<input type="checkbox"/> 09-Office Facility	

21. Nonfatal Injuries:	22. Fatal Injuries: 1
------------------------	--------------------------

23. Victim Information :	a) Name Kevin Meyers	b) Age 52
--------------------------	-------------------------	--------------

c) Regular Job Title: Deckhand	d) Activity at Time of Accident: Deckhand	<input checked="" type="checkbox"/> Mine Employee
-----------------------------------	--	---

24. Experience :	Years Weeks Days	Years Weeks Days	Years Weeks Days	Years Weeks Days
a) Total:	4 48 0	b) at the mine:	4 48 0	c) at activity (23d)
d) with Contractor	0 0 0			

25. Autopsy Performed: If Yes, Location YES Louisville, KY	26. Mine Telephone No.: (270) 395-0210
---	---

27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations):
On Sunday, February 26, 2012, at 1:15 a.m., a 52 year old Deckhand was determined missing. He had been assigned the task of measuring the draft of a set of empty barges that were to be loaded. The surface miner had to cross from the permanent floating work-barge to the first empty barge. Witnesses observed him on the empty barge walking up-river on the barge. He apparently fell from the barge into the Tennessee River. Co-workers saw his cap in the water and immediately called for the Marshall County Rescue Squad. The body was found beneath the rake of the bow of the fixed barge at approximately 2:30 a.m. The miner was wearing an approved flotation device.

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:	29. Model:
-----------------------------	------------

30. District: C1000 Madisonville	32. Field Office: Morganfield KY	33. Event Number: 4486911
-------------------------------------	-------------------------------------	------------------------------

34. Accident Investigator: Curtis R. Hardison	35. MSHA Person Notified: Alan D. Frederick	Date 02/26/2012	Time 03:40 A
--	--	--------------------	-----------------

36. Type of Report: Initial	37. Name of Preparer and Date Prepared William Barnwell	Date 02/28/2012
--------------------------------	--	--------------------

38. Reason For Amendment: