ALERT 14 – 21

LACK OF COMMUNICATION / FAILURE TO STOP JOB RESULTS IN FATALITY

WHAT HAPPENED:
The rig crew was in the process of running casing. They had reached a point where a marker joint needed to be picked up and placed into the pipe handling system so that it could be made up in the casing string. The crew retrieved the forklift that had been rented for use on this location. They tilted the fork carriage forward so that the forks could be spread out. As the forklift operator tilted the 600 pound (272 kilogram) fork carriage forward, and because the hydraulic pins on the bottom were not attached to the carriage, the entire carriage swung free and was suspended only by the hooks. The crew attempted to hammer the pins out, not realizing they were hydraulic. Their intent was to pin the carriage correctly. The night company man was observing the operation and, after a discussion with the employees, it was agreed that the lift would be used in its “as is” condition to place the marker joint into the pipe handling system; and that the forklift would be corrected later. One employee was positioned in front of the forks in order to slide it over while two other employees pushed on the bottom section of the fork and away from the carriage. One employee stated to the employee, who was ultimately fatally injured, “Hey, you are in a bad spot” as he was standing directly underneath the carriage. The employee replied, “This is only going to take a second.” As they pushed on the bottom section of the fork, the fork carriage was pushed free of its hanging points and the entire fork carriage fell off of the lift. As the fork carriage fell, it struck the employee who was standing directly underneath the carriage on the head, thereby knocking and pinning him to the ground. He sustained fatal injuries.

WHAT CAUSED IT:
• The day company man had ordered a bucket to be used on the lift later to level the location. When the bucket was delivered, the forks were removed and the bucket was picked up and set aside off location. When the forks were picked back up, they appeared to be pinned correctly; however, the pins on the bottom of the carriage were not engaged through the carriage (they were only through the carriage holder).
• Untrained personnel were used to remove and reinstall the forks on the forklift unit.

CORRECTIVE ACTIONS: To address this incident, this company did the following:
• The company re-emphasized STOP JOB authority to all personnel. Regardless of who is giving the direction, if the job is not safe, it will not be done until it is made safe.
• The company reminded all employees who are trained on forklifts that they are not permitted to remove the forks for any reason. If the forklift is rented, the employee will politely tell the company man that this task requires permission from the Tool Pusher.
• The company notified the other rigs in their fleet of the event. All personnel were instructed to never remove forks from the system. If the operator requires the forks removed and the forklift used for a different task, then they must call someone out who is trained to do so.
• The company will continue to train their personnel as forklift operators only.
• The company re-emphasized with all personnel that inspections at shift change or before the use of the forklift after shift change is mandatory. If the forklift is not in proper working condition, it shall be locked-out and tagged-out until it is fixed.

The Corrective Actions stated in this alert are one company’s attempts to address the incident, and do not necessarily reflect the position of IADC or the IADC HSE Committee.

This material is presented for information purposes only. Managers & Supervisors should evaluate this information to determine if it can be applied to their own situations and practices Copyright © 2014 International Association of Drilling Contractors All rights reserved.
Issued July 2014