

Preliminary Report of Accident

U.S. Department of Labor
Mine Safety and Health Administration



PR001 09/09/2024

1. Accident Type F - Fatal Injury		2. Accident Classification 07 - Fall of Roof or Back		3. Date/Time of Accident 09/06/2024 6:00 PM		4. Date/Time of Death 09/06/2024 6:00 PM		5. Fatal Case No FAI-F006C67-1			
6. Mine Information											
a) Mining Company Name:		Mingo Logan Coal LLC									
b) Mine Name:		Mountaineer II Mine									
c) Parent of Mining Company:		Arch Resources Inc									
7. Mine Location Information			8. Mine ID Number			9. Union					
a) City SHARPLES			b) County Logan			c) State WV			46-09029		
No											
10. Primary Mineral Mined Bituminous Coal Underground Mining					11. Number of Employees						
					a) Total 375		b) Underground 300		c) Open Pit/Quarry 0		
							d) Mill/Prep Plant 0		e) Other 75		
12. Contractor Name						13. Contractor Union		14. Contractor ID Number			
15. Contractor Address				16. Number of Contractor Employees							
a) City				b) County		c) State		d) Zip Code			
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 75					b) Contractor Employees 0						
19. Accident Location 01 - Underground								20. Mining Height 6 Feet 4 Inches			
21. Nonfatal Injuries 0				22. Fatal Injuries 1							
23. Victims Information											
Gary A Chapman											
a) First Name Gary		a) MI A	a) Last Name Chapman		b) Age 33	c) Regular Job Title Continuous Mining Machine Operator		d) Activity at Time of Accident Operating Continuous Mining Machine		Employee Mine Employee	
24. Mining Experience											
a) Total Experience 12 Years 6 Weeks 0 Days		b) Experience at the Mine 0 Years 26 Weeks 2 Days			c) Experience at the Activity at the Time of the Accident 2 Years 0 Weeks 0 Days			d) Experience with Contractor Years Weeks Days			
25. Autopsy Performed		If Yes, Location									
26. Mine Telephone No. (304) 369-7500											
27. Description of Accident (include equipment involved, the exact location in the mine, and status and recovery operations) A miner died after being struck by a rock from a roof fall while traveling under unsupported roof. <i>The information provided in this notice is based on preliminary data ONLY and does not represent final determination regarding the nature of the incident or conclusions regarding the cause of the accident.</i>											
28. Equipment Manufacturer					29. Model						
30. District C1200 - Pineville District					32. Field Office C1203 - Logan WV Field Office			33. Event Number F006C67			
34. Accident Investigator		MI	Last Name								
First Name Paul		J	Milum								
35. MSHA Person Notified		MI	Last Name			Date/Time Notified					
First Name Tracy		F	Calloway			09/06/2024 6:15 PM					
36. Type of Report Initial		37. Name of Preparer Full Name Paul J Milum			Date Prepared 09/06/2024						
38. Reason for Amendment											