I. Name of Reporting Ra	ilroad				JIPMENT		1a. Alpha					1b. Railro		MB Approval /Incident No.				
								*										
Union Pacific Railroad Company [UP] 2. Name of Other Railroad or Other Entity with Consist Involved								UP 2a. Alphabetic Code					2b. Railroad Accident/Incident No.					
2. France of Outer Rallio	and of Other Entity W	an consis					Za. Aiplia	and et				20. Kallo	aa i teetuelli					
3. Name of Railroad or C	Other Entity Response	sible for Tra	ack Maintenance	(single en	utry)		3a. Alpha	abetic Co	ode			3b. Railro	ad Accident/	Incident No.				
Union Pacific Rai	UP					1120G	1120GC037											
4. U. S. DOT Grade Cros							5. Date of	of Accide	ent/Incident				f Accident/I	ncident				
4. 0. 5. DOI Glade Clos	ssing identification i	vullioer	1					onth	day	yea				AM	PM			
7. Type of Accident/	1 Da	railment		ide collision		7. Hwy-rai		1	2 4	plosion-detor	020	1:40 13. Of			Code			
Incident (single		ad on collis		aking collisi		8. RR grad	•			e/violent rup			describe in)					
entry in code box)		ar end colli		Broken train o		9. Obstruct				her impacts			arrative)		11			
8. Cars Carrying		9. HAZMA	AT Cars		10. Cars Re	eleasing		11. Pe	ople			12. Subdi	vision		•			
HAZMAT		Damage			HAZM	MAT		Eva	acuated									
N/A		Deraile	d	N/A		N/A				N/A		SABIN	NE IND L	D				
13. Nearest					14. Milepo		15. Stat		Code	16. Count	Y							
City/	MONT				neare.			obr.	40		DCON	т						
Town BEAU 17. Temperature (F)	MONT	18. Visibil	lity (single entry	v)	Code 19	28.85 9. Weather (si		x	48	JEFFF	Code	20. Type	of Track		Code			
(specify if minus)		1. Dav				1. Clear	3. Rain		5. Sleet	1	coue	1. Mai		iding	1			
	76 ^o F	2. Da	y 4. Dark		2	2. Cloudy	4. Fog		6. Snow		2	2. Yar	d 4. Ii	ndustry	4			
21. Track Name/				22.	FRA Track	Co		nual Trac	2k				Table Direct		Code			
Number	117				Class (1-9, X)		De	ensity	gross tons)			1. Nor 2. Sou						
SABINE IND LD 25. Type of Equipment			5. Single car	9. Maint./ir	ispect. car	D. EMU	in) Was Equipm	ent			III 4. v Frain Numb		2			
Consist	2. Passenger train-		6. Cut of cars	A. Spec. M	-	E. DMU			Attended?									
(single entry)	3. Commuter train	-Pulling	7. Yard/switching	B. Passeng	er Train-Pushin	g	Code		1. Yes	2. No		ode RB	MP					
	4. Work train		8. Light loco(s).	C. Commu	ter Train-Pushi	ıg	1					Y						
28. Speed (recorded sp	beed	Cod			(enter codes	that apply)								lled Locomo				
<i>if available)</i> R - Recorded			1. Signalizati	ion (Manda d 2 Not	atory) Signaled		2 0 = Not a remotely controlled operation 1 = Remote control portable transmitter											
E - Estimated	007 MPH	E	-		Authority for Mo	ovement (Ma												
	oss tonnage,			-	. Direct Train C									rol portable tr				
excluding power un	its)		4. Block P	legister Terr	itory 5. Othe	er Than Main T	rack 1	K-Restri	icted Speed o	or Equivalen	t	more	than one re	mote				
	1	13,829		-	Codes (Manda							contr	ol transmitte	er	Code			
		, 			ent that all appli										0			
31. Principal Car/Unit		a. Initial	and Number	b. Positio	on in Train	c. Load	ed (yes/no)	3				ed for drug/al						
 First involved (derailed, struck, etc.) 	a)								were pos	itive in the ap	propriat	e box.	A	lcohol	Drugs			
(aeranea, sirack, en	-)	I I	UP006694		001													
(2) Causing (if me	echanical,							3	33.Was this co	onsist transpo	rting pa	ssengers ? (y/n)					
cause reported)					000		-								No			
34. Locomotive Units		a. Head		Train		ar End	35. Cars		U			aded		npty				
Exclude EMU, DMU, ar ocomotives.)	nd Cab Car	End	b. Manual	c. Remote	d. Manual	e. Remote	Locomotive		U, and Cab C	ar a.	Freight	b. Pass.	c. Freight	d. Pass.	e. Caboo			
(1) Total in Train		2		0	1	•	(1) Tota	l in Equi	pment Consis	·+	100	0	0	0	0			
(1) Total In Train (2) Total Derailed		2	0	0	1	0		l Deraile	-		100	0	0	0	0			
		0	0	÷	0	0	. ,		u		0	0	0	0	0			
36. Equipment Damage This Consist			 Track, Signal, V & Structure D 			150	38. Primary Code	ause				 Contribut Code 	ing Cause					
This Consist	\$ 14,68				\$	150	Code			M406								
		Number of	f Crew Members	T	(A. D.).			10		Leng		me on Duty						
40. Engineers/ Operators	41. Firemen		42. Conductors		43. Brakemen		44. Engineer	Operato	r			45. Conducto	r					
Operators 1			1				Hrs:	02	Mins	: 25		Hrs:	02	Mins:	25			
Casualties to:	46. Railroad Empl	oyees	47. Train Passenge	rs	48. Others		49a. Special	Study Bl	lock A		49b.	Special Study	Block B					
Fatal																		
	atal000Ionfatal000			(J	CWR				000	-000-000							
N. C. 1)															
Nonfatal	0		0			,	-				_				-94.111128			
50. Latitude	0		30.0739	126	·	,	51. Longitud	e				_0/ 11	1128					

53. Typed/Printed Name &		55. Date						
Title of Preparer	54. Signature							
NOTE: This report is part of the reporting railroad's accident report pursuant to	TE: 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								
matter 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.								