

Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Powered Haulage		3. Date/Time of Accident 12/28/2015 02:30 PM		4. Date/Time of Death 12/28/2015 02:30 PM		5. Fatal Case No 17				
6. Mine Information :												
a) Mining Company Name Barrick Cortez Inc.			b) Mine Name Barrick Cortez Inc.			c) Parent of Mining Company Barrick Gold Corp						
7. Mine Location :		a) City Crescent Valley		b) County Lander		c) State NV		8. Mine ID Number: 26-00827		9. Union: NO		
10. Primary Mineral Mined: GOLD ORE MINING, N.E.C.			11. Number of Mine Employees:		a) Total 930	b) Underground 0	c) Open Pit/Quarry 850		d) Mill/Prep Plant 0	e) Other 80		
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 450		b) Underground 0		c) Open Pit/Quarry 400		d) Mill/Prep Plant 0		e) Other 50		
17. Number of Persons in Mine at Time of Accident:						18. Number of Persons Unaccounted For:						
a) Mine Employees: 200		b) Contractor Employees: 100		a) Mine Employees: 0		b) Contractor Employees: 0						
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	50	0				
<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 Douglas Hicks					b) Age 42							
c) Regular Job Title: Equipment Operator				d) Activity at Time of Accident: Hault Truck Operator				<input checked="" type="checkbox"/> Mine Employee				
24. Experience :												
Years Weeks Days			Years Weeks Days			Years Weeks Days			Years Weeks Days			
a) Total:	3	9	0	b) at the mine:	2	18	0	c) at activity (23d)	3	9	0	d) with Contractor
25. Autopsy Performed: If Yes, Location YES Washoe County Medical Examiner, Reno								26. Mine Telephone No.: (775) 468-4432				

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

A fatal accident occurred at this surface gold mine when the operator of a Caterpillar 795 haul truck lost control, sliding backwards and striking the cab of a parked Caterpillar 795 haul truck on the driver's inside.

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: 795					
30. District: M7000 Western		32. Field Office: Elko NV				33. Event Number: 6597795			
34. Accident Investigator: Troy Van Wey				35. MSHA Person Notified: John Perez		Date 12/28/2015		Time 02:48 PM	
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Patrick L. Barney				Date 12/28/2015			
38. Reason For Amendment:									