

UNITED STATES DEPARTMENT OF THE INTERIOR  
 MINERALS MANAGEMENT SERVICE  
 GULF OF MEXICO REGION  
**ACCIDENT INVESTIGATION REPORT**

1. OCCURRED  
 DATE: **27-FEB-2009** TIME: **1430** HOURS

2. OPERATOR: **Mariner Gulf of Mexico LLC**  
 REPRESENTATIVE: **Daigle, Stephen**  
 TELEPHONE: **(713) 954-3883**  
 CONTRACTOR:  
 REPRESENTATIVE:  
 TELEPHONE:

3. OPERATOR/CONTRACTOR REPRESENTATIVE/SUPERVISOR  
 ON SITE AT TIME OF INCIDENT:

4. LEASE: **G23197**  
 AREA: **HI** LATITUDE:  
 BLOCK: **165** LONGITUDE:

5. PLATFORM:  
 RIG NAME:

6. ACTIVITY:  EXPLORATION (POE)  
 DEVELOPMENT/PRODUCTION  
 (DOCD/POD)

7. TYPE:  
 HISTORIC INJURY  
 REQUIRED EVACUATION  
 LTA (1-3 days)  
 LTA (>3 days) **1**  
 RW/JT (1-3 days)  
 RW/JT (>3 days)  
 Other Injury

FATALITY  
 POLLUTION  
 FIRE  
 EXPLOSION

LWC  HISTORIC BLOWOUT  
 UNDERGROUND  
 SURFACE  
 DEVERTER  
 SURFACE EQUIPMENT FAILURE OR PROCEDURES

COLLISION  HISTORIC  >\$25K  <=\$25K

STRUCTURAL DAMAGE  
 CRANE  
 OTHER LIFTING DEVICE  
 DAMAGED/DISABLED SAFETY SYS.  
 INCIDENT >\$25K  
 H2S/15MIN./20PPM  
 REQUIRED MUSTER  
 SHUTDOWN FROM GAS RELEASE  
 OTHER

6. OPERATION:

PRODUCTION  
 DRILLING  
 WORKOVER  
 COMPLETION  
 HELICOPTER  
 MOTOR VESSEL  
 PIPELINE SEGMENT NO.  
 OTHER

8. CAUSE:

EQUIPMENT FAILURE  
 HUMAN ERROR  
 EXTERNAL DAMAGE  
 SLIP/TRIP/FALL  
 WEATHER RELATED  
 LEAK  
 UPSET H2O TREATING  
 OVERBOARD DRILLING FLUID  
 OTHER \_\_\_\_\_

9. WATER DEPTH: FT.

10. DISTANCE FROM SHORE: MI.

11. WIND DIRECTION:  
 SPEED: M.P.H.

12. CURRENT DIRECTION:  
 SPEED: M.P.H.

13. SEA STATE: FT.

17. DESCRIBE IN SEQUENCE HOW ACCIDENT HAPPENED:

On 02/27/09, four contract employees working for Mariner Gulf of Mexico landed at Mariner's High Island (HI) 165 # 1 platform. The contract employees were performing a pre-job site survey and bringing additional equipment to the platform for the following days work. The scope of work was to perform minor grating repair to the platform which was a result of Hurricane Ike. The four employees descended down the stairway to the main deck to survey the area. The welder's helper then returned to the heli-deck to begin offloading equipment. The remaining contract employees discussed the work to be performed. It was at that time that they spotted a 3" X 3" section of grating that was partially hanging downward from the well access deck. They made the decision to pick this section up by hand and place it correctly back in place to eliminate a fall hazard. The three contract employees accessed the well deck by climbing a fixed ladder connecting the two decks. The employees began to shore up the grating when one of them decided he could get a better hold of the piece of grating by accessing the area behind the open section. This area had grating and it appeared to be secure with grating clips (witness statement). When he repositioned his body to move the piece of hanging grating, the piece of grating on which he was standing shifted due to loose grating clamps. This caused the grating to tilt. The employee lost his balance and fell through the hole created by the tilted piece of grating. The employee fell from the well deck to the main deck striking his left chest and torso on a handrail. The injured employee was transported by helicopter to Brazoria County Hospital. Once he was evaluated and stabilized he was transported by ground to Herman Hospital in Houston. The diagnosis was three fractured ribs to his left ribcage and a bruised liver. On 3/2/09, the injured operator was released from the hospital with restricted work activity.

18. LIST THE PROBABLE CAUSE(S) OF ACCIDENT:

Unsecured grating (Loose Grating Clips)

19. LIST THE CONTRIBUTING CAUSE(S) OF ACCIDENT:

Failure to identify hazards - Employees failed to ensure grating surrounding the hanging piece was secure before accessing. No JSA was conducted prior to the visit as this was scheduled to be a site survey.

20. LIST THE ADDITIONAL INFORMATION:

Mariner will inspect it's other platforms for loose grating to prevent a recurrence.

21. PROPERTY DAMAGED:

NATURE OF DAMAGE:

ESTIMATED AMOUNT (TOTAL):

22. RECOMMENDATIONS TO PREVENT RECURRANCE NARRATIVE:

**The MMS Lake Jackson District makes no recommendation to the MMS Regional Office of Safety Management (OSM).**

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: **NO**

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE:

25. DATE OF ONSITE INVESTIGATION:

**02-MAR-2009**

26. ONSITE TEAM MEMBERS:

**Craig Pohler /**

29. ACCIDENT INVESTIGATION

PANEL FORMED: **NO**

OCS REPORT:

30. DISTRICT SUPERVISOR:

**John McCarroll**

APPROVED

DATE: **27-APR-2009**