

Preliminary Report of Accident



1. Accident Type: Nonfatal Injury		2. Accident Classification Fall of Face, Rib, Pillar or Highwall		3. Date/Time of Accident 08/16/2007 06:32 PM		4. Date/Time of Death		5. Fatal Case No			
6. Mine Information :											
a) Mining Company Name Genwal Resources Inc			b) Mine Name Crandall Canyon Mine			c) Parent of Mining Company UTAH AMERICAN ENERGY INC					
7. Mine Location :		a) City HUNTINGTON		b) County Emery		c) State UT		8. Mine ID Number: 42-01715		9. Union: NO	
10. Primary Mineral Mined: Bituminous Coal Underground Mining			11. Number of Mine Employees:		a) Total 66	b) Underground 60	c) Open Pit/Quarry		d) Mill/Prep Plant	e) Other 6	
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"/> 02-Surface at Underground	<input type="checkbox"/> 03-Open Pit	<input type="checkbox"/> 06-Dredge Mining	<input type="checkbox"/> 07-Advance Mining	<input type="checkbox"/> 08-Retreat Mining	<input type="checkbox"/> 30-Mill/Prep Plant	<input type="checkbox"/> 99-Office Facility	<input type="checkbox"/> Other (specify)	Feet	Inches	
									7	6	
21. Nonfatal Injuries: 6			22. Fatal Injuries:								
23. Victim Information :											
a) Name (b) (7)(C)					b) Age (b) (7)(C)						
c) Regular Job Title: (b) (7)(C)			d) Activity at Time of Accident: (b) (7)(C)							<input checked="" type="checkbox"/> Mine Employee	
24. Experience :			Years Weeks Days			Years Weeks Days			Years Weeks Days		
(b) (7)(C)											
25. Autopsy Performed: If Yes, Location						26. Mine Telephone No.: (435) 687-5420					

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

On Thursday, August 16, 2007 a fatal outburst occurred during the rescue work on the Main West panel. Two miners and one MSHA inspector were fatally injured. Five miners and one MSHA inspector received nonfatal injuries. The outburst occurred in the No. 1 entry inby crosscut 126. Rescue work was ongoing to remove coal and debris which had filled the No. 1 entry because of an outburst that occurred on August 6, 2007. That event trapped six miners on the Main West section.

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28. Equipment Manufacturer:				29. Model:					
30. District: C0900 Denver		32. Field Office: Price, UT			33. Event Number: 4476435				
34. Accident Investigator:				35. MSHA Person Notified: Danny Frey		Date 08/16/2007		Time 06:42 P	
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Marcus Smith				Date 08/20/2007			
38. Reason For Amendment:									

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21. Nonfatal Injuries: 6			22. Fatal Injuries:								
23. Victim Information :											
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24. Experience :			Years Weeks Days			Years Weeks Days			Years Weeks Days		
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19) Location of Accident									20. Mining Height:			
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<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						7	6
21. Nonfatal Injuries: 6			22. Fatal Injuries:									
23. Victim Information :												
a) Name (b) (7)(C)					b) Age (b) (7)(C)							
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24. Experience :												
(b) (7)(C)			(b) (7)(C)			(b) (7)(C)			(b) (7)(C)			
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