

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No. _____

Sup'ts No. _____

Name of Person injured,
Occupation,
Date of Accident,
Location,
Not injured in Mine, state where,

John Riley
Miner

1907 Time 8 P.M.
Mine No. 1 Entry No. 51 Room No. —

Name of Mine Supt.,
Age of Person injured,
What Family, if any,
How long in employ, of Co.,

G. L. Black
33 years

Name of Mine Foreman, O. G. Jones.
Married or Single Married

Name and address of nearest living Relative,
Was he an efficient man,
Where and in whose charge left,
Name of Physician called, if any,

Three Years Condition of Life or Circumstances,
Mrs John Riley, Rock Springs, Wyo
Yes.
Dr. Strader, Cheyenne, Wyo.
Young & Chambers, Wyo.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Struck in right eye by piece
of coal.

Cause,

Riley was walking along the
entry near the face when a piece of
coal bursted off the side of the entry
and struck him in the right eye.

Released 1/14-08

(Signature)

O. G. Jones.

Title,

#1 Mine Foreman

Date

STATEMENTS OF WITNESSES.

Rock Springs.
1-21-07

Mr Geo L. Black.

Dear Sir.

On Jan 15th at 11 A.M. I happened to be at the mouth of No 1 slope and discovered two cars off the track, (of the empty trip coming off the dump) and hurried back to tell the Engineer, not knowing there was no rope on the trip.

The trip caught me and knocked me down and was cut in left leg, also hurt in left hip and side but no bones broken

Gross.

O. C. Morgan.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *D. C. Morgan*
 Occupation, *Car Repr.*
 Date of Accident, *Jan 15th* 190*7* Time *11 a.m.*
 Location, *Rock Springs, Wyo.* Mine No. *1* Entry No. *—* Room No. *—*
 If not injured in Mine, state where, *at mouth of slope.*

Name of Mine Supt. *Geo L. Black* Name of Mine Foreman, *C. E. Moffitt*
 Age of Person injured, *67 years* Married or Single *Single*
 What Family, if any, *a son.*
 How long in employ, of Co., Condition of Life or Circumstances,
 Name and address of nearest living Relative,
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Home*
 Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

*Punctured wound of left leg
 above center between ankle and knee
 and on lower side*

Cause,

*The trip of empties broke loose from
 dump and he seeing the first car
 was off the track went to signal
 the Engineer to stop the trip, so he
 could put the car back on track. And
 before he noticed there was no rope
 on the trip it had caught him*

*Released
 4/13-07*

(Signature)

C. E. Moffitt

Date

1

Title,

Foreman.

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.,
Jan 9th - '07

I am employed at #8 Mine as night driver, work in #1 Dip Entry. This morning when I was bringing out a loaded trip along the Entry, John Debene got on top of a loaded car to ride out to the switch. This was a common habit of Debene's as well as the other miners in this entry. I had often to warn them not to do this, but they refused, and Debene did on this occasion, that it was all right to ride out. When at #40 Room, Debene was caught between the loaded car and the roof and had his back injured.

Signed George Melaski
Witness

Rock Springs, Wyo.,
Jan 13th - '07

On the morning of Jan 9th. I had finished my work and was waiting at the bottom of #46 Room in #1 Dip Ent. The driver came along with a loaded trip and I jumped on a loaded car and lay down flat in order to ride out the Entry. When at #40 Room there was a low place in the roof and I got squeezed between the roof and the car. I knew it was against the regulations of the U. P. Coal Co. to ride on loaded cars, but thought I would be better riding than walking.

Signed Geo. Debene.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

John Debene.

Occupation,

Miner

Date of Accident,

Jan 9th

1907

Time

3 A.M.

Location,

Rock Springs, Wyo.

Mine No. 8

Entry No. 1 slip

Room No. 40

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black.

Name of Mine Foreman,

Geo. B. Pryde.

Age of Person injured,

24 Years.

Married or Single

Single

What Family, if any,

How long in employ, of Co.,

2 years

Condition of Life or Circumstances,

Austria, Europe.

Name and address of nearest living Relative,

Matt Debene, Notrajasko, Bezulzak

Was he an efficient man,

yes

Was he temperate,

yes.

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Back and arms bruised on of
 of being squeezed between the roof and
 a loaded car on which he was riding

Cause,

Debene who is employed at night as a
 miner in "1" Slip Entry, had finished his
 work on the morning of Jan 9th and was
 waiting at the bottom of 46 Room when the
 driver came along with a trip of loads.

Debene jumped up on top of a loaded car
 and lay down flat, his intention being to ride
 out to the switch some distance away. When the
 cars reached 46 Room Debene got caught between
 the roof and the car on which he was lying,
 injured him quite seriously. This man had
 been warned several times not to climb on
 the loaded cars, but failed to heed the warning,
 and was injured on account of his own
 carelessness.

(Signature)

George B. Pryde.

Title,

Mine Foreman

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

M. Tsutsumi
Miner

Occupation,

Date of Accident,

Jan 12th

1907

Time

4³⁰ P.M.

Location,

Rock Springs, Wyo

Mine No.

10

Entry No.

*3*Room No. *60*

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

34 years

Name of Mine Foreman,

Jas W. Paterson

Married or Single

Single

What Family, if any,

How long in employ, of Co.,

2 years

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Grand. G. Gondo, Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital
Dr Young.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left arm broken between
wrist and elbow.

Cause,

He was switching car from
entry into room, the car jumped
the track and caught his arm
between car and props causing
*above injuries**Released*
4/12/07

(Signature)

Jas. W. Paterson

Title,

#10 Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Karrol Grofovsky

Occupation,

Coal Loader

Date of Accident,

Jan 9th

1907

Time

12 O'clock (Noon)

Location,

Rock Springs, Wyo

Mine No.

7

Entry No.

1 Dip

Room No.

26

If not injured in Mine, state where,

Name of Mine Supt.

Geo L Black

Name of Mine Forman,

Jno L. Dykes

Age of Person injured,

27 years

Married or Single

Married

What Family, if any,

Wife & 2 children

How long in employ, of Co.,

One Month

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Mrs. Charles Rock Springs, Wyo.

{Family in Austria

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left leg injured below the knee.

Cause,

I was engaged, as a loader and while loading a car with coal, was shoveling between the end of car and room face, some loose coal fell from the face of room and struck him causing the injuries above described. Did not think there was any danger where he was shoveling. Knew that the coal was likely to fall but did not see any immediate danger, as so much loose coal was in front of that which the top portion of fell the injury was accidental and no one to blame.

We the undersigned Certify the above to be Correct

Jno. L. Dykes #7 Foreman

Karrol Grofovsky

Injured Person.

H. Boskochi

his

mark.

Witness to accident

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
Jan 23, 1907

While employed as a driver in 3 Cent
+ Plane on Friday Jan 18th. I had my breast
injured. Was snubbing an empty Car up
a room and while standing on a bumper
I allowed my body to project outside of
Car and was squeezed between a prop
and the car

John ^{his} + Evac.
mark.

Frank Ord
Witness

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Joe Evae*Occupation, *Driver*Date of Accident, *Jan 18th*Location, *Rock Springs, Wyo*

If not injured in Mine, state where,

1907 Time *12 O'clock A.M. (Morn)*Mine No. *8*Entry No. *3-4* Plane Room No. *8*Name of Mine Supt. *Geo. L. Black*Age of Person injured, *21 years*

What Family, if any,

How long in employ, of Co., *2 years*Name and address of nearest living Relative, *Joe Iveric, Rock Springs, Wyo. (Brother-in-law)*Was he an efficient man, *Yes*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Young & Chambers*Name of Mine Foreman, *Geo. B. Pryde*Married or Single *Single*

Condition of Life or Circumstances,

Was he temperate, *Yes*Name of Physician called, if any, *Young & Chambers*

Nature and extent of Accident,

Breast and left side bruised on account of being squeezed between an empty car and a prop.

Cause,

*Was snubbing an empty car up #8 Room 3 Ent, 4 Plane and instead of standing with one foot on each bumper of the car, he stood with both feet on one bumper. This allowed his body to project beyond the side of the car and caused him to be caught between the car and one of the room side props.**He had been cautioned about doing this on several occasions, but failed to take warning.**Released
2/5-07*

(Signature)

Geo. B. Pryde

Title,

#8 Mine Foreman

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
Jan 23rd 1907

To Whom it may Concern.

I, Dave Mattonen was working Partner to Moses Mattonen in Room 18, Entry 51 in No 1 Mine on the 23rd day of Jan. 1907, When Moses Mattonen was hurt by falling Bone Coal, I was fixing a length of sheet iron in face of room & Moses my Partner was about 20 feet below throwing coal into the chute, when a piece of Bone Coal fell from the roof, between the props and the rib and struck him on the back and made a wound about 2 inches in length.

There was a slip rock where it fell off and it did not give any warning. We had plenty of props at the foot of the room.
Signed.

David Mattonen
Fred Williams
Witness

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Moses Mattonen

Occupation,

Miner

Date of Accident,

Jan 23rd

1907

Time

9 O'clock A.M.

Location,

Rock Springs, Wyo.

Mine No. 1

Entry No. 51

Room No. 18

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Name of Mine Foreman,

D. G. Jones

Age of Person injured,

31 years

Married or Single

Married

What Family, if any,

Three of Family

How long in employ, of Co.,

18 Months

Condition of Life or Circumstances,

Name and address of nearest living Relative,

David Mattonen, Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Anton Rauta, Boarding house, Bridge Ave.

Name of Physician called, if any,

Young & Chambers

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Hurt on the back.

Cause,

Moses Mattonen was working in Room 18, Entry 51, along with David Mattonen. He was shoveling coal into the chute about 20 feet from the face when a piece of Bone Coal fell from the Roof and struck him on the back causing a very bad wound. Their room is well propped and in a very good shape, but there was a rocky slip that went up through the coal and set this piece loose. They had six loose props at foot of their room.

Released
Mar 7/07

(Signature)

D. G. Jones

Title,

#1 Mine Foreman

Date

1

STATEMENTS OF WITNESSES.

When I was picking the coal at
*63 Room of *2 Entry *10 Mine, a rock
(about 2 feet sq.) fell down to my shoulder
and I injured about 2 inches long under
my right arm pit, on 6 o'clock A.M. of 18th of
Jan 1907

Signed

S. Oku.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *S. Oku.*
 Occupation, *Miner*
 Date of Accident, *Jan 18th*
 Location, *Rock Springs, Wyo.*
 If not injured in Mine, state where,

1907 Time *6 O'clock A.M.*
 Mine No. *10* Entry No. *2* Room No. *63*

Name of Mine Supt. *Geo L Black.*
 Age of Person injured, *32 years.*
 What Family, if any,

Name of Mine Foreman, *Jas. W. Paterson*
 Married or Single *Single*

How long in employ, of Co., *6 months*

Name and address of nearest living Relative,

Condition of Life or Circumstances,
C. Gonderer, (Friend) Rock Spgs, Wyo.

Was he an efficient man, *yes*

Where and in whose charge left,

Name of Physician called, if any,

Was he temperate, *yes*
Wyoming General Hospital
Young

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

*Lacerated right shoulder and
 cut on right side.*

Cause,

*He had got hole to close to roof
 and cracked it, in 2 or 3 days, the air
 got in and down came the rock
 causing the above injuries*

*Released
 1/12-07*

(Signature)

J. W. Paterson
 Title, *#10 Foreman.*

Date

1

STATEMENTS OF WITNESSES.

I. John Kos., was working in Room 73, Entry 46 in No 1 Mine on the 26th day of Jan 1907. I was in face of Room mining when some Coal off the face of the room bursted off and struck me on the back of my head and I fell on my face in among some loose coal that was lying at face of Room, and cut me about the upper lip and nose.

I was working alone that day my partner was not in.

Signed

John Kos.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Kos*Occupation, *Miner*Date of Accident, *Jan 26th*Location, *Rock Springs, Wyo.*If not injured in Mine, state where, *1*190 *7* TimeMine No. *One* Entry No. *46* Room No. *73*Name of Mine Supt. *Geo. Black*Age of Person injured, *19 years*What Family, if any, *9 months*How long in employ, of Co., *9 months*Name and address of nearest living Relative, *Yes*Was he an efficient man, *Yes*Where and in whose charge left, *Boarding house Back #1*Name of Physician called, if any, *Young & Chambers*Name of Mine Foreman, *D. G. Jones*Married or Single *single*Condition of Life or Circumstances, *yes*Was he temperate, *yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

*Cut on upper lip and nose
in several places.*

Cause,

*John Kos was mining in the face
of his room and some coal bursted off the
face and knocked him to the floor on
his face among some loose coal that
was lying there and cut several cuts
on upper lip and nose. His Room was
well timbered and he was amply
supplied with timber there was 8 loose
props at foot of his Room and 2 loose
props up near the face.**Released 7/5-07*

(Signature)

D. G. Jones

Title,

#1 Mine Foreman

Date

1

STATEMENTS OF WITNESSES.

ROCK SPRINGS WYO.

2-15-07

Statement of Tom. Baker concerning the injury of James W. McCormick who was injured yesterday on #7 Mine on #C. Plane near the bottom.

I was the first to see him at not later than 8.15 O'clock he was near the frog of the switch going to #C. Plane Sandy. I thought I heard some one whistle and went down the plane. I also wanted to see the rope runner James W. McCormick about some cars. When I saw him he was laying at Plane above mentioned, the cars (4 in number) were about 6 feet further up the plane than where he was, all off the track.

I did not see the rope move that morning so do not know anything about how the trip started. I went as soon as possible to get him assistance to get him sent out of the mine. From what I seen of the mixup I would not arrive at the conclusion that the cars ran over him, he may have been pushed along by the oil box and wheel of the cars. It seems to me that it is most likely that the injury occurred in this way. I would judge that the trip had moved about 4 pit car lengths from the place where it usually stands before the signal is given to hoist. I have worked as a driver, receiving cars from this plane about 3 months.

Tom Baker.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Villinetti*Occupation, *Miner*Date of Accident, *Feb 2nd*Location, *Rock Springs, Wyo.*190 *7*Time *8:30**A.M.*Mine No. *7*Entry No. *B*Room No. *3*

If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black*Age of Person injured, *36 years*What Family, if any, *Wife and 3 children*How long in employ, of Co., *About 3 months*Name and address of nearest living Relative, *Mrs. Joe Villinetti, Clee, Lirole, Austria*Was he an efficient man, *Yes*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Young & Chambers*Name of Mine Foreman, *Jack Dykes*Married or Single *Married*Was he temperate, *yes*Name and P. O. Address of Witnesses. *Henry Jori, (Friend) Rock Springs, Wyo.*

Nature and extent of Accident,

Fracture of right thigh.

Cause,

*Was engaged as a miner and while cutting some loose coal from the room face a piece of rock fell from the roof and caught him causing the injuries above described.**Knew the rock was loose and had tried to take it down and after worked under it without supporting it with timber, thinking that it would not fall very soon and that he would have time to load the loose coal from under it. Plenty of timber was in the room of a suitable length to use, was working alone at time of injury, No witness to accident.**We the undersigned, Certify the above to be Correct.**John ^{his} Villinetti**mark.**Released
7/1-07*

(Signature)

Jack Dykes

Date

1

Title,

#7 Mine Foreman.

STATEMENTS OF WITNESSES.

Rock Springs Wyo.

2-10-07

Statement of Mike Michko concerning his doings on the morning of the 14th, when James M^c Cormick was injured at the Bottom of *C Plane #7 Mine.

On the eve of the 13th I was familiarising myself with the use of the Controller having the power cut off by means of the feed wire switch. This was just before the rope runner gave me the signal that he was through. I continued with the Controller some time after receiving this signal, and then left the Engine without leaving the Controller at the Zero point. The last divisions being the most difficult I was using them the most and left the Controller on to the full extent. On the morning of the 14th when I entered the Engine Hoist room I put in the feed wire switch and the Engine started. When I discovered this I jumped to the Controller and pulled it to Zero.

I was unlocking the Engine house door when the bell rang to start. It was my second morning to be at the Engine at this time. I have run the Hoist on two different occasions before. I do not know why I left the Controller this way, my understanding was that it was at all times to be at the Zero point when leaving. This was at about 7:05 O'clock A.M.

Mike Michko.

Rock Springs Wyo.

2-14-07

Statement of James M^c Cormick, concerning injury about 8 A.M. at the bottom of *C Plane.

When the time came that I thought the Engineer was at the Engine I rang our bell, the trip did not start. I looked to see if my sprags were in their proper place and then returned to the bell cord and was just about to bell a second time when the trip suddenly started and struck me knocking me down. The caps I believe ran over me, they were off the track, but they may not all run over me, but I am sure one of them was on top of me. I was not unconscious know what was going on all the time. I was employed as rope runner *C Plane. I am bruised and hurt all over. Collar bone broken and probably some ribs the way they feel. I never saw the trip start so sudden before. I do not know what was the cause. Right arm injured, cannot sign.

James M^c Cormick ^{his} mark.

Continued
See Page #10.

Witness to above signature.

Ernest Lamour
Geo T. Dykes
#7 Boss.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *James M^c Cormick*
 Occupation, *Rope Runner*
 Date of Accident, *1st th of July.* 190 *7* Time *8 A.M.*
 Location, *Rock Springs, Wyo.* Mine No. *7* Entry No. *C. Lane* Room No.
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Forman, *Jno. L. Dykes*
 Age of Person injured, *26 years* Married or Single *Single*
 What Family, if any,
 How long in employ, of Co., *About 12 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Mrs. Clara M^c Cormick, Rock Springs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young and Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Collar bone broken (Right Side) Scalp wounds and bruised many places about limbs and body. (Not Serious)*

Cause, *Was engaged as a rope runner and while standing at the bell cord about to ring to the Engineer a second time the trip suddenly started and jerked the cars off the track and struck him knocking him down and dragging him for about 20 feet causing the injuries above described. (The Controller of Motor hoist was on) unknown to the Engineer and when the feed wire switch was put in the motor started suddenly. The motor was as the Engineer had left it the evening before. I know of no reason why this should have been done this way.*

Released *4/27-07*

(Signature)

Jno L. Dykes
#7 Boss.

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs Wyo.

2-18-1907

I. Wm Dixon was loading in 10 Mine
3 Entry 18 room about 4:15 o'clock P.M. While
pulling down some loose top coal in face of
room it came down and broke my leg. It
was an unavoidable accident. No one to
blame.

Signed William Dickson

P.S. Wm Dixon } are one and the same man.
Wm Dickson }

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Wm Dixon*
 Occupation, *Loader*
 Date of Accident, *18th July*
 Location, *Rock Springs, Wyo*
 If not injured in Mine, state where,

190 *7* Time *4:15 P.M.*
 Mine No. *10* Entry No. *3* Room No. *18*

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *Jas W. Paterson*
 Age of Person injured, *31 years* Married or Single *Married*
 What Family, if any, *None*
 How long in employ, of Co., *18 Months* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Wife. Mrs Wm Dixon Rock Springs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right leg broken below the knee.

Cause,

He was pulling down some loose coal in face of room and when it fell it struck him on the leg causing the above accident

*Released
 9/25-07*

(Signature)

*J. W. Paterson*Title, *#10 Mine Foreman*

Date

1

STATEMENTS OF WITNESSES.

Rock Springs Wyo.

2-20-07

I am a miner employed in 8 Mine in 2 Ent on Slope. Was working in 3 Room at 12 O'clock yesterday noon. There was some loose coal where I was working. I knew it was loose and was trying to watch it. Pretty soon it fell and before I could get out of the way the coal hit me. It hurt my right leg and cut my head.

Pete ^{his} X Sike

Mark.

Geo B Pryde.

Witness, to mark.

Rock Springs Wyo.

2-20-07

I am employed as a miner in 8 Mine and on the day of Feb 19th I was working with Pete Sike in 3 Room, 2 Ent, on Slope. There was some loose coal where Sike was working, but he thought it wouldn't come down very easily. While engaged at work the coal fell on his head and legs. There was plenty of timber in the room that we could have used as a sprag.

Mike ^{his} X Sike

Mark.

C. M. Johnson.

Witness, to mark.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Pete Sikie

Occupation,

Miner

Date of Accident,

19th of Feb.

1907

Time

12 O'clock (Noon)

Location,

Rock Springs, Wyo.

Mine No.

8

Entry No.

2 on 4th Room No.

3

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Name of Mine Foreman,

Geo. B. Pryde

Age of Person injured,

23 years

Married or Single

Married

What Family, if any,

None

How long in employ, of Co.,

7 Months

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Mrs. Pete Sikie, Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young and Chambers

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Head cut and right leg
bruised on account of coal falling
on him.

Cause,

Was engaged as a miner in
2 Ent on Slope and worked in 3 Room.
While engaged at his work he
noticed that some coal was loose
on the face, thought it would stay
up and kept on working. The coal
fell and before Sikie could get out of
the way it hit him on the head and
right leg, injuring him as stated above.

Released
Mar 4/07

(Signature)

Geo. B. Pryde

Date

1

Title,

#8 Mine Foreman.

STATEMENTS OF WITNESSES.

Rock Springs Wyo.

2/23 - 07

Statement of Marino Storgaard concerning the injury of one W. L. Miller in #7 Mine at Rock Springs, Wyo. property of U. P. Coal Co. on Feb 21, at about 3 P.M. In #1 Dip Entry 26 Room.

I was W. L. Miller's partner on the day above mentioned and was loading a car on the high side of the room. My partner told me not to come toward the middle of the room for the room was dangerous. When the rock fell the edge of it would be 5 or 6 feet from where I stood. I am an unexperienced mine worker and this was my 1st day in the mine. I believed my partner to be able to tell where the place was safe. I thought I would be better to work with him than with altogether strangers to me, as he had worked in mines before. He never said any thing to me of the rock being loose but bade me keep on the high side of the room.

Signed.

Marino Storgaard

Rock Springs Wyo.

2/23 - 07

Statement of W. Miller. Injured in #7 Mine Rock Springs, Wyo on the 21st day of Feb 1907 In #1 Dip Entry Room 26 about 3 O'clock P.M.

I was just about finished loading my car with coal and went to pull down some more loose coal to finish loading the car when a large piece of slate fell and struck me knocking me down and breaking my right leg below the knee.

I knew that the rock was loose, but did not think that it would fall so quick. A post had been set under the rock, but it became knocked out by falling the loose coal, and the rock that fell was between the discharged post and the low rib, this was a portion of the rock that was supported by the post.

I have worked in Ore mines about 2 1/2 years. I spoke to the driver about giving me another room, and he told me to load another car until he would see the front driver to find out which room it would be. The driver sounded the roof and said it was not safe. The post set would not be sufficient to support this rock considering the width of the room. The post was a little nearer the high side of the room center.

Signed.

W. L. Miller

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

W. Miller

Occupation,

Loader.

Date of Accident,

Feb 21st

Location, Root Springs, Wyo.

1907

Time

3 o'clock P.M.

Mine No. 7

Entry No. 1

Room No. 26

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

34 years

What Family, if any,

None

How long in employ, of Co.,

5 days

Condition of Life or Circumstances,

Name and address of nearest living Relative,

(Friend) Marinus Storgaard, P.S.W.

Was he an efficient man,

yes

Was he temperate,

yes

Where and in whose charge left,

Wyoming General Hospital
Young & Chambers.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right leg broken below the knee,
bruised on head.

Cause,

Was engaged as a loader and, while, about to pull down some loose coal from the working face of the room to finish loading the car, he was loading a piece of rock about 5" thick and $\frac{3}{4}$ the width of the room in. width fell and struck him causing the injuries above described. A post was set under the rock to support it and this post was knocked out by the working men in falling the coal, and the post was not reset. He asked the driver to give him another room for the next car, the driver told him to see the inside driver who changed, the loaders from one Room to Another. The men knew that the rock was dangerous. Marinus Storgaard witness to accident.

Released
May 1/07

(Signature)

Jno L Dykes.

Title,

#7 Foreman

Date

1

STATEMENTS OF WITNESSES.

ROCK SPRINGS WYO.

Sept 23 - 1907

Statement of O. Kyn, (Korean)

Age 34 years; Was loading coal in
S. South entry. I was in the act of running
my car down the room when the car
jumped the track and caught my left leg
cutting it slightly. This happened about 9:30
A.M. on the 19th of Sept, '07

I am a married man have a wife and
two children in Korea. I have worked for
the Company 7 months.

Signed

O. Kyn, injured

K. I. Whang.

Witness

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

D. Kyn.

Occupation,

Loader.

Date of Accident,

Feb 19th

Location, Rock Springs, Wyo.

190 7 Time 9.30 O'clock A.M.
Mine No. 9 Entry No. 8 South Room No. 2

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

34 years

What Family, if any,

Wife and 2 children.

How long in employ, of Co.,

7 Months

Name of Mine Forman, M. W. Medill

Married or Single

Married

Name and address of nearest living Relative,

Wife in Korea. K. I. Whang. Rock Spgs, Wyo.

Was he an efficient man,

yes

Condition of Life or Circumstances,

(Friend)

Where and in whose charge left,

Hospital

Was he temperate,

yes.

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Slight cut on shin of left leg.

Cause,

He was running his car down the room and the car jumped and caught his left leg between the car and the tire, causing the above accident.

Started to work to day, Feb 25th 1907

Released
May 7/07

(Signature)

M. W. Medill

Date

1

Title,

#9 Foreman.

STATEMENTS OF WITNESSES.

Rock Springs Wyo

Feb, 20. '07

Name. S. Shirayama
 Age. 28 years
 Place. 11th Room of 5th Entry #10 Mine
 Time. Half past 2 O'clock P. M.
 How I did injured? When one small lump of coal fell down upon the machine I tried to take out the stuff then my third finger of the right hand touched the sharp end of said machine and was cut off about $\frac{3}{4}$ inch from first joint

Signed - S. Shirayama.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *S. Miyayama*
 Occupation, *Machine Runner*
 Date of Accident, *Oct. 1907*
 Location, *Rock Springs, Wyo*
 If not injured in Mine, state where,

1907 Time *2:30 P.M.*
 Mine No. *10* Entry No. *5* Room No. *11*

Name of Mine Supt. *Geo. B. Black* Name of Mine Foreman, *Jas. W. Paterson*
 Age of Person injured, *28 years* Married or Single *Married*
 What Family, if any, *Wife and 2 children.*
 How long in employ, of Co., *2 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Wife and family, Jap town Rock Springs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *In charge of his Wife*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Third finger on right hand cut off at last joint.*

Cause, *Was running a machine and a lump of coal fell down on the machine. When he reached down to pick it up one of the bits caught his finger between the coal and bit, causing the above accident.*

Released 1/12/07

(Signature)

*J. W. Paterson**#10 Mine Foreman*

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs Wyo.
Feb 27-07

While working in #8 Mine on Feb. 25th I had my left foot injured. I work as a miner in #10 Room 3 Ent. & Plane and while at work on that day I found out I had no squibbs, and went into #9 Room to borrow some from Pavo Pavich. While sitting on the bumper of a car talking to Pavo, a piece of slate fell from the roof and injured the big toe and next one to it on my left foot. The rock weighed about 2 or 3 pounds.

David Knezevich.

Rock Springs, Wyo.
Feb 27 - 07

Statement of Pavo Popovick who was a witness to the accident to David Knezevich.

I am employed as a miner in #8 Mine, and was so employed in #9 Room 3 Ent. & Plane on Feb 25th. About 9:00 A.M. David Knezevich, a friend of mine came into my room and asked for some squibbs. He sat down on the bumper of a car and was talking to me when a small piece of slate fell from the roof and injured his left foot.

Pavo Popovic

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *David Knezevich*Occupation, *Miner*Date of Accident, *Feb 25th*Location, *Rock Springs Wyo.*

If not injured in Mine, state where,

190 *7*

Time

9 A.M.

S.

Entry No. *3-4th* Room No. *9*Name of Mine Supt. *Geo. Black*Age of Person injured, *31 years*

What Family, if any,

How long in employ, of Co., *3 years*Name and address of nearest living Relative, *Bogo Knezevich, Rock Springs, Wyo.*Was he an efficient man, *Yes*

Where and in whose charge left,

Name of Physician called, if any, *Young & Chambers.*Name of Mine Forman, *Geo B. Pryde*Married or Single *Single*Condition of Life or Circumstances, *(Brother)*Was he temperate, *Yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

First and second toes injured by a piece of slate falling from roof.

Cause,

*Knezevich, who is a miner employed in #10 Room on 3 Ent. 4 Plane. On the morning of Feb 25th about 9:00 A.M. he found out he had no squibs, so he went over to #9 Room to one of his Countrymen in order to borrow some squibs. While sitting on a car chatting with his friend a small piece of rock fell from the roof and hit Knezevich on the left foot injuring him as stated above.**Released
June 6/07*

(Signature)

Geo B. Pryde

Title,

#8 Mine Boss.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs Wyo.
March 9th, 1907

Statement of James Hays, who was working with John W. Morgan, when the latter was injured on March 7th 1907.

I am employed as a pusher in Union Pacific Mine #8. Was pushing cars at the bottom of the shaft for John Morgan, at 1:30 P.M. on March 7th (Thursday).

I had pushed one car down to the cage, and went back for one more but it was coming so fast that I was unable to stop it with a spray or to turn my latches for the opposite track to which Morgan was caging a car.

I was so excited that I could not call to Morgan to look out, the result was, the car I was trying to stop run on to his right leg and broke it at the ankle.

James Hays.

Rock Springs Wyo.,
March 9th, 1907

I am employed as a gayar in #8 Mine. Was working at the bottom of the shaft on March 7th. Was pushing a loaded car on the cage. James Hays who was pushing cars to me, went back along the track to get a loaded car. He did not turn his latches and when he came to the latches with the loaded car, it took the wrong track and bumped into my leg and broke it. It seems to me that Hays took a dizzy spell or he could have hollered to me.

John W. Morgan

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John W. Morgan*Occupation, *Cager.*Date of Accident, *March 7th*Location, *Rock Springs Wyo.*1907 Time *1:30 P.M.*Mine No. *8*Entry No. *—*Room No. *Bottom of**shaft.*

If not injured in Mine, state where,

Name of Mine Supt. *Geo. H. Black*Age of Person injured, *34 years*What Family, if any, *2*How long in employ, of Co., *13 years*Name and address of nearest living Relative, *Mrs. Sarah Morgan, Rock Springs, Wyo.*Was he an efficient man, *Yes*Where and in whose charge left, *At Home*Name of Physician called, if any, *Oliver W. Chambers.*Name of Mine Forman, *Geo. B. Pryde*Married or Single *Married*

Condition of Life or Circumstances,

Was he temperate, *Yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right leg broken at ankle on account of a loaded car hitting it.

Cause,

*I examined the place where the injury of Morgan took place and it seems to me that the statement of Stays is about correct.**From the fact that Morgan was standing with his back to the approaching car, it is impossible that he could see in what condition Stays was in, or why he didn't stop the car.**Stays claims that he took no dizzy spell but, that the car was coming so fast that he was unable to stop it, or give Morgan warning of its approach.**I believe the statement is right as cars have gotten away before now, but have injured no one; and probably Morgan would not have been injured had he not been a little deaf.*

(Signature)

Geo. B. Pryde.

Title,

8 Foreman.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
March 7th - '07

I was working with Paul Pissala
in #10 Mine, 6 Entry, Room 4, March 2nd
about 2:30 O'clock P.M. When a piece of Rock
fell from the roof and nacket him down,
hontt his laeft arm.

John Camm.
Witness

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Paul Lessala*Occupation, *Loader*Date of Accident, *March 2nd*

1907

Time

*2:30 P.M.*Location, *Rock Springs, Wyo.*Mine No. *10*Entry No. *67*Room No. *1*

If not injured in Mine, state where,

Name of Mine Supt. *Geo. D. Black*Age of Person injured, *54 years*

What Family, if any,

How long in employ, of Co., *18 years*

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

yes
Wyoming General Hospital
Chambers and Young.

Was he temperate,

yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

*and**Left arm broken between elbow*
wrist.

Cause,

Was loading a car when some rock fell down and struck him on the leg and knocked him down. When he fell his arm struck some loose coal on it causing the above accident. There was plenty of loose props in room. The timber in this room was the regular distance from the face. And the loader is supposed to keep the face of the room safe, while he is loading in there.

Released 4/27/07

(Signature)

J. W. Paterson

Title,

#10

Foreman

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *August Shupertale*
 Occupation, *Car Pusher (Dump)*
 Date of Accident, *16th Day March 1907* Time *12:30 O'clock P.M.*
 Location, *Rock Springs, Wyo.* Mine No. *9 (Dump)* Entry No. *—* Room No. *—*
 If not injured in Mine, state where, *—*

Name of Mine Supt. *Geo L. Black* Name of Mine Foreman, *C. E. Moffitt*
 Age of Person injured, *20 years.* ~~Married or~~ Single
 What Family, if any, *—*
 How long in employ, of Co., *18 Months* Condition of Life or Circumstances, *—*
 Name and address of nearest living Relative, *—*
 Was he an efficient man, *yes* Was he temperate, *yes*
 Where and in whose charge left, *—*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *End of 4th finger on left hand
crushed.*

Cause, *Patient was helping the Elevator
man put on the belt that conveys the
slack to the Boiler house, and caught
end of the 4th finger on the left hand
and crushed it.*

Released 12/23-07

(Signature)

C. E. Moffitt
Outside Foreman

Date

1

Title,

Statement of Party Injured:-

Rock Springs, Wyo.

Feb 24th, 07.

I, Paavo Ruotsala, was undermining in Room 86, Entry 47, in No 1 Mine on the 22nd day of Feb., 1907., When a piece of Coal flew from point of pick and struck me on my left eye.

Paavo Ruotsala.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Paavo Ruotsala.*Occupation, *Miner*Date of Accident, *Feb 22nd*Location, *Rock Springs, Wyo*

If not injured in Mine, state where,

1907 Time *10 O'clock A.M.*
Mine No. *One* Entry No. *47* Room No. *86.*Name of Mine Supt. *G. L. Black.*Age of Person injured, *29 years.*

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man, *Yes*

Where and in whose charge left,

Name of Physician called, if any,

Name of Mine Forman, *D. G. Jones.*

Married or Single

Condition of Life or Circumstances,

*Ade Ruotsala (Brother)*Was he temperate, *yes.**Wyoming General Hospital,
Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Blow on left eye.

Cause,

Paavo Ruotsala was undermining in the face of Room 86, Entry 47, when a piece of Coal flew from point of Pick and struck him in the eye, causing the above injury.

*Released
4/17-07*

(Signature)

D. G. Jones.

Title,

#1 Mine Foreman

Date

1

Rock Springs Wyo.
April 14th 1907.

I, Ivan Krupane, was working as a loader in #8 Mine on April 12th. At 4 P.M. I was working in 20 Room on 1 Cent. on Slope and was pulling down some overhanging coal that was in the Room. I got in front of the loose coal to pull it down. I saw the coal was going to fall and tried to get out of the way. A piece of coal struck me on the shoulder and knocked me down, then a lot more coal fell on me.

Mike Krizevic
Witness to Statement

Rock Springs Wyo.
April 15th, 1907.

{ Statement of Tony Miletus who was }
{ working with Ivan Krupane when the }
{ latter was injured in #8 Mine }

I am employed as a loader in #8 Mine. Was working in 20 Room, 1 Cent. on Slope, on the 12th of April, 1907.

I was loading on the low side of the room, while Ivan Krupane was loading on the high side.

At 4:15. While we were loading our Cars, Ivan Krupane was endeavoring to pull down some loose coal from the face of the room. He was standing in front of it, and I saw the coal fall and knock him down. I helped to get him out from under the coal and bring him outside.

Tony Miletus
Witness to Accident

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Ivan Krifane*Occupation, *Loader*Date of Accident, *April 12th*

1907

Time

*4:15 O'Clock P.M.*Location, *Rock Springs, Wyo*Mine No. *8*Entry No. *1* Bull Room No. *20*

If not injured in Mine, state where,

Name of Mine Supt. *Geo L Black*Name of Mine Foreman, *Geo. B. Pryde*Age of Person injured, *36 years*

Married or Single

What Family, if any, *3*How long in employ, of Co., *9 Months*

Condition of Life or Circumstances,

Name and address of nearest living Relative, *Mrs Ivan Krifane*

Address

Was he an efficient man, *Yes*Was he temperate, *Yes*Where and in whose charge left, *Glyoming General Hospital*Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

*Ricice, Selo-Apceni, homeriac, Strovatske, Licia,
Austria, Europa.*

Nature and extent of Accident,

*Both legs and right arm broken
and bruised about body, 1/2 of Coal falling
on him.*

Cause,

I examined the place where Krifane was injured and found that a great deal of coal had fallen from the face where the accident occurred. It seems that the injured man was loading a car, and wishing to get some chunks he took his pick and endeavored to pull some loose coal from the face of the room. While doing so he stood directly in front of the loose coal instead of standing to one side as he should have done.

The coal being looser than he expected, came very suddenly, and while Krifane was endeavoring to get out of the way a chunk hit him and knocked him down. Before he could regain his feet a large amount of Coal fell and injured him, injuring him as stated above.

The room was well timbered and in good Condition.

*Died in
Hospital.*

(Signature)

Geo. B. Pryde

Title,

#8 Mine Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Pete Tomasi*
 Occupation, *Loader*
 Date of Accident, *April 16th* 190 *7* Time *9 O'Clock P.M.*
 Location, *Rock Springs, Wyo.* Mine No. *8* Entry No. *1* Main Room No. *32*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *Geo. B. Pryde*
 Age of Person injured, *24 years* Married or ~~Single~~
 What Family, if any,
 How long in employ, of Co., *One year* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Ed. Anesi, Rock Springs Wyo.*
 Was he an efficient man, *I don't know* Was he temperate, *I don't know*
 Where and in whose charge left, *Treated by Italian Doctor, and then by*
 Name of Physician called, if any, *Young & Chambers, and later sent to Ogden.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Right eye injured, % of being struck by a piece of coal.*

Cause,

This man had only worked in #8 Mine for 2 Mos, when his eye was injured, so I know little about him or his character.

The night Foreman informed me that he was loading a car and while lifting a chunk of Coal, it broke and a small piece hit him in the right eye, injuring it as stated.

Trunk Concini says that he did not witness the accident, but that it is his understanding, that it occurred as stated.

I have no statement from Tomasi, as he is at present in Ogden.

Released 6/28-07

OK.

M. G. Griffiths (Signature)

Geo. B. Pryde

Date

1

Title,

#8 Mine Foreman

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Geo. Fitchett*
 Occupation, *Asst. Foreman*
 Date of Accident, *4th of April* 190 *7* Time *2 P.M. O'clock*
 Location, *Rock Springs, Wyo* Mine No. *8* Entry No. *1 on slope* Room No. *15 or 16*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *Geo. B. Pryde*
 Age of Person injured, *40 years* Married ~~or~~ *Single*
 What Family, if any, *None*
 How long in employ, of Co., *18 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Mrs Geo Fitchett, Rock Springs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Home*
 Name of Physician called, if any, *Young & Chambers, and later sent to Ogden to Dr Brick.*
 Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Left eye injured.*

Cause, *I know very little of this accident except, what is contained in the Report of Drs Young and Chambers and that of Dr Brick.*

Mr Fitchett complained several days about having a sore eye, on account of coal getting into it, but kept on working. He then stayed home several days, and finally went to Ogden, for treatment.

I have no statement from him as he is at present in Ogden.

Released
6/13-07

M. G. Griffiths

(Signature) *Geo. B. Pryde*

Title, *# 8 Mine Foreman*

Date

1

Statement of Party Injured.

I, John Riley, was working on a cave on the Slope, in No 1 Mine, on the 6th of April 1907. I was breaking a large chunk of bony with a pick, when a small piece flew from point of pick and struck me on my right eye, causing a bad pain in my eye. It was the same eye that I had hurt last January.

John Riley

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Riley*
 Occupation, *Miner*
 Date of Accident, *April 7th* 190 *7* Time *3 O'clock P.M.*
 Location, *Rock Springs, Wyo.* Mine No. *1* Entry No. *On Life* Room No.
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black.* Name of Mine Foreman, *D. G. Jones.*
 Age of Person injured, *33 years.* Married or ~~Single~~
 What Family, if any, *None*
 How long in employ, of Co., *Three Years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Mrs. Jno. Riley, Rock Springs, Wyo.*
 Was he an efficient man, *Yes.* Was he temperate, *Yes.*
 Where and in whose charge left, *Sent to Dr. Strader, Cheyenne, Wyo.*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Blow on right eye.

Cause,

John Riley was working on Cave in, on slope, at No 42 Entry. He was breaking a chunk of Bony with a pick, when a piece flew from point of pick and struck him on the Right eye, causing the aforesaid injury.

*Released 1/14-08**H. Morgan Griffiths*

(Signature)

D. G. Jones

Date

1

Title,

#1 Mine Foreman

Statement of Party Injured.

I, Henry Kuoppala, had been at work in No 1 Mine, on the 28th of March, and I came up on Man-Trip at 5:30 P.M. I was crossing couplings of Railroad Cars outside of Mine, and I fell and broke my left arm between wrist and elbow.

Henry Kuoppala.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Henry Kuoppala*
 Occupation, *Miner*
 Date of Accident, *March 28th* 190 *7* Time *5:30 O'clock (P M)*
 Location, *Rock Springs, Wyo.* Mine No. *1* Entry No. *Outside* Room No.
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *D. G. Jones*
 Age of Person injured, *27 years* ~~Married~~ or Single
 What Family, if any,
 How long in employ, of Co., *4 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Jack Kuoppala, Rock Springs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Jack Piittari Boarding House (*95)*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Left arm broken between Wrist and Elbow.*

Cause, *Henry Kuoppala was on his way home from the mine, and was crossing some R.R. cars in the yard, and fell and broke his arm.*

Off. Morgan Griffiths.

Released 5/21-07

(Signature)

D. G. Jones

Date

1

Title,

#1 Mine Foreman

STATEMENTS OF WITNESSES.

May 3rd, 1907.

I, A. Luv, Was working on a machine April 27th, 10 Mine, 6 North, 8 Room, at one O'clock P.M. The Machine was running and I could not hear the coal got loose, and fell down striking me on the back.

No Bones broken.

A. Luv.

Rock Springs, Wyo May 3rd, 1907.

When we were working the Machine with a Korean, who was my partner, he was struck on his back with a big lump of coal at half past 1 O'clock P.M.

S. Grimatsu

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *A. Lee*
 Occupation, *Machine Shifter*
 Date of Accident, *April 27th* 1907 Time *2 P.M.*
 Location, *Rock Springs, Wyo* Mine No. *10* Entry No. *6* Room No. *8*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *Jno. W. Paterson*
 Age of Person injured, *34 years* Married or Single
 What Family, if any,
 How long in employ, of Co., *4 Months* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *A. I. Whang, Korean Boss, #9 Camp*
 Was he an efficient man, *Yes* Was he temperate, *yes*
 Where and in whose charge left, *Taken Home*
 Name of Physician called, if any, *Dr Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Slightly hurt on small of back.*

Cause, *He was helping on Cutting Machine, and the Coal in face of room became loose, and falling on his back caused the above injury.*

Filed 6/28-07

(Signature)

J. W. Paterson

Title,

#10 Mine Foreman

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo, March 7, '07

I was driving in No 1 Mine in 51 Entry on the 7th of March, 1907. I was coming out of entry with 6 loaded cars and I was going to Couple to a load at 20 Boom. I had 1 spragg in the first car of my trip, and I thought they was coming a little to fast, so I was holding back at the corner of the first car, my foot pretty close to the rail, and the oil box of the wheel caught in my heel and doubled my foot over.

L. Genetti.

Driver

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *L. Genette*
 Occupation, *Driver*
 Date of Accident, *March 7th*
 Location, *Rock Springs, Wyo.* 1907 Time *11:30 A.M.*
 If not injured in Mine, state where, Mine No. *One* Entry No. *51* Room No.

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *O. G. Jones*
 Age of Person injured, *21 years* Married ~~or~~ *Single*
 What Family, if any,
 How long in employ, of Co., *2 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative,
 Was he an efficient man, *yes* Was he temperate, *yes*
 Where and in whose charge left, *at Boarding house on Bridge Ave.*
 Name of Physician called, if any, *Young & Chambers*
 Name and P. O. Address of Witnesses,

Nature and extent of Accident, *Right foot bruised.*

Cause,

L. Genette was driving in 51 Entry, he was coming out along Entry with a trip of 6 loaded cars, and was going to couple up to another load at 30 Room. He had one spragg in the first car of trip, the cars were running pretty fast and he was holding back on the corner of first car. The oil box of wheel of first car caught his heel and doubled his foot over, it was his right.

Released 6/29-07

(Signature)

O. G. Jones

Title,

#1 Mine Foreman

Date

1

STATEMENTS OF WITNESSES.

Party Injured.

I, Victor Heikkela, was under mining in 51 Back Entry, on the 9th day of January 1907, in No 1 Mine, when a piece of coal flew from mining and struck me in the right eye, cutting the eye and a piece of coal stuck in the eye.

Victor Heikkela

L. Wisti
Witness

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Victor Steikkela*Occupation, *Miner*Date of Accident, *Jan 9th* 1907 Time *10 O'clock A.M.*Location, *Rock Springs, Wyo.* Mine No. *1* Entry No. *51* Room No. *—*

If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black*Age of Person injured, *36 years*What Family, if any, *Three*How long in employ, of Co., *5 years*Name and address of nearest living Relative, *Jas Liviako Rock Springs, Wyo.*Was he an efficient man, *Yes*Where and in whose charge left, *Paavo Pietekainen, Boarding House #1*Name of Physician called, if any, *Young and Chambers*Name of Mine Foreman, *O. G. Jones*Married ☒ Single

Condition of Life or Circumstances,

Was he temperate, *Yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right eye injured.

Cause,

Victor Steikkela was under-mining at face of 51 Back Entry, in No. 1 Mine, on the 9th of January 1907. When a piece of Coal flew from Mining and struck in his Right Eye, causing afore said injuries.

Released

(Signature)

O. G. Jones

Title,

#1 Mine Foreman.

Date

1

STATEMENTS OF WITNESSES.

Statement of Marko Govich who was working in #8 Mine on May 1st, and was injured on that date.

I am employed as a loader at #8 Mine, and was working as said, on May 1st, at 10:00 A.M. I was running a car down 28 Room, on 2 Entry, 1 Plane, when I came to the top coal close to the Entry my car was built very high and it stuck in the top coal, and a chunk of coal caught my finger and squeezed it against the car. It was the second finger of my left hand.

Marko Govich } One and the same
Marko Govich } man.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Marks Yovich

Occupation,

Loader

Date of Accident,

May 1st

Location, Rock Springs, Wyo.

1907

Time 10 A.M.

Mine No. 8

Entry No. 2-4 Plan Room No. 28

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Name of Mine Foreman,

Geo. B. Pryde

Age of Person injured,

27 years

~~Married~~ Single

What Family, if any,

How long in employ, of Co.,

9 Months

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Joseph Yovich

Was he an efficient man,

Not Very

Was he temperate, yes

Where and in whose charge left,

Went home and on May 5th went to, W.B.M.

Name of Physician called, if any,

Young & Chambers

Name and P. O. Address of Witnesses.

Dragin, Splät, Dalmatia, Austria,
Europe. (Father)

Nature and extent of Accident,

2nd finger of left hand lacerated on
account of being caught and squeezed
between the car and a chunk of coal.

Cause,

Was running a car down the room
and on account of its being loaded too high,
a chunk of coal on top of the car caught
in the top coal and squeezed the second
finger of his right hand between the chunk,
and the car. This was a trifling injury,
but on account of the failure of Yovich to go and
get proper medical attention, the finger became
infected.

Released 7/3-07

P.S.

No Witness to Accident

(Signature)

Geo. B. Pryde

Title,

Mine Foreman.

Date

OK. Morgan Griffiths

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.

May 7th 1907.

I was working with John Kushma
in #10 Mine, 6 South, 2 Room on the
25th day of April 1907, about 10:30 A.M.

There was some coal and rock
fell in face of room striking him on
the head. There was no one to blame
for the accident.

R. Paternoster

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Geo. Kushma*Occupation, *Miner*Date of Accident, *25th April*Location, *Rock Springs*

If not injured in Mine, state where,

1907 Time

Mine No. *10*Entry No. *6* South Room No. *2*Name of Mine Supt. *Geo. L. Black*Age of Person injured, *50 years*

What Family, if any,

How long in employ, of Co., *6 years*Name and address of nearest living Relative, *Mrs Joe Matto (Daughter) Rock Springs, Wyo.*Was he an efficient man, *Yes*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Young & Chamberlaine*

Condition of Life or Circumstances,

Was he temperate, *Yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Scalp wound.

Cause,

He was loading a car when some coal and rock fell from the face of room, striking him on the head, causing the above injuries

Released 5/21-07
K. Morgan Griffiths

(Signature)

J. W. Paterson

Title,

Mine Boss

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
May 14th, 1907

I, James T. Sprowell, was driving in #4 Entry #10 Mine about 10:30 O'clock I was coming out with the trip. They flagged me at 77 Room but I was unable to stop. Two men and a driver were at 76 room and I called for them to get out of the way. The driver and one man ran out of the way and the other one stood there. He had plenty of time to get out of the way. The car struck him causing the accident.

James T. Sprowell.

Rock Springs, Wyo.
May 14 - '07

I, Stephen Barrass, was working as a driver in #4 Entry #10 Mine on the 14th day of May about 10:30 O'clock. I was putting cars on the track with Dume Rodin and his partner. I heard inside driver coming out and flagged him but he could not stop. They called for us to get out of the way, and his partner and I ran out of the way, but he stood there until the car struck him causing accident.

Stephen Barrass

Rock Springs, Wyo.
May 15th, 1907.

I, Dume Rodin, was working as a loader in #4 Entry 76 Room on May 14th 1907. My car ran off the track and when lifting, the inside driver came out. He called to me, but I could not understand. His trip ran into me and caused accident.

Dume Rodin.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Darne Rodin*
 Occupation, *Loader*
 Date of Accident, *May 14th 1907* Time *10:30 A.M.*
 Location, *Rock Springs, Wyo.* Mine No. *10* Entry No. *4* Room No. *76*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *Jno W. Paterson*
 Age of Person injured, *42 years* Married or Single
 What Family, if any,
 How long in employ, of Co., *3 Month 10 Days* Condition of Life or Circumstances,
 Name and address of nearest living Relative,
 Was he an efficient man, *yes* Was he temperate, *yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left leg broken below the knee.

Cause,

He was standing on the Entry when the driver was coming out with his trip. He called for them to get out of the way and tried to stop his trip. Two men ran out of the way and the other stayed there and got struck with cars, causing the above accident.

Released 7/19-08

(Signature)

Jno W. Paterson

Date

1

Title,

#10 Mine Foreman

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.

May 13th, 1907.

I, Aug Gentilini:— Was working in #10 Mine & Entry 85 Room with Cedar Gupp about 2:30 O'clock P.M. He was trying to pull down some loose coal when it fell over and caught him between the car and rib, striking him on the left leg knocking him down. It was an unavoidable accident, no one to blame.

Aug Gentilini

Rock Springs, Wyo.

May 15th, 1907.

I, Cedar Gupp:— Was working as a loader in #10 Mine & Entry 85 Room on May the 13th. When taking down some loose coal, I tried to jump out of the way when I ran up against the car and the coal struck my left leg breaking it. No one to blame for accident.

Cedar Gupp

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where,

Cedar Guffe
Leader13th May

190 7

Time

2:30 P.M.

Mine No.

10

Entry No.

4

Room No.

85

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name of Mine Forman,

~~Married~~ or Single

Condition of Life or Circumstances,

Was he temperate,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Cause,

Left leg broken below the knee.

Was pulling down some loose coal
in face of room, when the coal came
down and struck him causing the above
accident

Released 7/15-07

(Signature)

Jno. W. Paterson

Date

1

Title,

#10 Mine Foreman

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
May 13th 1907

I, Chas Spence Jr. - was working in
10 Mine, 5 Entry, 8 Room, with my brother
John Spence about 12:30 P.M. While loading
his car a piece of rock fell from the roof,
striking him on the head and legs causing
accident. I sounded the roof about 3 minutes
before the accident and it seemed to be alright.

It was an unavoidable accident.

Chas. R. Spence Jr.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Spencer*
 Occupation, *Loader*
 Date of Accident, *May 13th* 190*7* Time *12:30 P.M.*
 Location, *Rock Springs, Wyo.* Mine No. *10* Entry No. *5* Room No. *8*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. R. Black* Name of Mine Forman, *Jno. W. Paterson*
 Age of Person injured, *14 years* ~~Married or Single~~
 What Family, if any,
 How long in employ, of Co., *2 weeks* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Father, Rock Springs, Wyo.*
 Was he an efficient man, *Young boy* Was he temperate, *yes*
 Where and in whose charge left, *At Home*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Scalp wound and legs bruised.*

Cause, *He was loading his car, when a piece of rock fell from the roof and struck him causing accident right in face of room.*

Released Apr 14/08

(Signature)

Jno W. Paterson
& 10 Foreman

Date

1

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

E. L. Steele.

Occupation,

Driver (Extra)

Date of Accident,

1st day of May

1907

Time

8 O'clock A.M.

Location, Rock Springs, Wyo.

Mine No. 7

Entry No. 3

Room No. 1

If not injured in Mine, State where,

Name of Mine Supt.

Geo. L. Black.

Age of Person injured,

21 years.

Name of Mine Foreman,

Jno. L. Ryker

What Family, if any,

~~Married~~ Single

How long in employ, of Co.,

One Month

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Blanch Lee, Superior, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right foot squeezed between
fit car bumper.

Cause,

Was engaged as a driver and presumed he was not so close to #7 Room where he was to couple cars to make up his trip. He had a light, and was riding on the front end of the car and trimming his lamp and not looking ahead, when the mule stepped to the side and the car he was riding, and the car at the bottom of the #7 Room which he had called to be run on the Entry, bumped together, and his right foot being caught between the bumpers caused the injury above described. The injury was accidental and no one to blame.

We the undersigned certify the above correct

Elden L. Steele.

M. Griffiths (OK)

(Signature)

Jno. L. Ryker

Title,

#7 Foreman.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
6-11-07.

I, Joe Sincis: Working as a miner
in Room #13, #6 Ent, #3 Plane, was in
the act of mining coal in 21st day of
May, about 9 A.M., when coal gave
way and caught me. Not seriously
hurt. I am 35 years old
I am single man
I have worked for Co. 5 months.

Joe Sincis
Injured

Joe. Reven
Witness

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Joe Sencis

Occupation,

Miner

Date of Accident,

21st of May

1907

Time

9 O'clock A.M.

Location,

Rock Springs, Wyo.

Mine No.

9

Entry No. 6,

3rd Floor

Room No.

13

If not injured in Mine, state where,

Name of Mine Supt.

Geo. H. Black.

Name of Mine Foreman,

M. W. Medill

Age of Person injured,

35 years.

~~Married~~ Single

What Family, if any,

How long in employ, of Co.,

5 Months

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Friend,

Joe Reven.

Was he an efficient man,

yes

Was he temperate,

yes

Where and in whose charge left,

Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Bruised back, arms and legs.

Cause,

He was in the act of mining coal, the coal was loose from an old shot and when he was down mining the coal gave away and fell on him, causing the above accident.

Released 7/9-07

(Signature)

M. W. Medill

Title,

#9 Foreman.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
7/6/07

Statement of D. Oresto, injured in #7 Mine
on the 20th day of June 1907.

I was under cutting the coal at the working face of my Room, and when the mining was at a depth of three feet, some coal from the front of the mining fell and caught me while I was laying on the bottom under ^{cutting} the coal, breaking my Collar bone on the right shoulder.

I was satisfied from examining the face of the coal that it was practically alright to work under. I had plenty of timber in my room of a suitable length.

Signed

D. Oresto	} Are one and the same person	{	Oreste Decorso. (Injured)
Oreste Decorso			Figilio Sore (Witness to signature)
			Decorso Samuele (" " Accident)

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *N. Orasta*
 Occupation, *Miner*
 Date of Accident, *Aug. 20th*
 Location, *Rock Springs, Wyo.*
 If not injured in Mine, state where,

1907 Time *9:30 A.M.*
 Mine No. *7* Entry No. *3* Room No. *205*

Name of Mine Supt. *Geo L. Black*
 Age of Person injured, *27 years*
 What Family, if any,
 How long in employ, of Co., *About 9 Months*
 Name and address of nearest living Relative,
 Was he an efficient man, *Yes Miner*
 Where and in whose charge left, *His Friends*
 Name of Physician called, if any, *Young & Chambers.*
 Was he temperate, *Yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

*Right Shoulder Injured by falling
 coal. Collar bone broken.*

Cause,

*Was engaged as a miner and while
 undermining the coal some coal fell from the
 face of the undercut coal as he was laying
 down on the Room Bottom and caught his right
 shoulder causing the injuries above described.
 He had examined the coal at times
 while undermining the same, but did not think
 that it was loose enough to fall.*

*There was plenty of timber in the room
 of a suitable length.*

*Released
 8/25-07*

(Signature)

Geo L. Dykes
#7 Mine Foreman
O.K. G.B.P.

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
June 22, 1907

Statement of Olive Anselmi who was
injured in #7 Mine on the 12th Day of June 1907.

I was engaged as a Blaster and
while fixing up #7 Room in B. Entry Inside
of V. Plane, I had taken down all the loose
rock and was going to begin clearing the
road way, when a piece of Rock fell and
caught me bruising my fore head slightly
and injuring my back. It was my
work to fix up place ready for loaders.

I do not think any one is to blame
for the injury or accident.

Olive Anselmi.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Oliva Anselmi*
 Occupation, *Blaster*
 Date of Accident, *June 12th*
 Location, *Rock Springs, Wyo*
 If not injured in Mine, state where,

1907
Mine No. 7

Time 12 O'clock P.M.

Entry No. *B. (Plane)* Room No. 7

Name of Mine Supt. *Geo. L. Black*
 Age of Person injured, *29 years*
 What Family, if any, *Wife and 4 children*
 How long in employ, of Co., *6 1/2 years*
 Name and address of nearest living Relative, *(Wife) Rosa Anselmi, Rock Springs, Wyo.*
 Was he an efficient man, *Yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers*
 Name and P. O. Address of Witnesses.

Name of Mine Forman, *Josh. L. Dykes*Married ~~or Single~~

Condition of Life or Circumstances,

Was he temperate, *Yes*

Nature and extent of Accident,

Back injured by fall of Rock

Cause,

Was engaged as a Blaster, and had been taking down loose rock in the above mentioned room, and had taken down all the loose rock. Then he began to clear the road way of the room and when putting some of the rock out of the way, a piece of rock from the brow of the roof, where the first rock fell from, struck him on the head bruising it slightly, and at the same time injuring his back. The injury was accidental and no one to blame. No witnesses to accident.

*We the undersigned Certify the above to be Correct.**Released 9/3*

(Signature)

Josh. Dykes

Title,

*#7 Mine Boss**OK G.P.P.*

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Pete M^c Mahon*
 Occupation, *Miner*
 Date of Accident, *July 2nd*
 Location, *Rock Springs, Wyo.* 190 *7* Time *11 O'clock A. M.*
 If not injured in Mine, state where, Mine No. *10* Entry No. *6* South Room No. *4*

Name of Mine Supt. *Geo L Black* Name of Mine Foreman, *Jno W. Paterson*
 Age of Person injured, *46 years* Married or Single *Married*
 What Family, if any, *Wife & 8 Children*
 How long in employ, of Co., *3 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *(Wife) Rock Springs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *At Home*
 Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left eye injured

Cause, *He was undermining the coal when a piece of coal flew from point of pick and struck him in the eye, causing the above accident. There was no witness to accident. The boy was working with him at the time and tried to get the coal out of his eye, but he could not.*

Signed *Peter M^c Mahon**Released**9/7-07*

Date

(Signature)

Jno W. Paterson
 Title, *Mine Foreman*

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
July 11th, 1907

I am employed as a loader in No. 8 Mine and was working in 2 Ent on Slope yesterday at 12 O'clock Noon. I was loading coal in 13 Room on 2 Ent on Slope.

There was a piece of loose coal and rock in the middle of the room. I tried to take it down but couldn't.

I then started to pick the loose coal from the face of the room and both coal and rock fell and hit me on the leg and broke it.

There was props in the room, but I was anxious to load my car and didn't take time to put a prop up under the loose rock.

Peter Sovmore

Interpreter and Witness to Statement.

Mike Begovich made the Statement to me through an interpreter, but refused to sign it.

Carl B. Hyde.

Rock Springs, Wyo.
July 12th, 1907.

I am employed as a blaster in No. 8 Mine and work on 2 Ent on Slope.

On July 10th I went into No. 13 Room about 8:30 A.M. Mike Begovich was loading coal in that room. I took down all the loose rock and made the place safe for him. Left the room at 9 A.M. and Begovich did not call upon me again during the day to take down coal or rock.

Joe Matto

Blaster.

Rock Springs, Wyo.
July 11th, 1907.

I am employed as a loader in No. 8 Mine, and was loading coal in 2 Ent. on Slope at noon yesterday.

Mike Begovich was working with me. He was loading on the high side of Room 13. I saw him trying to take down a piece of loose slate from the roof. He couldn't get it down so he started to pick some loose coal from the face of the room. While doing this the slate came down and hit him on the left leg and broke it. There was plenty of props flying in the room and the place was well timbered.

Mike Meanovich
Witness to Accident

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Mike Begovich*
 Occupation, *Loader*
 Date of Accident, *July 10th*
 Location, *Rock Springs, Wyo.* 190 *7* Time *12 O'clock (Noon)*
 If not injured in Mine, state where, Mine No. *8* Entry No. *2* On Shift Room No. *13*

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *Geo. B. Pryde*
 Age of Person injured, *37 years* Married or ~~Single~~
 What Family, if any, *3*
 How long in employ, of Co., *2 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Nick Begovich, Rock Springs, Wyo.*
 Was he an efficient man, *yes* Was he temperate, *yes (as far as known)*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left leg broken between ankle & knee.

Cause,

On July 11th the day after Begovich was injured, I made an examination of the place where the accident happened. I found that there had been an attempt made to take down the rock and from the witness to the accident, Mike 'Manovich' I learned that Begovich had attempted to take down the rock but failed to do so, and started to pick down some loose coal in the face of the room when the rock suddenly fell and caused the injury to his leg.

Begovich claimed that he had asked the Blaster to take down the rock, but I have attached a statement from the Blaster denying this. It is my opinion that the man was injured on account of his own carelessness in failing to take necessary precaution for his own safety.

He could have done so because there was plenty of timber of suitable length lying in the face of the room.

OK.

*Morgan Griffiths (Signature)**Geo. B. Pryde*

Date

1

Title,

Mine Foreman

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
July 12th - '07

I, R. W. Hicks:

Employed as a Machine runner at #9 Mine #1 North Entry #3 Plane, #3 Room, was in the act of loading up my machine, when the dog on loading my ratchet slipped and took off my finger at first joint on right hand.

I am a married man, myself and wife in family. I am 35 years old.

R. W. Hicks.

Rock Springs, Wyo.
July 13th - '07

I, Anton Demuller:

Was working as Partner of R. W. Hicks on the 10th day of July, helping on machine in #3 Room, #1 North Entry, about 8 A.M. when he was injured.

The dog slipped on the loading ratchet taking his first finger off at first joint on right hand. He was bleeding the machine up when this happened.

Anton Demuller

Witness to Accident.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location, *Rock Springs, Wyo.*

If not injured in Mine, state where,

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Cause,

R. W. Sticks
Machine Runner.
July 10th, 1907
Time 10 O'clock A.M.
Mine No. 9 Entry No. 9 North Room No. 2

Geo. L. Black
35 years
Wife
6 Months
Condition of Life or Circumstances
Mrs R. W. Sticks, Rock Springs, Wyo.
Yes
Home.
Young & Chambers.

Name of Mine Forman,

Married ~~or~~ Single

Condition of Life or Circumstances,

Mrs R. W. Sticks, Rock Springs, Wyo.
Yes
Was he temperate, Yes

Was he temperate,

Home.
Young & Chambers.

This fore finger on right hand
cut off at first joint.

He was in the act of loading
up his machine when the dog on
loading racket slipped, he went to pull
it back when it caught his finger
causing the above accident

Refused 8/31

(Signature)

M. W. Medill
#9 Mine Foreman

#9 Mine Foreman

Date

1

Title,

THE UNION PACIFIC COAL CO.

Form 123.

Mine No.

REPORT OF PERSONAL INJURY.

Sup'ts No.

Name of Person injured, *Harv Lappalainen*
 Occupation, *Car (Loader & Trimmer) Dropper.*
 Date of Accident, *16 July* 190 *7* Time *10 O'Clock A. M.*
 Location, *Rock Springs, Wyo.* Mine No. *1* Entry No. *—* Room No. *—*
 If not injured in Mine, state where, *50 feet above #1 dump*

Name of Mine Supt. *Geo. K. Black.* Name of Mine Foreman, *C. E. Moffitt*
 Age of Person injured, *28 years* ~~Married~~ *Single*
 What Family, if any, *—*
 How long in employ, of Co., *One year.* Condition of Life or Circumstances, *—*
 Name and address of nearest living Relative, *Brother John* *Rock Springs, Wyo.*
 Was he an efficient man, *Yes.* Was he temperate, *Yes.*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chamber.*

Name and P. O. Address of Witnesses. *—*

Nature and extent of Accident, *Left arm crushed and left leg hurt.*

Cause,

The men were cutting out empties and dropping them down on the different tracks, when the switch crew came up with another string of cars. As the tracks were full they could not get up and stopped to assist the car droppers drop the cars down. The car the switchman was riding down struck the cars already down, and this man seeing the cars were going to bump, tried to get on the cars standing to save them from going through the dump, but before he could get to the brakes they bumped knocking him off under the car.

Die

(Signature)

C. E. Moffitt
Outside Foreman

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
July 25th 1907

I, Albert Gilles, do hereby certify that I was working in 'mine #8, on #3 Plane, 4th Ent. 37 Room. I was loading a car of coal. I was stooping under some top coal knowing it was a little loose. I thought it would not come down, but about 11:30 A.M. I was finishing loading a car and it fell, injuring my foot and my head a little. It was my right foot. I was employed as a miner.

Signed

Albert Gilles

Witness to Statement.

Joe Visintiner

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Albert Gilles*Occupation, *Miner*Date of Accident, *July 25th* 1907 Time *11 30 A.M.*Location, *Rock Springs, Wyo* Mine No. *8* Entry No. *4-3 Pl.* Room No. *37*

If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black*Age of Person injured, *24 years*

What Family, if any,

How long in employ, of Co., *One month* Condition of Life or Circumstances,Name and address of nearest living Relative, *Eugene Chevallier, Rock Spgs, Wyo. (Friend)*Was he an efficient man, *Yes* Was he temperate, *Yes (as far as I know)*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Chambers & Young*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

*Left foot injured on account of
fall of top coal.*

Cause,

*Was loading a car close to some
over hanging top coal. He knew the coal
was loose and had been warned either
to secure it or to take it down, but he failed
to do so. He thought that it would
stay up until he had loaded his car.
It fell very suddenly however and a
chunk hit him on the left foot and
injured it.*

*P.S. Was working single, no witness.
G.B.P.*

(Signature)

Title,

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Don Morasco

Occupation,

Laborer

Date of Accident,

July 17th

1907 . Time

Location,

Rock Springs, Wyo.

Mine No. ~~Outside~~ Entry No. _____ Room No. _____

If not injured in Mine, state where,

Name of Mine Supt.

Geo. H. Black

Age of Person injured,

35 years

Name of Mine Foreman,

C. E. Moffitt

What Family, if any,

~~Married~~ or Single

How long in employ, of Co.,

About 30 Days

Name and address of nearest living Relative,

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital
Young & Chambers

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left leg bruised below the knee.

Cause,

Patent was coupling cars on No 7 Ramp, one got off the track and while they were putting it on track, another car came down striking the one they were working on catching his leg between the bumpers.

(Signature)

C. E. Moffitt

Title,

Outside Foreman.

Date

1

STATEMENTS OF WITNESSES.

I was employed as a loader (night) in #8 Mine on August 7th. About 1 O'clock A.M. on that date I was loading coal in 29 Room on No. 1 Main Entry, when a piece of slate fell from the roof and injured my head and face. I knew the rock was loose and tried to take it down, but couldn't do so. I then started to load my car and the rock fell down and hit me.

Peter Lovemore, Interpreter & Witness to Statement Subardo made this Statement but refused to sign it.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Dan Lubarado.

Occupation,

Loader.

Date of Accident,

Aug 7th

1907

Time

1 O'clock A.M.

Location, Rock Springs, Wyo.

Mine No. 8

Entry No. 1 Main Room No. 29

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

27 years

Name of Mine Foreman,

Geo. B. Pryde

What Family, if any,

~~Married~~ or Single

How long in employ, of Co.,

1 Month

Condition of Life or Circumstances,

Name and address of nearest living Relative,

No Relatives, he says.

Was he an efficient man,

Below the average

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Head and face cut.

Cause,

On the same day that the accident occurred, I made an examination of the room where Lubarado was injured. The place was in good condition and well timbered.

From the appearance of the roof I am of the opinion that they injured man tried to take down the rock and failed to do so.

He must then have continued loading his car when the rock which had been loosened by his picking, came down and cut him on the head and face.

P. S. No Witness to accident

OK. 9/7-07

M.G.

Released

(Signature)

Geo. B. Pryde

Title,

#8 Mine Foreman

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
July 31st '07

To Whom it may Concern.

On July 18th, a piece of coal and slate came down, while I was at work in No. 8 Mine, this hurt my left wrist. It did not cause me to loose any work, as I worked until July 20th. On Monday July 21st I had a holiday and was celebrating with other men. One of the men hit me with a piece of board and broke my left arm.

Signed Peter Sovmore

Geo. B. Pryde
Witness to Statement.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Cause,

I was cleaning roof with pick when rock and coal mixed came down on my arm. I worked the rest of the day.

Taken from Dr's Statement

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs, Wyo
8/16/07.

Statement of Thos Martisto, injured in
left eye, in #7 Mine, on the 29th of July, 1907.

I was working on the night shift
and at about 9 O'clock P.M., when I was
undercutting the coal at the face of #A Entry,
#D Plane, and laying on my shovel with
the mining about 5 feet in depth, a piece
of coal flew from the point of my pick and
struck me in the left eye. A piece of coal
struck in my eye, but it was a very small
piece that struck in my eye.

Thos. Martisto

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Tom Mortisto*
Occupation, *Miner*
Date of Accident, *July 29th*
Location, *Rock Springs, Wyo.* 190 *7* Time *9 O'clock P.M.*
If not injured in Mine, state where, Mine No. *7* Entry No. *A* Room No.

Name of Mine Supt. *G. L. Black* Name of Mine Foreman, *J. L. Dykes*
Age of Person injured, *30 years* Married ~~or~~ *Single*
What Family, if any, *Wife & one child*
How long in employ, of Co., *2 years 5 months* Condition of Life or Circumstances,
Name and address of nearest living Relative, *Annie Mortisto (His Wife) Rock Springs, Wyo.*
Was he an efficient man, *Yes* Was he temperate, *Yes*
Where and in whose charge left, *His Family*
Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Struck in left eye by piece of coal.*

Cause, *Was undercutting the coal at face of Entry, and while so engaged a piece of coal flew from the point of his pick and struck him in the eye.*
No Witness to accident.

*Released
9/7-07*

(Signature) *J. L. Dykes*
Title, *#7 Mine Boss.*
OK. W. Griffiths.

STATEMENTS OF WITNESSES.

Rock Springs Wyo.
Aug 8th, 1907.

Statement of John Elitich whose proper name is John Halick. Injured in #7 Mine property of the U. P. Coal Company in #2 Dip Entry, #5 Pillar on the 5th day of August about 6 O'clock A. M.

I, and my Brother had fired a shot near the end of the Pillar and the coal did not come down. When we began to undercut it again the coal was very loose. I was cutting opposite where the blast had been put, and while so engaged the coal suddenly fell and caught me breaking my right leg above the knee. The injury was purely an accident and no one to blame.

Plenty of timber was in the face of a suitable length.

signed His

John Halick	}	Injured Person
Anton Halick		Witness to Accident

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

John Halick (Jas Elitech)

Occupation,

Miner

Date of Accident,

Aug 3rd

190 7

Time

6 O'clock A. M.

Location,

Rock Springs, Wyo

Mine No.

7

Entry No.

2 Slip

Mar

No.

15

If not injured in Mine, state where,

Name of Mine Supt.

Geo. K. Black

Age of Person injured,

28 years

What Family, if any,

Wife & 2 Children

How long in employ, of Co.,

About 8 months

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Anton Halick (His Brother) Rock Springs, Wyo.

Was he an efficient man,

New Miner.

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right leg broken by falling coal.

Cause,

Was cutting a standing shot that had been shot the same morning, and did not come down, and while he and his partners were cutting with their picks, the coal suddenly fell and caught the above named person and caused the above named injury. They had not taken any precaution while cutting the loose coal down. Plenty of timber was in the face of a suitable length.

Revised
11-7-08

(Signature)

Jas. L. Dykes

Title,

#7 Mine Boss

O.K. M. Griffiths.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
Aug 15th, 1907.

To Whom it may Concern:-

On the 10th of August 1907, I was standing on the frame of the machine tightening up the front jack. I turned round to the left side of the machine, stepping on the frame with my right foot, it slipped and got caught in the chain pulling me up to the face of the coal and tearing off my foot.

Signed

G.E. Atwood,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

G. E. Sturm

Occupation,

Machine Shopper

Date of Accident,

Aug 10th,

1907

Time

9:30 A.M.

Location,

Rock Springs, Wyo.

Mine No.

9

Entry No.

8

North Room No.

6

Name of Mine Supt.

Geo. Black

Age of Person injured,

What Family, if any,

Wife

How long in employ, of Co.,

From 5 to 6 yrs.

Name and address of nearest living Relative,

Condition of Life or Circumstances,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name of Mine Forman,

M. W. Medill.

Married or Single

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

His right foot torn off below ankles.

Cause,

He was in the act of setting his front jack on machine with his foot on frame of machine. He told the runner to let the machine go. When the machine started his right foot slipped and the cutting chain caught his foot tearing it off.

(Signature)

M. W. Medill

Title,

9 Foreman.

O.K. M. Griffiths.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
Aug 14th, 1907

I was employed as a loader in #8 mine and was working on 1 Entry on Slope on August 12th. About 3:30 P.M., I was loading a car in 25 Room when a large chunk of coal fell down and injured me. I had cut the coal to the back of the mining and had tried to get the chunk down. The blaster told me not to work any more in that position that I was in but I thought the coal would not fall down, so I picked a little more and it fell down and hurt me.

Statement of Dimon Maistrovich who was injured in #8 Mine on August 12th, 1907.

Interpreter and Witness to Statement
(Sgd) Mike Kockis.

Rock Springs, Wyo.
Aug 14th, 1907.

I was working in 1 Entry on Slope, as a blaster on August 12th. About 3:30 P.M. I went into Room 25 to tamp some holes. Dimon Maistrovich was working in the low side of the room. He was trying to pull down a large chunk of coal. In order to do this he stood in what seemed to me a dangerous position. So I warned him to stand in the upper side.

Maistrovich started to load his car and remarked that he had loaded coal long enough to know what he was doing.

I went into an adjoining room to tamp some holes and Maistrovich's partner came after me and said his partner was hurt. I went into 25 room and found that a chunk of coal had fallen on Maistrovich. It was the same chunk that he was trying to pull down when I was in the room previously. He must have stood in the same position as when I warned him.

(Sgd) Mike Kockis

Blaster.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Simon Maistrovich
Loader.

Occupation,

Date of Accident,

Aug. 12th

1907

Time

3:30 P.M.

Location,

Rock Springs, Wyo.

Mine No.

8

Entry No.

On Slope

Room No.

25

If not injured in Mine, state where,

Name of Mine Supt.

Geo. Black.

Age of Person injured,

29 years

What Family, if any,

How long in employ, of Co.,

4 months

Name and address of nearest living Relative,

Joe Ligic, (Quint) Rock Springs, Wyo.

Was he an efficient man,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right thigh broken, several ribs broken,
and cut about the head.

Cause,

Maistrovich was endeavoring to pull down a large chunk of coal. He stood close to the lower rib and probably expected the coal to fall away from him, but in falling it fell toward him. Being close to the lower side rib, he was unable to get out of the way and when the coal fell it injured him. If he had stood on the opposite side when warned by the blaster, he could have sustained no injury, as there was sufficient room to get out of the way.

The chunk weighed about 1000 pounds and stood perpendicularly between the roof and the floor. The room was timbered and in good condition.

(Signature)

George B. Pryde

Title,

#8 Foreman.

W. M. Buffetts

Date

1

Rock Springs, Wyo., Aug 24th '07

I was working as a loader in #8 Mine on Aug 7th.
 Was loading coal in 24 Room on 2nd Ent, & Plane, and was running car down the room. I loaded a very large car of coal and when it came to the top coal at the bottom of the room, a chunk of coal caught in the roof and caught the index finger of my left hand. The injury was caused by the car being loaded too high.

M. Skendar Sr.'s Mark.

{ Nick Begovich's Mark. +
 as witness to M. Skendar's mark.

Geo. B. Pryde, witness to both marks.

Rock Springs, Wyo. Aug 20th '07

I work in No 8 Mine as a loader and was loading coal in 2 Entry, & Plane on Aug 7th. About 9:00 O'clock A.M. I was working with Mark Skendar Sr. in 24 Room. My partner was getting some chunks ready to load a car and while picking up a piece of coal from the floor, a chunk of coal fell from the roof and hurt my partner's finger.

Mat Skender.
 (Witness to accident)

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Mike Skendar Sr*Occupation, *Loader*Date of Accident, *Aug 7th*Location, *Rock Spring, Wyo*

If not injured in Mine, state where

1907 Time *9 A.M. O'clock*
Mine No. *8*Entry No. *2-4* Plan Room No. *24*Name of Mine Supt. *Geo. L. Black*Age of Person injured, *44 years*

What Family, if any,

How long in employ, of Co., *Six weeks*Name and address of nearest living Relative, *Mike Skendar Jr. Rock Spring Wyo.*Was he an efficient man, *Not very*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Young & Chambers*Name of Mine Forman, *Geo. B. Pryde*~~Married~~ or Single

Condition of Life or Circumstances,

Was he temperate, *As far as I know.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Index finger of left hand injured

Cause,

*Was running a car down 24 Room on
2 Ent, 4 Plane and when he came to
the top coal at the mouth of the room
a chunk of coal in the car caught
in the top coal and squeezed the
index finger of his left hand. The injury
was caused by the car being loaded to
high*

*Released
Nov 11/07*

(Signature)

Geo. B. Pryde

Title,

*Mine Foreman
O. M. Griffiths*

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo. 9/9/07

Statement of John Jednak. Injured in
#7 Mine on the 5th day of Sept 1907, in Room
#24 #1 Dip Entry inside of #10 Plane about
8 O'clock A.M.

I was in the act of lifting a lump
of coal to put on the car I was loading
when a piece of rock fell and struck me
on the head and knocked me down and
while still down a second piece fell and
struck me on the back and hips bruising
same. I examined the top when I started
to load the car and the rock seemed solid.

Two company men had been in the place
the same morning and examined the top and
it was solid at that time. The rock gave
no warning before it fell. I had taken a
piece of rock down before I began work.

Dictated the above and affirms it to
be correct, but refuses to sign his name.
Says that he has no reason for not
signing

Ind. L. Ryker

Witness to above.

#7 Mine Boss

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Yednak*Occupation, *Loader*Date of Accident, *Sept 5th* 1907 Time *8 O'clock A.M.*Location, *Rock Springs, Wyo.* Mine No. *7* Entry No. *1* *Sup'ts* Room No. *24*

If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black*Name of Mine Foreman, *J. W. L. Dykes*Age of Person injured, *42 years*

Married or Single

What Family, if any, *Wife & 6 children*How long in employ, of Co., *About 3 yrs.* Condition of Life or Circumstances,Name and address of nearest living Relative, *(Wife) Annie Yednak, Rock Springs, Wyo*Was he an efficient man, *Yes* Was he temperate, *Yes*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Back and hips bruised

Cause,

Was loading a car with coal when the rock fell and struck him causing the above injury. Rock fell between the link of posts 12 feet from face and room face. Place was examined in the morning by (Blaster Helper) and no loose rock found. After this rock fell there was no loose rock (Rock) at room face, the rock that fell was thin and wide, and evidently had burst off suddenly after the man began work. The rock had dampness on it, commonly called sweat. Plenty of timber was in the room of a suitable length.

Released 11/15/07

(Signature)

J. W. L. Dykes

Title,

*Mine Foreman.**O. K. M. Griffiths*

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Anton Patiepoovitch, alias Anton Petrucic*
 Occupation, *Loader*
 Date of Accident, *Sept 10th* 1907 Time *11 O'clock A.M.*
 Location, *Rock Springs, Wyo* Mine No. *7* Entry No. *2 Dip* Room No. *19*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. H. Black* Name of Mine Foreman, *Jack Rykes*
 Age of Person injured, *21 years* ~~Married~~ or Single
 What Family, if any,
 How long in employ, of Co., *About 2 Weeks* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Anton Modar, Rock Springs, Wyo.*
 Was he an efficient man, *New Loader* Was he temperate, *Yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Cut on the head, back hurt and left foot.*

Cause,

Was engaged as a loader and while loading a car with coal he was falling some loose coal at the face of the room, and the slate on top of the coal was loose and setting down on the loose coal, and in falling the coal the slate on top of the coal caught him and caused the injuries above mentioned. I visited this man three times to obtain a statement from him but could not as he refused to talk about his injuries or how it happened.

Jack Rykes
#7 Mine Foreman

This man died at Hospital 9/19/07
J.H.

(Signature)

M. Griffiths
(OK)

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
8-26-07

Statement of Paul Bonello.

Injured in #7 mine on the 24th day of Aug. 1907, In #C. Entry, #14 Room, #10 Plane about 4:30 P.M. I was undercutting the coal at the face of my room when the front of the mining fell off and caught me while I was laying down, injuring, and broke my Collar Bones and rib on my left side. I examined the coal but did not think it was loose enough to fall.

I did not know that the coal was loose or in anyway dangerous.

Plenty of timber was in the room of a suitable length. I do not think that anyone is to blame for the injury.

Injured man unable to sign a/c (Bandagee)

Banella Battista - - Witness to Accident
Carlo Bonello " " Signature

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Paul Bonello*
 Occupation, *Miner*
 Date of Accident, *Aug 24th*
 Location, *Rock Springs, Wyo* 190 *7* Time *4:30 P.M.*
 Mine No. *7* Entry No. *C.* Room No. *14*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. H. Black* Name of Mine Forman, *J. H. Rykes*
 Age of Person injured, *29 years* ~~Married~~ *Single*
 What Family, if any,
 How long in employ, of Co., *About 7 Months* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Carlo Bonello (Brother) Rock Spg, Wyo.*
 Was he an efficient man, *New Miner* Was he temperate, *Yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Collar bones broken and rib on left side.

Cause,

Was undermining a shot in the face of the room and had the mining almost ready to Blast when the front of the coal to the first slip fell off and caught him causing the injuries above described. The shot was in the middle of the room and had a loose end on either side. Both ribs of room being a head of the middle and when coal was mined free to a slip near the back of the mining, the above mentioned coal fell off (from mining to roof) and to first slip in the coal. Plenty of timber was in the room of a suitable length.

Released *12/16*

OK. M. Griffiths

(Signature)

J. H. Rykes

Title,

#7 Mine Boss.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
8-14-07

Statement of Mike Lukovich who was injured in #4 Mine, Rock Springs, Wyo. on the 25th day of July, in 2' Dip Ent, #213 Room, between R. & C. Mines.

I was loading a car with coal at the time the rock fell and struck me on the head. I had been trying before to take the rock down but could not do so because a post was under the rock and I could not break it off by pulling at the rock with a pick, so I continued to load under said rock. The driver had brought me timber to set under the rock, but I did not set it. My partner who was working with me was Lazo Ivanovich.

Mike Lukovich, Injured Person.

Lazo Ivanovich Witness to Accident

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Mike Gukovich

Occupation,

Loader

Date of Accident,

July 25th

Location,

Rock Springs, Wyo

1907

Time

4 P.M.

Mine No.

7

Entry No.

2 Rip

Room No.

23

If not injured in Mine, state where

Name of Mine Supt.

Geo. K. Black

Age of Person injured,

29 years

What Family, if any,

Wife & two children

How long in employ, of Co.,

About 1 Month

Name and address of nearest living Relative,

(Brother in Law) Lazo Ivanovich, Rock Spgs, Wyo.

Was he an efficient man,

New Loader

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name of Mine Forman,

Jno. L. Dykes

Married ~~or Single~~

Condition of Life or Circumstances,

Was he temperate, Yes.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Cut on top of head by falling rock.

Cause,

Was shoveling coal to load a car at the face of room when a piece of rock about 2 inches thick and three feet long fell and struck him on the head and cut it. He had been trying to take the rock down and could not, and then continued to work without supporting it with a post after the timber had been brought to him and put at the room face, and was told by person who could make him understand to set a post under the loose slate and make it safe. Plenty of timber was convenient of a suitable length.

(OK) M. Griffiths

(Signature)

Jno. L. Dykes

Title,

7 Mine Boss.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
9/16/07.

Statement of Chas. Damber,
Mine #7 of the G. P. Coal Co. on the 13th day of
Sept '07, In #20 Room, #A Entry, #D Plane, about
9 o'clock A.M. Injured in

I was loading a car with coal.
I sounded the roof when I commenced to
work and it was solid. The roof did
not give any warning, but burst suddenly
when it fell and struck me on the head,
cutting it slightly, and bruising my left leg.
I was working on the low side
of the room, some rock was loose on the
high side of room. The blaster said that
he would set some props in the room
when we loaded some coal out, to make
room to set props. The roof did not seem
to be very loose, but its looseness could
be detected by sounding it with a pick.

Dictated the above to me but refused
to sign.

John Ryker.

#7 Mine Boss.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Chas Danbar.*Occupation, *Coal Loader.*Date of Accident, *Sept 13th*Location, *Rock Springs, Wyo*

If not injured in Mine, state where,

1907

Time

*9 O'clock A.M.*Mine No. *7*Entry No. *A*Room No. *20*Name of Mine Supt. *Geo. K. Black*Age of Person injured, *25 years*

What Family, if any,

How long in employ, of Co., *About 1 Month*Name and address of nearest living Relative, *Has no relative or friends near this place.*Was he an efficient man, *New Loader*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Young & Chambers.*Name of Mine Foreman, *John L. Rykies*~~Married~~ or Single

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left leg bruised and cut on head (not serious).

Cause,

Was engaged as a loader and while loading a car with coal, a piece of slate fell from the roof at the face of room and struck him, causing the injuries above described. This man examined the room when he began work on the morning and found the roof all right and solid. The room was timbered well and in good condition, but apparently after he began work some of the roof slate became loose and the same fell suddenly. He evidently did not notice that any change had taken place in the condition of the roof.

(OK) *M. Griffiths*

(Signature)

John L. Rykies

Title,

7 Mine Boss.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
Sept 28th, 1907.

I was mixing some lime in a bucket on Aug 29th, 1907. I was working at 2 Ent, 4 Plane. I took a bucket of water, poured into this dumped a bucket of lime. The lime exploded and burned my face and hands. The night foreman told me to take a little lime and a little water and mix it, but I did not do so, thinking that it made no difference.

J. Tanigashira

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

S. Tanigashira

Occupation,

Pumpman

Date of Accident,

Aug 29th

1907

Time

11 O'clock P.M.

Location,

Rock Springs, Wyo

Mine No.

8

Entry No.

2-4

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Geo. B. Black

Name of Mine Forman,

Geo. B. Pryde

Age of Person injured,

34 years

~~Married~~ or Single

What Family, if any,

How long in employ, of Co.,

4 years

Name and address of nearest living Relative,

C. Gondow, Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming

General Hospital
Young & Chambers.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Face and hands burned on
account of lime exploding.

Cause,

Was mixing some lime and water and poured a bucket of lime into a bucket of water, when it exploded and burned his face. Had been told to empty a little water into a bucket along with a little lime but did not do so.

Released 10/2-07

No. Witness

(Signature)

Geo. B. Pryde

#8 Mine Foreman.

Date

1

Title,

I, Frank Raini was working along with Frank Lunden in 36 Room in 50 Entry in No. One Mine on the 14th day of Sept., 1907. When Lunden struck a pick in his left leg. We were putting in a length of schute and Frank Lunden was trying to make a hole in the sheet iron with a pick, the pick glanced off the sheet iron and struck him on the left leg.

(Signed) Frank Raini

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Frank Lunden*
 Occupation, *Miner*
 Date of Accident, *Sept 14th* 190 *7* Time *3 o'clock P.M.*
 Location, *Rock Springs, Wyo.* Mine No. *1* Entry No. *50* Room No. *36*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Forman, *W. B. Jones*
 Age of Person injured, *33 years* Married ~~on~~ *Single*
 What Family, if any, *Two*
 How long in employ, of Co., *One Year* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *(Friend) Emil Lintel, Rock Spgs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Wyo. General Hospital*
 Name of Physician called, if any, *Dr. Young & Chambers*
 Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Stuck pick in his left leg.*

Cause, *Lunden and his partner was putting in a length of schute in their room and Lunden was trying to make a hole in the sheet iron with a pick. The pick glanced off the sheet iron and struck his left leg.*

(Signature)

W. B. Jones
M. F.

Date

Title,

STATEMENTS OF WITNESSES.

On the 9th day of Oct. 1907. I was driving for the U.P.C.C. in Rock Spring, Wyo. in #3 mine and #3 Entry. And I was coming out with a loaded trip (8 loads), and I thought that my partner was gone out on the switch. I was coming out in a good walk, and I didn't see the trip ahead of me about 8 feet and I had plenty of time to get (out of the way) off the trip but I got caught on the hook door (or the hook that is fast to the door to dump the coal out the car.) to my belt what I got my hand on can pry, and I couldn't get off the bumper and I couldn't get on the loaded car, and I run in the trip head of me and hurting my legs badly between the cars. Knocked 3 cars off the track.

(Signed) M. J. Sturman.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *M. J. Sturman*Occupation, *Driver*Date of Accident, *Oct. 9th*Location, *Rock Springs, Wyo.*

If not injured in Mine, State where,

1907 Time *8:30 O'clock A.M.*Mine No. *10*Entry No. *3*Room No. *12*Name of Mine Supt. *E. H. Black*Age of Person injured, *28 years*What Family, if any, *Wife and One Child.*How long in employ, of Co., *8 years.*Name and address of nearest living Relative, *Mrs M. J. Sturman, Rock Springs, Wyo.*Was he an efficient man, *Yes.*Where and in whose charge left, *At Home*Name of Physician called, if any, *Dr. Young.*Name of Mine Forman, *Chas Gregory, Act. Foreman*

Married or Single

Condition of Life or Circumstances,

Was he temperate, *Yes.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Both legs bruised also right foot and ankle.

Cause,

He was coming out with loaded trip, and he thought that his partner Wm Spence was out of the road. His horse was going on a good walk and he saw the trip about 8 feet ahead of him, and when he went to get off the cage his cloths was caught on the car and before he could get loose the cars came together, squeezing him causing the above accident.

*Released
Oct 20/07*

(Signature)

Chas Gregory, Act. Foreman
Ch. M. Griffiths

Title,

Date

STATEMENTS OF WITNESSES.

Rock Springs, Oct 16th 1907

L. L. Rummick was working in No 8 Mine on 4 Ent. 3 Blang as a Miner and while waiting for the driver to pull the cars from my place. I was standing in between two props and a piece of rock fell a little way from me, about eighteen inches away, and it fell edge ways and fell over and injured my right leg a little below my knee.

(Signed) L. L. Rummick
This accident happened about 2 O'clock.

Witness John Gergich

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Louis Durnick

Occupation,

Miner

Date of Accident,

Oct 16th

Location,

Rock Springs, Wyo.

1907

Time

2 O'clock P.M.

If not injured in Mine, state where,

Mine No. 8

Entry No. 4

Mar
Room No.

Name of Mine Supt.

Geo. Black.

Name of Mine Forman,

Age of Person injured,

22 years.

~~Married~~ Single

What Family, if any,

How long in employ, of Co.,

One Month

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Antoni Durnick (Brother) Rock Spgs, Wyo.,

Was he an efficient man,

Yes.

Was he temperate,

Yes

Where and in whose charge left,

Hospital

Name of Physician called, if any,

Dr. Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right leg broken above ankle.

Cause,

Louis Durnick was standing on the Gov. side of the track, waiting the driver to take out his car, when a piece of rock fell behind him edge ways, tipping over striking him on the leg causing the above accident.

(Signature)

Geo. Fitchett
Acct. Foreman.

Date

1

Title,

Chas. M. Griffiths

STATEMENTS OF WITNESSES.

Rock Springs, Sept 28, 1907.

This is to certify that on the 25th inst I was working with my brother Louis Raday in room 25 of #3 Entry in #10 Mine, when he had his right foot fractured and contusion of face & chest, by falling rock at face of boom, while he was loading a car. Louis knew that the rock was loose and had tried to pull it down but could not do so, he then set a prop under it and started to load a car, and while doing so, a part of the rock fell from between the prop he had set and the face, which struck him, causing above injuries to him.

(Signed) Steve Raday X His Mark.
Witness to Accident.

Chas Gregory.
Witness to above
statement

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Louis Raday (Luzi Radalj, born 45)
Loader

Occupation,

Date of Accident,

Sept. 25th

Location, Rock Springs, Wyo.

1907
Mine No. 10

Time

8 O'clock A.M.

Entry No. 3

Room No. 25

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

31 years

What Family, if any,

Two

How long in employ, of Co.,

Two Months

Name and address of nearest living Relative,

(Brother)

Was he an efficient man,

Yes

Where and in whose charge left,

Wyoming State Hospital.

Name of Physician called, if any,

Dr. Young & Chambers.

Name of Mine Foreman,

J. W. Paterson

Married ~~Single~~

Condition of Life or Circumstances,

Rock Spg, Wyo.

Was he temperate,

Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Contusion of face & Chest, fracture
of right foot.

Cause,

He was loading coal at face of room when a piece of rock fell which struck him causing above injury. He knew that the rock was loose and had tried to take it down, but failed to do so. He then set a prop under it and started to load, and while doing so a part of the rock fell from between the prop and the face, with the above results. There were plenty of timber in the room.

Advised
11/15-07

(Signature)

M. Griffiths

Date

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location, *Rock Springs, Wyo.*

If not injured in Mine, state where,

1907

Time *12:30 P.M.*

Mine No.

Entry No.

Room No.

Name of Mine Supt. *Edw Black*

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name of Mine Foreman,

Married ~~or~~ Single

Condition of Life or Circumstances,

(Brother) Nick Sales, Rock Springs, Wyo.

Was he temperate,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Scrap on face, contusion of right arm below elbow.

Cause,

*Patient was working in #1 Prof Yard, he had one cut off a prop for a cap block and when he threw it across the table it struck the saw (which was in motion) throwing it back in his face.**Released 1/23-08*

(Signature)

C. E. Moffitt

Title,

Outside Foreman

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
Nov 29, 1907

This is to Certify that I, G. Yoon, was working with S. Chai on the 27th day of Nov/07, when he was killed in #18 Room of Co. 1, at Plane about 9 A.M. We had fired a shot in the coal and it did not come down. My Partner, S. Chai, was in the act of mining some more powder. I was in the act of drilling a fresh hole. When the coal gave way striking S. Chai on the head killing him. I did not know that the coal was loose.

Witness to Accident
" " Statement

G. Yoon.
E. M. Lee.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person ^{killed} ~~injured~~, S. Chai.

Occupation, Miner

Date of Accident, Nov 27th

Location, Rock Springs, Wyo.

If not injured in Mine, state where,

1907 Time 9 O'clock A.M.
Mine No. 9

Entry No. 4, 4 Plan Room No. 18

Name of Mine Supt. Geo. Black

Age of Person injured, 28 years

What Family, if any, 1 Wife

How long in employ, of Co., 2 Months

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name of Mine Forman, M. W. Medill

Married or Single

Condition of Life or Circumstances,

Name and address of nearest living Relative, Mrs. Sang Chai, Hong Wondo Korea

Was he temperate, yes

Where and in whose charge left,

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Brother, H. Kim, Rock Springs, Wyo.

Nature and extent of Accident,

Head Crushed (Killed)

Cause,

This man had fired a shot some time before the accident and the shot stood. And he layed down under the shot and started to mine again and his partner was in the act of drilling a new hole in it, where the Coal gave way striking him on the head, causing the above accident. There is no one to blame but himself. This man has kept his place in fire order and proped well ever since he started.

OK. M. Griffiths

Coroner's verdict, Accidental Death.

(Signature) M. W. Medill

Title,

#9 Foreman.

Date

1

STATEMENTS OF WITNESSES.

Rock Springs, Wyo. 12/3/07.

I John Knapevic make this statement that on the 22 of Nov. I went into #8 room, 5 entry to run out loads and when up at face of room a piece of rock fell down striking me on the back and I have been unable to work since

Witnesses { Paul Lomicic.
Tom Garbin.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Jos. Knezevic*
 Occupation, *Pusher*
 Date of Accident, *Nov 22nd,*
 Location, *Rock Springs, Wyo*
 If not injured in Mine, state where,

190 *7* Time *3 O'clock P.M.*
 Mine No. *10* Entry No. *5* Room No. *8*

Name of Mine Supt. *Ed. Black* Name of Mine Forman, *Jos W. Paterson*
 Age of Person injured, *22 years* Married or ~~Single~~
 What Family, if any, *Wife (No Children)*
 How long in employ, of Co., *9 Months* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Mrs Jos Knezevic Rock Springs, Wyo*
 Was he an efficient man, *yes* Was he temperate, *yes*
 Where and in whose charge left,
 Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Hurt on the back

Cause,

She was up in faced room when a piece of rock fell from roof striking him on the back. He went out of mine alone and called the Doctor on the 26 of month, and no one knew he had been hurt.

*OK. M. Griffiths**Released
12/23-07*

(Signature)

Jos W. Paterson

Title,

Mine Boss.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person ~~injured~~, ^{killed.} Clay Evans.

Occupation, Miner

Date of Accident, Dec 3-4

Location, Rock Springs, Wyo

If not injured in Mine, state where

1907
Mine No. 7

Time 3:30 P.M.

Entry No. 3, 6 Pl Room No. 205

Name of Mine Supt. Geo. H. Black

Age of Person injured, 28

What Family, if any, Wife and One Child

How long in employ, of Co., About 6 Months

Name and address of nearest living Relative, Wife in Old Country, (Cousin), Jim Evans, Rock Spgs, Wyo.

Was he an efficient man, Yes.

Where and in whose charge left, His Friends

Name of Physician called, if any,

Name of Mine Forman, Geo. H. Rykes

Married or Single

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Killed instantly, fall of rock at face of room. Crushed across the small of back.

Cause,

Was loading a car at the time, was shoveling when the rock fell and caught him bending him double. The rock had been loosened by holes that were blasted exceeding the depth of the mining and breaking the roof. A post was set under the rock, this post had broken the rock in two parts, one part of the rock falling and caught him, while the other part of rock remained supported by the post, hence the drawing of the post up tight under the loose rock was the cause of the rock being broken in two parts. I have warned this man about placing his powder too close to the roof when blasting and to always take loose rock down that had been shot.

Plenty of timber was in the room of a suitable length for the place.

Man was working alone and found under the rock about 6 P.M.

K. M. Griffiths. (Signature)

Date

Geo. H. Rykes

Title,

7 Mine Boss

STATEMENTS OF WITNESSES.

Rock Springs, Wyo, 12/17/07.

I, Spiro Amizic, was working with my brother on Dec 6, in #10 Mine, 2 Entry 104 Room, about 3 o'clock P.M. A piece of rock fell down from the roof and struck my brother on the floor. He called for help and I ran over to him and took the rock off and lifted him up. Then the driver came with a car and we took him outside.

Witness { Anton Mungoni
Mike Vukovic

Rock Springs, Wyo 12/16/07.

I, Anton Tomizich, 2 Entry 104 Room, was loading coal about 3 o'clock P.M. A piece of rock fell down and struck me on the back causing a severe injury. I sounded the rock about 2 minutes before it fell and thought it was all right.

Witness { Anton Mungoni
Kato Tente.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Anton Tomizick*
Occupation, *Loader*Date of Accident, *Dec 6th*

1907

Time

*3 O'clock P.M.*Location, *Rock Springs, Wyo*Mine No. *10*Entry No. *2*Room No. *104*

If not injured in Mine, state where

Name of Mine Supt. *Geo. L. Black*Name of Mine Foreman, *Jno. W. Paterson*Age of Person injured, *38 years*~~Married~~ or Single

What Family, if any,

How long in employ, of Co., *18 Months*

Condition of Life or Circumstances,

Name and address of nearest living Relative, *Brother living at #4,*Was he an efficient man, *Yes*Was he temperate, *Yes*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Shot on small of back.

Cause,

*He was loading coal in face of room when a piece of rock fell on him causing the above injuries**Released
12/27-07*

(Signature)

Jno. W. Paterson

Title,

#10 Mine Foreman

Date

1

THE UNION PACIFIC COAL CO. For

DAILY CASH

Mine O

Balance on hand yesterday,	410	96
Collections made today, viz:		
Rent, Electric Light, and Water,	24	25
Coal,	48	95
Transportation,		
Material Sales,		
Ground Rent,		
	483	96

I hereby certify that the at

This report must be made up at the close of each day (except Sunday

(Signature)

J. W. Paterson

Title,

Mine Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Frank Kevic*
 Occupation, *Loader*
 Date of Accident, *Sept 12th* 1907 Time *4 O'clock P.M.*
 Location, *Rock Springs, Wyo.* Mine No. *10* Entry No. *3* Room No. *—*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. H. Black* Name of Mine Foreman, *J. W. Paterson*
 Age of Person injured, *35 years* Married *Single*
 What Family, if any, *Four children*
 How long in employ, of Co., *One & 1/2 years* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Jura Berch (Friend) Rock Springs, Wyo.*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Severe burn of face, neck and back of head. Both hands burned. Right leg burned from ankle to thigh. Left leg from ankle to 4 inches above knee.*

Cause, *Runaway trip from dump, causing an explosion of dust at No. 3 Entry. He was in No 3 back entry about 10 feet from stop.*

Released

(Signature)

J. W. Paterson

Title,

Mine Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where,

J. W. Paterson

Mine Foreman

Sept 12th

190

7

Time

4 O'clock P.M.

Mine No.

10

Entry No.

3

Room No.

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Geo. H. Black

45

Wife and four children

Twenty years and over

Mrs. J. W. Paterson (Wife) Rock Springs, Wyo.

Yes

Wyoming General Hospital

Young & Chambers

Name of Mine Foreman,

J. W. Paterson

Married or ~~Single~~

Condition of Life or Circumstances,

Was he temperate,

Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of 1st and 2nd degree of hands, face and legs.

Cause,

Runaway trip from dump, causing an explosion of dust at No 3 Entry. He was in crosscut to manway, opposite No. 3 entry, about ten feet from slope.

(Signature)

J. W. Paterson

Title,

Mine Foreman

Date

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

69

Mine No.

Sup'ts No.

Name of Person injured, Mike Guff.

Occupation, Miner

Date of Accident, 12th September

Location, Rock Springs, Wyo

If not injured in Mine, state where,

190 7 Time 4 O'clock P.M.

Mine No. 10 Entry No. 3 Room No.

Name of Mine Supt. Geo H. Black

Age of Person injured, 35

What Family, if any,

How long in employ, of Co., 7 years

Name and address of nearest living Relative, Cedar Guff, Rock Springs, Wyo.

Was he an efficient man, Yes

Where and in whose charge left, Wyoming General Hospital,

Name of Physician called, if any, Young & Chambers.

Name of Mine Foreman, J. W. Paterson

~~Married~~ Single

Condition of Life or Circumstances,

Was he temperate, Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of 1st & 2nd degree hands and face.

Cause,

Runaway trip from dump, causing an explosion of dust at No. 3 Entry. He was coming out of No 5 Entry and was within 10 or 12 feet of the slope.

Released
1/11-08

(Signature)

J. W. Paterson

Title,

#10 Mine Foreman

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

T. Ogata

Occupation,

Company Work.

Date of Accident,

12th September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

E. H. Black

Name of Mine Foreman,

J. W. Paterson

Age of Person injured,

31

Married ~~Single~~

What Family, if any,

Wife and child

How long in employ, of Co.,

2 1/3 years

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Mr. Gondow, Rock Springs

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Wife.

Kiyo Ogata, Fukuoka, Japan.

Nature and extent of Accident,

Five scalp wounds. Burns of 1st and 2nd degree of hands, face & legs.

Cause,

Runaway trip from dump causing an explosion of dust at #3 Entry. He was coming out of #3 top entry and was about the inside end of the slope carting.

Released

(Signature)

J. W. Paterson

Title,

#1 Mine Foreman

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Matt Linderson

Occupation,

Driver

Date of Accident,

12th September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Gov. K. Black

Age of Person injured,

26 years

Name of Mine Foreman,

J. W. Paterson.

~~Married~~ or Single

What Family, if any,

How long in employ, of Co.,

Two years

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Gus Sturholm (Grand) Rock Springs, Wyo.

Was he an efficient man,

Yes.

Was he temperate,

Yes.

Where and in whose charge left,

Wyoming General Hospital.

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Fracture of right arm. 4th, 5th and 6th ribs fractured.

Cause,

Runaway trip from dump causing an explosion of dust at #3 Entry. He was between the two doors in crosscut to manway opposite #3 back entry.

(Signature)

J. W. Paterson

#10 Mine Foreman.

Title,

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Geo. Popp.

Occupation,

Miner

Date of Accident,

12th September

1907

Time

4 O'Clock P.M.

Location,

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Name of Mine Foreman,

J. W. Paterson

Age of Person injured,

40.

What Family, if any,

5 Children

How long in employ, of Co.,

12 yrs. 11 Mo.

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Mrs. Geo. Popp. (Wife) Rock Springs.

Was he an efficient man,

Yes.

Was he temperate,

yes.

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of hands and face.

Cause,

Runaway trip from dump causing an explosion of dust at #3 Entry. He was in No 3 back entry about 10 feet from slope.

Released
1/11-08

(Signature)

J. W. Paterson

Title,

#10 Mine Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Jura Perch

Occupation,

Miner

Date of Accident,

12th September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Geo. H. Black

Name of Mine Forman,

J. W. Paterson

Age of Person injured,

34

Married ~~or Single~~

What Family, if any,

One child

How long in employ, of Co.,

1 1/2 years

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Mrs. Jura Perch (Wife) Rock Springs.

Was he an efficient man,

Yes.

Was he temperate,

Yes.

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Severe burns of both hands and right forearm, abdomen and chest. Face, etc., ears, nose, back of head and upper neck burned. Slight burn of left ankle.

Cause,

Runaway trip from dump, causing an explosion of dust at #3 Entry. He was between slope and first door in crosscut to manway opposite No. 3 back entry.

Released

(Signature)

J. W. Paterson

Title,

10 Mine Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where,

Morgan Moon

Rope Runner

12th September

1907

Time

4 O'clock P.M.

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Geo. H. Black

24

No children

About 10 yrs.

Mrs. Morgan Moon (Wife) Rock Springs

Yes.

Was he temperate, Yes.

Name of Mine Forman,

J. W. Paterson

Married ~~Single~~

Condition of Life or Circumstances,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burn of 1st and 2nd degree of face.
Burns of 1st and 2nd degrees of wrists.

Cause,

Runaway trip from dump, causing an explosion of dust at #3 Entry. He was in switch stand man-holes at No. 3 Entry.

Released
Jan 31/08

(Signature)

J. W. Paterson

Title,

#10 Mine Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

John. S. Maki

Occupation,

Miner

Date of Accident,

12th September

Location,

Rock Springs, Wyo

1907

Time

4 O'clock P.M.

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where

Name of Mine Supt.

Geo. H. Black

Age of Person injured,

44

What Family, if any,

Two children

How long in employ, of Co.,

16 years

Name and address of nearest living Relative,

Lari Maki (Son) Rock Springs

Was he an efficient man,

Yes.

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of

Witnesses

Wife.

In old country. (Finland)

Nature and extent of Accident,

Tear of dorsal surface of right hand. Slight burn of face.

Cause,

Runaway trip from dump causing an explosion of dust at No 3 Entry. He was between the two doors in crosscut to manway opposite No 3 back entry.

(Signature)

J. W. Paterson

Title,

#10 Mine Boss.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

B. Taucher

Occupation,

Miner

Date of Accident,

12th September 1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

26

What Family, if any,

How long in employ, of Co.,

7 years.

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name of Mine Foreman,

J. W. Paterson

~~Married~~ Single

Condition of Life or Circumstances,

Joe Taucher (Brother) Cumberland, Wyo.

Was he temperate,

Yes.

Wyoming General Hospital
Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Face and hands burned 1st & 2nd degrees.

Cause,

Runaway trip from dump. causing explosion of dust at No. 3 entry. He was in between the two doors in crosscut to manway opposite #3 back entry.

Released

(Signature)

J. W. Paterson

Title,

#10 Mine Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

John Gergich

Occupation,

Miner

Date of Accident,

12th, September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo

Mine No. 10

Entry No. 3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Gen. H. Black

Name of Mine Forman,

J. W. Paterson

Age of Person injured,

25

What Family, if any,

~~Married~~ Single

How long in employ, of Co.,

1 1/2 years

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Anton Gergich (Brother) Rock Springs

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burning of 1st & 2nd degrees of face and hands.

Cause,

Runaway trip from dump, causing an explosion of dust at #3 Entry. He was in #3 back entry about 10 feet from slope.

Released

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Lorence Pivic

Occupation,

Miner

Date of Accident,

12th, September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, State where,

Name of Mine Supt.

Geo. L. Black

Name of Mine Forman,

J. W. Paterson

Age of Person injured,

22

What Family, if any,

How long in employ, of Co.,

1 1/2 years

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Matt Pivic, (Brother) Rock Springs.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital
Young & Chambers.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Cut over left eye. Burn of face,
eyes, ears, mouth, nose and back
of head. Burn of right knee, both
ankles and both hands.

Cause,

Runaway trip from dump, causing an
explosion of dust at No. 3 Entry. He was
coming out of 4 top entry and was
within 10 or 15 feet of slope.Released
Jany 16/08

(Signature)

J. W. Paterson.

Title,

#10 Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Geo. Roolgick

Occupation,

Miner

Date of Accident,

12th September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Geo. H. Black

Name of Mine Forman,

J. W. Paterson

Age of Person injured,

21

Married or Single

What Family, if any,

Wife and two children

How long in employ, of Co.,

2 1/2 years

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Mrs. Geo. Roolgick Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital
Gould & Chambers.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Small scalp wound. Contusion
of back.

Cause,

Runaway trip from dump causing
an explosion of dust at No 3 Entry.
Don't know where he was frozen
injured.Released
9/25/07

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Ben Lewis

Occupation,

Asst. Foreman

Date of Accident,

12th, September

1907

Time 4 O'clock P.M.

Location,

Rock Springs, Wyo

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

29 years

What Family, if any,

Wife and one child.

How long in employ, of Co.,

Fifteen years

Name and address of nearest living Relative,

Mrs. Ben Lewis, (Wife) Rock Springs, Wyo.

Was he an efficient man,

Yes.

Where and in whose charge left,

Wyoming General Hospital
Young & Chambers.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of 1st & 2nd, degrees of face,
hands and scalp.

Cause,

Runaway trip from dump causing an
explosion of dust at No. 3 Entry. He was
going down the slope and was within
40 or 50 feet of 4 Entry.Released
Jan 4/08

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Fred Russold

Occupation,

Company work

Date of Accident,

12th, September

1907

Time

4 o'clock

Location,

Rock Springs, Wyo.

Mine No.

10

Entry No.

2

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

19 years

What Family, if any,

Name of Mine Foreman,

J. W. Paterson

~~Married~~ Single

How long in employ, of Co.,

3 yrs. 4 mos.

Name and address of nearest living Relative,

Condition of Life or Circumstances,

Was he an efficient man,

Yes

Joe Russold (Father)

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of 1st & 2nd degrees hands, face and neck. Lacerated lower lip, and eyes slightly burned.

Cause,

Runaway trip from dump, causing an explosion of dust at No. 3 Entry. Was in prospect to manway between slope and first door at No. 3 Entry.

Released

(Signature)

J. W. Paterson

Title,

No. 1 Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Mike Glitter*
 Occupation, *Miner*
 Date of Accident, *12th September* 190 *7* Time *4 O'clock P.M.*
 Location, *Rock Springs, Wyo* Mine No. *10* Entry No. *2* Room No. *—*
 If not injured in Mine, state where,

Name of Mine Supt. *Geo. H. Black* Name of Mine Foreman, *J. W. Paterson*
 Age of Person injured, *29 years* Married ~~or Single~~
 What Family, if any, *Wife and two children*
 How long in employ, of Co., *4 Months* Condition of Life or Circumstances, *—*
 Name and address of nearest living Relative, *Wife in Rock Springs.*
 Was he an efficient man, *Yes* Was he temperate, *Yes.*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Scalp Wound.

Cause,

Runaway trip from dump, causing an explosion of dust at No. 3 Entry. Don't know where he was when injured.

Released

(Signature)

J. W. Paterson
#10 Foreman.

Date

1

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where,

Joe Marushak

Machine man.

12th September

1907

Time

4 O'clock

Rock Springs, Wyo.

Mine No.

10

Entry No.

3

Room No.

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Geo. H. Black

40

Four Children

16 years

Mrs Joe Marushak (Wife) Rock Springs.

Yes

Wyoming

General Hospital
Young & Chambers

Name of Mine Forman,

J. W. Paterson

Married or ~~Single~~

Condition of Life or Circumstances,

Was he temperate,

Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of 1st & 2nd degree of face,
scalp, hands and legs. Laceration and
contusion of scalp.

Cause,

Runaway trip from dump, causing an
explosion of dust at #3 Entry. He was
in crosscut to manway between slope
and first door opposite #3 back entry.

Released

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where

John Percie

Miner

1907

Time

4 o'clock

Mine No.

10

Entry No.

2

Room No.

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name of Mine Forman,

~~Married~~ Single

Condition of Life or Circumstances,

Mike Yerkovitch (Friend) Rock Springs, Wyo.

Yes

Was he temperate,

Yes

Wyoming General Hospital

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Slight burn of scalp. Contusion
of back and slight burn of feet.

Cause,

Runaway trip from dump, causing
an explosion of duct at 7th Entry.
Don't know where he was when
injured.

Released

(Signature)

J.W. Paterson

Title,

#10 Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *George Grauses*
 Occupation, *Miner*
 Date of Accident, *12th, September 1907* Time *4 o'clock P.M.*
 Location, *Rock Springs, Wyo* Mine No. *10* Entry No. _____ Room No. _____
 If not injured in Mine, state where,

Name of Mine Supt. *Geor. Black* Name of Mine Foreman, *J. W. Paterson*
 Age of Person injured, *33* ~~Married or Single~~ *Single*
 What Family, if any, _____
 How long in employ, of Co., *Six months* Condition of Life or Circumstances, _____
 Name and address of nearest living Relative, _____
 Was he an efficient man, *yes* Was he temperate, *yes*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers*
 Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Contusion of right leg.

Cause,

*Runaway trip from dump, causing
 an explosion of dust at #3 Entry.
 Dont know where he was when
 injured.*

Released

(Signature)

J. W. Paterson
 #10 Foreman.

Date

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Y. Yoon*
 Occupation, *Track Cleaner*
 Date of Accident, *12th, September 1907* Time *4 o'clock P.M.*
 Location, *Rock Springs, Wyo.* Mine No. *10* Entry No. *2* Room No. *---*
 If not injured in Mine, state where, *---*

Name of Mine Supt. *Geo. H. Black*
 Age of Person injured, *31*
 What Family, if any, *---*
 How long in employ, of Co., *---*
 Name and address of nearest living Relative, *Y. Chung, (Brother) Rock Springs, Wyo.*
 Was he an efficient man, *yes* Condition of Life or Circumstances, *---*
 Where and in whose charge left, *Wyoming General Hospital* Was he temperate, *yes*
 Name of Physician called, if any, *Yoon & Chambers*
 Name and P. O. Address of Witnesses, *---*

Nature and extent of Accident, *Burns of 1st & 2nd degree of hands and face.*

Cause, *Runaway trip from dump, causing an explosion of dust at No. 3 Entry. He was in No. 4 back entry about ten feet from slope.*

Released

(Signature)

J. W. Paterson
 Title, *#10 Foreman.*

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

T. Kuramori

Occupation,

Track Cleaner

Date of Accident,

12th, September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo

Mine No.

10

Entry No.

Room No.

Name of Mine Supt.

Geo. Black

Age of Person injured,

31 years

What Family, if any,

One boy

How long in employ, of Co.,

21 months

Name and address of nearest living Relative,

Was he an efficient man,

yes

Where and in whose charge left,

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Name of Mine Foreman,

J. W. Paterson

Married or Single

Condition of Life or Circumstances,

Y. Kazitani, Rock Springs, Wyo.

Was he temperate,

yes

Wyoming General Hospital

Young & Chambers.

Nature and extent of Accident,

Burns of 1st & 2nd degrees of hands and face.

Cause,

Runaway trip from dump, causing an explosion of dust at #3 Entry. He was in #4 back entry about 4 or 5 feet from slope. This man was putting his tools in calaboose.

Released
1/3/08

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Thos. Dixon

Occupation,

Miner

Date of Accident,

12th, September

1907

Time

4 O'clock P.M.

Location,

Rock Springs, Wyo

Mine No.

10

Entry No.

3

Room No.

If not injured in Mine, state where

Name of Mine Supt.

Geo. H. Black

Age of Person injured,

40

What Family, if any,

Wife and five children

How long in employ, of Co.,

One month

Name and address of nearest living Relative,

Mrs Thos. Dixon (Wife) Rock Springs, Wyo

Was he an efficient man,

Yes

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burn of 1st degree of hands & face.
Laceration of scalp and face. Fracture
of neck and spine of right scapula.

Cause,

Runaway trip from dump, causing
an explosion of dust at #3 Entry. He was
coming out to 3 Entry at No 5 Room.

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Joe Sinko

Occupation,

Miner

Date of Accident,

12th September

190

7

Time 4 O'clock P.M.

Location,

Rock Springs, Wyo

Mine No.

10

Entry No.

Room No.

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

46

What Family, if any,

Three Children

How long in employ, of Co.,

13 years

Name and address of nearest living Relative,

Lizzie Sinko (Daughter) Rock Springs, Wyo.

Was he an efficient man,

Yes

Where and in whose charge left,

Wyoming General Hospital
Young & Chambers.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of 1st and 2nd degrees
on both hands and face.

Cause,

Runaway trip from dump, causing an
explosion of dust at No. 3 Entry. He
was sitting in No. 3 back entry about 10
feet from slope.

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Joe Porento

Occupation,

Miner

Date of Accident, 12th September

1907

Time 4 O'clock P.M.

Location, Rock Springs, Wyo.

Mine No. 10

Entry No. 3

Room No.

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

21

Name of Mine Foreman,

J. W. Paterson

What Family, if any,

~~Married~~ or Single

How long in employ, of Co., 1 yr. 8 mo.

Condition of Life or Circumstances,

Name and address of nearest living Relative,

John Porento (brother) Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Wyoming General Hospital
Young & Chambers.

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burns of 1st & 2nd degrees of hands,
face and scalp.

Cause,

Runaway trip from dump causing an
explosion of dust at No. 3 Entry. He was
in No. 3 back entry about 10 or 12 feet from
slope.

Released 6/1-08

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Cedar Zupp Miner*
 Occupation, *Miner*
 Date of Accident, *12th September 1907* Time *4 O'clock P.M.*
 Location, *Rock Springs, Wyo* Mine No. *10* Entry No. *5* Room No. *—*
 If not injured in Mine, state where, *—*

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *J. W. Paterson*
 Age of Person injured, *18* ~~Married~~ or Single
 What Family, if any, *—*
 How long in employ, of Co., *6 months* Condition of Life or Circumstances
 Name and address of nearest living Relative, *Mike Zupp, Rock Springs, Wyo.*
 Was he an efficient man, *Yes.* Was he temperate, *Yes.*
 Where and in whose charge left, *Wyoming General Hospital*
 Name of Physician called, if any, *Young & Chambers.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Burns of 1st & 2nd degrees of hands, face and scalp.*

Cause, *Runaway trip from dump, causing an explosion of dust at #3 Entry.*
He was coming out of No. 5 entry and was within 8 or 10 feet of the slope.

Released 1/2-08

(Signature)

J. W. Paterson

Title,

#10 Foreman.

Date

Rock Springs, Wyo., Nov 16th, 1907.

When I was preparing to load the coal of Room #12 B Entry in #7 Mine, on the day of 7th Nov. 1907. 8 O'clock A.M. Two Italians came in the same place where I had been and told me to withdraw from there, then I replied that I will not go back and continue to work, because the provision was given from a snubber, but they forced me to retire from there, so at last I went to Driver Harry by the name, in order to get his judgement and I told him that I lost work last two day on account of shortage of Rooms in the same entry. But he refused me from the working therefore I force him to go to Mine Foreman with me and at the very moment as we started for the said Foreman, he took out one of Spikes that he had in his left arm and struck me by my left Temple of Forehead, line along then I lost my scense until the next morning 11 o'clock A.M.

I. Togami

Witness. C. Gondow

Rock Springs, Wyo., Nov 12th, '07.

To. Whom it may concern:—

This is to certify that I Harry Morgan, hit a Japanese in self defense on Thursday Nov. 7th. This Jap on more than one occasion has cursed me and followed me around the Entry and this morning he hit me in the back with a rock after trying to push me under the trip, while I was spragging. On account of a piece of rock sliding on the track, it stoped the speed of the trip, which saved the mule from being hurt or killed. The Boss sending 2 new loaders from A. Entry to B Entry which filled all the rooms in B Entry, and when the Jap found there was no room for him he thought I was to blame, as he has done the same thing before and then he followed me around until he got a chance to hit me when my back was turned, and he had another rock in his hand when I hit him.

Signed

Harry Morgan.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *G. Logami*
Occupation, *Loader*
Date of Accident, *Nov 7th* 190 *7* Time *8 O'clock A.M.*
Location, *Rock Springs, Wyo* Mine No. *7* Entry No. *13* Room No. *9*
If not injured in Mine, state where,

Name of Mine Supt. *Geo. L. Black* Name of Mine Foreman, *Jed. L. Rykes*
Age of Person injured, *22* ~~Married~~ *Single*
What Family, if any,

How long in employ, of Co. *About 4 Mo.* Condition of Life or Circumstances,
Name and address of nearest living Relative, *(Friend) C. Gondow, Rock Springs, Wyo.*
Was he an efficient man, *Yes.* Was he temperate, *Yes*
Where and in whose charge left, *Wyoming General Hospital*
Name of Physician called, if any, *Young & Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Struck on side of head by driver with a sprag.*

Cause, *Was about to begin work in the morning and through a dispute of him and the driver, the driver claims that from a standpoint of self-defence, he struck him with a sprag, knocking him unconscious for a few minutes and he was delirious for some 12 hours.*

Released Jan 10/08

(Signature)

Jed. L. Rykes
#7 Mine Boss.

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs, Wyo., Nov 25th, 1907.

This is to certify that I:- John Bukavin while employed as a loader in #8 Mine on the 9th day of Nov. I was working in No 8 Mine on 12 Entry on slope Room 20, I was getting down some coal to load my car, and a piece of coal flew and hit me in my left eye and caused injury as doctor reported.

John Bukavin ^{His} +
mark.

Pony Miletus.
Witness

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Bukavin*
Occupation, *Loader*Date of Accident, *Nov. 9th,*Location, *Rock Springs, Wyo*

If not injured in Mine, state where,

190 *7* Time *2:30 P.M.*Mine No. *8*Entry No. *20* On *Up* Room No. *20*Name of Mine Supt. *Geo. L. Black*Age of Person injured, *30*What Family, if any, *Wife*How long in employ, of Co., *2 Months*

Name and address of nearest living Relative,

Was he an efficient man, *yes*Where and in whose charge left, *Went to Ogden*Name of Physician called, if any, *Dr. Brick.*Name of Mine Foreman, *Geo. Fitchett (Acting)*Married ~~Single~~

Condition of Life or Circumstances,

Was he temperate, *yes.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Got struck in left eye with a piece of coal.

Cause,

He was taking down coal to load his cars and a piece of coal flew and struck him in the left eye causing the above accident.

(Signature)

Geo. Fitchett

Title,

Asst Foreman.

Date

1

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where,

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ. of Co.,

Name and address of nearest living Relative,

Was he an efficient man,

Where and in whose charge left,

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Joe. Giacunda
Humper.

Nov 11.

190 7 Time 11 A.M.

Mine No. 7 Entry No. —

Room No. —

Geo. L. Black
28

Name of Mine Foreman,

~~Married~~ Single

C. E. Moffitt

Condition of Life or Circumstances,

7 Months

Louise Plant (Friend) Root Springs, Wyo.

Yes

Was he temperate, yes

At Home

Young & Chambers

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Crushed thumb of left hand.

Cause,

Patient was landing trips on No. 7
dump and got his thumb caught between
sprag and wheel.

(Signature)

C. E. Moffitt

Title,

Outside Foreman.

Date

1

Rock Springs, Wyo 11/1/07.

Statement of C. Kim, injured in #7 Mine on the 8th, day of Oct '07.

I was coming down #16 Room #A Entry, D Plane and in a hurry when I fell by slipping on a piece of Rock on the roadway and broke my right arm near the wrist. It was near the finish of the shift and we were hurrying to get through. I think the injury was accidental and no one to blame.

C. Kim

his
+
Mark.

Jud. L. Rykes witness to signature.

Rock Springs, Wyo, Oct 16th, 1907

Statement of Francis Roak concerning the injury of C. Kim, in #7 Mine, #8 Entry, #D Plane, #16 Room on the 8th, of Oct. 1907.

We were lighting shots at the time and while coming down #16 Room, C. Kim fell on the roadway of the room by slipping off a flat piece of slate or the rail of roadway and in the fall broke his right arm. He fell on his arm. He was at this time about 75 feet from the room face, the shots went off about the same time that he fell. His arm was bent under him.

Francis Roak.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

P. Keim

Occupation,

Blaster Helper.

Date of Accident,

Oct. 8th

Location,

Rock Springs, Wyo

1907

Time

3:40 P.M.

Mine No. 7

Entry No. A, D

Room No. 16

If not injured in Mine, state where,

Name of Mine Supt.

Ed. H. Black

Age of Person injured,

38 years

What Family, if any,

His Wife

How long in employ, of Co.,

8 Months

Name and address of nearest living Relative,

Friend Lee Mok (Korean Agent) Rock Spgs, Wyo.

Was he an efficient man,

Yes.

Where and in whose charge left,

Wyoming General Hospital

Name of Physician called, if any,

Young & Chambers.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right arm broken above the wrist.

Cause,

Was engaged as a blaster helper and while running down the above named room after the shots were about to ignite, he fell on the roadway of the room by slipping on a flat piece of slate that was laying on said roadway, and in the fall caused the injuries above described. He was about 75 feet away from the room face when the Blasts went off. Ample distance for safety.

Released
Off. M. Griffiths

(Signature)

J. H. Dykes

Title,

#7 Mine Foreman

Date

1