

# Preliminary Report of Accident



1. Accident Type: Fatal Injury		2. Accident Classification Electrical		3. Date/Time of Accident 10/10/2010 12:57 PM		4. Date/Time of Death 10/12/2010 06:45 PM		5. Fatal Case No 16	
6. Mine Information :									
a) Mining Company Name Martin Marietta Materials, Inc.			b) Mine Name SNYDER			c) Parent of Mining Company Martin Marietta Materials Inc			
7. Mine Location :									
a) City Snyder		b) County Kiowa		c) State OK		8. Mine ID Number: 34-01651		9. Union: NO	
10. Primary Mineral Mined: CRUSHED & BROKEN GRANITE MINI			11. Number of Mine Employees:		a) Total 24		b) Underground 21		c) Open Pit/Quarry 3
12. Contractor Name: Hertzer Electrical Services					13. Union NO		14. Contractor ID Number: R495		
15. Contractor Address:									
a) City Marlow		b) County Stephans			c) State OK		d) Zip Code 73055		
16. Number of Contractor Employees:									
a) Total 4		b) Underground 4		c) Open Pit/Quarry 4		d) Mill/Prep Plant 4		e) Other 4	
17. Number of Persons in Mine at Time of Accident:					18. Number of Persons Unaccounted For:				
a) Mine Employees: 2		b) Contractor Employees: 4			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)	
<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: 2		22. Fatal Injuries: 1							
23. Victim Information :									
a) Name [REDACTED]					b) Age [REDACTED]				
c) Regular Job Title: Electrician									
d) Activity at Time of Accident: Install GF Indicator Lights <input checked="" type="checkbox"/> Contractor Employee									
24. Experience :									
Years Weeks Days		Years Weeks Days		Years Weeks Days		Years Weeks Days			
a) Total: [REDACTED]		b) at the mine: [REDACTED]		c) at activity (23d) [REDACTED]		d) with Contractor [REDACTED]			
25. Autopsy Performed: If Yes, Location NO								26. Mine Telephone No.: (580) 569-2393	
27. Description of Accident (include equipment involved, the exact location in the mine, and status of rescue and recovery operations): Three persons were installing ground fault indicator lights on the main 800 amp breaker when an arc flash occurred, injuring them. They were transported to a hospital for treatment where the victim died on October 12, 2010.									
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: Westinghouse Electric Co.					29. Model:				
30. District: M5000 South Central			32. Field Office: Norman OK			33. Event Number: 6547807			
34. Accident Investigator: Gary Cook				35. MSHA Person Notified: Mike Dunlap		Date 10/10/2010		Time 01:44 P	
36. Type of Report: Initial		37. Name of Preparer and Date Prepared: Mike Hancher <i>MH</i>				Date 10/13/2010			
38. Reason For Amendment:									