FEDERAL RAILROAD	ADMINISTRA	TION		RA	IL EQU	IPME1	NT AC	<u>CIDE</u>	NT/IN	CIDE	<u>INT R</u>	<u>REPOI</u>	RT				OMB Approv	al No: 2130-0500	
1. Name of Reporting Railroad										phabetic				1b. Rai	b. Railroad Accident/Incident No.				
Union Pacific Rai									UP							0420GC025			
2. Name of Other Railro	ad or Other Enti	ity with Consi	st Invol	ved					2a. Alj	2a. Alphabetic Code						road Accider	nt/Incident No	D.	
3. Name of Railroad or C	Other Entity Res	ponsible for T	rack M	aintenance	(single enti	ry)			3a. Al	3a. Alphabetic Code 3b						road Acciden	nt/Incident No).	
Union Pacific Rai	lroad Comp	any [UP]							UP	UP						0420GC025			
4. U. S. DOT Grade Cros	_									5. Date of Accident/Incident 6						of Accident/	Incident		
									0	0 4 2 7			yea 2	ar 020	6:43		ам 🗌	PM X	
7. Type of Accident/	. Derailment					7. Hwy-rail cr					10. Explosion-detonation				Other	Code			
Incident (single entry in code box)	 Head on coll Rear end coll 		5. Ra		-			-			-	ture		(describe in narrative)	09				
8. Cars Carrying	9. HAZM			roken train co		10. Cars Releasing			11. People			Гипрасы		12. Sub	division	<u> </u>			
HAZMAT		Damag	iged/			HAZMAT				Evacua			•						
N/A		Deraile	.ed		N/A	N/A							N/A			LAFAYETTE SUB			
13. Nearest					14. Milepost (to			15. 5	State		Code 16. County								
City/	NAONT					nearest				Abbr.		48	TERRI	PPSOI	N.T				
Town BEAU 17. Temperature (F)	MONT	18. Visib	bility	(single entry)	/)	Code 19. Weather (s							JEFFI	Code		20. Type of Track			
(specify if minus)	0	1. Da	-	3. Dusk	, 		1. Cl		3. Rain	1	5. Sleet				1. Main 3. Siding			Code	
	79 ° F	2. Da	ay	4. Dark		3 2. Cloudy			4. Fog					1		2. Yard 4. Industry			
21. Track Name/ Number				I	22. FRA Track Co									24. Time Table Direction Code 1. North 3.East					
YARD 012					`	Class (1-9, X)				Density (gross tons in millions)					2. South 4. West 3				
25. Type of Equipment	1. Freight train	1	5. Sin	ngle car	9. Maint./ins	spect. car	D	. EMU		2	26. Was I	Equipmen	ıt		27. Train Number/Symbol				
Consist	2. Passenger tr	_			A. Spec. Mo			. DMU	Cox	Ja L		nded?	- 17		Code YBM2				
(single entry) 3. Commuter train-Pulling 7. Yard/switching B. Passenger Train-P 4. Work train 8. Light loco(s). C. Commuter Train-I							-		Code 1. Yes 2. No 8						Y Y	DIV12			
28. Speed (recorded sp	reed	Co	ode	30. Type of			des that app	ply)									rolled Locome		
if available)				1	on (Mandat					2							tely controlled	-	
R - Recorded E - Estimated	005 M	MPH E	Æ	Signaled Method of 0	d 2. Not S Operation/Au	Signaled uthority for	Movemen	ıt (Maı	ndatory)	5							ntrol portable ntrol tower op		
	ross tonnage,		-	-	ndication 2.	•											ntrol portable		
excluding power un	its)			1	Register Territo	•	Other Than I	Main Tr	ack	K-Re	stricted !	Speed or	Equivalen	ıt		more than one remote			
		0	Supplemental/Adjunct Codes (Mandatory*) * Mandatory to the extent that all applicable codes are of						entered						co	control transmitter Code 3			
31. Principal Car/Unit		a. Initia	al and N	umber	b. Position	n in Train	n Train c. Loaded			(yes/no) 32. If any railroad employee(s) te					ted for drug/alcohol use, enter the number that				
(1) First involved	4									were positi			ve in the ap	ppropria	te box.	ox. Alcohol		Drugs	
(derailed, struck, etc)		,	UPY000361			003													
	echanical,		<u> </u>	7000-	1	000				33.Was this consist transport				orting pa	g passengers ? (y/n)				
34. Locomotive Units		a. Head		Mid 7	Train			35, Cars	35. Cars				Lc	Loaded Empty					
(Exclude EMU, DMU, and Cab Car Locomotives.)		a. Head End		b. Manual c. Remote		- 1	Rear End d. Manual e. Ren			EMU, I	OMU, and	MU, and Cab Car a. Fre				c. Freigh	7	e. Caboose	
(1) Total in Train		4		0 0		0	_	0		(1) Total in Equipment Consist				0	0	0	0	0	
(2) Total Derailed	2	2 0			0 0 0			(2) Total Derailed					0	0	0	0	0		
36. Equipment Damage			37. Track, Signal, Way,				38. Prima	38. Primary Cause					39. Contrib	uting Cause					
This Consist	\$ 9.	.418	8	& Structure Da	amage .	\$	30,363	ı	Code		1		M404		Code		1		
			of Crew	w Members								Length of Ti			ime on Duty	ne on Duty			
40. Engineers/ Operators	41. Firemen		42. Co	Conductors			3. Brakemen			44. Engineer/Operator						45. Conductor			
Casualties to:	46. Railroad E	Employees	ees 47. Train Passengers		rs	48. Others			Hrs:	Hrs: 03 Mins: 49a. Special Study Block A			43		Hrs:	Hrs: Mins: Decial Study Block B			
Fatal	0		0		+	0													
Nonfatal	0		0			0			CWR 000-0					0-000-000	00-000				
50. Latitude 30.072163									51. Longit	I. Longitude					-94.1	-94.153472			
RIDING THE PRIVATE DETERMINED THAT	30.072105																		
53. Typed/Printed Name	&		_					—							55	i. Date			
							54 0												

NOTE: This report is part of the reporting railroad's accident report pursuant to the accident reports statute and, as such shall not "be admitted as evidence or used for any purpose in any suit or action for damages growing out of any matter mentioned in said report...." 49 U.S.C. 20903. See 49 C.F.R. 225.7 (b).

This collection of information is mandatory under 49 CFR 225, and is used by FRA to monitor national rail safety. Public reporting burden is estimated to average 2 hours per response, including the ime for reviewing instructions, searching existing databases, gathering and maintaining the data needed, and completing and reviewing the collection of information. The information collected is a natter of public record, and no confidentiality is promised to any respondent. Please note that an agency may not conduct or sponsor, and a person is not required to respond to a collection of nformation unless it displays a currently valid OMB control number. The OMB control number for this collection is 2130-0500.