

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.

190 4 Time

Mine No. 8

Entry No. 5

Room No. 6

Name of Mine Forman,

Married or Single

Condition of Life or Circumstances,

Was he temperate,

Nature and extent of Accident,

Cause,

Some rock fell from the roof upon him causing above injury. I visited his working place shortly after accident occurred and found the general condition of the room good; timbered close to face of room, and the roof good. The rock which had caused injury had fallen down between the timber + face of coal

Have wanted to get statement from above person and also from witness Mike Stanisish but have been unable to do so, and understand they have both left Rock Springs

(Sgd) D M Elias

Mine Forman

(Signature)

Date

1

Title,

REPORT OF PERSONAL INJURY.

Mine No. _____

Sup'ts No. _____

Name of Person injured, *Thomas Barker*Occupation, *Miner*Date of Accident, *April 25*Location, *Rock Springs*

If not injured in Mine, state where, _____

190 *4* Time *4:15 P M*Mine No. *9*Entry No. *7*

Room No. _____

Name of Mine Supt. *J. L. Black*Age of Person injured, *49*

What Family, if any, _____

How long in employ, of Co., _____

Name and address of nearest living Relative, *Rock Springs*Was he an efficient man, *Yes*Where and in whose charge left, *Robert Stoddard*Name of Physician called, if any, *R. D. Reed*Name and P. O. Address of Witnesses, *R. Stoddard*Nature and extent of Accident, *Pick wound of left hand**Released*

Cause, *He was crossing the top of the plane to the manway and his foot caught in below of the rope and he fell down and one of the picks which he was carrying went thro' his left hand.*

There was no one to blame for the accident

Signed man
(Sgd) Thos Barker

(Sgd) J. L. Soulsby
Mine foreman

(Signature)

Date

1

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *K Hasama*Occupation, *Miner*Date of Accident, *April 3rd*Location, *Rock Springs*

If not injured in Mine, state where,

Name of Mine Supt. *Geo L Black*Age of Person injured, *33*

What Family, if any,

How long in employ, of Co. *About 8 months*Name and address of nearest living Relative, *Rock Springs*Was he an efficient man, *Yes*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *R H Reed*

Name and P. O. Address of Witnesses.

*No Witness*Name of Mine Foreman, *Joe Soulsby*

Married or Single

Single

Condition of Life or Circumstances,

Was he temperate, *Yes*

Nature and extent of Accident,

*Left knee bruised**Released*

Cause,

*He was mining when a piece of coal
fell from the roof Jack of the room
and caught him on the left knee
There was no one to blame for the
accident;**(Sgd) Joe Soulsby
Mine foreman*

(Signature)

Date

1

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Herbert Crofts*Occupation, *Timberman*Date of Accident, *April 22nd*Location, *Rock Springs*

If not injured in Mine, state where,

190 *4* Time *2 P M*
Mine No. *7* Entry No. *1* Dip Room No. *123*Name of Mine Supt. *Pro L Black*Age of Person injured, *50*What Family, if any, *his wife*

How long in employ, of Co.,

Name and address of nearest living Relative, *Rock Springs Wyo*Was he an efficient man, *Yes*Where and in whose charge left, *at his home*Name of Physician called, if any, *Dr R Harvey Reed*Name of Mine Forman, *John L Dykes*Married or Single *married*

Condition of Life or Circumstances,

Was he temperate, *Yes*Name and P. O. Address of Witnesses. *Wm Harris*Nature and extent of Accident, *Cut on right hand by small rock falling from rock**Released*

Cause, At the time the accident occurred was trying to get a rail that had been caught by came in Room and while he had his hands gripped around the rail a piece of rock about 6 lb fell from the top, between two sets of timbers and struck him on top of his hand causing the injuries above described. The distance the rock fell would be about 6 feet. Did not notice any rock that was dangerous, while the place had recently caved, that the place was safe enough.

We, the undersigned certify the above to be correct.

(Ignored person)
(Witness)(Sgd) *John L Dykes* Forman*Herbert Crofts**Wm Harris*

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

May 21-1904

At 8:30 a.m. yesterday morning a Chinese entryman working in #6 Entry. #10 mine informed me his cars in the entry were loaded + I immediately took in 3 empty cars, the Chinaman riding in on the bumper of the last car. When about 50 yards from face of entry, I heard rock falling + striking the cars, behind me.

The other Chinaman working in the entry was standing close by at the time, and seeing no light back there we went back + found the Chinaman under a rock in the center of track from which he was pulled out by his partners.

(Sgd) Mufelaris
Driver.

May 31-1904

I was working with Ah Wah on the 20th of May in #10 mine to entry. I fired a shot + sent Ah Wah out to get some cars. When coming in he was on the last car of trip. I heard the rock fall on car + went out there + saw my partner under the rock. I did not know the rock was loose until I heard it fall on the car. I think the rock was 150 feet from face of entry.

(Sgd) Leo Hong.

May 31-1904

I went out to the slope to get the driver to give me some cars. The driver came in with the trip. I was riding on the bumper of the last car. When I got 150 ft from face of entry the rock fell out of roof causing injuries. I did not know the rock was loose until it fell down.

(Sgd) Ah Wah

REPORT OF PERSONAL INJURY.

Mine No. _____

Sup'ts No. _____

Name of Person injured, Ah WahOccupation, minerDate of Accident, May 20 -

Location, _____

If not injured in Mine, state where, _____

190 4
Mine No.Time 8:30 a.m.Entry No. 6

Room No. _____

Name of Mine Supt. J. L. BlackAge of Person injured 41What Family, if any, 3 childrenHow long in employ. of Co., 20 yearsName and address of nearest living Relative, ChinaWas he an efficient man, YesWhere and in whose charge left, In charge of #10 mineName of Physician called, if any, Chinese DoctorName of Mine Foreman, J. H. PattersonMarried or Single married

Condition of Life or Circumstances, _____

Was he temperate, Yes

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, Struck about the head & breast,*No Release taken
from Chinese*

Cause, He had gone out to tell the driver he was loaded, and when coming in, a large piece of rock fell from roof causing injuries.

(Sgd) J. H. Patterson

Mine Foreman

wanted more cars & the driver came into his working place. He was riding on the bumper of the black car when within 140 ft of face a large piece of rock fell out of roof causing injuries. The entry had been examined that morning by the Asst. foreman and found safe, but there was a slip in the rock that could not be detected & the rock got loose & fell out.

(Signature)

J. H. PattersonTitle, Mine Foreman,

Date

STATEMENTS OF WITNESSES.

Rock Springs Wyoming 5/24/04

This is to certify that Pete Kerevenic got
his hand hurt between the prop & car
while I was pulling car up for him & his
partner up 25 room # 3 Entry No 10 mine
the car got off the track on the switch
going on the high side of the room
and we were lifting the car on the
track & the mule gave a jerk before
the car was on the track & caught
his hand between the corner of the
car, & the prop. causing injury

(Sgd) John E. Jones.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No.

Sup'ts No.

97

Name of Person injured,

Occupation, *Loader*

Date of Accident, *May 19th*

Location, *Rock Springs*

If not injured in Mine, state where,

1904 Time *12 a.m.*
Mine No. *10* Entry No. *3* Room No. *25-*

Name of Mine Supt., *Geo L Black*

Age of Person injured, *28*

What Family, if any,

How long in employ, of Co., *1 year*

Name and address of nearest living Relative, *Brother R Spgs*

Was he an efficient man, *Yes*

Where and in whose charge left, *Wyo Genl Hospital*

Name of Physician called, if any, *R H Reed*

Name of Mine Forman, *J M Patterson*

Married or Single *single*

Condition of Life or Circumstances,

Was he temperate, *yes*

Name and P. O. Address of Witnesses, *John E Jones*

Nature and extent of Accident, *Skin & flesh torn off of hand between thumb & 3 finger*

Released

Cause,

He was lifting car on the track when the mule started up & pulled the car, catching his hand between car and prop. causing injuries

(Sgd) J M Patterson
mine foreman

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Springdale May 18-1904

Spring Valley May 18 - 1904

Spring Valley, N.Y., May 18th

To whom it may concern;

This certifies that I, Joe Miller, was working last night in mine at Spring Valley, N.Y. I worked with John Marinelli as partner in No. 8 Entry. We had just started our shift and was loading the first car of my partner was at the front end of the near the face and I was working in rear. While engaged in loading coal into the car, some coal fell from the top part of the rib, knocking me down on my face, cutting my face severely and bruising my head slightly. No one was to blame for the accident except myself. I should have examined my place before starting to work.

Joe Miller

Spring Valley, N.Y., May 18th 1901

To whom it may concern

This certifies that D. John Marinelli was working last night with Joe Miller, in No. 8 Back Entry, of Mine No. 1, at Spring Valley, N.Y. He had just started on shift and was loading the first car of coal when some coal fell from the upper part of the rib knocking my partner down on his face, cutting his face and bruising his head.

I did not examine the place before starting to work but took it for granted that every thing was safe.

John. Marinelli

John. Miller

myself. I should have examined my place before starting to work.

Joe Miller

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No. _____

98

Sup'ts No. _____

Name of Person injured, *J. Miller*
Occupation, *Miner*
Date of Accident, *May 17 -*
Location, *Spring Valley*
If not injured in Mine, state where, _____

190 *4*
Mine No.

Time *8:30 P.M.*

Entry No. *8* Back Room No. _____

Name of Mine Supt. *Alex Briggs*

Name of Mine Forman, _____

Age of Person injured, *39*

Married or Single *Single*

What Family, if any, *Father, 3 brothers & 4 sisters*

How long in employ, of Co., *2 years*

Condition of Life or Circumstances, _____

Name and address of nearest living Relative, *Peter Miller Glen Corbould, Ill.*

Was he an efficient man, *Yes*

Was he temperate, *Yes*

Where and in whose charge left, *Jos. Janubia boarding house*

Name of Physician called, if any, *Jos. E. G. Emerson*

Name and P. O. Address of Witnesses, *John Marinella*

Nature and extent of Accident, *Cut on face; forehead & head bruised*

Released

Cause, The above mentioned was loading a car with his partner *John Marinelli*, when some coal fell from the upper part of the rib, knocking him down on his face, & cutting his forehead just above the right eye and otherwise bruising his head slightly. Neither he nor his partner sounded the place loose. No one to see if there was anything loose. No one was to blame for the accident except himself. He had just started to work & was loading the first car of coal and should have examined his place before he started to work to see that it was safe instead of taking for granted that everything was all right.

Yours truly (Sgd) *Alex Briggs M.S.*

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Rock Springs 6/1/04
 I, Adam Jaramba, make this statement,
 I was working in one entry, 48 room
 10 mine on the 24th day of May
 While loading my car, a piece of rock
 about 5 lbs fell down on my
 hand causing injuries; no one to blame
 (sgd) Adam Jaramba

Rock Springs 6/1/04
 I, Pace Bieck, make this statement.
 I was working with Adam Jaramba
 on the 24th of May, 1 entry, 48 room 10 mine
 He was lifting a large lump of coal
 in car & hurt his hand
 (sgd) Pace Bieck

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Adam Januba
 Occupation, Loader
 Date of Accident, May 24th
 Location, Rock Springs
 If not injured in Mine, state where,

1904 Time 11:00 A.M.
 Mine No. 10 Entry No. 1 Room No. 48

Name of Mine Supt. G. L. Black
 Age of Person injured, 50
 What Family, if any, 2 children

Name of Mine Foreman, J. Waterson
 Married or Single married

How long in employ, of Co., 11 months Condition of Life or Circumstances,

Name and address of nearest living Relative, 1 boy New York

Was he an efficient man, yes Was he temperate, yes

Where and in whose charge left, Mike Machase

Name of Physician called, if any, R. H. Reed

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Right hand between knuckle & wrist,
 (Laceration & contusions of Right hand)

Left hand

Cause, He was loading a car. When lifting a large
 lump of coal on the car a surface
 piece of rock fell from roof causing
 injuries
 (Sgd) J. Waterson m. f.

(Signature)

Date

1

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, John Bolch

Occupation, Miner

Date of Accident, Feb 4th

Location, Rock Springs

If not injured in Mine, state where,

1904
Mine No. 7

Time 1:00 PM

Entry No. B

Room No. 28

Name of Mine Supt. G. L. Black

Age of Person injured, 42

What Family, if any,

How long in employ. of Co., about 1 month

Name and address of nearest living Relative, I Kirchbaum

Was he an efficient man, Yes

Where and in whose charge left, His friends at time of injury

Name of Physician called, if any, R H Reed

Name of Mine Forman, J. L. Dykes

Married or Single Single

Condition of Life or Circumstances,

Was he temperate, Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Slight bruise on right hand breaking the skin,

Cause, Was engaged as a miner, and while picking some loose coal from face of his room, a surface piece of rock fell + struck his hand when about a week afterwards the hand was sore + he consulted for treatment.

At Present he is not in employ. of the Company. Left town as soon as discharged from Hospital, and his present whereabouts are unknown.

Plenty of timber was in the room + contributory to same

(Sgd) J. L. Dykes
#7 mine foreman

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Statement of Party Injured

I, Sandom Angelortch was driving in 45 entry #1 mine at Rock Springs for the U P Coal Co on the 26th day of April about 3 o'clock P.M.

I was running a trip out to the slope & was putting in some blocks to back prevent it from running back when the thumb of my left hand was run over, the trip ran back over the blocks. That I was putting in
(Sgd) Sandom Angelortch.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Sandor Angelovitch*
 Occupation, *Driver*
 Date of Accident, *April 26th*
 Location, *Rock Springs*
 If not injured in Mine, state where,

190 *4* Time *9:00 P M*
 Mine No. *one* Entry No. *45* Room No. *---*

Name of Mine Supt. *J. L. Black*
 Age of Person injured, *24*
 What Family, if any, *Four*
 How long in employ, of Co., *8 years*

Name of Mine Forman, *D. G. Jones*
 Married or Single *married*

Name and address of nearest living Relative, *Mrs Angelovitch*
 Was he an efficient man, *Yes*
 Where and in whose charge left, *Wyo Gen'l Hospital*
 Name of Physician called, if any, *Dr R. H. Reed*
 Condition of Life or Circumstances, *yes*
 Was he temperate, *yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *End of thumb on left hand mashed*

Released

Cause, *Angelovitch was driving in 45 Entry. It was his duty to run the trip out to the slope and in order to hold them to the slope so that the rope could be attached it is necessary to block them. Sandor was holding the blocks to the wheels after running his trip out he had on gloves on his hands the trip started back and ran over the end of his thumb. There was no witness to the accident*

(Sgd) D. G. Jones.

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs Jan 23-1904

The Union Pacific Coal Co
Rock Springs Wyo

Dear Sirs:— This is how I was injured while
employed as slack shoveler at #4 boiler
room on the 18th of January 1904

I was passing through the boiler room
when in front of one set a rail that
was placed by the stack to hold the
roof down came loose and fell, striking
me, cutting me in four places, on the face
one, required three stitches, the other were
smaller.

I do not know as it could have
been avoided by anyone.

(Sgd) Lu Stevenson.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Lee Stephenson*Occupation, *Slack Shoveler*Date of Accident, *January 18*

1904

Time

*10:30**a.m.*Location, *Rock Springs*Mine No. *4*Entry No. *—*Room No. *—*If not injured in Mine, state where, *Boiler House*Name of Mine Supt. *Jno L Black*Age of Person injured, *24*What Family, if any, *—*How long in employ, of Co., *3 months*Name and address of nearest living Relative, *Brother Rock Springs*Was he an efficient man, *yes*Where and in whose charge left, *Brother*Name of Physician called, if any, *R H Reed*Name of Mine Foreman, *Robt Muir*Married or Single *single*Condition of Life or Circumstances, *—*Was he temperate, *yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Cut over right eye & side of face**Released*Cause, *He was passing in front of boilers when a small wire nail that was used to support the roofing around the stacks fell on top of the boiler & then bounded off & struck him, causing above injuries**(Sgd) Robt. Muir
Master Mechanic*

(Signature)

Date

1

Title,

R. S. April 9.

4

Testament of Party injured

Victor Maupin

On the 9th day of April 1904 was working in 33 Room in 41 Entry in No. 1 Mine was shoveling some coal back from surface of Room so that I could do some mining. And Ojala was my partner. We had just put up a prop on the over side of the Room, where we sound in Roof, but where I was going to mine. Had not sound it, a large slab of Rock fell and struck me on the Right foot. There was a dip in the Roof and it fell out of that dip. We had one more prop come at the foot of the Room. We were going to add some that day, but I thought that there did not need a prop there where the rock fell from.

Victor Maupin

April - 9th

Witness Statement

I Andrew O'Fallon was working along with Victor Wainwright in Room 33 Entry #1 in No 1 Mine for the C. P. Coal Co. on the 9th day of April 1901 when Wainwright had his right foot hurt by a piece of Rock falling from the Roof it was about 8 o'clock A. M. he was shoveling some coal back from the face of the Room so that he could do some work we had just put up a prop on the lower side of Room but we had not soundered the roof only around where we put the prop it was quite solid. We had plenty of props as many as we needed. we had no more loose prop at foot of the Room, we were going to order some that day, it was quite a piece of Rock, there was a slip camion and they fell off that slip.

Witness Signature

Andrew O'Fallon

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Victor Macupaa

Occupation, Miner

Date of Accident, April 9th

Location, Rock Springs

If not injured in Mine, state where,

190 4 Time 8:00 a.m.
Mine No. 1 Entry No. 41 Room No. 33

Name of Mine Supt. J. L. Black

Age of Person injured, 23

What Family, if any, I two

How long in employ, of Co., 4 years

Name and address of nearest living Relative, wife Mrs Mary Macupaa

Was he an efficient man, yes

Where and in whose charge/left, Mrs Genie Hospital

Name of Physician called, if any, R. H. Reed

Name of Mine Foreman, O. G. Jones
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, Cut on Right foot.

Released

Cause, Victor Macupaa & And Gata worked together in Room 33 entry 41 #1 mine on the morning of the 9th of April 1904. Macupaa was hurt by a piece of Rock falling from the roof & striking him on the Right foot. The roof was very shelly. There were no large pieces that would require propping, loose but it kept shelling continually & they had to be very carefully to take down small pieces of Rock. There was a very slick piece of coal & a piece shelled off to that slip & struck him on the foot.

(Sgd.) O. G. Jones
mine foreman

(Signature)

Date

1

Title,

Statement of Party Injured

I John Minghini was employed
in No 1 Mine for the Union Pacific
Coal Co On the 6th day of Feb
I was driving in #3 entry &
been driving there for nine months
starting my trip from 70 Room at
having coupled up to my last load
there I was along side of the first
and the mule in starting the
he kicked me in the Right eye
I called on Dennis Jones a Tractor
who was a little ways outside to
and drive my mule out
the ditch and I swerved out
fast as I could

John Minghini



Name of Person injured
Occupation
Date of Accident
Location
If not injured in Mine
Name of Mine Supt.
Age of Person injured
What Family, if any
How long in employ. of
Name and address of ne
Was he an efficient man
Where and in whose char
Name of Physician called

Name and P. O. Address of

Nature and extent of Acci
Ricks

Mr. Ricks
on the
P.M. He
loaded
his last
trip from
the
caused on
was about
the his
It is
Mr. Ricks
he was
from the

Statement of D. H. Jones
whom Birmingham says was a witness
the accident.

By about 60 ft. distance of where
Birmingham says he was kicked in the
by a mule on the 6th day of Feb. 1904.

No 1 mine. All I know is that he called
to see the doctor. He had
his eye hurt.

over his eye and drove his mule
out to the doctor. D. H. Jones

is a witness to the fact that Birmingham
was kicked in the eye by a mule on the 6th day of Feb. 1904.

He is a witness to the fact that Birmingham
was kicked in the eye by a mule on the 6th day of Feb. 1904.

He is a witness to the fact that Birmingham
was kicked in the eye by a mule on the 6th day of Feb. 1904.

He is a witness to the fact that Birmingham
was kicked in the eye by a mule on the 6th day of Feb. 1904.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Menghini*Occupation, *Driver*Date of Accident, *February 6th*Location, *Rock Springs*

If not injured in Mine, state where,

190 *4* Time *3:00 P.M.*Mine No. *1*Entry No. *43*Room No. *On Entry*Name of Mine Supt. *L. L. Black*Age of Person injured, *21*

What Family, if any,

How long in employ. of Co., *5 years*Name and address of nearest living Relative, *L. Magagna, Cousin*Was he an efficient man, *Yes*Where and in whose charge left, *Sent to Dr. Brich, Ogden*Name of Physician called, if any, *R. H. Reed*Name of Mine Foreman, *D. J. Jones*Married or Single *single*

Condition of Life or Circumstances,

Was he temperate, *yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Had his right eye hurt by being kicked by a mule.*

Released

Cause, *John Menghini was a driver in 1/3 entry in #1 mine on the 6th day February 1904, about 3 o'clock P.M. He was coming out with a trip of loaded cars, at 70 noon he coupled to his last loaded car & by starting his trip from there he says his mule kicked him in his right eye. He called on Dennis Jones, Trackman who was about 100 feet away to come & take his mule out to the switch.*

P.S. *It is my opinion that the mule did not kick him in the eye but that he was struck by a piece of dirt from the mule's foot.*

(Sgd) D. J. Jones
M. F.

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Rock Spring Wyo. 6-27

Statement of Jack McMichael in regard to accident
which occurred to H. Althorn in #8 Mine April
27th 1904. 29 Room 4 Entry.

I was working with H. Althorn
in #8 Mine Room 29 and H on April 27th 1904.
He had loaded a car. And was running it down
to the cut. I heard him make a noise, as if he was
hurt. I ran to him and found him under a
rock that had fallen from the roof. He got
himself from under the rock. I helped him into
a car and took him out of the mine.

Jack McMichael

THE UNITED
REPORT

Name of Person
Occupation
Date of Accident
Location
If not injured
Name of Mine
Age of Person
What Family
How long in
Name and address
Was he an employee
Where and in
Name of Physician
Name and P. C.

Nature and extent of injury

Cause, if known

He
no
dis
no
in

stated

He
Jack
su

Ps.

by
a

Date

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No. 105
Sup'ts No.

Name of Person injured, Henry Alholm
Occupation, Loader
Date of Accident, April 27
Location, Rock Springs
If not injured in Mine, state where,

190 4 Time 12:00 m
Mine No. 8 Entry No. 4 Room No. 29

Name of Mine Supt. Gus L Black
Age of Person injured, 23
What Family, if any,
How long in employ, of Co.,

Name of Mine Forman, Om Elias
Married or Single

Name and address of nearest living Relative, John Alholm m.d Denver Colo
Was he an efficient man, Yes
Where and in whose charge left, Wyo Genl Hospital
Name of Physician called, if any, Dr Reed

Condition of Life or Circumstances,
Was he temperate, Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Back injured; Scap wound

Released

Cause, He was running a loaded car down the
room. It jumped the track, struck &
discharged a prop which hit some
rock face upon him, causing above
injury. Have been unable to get a
statement of accident from Mr Alholm
He is still in Hospital. The witness
Jack Niemda has not been at work
since accident

(Sgd) Om Elias m. y

P.S. The place was safe & well timbered until
the prop was discharged, such an
accident was unavoidable

(Signature)

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,

190 4

Time

Entry No.

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 Foreman,

Married or Single

Condition of Life or Circumstances,

Was he temperate,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Back Bruised

Released

Cause,

While working on the dump he was cleaning up & when the trip was coming over the knuckle the rope struck him in the back causing above injury

(Sgd) J A James
Outside foreman

(Signature)

Date

Title,

2

Spring Valley, N.Y., June 14, 1891

It was while undermining it
under a loose block of coal that
accident occurred.

Yours truly,

J. J. Parr
J. W. Powell

Spring Valley, N.Y., June 14

To Whom it may concern

This certifies that we, J. J. Parr
Mr. Powell, Sr., are engaged as Shot Fi
in No. 5 Entry, of Mine No. 1, Spring Valley, N.

J. J. Parr fired the shot on the eve
of June 13th which had been prepared d
the day by Carlo Guise and John H. Ove

After firing all the shots on No. 5 Entry fo
day we both (Parr and Powell) went the

all the places to see if every thing was
and in good condition and it was fo

fications of Fire or Gas. The above m
turned shot was drilled from the

towards the center of the place and
all right. The shot left the center,

was not mined, standing but in a
condition. The left which blasted all

was undermined. It was while und
this broken coal, that it became entirely

and fell, causing Carlo Guise's injury.
coal could have been taken down without

undermining very much but the more
is undermined, the easier it is to pull

Spring Valley, June 14

In whom it may concern
This certifies that I James Knox Anderson
at Mine No 1 Spring Valley N.Y. was in
Mine this A.M. and passed through
44 on No 5 Entry about 9¹⁵ o'clock
Charles Geise worked in this Room and
was breaking up some large Coal
putting it in the Chute. His partner
working in the Cross Cut.

When I passed through John H. Greer
and me they had a standing shot - this
but that they had got it half under
also that if it had 2 inches more Power
it would have been a good shot.
I found the Room in good shape
well timbered clear of Gas, and Greer
said they would get the Coal off all
right.

James Knox Anderson

Spring Valley, N.Y. June 14

To whom it may concern

Spring Valley, N.Y.

June 14

To whom it may concern
This certifies that St. John H. Green
was working to day as partner in
Carlo's Gun Shop in Room 44 on No 5 St
in Mine No 1 at Spring Valley, N.Y.
About 11:15 o'clock A.M. I was up
the face of the Room, and was then
in the right hand side of the Room
and Carlo was in the left hand side
of the Room. He had a standing
in our Room this morning and
was working it down when he got
looked down towards him and
that the Coal was becoming loose
told him to come out that it was
to fall. He answered me by saying
I will Mine it a little more and
it fall. He had hardly spoken
it fell and hurt him on the head
badly. Our place was in good shape
and I consider it just as safe as any
Room in the Mine. It is well cropped
and clear of Gas

John H. Green

REPORT OF PERSONAL INJURY.

Mine No. 107

Sup'ts No.

Name of Person injured, Carlo Guise

Occupation, Miner

Date of Accident, June 14

Location, Spring Valley Mine No. 190

Time 11:15 am

Entry No. 1

Room No. 44

Name of Mine Supt. Alex Bragg

Name of Person injured, 38

Married or Single single

How long in employ, of Co., 2 months but worked here before

Name and address of nearest living Relative, Frank Guise Rock Springs Wyo

Is he an efficient man, yes

Where and in whose charge left, Wyoming General Hospital Rock Spgs

Name of Physician called, if any, E G Benson

Name and P. O. Address of Witnesses.

FATAL

Nature and extent of Accident,

Cut on head and otherwise bruised

cause, The above mentioned was mining off a shot that had not blasted down of the coal on what is called a standing shot. The men had it partly worked off when Mr Knox, the boss & foreman called them. John & Avery warned Guise & told him it was going to fall. Guise thought he would mine it a little more, then take it down. He was still mining when it fell & hurt him.

This is an accident when a man runs chances to make money & gets hurt by not taking proper care of himself. When his partner told him, he ought to have quit mining & taken it down. He had a good safe room to work in, clear of gas, & well propped, but neglected his own safety for the sake of making money.

Yours truly

(Signature)

Alex Bragg

Title,

Mine Supt

Date

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Frank Alsdorf*
 Occupation, *Machine Runner*
 Date of Accident, *June 10*
 Location, *Rock Springs*
 If not injured in Mine, state where,

1904
 Mine No.

Time

9 a.m.
 Entry No. *20* Room No.

Name of Mine Supt. *Geo L Black*
 Age of Person injured, *28*
 What Family, if any, *Two*

Name of Mine Forman,

Married or Single

Joe Soulsby
married

How long in employ, of Co., *6 months*
 Name and address of nearest living Relative, *Rock Springs*

Condition of Life or Circumstances,

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

at Home

Name of Physician called, if any,

R H Reed

Name and P. O. Address of Witnesses.

Geo Zueko

Nature and extent of Accident, *Thumb crushed on Right hand*

Released

Cause, *He had the machine jacked up and it slipped from under + caught his thumb on right hand and crushed it.*

There was no one to blame for the accident

(Sgd) Joe Soulsby
Mine Foreman.

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Rock Springs Wyoming Jul 2-04

I was working in #4 Entry #8 mine at
7 am 28th day of June

While digging the coal, top coal came
down & injured my partner.

He was taken to Wyoming General Hospital on
same day.

Yours truly
(Sgd) J. Yamaguchi

(Partner) J. Yamatake
check 186 #8 mine

Harry Nishiyama 1st Lieut,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *I Yamaguchi*Occupation, *miner*Date of Accident, *June 28*Location, *Rock Springs*

If not injured in Mine, state where,

190 *4* Time *7 am*Mine No. *8*Entry No. *4*Room No. *Entry pillar*Name of Mine Supt. *J. L. Black*Age of Person injured, *23*

What Family, if any,

How long in employ, of Co., *3 years*Name and address of nearest living Relative, *H. Makiyama (Friend)*Was he an efficient man, *Yes*Where and in whose charge left, *Wyo gen'l Hospital*

Name of Physician called, if any,

Name of Mine Forman, *O. M. Elias*Married or Single *single*

Condition of Life or Circumstances,

Was he temperate, *yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Back Injured.*

Cause, At time of accident I Yamaguchi was mining on a pillar when some coal fell upon him causing above injuries. He was to blame for the accident as he did not have the coal propped to prevent it falling as they had been warned to do time and again.

O. M. Elias
Mine Forman.

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Cumberland. Ky
June 30, 1904.

John Blackwood, my partner
and on the 30th day of June,
we were working in room
+g on the 4th North entry.
Blackwood was filing some
drills for my use, when he
was hit by a fall of soap-
stone from near the roof
of the room, which struck
him on the neck, shoulders
and back. I was standing
about 2' away from Black-
wood when the fall occurred,
and I should judge that
the soapstone weighed about
70 pounds.

(Signed) Thos. Hunter.

REPORT OF PERSONAL INJURY.

Mine No. _____

Sup'ts No. _____

Name of Person injured, *John Blackwood*Occupation, *Miner*Date of Accident, *30th June*Location, *Cumberland*

If not injured in Mine, state where, _____

1904 Time *11 o'clock a.m.*
Mine No. *1* Entry No. *4th* Room No. *49*Name of Mine Supt. *Jas Needham*Age of Person injured, *29 years*

What Family, if any, _____

How long in employ, of Co., *6 months*Name and address of nearest living Relative, *Mother, Mrs Blackwood, C'land.*Was he an efficient man, *Yes*Where and in whose charge left, *His mother*Name of Physician called, if any, *Dr. J. H. Young.*Name of Mine Forman, *J. M. Faddies*Married or Single *Single*

Condition of Life or Circumstances, _____

Was he temperate, *Yes*

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, *Injured back and cut on hand.**Released.*

Cause,

He was working in room 49 and the 4th North. There was a clod of soapstone, 8 or 10 inches, on top of the coal and above this a hard sand rock. This clod of soapstone was taken down with the coal because timber would not hold up. He had taken all down but this piece and states that he thought it would stay up long enough for him to drill a hole when it fell on him causing his injuries.

(Signature)

J. M. Faddies

Title,

Mine Foreman

Date _____

1

STATEMENTS OF WITNESSES.

Cumberland Tyo. 7/7/04

I, Oscar Hixson, a coal miner employed by the Y. P. Coal Co., was working on the 2nd south in No. 8 room, when Jim Haddenham, the shot firer, was examining the shots and a chunk of coal fell from the rib striking him on the head.

I had examined the place a short while before that and found it a little loose but not dangerous.

Signed) O. Hixson.

Mine No. _____
Sup'ts No. _____

Name of Person injured, *James Haddenham*
Occupation, *Shot Fitter*
Date of Accident, *July 6 "*
Location, *Cumberland*
If not injured in Mine, state where, _____
190 *4* Time *5 o'clock P. M.*
Mine No. *2* Entry No. *2* So, Room No. *8*

Name of Mine Supt. *Jas Needham* asst.
Age of Person injured, *35 yrs*
What Family, if any, _____
How long in employ, of Co., *nine mos*
Name and address of nearest living Relative, *Wm. Johnson*
Was he an efficient man, *Yes*
Where and in whose charge left, *Wm. Johnson*
Name of Physician called, if any, *Dr. Lyman and Dr. Young*
Name and P. O. Address of Witnesses, _____

Oscar Dixon.
Cumberland,

Nature and extent of Accident,
a scalp wound on top
of head.

Released

Cause, *Mr. Haddenham was examining*
shot and had placed a squib
in needle hole, when a piece
of coal fell from pillar near
roof, striking him on top of the
head, causing a scalp wound.
The injured man was brought
out at once and the Doctor called.

(Signature) *Wm. Tait*
Title, *Asst. Mine Foreman*

STATEMENTS OF WITNESSES.

Rock Springs Wyoming July 11th

4

Statement of Andrew Huttman Accident

While passing on the low side of the trolley trips near the Mine Mouth and touched my lamp that was on my head against the Trolley wire the shock knocked me down and bumped my forehead on a lump of coal that was laying on the road side cutting my forehead near the center. The wire at this place is about 2 feet higher than a Mine Car. I was late and in a hurry to catch the trips and did not take much notice of the loaded wire. I was thinking that the trips would start and I would be left behind.

Andrew Huttman
Witness John Johnson

THE UNION
REPORT OF

Name of Person
Occupation
Date of Accident
Location
If not injured

Name of Mine
Age of Person
What Family
How long in
Name and ad
Was he an ef
Where and in
Name of Phy

Name and P.

Nature and e.

Cause,

Date

C-1-100-404

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Andrew Hattenen*Occupation, *Miner*Date of Accident, *June 27,*Location, *Rock Springs*

If not injured in Mine, state where,

1904 Time *7:30 A. M.*Mine No. *7* Entry No. *Main* Room No.Name of Mine Supt. *Geo. L. Black*Age of Person injured, *22 years*What Family, if any, *-*How long in employ, of Co., *1 1/2 years*Name and address of nearest living Relative, *Matt Maski, Rock Spgs.*Was he an efficient man, *Yes*Where and in whose charge left, *His Friend*Name of Physician called, if any, *P. Harvey Reed.*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 forehead.

Cause,

He was going to work in the morning and presuming he was late was hurrying along side of the empty trip to get near the front and in so doing he touched the trolley line with his lamp that was on his head. He received a shock that knocked him down and falling on lump of coal on roadside, received injury above described.

(Signature)

Jno. L. Dykes,

Title,

M. F. #7 Mine.

Date

1

Spring Valley June 29th 4

To whom it may concern
 This certifies that A. C. Ravina
 was working today with Joe Pig as
 his partner, we worked in Room 44 on
 No 5 Enter in Mine No 1 at Spring Valley
 N.Y. About 9.45 o'clock A.M. Joe was
 undermining the Coal in the face
 of our Room when it became loose
 and fell down and tumbled over on
 his leg, which broke it.

Joe Knot called in our Room today and
 measured the height of our Coal and Joe
 told me when I went up there that the
 Coal was 4' 5" high.

Our place is propped close up to the face
 and is clear of Gas. It is a good Room
 No blame on any person, he ought to
 have taken down the Coal before it fell.

A. C. Ravina

Spring Valley N.Y. June 29th 4

To whom it may concern
This certifies that Joe Jas Knox and
William Gibbs were in No 5 Entry
in Mine No 1 at Spring Valley N.Y. this
We visited No 44 Room and when
there Joe Dig was undermining
his Coal pit both noticed the Coal
drawn from the Roof and Knox
said you better take it down and
I Gibbs then spoke and said you
better take it down or you will get
Killed. After the Accident I Knox
went back with Supt. Briggs to see
if it was the loose Coal that I had
warned him to take down that had
fallen and found that it was and
that he had not obeyed my warning
We both consider this Room as safe
as any that is in this entry

James Knox
William Gibbs

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Joe Piz*Occupation, *Miner*Date of Accident, *June 29 "*

190 4 Time

*9:45 a.m.*Location, *Spring Valley*Mine No. *1*Entry No. *5*Room No. *44*

If not injured in Mine, state where,

Name of Mine Supt. *Alex Briggs*

Name of Mine Forman,

Age of Person injured, *20 years*

Married or Single

*Single*What Family, if any, *Parents & 12 bros - 2 sisters*How long in employ, of Co., *3 weeks*

Condition of Life or Circumstances,

Name and address of nearest living Relative, *Jacob Piz, 211 Main St. Trinidad**(Colo)*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, *Dr. E. G. Denison*

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

*Left leg broken. Back
bruised.**Released*

Cause,

The above mentioned was undermining the coal and it became loose. Jag Knox, Asst. Mine Foreman, passed through his room a few minutes before he got hurt and warned him to pull it down and left him there. Instead of him doing this he started to undermine it again, after doing this for some time, he got up on his feet and right then the coal fell and tumbled on his leg and broke it.

His room is well timbered and clear of gas and no person is to blame for his accident but himself.

(Signature)

Alex Briggs

Date

Title,

M. S.

Cumberland, Ky.

July 13, 1904.

Mr. James Needham,
Dear Sir: -

I am employed as
machinist, Cumberland No. 1 Mine and
was putting a key in cross head
of hoisting engine. Axel Johnson
was striking for me when a
piece flew from the bar and
went in his eye.

(Signed) D. J. Faddies.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Axel Johnson.

Occupation, Hoisting Engineer

Date of Accident, July 11th

1904 Time

8 o'clock P.M.

Location, Cumberland

Mine No. 1

Entry No. —

Room No. —

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,

Was hit in right eye with a piece of steel breaking off of a bar, which he was striking with a sledge hammer.

Released

Cause,

Had been examining cylinder packing of right engine No. 1 hoist and was putting piston back on cylinder and connecting piston rod into crosshead. Had Dave Faddies holding a piece of 3" round shafting about 3 feet long on key and Axel Johnson was striking bar with sledge hammer. While so doing a piece flew off of shafting and hit him in the right eye.

(Signature)

H. Davies

Title,

Master Mechanic.

Date

July 29, 1904.

To whom it may Concern:-

This to certify that on June 16th, 1904, while employed as trip loader on Dump No. 9, The Union Pacific Coal Co., I accidentally caught my middle finger on right hand in wheel while spragging car and mashed end of said finger badly.

(Signed) Jack Lahti

REPORT OF PERSONAL INJURY.

Mine No. 115

Sup'ts No. _____

Name of Person injured, Jack LahtiOccupation, Dump HandDate of Accident, June 16Location, Rock Springs

If not injured in Mine, state where, _____

190 4 Time 4:30 P. M.
Mine No. 9 Entry No. _____ Room No. _____Name of Mine Supt. Geo. L. BlackAge of Person injured, 27 years

What Family, if any, _____

How long in employ, of Co., Two yearsName and address of nearest living Relative, Math Lahti (Bro.) R. Spgs.Was he an efficient man, Yes

Where and in whose charge left, _____

Name of Physician called, if any, P. Harvey Reed.

Condition of Life or Circumstances, _____

Was he temperate, Yes

Name and P. O. Address of Witnesses.

None

Nature and extent of Accident,

Third finger on right hand lacerated.Released

Cause,

While trying to put a sprag in a car wheel he caught his finger between the sprag and the wheel.

(Signature)

J. Q. James

Title,

Outside Foreman.

Date

1

STATEMENTS OF WITNESSES.

Cumberland, Ky.
July 27, 1904.

I, the undersigned, am employed at No. 2 mine, as brattice man. On the morning of July 27th, about 7 o'clock, I was ordered by the foreman to go to room 21, 5th north entry to put up some bratties to clear out some gas which the fire boss said was in the room. Going in there I found that one of parties, Mike Berding, who was working in the room had lit the gas with his lamps and burned himself.

I found the fire boss danger mark on the mouth of the room.

(Signed) Alfred Hainis

Cumberland Grey

July 27th

I the undersigned am Employed at mine
No 2 Cumberland as fire Boss on the above day
in my daily Examination of my District I found
gas in Room 1 fifth north Entry. When mine
Berdani and his Partner G. Minette called at fire
Bosses Cabin at the pit mouth on top I told them
there was gas in their place and not to go in there
untill I came down and made their place safe by
putting up Brattice I marked the date and put
a danger mark at a safe distance from where
the Gas in the Room.

Luke Roddy

Witness
J. J. Block

Cumberland Feb 29 '4

I William Tait am Employed at No 2 mine as ass-freeman, on the morning of the 27th about 8 a.m. I went to Room 21 in 5th North Entry. I saw the Fire Boss danger marks at mouth of said room at a safe distance from where gas would accumulate.

William Tait

Cumberland Ky July 27

I Mike Bardino work in No 21 Room
in the 5th north entry Mine No 2 Cumberland
Kyo. On the morning of July 27th I went
to the gas watchmans Cabin about 7 AM.
and asked how my place was. He said
there was gas in ~~that~~ place and told me
to stay out until he came down. I then
went in the mine and went to my
room and was brushing the gas out
when it burned me. Before going into
the room I saw the danger signs were
on the ladder at the mouth of the room
see mark.

Witness; Jas Jackelotte

Mike Bardino

Cumberland N.Y. July 27

I John Maysetti am Mike Bardin's Partner. On the 27th of July 1904 I went to the gas cabin and asked the gas watchman how my place was, He told me there was gas in the place and told me not to go in until he came down. I went into the mine and met my partner coming out. He said he had been in the room and lit the gas.

A. Maysetti

Witness

Gas Finko-Little

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Mike Berdina

Occupation,

miner

Date of Accident,

July 27th

Location,

Cumberland

If not injured in Mine, state where,

190 4 Time

7 o'clock a.m.

Mine No.

2

Entry No.

2⁵^m

Room No.

21

Name of Mine Supt.

James Hedham

Age of Person injured,

23 years

What Family, if any,

How long in employ, of Co.,

2 weeks

Name and address of nearest living Relative,

Mrs. Berdina (Wife) Collinstonville, Ill.

Was he an efficient man,

Yes

Where and in whose charge left,

G. Minetti, M.D. General Hospital.

Name of Physician called, if any,

Dr. Lyman.

Name and P. O. Address of Witnesses.

Burned on hands, arms
face and back slightly.

Nature and extent of Accident,

Released

Cause, He went into his room and lit some gas after being notified by the fire boss, that it contained gas, and he must not go in his place till he would come down in the mine and make it safe.

(Signature)

M. J. Blake

Title,

M. J.

Date

Spring Valley July 20/04.

To whom it may concern:—

This certifies that I, Peter Travis, am engaged as track layer in No. 1 Mine, at Spring Valley, N.Y. I was working on No. 7 Entry this A.M. just outside of the rooms and when Driver Powell was to couple up the last car to his trip, that he was making wheel he got hurt.

I heard the mule's chain rattle and said to my partner, that mule is caught or is fast.

Powell at once called for me to come and give him a hand. When I got there I found the mule down and Powell had his foot hurt.

I got the mule out and took Powell home.

In my opinion Powell forget to pick up car at that point.

(Signed) Peter Travis

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No.

Sup'ts No.

417

Name of Person injured, *Wm Powell, Jr.*
Occupation, *Driver*
Date of Accident, *July 20th*
Location, *Spring Valley*
If not injured in Mine, state where, _____

190 *4* Time *9 o'clock a. m.*
Mine No. *1* Entry No. _____ Room No. _____

Name of Mine Supt. *Alex Briggs*
Age of Person injured, *21 years*

Name of Mine Forman, *Jas Knox*
Married or Single *Single*

What Family, if any, _____
How long in employ, of Co., *8 years*

Name and address of nearest living Relative, *Wm Powell, Sr.*
Condition of Life or Circumstances, _____

Was he an efficient man, *Yes* Was he temperate, *Yes*

Where and in whose charge left, *Sent to hospital*

Name of Physician called, if any, *E. G. Denison*

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, *Big toe of right foot caught between car bumpers and part of end pinched off.*

Released

Cause, *Powell was working, making a trip on No. 7 entry. He started out with 4 cars and had one more to pick up at the room nearest the slopel. In coming through the battery cloth at this room, he lost his light then his mule turned out and he got his foot between the bumpers, as his trip struck the standing car it pinched his toe on right foot. I was on the entry at the time and saw him immediately. Could not find any other injury. Losing his light was the immediate cause of the accident.*

(Signature)

Alex Briggs
Mine Supt

Date

Title,

STATEMENTS OF WITNESSES.

COPY.

Rock Springs, July 29th, 1904.

Statement of C. Obikawa.

Mr. Jos. Soulsby,

9 Mine U. P. Coal Co.,

Dear Sir:--

I was mining in No. 9 mine of The Union Pacific Coal Company, Room 33, 4th Entry, and I was working on the 9th day of July, 1904. I had bored a hole for powder and after having set fire to the squib, I heard a loud noise, like the bursting of the coal and I thought it was from the shooting. But it was not, and when I began to near the place of working a piece of coal fell and struck me on right thigh, ~~fracturing~~ fracturing right leg, and I could not get away in time. It occurred about 9 o'clock in the morning. My partner Chiba has been absent lately and I called for help and was assisted by Akama, who was in the next room, 34, I was carried out and removed to the hospital.

C. Obikawa

By

T. Aikawa,

Japanese Agent and Interpreter.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

118

Mine No.

Sup'ts No.

Name of Person injured, *C. Obikawa*

Occupation, *miner*

Date of Accident, *July 9th*

Location, *Rock Springs*

If not injured in Mine, state where, _____

190 *4* Time *6:30 A.M.*
Mine No. *9* Entry No. *4* Room No. *33*

Name of Mine Supt. *Geo. L. Black*

Age of Person injured, *28 years*

What Family, if any, _____

How long in employ, of Co., *1 week*

Name and address of nearest living Relative, _____

Was he an efficient man, *Yes*

Where and in whose charge left, *Wyoming*

Name of Physician called, if any, *P. H. Reed.*

Name of Mine Foreman, *Jos. Soulsby*

Married or Single *Single*

Condition of Life or Circumstances, _____

Rock Springs

Was he temperate, *Yes*

General Hospital

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, _____

Right leg fractured.

Cause,

He was putting off a blast and lighted the squirt and it went out and he went back and was lighting it again, when blast went off, throwing coal all around him and hitting him on right leg.

There was no one to blame for the accident.

(Signature)

Jos. Soulsby
Title, *Mine Foreman.*

Date

STATEMENTS OF WITNESSES.

Hannq. Nyo 5/6/04.

Statement of Victor Tofferi
regarding the injury of Jack
Markala.

I saw Jack Markala on Dump
as he was about to take
the rope of the trip.
I saw that his foot was
caught some where for he
fell down and two first aids
run over his foot.
I told him not to take the
rope off as this was not
his work, this was said more
in fun than anything else,
I knew he had no business
near the rope.

(Signed) Victor Tofferi.

REPORT OF PERSONAL INJURY.

Mine No. 119Sup'ts No. Name of Person injured, Joe MarkalaOccupation, Loader and trimmerDate of Accident, May 12, 1904Time 11:55 a.m.Location, Hanna, WyoMine No. 1Entry No. Room No. If not injured in Mine, state where, on DumpName of Mine Supt. E. S. BrooksAge of Person injured, 23 yearsWhat Family, if any, How long in employ, of Co., 3 yearsName and address of nearest living Relative, Was he an efficient man, YesWhere and in whose charge left, Dr. J. C. HammondName of Physician called, if any, Name of Mine Forman, Joe BurtonMarried or Single SingleCondition of Life or Circumstances, Was he temperate, YesName and P. O. Address of Witnesses. Nature and extent of Accident, Right foot and anklelacerated, contused and excoriated.
No bones broken.ReleasedCause, Joe Markala, without anyorders, went upon Dump and
took cable of trip. Got his foot
caught between board and track
rail, two cars running over his
right foot, lacerated, contused and
excoriated. No bones broken.

(Signature)

E. S. Brooks,

Date

Title, M. Supt.

Spring Valley N.Y. Aug 3

To whom it may concern
 This certifies that I Wm. Gibbs am
 engaged as Fire Boss at Spring Valley
 Mine No. 1 and that about 5.30 P.M.
 A.M. I examined Room No. 5 on No. 58
 and found it clear of gas and in
 safe condition. I saw nothing
 in that Room when I made examination
 only a few loose pieces of Coal hang-
 ing when there had been a shot.
 The Roof is good only that there is
 a piece of rock that fall with the
 Coal about 6 or 8 inches thick.
 The Room is well trapped and I con-
 sider it a safe place for men to work.

Wm. Gibbs

Spring Valley Aug 3- 21

To whom it may concern
This certifies that I Chas Root was
working to day with Ed & Sam in the
parlour in Room 45 on the 5th Eddy
in Mine No. 1 at Spring Valley
About 10 o'clock A.M. My Father
was undermining his Coal when
it fell on him and hurt his back
He had taken down the loose coal
before he started Mining, and had
only been Mining about 15 Minutes
when it fell. It fell from a slip
Facing some Rock also fell but
did not strike him.

We were close together when accident
occurred. The Coal did not make a
noise before it fell.

Chas Root

THE UN
REPORT

Name of Person
Occupation,
Date of Accident,
Location,
If not injured

Name of Mine
Age of Person
What Family
How long in
Name and address
Was he an employee
Where and in what
Name of Physician

Name and Position

Nature and

Cause,

Date

C-7-15-19-6

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

120

Mine No.

Sup'ts No.

Name of Person injured, *E. J. Saari*
Occupation, *Miner*
Date of Accident, *August 3rd*
Location, *Spring Valley*
If not injured in Mine, state where,

190 *4* Time *10 o'clock a.m.*
Mine No. *1* Entry No. *5* Room No. *45*

Name of Mine Supt. *Alex Briggs* Name of Mine Forman, *Jas. Knox*
Age of Person injured, *26 years* Married or Single *Single*
What Family, if any, *Has worked 4 yrs in mines, Montana*
How long in employ, of Co., *2 wks* Condition of Life or Circumstances,
Name and address of nearest living Relative, *Lizzie Saari, Est. Falls, Mt.*
Was he an efficient man, *Yes* Was he temperate, *Yes*
Where and in whose charge left, *Alex Johnson, Boarding house,*
Name of Physician called, if any, *Dr. E. G. Denison,*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Bruised shoulders and back.*

Released

Cause, *The above mentioned was mining his coal when it fell on him. He tried to take it down but could not. In his room there is a piece of rock 6 or 8 inches thick that falls with the coal. He was mining only a short time when the coal fell. His room is well propped and is safe as far as the roof falling is concerned. He and his partner have been advised several times to sprag the coal whenever it was in any way loose, but he did not do it as he had just started to under mine it. His accident is purely due to him not taking care to pull down all the loose coal before he started mining.*

Date

(Signature)

Alex Briggs
Title, *Mine Supt.*

Cumberland Hgzo.
8/5/04.

I was taking sinker pump out of South Manway and had Nicholas Hendron helping me. He had loaded pump on car and rode up from face of manway to 6th.

We were both standing on front of car and at latches I got off of car to throw the latches, so car could be switched back into 6th back entry.

Hendron did not get off when I did and was caught between car and rib.

There is only about 5 or 6 ft. of clearance from the latches of back switch after a car has gone over to jump off, that was dug to put the switch in, and it was this that caught Hendron between it and front end of car.

I shouted to Engineer on hoist as soon as I had thrown switch on latches, but he did not hear me.

(Signed) James Daugherty.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No. 122

Sup'ts No. _____

Name of Person injured, Nicholas Hendron
Occupation, Pipeman's Helper
Date of Accident, August 4 1904 Time 10 o'clock P. M.
Location, Cumberland Mine No. 2 Entry No. 5 Manway Room No. _____
If not injured in Mine, state where, _____

Name of Mine Supt. Jas. Daugherty Name of Mine-Forman, J. H. Davies
Age of Person injured, 43 years Married or Single Single
What Family, if any, _____
How long in employ, of Co., July 27, 1904 Condition of Life or Circumstances, (Port Richmond Phila. Pa.)
Name and address of nearest living Relative, Wm. Hendron 2638 Belgrade St.
Was he an efficient man, Yes Was he temperate, Yes.
Where and in whose charge left, _____
Name of Physician called, if any, Dr. G. R. Gilbert.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

hip. Contusion in region of left

Released

Cause, Nicholas Hendron had been helping James Daugherty take Electric Sinkers pump out of South return air course, No. 2 Mine. They had pumps loaded in car and both were riding up on car. James Daugherty got off of car at entry, but, Hendron stayed on, not knowing that he was in any danger, and engineers on sinker hoist pulled car too fast and caught Hendron between rib and car.

(Signature)

J. H. Davies

Date

Title,

M. M.

STATEMENTS OF WITNESSES.

Cumberland, Ky.
July 27, 1904.

I, August Mustinen, am employed as a miner, working in mine No. 2 Cumberland, Room No. 1, 6th south entry, on July 27, 1904. I was working with my partner Matt Turkana. He had fired 3 or 4 shots, the last one about 11:30 in the morning and about 11:30 in the afternoon my partner Matt Turkana, went back in the room and lit the gas, burning himself about the hands and face.

(Signed) August Mustinen.

REPORT OF PERSONAL INJURY.

Mine No. 123

Sup'ts No.

Name of Person injured, Matt Turkanen
 Occupation, Miner
 Date of Accident, July 27th 1904 Time 1 o'clock P. M.
 Location, Cumberland, Wyo. Mine No. 2 Entry No. 6 South Room No. 1
 If not injured in Mine, state where,

Name of Mine Supt. Jas. Needham Name of Mine Foreman, M. J. Blake.
 Age of Person injured, 37 years Married or Single Married
 What Family, if any, Wife and 2 children
 How long in employ, of Co., 8 or 10 mos. Condition of Life or Circumstances,
 Name and address of nearest living Relative, Cumberland, Wyoming.
 Was he an efficient man, Yes Was he temperate, Yes.
 Where and in whose charge left, Alex. Bakka.
 Name of Physician called, if any, Dr. Lyman.

Name and P. O. Address of Witnesses.

August Mustinen
 Cumberland, Wyo.

Nature and extent of Accident.

Burn of hands and arms,
 also external of right ear.

Released

Cause,

He had fired 3 or 4 shots in the face of his room, the last one about 11:30 A. M. and did not go back in his room until 11:30 in the afternoon when he lit the gas burning himself. The room was driven up about 25' from Entry and was bratticed in about 8 or 10 feet from the face and was about 12' wide.

(Signature)

M. J. Blake.
 M. Foreman.

Title,

Date

REPORT OF PERSONAL INJURY.

Mine No.

124

Sup'ts No.

Name of Person injured, ..

Occupation, ..

Date of Accident, ..

Location, ..

If not injured in Mine, state where, ..

190 4 Time ..

Mine No. 7

Entry No. 27

Room No. 9

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 Foreman, ..

Married or Single ..

Condition of Life or Circumstances, ..

Was he temperate, ..

Name and P. O. Address of Witnesses.

Nature and extent of Accident, ..

Index finger of right hand bruised

Released

Cause, ..

Was engaged as a miner and while loading a car of coal was in the act of putting a large piece of coal on car when it broke and caught his finger between coal and car, and in this manner received the injuries above described. He worked one week after the injury.

Idle two weeks before consulting doctor.

Went to hospital one month after receiving injury.

(Signature)

John L. Dykes.

Title,

Mine Foreman.

Date

STATEMENTS OF WITNESSES.

On the 2nd day of August
one old man called Joe had
a car off the track in 37.
room in 4 entry No. 10 mine.
Joe and his partner and myself
could not lift the car on the
track, so I told the men to look
out and I would try and
put the car on with the horse.
I got the horse and told the
men to look out again, and
then told horse to go, he pulled
and the end of car went from
one side of the track to the
other, and caught the old
man between car and a prop.

Aug 5th, 1904.

(Signed) James M. Cormick

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

125

Mine No.

Sup'ts No.

Name of Person injured, *Joe Frelik*
Occupation, *Loader*
Date of Accident, *August 2nd 1904*
Location, *Rock Springs*
If not injured in Mine, state where,

Time *10 o'clock P.M.*
Mine No. *10* Entry No. *4* Room No. *37*

Name of Mine Supt. *Geo. L. Black* Name of Mine Forman, *J. H. Paterson*
Age of Person injured, *54 years* Married or Single *Single*
What Family, if any,

How long in employ, of Co., *3 years* Condition of Life or Circumstances,

Name and address of nearest living Relative, *Anton Justin, Friend.*
Was he an efficient man, *Yes* Was he temperate, *Yes.*
Where and in whose charge left, *Geo. Taucher*
Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Badly squeezed through shoulders and slight cuts about P. ear.

Released

Cause,

He was running a loaded car out of room. It jumped the track at first switch and when they put one end on track the other went up against the ribs and they could not lift it. The driver hooked on his mule and told men to stand back. The mule pulled and driver lifted at same time throwing the car on other side of the track, catching Joe Frelik between car and prop causing injuries.

Date

(Signature)

J. H. Paterson.

Title,

M. F.

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,

190 4 Time

Mine No. 1

Entry No.

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 or Single

Condition of Life or Circumstances,

Was he temperate,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left thigh slightly bruised.

Released

Cause,

While riding trip on east slope, trip jumped track throwing him against rib of slope, slightly bruising his left thigh.

(Signed) John Rainey.

(Signature)

H. B. Fag.

Title,

Asst. Mine Supt.

Date

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

127

Mine No.

Sup'ts No.

Name of Person injured, *John Tunkari*

Occupation, *Drum*

Date of Accident, *July 28th*

Location, *Hanna, Wyo*

If not injured in Mine, state where,

190 *4* Time *11:20* A. M.

Mine No. *One*

Entry No.

Room No.

Name of Mine Supt. *E. S. Brooks*

Age of Person injured, *17* years

What Family, if any,

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

Name and address of nearest living Relative, *Gus Tunkari, Father, Hanna,*

Was he an efficient man, *Yes*

Where and in whose charge left,

Name of Physician called, if any, *Dr. J. C. Hammond.*

Name of Mine Forman, *Joe Burton*

Married or Single *Single*

Condition of Life or Circumstances,

Was he temperate, *Yes.*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Left hip slightly bruised.*

Released

Cause, *While coupling up last car on to trip, bumped the last car up and coupled the car when the trip came back off the block, catching him between the loads and empties injuring his hip slightly.*

Signed *John Tunkari.*

(Signature)

Joe Burton

Title, *Mine Foreman.*

Date

STATEMENTS OF WITNESSES.

Danna, Wyoming
Aug. 15th, 1904.

Statement of M. U. Maki:-

I was working in 61 room
20 entry, with Otto Suomela when
at about 9 o'clock A. M. August
8th, 1904, while pulling a loose
piece of coal from face of
room, it rolled over on his
left foot.

(Signed) M. U. Maki.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

128

Mine No.
Sup'ts No.

Name of Person injured,

Occupation,

Date of Accident,

Location,

If not injured in Mine, state where,

Otto Suomela

Miner

August 8th

1904 Time

Mine No. 1

Entry No. 20

Room No. 61

9 o'clock A.M.

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,

E. S. Brooks

29 years

5 weeks

Yes

Yes

Dr. J. C. Hammond.

Name of Mine Foreman,

Married or Single

Joe Burton

Single

Condition of Life or Circumstances,

Was he temperate,

Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident.

Bruised toes on left foot.

Released

Cause,

Was pulling loose piece of coal from face of his room and it rolled over his left foot bruising his toes.

(Signed) Otto Suomela.

Date

(Signature)

Title,

Joe Burton

Mine Foreman

STATEMENTS OF WITNESSES.

Rock Springs, Wyo.
Aug 8th 1904.

This is to certify that J. Marui was employed as a miner in Mine No. 9 of The Union Pacific Coal Co. at Rock Springs on the 29th of July, 1904. He was firing a blast of coal. He has charged squibs several times, unsuccessfully, but the ^{blast} lighted and blasted some of the coal and he was too late in escaping and coal fell striking his right leg. He was removed to the Hospital.

(Signed) J. Aikawa
Agent & Interpreter

(Signed) G. Kakumuru.
Witness.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No.

129

Sup'ts No.

Name of Person injured,

J. Marui

Occupation,

Miner

Date of Accident,

July 29th

Location,

Rock Springs

If not injured in Mine, state where,

1904 Time 1:30 P.M.
Mine No. 9 Entry No. 5 Room No. 29

Name of Mine Supt.

Foreman Jos. Soulsby
25 years

Age of Person injured,

Name of Mine Foreman,

Married or Single

Single

What Family, if any,

How long in employ, of Co., 6 months

Name and address of nearest living Relative,

Condition of Life or Circumstances,
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,

R. H. Reed.

Name and P. O. Address of Witnesses.

Nature and extent of Accident.

Right leg fractured.

Cause,

He was putting off a blast and several squibs missed and he put in one more and he thought it missed also and when he was going back to see it, it went off and threw the coal all around him and a piece hit him on his right leg, fracturing same.

(Signature)

Jos. Soulsby.

Title,

Mine Foreman.

Date

STATEMENTS OF WITNESSES.

Cumberland, Wyo. 8/19/04.

I went as usual on Wednesday A.M., Aug. 17th to the Fire Boss cabin before going into the mine. Mr. Bell, the Fire Boss, told me there was gas in my room and not to go in past the danger board until he ate breakfast, when he would go right down and put up some more brattice and clear the place. My partner and I went down and got ready for work, and as we had an empty car in the place we thought we could load it with what coal we had at the mouth of the room, but found we did not have quite enough to top the car. Mr. Bell got to our room by this time and was working on the brattice. I asked him if I could go up in the room and run down enough of coal to top the car and he told me I might go as far as the danger board and keep my light on the bottom. I went on up a little farther than where he told me, when I lit the gas and got burned.

(signed)

T. F. Martin

Witness to signature:

P. Erickson.

C O P Y

Cumberland, Wyo. 8/19/1904.

On Wednesday morning I went to work, I asked the Fire Boss if my place was all right; he said no there was gas in the room. He and my partner went down and loaded one car, then the Gas Boss came down. He went up part way the room with my partner. While loading the car I saw some flame and my partner came down and said he was burned.

(signed)

Simon Mustapich

THE UNION PACIFIC
REPORT OF PERSONAL INJURY
Name of Person Injured, *T. F. Martin*
Occupation, *Miner*
Date of Accident, *August 17, 1904*
Location, *Cumberland*
If not injured in Mine, state where
Name of Mine Supt., *James*
Age of Person Injured, *26*
What Family, if any,
Employer, of Co.,

STATEMENTS OF WITNESSES.

Cumberland, Wyo. 8/19/04.

I went as usual on Wednesday A.M., Aug. 17th to the Fire Boss cabin before going into the mine. Mr. Bell, the Fire Boss, told me there was gas in my room and not to go in past the danger board until after breakfast, when he would go right down and put up the board. My partner and I went down

Cumberland, Wyo. 8/18/1904.

Accident report of T. F. Martin, who got burned with fire damp in No. 1 Mine, Cumberland, Wyoming, August 17th, 1904.

I examined Room No. 56 on the 4th South level, Mine No. 1, Cumberland, Wyo. on the 17th of August about 6 o'clock A.M. and found 90 cubic feet of gas. I placed danger board in the room and told Mr. Martin and partner not to pass the danger board until I returned after breakfast and I would put some more brattice in his room. On returning after breakfast I found the gas had reduced to about 40 cubic feet instead of 90 as first reported. As Mr. Martin had an empty car in his room I told him he could load some coal but not to pass the danger board. Martin asked me if he could fill a little coal from around the danger board if he was to set his lamp on the floor. I told him yes, if he was to set his light down by the danger board, as he wanted a little coal to finish up his car.

The danger board was about 20 ft. from the face of the room. Mr. Martin, instead of sitting his light down by the danger signal, took his light in his hand and went up to the face of the room to sit it down on the floor at top of room 20 ft. past the danger board, he ignited the gas and got burned. I was at the time building brattice in his room about 40 ft. from the face of room when the gas ignited. I run to his assistance and found he was burned. He denied being up to the face of room, but I found his lamp at face of his room where he has dropped it when the gas ignited. His partner was loading car at the foot of his room when the accident occurred.

(signed)

Wm. Bell,

Fire Boss No. 1 Mine.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

130

Mine No.

Sup'ts No.

Name of Person injured, *J F Martin*

Occupation, *Miner*

Date of Accident, *August 17th*

Location, *Cumberland*

If not injured in Mine, state where,

190 *4* Time *8:00 a.m.*

Mine No. *1* Entry No. *4th* S. Room No. *5-6*

Name of Mine Supt. *James Neaham*

Age of Person injured, *26*

What Family, if any,

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

Name and address of nearest living Relative, *Abraham Erickson Friend*

Was he an efficient man, *Yes*

Where and in whose charge left, *Abraham Erickson*

Name of Physician called, if any, *Dr H Young*

Condition of Life or Circumstances,

Was he temperate, *yes*

Name and P. O. Address of Witnesses. *Wm Beel + Simon Mustafal*

Nature and extent of Accident,

Face and Hands Burned

Released

Cause, On examining the cause of the accident, I find that the fire boss told Martin there was gas in his room, but he wanted to get some coal to top a can he was loading. He got permission from the fire boss to go as far as the danger board and be careful to keep his light on the bottom. I find Martin went to the face of the room, lit the gas and was burned.

(Sgd) *Jm Faddies*
M. S

Date

(Signature)

Title,

STATEMENTS OF WITNESSES.

Mine No 2 Cumberland, Wyoming,
July 21, 1904

I, Philip Husar am employed at mines, working in mine No 2
On July 21st was working in 5th north entry No 3 room with Antono
Kilzer who was hurt. I did not see him when he was hurt but was work-
ing at the face of the room about 150 feet away from him.

After he was injured, I came down from the face of the room.
He told me a piece of coal had fallen off of the rib knocking him
against the ear cutting his little finger on his right hand.

(Sgd) Philip Husar.

THE UNION
REPORT OF

Name of Person
Occupation
Date of Accident
Location
If not injured

Name of Mine
Age of Person
What Family
How long in
Name and
Was he an
Where and
Name of Person

Name and

Nature and

4091/12/1

Working as
at 8 o'clock
from the
tip of my room
against the
and.

Witness

COPY

Cumberland, Wyo. 7/21/1904.

I, Anton Milner, am employed at Mine No. 2 working as
miner in Room 3, 5th North entry. On July 21st at about 8 o'clock
A.M. I was loading a car of coal at the bottom of my room from the
chute, when a piece of coal fell off from the north rib of my room
sliding down the chute, striking me and knocking me against the car,
breaking and cutting the little finger on my right hand.

(signed)

his

Antone (x) Milner

mark

Witness to signature:

M. J. Blake.

No 2

Antone

ut was work-

room.

ing him

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Antone Milner*Occupation, *Miner*Date of Accident, *July 21st*Location, *Cland*

If not injured in Mine, state where,

190 *4* Time *8:00 am*Mine No. *2*Entry No. *5* North Room No. *3*Name of Mine Supt. *James Neaham*Age of Person injured, *51 years*What Family, if any, *Wife + 3 children*How long in employ, of Co., *two + one halves*Name and address of nearest living Relative, *Cland*Was he an efficient man, *Yes*Where and in whose charge left, *With wife*Name of Physician called, if any, *Dr Lyman*Name of Mine Forman, *Jr Blake*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, *Little finger broken between 1st + 2nd joint and a laceration of Right hand**Released*

Cause, *He was loading a car of coal at the bottom of his room from the chute when a piece of coal fell from the north Rib of his room striking him and knocking him against the corner of the car he was loading, cutting and breaking his little finger on his right hand*

(Signature)

Jr Blake

Title,

Forman #2 Mine

Date

1

STATEMENTS OF WITNESSES.

Rock Springs Sept 6/04

The latch had become unfastened on door letting coal fall down on coupling. I put my hand between cars to try to couple them, forgetting to watch tip behind which it came down striking cars. I was working on catching wrist between bumpers breaking same. (Sgd) C.H. Nix.

Rock Springs Aug 24th 1904

Mr Geo. L. Black Supt

Dear Sir
While working on the dump at # 9 mine Aug 23rd with Mr. C.H. Nix, we had four cars above the tipples when the door on the 2nd car from the tipple came open so that Nix could not get the hook out. Another trip of 9, 2 cars came down & bumped the four standing on the dump catching Nix's arm between the bumpers of the cars. He had been warned a number of times before about getting his arms and legs between the cars and on this occasion I followed at him to look out but he paid no attention. (Sgd) Andrew Knudson.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

132

Mine No.

Sup'ts No.

Name of Person injured, C. H. Nix

Occupation, Dumper

Date of Accident, August 23rd 1904 Time 7:30 a m

Location, Rock Springs Mine No. 9

Entry No.

Room No.

If not injured in Mine, state where, On Dump

Name of Mine Supt. Geo L Black

Name of Mine Forman, T. A. James

Age of Person injured, 32

Married or Single

What Family, if any, —

How long in employ, of Co., two months

Name and address of nearest living Relative, Clarkdale Miss

Was he an efficient man, Yes

Was he temperate, Yes

Where and in whose charge left, Wyoming Gen'l Hospital

Name of Physician called, if any, R. H. Reed

Name and P. O. Address of Witnesses. Andrew Knudson,

Nature and extent of Accident, Right forearm crushed or bruised

Released

Cause, One of the car doors came open and while he was trying to uncouple the cars another trip came down and bumped the cars he was trying to uncouple, catching his arm between the buffers causing the above injury.

Yours Truly (Sgd) T. A. James
Outside formman

(Signature)

Date

1

Title,

Spring Valley Sept 30th 1904

To Whom it May Concern:-

This will certify that I, L. Rusimaki and employed as miner in mine #1 at Spring Valley, Wyoming. I was working to-day in Room #40 on #6 Entry with Anton Hakka. About eleven o'clock,

A.M. I was mining the coal when all at once, without giving any warning, the coal fell on me as I was working. I was sitting on my heels and when the coal fell, it knocked me over on a mining pick, and the pick cut me very deeply.

The coal also partly covered me up, bruising my back severely and slightly bruising and cutting my face and body.

The room is well timbered and the roof is good. I do not think anyone is to blame for the accident.

(Sgd) L. Rusimaki
His X Mark

Witnesses to Signature
E. J. Jensen M.D.
H. F. Hanson,

Spring Valley N.Y. Sept 3 4

To whom it may concern
This certifies that I Anton Hakka
was partner of L. Rusciniak and was
in Room 40 on No 6 Entry in Mine
No 1 at Spring Valley N.Y. At about
11 o'clock A.M. today,
I had been down at the Entry Road
a Car and had just gone up to the
face and started shovelling Coal in
the Chute and Leander was Mining
or Undercutting at this time
He had been driving 2 Wedges in the
Coal trying to get it down but failed
Leander then started Mining again
and when so engaged the Coal fell
and hurt him
We have been told several times to
Spray our Coal by the Mine Officials
but failed to comply
Our place is in safe condition and we
ourselves were to blame for accident

Anton Hakka.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

133

Mine No.

Sup'ts No.

Name of Person injured, *L Ruskimaki*

Occupation, *Miner*

Date of Accident, *Sept 3rd*

Location, *Spring Valley*

If not injured in Mine, state where,

190 *4* Time *11 am*
Mine No. *1* Entry No. *6*

Room No. *48*

Name of Mine Supt. *Alex Briggs*

Name of Mine Forman,

Age of Person injured, *30*

Married or Single *Married*

What Family, if any, *wife*

How long in employ, of Co., *Nine months* Condition of Life or Circumstances

Name and address of nearest living Relative, *Mrs L Ruskimaki*

Was he an efficient man, *Yes*

Was he temperate, *Yes*

Where and in whose charge left, *Wyo Genl Hospital*

Name of Physician called, if any, *E J Green's one*

Name and P. O. Address of Witnesses.

Antone Hakka

Nature and extent of Accident, *Lacerated Buttocks & Bruised back*

Cause, *The above mentioned was mining or undercutting his coal, when it fell without giving warning, knocked him down on a miner's pick which cut him bad. He was also bruised by the coal hitting him. He has a good place and it is well timbered. This man did not spray his coal with props as he ought to, and as he has been repeatedly told to do. Just two days ago, I told him to be careful and watch out for himself, and when coal got loose to take it down, and not run any chances with it. He does not blame anyone for his accident.*

Yours truly
(Sgd.) Alex Briggs
Mine Supt.

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Spqbal Sept 10-04
To whom it may Concern: -
This certifies, that I, Otto Root
was working yesterday in room 43 on the
5th entry of the Spg Valley Wyo. Mine #1
about 9 o'clock a.m.

I was picking down coal from the face
which was loose with a piece of Rock. I
could not get it all down at once so I
tried to take the coal from under the rock
and while doing so, the rock fell and hit
me on the shoulder & back, bruising
me considerably.

My room is well timbered and free
from gas & perfectly safe. I can not
blame any person for my accident.
(Sgd) Otto Root.

Spqbal Sept 9-04
To whom it may Concern: -
This certifies that I, Leander Johnson am
engaged as a miner in mine #1 at
Spring Valley, Wyo and that I was working
with Otto Root to-day as partners.
about 9:00 o'clock a.m. I was mining
under the coal while Otto was picking
the coal from the rock roof and
after taking it out, the rock fell which is
about 6" thick fell and hit him &
also slid down and hit the props
next to the face and knocked it out.

When taking the coal down he went under the
rock to do so. He saw the crack in the
rock before he took the coal from underneath.
but could not get it down so he
took the coal down first & then intended
taking the rock down but it fell on
him before he got started on it.

The room is well timbered, free from gas &
safe.
(Sgd) Leander Johnson.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

134

Mine No.

Sup'ts No.

Name of Person injured, *Otto Root*
Occupation, *miner*
Date of Accident, *Sept 9*
Location, *Spokane*
If not injured in Mine, state where,

190 *4* Time *9:00 am*
Mine No. *1* Entry No. *5* Room No. *43*

Name of Mine Supt. *Alex Briggs*
Age of Person injured, *33*
What Family, if any, *One sister only; father & mother dead*
How long in employ, of Co., *2 months*
Name and address of nearest living Relative, *David Pellafos - Virginia Mine*
Was he an efficient man, *yes*
Where and in whose charge left, *Alex Johnson - in boarding house*
Name of Physician called, if any, *Dr. Johnson*
Name and P. O. Address of Witnesses, *Leander Johnson*

Nature and extent of Accident, *Bruised Spinal Column and other slight contusions.*

Cause, *The above mentioned was taking down coal from below a piece of falling rock which was loose + cracked and which he had been trying to take down and could not get it.*
In taking down the coal he went under the rock and ran the chances of the rock falling on him, which it did. He was to blame himself in not taking down the rock as he took down the coal. The place is well propped, free from gas and perfectly safe.
(sgd) Alex Briggs
m. p.

Date

(Signature)

Title,

STATEMENTS OF WITNESSES.

Cumberland 9/10/04

I, Allan Palm, am employed as miner working in mine #2 Room 12 - 4th South entry. On above date I was repairing the chute in my room + was working about 10 feet from the face of the room, when a piece of coal fell from the face of the room, striking a piece of coal lying above me. It slid down the room striking me on the leg + foot.

(Sgd) Allan Palm

Cumberland 9/7/04

I, the undersigned am employed as miner, working in #2 mine Room 12, 4th South entry. On above date I was working with my partner, Allan Palm straightening up our chute, when a piece of coal fell at the face of the room, knocking another piece of coal + sliding it down the room catching my partner, and bruising his right leg at ankle joint.

(Sgd) Victor Mustanen.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Allan Palmer

Occupation, ~~Cumberland~~ Miner

Date of Accident, Sept 7

Location, Cumberland

190 4
Mine No. 2

Time 12:30 a.m.

Entry No. 4 South Room No. 12

If not injured in Mine, state where,

Name of Mine Supt. James McMahon

Age of Person injured, 32

What Family, if any,

How long in employ, of Co., two months

Condition of Life or Circumstances,

Name and address of nearest living Relative, Claud Wyo

Was he an efficient man, Yes

Where and in whose charge left, Wyo Genl Hospital Rock Springs

Name of Physician called, if any, J. R. Gilbert

Was he temperate, Yes

Name and P. O. Address of Witnesses.

Victor Mustanen

Nature and extent of Accident,

Right ankle bruised & sprained

Cause, He was working about 10 ft from face of his room repairing the chute, when a piece of coal fell from the face of his room, striking another chunk of coal and sliding it down against him

(sgd) M J Blake

M. 7 - #2

(Signature)

Date

1

Title,

Statement of Rinty Infante

I Gust Olson was working nights in
 * One Mine taking down Material On
 the Morning of the 10th of May about
 2 O'clock A.M. we were coming up the
 Slope with both trips we were going
 to switch some loads into 37 Entry Both
 trips were coming up together Although
 one trip preceded the other a little
 I was on the trip that was in the lead
 and when we came to 37 Entry I jumped
 off between the tracks in jumping
 off I stepped into a hole and before
 I could get myself balanced the other
 trip struck me and knocked me
 down and in falling my Right Hand
 got on the Rail and was torn I went over
 my hand there was no one to blame
 for the accident

Gust Olson
 I verify the above statement is correct
 Chas Johnson Emil Bergquist

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

136

Mine No.
Sup'ts No.

Name of Person injured, *Gush Olsen*
Occupation, *Night Mat'l Man*
Date of Accident, *May 10*
Location, *Rock Springs*
If not injured in Mine, state where,

1904 Time *2:00 am*
Mine No. *one* Entry No. *Slope* Room No. *at 37 Entry*

Name of Mine Supt. *L. L. Block*

Name of Mine Forman, *D. G. Jones*
Married or Single *single*

Age of Person injured, *—*
What Family, if any, *—*
How long in employ, of Co., *2 years*

Name and address of nearest living Relative, *Brother Morten Olsen, Rock Springs*
Condition of Life or Circumstances,
Was he an efficient man, *Yes* Was he temperate, *yes*
Where and in whose charge left, *Wyo Gen'l Hospital*
Name of Physician called, if any, *Dr R. H. Reed*

Name and P. O. Address of Witnesses. *Chas Johnson and Emil Bergquist*

Nature and extent of Accident, *Lost two fingers on R. hand crushed.*

Released

Cause, *Gush Olsen, Emil Bergquist & Chas Johnson were taking down material in #1 mine at night about two o'clock a.m. on the morning of the 10th of May. They were coming up with some cars to switch them in 37 entry. Both trips were coming up at the same time, altho one preceded the other a little. Olsen was on the trip that was in the lead and when opposite 37 entry he jumped off between the two tracks & was returning around when the other trip struck him and knocked him down, some of the cars passing over his right hand, causing aresaid injuries*
(Sgd) D. G. Jones
Mine Forman

(Signature)

Date

Title,

Rock Springs, Wyo. Sept., 12th., 1904

Mr. T. A. James,

Outside Foreman, U.P. Coal Co.,

Rock Springs, WYO.

Dear Sir:-

Referring to your request of some days since for a report of the accident to my hand would say, On the ~~next~~ afternoon of Tuesday the 16th., of August, I was marking pickets for the fence then being built on 4th., Street.

I think it was between 4 and 5 o'clock that my left hand ~~slipped~~ slipped in some manner and the two middle fingers of my left hand were caught by the knives of the planer and cut off close to the second joint I don't know if there were any witnesses. I was not looking for any witnesses about that time.

Yours Respectfully,

(Signed) W.B. Connor

Copy.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

137

Mine No.

Sup'ts No.

Name of Person injured, *W B Connor*
Occupation, *Carpenter*
Date of Accident, *Aug 16*
Location, *Rock Springs*
If not injured in Mine, state where, *Outside; Car Shop.*
Name of Mine Supt. *L B Black*
Age of Person injured, *40*
What Family, if any, *four*
How long in employ, of Co., *About 3 yrs as Carpenter*
Name and address of nearest living Relative, *Wife, Rock Spgs*
Was he an efficient man, *yes*
Where and in whose charge left, *Wysville Hospital*
Name of Physician called, if any, *R H Starnes Reed*
Name and P. O. Address of Witnesses.

Nature and extent of Accident, *3rd & 4th fingers on left hand cut off at 2nd joint*

Released

Cause, *While using the planer to get out some pickets, he had his hand caught in the knives of the planer, with above results*
(Sgd) J A James
Outside Foreman,

(Signature)

Date

Title,

Rock Springs 9/12/04
 John Gedrick makes this statement
 "I was running car down room. The
 car jumped the track & fell on my
 foot, causing injuries. No one to blame
 (Sgd) John Gedrick."

Rock Springs 9/12/04
 Frank Jupaue makes this statement
 "I was working with John Gedrick on
 the 17th day of August in 36 room.
 3 Entry #10 mine. We were running a
 loaded car down the room. The car
 ran too fast & jumped the track &
 came down on his foot, causing
 injuries. (Frank Jupaue."

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.

1904 Time

Mine No. 10

Entry No. 3

Room No. 36

Name of Mine Forman,

Married or Single

Condition of Life or Circumstances,

#4 Town

Was he temperate,

Nature and extent of Accident,

Great toe on left foot crushed and lacerated.

Released

Cause,

He was loading in 36 room and when he run his car down, it run too fast and he could not stop it and it jumped the track and came down on his foot causing injuries. No one to blame.

(Sgd) J. W. Patterson.

(Signature)

Date

Title,

At 9th am, Monday, Aug 29th 1904 while un-
loading a soft section of smoke stack from
a truck, Gust Johnson, a laborer at the East
Outcrop of Hanna Mine Mt. had his right foot
injured by the fall of a piece of wood back
while lifting the smoke stack. The two men
on Johnson's end of the piece, released their
hold without warning, the scantling striking
Johnson at the juncture of the right leg and
foot.

Witness

James E. Lee
Foreman, East Outcrop.

Hanna Sept 5th 1904

Statement of Gust Johnson

While helping to unload Boiled Slack at
East outcrop Hanna Mine Mt. at about
9:20 A.M. Aug 29 1904 slack fell on my right
foot.

Witness

H. J. Johnson

Miner Slack

Gust Johnson

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Ernest Johnson*Occupation, *laborer*Date of Accident, *August 29th*Location, *Hanna, Wyo*If not injured in Mine, state where, *East Outcrop Hanna*190 *4* Time *9:30 am*Mine No. *—* Entry No. *—* Room No. *—*Name of Mine Supt. *E S Brooks*Age of Person injured, *30*What Family, if any, *—*How long in employ, of Co., *Two months* Condition of Life or Circumstances, *—*Name and address of nearest living Relative, *Ernest Johnson*Was he an efficient man, *Yes* Was he temperate, *Yes*Where and in whose charge left, *Dr J C Hammond*Name of Physician called, if any, *—*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Bruised Right foot and ankle**Released*

Cause, *Was helping to unboard boiler stack at East Outcrop Hanna mine #1 about 9:30 am Aug 29-1904. Stack fell on right foot bruising foot and ankle*

Witness *W F Chambers*
mine clerk.

Rob Rae
Asst mine Supt.

Hanna Sept 14-04

Statement of Oscar Murdo: -

I was working as track layer on Aug 26/04 in 22 entry at 17 room. I was holding the chisel while my partner Leonard Aikara was striking the chisel. We were cutting a rail for the switch. It was a 20th rail as my partner struck the chisel a piece from the head of the chisel flew off and struck me in the eye & stuck there. I went to the doctor just as soon as I came out of the mine.

W B Rae
Witness

(Sgd) Oscar Murdo.

Hanna Sept 17-04

Statement of Leonard Aikara, Trackman.

While cutting a rail at 17 room, 22 entry Hanna #1 Mine on 26th of August/04 a piece of the chisel which Oscar Murdo was holding flew off when I struck it with the hammer & struck him in the eye.

E S Brooks
Witness.

(Sgd) Leonard Aikara

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

140

Mine No.

Sup'ts No.

Name of Person injured, Oscar Murdo
Occupation, Track Layer
Date of Accident, August 26th
Location, Hanna
If not injured in Mine, state where,

1904 Time 4:00 PM
Mine No. 1 Entry No. 22 Room No. 17

Name of Mine Supt. E. S. Brooks

Name of Mine Foreman, Joe Burton
Married or Single married

Age of Person injured, 24

What Family, if any, wife

How long in employ, of Co., one year Condition of Life or Circumstances,

Name and address of nearest living Relative, wife Hanna

Was he an efficient man, Yes Was he temperate, Yes

Where and in whose charge left, J. Hammond

Name of Physician called, if any, do

Name and P. O. Address of Witnesses, Leonard Oikara

Nature and extent of Accident, Piece of steel in eye.

Released

Cause, Oscar Murdo, Track man while fixing switch
at 17 Room 22 entry was cutting a rail when
a piece flew from chisel and caught
him in left eye, striking same.

Joe Burton
mine foreman

Correct
E. S. Brooks
mine Supt.

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Cumberland, Moys 9-20-04

I, Jhos Lally, am employed as miner in Mine #1, Boone 19, 5th North entry, about 4 P.M. on Sept 19th I was walking up my room to get down enough coal to finish loading a car. When I was just below the 1st crosscut a small piece of rock or coal fell from the roof & struck me on the head. I fell into the chute & slid down onto the car & then to the floor of the entry. There was no one with me at the time

(Sgd) Jhos Lally

Witness to Signature

J M Paddies,

See letter to James Meadham 4/23/04

Page 295.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

142

Mine No. _____
Sup'ts No. _____

Name of Person injured, *Thos Lally*
Occupation, *Miner*
Date of Accident, *Sept 19*
Location, *Clair*
If not injured in Mine, state where, _____

190 *4* Time *4:00 P M*
Mine No. *1* Entry No. *5 N* Room No. *19*

Name of Mine Supt. *James Nuham* Name of Mine Foreman, *Jm Faddies*
Age of Person injured, *29* Married or Single *Married*
What Family, if any, *one*
How long in employ, of Co., *About one year* Condition of Life or Circumstances,
Name and address of nearest living Relative, *M Lally (Son)*
Was he an efficient man, *Yes* Was he temperate, *Yes*
Where and in whose charge left, *Remained at his home*
Name of Physician called, if any, *Dr J H Young*
Name and P. O. Address of Witnesses. *None*

Nature and extent of Accident, *Scalp wound*

Released

Cause, As to the cause of the accident I am unable to give any information, more than is stated on the injured man's statement which reads in part that he was walking up the room & was struck by a piece of coal or rock and he slid down the chute onto the car, and then to the floor of the entry. I examined the room from top to bottom, but was unable to find where any rock or coal had fallen and at the time of my examination the roof was in perfectly safe condition.

(Sgd) *Jm Faddies*, mine foreman

Date

(Signature)

Title,

STATEMENTS OF WITNESSES.

Rock Springs Wyo 9/21/04

Statement of John Bogstoy who was injured
in #8 mine Sept 15-04 about 7:30 am
#1 Entry #34 room.

I was running a loaded car down
34 room to the Entry. The coal on the
car struck a prop and I caught my
right hand against the car
injuring 2" & 3" fingers. John Bogstoy

The above statement is correct

Fred Clemenshar,

REPORT OF PERSONAL INJURY.

Mine No. 143

Sup'ts No. _____

Name of Person Injured, John BogstoyOccupation, LoaderDate of Accident, Sept 13thLocation, Rock Springs

If not injured in Mine, state where, _____

190 4 Time 7:30 amMine No. 8Entry No. 1Room No. 34Name of Mine Supt. L. L. BlackAge of Person injured, 34What Family, if any, Wife + 4 childrenHow long in employ, of Co., about 11 mo Condition of Life or Circumstances, _____Name and address of nearest living Relative, friend) V. Staric, Rock Spgs WyoWas he an efficient man, YesWhere and in whose charge left, Wyo Genl HospitalName of Physician called, if any, Dr Reed

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, 2" + 3" fingers of Right hand injured.Released

Cause, The above injuries were caused by fingers being caught between the coal ^{on the} car and a prop, while running a loaded car down the room to the entry. The coal was loaded over the side of the car or the injury would not have occurred

(sgd) sm Elias
m. F.

Date

(Signature)

STATEMENTS OF WITNESSES.

Cumberland Wyo 9/10/04

I, Allan Palu, am employed as miner, working in mine # 2, Room 12, 4th South entry. On above date, I was repairing the chute in my room, when a piece of coal fell from the face of the room, striking a piece of coal which was lying above me. It slid down the room striking me on the leg & foot (Sgd) Allan Palu.

Claud Wyo. Sept. 7-1904.

I, the undersigned and employed as miner working in Mine # 2, 12 room 4th south entry. On above date I was working with my partner, Allan Palu, straightening up our chute, when a piece of coal fell, at the face of our room, knocking another piece of coal, & sliding it down the room catching my partner & bruising his right leg at the ankle joint.

(Sgd) Victor Mustanen

Witness to Signature

M J Blake,

REPORT OF PERSONAL INJURY.

Mine No. 144

Sup'ts No. _____

Name of Person injured, Allan PalmerOccupation, MinerDate of Accident, September 7Location, Cumberland

If not injured in Mine, state where, _____

190 4 Time 12:30 P M
Mine No. 2 Entry No. 4 S Room No. 12Name of Mine Supt. James NeedhamAge of Person injured, 32

What Family, if any, _____

How long in employ, of Co., Two monthsName and address of nearest living Relative, Claud WyoWas he an efficient man, YesWhere and in whose charge left, Wyoming Fuel Hospital,Name of Physician called, if any, E. R. J. GilbertName and P. O. Address of Witnesses, Victor MustanenNature and extent of Accident, Right ankle bruised + sprainedReleased

Cause, He was working about 10 feet from the face of his room repairing the chute when a piece of coal fell from the face of his room, striking another chunk of coal & sliding it down against him

(Sgd) M J Blake
Foreman # 2

Lukes Plat accident on Aug 23/04
No 9 mine.

Blaster's Statement

I timbered the Room before the men went into it & considered it was safe to work in but not knowing there was a fresh hole in the roof. It was as slick as glass where the rock fell out between the props & broke the cappiece that was on the prop under the rock. It gave no warning there were props & caps in the room close by. There was no one to blame for the accident

(Sgd) J. E. Strom

Copy

No 9 Mine Aug 23, 1904

Accident report of Lukes Plat

Witness statement

I, and my partner was loading coal with him in 21 room 6 entry, 2 plane on the 23rd day of August about 7:30 o'clock when he was hurt with a piece of rock which fell from the roof. He was loading a car with coal on the upper track in the room and me and my partner was loading on the lower track in the same room. I told him to sound the roof. He said after I load this car and he got the car about loaded when the rock fell and caught him on the head and legs and broke his right leg. We took the rock off him and brought him outside of the mine and they took him to the Wyo. general Hospital. There was no one to blame for the accident. It was a little carelessness on his part.

(Sgd) John Orosan

+ Mat Javornik

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Lukes Plat*Occupation, *Louder*Date of Accident, *August 23rd*Location, *Rock Springs*

If not injured in Mine, state where,

190 *4* Time *7:30 am*Mine No. *9*Entry No. *6*Room No. *21*Name of Mine Supt. *L. L. Black*Age of Person injured, *47*What Family, if any, *4*How long in employ, of Co., *2 days*Name and address of nearest living Relative, *Rock Springs*Was he an efficient man, *Yes*Where and in whose charge left, *Wyo Genl Hospital*Name of Physician called, if any, *R. H. Reed*Name of Mine Forman, *Jos Soulesby*Married or Single *married*

Condition of Life or Circumstances,

Was he temperate, *yes*

Name and P. O. Address of Witnesses.

John Brown
Mar Javornik

Nature and extent of Accident,

Head cut & legs bruised.
*Right leg broken**Released*Cause, *He was loading a car of coal when a piece of rock fell from the roof & caught him on the head & legs, cut his head & broke his right leg. There was no one to blame for the accident.**(Sgd) Jos Soulesby**Mine Forman.**There was plenty of props & caps in the room close by.*

(Signature)

Date

1

Title,

REPORT OF PERSONAL INJURY.

Mine No. _____

Sup'ts No. _____

Name of Person injured, *J. H. Ross*Occupation, *miner*Date of Accident, *Sept. 19th*Location, *Rock Springs*190 *4*, Time *11 A.M.*Mine No. *7*Entry No. *3*Room No. *203*Name of Mine Supt. *Geo. L. Black*Age of Person injured, *24*What Family, if any, *Wife*How long in employ, of Co., *About two months* Condition of Life or Circumstances, _____Name and address of nearest living Relative, *Mrs. J. H. Ross, Rock Springs, Wyo.*Was he an efficient man, *No.*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *R. Harvey Reed, Asst.*

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, *nose cut, and left eye cut by rock falling on his face**Released*

Cause, *Was engaged as a miner, had blasted the roof while blasting the coal by carelessly placing the holes to near the roof. Rock fell all across the room at the time blasting was done, on the day of the accident and he was putting this rock back out of the way of loading coal and at the same time knowingly worked under loose rock, which had been made loose by blasting and while working at the back of his room, a thin piece of rock about 3 feet long, and 3 feet wide and from 1" to 2" in thickness fell and struck him in the face causing the injuries above described. Plenty of timber was in the room and convenient to saw.*

We the undersigned, certify the above to be correct

(Signed) John L. Dykes #7 Mine Foreman

J. H. Ross Injured man
Wm. Lompton, Witness
 (Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Statement of party injured.

I, Erik Saari, was working in No.1 Mine at Rock Springs for U.P.Coal Co., along with Mikko Partanen. I was mining in the cross cut of room 73, entry 45, when a small piece of coal flew from the point of the pick and struck me in the right eye.

There was no one to blame for the accident.

(Signed) Erik Saari

Witness

Thos. Norman

THE U
REPORT

Name of Person
Occupation
Date of Acc.
Location
If not injured

Name of Mine
Age of Person
What Family
How long in en
Name and add
Was he an eff
Where and in w
Name of Physic

Name and P. O.

Nature and exten

En
in
of
piece
struck
injure

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No. 1472
Sup'ts No.

Name of Person injured, Erik Saari
Occupation, Miner
Date of Accident, June 6th 1904 Time 2 P.M.
Location, Rock Springs Mine No. 1 Entry No. 45 Room No. 73
If not injured in Mine, state where, _____

Name of Mine Supt. Lev L. Black
Age of Person injured, 38
What Family, if any, six
How long in employ, of Co., 2 years
Name and address of nearest living Relative, Hukki Knoppola, Rock Springs, Wyo.
Was he an efficient man, yes
Where and in whose charge left, Yes
Name of Physician called, if any, Hyonung General Hospital.
Dr R. H. Reed

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Blow on the left eye

Released

Cause, Erik Saari was mining in Room 73 in Entry 45, on the 6th day of June 1904, when a piece of coal from the front of the pick struck him in the left eye causing aforesaid injuries

D. G. Jones, M. F.

STATEMENTS OF WITNESSES.

Rock Springs Wyo. Sept 26th, 1904

I, Thomas McQuillan was with William Iredale on the 9th day of August 1904 when he had his right foot crished by a piece of box car loader falling on it.

(Sgd) Thomas McQuillan

Rock Springs Wyoming. Sept 26th, 1904

Mr. Ge .L.Black, Supt.

Rock Springs, Wyoming.

Dear Sir:--

We the witnesses to accident of William Iredale was unloading a stand for a box car loader out of a wagon when it upset and fell on his foot.

(S gd) Thomas McQuillan

Bruno Stebner

COPY

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

148

Mine No.

Sup'ts No.

Name of Person injured,

William Medale
Keeper

Occupation,
Date of Accident,

August 9th 1904 Time 8 A.M.

Location,

Rock Springs

Mine No. 8

Entry No. —

Room No. —

If not injured in Mine, state where,

At Box Car Loader #8 mine.

Name of Mine Supt.

Geo. L. Black

Name of Mine Forman,

Robt Muir
Married or Single married

Age of Person injured,

28

What Family, if any,

4

How long in employ, of Co.,

7 years

Name and address of nearest living Relative,

Condition of Life or Circumstances,

Was he an efficient man,

Yes

Was he temperate,

Rock Springs, Wyo.
Yes

Where and in whose charge left,

Hospital

Name of Physician called, if any,

Dr. Reed

Name and P. O. Address of Witnesses.

Thos. McQuillan, and Bruno Stebner
both of Rock Springs, Wyo.

Nature and extent of Accident,

Cut on right foot

Released

Cause,

He was unloading a piece of box car loader, when it upset and fell on his foot

Robt Muir

Master Mechanic

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

July, 6th - 1904.

I, Frank Gevec, was working in Room 60, in Entry 40 in No 1 mine on the 5th day of July, 1904. I was picking up some coal ~~to~~ put it in the car when a small piece of coal burst from the face of the room and struck me on the 2nd finger of the left hand.

(Signed)

Frank ^{his} _{mark} Gevec

Witness

John Mox

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No. 1492

Sup'ts No.

Name of Person injured,

Frank Gevec

Occupation,

miner

Date of Accident,

July 5th

1904 Time

9 A.M.

Location,

Rock Springs

Mine No.

1

Entry No.

40

Room No.

60

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Name of Mine Forman,

D. L. Jones

Age of Person injured,

44

Married or Single

Single

What Family, if any,

3 mos.

How long in employ, of Co.,

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
Dr. R. H. Reed

Was he temperate,

General Hospital

Yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Small cut on the third finger of right hand.

Released

Cause, Frank Gevec and his brother worked in Room 60 in Entry 40, in #1 mine on the 5 day of July, 1904. They were loading a car at the face of the room. Frank was picking up a chunk of coal to put on the car when a small piece of coal bursted from the face of room and struck him on the 3rd finger of right hand cutting a small hole in it.

D. L. Jones
M. F.

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Rocksprings, 5/30/1904.

I, Sam Halakola, was working in Room 107 in No. 1. mine on the 29th day of May, 1904. I was taking down some loose coal at the face of the room when a large piece fell on my foot.

(Signed)

Sam Halakola

Witness

A. Anderson

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

1502

Mine No.

Sup'ts No.

Name of Person injured,

Sam Halakola
miner

Occupation,

Date of Accident,

May 29th
Rock Springs

1904 Time

3 P.M.

Location,

If not injured in Mine, state where,

Mine No. 1

Entry No. 42 Room No. 107

Name of Mine Supt.

Geo. L. Black
32

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, J. G. Jones

Married or Single

Single

Condition of Life or Circumstances,

2 mos.

John Maki Rock Springs, Wyo.

Yes

Boarding House

Name and P. O. Address of Witnesses.

Nature and extent of Accident,
Coal

Right foot bruised by falling

Released

Cause, Sam Halakola was working in Room 107
in Entry 42, in above mentioned mine
on the 29th of May about 3 o'clock P.M.
He had just fired a blast, and was in the
act of taking down some loose coal, when
a piece of coal fell on his right foot.

J. G. Jones
M. F.

(Signature)

Date

STATEMENTS OF WITNESSES.

Rock Springs Wyoming Sept 23rd, 1904

While I was working in my room #36, 4 entry No 9 mine, the rock fell down to my back and injured 12th day of Sept.

Yours truly,

x T Takahoshi

Check 150 #9 mine

Witness H Nishiyama

Japanese Agent

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

J. Takahashi

Occupation,

Miner

Date of Accident,

Sept 12th

Location,

Rock Springs

If not injured in Mine, state where,

190 4 Time

10 A.M.

Mine No. 9

Entry No. 4

Room No. 36

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

Name of Mine Forman,

Joseph Saulsby

What Family, if any,

Married or Single

Single

How long in employ, of Co.,

About one year

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Rock Springs, Wyo

Was he an efficient man,

Yes
At young
R. Harvey

Was he temperate,

Yes

Where and in whose charge left,

General Hospital

Name of Physician called, if any,

Reed.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Back bruised.

Cause, A piece of rock fell from the roof while mining, he had put off a blast and hoisted the rock and did not notice it and he was working in below it when it fell, there was no one to blame for the accident.

Joseph Saulsby
Mine Foreman

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

No.9 Mine, Sept. 21st.,1904.

Injured Man's Statement:

I was running a Drilling Machine on the new plane in 8 room on the 21st day of September, about 9 o'clock A.M. and the drill dropped out of the socket from the thread bar and the machine over-balanced and I tried to hold the machine when it caught my first and second fingers on my right hand in the frame of the machine. and bruised them. There was no one to blame for the accident .

(Signed)

X Mike Storey

Jos. Soulsby,

Mine Foreman.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Mike Storey
 Occupation, Driller
 Date of Accident, Sept. 21st 1904 Time 9 a.m.
 Location, Rock Springs Mine No. 8 Entry No. New Plant Room No. 8
 If not injured in Mine, state where, _____

Name of Mine Supt. Geo. S. Block Name of Mine Foreman, Joe. Soulesby
 Age of Person injured, 38 Married or Single married
 What Family, if any, 4
 How long in employ, of Co., 14 years
 Name and address of nearest living Relative, _____
 Condition of Life or Circumstances, _____
 Was he an efficient man, yes Rock Springs, Wyo.
 Was he temperate, yes
 Where and in whose charge left, At home
 Name of Physician called, if any, R. Harvey Reed, asst.
 Name and P. O. Address of Witnesses, _____

Nature and extent of Accident, Two fingers bruised on right hand.

Released

Cause, He was running a drilling machine when the drill dropped out of the socket from the thread bar and the machine over balanced and he tried to hold the machine, when it caught his first and second fingers on his right hand in the frame of the machine and bruised them.

There was no one to blame for the accident

Joe. Soulesby
 Mine Foreman

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Hama, Sept 24th 1904

Statement of F. E. Nichols

Wm Brown, cut thumb of left hand with an
axe while splitting wedge for Electric Drice
Post in 23 cut off, at about 3 o'k P.M.,
Sept. 8th, 1904.

R. E. Nichols

Witness

W. F. Chambers,

Mine Clerk

Above a correct statement
as I was present and watching
Wm Brown, when he struck
his left thumb with the
axe he was using.

E. A. Brooks

Mine Supt.

Hama, Sept. 24th 1904.

Statement of Wm Brown who was injured in
23 cut off rock entry, Sept. 8th, 1904.

While making a wedge to put on post of
Electric drice on Sept 8th about 3 o'k P.M., struck
thumb of my left hand with the axe splitting
it at the end.

Wm Brown

Witness

E. A. Brooks

Mine Supt.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *H. M. Brown*
 Occupation, *Shift Boss*
 Date of Accident, *Sept 8th*
 Location, *Nampa*
 If not injured in Mine, state where,

1904 Time *3 P.M.*
 Mine No. / Entry No. *23* Room No. *—*

Name of Mine Supt. *E. J. Brooks*
 Age of Person injured, *33*
 What Family, if any,
 How long in employ, of Co., *14 years*
 Name and address of nearest living Relative, *Robt Brown, Nampa, Idaho*
 Was he an efficient man, *yes*
 Condition of Life or Circumstances, *single*
 Was he temperate, *yes*
 Where and in whose charge left,
 Name of Physician called, if any, *Dr. J. C. Hammond*

Name and P. O. Address of Witnesses. *E. J. Brooks, Nampa, Idaho*
and J. E. Nichols

Nature and extent of Accident, *Thumb on left hand split by striking it with an axe*

Released

Cause, *While making a wedge to put on the post of electric drill in 23 cut off entry, struck the thumb of the left hand with his axe splitting it. Walked out and to Dr Hammond's office*

(Signature)

Joe Burton
 Title, *Mine Foreman*

Date *Sept 24th* 1904

STATEMENTS OF WITNESSES.

I was working in #10 Mine #1 Entry
 34 Room today October 10-04 - about
 12:30 o'clock. I was running a
 loaded car down the room, and it
 went very fast. I held it until it
 jumped off the track in the front end,
 but the car stopped very suddenly
 but I hit my right leg on the
 bumper of the car, breaking it
 below the knee, and injuring my
 left knee. (Sgd) Moses E Harvey,

THE UNION
 REPORT OF

Name of Person
 Occupation
 Date of Accident
 Location
 If not injured in
 Name of Mine Sup
 Age of Person inj
 What Family, if a
 How long in empl
 Name and address
 Was he an efficien
 Where and in who
 Name of Physician
 Name and P. O. A

Nature and extent

Cause, the u
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REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *M. E. Harvey*Occupation, *miner*Date of Accident, *October 10*Location, *Rock Springs*190⁴ Time *12:30 Pm*
Mine No. *10* Entry No. *1* North Room No. *34*Name of Mine Supt. *Geo L. Black*Age of Person injured, *45*What Family, if any, *5 children*How long in employ, of Co., *20 years*Name and address of nearest living Relative, *Rock Springs*Was he an efficient man, *Yes*Where and in whose charge left, *Wyoming General Hospital*Name of Physician called, if any, *R Harvey Reed*Name of Mine Foreman, *J. Patterson*Married or Single *Married*

Condition of Life or Circumstances,

Was he temperate, *Yes*

Name and P. O. Address of Witnesses.

*No witnesses*Nature and extent of Accident, *Right leg broken between knee & ankle*
Left hand cut between thumb &
*first finger.**Released*Cause, *He was running loaded car down the room*
It ran too fast and jumped the
track when it stopped suddenly and
he bumped his leg up against the end
of car, causing injuries
(Sgd) J. Patterson
mine foreman

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs, Wyo
Oct 31, 1900

I was driving in No. 8 mine in Entry 7201
on the above date, and in approaching a
door, my trip was so fast, I endeavored
to open the door but the car struck it
and squeezed me on the upper part of the
body.

(Signed) Joe Carbon

UNION PAC
RT OF PERS
Person injured,
Accident, Rock
in Mine, sta
Supt.
Person injured,
if any,
employ, of Co
address of near
an efficient man,
in whose charg
Physician called,
P. O. Address of
Extent of Acci
being
of carb
I vi
injured,
appeared
the door
when to
open it
the car
person
describ
2

REPORT OF PERSONAL INJURY.

Mine No.

1562

Sup'ts No.

Name of Person injured,

Joe Carbon
Extra Driver

Occupation,

Date of Accident,

Oct. 3rd

Location,

Rock Springs,

If not injured in Mine, state where,

1904 Time 2 P.M.
Mine No. 1 Entry No. 8 Room No. —

Name of Mine Supt.

Geo. L. Black

Name of Mine Forman,

Age of Person injured,

21

Married or Single

George B. Pryde
Single

What Family, if any,

How long in employ, of Co.,

1 month

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Dominick Carbon Rock Springs

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Dominick Carbon

Name of Physician called, if any,

Dr R. Harvey Reed.

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

by being
of carb.Squeezed across upper part of body
caught between a door and tripReleased

Cause,

I visited the place where Carbon was injured, shortly after the accident and it appeared to me that he had forgotten about the door on the entry in which he was driving when to close to it he had endeavored to open it but before he could do so, the trip of carb which he was hauling caught him, forcing him to be injured in the manner described above.

There were no witnesses to the accident.

(Signed) George B. Pryde,
Act Mine Foreman

(Signature)

Date

Oct 4th 1904

Title,

STATEMENTS OF WITNESSES.

Hanna Oct 12-04

Statement of a R A borrow.

I was loading coal in 18 Entry 5 Room.
Coal was loose on Rib. I was barring
the coal down from Rib when a piece of
coal slid down my bar, striking me on
my Right hand, cutting a place 3
inches long & to the bone in my
thumb.

No witnesses to accident

(Sgd) A R A borrow

witness
W F Chambers
mine clerk.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No.

157

Sup'ts No.

Name of Person injured, *Arthur R Exborow*

Occupation, *miner*

Date of Accident, *Sept 26*

Location, *Hanna*

If not injured in Mine, state where,

190 *4* Time *10' am*
Mine No. *1* Entry No. *18* Room No. *5*

Name of Mine Supt. *E S Brooks*

Age of Person injured, *41*

What Family, if any, *one*

How long in employ, of Co., *eight months* Condition of Life or Circumstances,

Name and address of nearest living Relative, *Hanna Wyo*

Was he an efficient man, *yes*

Where and in whose charge left, *Joe Hammond* Was he temperate, *yes*

Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Thumb on Right hand cut*

Released

Cause, *While loading car, was taking coal from the Rub a piece coal slid down tampering bar striking hand, cutting thumb. of three inch cut to bone. Knowing the coal was loose was baring coal down.*

(Sgd) *Joe Burton*
mine foreman

Correct
E S Brooks
mine Supt.

(Signature)

Date

1

Title,

Cland Wyo Oct 5-1904

I was working in the downcast on the night of the 5th of October 1904, and was coming up with the 2" car when I heard the engineer holler + I ran + stopped the engine + picked him up from behind the engine + took him out to the slope + sent him up with the rope runner.

(Sgd)

Edw. A. Anderson,

Cumberland, Wyo. 10-6-1904.

I drove home from No. 2 about 6 o'clock on the evening of Sept October 5th, 1904, and then walked from the Livery Stable to the Boarding house. Nick Hendron and Chas. Irvine were with me on the drive and they had been drinking very freely. I had taken a few drinks with the boys, but not enough to make me drunk.

I went to work at 7 o'clock and went down into the mine, where I was running an electric hoist engine on a down hill air course. The miners had about three empties and they had switched two when I went in, but I don't know how many cars they had loaded. I think it was either the first or second car, and the engine does not set straight with the track, which allows the rope to pile up on one side of the drum and when it falls off it lets the car jar back, and I was afraid it would either break the rope or move the engine. I stepped around to the drum, while it was in motion, to throw off the coils piled up, and caught my ^{right} hand in the drum and to save myself I got the left hand in also.

I knew the engine was not square with the track and I had never reported it, which I should have done and should have refused to operate it until fixed; the day man ran it and I thought I could.

Jesse Simpson

Witness.
E. C. Way

Bumbeelanot

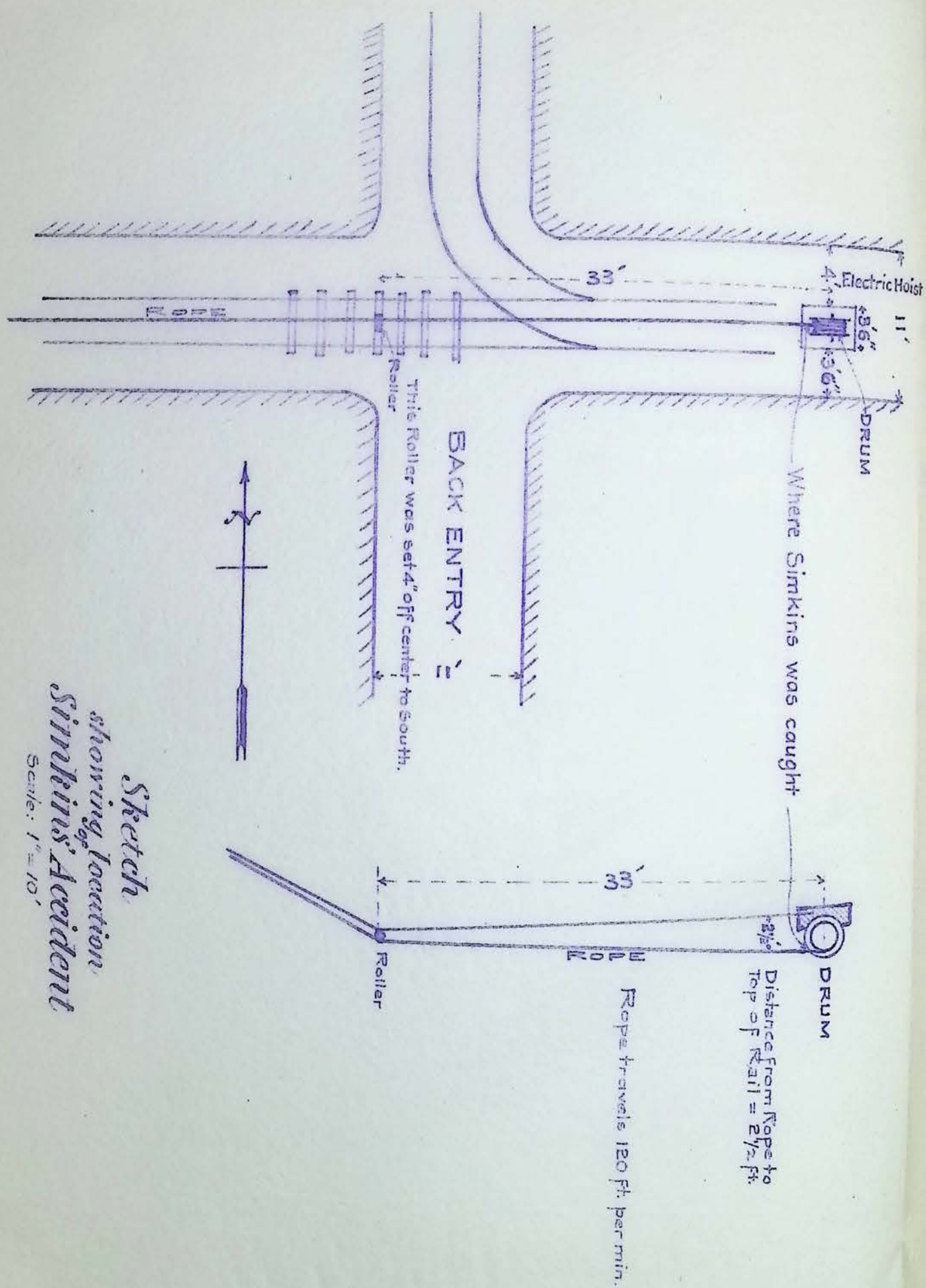
Oct 5.

Wyo

The undersigned went to work
 the night of the fifth of Oct. 1904
 at 7 p.m. the engineer came to
 work at 7.30 p.m. his time
 was to be there at 7 p.m.
 when he came he was the worst
 for drink we thought he was
 not fit for work but it was
 our place to send him home
 when we was hoisting the
 car just before we got to the
 top we heard him fall
 he had fell on the rope and
 it caught him by the two fingers
 and took him over the drum
 my partner E. O. Anderson ran
 and stopped the engine by this
 time he was loose by his two
 fingers being cut off we took
 him out to the slope and
 sent him on top with the
 Rope Runner
 Signed E. O. Anderson

THE CIVIL ENGINEER'S
 REPORT OF PROCEEDINGS
 IN THE CASE OF
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Clarendon, N.Y. Oct 5 - 1904
Cumberland



*Sketch
showing location
Simkins' Accident
Scale: 1"=10'*

THE UNION
REPORT OF
Name of Person injured
Occupation
Date of Accident
Location
If not injured in A
Name of Mine
Age of Person Injured
What Family, if any
How long in employ
Home and address
Was he an efficient
Where and in whose
Name of Physician

Nature and extent of
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fringe

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THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No.

158

Sup'ts No.

Name of Person injured, Jesse Simpkins
Occupation, Sniker Hoist Engr.
Date of Accident, October 5th 1904 Time 10: PM
Location, Cumberland Mine No. 1 Entry No. Room No.
If not injured in Mine, state where,

Name of Mine Supt. James Needham Name of Mine Forman, T. W. Davies M. S. M.
Age of Person Injured, 25 Married or Single single
What Family, if any,

How long in employ, of Co., 2 months

Name and address of nearest living Relative, Mrs Julia Officer (Sister)

Was he an efficient man, Yes.

Where and in whose charge left, Sent to Wyoming Genl Hospital

Name of Physician called, if any, Dr Wynnille

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Second & third fingers on right pulled out at second joint & end of little finger on left hand stripped of flesh & nail.

Released

Cause, Jesse Simpkins was employed running a 7 1/2 horsepower Electric hoist in return air course on South side of #1 mine. Rope on drum of hoist would pile up on south side of drum caused by roller on knuckle being set too close to track on south side. This had not been reported, & engineers had been in the habit of showing rope off of pile on drum with a piece of timber 2" x 4" about 6 ft long. Simpkins was not using this piece of timber but showed rope off of pile with his hands. But on the night of October 5 he being under the influence of liquor & was caught I think he fell under rope & was riding between rope & south side of drum. One of the miners (Anderson) was riding up on the car & heard Simpkins stop at the hoist & saw to the hoist & stopped it. Rope on drum would pile up on knuckle just as car came up over knuckle on landing about 25 ft from hoist.

James Needham
Date mine Supt.

(Signature)

T. W. Davies

Title, Master Mechanic

STATEMENTS OF WITNESSES.

Hanna, Oct 17th 1904

Statement of Ed. Firmin, injured in 29 room
22 Entry Hanna #1 mine, Sept 17-1904

Was riding a loaded car down my room
(29 room) (22 Entry) on Sept. 17th between
9 + 10 o'clock a.m.

Just above entry while
I was pulling back on car, with both
hands a cross bar, caught on a
large piece of coal, and jammed my
finger between the end of the car and
the coal, cutting my middle, ring
and little finger. Ring finger cut so badly
had to have it taken off at first joint.

(Sgd) Ed Firmin

Witness
E. S. Brooks

No Witness: Partner up room.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

159

Mine No.

Sup'ts No.

Name of Person injured, *Ed Truman*
Occupation, *Miner*
Date of Accident, *September 17*
Location, *Hanna, Wyo*
If not injured in Mine, state where,

190 *4* Time *9:30. am*
Mine No. *1* Entry No. *22* Room No. *29*

Name of Mine Supt. *E. S. Brooks*

Name of Mine Foreman, *Joe Burton*
Married or Single *married*

Age of Person injured, *27*

What Family, if any, *one*

How long in employ, of Co., *two months* Condition of Life or Circumstances,

Name and address of nearest living Relative, *Brother Newark, N. J*

Was he an efficient man, *yes*

Where and in whose charge left, *Dr J. C. Hammond* Was he temperate, *yes*

Name of Physician called, if any,

Name and P. O. Address of Witnesses. *No witness: Partner up room*

Nature and extent of Accident, *Middle, ring, & little finger mashed
Ring finger cut so badly, it had to
be taken off at first joint.*

Released

Cause, *He was riding a loaded car down room (29 room
22 entry) on September 17th between 9 & 10
o'clock a. m. Just above the entry while
pulling back on a car with both hands, a
cross bar caught on a large piece of coal
and jammed his finger between end
of coal & coal, cutting middle, ring & little
finger. Ring finger cut so bad, had to
have it taken off at first joint*

(No witness: Partner up room Henry Hill,

*(Sgd) Joe Burton
Mine Foreman*

*Correct
E. S. Brooks.
Mine Supt.*

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

9 Mine Oct 6-04

Witness' Statement

I was working with Frank Galob on the 6th day of October in Entry 6 room about 12:30 o'clock, when he was hurt. He fired a shot & as soon as it went off, he went back to see what it had done, and the shot had loosened the rock, as soon as he got back there, The rock fell & caught him on the head & back. There was no one to blame for the accident.

(sgt) Peter Lantier
J Pocenta.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Frank Galole*Occupation, *miner*Date of Accident, *October 6th*Location, *Rock Springs*

If not injured in Mine, state where,

1904

Time

*12:30 P*Mine No. *9*Entry No. *7*Room No. *6*Name of Mine Supt. *L. L. Black*Age of Person injured, *22*What Family, if any, *three*How long in employ, of Co., *3 months*Name and address of nearest living Relative, *Rock Springs*Was he an efficient man, *Yes*Where and in whose charge left, *at Home*Name of Physician called, if any, *R. Harvey Reed's assistant*Name of Mine Forman, *Joe Soulsby*

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, *Back bruised & head cut.**Released*

Cause,

He fired a shot, and as soon as it went off he went back to see what it had done and the shot had loosened the rock & it fell & caught him as soon as he went back. There was no one to blame for the accident. There were lots of props & caps in the room close by.

(Signature)

Date

1

Title,

Witness Statement October 13 - 4

I John Perreault was working along with Adam Rucotsala in Room 108 Entry 43 in No 1 Mine on the 12th day of Oct- 1904 when Rucotsala was hurt by falling coal. We were both of us undermining when about 2 cars of coal fell off the edge of mining and caught Rucotsala and caught my lamp as well. We had not bounded the coal face but it was cracking pretty much when we were mining but we thought that it was only the mining that was cracking. Rucotsala was almost buried in under the coal.

John Perreault

Witness

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THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No.

Sup'ts No.

Name of Person injured, Adam Ruotoala
Occupation, miner
Date of Accident, October 12
Location, Rock Springs
If not injured in Mine, state where, —

1904 Time 11 am
Mine No. one Entry No. 43 Room No. 108

Name of Mine Supt. Geo L Black
Age of Person injured, 30
What Family, if any, —
How long in employ, of Co., 2 months

Name of Mine Forman, D G Jones
Married or Single single

Name and address of nearest living Relative, —
Was he an efficient man, yes

Condition of Life or Circumstances,

Where and in whose charge left, Wyo Genl Hospital
Name of Physician called, if any, R H Reed

Was he temperate, yes

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Bruised about body + Right leg

Released

Cause, Adam Ruotoala + Geo Puurula worked together in room 108 Entry 43 in #1 mine about 11 o'clock a.m. on the 12th of October 1904. They were undermining in face of room which is up about 7 feet, when about 2 cars of coal fell of the face of room where Ruotoala was mining, & caught him. I went to see the place after the accident along with Mr Broadbury. Mine Inspector and me found the room in excellent shape, well timbered up to the face. The coal is of a free nature & bursts off when mined. It seems as tho' they had not sounded the face to see if there were any loose coal before starting to mine.
(sgd) D G Jones.

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Spring Valley, Wyo.

Nov. 4th 1904

To Whom It May Concern

This certifies that I Ted Attryde while engaged as driver in mine No.1 at Spring Valley, Wyo. when coming out of the mine about five oclock P M Nov. 2nd 1904 I was driving a mule up manway when I hit it on the hind quarters with a short stick, having hold of the mules tail at the time. When I hit the mule it kicked me in the face, cutting my nose and knocking out two teeth, as a result of which I was unconscious for 10 minutes

Copy

Signed

Ted Attryde

THE UNION PACIFIC COAL CO

Spring Valley, Wyo. Nov. 2nd 1904.

TO WHOM IT MAY CONCERN

This certifies that I John S. Hays, am engaged as a Driver in mine No.1 at Spring Valley Wyo. I was working today on No.5 Entry along with Ted Attryde, each driving a single mule. About 5.05 pm we were started out of the mine and had crossed the slope and the cross cut, and was just turning up the manway, when Ted hit his mule with a short piece of stick on the hind quarters, he at that time had a hold of the mules tail. When he hit the mule it kicked him in the face, knocking him senseless.

He was unconscious for some time, his nose was badly cut and two of his teeth broken out

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Ted Attryde*Occupation, *Driver*Date of Accident, *November 2*190 *4*

Time

*5 Pm*Location, *Spring Valley*Mine No. *1*Entry No. *—*Room No. *Mainway*

If not injured in Mine, state where,

Name of Mine Supt. *Alex Briggs*Age of Person injured, *16*What Family, if any, *—*How long in employ, of Co., *2 years*Name and address of nearest living Relative, *Spring Valley*Was he an efficient man, *Yes*Where and in whose charge left, *His father*Name of Physician called, if any, *Dr E G Levenson*Name of Mine Forman, *—*Married or Single *single*Condition of Life or Circumstances, *—*Was he temperate, *Yes*Name and P. O. Address of Witnesses, *Joe S Hayes*Nature and extent of Accident, *Lacerated nose & 2 teeth broken off.**Released*

Cause, The above mentioned was going out of the mine and was driving his mule ahead of him through the cross cut into the mainway. Just as he got into the mainway he hit the mule on the hip with a sharp piece of stick he had in his hand, he having hold of the mule's tail. Just as he hit it, it kicked him in the face cutting his nose & breaking out his 2 teeth. He was unconscious for a few minutes. He was entirely to blame himself, and I expect he will be more careful in the future than hold a mule by the tail & hit it.

Yours truly
(Alex Briggs) Mine Supt.

(Signature)

Date

1

Title,

STATEMENTS OF WITNESSES.

Rock Springs Wyo Nov 2-04

Visited the place that H Nakayawa was injured
and found that he

COPY

Rock springs Wyo Nov 7, 1904

I visited the place that H Nakazaywa was injured and I found that he had fired one shot and the coal failed to come down. He then fired a shot from the opposite direction and it also failed to accomplish its purpose. Without spragging the coal, he then laid down in front of it and started to mine with the result that the coal fell on him, injuring his legs.

(Sgd) Geo. B Pryde

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *H Nakazawa*
 Occupation, *Miner*
 Date of Accident, *Nov 4th*
 Location, *Rock Springs*
 If not injured in Mine, state where,

1904 Time 3 P.M.
 Mine No. 8 Entry No. 1 Room No. 25

Name of Mine Supt. *L. L. Black*Name of Mine Forman, *L. B. Pryde*

Age of Person injured, 27

Married or Single *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, *Harry Makiyama*Was he an efficient man, *Yes*Was he temperate, *Yes*Where and in whose charge left, *Wyo Gen'l Hospital*Name of Physician called, if any, *R. H. Reed*Name and P. O. Address of Witnesses. *K Yamada*

Nature and extent of Accident, *Bruised about the leg + thigh by
 coal falling on him.*

Released

Cause, *I was working in 25 room, on #1
 Entry on Nov 4th. I had fired one shot
 and the coal didn't come down. I
 then fired one more shot from an
 opposite direction + the coal didn't
 come down.*

*I tho't the coal would stay up so I
 started to mine the coal and it fell
 on top of me, injuring me in the
 manner stated above.*

(Sgd) *L. B. Pryde**H Nakazawa*

Mineforman

Witness *K Yamada*

(Signature)

Date

1

Title,

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

164

Mine No.

Sup'ts No.

Name of Person injured, *Argalo Moser*

Occupation, *Miner*

Date of Accident, *November 5*

Location, *Rock Springs*

If not injured in Mine, state where,

190 *4* Time *4 P M*
Mine No. *7* Entry No. *B* Room No. *27*

Name of Mine Supt. *L. Black*

Age of Person injured, *19*

What Family, if any,

How long in employ, of Co., *about 6 months* Condition of Life or Circumstances, *—*

Name and address of nearest living Relative, *John Dalapicalo R. Sprs Wyo.*

Was he an efficient man, *yes*

Where and in whose charge left, *Sent to Specialist at Ogden*

Name of Physician called, if any, *R H Reed*

Name and P. O. Address of Witnesses, *Gu. Dallabetta*

Nature and extent of Accident, *Blow on left eye from piece of coal while mining*

Released

Cause, *Was engaged as a miner & while undermining the coal in a cross cut near the face of his room a piece of coal flew from the pick while mining & struck him in the eye causing the injuries above mentioned. He did not go to the doctor until the 2nd day after the injury, thinking it was not serious*

(Sgd) *John L. Dykes*
#7 *Unionman*

(Signature)

Date

1

Title,

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

165

Mine No.

Sup'ts No.

Name of Person injured, *N. B. ayoodie*
Occupation, *Miner*
Date of Accident, *Nov 12.*
Location, *Rock Springs*
If not injured in Mine, state where,

190 *4* Time *9:00 am*
Mine No. *7* Entry No. *A* Room No. *37*

Name of Mine Supt. *Geo L Black*

Name of Mine Foreman, *Jno L Dykes*
Married or Single *married*

Age of Person injured, *44*

What Family, if any, *two sons*

How long in employ, of Co., *about one month*

Name and address of nearest living Relative, *Geo Smith*

Was he an efficient man, *Yes.*

Where and in whose charge left, *His friends*

Name of Physician called, if any, *R Harvey Reed*

Name and P. O. Address of Witnesses. *Moryk Gylock his mark*

Nature and extent of Accident, *Lip cut; back of head cut; bruise on hip
Left side of head cut.*

Cause, *Was engaged as a miner, and while shoveling coal from the road about 4 yards from the face of the room, a piece of Rock about 4 feet long & three or four inches in thickness fell on the above mentioned person, causing the injuries above described.*

Plenty of timber was in the room & convenient to the room.

This rock had been previously shot while blasting the coal. I do not know of any one to blame.

(sgd) Jno L Dykes #7 Mine Foreman

Witness
Moryk Gylock.

(Signature)

Date

1

Title,

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

166

Mine No.

Sup'ts No.

Name of Person injured, Joseph Sharp

Occupation, miner

Date of Accident, October 17th

Location, Hanna

If not injured in Mine, state where, Slope east side

190 4 Time 11:00 am
Mine No. 1 Entry No. Room No.

Name of Mine Supt. E. Brooks

Age of Person injured, 54

What Family, if any, Six

How long in employ, of Co., 3 months

Name and address of nearest living Relative, Son in law Phuster

Was he an efficient man, yes

Where and in whose charge left, J. Hammond

Name of Physician called, if any, "

Name of Mine Foreman, Joe Burton
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, Nothing to be seen; complains of pain
in leg
(did not apply for treatment
until Nov 11-04)

Released

Cause, While timbering slope on east side went above
to get a timber. The timber he wanted
was under two others. In pulling out
the bottom timber, started the others.
One slid down and caught his leg
between two timbers
(Sgd) Joe Burton
mine foreman.

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

He carried about three pound of powder with him to motor car while car going to entry. The electric light came under car to effect the powder and exploded. Since after he was injured, taken to General Hospital.

(Sgd) T Ariga

Witness
Harry Nishiyama.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

167

Mine No.

Sup'ts No.

Name of Person injured, *T. Ariga*
Occupation, *miner*
Date of Accident, *Oct 15*
Location, *Rock Springs*
If not injured in Mine, state where,

190 *4* Time *7: am*
Mine No. *8* Entry No. *1* Room No. *24A*

Name of Mine Supt. *Geo L Black*
Age of Person injured, *29*
What Family, if any,
How long in employ, of Co., *1 year*
Name and address of nearest living Relative, *Harry Mahiyama*
Was he an efficient man, *Yes*
Where and in whose charge left, *Wyo Genl Hospital*
Name of Physician called, if any, *R H Harvey Reed*

Name of Mine Forman, *Geo B Pryde*
Married or Single *single*

Condition of Life or Circumstances,

Was he temperate, *Yes as far as I know*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Burned about hands, face, & legs by an explosion of blasting powder, which he had taken into the man trip with him.*

Released

Cause, *He carried in about 3 pounds of blasting powder in a sack & got into the man trip and the powder was in some manner exploded. The powder was taken into the man trip by Ariga against the rules and he was well aware that he was violating the rules of the Company when he did so, because I took him off the man trip about one month ago, when he had a keg of powder in his possession. No one is allowed to ride on any motor trip with explosives on or about his person as there is always an element of danger, and this fact is understood by all the employees of the mine.*

T Ariga
H Mahiyama

(Signature)

Geo B Pryde
Mine Forman

Date

Title,

STATEMENTS OF WITNESSES.

Mine No 8, Oct 15, 1904

I was running man trip as usual when I run into some fine coal and rock on the track which cut the ground from the motor I threw on one step more on the controller and had just got through it when I discovered the trolley line had pulled loose from an ear I stopped as they hollowed powder and just then I saw the flash. It was about 6 or 7 cars from me.

(sgd) J.W.Soulsby
Morot Man

Rock springs Wyo Oct 15, 1904

I was riding in on the man trip in No 8 mine on Saturday morning Oct 15th about 7:00 a.m.

When near 24 room on No 1 entry inside of the 2nd plane there was an explosion of blasting powder in the car in which I was riding. My hands and face were burned from the flame.

I believe the powder was carried by Ariga a Jap miner and that it was concealed about his person.

(Sgd) Thos Wilde

Witness
Tom Weatherly.

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

168

Mine No.

Sup'ts No.

Name of Person injured, *Thos Wilde*
Occupation, *Truckman*
Date of Accident, *Oct 15*
Location, *Rock Springs*
If not injured in Mine, state where, _____

190 *4* Time *7 a.m.*
Mine No. *8* Entry No. *1* Room No. *24*

Name of Mine Supt. *Geo. S. Brock*
Age of Person injured, *46*
What Family, if any, *Seven*
How long in employ, of Co., *3 1/2 yrs*
Name and address of nearest living Relative, _____
Was he an efficient man, *Yes*
Where and in whose charge left, *At own home,*
Name of Physician called, if any, *Dr W. C. Freeman*

Name of Mine Foreman, *Geo. B. Pryde*
Married or Single *Married*

Condition of Life or Circumstances, _____
Rock Springs, Wyo
Was he temperate, *Yes*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Burned about face and both hands from the plane on an explosion of Blasting Powder*

Released

Cause, *Shortly after 7 A.M. on the morning of Oct. 15th, I was informed that an explosion of Blasting Powder has occurred on one of the cars comprising the main trip, which was taking the men to work. I immediately repaired to the scene of the accident which was at 24 Room on #1 Entry inside of the 2nd Plane. On reaching there I found that 6 men had been burned on various parts of the body. I made an investigation and it is my opinion that the men were burned by an explosion of Blasting powder which occurred in the forward left hand corner of the 8th car and that the powder was carried in a sack, concealed about the body of a Jap Miner, who occupied that position in the car. However, carried that powder in, knew he was hearing the reels, as no one is allowed to ride on any motor trip, when he has explosives. I am unable to say how powder was ignited*

Thos Wilde

(Signature)

Geo B Pryde

Title,

Mine Foreman

Date

Oct 15th 1904

STATEMENTS OF WITNESSES.

I was riding in on the man trip on Saturday morning when near 24 room, on 1 entry in side 2 plane, there was a flash of fire which burned me on various parts of the body. I do not know the cause of the fire. I saw a Jap with a sack but thought he had spikes in it.

(Sgd) Frank Leo

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REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Frank Leo
 Occupation, Track layer
 Date of Accident, Oct 15th 190 4 Time 7 A.M.
 Location, Rock Springs Mine No. 8 Entry No. 1 Room No. 24
 If not injured in Mine, state where, _____

Name of Mine Supt. Geo L. Block Name of Mine Foreman, Geo B. Pryde
 Age of Person injured, 29 Married or Single 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, 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, Dr. R. Harvey Reed.

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Burned about hands face and legs
by flames from an explosion of Blasting Powder

Released

Cause, Shortly after 7 A.M., on the 15th of October, I was
informed that an explosion of Blasting powder
had occurred on one of the cars comprising the
man trip which was taking the men to work
On arriving at the scene of the accident
I found that 6 men including Frank Leo
had been burned on various parts of the body
After making an investigation I am of the
opinion that the men were burned by an
explosion of Blasting Powder which occurred
in the forward left hand corner of the 8th
car from the motor and that the powder was
carried in a sack by a Jap miner who ever
carried in the powder in that manner
knew that he was breaking the rules as no
one carrying explosives is allowed to ride
on any motor trip I am unable to say
how the powder was ignited

Frank Leo

(Signature)

Geo B Pryde

Date

Oct 17th 1904

Title,

Mine Foreman

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

John Leiske
Miner

Occupation,

Date of Accident,

October 15th

1904 Time

7 A.M.

Location,

Rocksprings

Mine No. 8

Entry No. 1

Room No. 24

If not injured in Mine, state where,

Name of Mine Supt.

Geo. T. Black

Age of Person injured,

45

What Family, if any,

How long in employ, of Co.,

1 month

Name and address of nearest living Relative,

Savonia

Was he an efficient man,

Yes

Where and in whose charge left,

H. Young

Name of Physician called, if any,

Dr. A. Harvey Reed,

Name of Mine Foreman,

Geo. B. Pryde

Married or Single

Single

Condition of Life or Circumstances,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Burned about hands, face and legs
from flame of an explosion of Blasting Powder.

Cause,

Shortly after 7 A.M. on Oct 15th I was informed that an explosion of Blasting powder had occurred on one of the cars comprising the man trip, which was taking the men to work. On arriving at the scene of the accident, I found that 6 men including John Leiske, had been burned about various parts of the body.

After making an investigation I am of the opinion that the men were burned by an explosion of Blasting powder which occurred in the forward left hand corner of the 8th car from the motor and that the powder was carried in a sack by a Gap Miner. Whoever carried in the powder in such a manner, knew he was breaking the rules as no one carrying explosives is allowed to ride on a motor trip. I do not know how the powder was ignited.

John Leiske

(Signature)

Geo. B. Pryde

Mine Foreman

Date

Oct 15th 1904

Title,

STATEMENTS OF WITNESSES.

I was riding in on the man trip on Saturday morning. When at 24 room on No 1 entry, I saw a flash of fire which burned me on the face and hands. The trolley wire struck the car and I received a shock from the same. Saw a Jap with a sack and thought he had spikes. Do not know how the fire happened.

(Sgd) Alex Sampson.

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THE UNION PACIFIC COAL CO.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Alex Sampson

Occupation, Booster

Date of Accident, Oct 15th

Location, Rock Springs

If not injured in Mine, state where, _____

1904 Time 7 A.M.

Mine No. 8

Entry No. 1

Room No. 24

Name of Mine Supt. Geo. L. Black

Age of Person injured, 40

What Family, if any, Three

How long in employ, of Co., 5 years

Name and address of nearest living Relative, Sweden

Was he an efficient man, Yes

Where and in whose charge left, Hyattsville General Hospital

Name of Physician called, if any, Dr. R. Harvey Reed

Name of Mine Foreman, 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,

Burned about hands & face by flame from an explosion of Blasting Powder

Released

Cause, Shortly after 7 A.M., on Oct 15th, I was informed that an explosion of Blasting powder had occurred on one of the cars comprising the man trip, which was taking the men to work. On repairing to the scene of the accident, I found that seven including Alex Sampson had been burned on various parts of the body. After making an investigation, I am of the opinion that the men were burned by an explosion of Blasting powder, which occurred in the forward left hand corner of the 8th car and that the powder was carried in a sack by a Gap miner. Whoever carried in the powder in such a manner, knew he was breaking the rules as no one carrying explosives is allowed to ride on a motor trip. I am unable to say how the powder was ignited.

Signed Alex Sampson

(Signature)

Geo. B. Pryde
Mine Foreman

Date

Oct 19th 1904

Title,

Cumberland Wyo

11-14-04

To whom it may concern
 that John Jones was injured on the 18th of October
 while shoveling coal in the chute about 20 feet from
 upper end of the chute. and I was shoveling coal in at
 the upper end of the chute. a piece of coal flew up
 out of chute and hit him in the eye in Room No 12
 6 North entry No 1 mine Cumberland Wyo

Thomas Powell

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

J. A. Jones

Occupation,

Miner

Date of Accident,

Oct 18th

1904 Time

10 A.M.

Location,

Cumberland

Mine No.

1

Entry No.

6th

North Room No.

12

If not injured in Mine, state where,

Name of Mine Supt.

Jas Needham

Age of Person injured,

40

What Family, if any,

How long in employ, of Co.,

5 or 6 months

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Thos. Powell (Friend)

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

Sent to Wyoming Gen'l Hospital.

Name of Physician called, if any,

Dr. Heymiller

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right eye injured.

Released

Cause, He was shoveling coal in the chute in his room, when a chip of coal flew hitting him in the eye. He worked the following 2 days. I did not know he was injured until I saw the doctor's report.

(sgd)

J. M. Faddies

Mine Foreman

(Signature)

Date

Nov 15th 1904

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. Dallabetta
MinerNov 12th

1904 Time

4 P.M.

Mine No. 7

Entry No. 3

Room No. 27

Name of Mine Supt.

Age of Person injured,

What Family, if any,

How long in employ, of Co., About 1 year

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. L. Block
26

Name of Mine Foreman,

Married or Single

Jno. L. Dykes
Single

Condition of Life or Circumstances,

Mike Dallabetta, Rock Springs

Was he temperate,

Yes

Sent to Specialist in Ogden.

Dr. R. Harvey Reed,

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Blow on right eye from piece of coal, which flew from pick.

Released

Cause, Was employed as a miner and while mining in the face of his room a piece of coal flew and struck his eye after waiting a few days. He called the doctor and was sent to Ogden by the doctor.

(Signature)

Jno. L. Dykes

Title,

Mine Foreman

Date

Nov 18th 1904

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Geo. Radasevich

Occupation,

miner

Date of Accident,

Nov 4th

Location,

Rock Springs

1904

Time

10 A.M.

If not injured in Mine, state where,

Mine No.

7

Entry No. 2 dip

Room No. 35

Name of Mine Supt.

Geo. L. Black

Age of Person injured,

26

What Family, if any,

Name of Mine Foreman,

Geo. L. Dykes

Married or Single

Single

How long in employ. of Co.,

About 6 months

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Marko Tomich, Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

His friend

Name of Physician called, if any,

R. Harvey Reed

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left shoulder dislocated

Released

Cause, He was employed as a miner, and while he was running a loaded car down his room the car ran off the track and he was trying to lift it on again when his feet slipped from under him. He at this time was standing with his back against the car and lifting at the same time with both hands near the bottom of the car, as he felt the weight of his body, came suddenly on his arm causing the injuries above described. The injury came about accidentally without any blame on anyone.

(Signed) Geo. Radasevich

(Signature)

Geo. B. Pryde,
Mine Foreman

Date

Nov 18th 1904

Title,

STATEMENTS OF WITNESSES

Nauvoo, Nov 12th

✓

Statement of Frank Williams Injured
Room 18 Entry 22 Nauvoo Mine No. 1 Oct 10

At about 2 04 PM. Oct 10th while loading
in 18 Room 22 Entry Nauvoo Mine No. 1 Cur. a
piece of rock fell from roof striking a lump
coal and then my left leg just above
ankle.

Witness

W. E. Chambers

Mine

Frank Williams

THE UNION PACIFIC
REPORT OF PERSONAL
Injured Person Injured, Frank
Mines
Nauvoo, Oct
Injured in Mine, state wh

STATEMENTS OF WITNESSES

Nanna, Nov 12th

James C. Leisby

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Frank Williams*
 Occupation, *Miner*
 Date of Accident, *Oct 10th*
 Location, *Hanna*
 If not injured in Mine, state where,

190 *4* Time *2 P.M.*
 Mine No. *1* Entry No. *22* Room No. *18*

Name of Mine Supt. *E. S. Brooks*
 Age of Person injured, *38*
 What Family, if any, *three*

Name of Mine Forman, *Jos. Burton*
 Married or Single *Married*

How long in employ, of Co., *about 6 months* Condition of Life or Circumstances,

Name and address of nearest living Relative, *Hanna*

Was he an efficient man, *Yes*

Was he temperate, *Yes*

Where and in whose charge left,

Name of Physician called, if any, *wife's Dr. Hammond*

Name and P. O. Address of Witnesses.

Jos. Crosby

Nature and extent of Accident, *Bruised leg; sprained ankle*

Released

Cause, *While loading coal in room 18, 22 entry which is a caved room, a piece of rock fell from the roof, striking a piece of coal then rolling over on his leg, hurting the same.*

(sgd) *Jos Burton*
 Mine forman

1864
Cumberland May 19-

I Jacob J^r Hendrickson
am employed as Miner Working
in Mine No 2 On Apr 19-1864
I was working in 10 Room 4 South
Entry Shoveling level in to chute
when a piece of level fell from
the Rib Striking me on the
Left Hand Wounding and Bruising
it

Jas Jacob J Hendrickson
Witness J. Block

Cumberland Apr 11-1864

I John Kallio
am employed as Miner
Working in No 10 Room 4 South
Entry On Apr 18 about 1 pm
my partner was Shoveling level
into chute when a piece of level
fell from the Rib Striking him
on Left Hand Bruising and
Wounding it

Signed

John Kallio

Witness J. Block

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

Mine No.

177

Sup'ts No.

Name of Person injured, *Jacob T Hendrickson*

Occupation, *miner*

Date of Accident, *Nov 19*

Location, *Cumberland*

If not injured in Mine, state where,

190 *4*
Mine No. *2*

Time *1 P M*

Entry No. *4th S* Room No. *10*

Name of Mine Supt. *James Needham*

Age of Person injured, *33*

What Family, if any,

How long in employ, of Co., *3 months*

Name and address of nearest living Relative, *Claud Wyo*

Was he an efficient man, *yes*

Where and in whose charge left, *John Kaugus*

Name of Physician called, if any, *Dr Weymiller*

Name and P. O. Address of Witnesses, *John Kallio*

Name of Mine Forman, *M Blake*

Married or Single *single*

Condition of Life or Circumstances,

Was he temperate, *yes*

Nature and extent of Accident, *Left hand mashed + bruised*

Released

Cause, *He was shoveling coal into his chute when a piece of coal fell from the mt of his room, striking him on left hand, with results above stated*

(Sgd) M Blake

Foreman # 2 mine

James Needham
mine Supt.

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

Spring Valley, Wyo.

Nov. 22nd 1904.

TO WHOM IT MAY CONCERN

This certifies that I was working in mine No. 1 at Spring Valley, Wyo., in No. 1 room, off the mainway, on Tuesday night November 22nd 1904, with John Hunter as my partner, both of us were engaged as miners.

About 9.30 o'clock P.M. we were lifting a car on the track, which was off on curve from the slope, in doing so my foot slipped from a tie, and caused me to hurt myself in the groin, by what the Doctor says is a Hernia or Rupture.

I expect to start work tomorrow again, but for sometime will take care of myself, and will not lift on anything heavy, that may cause me to become worse.

Signed

John Swedley

COPY

STATEMENTS OF WITNESSES.

Spring Valley, Wyo.

Nov. 28th 1904.

To Whom It May Concern

This certifies that I was working, on Tuesday Nov. 23rd, 1904, with John Bradley, as partner, in room No. 1 off the mainway, in mine No. 1 at Spring Valley Wyo, about 9.30 o'clock P M. When the rope runner was taking out our cars, one of them got off the track, we went out to help put it on, and in doing so Bradley's foot slipped off the tie he was standing on, and caused him to fracture himself, he worked for several days after it happened before he called the Doctor. I never knew he had hurt himself, as he did not complain for a few days, or it

Signed

John Hunter

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *John Smedley*Occupation, *Miner*Date of Accident, *Nov 22*Location, *Spring Valley*

If not injured in Mine, state where,

190 *4*Time *9:30 AM*Mine No. *1*

Entry No.

Room No. *1**Manway*Name of Mine Supt. *Alex Briggs*Age of Person injured, *51*What Family, if any, *wife + 3 children*How long in employ, of Co., *20 years*Name and address of nearest living Relative, *Family residence*Was he an efficient man, *Yes*Where and in whose charge left, *His home*Name of Physician called, if any, *Dr E J Benson*

Name of Mine Forman,

Married or Single *Married*

Condition of Life or Circumstances,

Family residence

Was he temperate, *Yes*Name and P. O. Address of Witnesses. *John Hunter**Spring Valley*Nature and extent of Accident, *Hernia Right Side.**Released*

Cause, The above mentioned was working with John Hunter, as partner, and after they had started some time, the rope runner came to pull out their cars, when doing so one of the cars got off the track, they started to put it low, and when lifting at the car, Smedley's foot slipped off a tie and caused him to rupture himself. He worked several days after this & before he called the doctor. He says he is going to work to-morrow again, but that he will not lift on anything heavy again for some time. He says he feels all right now since the doctor put a truss on him. Alex Briggs, Mine Supt.

(Signature)

Date

Title,

STATEMENTS OF WITNESSES.

No 9 Mine Oct 26th, 1904

Injured Man's statement

I was riding a loaded trip down the plane and the engineer gave some slack rope and I overbalanced myself and fell off the trip and bruised my left shoulder. There was no one to blame for the accident

(sgd) John McTee.

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,

He was riding a loaded trip down the plane and the engineer gave some slack rope and he overbalanced himself and fell off the trip and bruised his left shoulder.

There was no one to blame for the accident

(Sgd)

Joe Soulesby
Mine Foreman.

(Signature)

Date

Title,

Mine No.

Sup'ts No.

Name of Person injured, *Arle Marfomaa*
Occupation, *Miner*
Date of Accident, *Nov 28th*
Location, *Rock Springs*
If not injured in Mine, state where, _____

190 *4* Time *2:00 P m*
Mine No. *7* Entry No. *44* Dip Room No. _____

Name of Mine Supt. *Geo L Black*
Age of Person injured, *22*
What Family, if any, _____

Name of Mine Foreman, *John L Dykes*
Married or Single *single*

How long in employ, of Co., *about 3 years* Condition of Life or Circumstances, _____
Name and address of nearest living Relative, *Erick Marfomaa*

Was he an efficient man, *yes* Was he temperate, *yes*
Where and in whose charge left, *His friend*
Name of Physician called, if any, *R Harvey Reed*

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, *Left hand cut by pick.*

Released

Cause, *Was shoveling coal on the low side of their entry, while his partner was mining on the high side & while at work they became close enough to gether for his partner & Kavalala to strike his pick in the injured man's hand. They did not notice they were so close to gether.*

A Marfomaa was in the act of turning round to throw his shovel full of coal back when the accident occurred

We the undersigned certify the above to be correct
(Sgd) *John L Dykes #7 Mine Foreman*
Henry Kavalala (Witness)
Arle Marfomaa

(Signature)

Date

Title,

REPORT OF PERSONAL INJURY.

Mine No. _____

Sup'ts No. _____

Name of Person injured, Clarence Baker
 Occupation, Driver
 Date of Accident, Nov. 22nd 1904 Time 10 A.M.
 Location, Rock Springs Mine No. 7
 If not injured in Mine, state where, _____

Entry No. 2nd Plane Room No. 1st dip

Name of Mine Supt. Geo. L. Black Name of Mine Foreman, John L. Dykes
 Age of Person injured, 19 years Married or Single Single
 What Family, if any, _____
 How long in employ, of Co., 5 years Condition of Life or Circumstances, _____
 Name and address of nearest living Relative, Joseph Baker, Rock Springs, Wyo.
 Was he an efficient man, Yes Was he temperate, Yes
 Where and in whose charge left, His parents
 Name of Physician called, if any, R. Harvey Reed, M.D.

Name and P. O. Address of Witnesses.

Nature and extent of Accident, Both hips bruised; possibly left
hip slightly fractured

Released

cause, Was employed as a driver and while hauling a car of coal from the face of no. 1 dip room, #2 Entry "C" Plane, was riding on the front end of loaded car, and caught between loaded car and long cap on post that projected over roadway. Was aware that the long cap was there, had watched it on previous occasions, but on this occasion forgot about it and in this manner received the injuries above described.

We, the undersigned certify the above to be correct

John L. Dykes #7 Mine Foreman
Clarence Baker, Injured person

(Signature)

Date

Nov 30th 1904

Title,

Rock Springs
Oct 18/19

A. P. C. Co.

While I was working
in the mine 10 (Ten) a stone
fell on my foot and hurted on
the 18th October

K. Hamai

Room 24, W
from face
injuries.

Nov 12 1904

I, Albert Sebo make this statement

K Namai was working with me on the 18th day of October Room 24, #4
entry 10 mine. He was shoveling the machine slack away from face
of room and the coal got loose and fell on him causing injuries.
no one to blame it was just accident

(sgd) Albert Sebo

Rock Springs
Oct 18/04

C. P. C. Co.

*While I was working
in the mine, 10 (Ten) a block
fell on my foot and hurtled on
the 18th October*

K Namai

THE UNION
REPORT OF PER
Name of Person injured
Occupation
Date of Accident
Location
If not injured in Mine
Name of Mine Supt.
Age of Person injured
What Family, if any
How long in employ
Name and address of
Was he an efficient
Where and in whose
Name of Physician
Name and P. O. Address
Nature and extent of A
When the
Case, Has
2d Room
slack, b
While
face can

REPORT OF PERSONAL INJURY.

Mine No. ✓

Sup'ts No.

Name of Person injured,

K. Namai

Occupation,

Help. Track-layer

Date of Accident,

Oct 18th

1904

Time

10 A.M.

Location,

Rock Springs

Mine No.

10

Entry No.

4

Room No.

24

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Beaser

Age of Person injured,

33 years

What Family, if any,

2 children

How long in employ, of Co.,

6 months

Name and address of nearest living Relative,

Condition of Life or Circumstances,

Was he an efficient man,

yes

Was he temperate,

yes

Where and in whose charge left,

Thyoming General Hospital.

Name of Physician called, if any,

P. Harney Reed.

Name and P. O. Address of Witnesses.

Albert Sebo, Rock Springs, Wyo.

Nature and extent of Accident,

Left leg fractured about 2 inches above the ankle.

Released

Cause, Was helping the Beaser on the above date, at Room was cut and he was shoveling the slack back from the face to gob. While working at this the coal fell off the face causing above injuries.

(Signature)

J. H. Paterson

Title,

Mine Foreman

Date

Oct 20th 1904,

Rock Springs Wyo

Dec. 9th 1904Statement of A. Sisimio Injured In #7 Mine
Dec. 4th 1904

I, A. Sisimio was working in #7 Mine Property of the H. P. Coal Company In # B Entry 26 Rooms about 9 O'Clock A.M. while Loading a Car about 6 Yards from the Room face was shoveling Coal into Car when a piece of Rock about 6" thick and 4' wide fell from the top and struck me on the right Hip Bruising my Hip.

I examined the hip at 7 O'Clock A.M. and the top sounded allwright. There was a pot Hole in the top and a slip which forced the Rock and caused it to fall. The rock fell between the timber which were 4 feet apart.

I could not have put up any more props to the Roof where this rock fell we set all our timber on the 2nd

The Mine Foreman Cautioned us several times about not keeping our Timber up closer to the face of Room

A. Sisimio

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

A. Sisinio

Occupation,

Miner

Date of Accident,

Dec 4th

Location,

Rock Springs

1904 Time

9 A.M.

Mine No.

7

Entry No.

B

Room No.

26

If not injured in Mine, state where,

Name of Mine Supt.

Geo. L. Black

Name of Mine Foreman,

John L. Dykes

Age of Person injured,

24 years

Married or Single

Single

What Family, if any,

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

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Joe Angelo, Rock Springs, Wyo

Was he an efficient man,

New Miner

Was he temperate,

Yes

Where and in whose charge left,

His friends

Name of Physician called, if any,

R. Harvey Reed

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Right hip slightly bruised

Released

Cause, Was engaged as a miner and while loading a car some rock fell on him and bruised his right hip. was careless and would allow the timber work to be neglected, did not seem to care whether place was safe or not, was cautioned about his carelessness on many occasions by me.

Quantity of timber was convenient to their rooms of a suitable length.

(Signature)

John L. Dykes.

Title,

Mine Foreman

Date

Dec 9th 1904

Rock Springs, Wyo. Dec. 9th 1904
 Statement of Joe Adams Injured in #17
 Mine on the 3rd day of Dec. Property of the U.P.
 Coal Company about 4.30 O. Clock P.M. I was
 coming down the C. Place with my Mule and when
 I came to the Entry I was on the narrow side
 of Place walking to keep the mule on the wide
 side and I went to step across the rope to get on
 the same side the mule was on and in doing
 so the rope raised up about a foot above the
 rollers and caught my foot and threw me down
 and in the fall I got my left elbow put out of
 place, the rope was coming up. I had never
 noticed the rope raise at this place before.
 I always walked on the narrow side to keep the
 Mule from getting across the rope

Joe Adams

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Joe AdamsOccupation, DriverDate of Accident, Dec 3rdLocation, Rock Springs

If not injured in Mine, state where, _____

1904 Time 4:30 P.M.Mine No. 7Entry No. "C" Plane Room No. _____Name of Mine Supt. Geo. L. BeachAge of Person injured, 26 years

What Family, if any, _____

How long in employ, of Co., About 4 months Condition of Life or Circumstances, _____Name and address of nearest living Relative, Thos. H. Haywood, Rock Springs, Wyo.Was he an efficient man, YesWhere and in whose charge left, Wyoming General HospitalName of Physician called, if any, R. Harney Reed

Name and P. O. Address of Witnesses. _____

Nature and extent of Accident, Left arm dislocated at elbow.*Released*

Cause, Was employed as a driver and while bringing his mule down "C" Plane, near "C" Entry. He was in the act of stepping across the rope on the plane, when the rope was moving slow and as he raised his foot to step across the rope, the rope at this time raised up, probably one foot above the rollers and caught his foot, throwing him, and in his fall, he caused the injury above described. He did not need to step across the rope and was aware that the rope raised above the rollers at this point. He was on the narrow side of the plane and there is a wide side to travel on, just before the accident, he fell by slipping on the rail. The drivers have the privilege of stopping the rope while they have their block on the plane. He says he did not know that the rope raised at this point but I believe he did, as he was very careless, as he traveled this road daily to and from his work for the past 6 weeks and could not help but know it.

(Signature)

John L. Dykes
Title, Mine Foreman

Date

Dec, 5th, 1904,

STATEMENTS OF WITNESSES.

Rak Springs Mine - Dec, 9th 1904
 Statement of Benj Smith Injured in # 7 Mine
 Property of the Union Pacific Coal Company on the
 7th day Dec - 04 I was driving in # A Entry and
 while going up # 31 Room on same entry with 2 Empty
 cars, the cars run off the track about the first X Cut in
 the Room, the Cars run off to the left side and I got on
 the right side to lift the car on the track again when
 the mule started up without me speaking to it and
 caught my left foot between the car wheel and the
 Rail of the track. I think I had my foot between the
 Car and the rail but am not sure just where it was
 I did not ask the men in the Room for any assistance
 I am satisfied they would have gave me assistance if
 I had asked them for it. I did not think my foot
 was hurt so much at first for I got the Car on the
 track again and took it to the Room face and
 walked down the Room. the I got on the Entry Drivers trip
 to start for the End side

Benj Smith

THE UNION
 REPORT OF

Name of Person injured
 Occupation
 Date of Accident
 Location
 If not injured in Mine

Name of Mine Supt.
 Age of Person injured
 What Family, if any,
 How long in employ, of
 Name and address of n
 Was he an efficient man
 Where and in whose cha
 Name of Physician calle

Name and P. O. Address
 Nature and extent of Acci
 from

Has e
 two cars
 the care
 to lift
 of the car
 to lift it
 and move
 between the
 the injury
 have had
 room for
 and was to

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

Ben. Smith
Driver

Occupation,

Date of Accident,

Dec 8th

Location,

Rock Springs

If not injured in Mine, state where,

190 4 Time
Mine No. 711 A.M.
Entry No. A.

Room No. 31

Name of Mine Supt.

Geo. Black

Age of Person injured,

17 years

What Family, if any,

Name of Mine Foreman,

John L. Dykes
Married or Single Single

How long in employ, of Co.,

One year

Name and address of nearest living Relative,

Chas. X Smith, Rock Springs

Was he an efficient man,

Yes

Where and in whose charge left,

His Parents

Name of Physician called, if any,

R. Harvey Reed

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Left foot bruised, probably a fracture

Released

cause, Has engaged as a driver and while hauling two cars up the above mentioned room the cars run off the track and in trying to lift the cars on again, he got on the side of the car that the mule was attached to to lift the car when the mule started and moved the car and caught his foot between the car wheel and the rail causing the injuries above described. He could have had assistance from the men in the room face to put the cars on the track and avoided any injury I believe, but was to stern to do so

(Signature)

John L. Dykes
Title, #1 Mine Foreman

Date

Dec 9th 1904

STATEMENTS OF WITNESSES.

Rock Springs Wyo. Nov. 13th., 1904.

Union Pacific Coal Company,

Dear Sir:--

I sharpening wedge for top of prop/ when I prop
fell against axe and hold of axes cut wrist at 12 o'clock, 13th Nov.
1904.

(Signed)

S. Miyamura.

Witness

H. Morioka.

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured,

S. Miyamura

Occupation,

Miner

Date of Accident,

Nov. 13th

Location,

Rock Springs

1904 Time

12 A.M.

Mine No.

9

Entry No.

4

Room No.

28

Name of Mine Supt.

Geo. L. Black

Name of Mine Foreman,

Jas. Soulsby

Age of Person injured,

24 years

Married or Single

Single

What Family, if any,

How long in employ, of Co., About one year

Condition of Life or Circumstances,

Name and address of nearest living Relative,

Rock Springs, Wyo.

Was he an efficient man,

Yes

Was he temperate,

Yes

Where and in whose charge left,

General Hospital

Name of Physician called, if any,

R. Harvey Reed

Name and P. O. Address of Witnesses.

Nature and extent of Accident,

Cut his left wrist.

Released

cause, He was making a wedge with the ax to put on top of a prop. He had the prop standing up loose and it fell over and struck the ax and it went against his wrist and cut it. There was no one to blame for the accident.

(Signature)

Jas. Soulsby

Title,

Mine Foreman

Nov 13th 14

Rock Springs, Wyo. December 12th., 1904.

Statement of William C. Wescott, regarding injuries received on the 29th. day of June, 1904, at about 3 P.M. by Mike Behan, (a small child) by being struck by a runaway team belonging to the Union Pacific Coal Company.

I am employed by The Union Pacific Coal Company as a clerk in their store at No. 4. At the time of the accident above referred to, in addition to my duties as a clerk, it was also a part of my duty to drive the team to deliver goods, haul freight, etc. On the day of the accident, June 29th., 1904, I drove a team of horses with a wagon to an ice house belonging to the Coal Company and stopped the team immediately along side of said ice house. On stopping, I applied the wagon brake and tied the lines to the brake, and entered the ice house together with Edward M. Oliver to get a supply of ice for the Store. We placed a board for use as a skid, reaching from the door of the ice house to the side of the wagon, and were in the act of sliding a cake of ice into the wagon when horse on off side looked around, saw the ice sliding and ran away. Neither one of us were able to reach the wagon on account of ice obstructing the door. The team ran about fifty yards and struck the boy referred to. The boy was standing in the street about twenty feet in front of house No 274, where he lived. The wagon also struck a post near this house, breaking it. The boy was not seriously injured. Was confined to the house for probably ten days and is now apparently, perfectly well.

William C. Wescott

I hereby certify that the foregoing statement is correct.

Edward M. Oliver

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, Mike BehunOccupation, PlayingDate of Accident, June 29Location, Rock Springs

If not injured in Mine, state where,

190 4 Time 3: PmMine No. —Entry No. —Room No. —

Name of Mine Supt.

Age of Person injured, 4 yearsWhat Family, if any, —How long in employ, of Co., —Name and address of nearest living Relative, John Behun, fatherWas he an efficient man, —Where and in whose charge left, Father & motherName of Physician called, if any, R H Reed U P Coal Co PhysicianName of Mine Forman, —Married or Single singleCondition of Life or Circumstances, —Was he temperate, —Name and P. O. Address of Witnesses. —Nature and extent of Accident, Hurt in back.*Released*

Cause, U P Coal Co store Dept. Team became frightened while loading a large cake of ice from the north end of the Ice house and ran around to the right towards house #274 and struck the boy near a post within about 20 feet of the house breaking the post off in the ground.

(Sgd) CR Stone, Storekeeper.

June 30-04

Date

(Signature)

Title,

Mr. Reynolds was injured in #34 room #5 entry #9 mine while unloading a mining machine and moving same to face of room in the following manner:

When unloading machine from truck he neglected to sufficiently block the truck wheels thus allowing the truck to run back when the machine slid off, leaving the machine unloaded on the room road several feet from the face. In order to move the machine foreward more easily he placed a jack pipe to act as roller, across the track under rear end of machine frame. A piece of rail used as skid under rear end of machine when machine was in position to work had been properly placed. He then proceeded to bar machine forward when it dropped off the roller it fell on the skid. Mr. Reynold's big toe was under the skid.

E. C. Stevens
Eye Witness.

(Signature)

Date

Title,

REPORT OF PERSONAL INJURY.

Mine No.

Sup'ts No.

Name of Person injured, *Mathew Reynolds*Occupation, *Machine Runner*Date of Accident, *November 28th*Location, *Rock Springs*

Place injured in Mine, state where,

1904 Time *9 a.m.*Mine No. *9*Entry No. *5*Room No. *34*Name of Mine Supt. *Geo. F. Black*Age of Person injured, *50 years*Family, if any, *Six (6)*Length of time in employ, of Co., *14 years*Name and address of nearest living Relative, *Rock Springs*Is he an efficient man, *Yes*Where and in whose charge left, *at home*Name of Physician called, if any, *R. H. Reid.*Name of Mine Foreman, *Jos. Saulsby*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,

*left toes bruised**Released*

cause, *He was unloading the machine of the truck and one of the rails turned over and the machine fell on his left foot and bruised his toes. There was no one to blame for the accident.*

(Sig) *Jos. Saulsby.*
mine foreman.

(Signature)

Date

To T. A. James.

This is to certify that John Smith while working on No. 9 Dump on the 29th day of November, 1904, broke third finger on right hand trying to uncouple car with a bar while trip was moving slow and end of bar striking corner of weigh house catching his finger. Car door was open and could not uncouple car without bar.

Olaf Rosewold.

(Signature)

Title,

REPORT OF PERSONAL INJURY.

Mine No. ✓

Sup'ts No.

Name of Person injured, *John Smith*
 Occupation, *Lumper*
 Date of Accident, *November 29th* 190*4* Time *4:40 P. M.*
 Location, *Rock Springs* Mine No. *9* Entry No. Room No.
 Where injured in Mine, state where, *# 9 Lump*

Name of Mine Supt. *Geo. F. Black* Name of Mine Foreman, *Jos. Soulsby*
 Age of Person injured, *37 years* Married or Single *married*
 Number of Family, if any, *two (2)*
 How long in employ, of Co., *6 months* Condition of Life or Circumstances,
 Name and address of nearest living Relative, *Germany*
 Was he an efficient man, *Yes* Was he temperate, *Yes*
 Where and in whose charge left, *Mr. Chamberlin*
 Name of Physician called, if any,

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Finger crushed. Third finger on right hand.*

Released

Cause, *While I was working on # 9 dump on the 29th of November running loaded cars to the tipple there was one coupling that was tight and could not get it loose. I took a bar and tried to pry the hook out and got my hand between the bar and the weighroom crushing the 3rd finger on my right hand.*

(Sig.) *John ^{his} + Smith*
mark

(Sig.) *Trk. James*
Outside Foreman.

(Signature)

Date

Title,

THE UNION PACIFIC COAL CO.
REPORT OF PERSONAL INJURY.

Form 123.

190

Mine No.

Sup'ts No.

Name of Person injured, *Matt Larson*
Occupation, *Box Car Loader*
Date of Accident, *November 28th* 190 *4* Time *9 a. m.*
Location, *Rock Springs* Mine No. *7* Entry No. Room No.
If not injured in Mine, state where, *on dump*

Name of Mine Supt. *Geo. I. Black* Name of ^{outside} Mine Foreman, *J. A. James*
Age of Person injured, *20 years* Married or Single *Single*
What Family, if any,
How long in employ, of Co., *3 months* Condition of Life or Circumstances,
Name and address of nearest living Relative, *Brother in Michigan*
Was he an efficient man, *yes* Was he temperate, *yes*
Where and in whose charge left,
Name of Physician called, if any, *Dr. Chambers*

Name and P. O. Address of Witnesses.

Nature and extent of Accident, *Two fingers crushed on left hand. First and second finger.*

Released

Cause, *The motor came on the dump with a trip of cars and as the motor stopped I tried to uncouple the trip from the motor and while uncoupling the motor started catching my fingers between the hook and draw bar crushing the first and second finger on the left hand. I gave the motor man the signal to go ahead.*

(Sig) *Matt Larson*

(Sig) *J. A. James*
Outside Foreman

(Signature)

Date

Title,