

Date : 28/03/2019 3:33:05 PM

From : "MIRAdministration@dnrme.qld.gov.au"

To : "MIRAdministration@dnrme.qld.gov.au" , "MIR-Rockhampton" , 4(6) Personal information@glencore.com.au"

Subject : Completed Mining incident report No. 141560 (30 - High potential no lost time [nmsf: 35])

Type of incident

Incident report number: 141560

Recipients: 3) Personal information@glencore.com.au and MIRAdministration@dnrme.qld.gov.au

- 1 **Incident type:** 30 - High potential no lost time [nmsf: 35]
Medical Treatment injury: No
- 2 **Summary/title of incident**
Fire – surface mobile compressor fire – 701 Borehole Riser, East Mains Road
Incident Classification: **Code:** 107 - Outbreak of fire [nmsf: 3825]
Breakdown: **Code:** Mobile plant and transport [nmsf: 2837]
Sub-Breakdown: **Code:** Other mobile plant [nmsf: 2856]
Breakdown Class: **Code:** Other and not specified mobile plant [nmsf: 2973]
Detailed Classification: **Code:** Other and not specified mobile plant [nmsf: 3385]
Compensation ID: 999999
Mechanism: **Code:** Vehicle incidents and other [nmsf: 2793]
Sub-Mechanism: **Code:** Unspecified mechanisms of incident [nmsf: 2835]
- 3 **Previously notified:** Yes
Date: 02/03/2019

Mine details

- 4 **Mine/quarry name** Oaky North Mine **Code:** M01404 **Old Code:**
- 5 **Mine type:** coalUnderground
- 6 **Company contact:** 4(6) Personal information
Phone: 78B(2)
- 7 **Where in the mine did the incident occur?** Mobile Compressor **Code:** 323 - Other surface location [nmsf: 9996]
Surface or underground? surface

Incident details

- 8 **Date of incident:** 02/03/2019
- 9 **Time of incident:** 04 30 (24 hr clock)
- 10 **Time shift started:** 18 00
Shift duration: 12 00
No. of complete shifts/day worked prior to accident: 3
No. of days in shift cycle: 14
No. of days rostered off prior to starting current shift cycle: 7
Total hrs worked in 24 hr period prior to accident, inc travel time: 12
Travel Time: 00 20
Rostered Travel Time: 00 20
Roster Pattern: 7/7
- 11 **Date of first full working day lost:**
- 12 **Primary equipment/tool involved in incident:** Mobile Compressor **Code:** 187 - Compressor-mobile/portable [nmsf: 3900]
- 13 **Describe exactly how did the incident occur:**
Fire – surface mobile compressor fire – 701 Borehole Riser, East Mains Road
- 14 **What hazards have been identified from this incident:**

Injured person details

15-21 Questions 15 through 22 not required for 'High potential no lost time' incidents

23 Description of personal damage:

Nil

Is this a permanent incapacity? No

Incident causes

24 What happened leading up to the injury/incident/disease?

Organisational

Codes 122 - No org. factor involved

Nil

Task/environment conditions

Codes 322 - No task/environment factor involved

Nil

Individual/team actions

Codes 222 - No ind./team factor involved

Nil

Absent or failed defences

Codes 403 - Failure/breakdown of equipment

Equipment fire

Preventative action

25 Give details of any control measures/actions being considered and/or implemented to prevent recurrences

Nil

Date: 28/03/2019

Your full name: (6) Personal infor

Position: Health and Hygiene Officer

Email: (5) Personal info@glencore.com.au

Office use

☐	☐	☐	☐	☐	☐	☐	☐
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Inspector/inspection officer:

Signed:

Entered by:

User IP address: 172.18.4.56

User agent: Mozilla/5.0 (Windows NT 10.0; WOW64; Trident/7.0; rv:11.0) like Gecko

Email address: (6) Personal info@glencore.com.au

Submitted Date/Time: 28/03/2019 15:24:53

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MINES INSPECTORATE VERSION 11 November 2017	NOTICE OF CONFIRMATION TO THE MINES INSPECTORATE OF A COAL MINE <u>HIGH POTENTIAL INCIDENT, SERIOUS ACCIDENT OR DISEASE</u>
MINE: OAKY NORTH MINE	DATE: 4/03/2019
<i>This notice* is made by or on behalf of the SSE primarily** pursuant to section 198(4) or (5) of the CSMHA to confirm the initial oral report to an inspector and an ISHR. It is also used to report prescribed diseases pursuant to section 198(6) of the CSMHA.</i>	
NOTE: * Notice required within 48 hours or 24 hours in the case of a fatality: ** Also serves to report "Non-Reportable Incidents"	

SECTION 1: INITIAL ORAL REPORT		
Made By: Brad Watson	Company Position: SSE	Phone: 4(6) Personal inform
Made To: Insp Steve Smith	Time: 10:30 hrs	Date: 2/03/2019
Made To: ISHR 4(6) Personal info	Time: 10:35 hrs	Date: 2/03/2019
Made To: SSHR 4(6) Personal inform	Time: 10:40 hrs	Date: 2/03/2019

SECTION 2: SERIOUS ACCIDENT	
Is this a SERIOUS ACCIDENT:	NO
NOTE 1:	Act s16: A SERIOUS ACCIDENT is one that causes (a) death or (b) a person to be admitted to hospital as an in-patient for treatment of the injury. Also by definition it is a HPI
NOTE 2:	While not included in the definition of SERIOUS ACCIDENT, Act s198(2)(iii) requires immediate notification of an accident "that causes a person to suffer an injury, causing or likely to cause, a permanent injury to a person's safety or health". (This is also a HPI as defined by Act s.17)
NOTE 3:	Schedule 9 of the Regulation defines SERIOUS BODILY INJURY as an "injury endangering, or likely to endanger, life or causing, or likely to cause, a permanent injury to health" of a person.

SECTION 3: PRESCRIBED HPI TYPE BEING REPORTED	
SCHEDULE 1C Act 198(2b)	8 A fire on a vehicle or plant
SCHEDULE 2 Part 1 Act 200(1)	Choose an item. Must not interfere with site without inspectorate permission
SCHEDULE 2 Part 2 Act 201(1c)	Choose an item. Investigation Report to an inspector within 1 month.
NOTE 1:	Some HPI types in Schedule 1C also qualify as types in Schedule 2, Part 1 and/or Part 2. See details on reverse of this form

SECTION 4: NON PRESCRIBED HPI OR NON REPORTABLE INCIDENT NRI	
NON PRESCRIBED HPI ☐	Where a "match" cannot be made to the Schedule 1C but the event is a HPI as defined by CSMHA section 17
NON REPORTABLE INCIDENT (NRI) ☐	Where the incident is significant and has a safety "message" to share with industry
NOTE	Act s17 HPI "an event, or a series of events, that causes or has the potential to cause a significant adverse effect on the safety or health of a person"

SECTION 5: REPORTABLE DISEASE SCHEDULE 1				
Chronic obstructive pulmonary disease ☐	coal workers' pneumoconiosis ☐	legionellosis ☐	silicosis ☐	Other
NOTE 1 To be reportable, the disease must have been contracted by a current or former coal mine worker who was exposed to dust/agent and has had the diagnosis confirmed by a nominated medical adviser or another doctor				
NOTE 2: Tick relevant box above (no further disease information is required on this form)				

SECTION 6: DETAILS OF THE EVENT	
NOTE Information provided in this section includes the "Primary Information" required by s.198(3) of the Act	
CONCISE DESCRIPTION OF THE NATURE OF THE EVENT (put all other information in the "Other information/details" field below)	
Fire – surface mobile compressor fire – 701 Borehole Riser, East Mains Road	
DATE: 2/03/2019	TIME: ~0430 hrs
LOCATION: Surface - Oaky North Mine	
EQUIPMENT INVOLVED: Mobile Compressor	DAMAGE: 'Total Write Off'
ENVIRONMENTAL CONDITIONS: (x) ☐ Light: ☐ Dark: ☒ Sunny: ☐ Wet: ☐ Dry: ☒ Windy: ☐	
PERSONS INVOLVED: (x) ☐ Number: 0 ☐ Employee ☐ Contractor ☐ Labour Hire ☐ Visitor ☐	
NAME(S) OF DECEASED:	TYPE DEATH NATURAL ☐ ACCIDENT ☐
NAME(S) OF PERSONS INJURED	INJURIES
	EMPLOYER (contractor where applicable)
NAMES OF ANYONE WHO SAW THE INCIDENT OR WERE PRESENT AT THE TIME AND IF NO WITNESSES, NAME OF PERSON FINDING THE INCIDENT	NAME 4p4(6) Personal informat
	EMPLOYER (contractor where applicable) PIMS Group
OTHER INFORMATION/DETAIL:	