

NATIONAL TRANSPORTATION SAFETY BOARD • PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT
REPORT Use this form (Form 6120.1) to report civil and public aircraft accidents and incidents**BASIC INFORMATION**

Accident/Incident Location		Accident/Incident Date/Time	
Nearest City/Place: <u>Alexandria</u>	State: <u>LA</u>	Date: <u>10/27/24</u>	Local Time: <u>5:55 p.m.</u>
ZIP: _____	Country: <u>USA</u>	mm/dd/yyyy	
Latitude: _____	Longitude: _____	Time Zone: <u>C</u>	
(Enter in decimal degrees or degrees:minutes:seconds)			
Collision with Other Aircraft: ☐ Midair ☐ On-ground ☒ None			

AIRCRAFT INFORMATION

Registration Number: <u>N3046K</u>		☒ IFR-Equipped and Certified	
Manufacturer: <u>Boeing</u>		☐ Commercial Space Flight	
Model: <u>BE36 Bonanza 36</u>		☐ Unmanned Aircraft	
Serial Number: _____		Maximum Gross Weight: <u>3600</u> lbs.	
Year of Manufacture: <u>1987</u>		Weight at Time of Accident/Incident: <u>3200</u> lbs.	
Amateur-Built: ☐ Yes ☒ No		Number of Seats: <u>6</u>	
If Yes: ☐ Original Design ☐ Kit/Plans		Flight Crew Seats: <u>2</u>	
Make: _____		Cabin Crew Seats: _____	
		Passenger Seats: <u>4</u>	
		Number of Engines: <u>1</u>	

Category of Aircraft (Select one)	Type of Airworthiness Certificate (Check all that apply)	Landing Gear (Check all that apply)	Engine Type (Select one)
☒ Airplane	Standard	☒ Retractable	☒ Reciprocating
☐ Balloon	☒ Normal	☐ Tricycle	☐ Turbo Shaft
☐ Blimp/Dirigible	☐ Aerobatic	☐ High Skid	☐ Solid Rocket
☐ Glider	☐ Balloon	☐ Skid	☐ Turbo Prop
☐ Gyroplane	☐ Commuter	☐ Tailwheel	☐ Turbo Jet
☐ Helicopter	☐ Special Flight	☐ Emergency Float	☐ Turbo Fan
☐ Powered Lift	☐ Experimental	☐ Float	☐ Electric
☐ Rocket	☐ Special Light-Sport	☐ Amphibian	☐ Liquid Rocket
☐ Ultralight	☐ Experimental Light-Sport	☐ Other Launch/Recovery System	☐ Solid Rocket
☐ Unknown	☐ Certificate of Authorization or Waiver (COA)	☐ None	☐ Hybrid Rocket
	☐ None	☐ Unknown	☐ None
			☐ Unknown

Engine	Engine Manufacturer	Engine Model/Series	Engine Serial Number	Date of Mfg. (mm/dd/yyyy)	Rated Power ☐ Horsepower or ☐ Lbs. of Thrust	Total Time (hours)	Time Since: Inspection (hours)	Overhaul (hours)
Eng. 1	Continental							
Eng. 2								
Eng. 3								
Eng. 4								

Last Inspection Type

- ☒ 100-Hour
☐ AAIP
☒ Annual
☐ Continuous Airworthiness
☐ Condition Inspection
☐ Unknown

Date of Last Inspection: 10/15/24**Airframe Total Time:** 2981.7 hrs

Hours measured at (Select one)

☒ Last Inspection ☐ Time of Accident/Incident**Type of Maintenance Program (Select One)**

- ☒ Annual
☐ Conditional (Amateur-built only)
☐ Manufacturer's Inspection Program
☐ Other Approved Inspection Program
☐ (AAIP) Continuous Airworthiness
☐ Other, specify: _____

Description of Fire Extinguishing System

- ☐ None
☒ Specify: Hand Held

Additional Equipment

- ☒ ADS-B
☐ Airframe Parachute
☐ Angle of Attack Indicator
☐ Autopilot
☐ Autopilot/FMS, Model _____
☐ Coupled Flight Director
☐ Data Recorder
☐ Device Stall Warning System
☐ Electronic Flight Bag or Handheld Device
☐ Electronic Multifunction Display
☐ Electronic Primary Flight Display
☐ Flight Management System

- ☐ Handheld GPS
☐ Heads Up Display
☐ Night Vision Goggles
☐ Onboard Weather
☐ Primary Flight Display
☐ SAS, Axis (circle one): 2, 3, 4, Model: _____
☐ Satellite Tracking Device
☐ Stall Warning System
☐ Video Recording Device
☐ Wire Strike Detection
☐ Wire Strike Protection
☐ Other, Specify: _____

ELT Installed: ☒ Yes ☐ No If Yes:

ELT Manufacturer: _____

Model or Part No.: _____

TSO No.: ☐ C91 (121.5 MHz) ☐ C91a (121.5 MHz)
☐ C126 (406 MHz)**Was ELT still mounted in aircraft?** ☒ Yes ☐ No**Was ELT still connected to antenna?** ☒ Yes ☐ No**Did ELT activate?** ☐ Yes ☒ No**If activated: Did ELT aid in locating aircraft?** ☐ Yes ☐ No**If not activated: Indicate Reason:** ☐ Impact Damage☐ Fire Damage ☐ Battery ☐ Expired/Damaged ☐ Unknown**Propeller 1**

- ☐ Fixed Pitch
☒ Controllable Pitch
☐ Ground Adjustable

Manufacturer: MS C4104Model: D3A32C490B**Propeller 2**

- ☐ Fixed Pitch
☐ Controllable Pitch
☐ Ground Adjustable

Manufacturer: _____

Model: _____

OWNER/OPERATOR INFORMATION**Registered Aircraft Owner**

Name: Guedon Air, LLC
 City: Natchez State: MS
 ZIP: 39122 Country: USA

Fractional Ownership Aircraft:

☒ Yes ☐ No
Operator of Aircraft
☐ The Operator is also the Registered Owner

☒ Same address as Registered Owner

Doing Business As: _____

Air Carrier/Operator Designator (4-character code): _____

Name: Frank Guedon, M.D.
 City: Natchez State: MS
 ZIP: 39122 Country: USA

Operating Certificates Held
(Check all that apply)

- ☒ None
☐ Flag Carrier Operating Certificate (FAR 121)
☐ Supplemental
☐ Air Cargo
☐ Foreign Air Carriers (FAR 129)
☐ Rotorcraft External Load (FAR 133)
☐ Commuter Air Carrier (FAR 135)
☐ On-Demand Air Taxi (FAR 135)
☐ Commercial Air Tour (FAR 136)
☐ Agricultural Aircraft (FAR 137)
☐ Pilot School (FAR 141)
☐ Certificate of Authorization or Waiver (COA)
☐ Commercial Space Transportation
☐ Experimental Permit
☐ Commercial Space Transportation License
☐ Other Operator of Large Aircraft

Regulation Flight Conducted Under

- ☒ FAR 91 ☐ FAR 129 ☐ FAR 415
☐ FAR 103 ☐ FAR 133 ☐ FAR 431
☐ FAR 121 ☐ FAR 135 ☐ FAR 435
☐ FAR 125 ☐ FAR 137 ☐ FAR 437
☐ FAR 450
☐ FAR 91 Special Flight
☐ Non-US, Commercial
☐ Non-US, Non-commercial
☐ Public Aircraft (Select one)
☐ Armed Forces
☐ Federal
☐ State
☐ Local
☐ Unknown

Revenue Operation for FAR 121, 125, 129, 135
(Select one for each group)

- ☐ Scheduled or Commuter ☐ Domestic
☐ Non-Scheduled or Air Taxi ☐ International
☐ Passenger
☐ Cargo
☐ Mail Contract Only

Purpose of Flight for FAR 91, 103, 133, 137 (Select one)

- ☐ Aerial Application ☐ Firefighting
☐ Aerial Observation ☐ Flight Test
☐ Air Drop ☐ Glider Tow
☐ Air Race/Show ☐ Instructional
☐ Banner Tow ☐ Other Work Use
☐ Business ☒ Personal
☐ Executive/Corporate ☐ Positioning
☐ External Load ☐ Skydiving
☐ Ferry ☐ Unknown

Revenue Sightseeing Flight
☐ Yes ☒ No
Air Medical Flight
☐ Yes ☒ No
AIRPORT INFORMATION (Fill in if accident/incident occurred on approach, landing, takeoff, departure, or within 3 miles of an airport)

Airport Name: Vineville Municipal
 Airport Identifier: 220
 Proximity to Airport: ☐ Off Airport/Airstrip ☒ On Airport/Airstrip ☐ N/A

Distance From Airport Center: _____ sm.
 Direction From Airport: _____ degrees true
 Airport Elevation: 100 ft. MSL

Runway Information

Runway ID: 36 Length: 3000 ft. Width: 75 ft.

Runway/Landing Surface (Check all that apply)

- ☒ Asphalt ☐ Grass/Turf ☐ Ice ☐ Snow
☐ Concrete ☐ Gravel ☐ Macadam ☐ Water
☐ Dirt ☐ Helideck ☐ Metal/Wood ☐ Unknown
☐ Elevated Heliport ☐ Helistop ☐ Off-site landing area

Condition of Runway/Landing Surface (Check all that apply)

- ☒ Dry ☐ Snow-Compacted ☐ Water-Calm
☐ Holes ☐ Snow-Crusted ☐ Water-Choppy
☐ Ice Covered ☐ Snow-Dry ☐ Water-Glassy
☐ Rough ☐ Snow-Wet ☐ Wet
☐ Rubber Deposits ☐ Soft
☐ Slush-Covered ☐ Vegetation ☐ Unknown

Approach/Departure Segment (Select one)

- ☐ Taxi ☐ VFR Departure ☐ On Instrument Approach ☒ Downwind
☐ Takeoff ☐ IFR Departure Procedure/Clearance ☒ Landing ☐ Base
☐ Initial Climb ☐ Low Approach ☐ Go Around
☐ Aborted Landing (after touchdown)
☐ Unknown

IFR Approach (Check all that apply)

- ☐ None
☐ ADF/NDB ☐ PAR ☐ MLS ☐ Practice
☐ SDF ☐ Sidestep ☐ LDA ☐ GPS
☐ VOR/TVOR ☐ ILS ☐ ASR ☐ Unknown
☐ VOR/DME ☐ Localizer Only ☐ Visual
☐ TACAN ☐ LOC-back course ☐ Contact
☐ RNAV ☐ Circling

VFR Approach (Check all that apply)

- ☐ None
☐ Traffic Pattern ☐ Stop and Go
☐ Straight-In ☐ Touch and Go Simulated
☐ Valley/Terrain Following ☐ Forced Landing Forced
☐ Go Around ☐ Landing Precautionary
☐ Full Stop ☒ Landing
☐ Unknown

"FLIGHT CREWMEMBER 1" INFORMATION**"Flight Crewmember 1" Responsibilities at the Time of Accident/Incident**

☒ Captain ☐ First Officer ☐ Pilot ☐ Co-Pilot ☐ Student Pilot ☐ Flight Instructor ☐ Check Pilot ☐ Flight Engineer ☐ Other Flight Crew

"Flight Crewmember 1" was pilot flying ☐ Yes ☐ No

"Flight Crewmember 1" Identification

First Name: Frank Gordon, M.D.

Middle Initial: D

Last Name: Gordon

Age at time of Accident/Incident: 60

City of Residence: Natchez

State: MS. ZIP: 39120

Country: USA

Date of Birth: [REDACTED] (mm/dd/yyyy)

Certificate Number: [REDACTED]

Degree of Injury

☒ None ☐ Serious
☐ Unknown ☐ Fatal
☐ Minor

Seat Occupied

☒ Left ☐ Front ☐ Unknown
☐ Right ☐ Rear
☐ Center ☐ Single

Restraint Type

Available
☐ None
☐ Lap only
☒ 3-point
☐ 4-point
☐ 5-point
☐ Unknown
Used
☐ None
☐ Lap only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

Inflatable Restraints

☒ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

Pilot Certificate(s) (Check all that apply)

☐ None ☐ Flight Instructor ☐ Commercial
☐ US Military ☒ Private ☐ Recreational
☐ Airline Transport ☐ Foreign ☐ Sport
☐ Student ☐ Flight Engineer

Principal Occupation

☒ Pilot
☒ Other
☐ Unknown

Medical Certificate

☐ None ☐ Class 3
☐ Class 1 ☐ Driver's License (Sport Pilot only)
☒ Class 2 ☐ Unknown

Medical Certificate Validity

☐ Without limitations/waivers ☐ Unknown
☒ With limitations/waivers ☐ N/A
☐ Special Issuance

Date of Last Medical

7/20/23
 mm/dd/yyyy

Medical Certificate Limitations

Must use corrective lens

Medical Certificate Special Limitations**Personal Flight Equipment (Check all that apply)**

☐ Fire resistant flight suit ☐ Helmet ☐ Laser protective visor/glasses ☐ Personal locator beacon(s) (PLB) ☐ Fire resistant gloves
☐ Helmet visor ☐ Night vision goggles ☐ Personal flotation ☐ Other: _____

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:

7/17/24
 mm/dd/yyyy

Flight Review Aircraft

Make: Robinson
 Model: R44

Airplane Rating(s) (Check all that apply)

☒ Single-Engine Land
☐ Single-Engine Sea
☐ Multiengine Land
☐ Multiengine Sea

Other Aircraft Rating(s) (Check all that apply)

☐ None
☐ Airship
☐ Balloon
☐ Glider
☐ Gyroplane
☒ Helicopter
☐ Powered Lift

Instrument Rating(s) (Check all that apply)

☐ None
☒ Airplane
☐ Helicopter
☐ Powered Lift

Instructor Rating(s) (Check all that apply)

☐ None ☐ Instrument Airplane
☐ Airplane Single-Engine ☐ Instrument Helicopter
☐ Airplane Multiengine ☐ Helicopter
☐ Gyroplane ☐ Glider
☐ Powered lift ☐ Sport

Type Ratings and Applicable Logbook Endorsements

Complex
High Performance Tail Dragger

Student Endorsements (Include dates)

Flight Time (Enter hours for each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air	Multi-engine Rotorcraft	Tail-wheel
						Actual	Simulated					
Total Time	1752	477	1752		134	15	69	250				1100
Pilot in Command (PIC)	477											
Time as Instructor												
This Make/Model					100							
Last 90 Days	1525	15	15									
Last 30 Days	1010	10	10									
Last 24 Hours	18.5	.5	.5									

"FLIGHT CREWMEMBER 2" INFORMATION**"Flight Crewmember 2" Responsibilities at the Time of Accident/Incident**

☐ Captain ☐ First Officer ☐ Pilot ☐ Co-Pilot ☐ Student Pilot ☐ Flight Instructor ☐ Check Pilot ☐ Flight Engineer ☐ Other Flight Crew

"Flight Crewmember 2" was pilot flying ☐ Yes ☐ No

"Flight Crewmember 2" Identification

First Name: _____

Middle Initial: _____

Last Name: _____

Age at time of Accident/Incident: _____

City of Residence: _____

State: _____ ZIP: _____

Country: _____

Date of Birth: _____ (mm/dd/yyyy)

Certificate Number: _____

Degree of Injury

☐ None ☐ Serious
☐ Unknown ☐ Fatal
☐ Minor

Seat Occupied

☐ Left ☐ Front ☐ Unknown
☐ Right ☐ Rear
☐ Center ☐ Single

Restraint Type**Available**

☐ None
☐ Lap only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

Used

☐ None
☐ Lap only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

Inflatable Restraints

☐ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

Supplemental Restraint type: _____

Pilot Certificate(s) (Check all that apply)

☐ None ☐ Flight Instructor ☐ Commercial
☐ US Military ☐ Private ☐ Recreational
☐ Airline Transport ☐ Foreign ☐ Sport
☐ Student ☐ Flight Engineer

Principal Occupation

☐ Pilot
☐ Other
☐ Unknown

Medical Certificate

☐ None ☐ Class 3
☐ Class 1 ☐ Driver's License (Sport Pilot only)
☐ Class 2 ☐ Unknown

Medical Certificate Validity

☐ Without limitations/waivers ☐ Unknown
☐ With limitations/waivers ☐ N/A
☐ Special Issuance

Date of Last Medical

 mm/dd/yyyy

Medical Certificate Limitations**Medical Certificate Special Limitations****Personal Flight Equipment (Check all that apply)**

☐ Fire resistant flight suit ☐ Helmet ☐ Laser protective visor/glasses ☐ Personal Locator Beacon(s) (PLB) ☐ Fire resistant gloves
☐ Helmet visor ☐ Night vision goggles ☐ Personal flotation ☐ Other: _____

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:

 mm/dd/yyyy

Flight Review Aircraft

Make: _____

Model: _____

Airplane Rating(s)

(Check all that apply)
☐ Single-Engine Land
☐ Single-Engine Sea
☐ Multiengine Land
☐ Multiengine Sea

Other Aircraft Rating(s)

(Check all that apply)
☐ None
☐ Airship
☐ Balloon
☐ Glider
☐ Gyroplane
☐ Helicopter
☐ Powered Lift

Instrument Rating(s)

(Check all that apply)
☐ None
☐ Airplane
☐ Helicopter
☐ Powered Lift

Instructor Rating(s)

(Check all that apply)
☐ None ☐ Instrument Airplane
☐ Airplane Single-Engine ☐ Instrument Helicopter
☐ Airplane Multiengine ☐ Helicopter
☐ Gyroplane ☐ Glider
☐ Powered lift ☐ Sport

Type Ratings and Applicable Logbook Endorsements**Student Endorsements (Include dates)**

Flight Time (Enter hours for each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air	Multi-engine Rotorcraft	Tail-wheel
						Actual	Simulated					
Total Time												
Pilot in Command (PIC)												
Time as Instructor												
This Make/Model												
Last 90 Days												
Last 30 Days												
Last 24 Hours												

ADDITIONAL FLIGHT CREWMEMBERS (Exclusive of cabin crew, complete the following information.)**Additional Crewmember Information**

First Name: _____ City of Residence: _____
 Middle Initial: _____ State: _____ Zip: _____
 Last Name: _____ Country: _____

Seat Occupied

☐ Left ☐ Rear
☐ Center ☐ Single
☐ Right ☐ Unknown
☐ Front

Injury

☐ None
☐ Minor
☐ Serious
☐ Fatal
☐ Unknown

Personal Flight Equipment (Check all that apply)

☐ Fire resistant flight suit ☐ Helmet ☐ Laser protective visor/glasses ☐ Personal locator beacon(s) (PLB) ☐ Fire resistant gloves
☐ Helmet visor ☐ Night vision goggles ☐ Personal flotation ☐ Other: _____

Pilot Certificate(s) (Check all that apply)

☐ None ☐ Flight Instructor ☐ Commercial ☐ US Military
☐ Private ☐ Recreational ☐ Airline Transport ☐ Foreign
☐ Student ☐ Sport ☐ Flight Engineer

Restraint Type

Available
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown
☐ Supplemental.
 Restraint type: _____

Used
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

Inflatable Restraints

☐ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

Type Rating/Endorsement for Accident/Incident Aircraft?

☐ Yes ☐ No

Total Flight Time at the Time of this Accident/Incident: _____ hrs.

Additional Crewmember Information

First Name: _____ City of Residence: _____
 Middle Initial: _____ State: _____ Zip: _____
 Last Name: _____ Country: _____

Seat Occupied

☐ Left ☐ Rear
☐ Center ☐ Single
☐ Right ☐ Unknown
☐ Front

Injury

☐ None
☐ Minor
☐ Serious
☐ Fatal
☐ Unknown

Personal Flight Equipment (Check all that apply)

☐ Fire resistant flight suit ☐ Helmet ☐ Laser protective visor/glasses ☐ Personal Locator Beacon(s) (PLB) ☐ Fire resistant gloves
☐ Helmet visor ☐ Night vision goggles ☐ Personal flotation ☐ Other: _____

Pilot Certificate(s) (Check all that apply)

☐ None ☐ Flight Instructor ☐ Commercial ☐ US Military
☐ Private ☐ Recreational ☐ Airline Transport ☐ Foreign
☐ Student ☐ Sport ☐ Flight Engineer

Restraint Type

Available
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown
☐ Supplemental.
 Restraint type: _____

Used
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

Inflatable Restraints

☐ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

Type Rating/Endorsement for Accident/Incident Aircraft?

☐ Yes ☐ No

Total Flight Time at the Time of this Accident/Incident: _____ hrs.

PASSENGER(S) / OTHER PERSONNEL (Include cabin crew; continue on separate sheet, if necessary.)

Number of Passengers _____

Passenger Information

First Name: _____ City: _____
 Middle Initial: _____ State: _____ Zip: _____
 Last name: _____ Country: _____
☐ Crew ☐ Passenger ☐ Other

Seat

☐ Left
☐ Center
☐ Right
☐ Unknown

Row: _____

Injury

☐ None
☐ Minor
☐ Serious
☐ Fatal
☐ Unknown

Restraint Type

Available
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown
☐ Supplemental.
 Restraint type: _____

Used
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

Inflatable Restraints

☐ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

Age

☐ Under 5 years
 If under 5 years,
☐ Child Restraint
☐ Lap-Held
☐ Unknown

Personal Flight Equipment (Check all that apply)

☐ Fire resistant flight suit
☐ Helmet
☐ Laser protective visor/glasses
☐ PLB
☐ Fire resistant gloves
☐ Night vision goggles
☐ Helmet visor
☐ Personal flotation
☐ Other: _____

First Name: _____ City: _____

Middle Initial: _____ State: _____ Zip: _____

Last name: _____ Country: _____

☐ Crew☐ Passenger☐ Other**Personal Flight Equipment** (Check all that apply)

- ☐ Fire resistant flight suit
☐ Helmet
☐ Laser protective visor/glasses
☐ PLB
☐ Fire resistant gloves
☐ Night vision goggles
☐ Helmet visor
☐ Personal flotation
☐ Other: _____

☐ Left
☐ Center
☐ Right
☐ Unknown

Row: _____

☐ None
☐ Minor
☐ Serious
☐ Fatal
☐ Unknown
Available
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown
☐ Supplemental.
 Restraint type: _____
Used
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

☐ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

☐ Under 5 years
 If under 5 years,
☐ Child Restraint
☐ Lap-Held
☐ Unknown

First Name: _____ City: _____

Middle Initial: _____ State: _____ Zip: _____

Last name: _____ Country: _____

☐ Crew☐ Passenger☐ Other**Personal Flight Equipment** (Check all that apply)

- ☐ Fire resistant flight suit
☐ Helmet
☐ Laser protective visor/glasses
☐ PLB
☐ Fire resistant gloves
☐ Night vision goggles
☐ Helmet visor
☐ Personal flotation
☐ Other: _____

☐ Left
☐ Center
☐ Right
☐ Unknown

Row: _____

☐ None
☐ Minor
☐ Serious
☐ Fatal
☐ Unknown
Available
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown
☐ Supplemental.
 Restraint type: _____
Used
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

☐ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

☐ Under 5 years
 If under 5 years,
☐ Child Restraint
☐ Lap-Held
☐ Unknown

First Name: _____ City: _____

Middle Initial: _____ State: _____ Zip: _____

Last name: _____ Country: _____

☐ Crew☐ Passenger☐ Other**Personal Flight Equipment** (Check all that apply)

- ☐ Fire resistant flight suit
☐ Helmet
☐ Laser protective visor/glasses
☐ PLB
☐ Fire resistant gloves
☐ Night vision goggles
☐ Helmet visor
☐ Personal flotation
☐ Other: _____

☐ Left
☐ Center
☐ Right
☐ Unknown

Row: _____

☐ None
☐ Minor
☐ Serious
☐ Fatal
☐ Unknown
Available
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown
☐ Supplemental.
 Restraint type: _____
Used
☐ None
☐ Lap Only
☐ 3-point
☐ 4-point
☐ 5-point
☐ Unknown

☐ Not Installed
☐ Installed
☐ Not Deployed
☐ Deployed
☐ Unknown

☐ Under 5 years
 If under 5 years,
☐ Child Restraint
☐ Lap-Held
☐ Unknown
FLIGHT ITINERARY INFORMATION**Last Departure Point**Airport ID: KHEZCity: NatchezState: MS.Country: USA**Time of Departure**Time: 5:30 PMTime Zone: C**Flight Information**

Flight Number: _____

Operating as Flight _____

DestinationAirport ID: 2LOCity: AlbanyState: LA.Country: USA**Type Flight Plan Filed**
☒ None
☐ Company VFR
☐ Military VFR
☐ VFR
☐ VFR/IFR
☐ IFR
☐ Unknown

 Activated? ☐ Yes ☐ No
☐ Unknown

Type of ATC Clearance/Service (Check all that apply)

- ☐ Certificate of Authorization
☐ VFR
☐ Special VFR
☐ IFR
☒ None
☐ Special IFR
☐ VFR On Top
☐ VFR Flight Following
☐ Traffic Advisory
☐ Cruise
☐ Unknown / NA

Type of ATC Clearance/Service (Check all that apply)

- ☐ Class A
☐ Class B
☐ Class C
☐ Class D
☐ Class E
☐ Class G
☐ Demo Area
☐ Warning Area
☐ Prohibited Area
☐ Restricted Area
☐ Military Operations Area (MOA)
☐ Airport Advisory Area
☐ Jet Training Area
☐ TRSA
☐ FAR 93
☐ Special
☐ Air Traffic Control Area
☐ Unknown
Altitude of In-Flight Occurrence:
 MSL ft.

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE**Source of Pilot Weather Information**

(Check all that apply)

- ☐ National Weather Service
☐ Flight Service Station
☐ TV/Radio
☒ Automated Report
☒ Electronic Flight Bag-Application:
☐ Company
☐ Military
☐ Internet
☐ None
☐ Unknown

Weather Observation Facility

Facility ID: KAEX
 Observation Time: 1740 & 1750
 Time Zone: C
 Distance from Accident Site: 5 & 45 nm
 Direction from Accident Site: _____ degrees true

On-Board Weather**Basic Conditions**

- ☒ VMC
☐ IMC
☐ Unknown

Lowest Cloud Condition Height

_____ ft. AGL

Light Condition

- ☐ Dawn
☒ Day
☐ Dusk
☐ Night
☐ Dark Night
☐ Bright Night
☐ Unknown

Sky/Lowest Cloud Condition

- ☒ Clear
☐ Few
☐ Partial
☐ Obscuration
☐ Scattered
☐ Thin Broken
☐ Thin Overcast
☐ Unknown

Ceiling

- ☒ None (Clear)
☐ Broken
☐ Overcast
☐ Obscured
☐ Indefinite
☐ Unknown

Ceiling Height

_____ ft. AGL

Temperature: _____ (°C) or 80 (°F)

Dewpoint: _____ (°C) or _____ (°F)

Altimeter Setting:

Hg

or

mb

Wind Direction☐ Variable
 or
 Direction: 070
 degrees true
Wind Speed

- ☐ Calm
☐ Light and Variable

 or
 Speed: 6 kts
Wind Gusts☒ Not Gusting
 or
 Speed: _____ kts
Visibility

_____ miles

RVR: _____ feet

RVV: _____ miles

Destiny Altitude: _____ ft.

Type of Precipitation (Check all that apply)

- ☒ None
☐ Rain
☐ Snow
☐ Hail
☐ Rain Showers
☐ Drizzle
☐ Ice Pellets
☐ Snow Pellets
☐ Snow Grains
☐ Ice Crystals
☐ Freezing Rain
☐ Snow Shower
☐ Ice Pellets Shower
☐ Freezing Drizzle

Restriction to Visibility (Check all that apply)

- ☒ None
☐ Blowing Dust
☐ Blowing Sand
☐ Blowing Snow
☐ Blowing Spray
☐ Dust
☐ Fog
☐ Ground Fog
☐ Haze
☐ Ice Fog
☐ Smoke
☐ Unknown

Icing Forecast**Amount**

- ☒ None
☐ Trace
☐ Light
☐ Moderate
☐ Severe
☐ Unknown

Type

- ☐ N/A
☐ Rime
☐ Clear
☐ Mixed
☐ Unknown

Intensity of Precipitation

- ☐ Light
☐ Moderate
☐ Heavy
☐ N/A
☐ Unknown

Icing Actual**Amount**

- ☐ None
☐ Trace
☐ Light
☐ Moderate
☐ Severe
☐ Unknown

Type

- ☐ N/A
☐ Rime
☐ Clear
☐ Mixed
☐ Unknown

Turbulence (Check all that apply)**Type**

- ☒ None
☐ Clean Air
☐ Terrain-Induced
☐ Convective
☐ Turbulence

Severity

- ☐ Light
☐ Moderate
☐ Severe
☐ Extreme

NOTAMs (D and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident:

DAMAGE TO AIRCRAFT AND OTHER PROPERTY**Aircraft Damage**

- ☐ None
☒ Minor
☐ Substantial
☐ Destroyed
☐ Unknown

Aircraft Fire

- ☒ None
☐ In-Flight
☐ On-Ground
☐ Both Ground and In-Flight
☐ Fire at Unknown Time
☐ Unknown

Aircraft Explosion

- ☒ None
☐ In-Flight
☐ On-Ground
☐ Both Ground and In-Flight
☐ Fire at Unknown Time
☐ Unknown

Description of Damage to Aircraft and Other Property (Use additional sheet, if necessary.)

Metal stake with string Attached Hit Under Belly on
Plane & Left Flap & Damaged Aluminum Skin

NARRATIVE HISTORY OF FLIGHT (Please type or print in ink.)

Describe what occurred in chronological order, including circumstances leading to and nature of accident/incident. Describe terrain and include wreckage distribution sketch if pertinent. Attach extra sheets if needed. State departure time and location, services obtained, and intended destination. Provide as much detail as possible.

see Print out

OPERATOR/OWNER SAFETY RECOMMENDATION (How could this accident/incident have been prevented?)

Better Markings for Runway Closure

MECHANICAL MALFUNCTION/FAILURE (If more space is needed, continue on a separate sheet.)Was there Mechanical Malfunction/Failure? ☐ Yes ☒ No

(If yes, list the name of the part, manufacturer, part no., serial no., and describe the failure.)

Total Time/ Cycles On Part

_____ Hours

_____ Cycles

Time Since This Part Inspected/Overhauled

_____ Hours

FUEL & SERVICES INFORMATION

Fuel on Board at Last Takeoff

(Convert from pounds, as necessary)

77 Gallons

Fuel Type

☒ 100 Low Lead☐ Automotive☐ Jet A☐ Jet A-1☐ Unleaded AV☐ Other, specify _____

Other Services, if any, prior to departure:

EVACUATION OF AIRCRAFT

Was an emergency evacuation of the aircraft performed?

☐ Yes☒ No

Method of Exit – Describe how the occupants exited and how many occupants evacuated each location:

OTHER AIRCRAFT – COLLISION (If air or ground collision occurred, complete this section for other aircraft.)

Aircraft Registration Number

Manufacturer: _____

Model: _____

Damage to Other Aircraft:

☐ Destroyed☐ Substantial☐ Minor☐ None

Registered Owner of Other Aircraft

Pilot of Other Aircraft

Name: _____

Name: _____

City: _____

City: _____

State: _____ ZIP: _____

State: _____ ZIP: _____

Country: _____

Country: _____

ADDITIONAL INFORMATION (Additional space for answers to any question.)

By signing this form, I am consenting to the public release of the information provided herein.

Date of this report

11/26/24

mm/dd/yyyy

Name of Pilot/Operator:

Frank Guelker, M.P.

Signature:

-or- ☒ Check here to electronically sign this document

If a person other than Pilot/Operator is filing this report

Name: _____

Title: _____

Signature: _____

-or- ☐ Check here to electronically sign this document

FOR NTSB USE ONLY

NTSB Accident/Incident No.
CEN25LA037

Reviewed by NTSB AS Division
CEN

Name of Investigator
BRIAN RUTT

Date Report Received
12/11/2024

Incident at 2L0 on 10/27/24

From: [REDACTED]
To: [REDACTED]
Date: Friday, November 1, 2024 at 03:57 PM CDT

My name is Frank Guedon, MD and I am a 60-year-old white male that initially got my private pilot license in 1983. I have my private pilot certificate with instrument rating and rotor craft certificate. I have logged 1750+ hours with approximately 500 of those in the Bonanza, 750 hours in tail draggers and 250+ hours in Robinson R22 and R44 rotorcraft. My last medical was a 2nd class done in July of 2023, with the only limitations of corrective lenses. My most recent flight review was in July of 2024. I recently took the written exam for the commercial helicopter license which I passed with a 90, at the Pineville airport.

I am an obstetrician gynecologist with my primary practice in Natchez, Mississippi. I work as a laborist at Cabrini and Rapides hospitals in Alexandria to support my Flying addiction. I have worked at these hospitals for the last 3 or 4 years, and whenever the weather permits, I fly from my home air port in Natchez, Ms., KHEZ, to the Pineville air port, 2L0. I must have made this trip 100 times over the last several years, and it normally takes me 26 minutes in the Bonanza and 40 - 50 minutes in the helicopter. It takes me almost 2 hours to drive that distance. I leave my motorcycle at the airport and ride it to the hospitals. I was called by flight line over a month ago telling me that the air port was going to be closed for service and that I would need to move my motorcycle. I had just worked a 24 hour shift on October 20th and left out on October 21st soon after 8:00 a.m. I had been seeing the Notam for the airport closure for quite some time but did not recall the date it was going to close.

I was scheduled to work a 36 hour shift starting October 27th at 8:00 p.m.. At Rapides Medical Center. This sky's were blue and there was little wind. According to the flightaware data, I left the Natchez airport at approximately 5:30 p.m., traveled at 3000 ft, and landed at approximately 5:55 p.m. Tail number is N3046K. At this time of the afternoon, traveling East, the sun was directly in my eyes. I have a garmin G3X touch with ADS-B in as an option. I have a traffic display that shows all other traffic that is reporting altitude in the area. I watched this closely and out the window as best I could to look for any traffic during my trip. There was very little traffic until I got to the Esler air port. At approximately 14 miles out, I began descending over the Esler airport and announced my 1st radio call to the Pineville air port when I was descending through 2100 ft. Not long after, I heard a plane leaving the Esler airport announced his intentions. I listened to the weather at the Alexander ATIS and they were reporting winds from 070 at 4 knots. I decided to the land on RW 36, using a right traffic pattern to stay out of the class D airspace. I made my next radio call when I had descended down to the approximately 1100 ft, 4 miles East of the runway and said I was going to do a right downwind for 36. I was getting notifications on my avionic system for towers in the area and that I was approaching class D airspace.

I announced I was turning right downwind for 36, and put down the first notch of flaps. I was looking at the Alexandria INTL (AEX) air port to make sure I did not see any traffic in the area and to make sure I did not get in the class D airspace. I turned right base over the Lake for RW 36 and realized I was still somewhat high and fast. I dropped my landing gear and noticed the sun reflecting brightly off of the Lake and reflecting back into my eyes. I slowed down quickly and had to drop the nose to pick up speed and I quickly made sure I would have adequate runway length, since the run way is only 3000 ft, and looks somewhat short. I was watching my air speed closely at this time and quickly glimpsed down the run way and saw no obstructions and new I had enough runway length. Also I noticed no markers on the runway. I had given my last notch of flaps and was slowing down while looking far down the run way to make a smooth landing. Probably 200 ft from the end of the run way I felt a bump on the bottom of the airplane and my first fear was that the front landing gear was collapsing or failing. I quickly pulled up and deviated to the right slightly and when I was looking down the run way, at this point, I saw the metal stakes and the rope going down the center of the runway. It immediately dawned on me that the run way was closed and this was part of the servicing process that was about to begin. I deviated to the right of the metal stakes and lit uneventfully and went all the way to the end of the runway.

I then killed the engine and got outside to observe the damage. Luckily the prop never struck any of the metal states and I had no loss of control of the airplane in any way. Examining the underside of the airplane revealed that the skin was damage from where the stake had hit it under the center of the airplane and on the left flap. The prop had not been injured and no other injuries were noted. I restarted the plane and brought it to the taxi way and parked it where I normally park and tied it down. A pilot that was at the airport noticed my landing and he approached me and we discussed that the runway was closed. It was a total laps of memory of the closure on my part. My mind was in autopilot and my only goal was to get to work, the same way I have done numerous times before. I went back down the run way and inspected where I had hit the metal stake and took pictures. I noticed the yellow X on the end of the runway and trying to think back about landing, I do feel like I saw some yellow color as I was coming over it but did not realize it was an X. In retrospect, I guess I thought it was runaway numbers or something else. I was focusing far down the runway to make a smooth landing and was not looking at the end of the run way. There were no other markings anywhere on the runway until you got to the very other end of the runway where there was another faded yellow X.

It was an accident. It was my fault for not rechecking the date on the Notams for when the airport was going to be closed. The Sun in my eyes, the tower alerts and the approaching class D airspace alerts were distractions. Also in retrospect I think I subconsciously felt comfort in the fact that I listened to the ATIS at the Alexandria INTL airport and it did not mention any closings or changes. Obviously, this didn't even discuss conditions at the airport that I was landing on.

Frank Guedon, MD

[REDACTED]