### Accident Investigation Report

**1. Occurred**

**Date:** 01-APR-2007  **Time:** 1645  **Hours**

**2. Operator:** Newfield Exploration Company  
**Representative:** Gary Harrington  
**Telephone:** (281) 847-6096  
**Contractor:** Danos & Curole Marine Contracto  
**Representative:** Brad Baronne  
**Telephone:** (985) 641-3853

**3. Operator/Contractor Representative/Supervisor on Site at Time of Incident:**

**4. Lease:** G12024  
**Area:** ST  
**Latitude:** 193  
**Longitude:**

**5. Platform:** A  
**Rig Name:**

**6. Activity:**  
**Exploration (POE)**  
**Development/Production (DOCD/POD)**

**7. Type:**  
- [ ] Historic Injury  
- [ ] Equipment Failure  
- [x] Human Error  
- [ ] External Damage  
- [ ] Slip/Trip/Fall  
- [ ] Weather Related  
- [ ] Leak  
- [ ] Upset H2O Treating  
- [ ] Overboard Drilling Fluid  
- [ ] Other

**8. Cause:**

**9. Water Depth:** 121 FT.

**10. Distance from Shore:** 36 MI.

**11. Wind Direction:** S  
**Speed:** 10 M.P.H.

**12. Current Direction:** NE  
**Speed:** 2 M.P.H.

**13. Sea State:** 4 FT.
17. INVESTIGATION FINDINGS:

The Injured Party (IP) was holding a clamp on the hydraulic return line for the crane with a pair of channel locks. Another operator was cutting a rusted bolt from the clamp with a battery powered Sawzall. The blade stuck in the bolt and the saw jumped causing the IP to retract his hand. When the IP moved his hand, the saw blade struck the back of the IP's left hand causing a one inch laceration. The lacerated area was covered with grease and contaminants. The wound was field dressed, and then the IP was evacuated in order to receive immediate medical attention. The IP did not receive stitches at that time, but was given some prescription medication. The next day, the IP saw an orthopedic surgeon because of stiffness in three fingers. The IP's hand required surgery to repair ligaments that were damaged during the incident. The IP was placed on light duty on 9 April 2007 and was returned to full duty on 30 April 2007.

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

The blade of the saw got stuck causing the saw to jump. The IP moved his hand to try and get out of the way, but his hand was struck with the blade.

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

None.

20. LIST THE ADDITIONAL INFORMATION:

N/A

21. PROPERTY DAMAGED: None

NATURE OF DAMAGE: N/A

ESTIMATED AMOUNT (TOTAL): $

22. RECOMMENDATIONS TO PREVENT RECURRANCE NARRATIVE:

Due to the specific nature of this incident, the Houma District has no recommendations to report to the Regional Office of Safety Management.

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: NO

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE:

None

25. DATE OF ONSITE INVESTIGATION: 28-JUL-2010
26. ONSITE TEAM MEMBERS:
   Amy Wilson

29. ACCIDENT INVESTIGATION PANEL FORMED:
   NO

30. DISTRICT SUPERVISOR:
   Michael J. Saucier

APPROVED DATE: 31-MAY-2007
INJURY/FATALITY/WITNESS ATTACHMENT

☐ OPERATOR REPRESENTATIVE  ☐ INJURY
☒ CONTRACTOR REPRESENTATIVE  ☐ FATALITY
☐ OTHER ______________________  ☒ WITNESS

NAME:
HOME ADDRESS:
CITY:  STATE:
WORK PHONE:  TOTAL OFFSHORE EXPERIENCE:  YEARS

EMPLOYED BY:
BUSINESS ADDRESS:
CITY:  STATE:
ZIP CODE:

☐ OPERATOR REPRESENTATIVE  ☐ INJURY
☒ CONTRACTOR REPRESENTATIVE  ☐ FATALITY
☐ OTHER ______________________  ☒ WITNESS

NAME:
HOME ADDRESS:
CITY:  STATE:
WORK PHONE:  TOTAL OFFSHORE EXPERIENCE:  YEARS

EMPLOYED BY:
BUSINESS ADDRESS:
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ZIP CODE:
INJURY/FATALITY/WITNESS ATTACHMENT

[ ] OPERATOR REPRESENTATIVE  [x] INJURY
[ ] CONTRACTOR REPRESENTATIVE  [ ] FATALITY
[ ] OTHER  Platform Crane Services  [ ] WITNESS

NAME:
HOME ADDRESS:
CITY: STATE:
WORK PHONE: TOTAL OFFSHORE EXPERIENCE: YEARS

EMPLOYED BY:
BUSINESS ADDRESS:
CITY: STATE:
ZIP CODE: