

NATIONAL TRANSPORTATION SAFETY BOARD PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT

This form to be used for reporting civil and public aircraft accidents and incidents

BASIC INFORMATION

Accident/Incident Location Nearest City/Place: <u>TETON Village</u> State: <u>WY</u> ZIP: <u>83025</u> Country: <u>US</u> Latitude: <u>43.5875 N</u> Longitude: <u>110.8279 W</u> (Enter in decimal degrees or degrees: minutes: seconds)	Accident/Incident Date/Time Date: <u>08/03/2020</u> Local Time: <u>8:40 AM</u> mm/dd/yyyy Time Zone: <u>MOUNTAIN</u> Collision with Other Aircraft: ☐ Midair ☐ On-ground ☒ None
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AIRCRAFT INFORMATION

Registration Number: <u>N971LB</u> Manufacturer: <u>LINDSTRAND</u> Model: <u>A-310</u> Serial Number: <u>5489</u> Year of Manufacture: <u>2011</u> Amateur-Built: ☐ Yes ☒ No If Yes: ☐ Kit/Plans ☐ Original Design Make: _____	☐ IFR-Equipped and Certified ☐ Commercial Space Flight ☐ Unmanned Aircraft Maximum Gross Weight: <u>5940</u> lbs Weight at Time of Accident/Incident: <u>4735</u> lbs Number of Seats: <u>N/A</u> Flight Crew Seats: <u>N/A</u> Cabin Crew Seats: <u>N/A</u> Passenger Seats: <u>N/A</u> Number of Engines: <u>8</u>
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Category of Aircraft ☐ Airplane ☒ Balloon ☐ Blimp/Dirigible ☐ Glider ☐ Gyroplane ☐ Helicopter ☐ Powered Lift ☐ Rocket ☐ Ultralight ☐ Unknown	Type of Airworthiness Certificate (Check all that apply) <table style="width: 100%;"> <tr> <th>Standard</th> <th>Special</th> </tr> <tr> <td>☐ Normal</td> <td>☐ Restricted</td> </tr> <tr> <td>☐ Aerobatic</td> <td>☐ Limited</td> </tr> <tr> <td>☒ Balloon</td> <td>☐ Provisional</td> </tr> <tr> <td>☐ Commuter</td> <td>☐ Special Flight</td> </tr> <tr> <td>☐ Transport</td> <td>☐ Experimental</td> </tr> <tr> <td>☐ Utility</td> <td>☐ Special Light-Sport</td> </tr> <tr> <td></td> <td>☐ Experimental Light-Sport</td> </tr> </table> ☐ Certificate of Authorization or Waiver (COA) ☐ None ☐ Unknown	Standard	Special	☐ Normal	☐ Restricted	☐ Aerobatic	☐ Limited	☒ Balloon	☐ Provisional	☐ Commuter	☐ Special Flight	☐ Transport	☐ Experimental	☐ Utility	☐ Special Light-Sport		☐ Experimental Light-Sport	Landing Gear (Check all that apply) ☐ Retractable ☐ Tricycle ☐ Tailwheel ☐ Amphibian ☐ High Skid ☐ Emergency Float ☐ Skid ☐ Float ☐ Ski ☐ Hull ☐ Ski/Wheel ☐ Other Launch/Recovery System ☒ None ☐ Unknown	Engine Type (Select one) ☐ Reciprocating ☐ Liquid Rocket ☐ Turbo Shaft ☐ Solid Rocket ☐ Turbo Prop ☐ Hybrid Rocket ☐ Turbo Jet ☐ None ☐ Turbo Fan ☐ Unknown ☐ Electric <u>Propane Burner</u> Fuel System Type (Reciprocating) ☐ Carburetor ☐ Fuel-Injected
Standard	Special																		
☐ Normal	☐ Restricted																		
☐ Aerobatic	☐ Limited																		
☒ Balloon	☐ Provisional																		
☐ Commuter	☐ Special Flight																		
☐ Transport	☐ Experimental																		
☐ Utility	☐ Special Light-Sport																		
	☐ Experimental Light-Sport																		

Engine	Engine Manufacturer	Engine Model/Series	Manufacturer's Serial Number	Date of Mfg. mm/dd/yyyy	Rated Power ☐ Horsepower or ☐ lbs of Thrust	Total Time (hours)	Time Since Inspection (hours)	Time Since Overhaul (hours)
Eng. 1	LINDSTRAND	BU-1367	BU1367	7/2011	N/A	349		
Eng. 2								
Eng. 3								
Eng. 4								

Last Inspection Type ☐ 100-Hour ☐ Continuous Airworthiness ☐ AAIP ☐ Conditional Inspection ☒ Annual ☐ Unknown Date Last Inspection: <u>10/1/2019</u> mm/dd/yyyy Airframe Total Time: <u>349</u> hrs hours measured at (Select one) ☐ Last Inspection ☒ Time of Accident/Incident	Propeller 1 ☐ Fixed Pitch ☐ Controllable Pitch ☐ Ground Adjustable <u>N/A</u> Manufacturer: _____ Model: _____	Propeller 2 ☐ Fixed Pitch ☐ Controllable Pitch ☐ Ground Adjustable <u>N/A</u> Manufacturer: _____ Model: _____
Type of Maintenance Program (Select one) ☒ Annual ☐ Conditional (Amateur-built only) ☐ Manufacturer's Inspection Program ☐ Other Approved Inspection Program (AAIP) ☐ Continuous Airworthiness ☐ Other, specify: _____	ELT Installed: ☐ Yes ☐ No <u>N/A</u> 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	
Description of Fire Extinguishing System ☐ None ☒ Specify: <u>single fire extinguisher</u>	Additional Equipment (Check all that apply) ☐ ADS-B ☐ Airframe Parachute ☐ Angle of Attack Indicator ☐ Autopilot ☐ Data Recorder ☐ Electronic Flight Bag or Handheld Device ☐ Electronic Multifunction Display ☐ Electronic Primary Flight Display ☒ Handheld GPS ☐ Heads Up Display ☐ Onboard Weather ☐ Satellite Tracking Device ☐ Stall Warning System ☐ Video Recording Device ☐ Other, Specify: _____	

OWNER/OPERATOR INFORMATION**Registered Aircraft Owner**

Name: Wyoming Balloon Company
Fractional Ownership Aircraft: ☐ Yes ☒ No

City: JACKSON
State: WY ZIP: 83001
Country: USA

Operator of Aircraft☒ Same As Registered Owner☒ Same Address as Registered Owner

Name: _____
Doing Business As: _____
Air Carrier/Operator Designator (4 Character Code): _____

City: _____
State: _____ ZIP: _____
Country: _____

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 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 ☒ Unknown
☐ 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

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: _____
Airport Identifier: _____
Proximity to Airport: ☐ Off Airport/Airstrip ☐ On Airport/Airstrip ☐ N/A

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

Runway Information

Runway ID: _____ (L/R/C) Length: _____ ft Width: _____ ft

Runway/Landing Surface *(Check all that apply)*

- ☐ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water
☐ Concrete ☐ Gravel ☐ Metal/Wood
☐ Dirt ☐ Ice ☐ Snow ☐ Unknown

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 ☐ Low Approach
☐ Takeoff ☐ IFR Departure Procedure/Clearance ☐ Landing ☐ Base ☐ Go Around
☐ Initial Climb ☐ Final ☐ Crosswind ☐ 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
☐ VOR/DME ☐ Localizer Only ☐ Visual
☐ TACAN ☐ LOC-back course ☐ Contact
☐ RNAV ☐ Circling
☐ Unknown

VFR Approach *(Check all that apply)*

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

"FLIGHT CREWMEMBER 1" INFORMATION																																																																																																				
"Flight Crewmember 1" Responsibilities at the Time of Accident/Incident ☒ 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: <u>Richard</u> City of Residence: <u>Louisville, KY</u> Middle Initial: <u>G</u> State: <u>KY</u> ZIP: <u>40222</u> Last Name: <u>Lawhorn</u> Country: <u>U.S.</u> Age at time of Accident/Incident: <u>72</u> Date of Birth: [REDACTED] mm/dd/yyyy Certificate Number: [REDACTED]																																																																																																				
Degree of Injury ☒ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious			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 ☐ Private ☐ Recreational ☐ Student ☐ Sport ☒ Commercial ☐ US Military ☒ Airline Transport ☐ Foreign ☒ Flight Engineer						Medical Certificate Validity ☐ Without limitations/waivers ☐ Unknown ☒ With limitations/waivers ☐ N/A ☐ Special Issuance		Date of Last Medical <u>10/09/2019</u> mm/dd/yyyy																																																																																												
Principal Occupation ☒ Pilot ☐ Other ☐ Unknown		Medical Certificate ☐ None ☐ Class 3 ☐ Class 1 ☐ Driver's License (Sport Pilot only) ☒ Class 2 ☐ Unknown			Medical Certificate Limitations <u>GLASSES FOR NEAR VISION</u>			Medical Certificate Special Issuance 																																																																																												
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: <u>06/19/2020</u> mm/dd/yyyy				Flight Review Aircraft Make: <u>LINDSTRAND</u> Model: <u>A-310</u>																																																																																																
Airplane Rating(s) (Check all that apply) ☐ None ☒ 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 ☐ Airplane Single-Engine ☐ Airplane Multi-Engine ☐ Gyroplane ☐ Powered Lift ☐ Instrument Airplane ☐ Instrument Helicopter ☐ Helicopter ☐ Glider ☐ Sport																																																																																														
Type Ratings <u>B757</u> <u>B767</u> <u>DC-8</u>						Student Endorsements (Include dates)																																																																																														
<table border="1" style="width:100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th rowspan="2" style="text-align: left; padding: 5px;">Flight Time (Enter appropriate number of hours in each box)</th> <th rowspan="2" style="padding: 5px;">All Aircraft</th> <th rowspan="2" style="padding: 5px;">This Make & Model</th> <th rowspan="2" style="padding: 5px;">Airplane Single Engine</th> <th rowspan="2" style="padding: 5px;">Airplane Multiengine</th> <th rowspan="2" style="padding: 5px;">Night</th> <th colspan="2" style="padding: 5px;">Instrument</th> <th rowspan="2" style="padding: 5px;">Rotorcraft</th> <th rowspan="2" style="padding: 5px;">Glider</th> <th rowspan="2" style="padding: 5px;">Lighter Than Air</th> </tr> <tr> <th style="padding: 5px;">Actual</th> <th style="padding: 5px;">Simulated</th> </tr> </thead> <tbody> <tr> <td style="text-align: left; padding: 5px;">Total Time</td> <td style="padding: 5px;">20,000+</td> <td style="padding: 5px;">100</td> <td style="padding: 5px;">450</td> <td style="padding: 5px;">19,450</td> <td style="padding: 5px;">12,000</td> <td style="padding: 5px;">8,000</td> <td style="padding: 5px;">200</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">40</td> <td style="padding: 5px;">1,100</td> </tr> <tr> <td style="text-align: left; padding: 5px;">Pilot in Command (PIC)</td> <td style="padding: 5px;">18,700</td> <td style="padding: 5px;">100</td> <td style="padding: 5px;">450</td> <td style="padding: 5px;">19,450</td> <td style="padding: 5px;">10,000</td> <td style="padding: 5px;">8,000</td> <td style="padding: 5px;">150</td> <td style="padding: 5px;"></td> <td style="padding: 5px;">40</td> <td style="padding: 5px;">1,100</td> </tr> <tr> <td style="text-align: left; padding: 5px;">Time as Instructor</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="text-align: left; padding: 5px;">This Make/Model</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="text-align: left; padding: 5px;">Last 90 Days</td> <td style="padding: 5px;">40</td> <td style="padding: 5px;">40</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="text-align: left; padding: 5px;">Last 30 Days</td> <td style="padding: 5px;">40</td> <td style="padding: 5px;">40</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> <tr> <td style="text-align: left; padding: 5px;">Last 24 Hours</td> <td style="padding: 5px;">1</td> <td style="padding: 5px;">1</td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> <td style="padding: 5px;"></td> </tr> </tbody> </table>											Flight Time (Enter appropriate number of hours in each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air	Actual	Simulated	Total Time	20,000+	100	450	19,450	12,000	8,000	200		40	1,100	Pilot in Command (PIC)	18,700	100	450	19,450	10,000	8,000	150		40	1,100	Time as Instructor											This Make/Model											Last 90 Days	40	40									Last 30 Days	40	40									Last 24 Hours	1	1								
Flight Time (Enter appropriate number of hours in each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air																																																																																										
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"FLIGHT CREWMEMBER 2" INFORMATION

"Flight Crewmember 2" Responsibilities at the Time of Accident/Incident

☐ 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: _____ City of Residence: _____
 Middle Initial: _____ State: _____ ZIP: _____
 Last Name: _____ Country: _____
 Age at time of Accident/Incident: _____ Date of Birth: _____ mm/dd/yyyy
 Certificate Number: _____

Degree of Injury ☐ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious	Seat Occupied ☐ Left ☐ Front ☐ Unknown ☐ Right ☐ Rear ☐ Center ☐ Single	Restraint Type <table> <tr> <th>Available</th> <th>Used</th> </tr> <tr> <td>☐ None</td> <td>☐ None</td> </tr> <tr> <td>☐ Lap only</td> <td>☐ Lap only</td> </tr> <tr> <td>☐ 3-point</td> <td>☐ 3-point</td> </tr> <tr> <td>☐ 4-point</td> <td>☐ 4-point</td> </tr> <tr> <td>☐ 5-point</td> <td>☐ 5-point</td> </tr> <tr> <td>☐ Unknown</td> <td>☐ Unknown</td> </tr> </table>	Available	Used	☐ None	☐ None	☐ Lap only	☐ Lap only	☐ 3-point	☐ 3-point	☐ 4-point	☐ 4-point	☐ 5-point	☐ 5-point	☐ Unknown	☐ Unknown	Inflatable Restraints ☐ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown
Available	Used																
☐ None	☐ None																
☐ Lap only	☐ Lap only																
☐ 3-point	☐ 3-point																
☐ 4-point	☐ 4-point																
☐ 5-point	☐ 5-point																
☐ Unknown	☐ Unknown																
Pilot Certificate(s) (Check all that apply) ☐ None ☐ Flight Instructor ☐ Commercial ☐ US Military ☐ Private ☐ Recreational ☐ Airline Transport ☐ Foreign ☐ Student ☐ Sport ☐ 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 Issuance

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) ☐ None ☐ 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 ☐ Airplane Single-Engine ☐ Airplane Multi-Engine ☐ Gyroplane ☐ Powered Lift ☐ Instrument Airplane ☐ Instrument Helicopter ☐ Helicopter ☐ Glider ☐ Sport
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Type Ratings

Student Endorsements (Include dates)

Flight Time (Enter appropriate number of hours in each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air
						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)

Crew Name and Address		Seat Occupied		Injury
First Name: _____	City of Residence: _____	☐ Left	☐ Front	☐ None
Middle Initial: _____	State: _____ ZIP: _____	☐ Center	☐ Rear	☐ Minor
Last Name: _____	Country: _____	☐ Right	☐ Single	☐ Serious
			☐ Unknown	☐ Fatal
				☐ Unknown
Pilot Certificate(s) (Check all that apply)		Restraint Type:		Inflatable Restraints
☐ None	☐ Flight Instructor	☐ Commercial	☐ US Military	
☐ Private	☐ Recreational	☐ Airline Transport	☐ Foreign	
☐ Student	☐ Sport	☐ Flight Engineer		
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: _____ hrs		

Crew Name and Address		Seat Occupied		Injury
First Name: _____	City of Residence: _____	☐ Left	☐ Front	☐ None
Middle Initial: _____	State: _____ ZIP: _____	☐ Center	☐ Rear	☐ Minor
Last Name: _____	Country: _____	☐ Right	☐ Single	☐ Serious
			☐ Unknown	☐ Fatal
				☐ Unknown
Pilot Certificate(s) (Check all that apply)		Restraint Type:		Inflatable Restraints
☐ None	☐ Flight Instructor	☐ Commercial	☐ US Military	
☐ Private	☐ Recreational	☐ Airline Transport	☐ Foreign	
☐ Student	☐ Sport	☐ Flight Engineer		
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)

Name and Address	Seat	Injury	Restraint Type		Inflatable Restraints	Age
First Name: _____ City: _____	☐ Left	☐ None	Available	Used	☐ Not Installed	☐ Under 5 years
Middle Initial: _____ State: _____ ZIP: _____	☐ Center	☐ Minor	☐ Lap Only	☐ Lap Only	☐ Installed	
Last Name: _____ Country: _____	☐ Right	☐ Serious	☐ 3-point	☐ 3-point	☐ Not Deployed	<i>If Under 5,</i>
☐ Crew ☐ Passenger ☐ Other	☐ Unknown	☐ Fatal	☐ 4-point	☐ 4-point	☐ Deployed	☐ Child Restraint
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	☐ Unknown	☐ Lap-Held
			☐ Unknown	☐ Unknown		☐ Unknown
First Name: _____ City: _____	☐ Left	☐ None	Available	Used	☐ Not Installed	☐ Under 5 years
Middle Initial: _____ State: _____ ZIP: _____	☐ Center	☐ Minor	☐ Lap Only	☐ Lap Only	☐ Installed	
Last Name: _____ Country: _____	☐ Right	☐ Serious	☐ 3-point	☐ 3-point	☐ Not Deployed	<i>If Under 5,</i>
☐ Crew ☐ Passenger ☐ Other	☐ Unknown	☐ Fatal	☐ 4-point	☐ 4-point	☐ Deployed	☐ Child Restraint
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	☐ Unknown	☐ Lap-Held
			☐ Unknown	☐ Unknown		☐ Unknown
First Name: _____ City: _____	☐ Left	☐ None	Available	Used	☐ Not Installed	☐ Under 5 years
Middle Initial: _____ State: _____ ZIP: _____	☐ Center	☐ Minor	☐ Lap Only	☐ Lap Only	☐ Installed	
Last Name: _____ Country: _____	☐ Right	☐ Serious	☐ 3-point	☐ 3-point	☐ Not Deployed	<i>If Under 5,</i>
☐ Crew ☐ Passenger ☐ Other	☐ Unknown	☐ Fatal	☐ 4-point	☐ 4-point	☐ Deployed	☐ Child Restraint
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	☐ Unknown	☐ Lap-Held
			☐ Unknown	☐ Unknown		☐ Unknown
First Name: _____ City: _____	☐ Left	☐ None	Available	Used	☐ Not Installed	☐ Under 5 years
Middle Initial: _____ State: _____ ZIP: _____	☐ Center	☐ Minor	☐ Lap Only	☐ Lap Only	☐ Installed	
Last Name: _____ Country: _____	☐ Right	☐ Serious	☐ 3-point	☐ 3-point	☐ Not Deployed	<i>If Under 5,</i>
☐ Crew ☐ Passenger ☐ Other	☐ Unknown	☐ Fatal	☐ 4-point	☐ 4-point	☐ Deployed	☐ Child Restraint
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	☐ Unknown	☐ Lap-Held
			☐ Unknown	☐ Unknown		☐ Unknown

FLIGHT ITINERARY INFORMATION

Last Departure Point

Airport ID: N/A

City: _____

State: WY

Country: USA

Time of Departure

Time: 7:30

City: _____

Time Zone: MTN

Destination

Airport ID: _____

City: _____

State: _____

Country: _____

Type Flight Plan Filed

☒ None ☐ VFR/IFR
☐ Company VFR ☐ IFR
☐ Military VFR ☐ Unknown
☐ VFR

Activated? ☐ Yes ☐ No ☐ Unknown

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

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

Airspace where the accident/incident occurred (Check all that apply)

☐ Class A ☐ Class G ☐ Military Operations Area (MOA) ☐ Special
☐ Class B ☐ Demo Area ☐ Airport Advisory Area ☐ Air Traffic Control Area
☐ Class C ☐ Warning Area ☐ Jet Training Area ☐ Unknown
☐ Class D ☐ Prohibited Area ☐ TRSA
☒ Class E ☐ Restricted Area ☐ FAR 93

Altitude of In-Flight Occurrence:

6300 ft msl

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE

Source of Pilot Weather Information

(Check all that apply)

☒ National Weather Service ☐ Company
☐ Flight Service Station ☐ Military
☐ TV/Radio ☒ Internet
☒ Automated Report ☐ None
☐ Commercial Weather Service (DUATS) ☐ Unknown
☐ On-Board Weather

Weather Observation Facility

Facility ID: KJAC KBJJ

Observation Time: 0600

Time Zone: MTN

Distance from Accident Site: 5/20 nm

Direction from Accident Site: W/E degrees true

Basic Conditions

☒ VMC
☐ IMC
☐ Unknown

Light Condition

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

Sky/Lowest Cloud Condition

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

Ceiling

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

Temperature: 18 (C) or _____ (F)

Dew Point: 06 (C) or _____ (F)

Altimeter Setting: 3028 in. Hg
or _____ MB

Lowest Cloud Condition Height

14,000 ft agl

Ceiling Height

14,000 ft agl

Wind Direction

☒ Variable

Direction: 340 degrees true

Wind Speed

☐ Calm
☒ Light and Variable

Speed: 2-4 kts

Wind Gusts

☐ Not Gusting

Speed: 20 kts

Visibility 10 miles

RVR: _____ feet

RVV: _____ miles

Density Altitude: _____ ft

Intensity of Precipitation

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

Type of Precipitation (Check all that apply)

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

Restriction to Visibility (Check all that apply)

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

Icing Forecast

Amount: ☒ None ☐ N/A
☐ Trace ☐ Rime
☐ Light ☐ Clear
☐ Moderate ☐ Mixed
☐ Severe ☐ Unknown
☐ Unknown

Icing Actual

Amount: ☒ None ☐ N/A
☐ Trace ☐ Rime
☐ Light ☐ Clear
☐ Moderate ☐ Mixed
☐ Severe ☐ Unknown
☐ Unknown

Turbulence

Type (Check all that apply): ☒ None ☐ Light
☐ Clear Air ☐ Moderate
☐ Terrain-Induced ☐ Severe
☐ Convective Turbulence ☐ Extreme

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

NONE

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

- ☒ None ☐ Substantial
☐ Minor ☐ Destroyed
 ☐ Unknown

Aircraft Fire

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

Aircraft Explosion

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

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

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 and location, services obtained, and intended destination. Provide as much detail as possible.

See attached NARRATIVE

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

Operator/Owner Safety Recommendation

MECHANICAL MALFUNCTION/FAILURE (If more space is needed, continue on 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)

_____ Gallons

Fuel Type

☐ 80/87☐ 100 Low Lead☐ 100/130☐ 115/145☐ Jet A☐ Jet A-1☐ Jet B☐ JP8☐ Automotive☐ Other, specify propane

Other Services, if Any, Prior to Departure

EVACUATION OF AIRCRAFTWas 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☐ Minor☐ Substantial☐ None

Registered Owner of Other Aircraft

Name: _____

City: _____

State: _____ ZIP: _____

Country: _____

Pilot of Other Aircraft

Name: _____

City: _____

State: _____ ZIP: _____

Country: _____

ADDITIONAL INFORMATION (Please type or print in ink)

Use this space if additional space is needed for any answers.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Date of this Report

08/14/2020
mm/dd/yyyyName of Pilot/Operator: RICHARD LAWSONSign [REDACTED]

-- or --



Check here to electronically sign this document

If a Person Other than Pilot/Operator is Filing Report

Name: _____

Title: _____

Signature: _____

-- or --



Check here to electronically sign this document

FOR NTSB USE ONLY

NTSB Accident/Incident No.

WPR20CA263

Reviewed by NTSB Regional Office

WPR

Name of Investigator

Eleazar Nepomuceno

Date Report Received

8/31/2020

N917LB accident narrative, August 3, 2020 Teton Village, WY.

The day started out as a normal flying day. At 5:00 am we checked the weather down stairs in the driveway, and again out on the upper deck 25 feet higher, before checking the internet sites, the house sits 500 feet above the flying area about 5 miles SE. Once on the computer the following sites were checked for weather reports: Aero weather, and Wi weather.gov for KDIJ , and DJAC METAR and TAF reports, Intellect Radar summary McCall, Idaho, covering NW region, Aviation weather center regional Satellite image and radar, Mountain Weather forecast, real time lightening maps, and prog charts. For wind data, we checked ADDS winds terminal data, windy and windy TY for 6400, 10,000, 14,000, 18,000, 24,000, and 30,000, winds aloft were checked for Pocatello, ID. 6,000 230/11, 9000 LV, 12000, 220/16, 18000, 220/37, 30000, 250/36, Dillon MT. 9000 LV, 12000, 230/08, 18000, 250/33 30000, 230/41, Lander, WY. 9000, 190/07, 12000 LV, 18000, 300/17, 30000, 290/29. The wind conditions reported in Buffalo bowl at 8,000 ft, for the last few hours , and noticing the trend, which were light and variable, also the wind conditions reported in the Saddle, between Grand Teton peak and the the Mid Teton peak at 11610 ft, which were comparatively light, were checked on Mesowest. During the drive to the launch site at least 5 of the flags hanging on flag poles was checked, all hanging straight down limp. On arrival at the launch site the wind socks on tower 3 and 5 for the Jackson Hole Aerial Tram was checked to determine a launch spot. All weather resources indicated a rather calm flying day with winds variable around 4 to 5 knots and no forecast of any precipitation, or any weather conditions that would adversely effect a balloon flight in our area.

I launched N971LB , an A310 Linstrand US hot air balloon with 15 passengers, from our normal launch site around 7:30 am MST. We climbed to 200 feet AGL and slowly floated SW, then climbed to 800 feet and turned to the north at a slow rate for about a mile. I then descended into the SW flow to line up for a landing location. It was at this point in the flight I noticed some clouds clear above the Teton range. I compared their height to the Grand Teton Peak and realized they were very high clouds. I also checked on the other balloons in flight and everyone was still moving at a slow rate of 1 or 2 MPH. The direction then turned to the west. As we approached the ground the wind picked up, causing the balloon to descend and we lightly touched the ground. When I realized we were going to touch the ground I advised the passengers to HOLD ON to the hand holds and BEND YOUR KNEES, as briefed in the preflight briefing. After recovery from the unintended landing I maneuvered to land the balloon. The balloon was then picked up and we gained altitude and suddenly a 180 degree shift in direction. As the direction changed, the ground speed increased considerably. The balloon then started a descent into the ground, using multiple burners I could not stop the rate of descent. When I determined we were going into the ground I commanded the passengers to GET DOWN. In the pre flight briefing I had instructed and demonstrated this position with their heads at or below the bolster. I estimate we touched down around 20 MPH. I was unable to control the point of impact with the ground. The balloon impacted the ground on an irrigation ditch striking the side of the ditch. This jerked the balloon and tilted the basket. I had my left hand wrapped around the deflation line pulling it, and my right hand was holding on to a fuel tank ring behind me.

When the basket slammed into the side of the irrigation ditch it decelerated immediately. I found my self propelled towards the bolster of the basket in front of the basket. My mind asked how I could be leaving the basket when I am still holding on. I still had a hold of something in my hand. Inspecting the basket later I realized the rubber padding ring around the tank ring had come off and that was what I felt in my hand. I realized falling in front of the basket I might be fatally injured, and determined to hold on to the deflation line as long as I could. I then

grabbed the deflation line with both hands as I was ejected from the basket. Minus my weight the balloon drifted back into the air. Some how I survived the basket rolling over me, I started running after the balloon yelling PULL THE RED LINE. This line opens the Q-vent, a fast deflation system and would stop the balloon from climbing higher. Once the balloon started its descent I started yelling GET DOWN. The balloon descended back into the high ground wind, landed and was dragged into a cattle fence. Apparently as the basket struck the fence some passengers fell from the basket and received injuries. The balloon continued to drag another 50 yards coming to rest on some soft trees which did not damage the balloon envelope. Those who were down in the balloon on impact with the fence were not injured and exited the basket after it stopped.

Upon reaching the balloon and passengers I checked on the passengers and triaged their injuries which appeared to be mostly orthopedic, except for a possible concussion. It appeared we had about 6 to 8 injuries. Seeing no immediate life threatening injuries I concentrated on contacting 911, and directing them to our landing site. The landing site was in a clearing by trees and not easily visible or accessible. I was able to find the apparent head of the EMT for one of the responding units and lead him to the passengers. He in turn triaged the passengers and advised the EMTs of equipment needed. It was determined to call a helicopter for the more serious injured passenger as the ambulance drivers did not think they could maneuver the terrain.

After the passengers were all treated and transported I gave a report of the flight to the Teton County Sheriff's investigator. The investigator forwarded the report to the FAA who in turn, apparently forwarded it to the NTSB. Within three hours of the accident I was interviewed by a member of the NTSB and the report was submitted.

A copy of the passenger manifest was attached to the sheriff's report. I do not have a final determination on passenger injuries due to Hipaa regulations.

Richard Lawhorn

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Recent Cities

Jackson, WY (83001) ([weather/us/wy/jackson/43.48,-110.76](#))

43.48 °N, 110.76 °W

Jackson, WY Weather History ★ 🏠

☀️ 83° JACKSON HOLE AIRPORT STATION (/WEATHER/KJAC?)

CM VEN=LOCALWX PWS DASH) | [CHANGE](#) ▼[HISTORY \(/HISTORY/DAILY/US/WY/JACKSON/KJAC\)](#)

- [TODAY \(/WEATHER/KJAC\)](#)
- [HOURLY \(/HOURLY/KJAC\)](#)
- [10-DAY \(/FORECAST/KJAC\)](#)
- [CALENDAR \(/CALENDAR/US/WY/JACKSON/KJAC\)](#)
- [HISTORY \(/HISTORY/DAILY/US/WY/JACKSON/KJAC\)](#)
- [WUNDERMAP \(/WUNDERMAP?LAT=43.48&LON=-110.76\)](#)

Daily

Weekly

Monthly

(/history/daily/KJAC/date/2020-08-03/US/WY/JACKSON/KJAC/date/2020-

8-3)

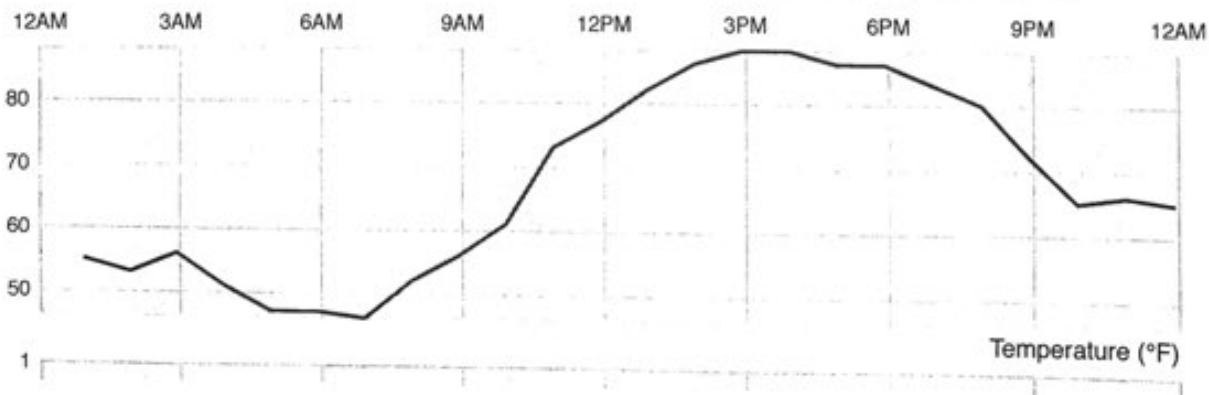
8-3)

8)

August

3

2020

[View](#)<https://www.wunderground.com/history/daily/KJAC/date/2020-8-3>

Average	39.96	-	-	
Wind (MPH)	Actual	Historic Avg.	Record	▲
Max Wind Speed	16	-	-	
Visibility	10	-	-	
Sea Level Pressure (Hg)	Actual	Historic Avg.	Record	▲
Sea Level Pressure	23.85	-	-	
Astronomy	Day Length	Rise	Set	▲
Actual Time	14h 27m	6:16 AM	8:44 PM	
Civil Twilight		5:44 AM	9:16 PM	
Nautical Twilight		5:04 AM	9:56 PM	
Astronomical Twilight		4:18 AM	10:41 PM	
Moon: full moon		9:15 PM	5:58 AM	

Daily Observations

Time	Temperature	Dew Point	Humidity	Wind	Wind Speed	Wind Gust
12:56 AM	55 °F	40 °F	57 %	N	10 mph	0 mph
1:56 AM	53 °F	38 °F	57 %	NNE	7 mph	0 mph
2:56 AM	56 °F	39 °F	53 %	CALM	0 mph	0 mph
3:56 AM	51 °F	38 °F	61 %	ENE	3 mph	0 mph
4:56 AM	47 °F	37 °F	68 %	CALM	0 mph	0 mph
5:56 AM	47 °F	37 °F	68 %	VAR	3 mph	0 mph
6:56 AM	46 °F	39 °F	76 %	NNE	3 mph	0 mph
7:56 AM	52 °F	42 °F	69 %	NNW	5 mph	0 mph

8:56 AM	56 °F	42 °F	60 %	CALM	0 mph	0 mph
9:56 AM	61 °F	43 °F	52 %	WNW	9 mph	0 mph
10:56 AM	73 °F	42 °F	33 %	CALM	0 mph	0 mph
11:56 AM	77 °F	44 °F	31 %	VAR	3 mph	0 mph
12:56 PM	82 °F	42 °F	24 %	CALM	0 mph	0 mph
1:56 PM	86 °F	42 °F	21 %	VAR	7 mph	0 mph
2:56 PM	88 °F	43 °F	21 %	SSW	13 mph	18 mph
3:56 PM	88 °F	41 °F	19 %	WNW	14 mph	20 mph
4:56 PM	86 °F	40 °F	20 %	WSW	9 mph	24 mph
5:56 PM	86 °F	37 °F	18 %	WSW	16 mph	22 mph
6:56 PM	83 °F	38 °F	20 %	W	14 mph	0 mph
7:56 PM	80 °F	38 °F	22 %	W	7 mph	0 mph
8:56 PM	72 °F	37 °F	28 %	CALM	0 mph	0 mph
9:56 PM	65 °F	36 °F	34 %	E	7 mph	0 mph
10:56 PM	66 °F	42 °F	42 %	NNE	12 mph	0 mph
11:56 PM	65 °F	42 °F	43 %	NNE	14 mph	0 mph

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AA

🔒 w1.weather.gov



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FTUS45 KRIW 031121

TAFJAC

TAF

KJAC 031121Z 0312/0412 01005KT P6SM SCT110

FM031400 VRB04KT P6SM SCT120

FM031800 19010KT P6SM FEW120

FM032200 24012G20KT P6SM SCT120

FM040500 36007KT P6SM SKC=



The location was reported as Teton Village, WY. This location would be approximately 5 miles SW of Jackson Hole (KJAC), and 12 miles SE of Driggs, ID (KDIJ). Note that KDIJ is on the west side of the Teton Mountain Range, and KJAC is on the east side. The accident location is on the east side of the range.

The accident sequence began at approximately 8:13 AM MDT (1413 Z).

METAR at KJAC near the accident time:

031356Z COR 34004KT 10SM BKN120 11/06 A3026

Note: COR indicates corrected METAR report entered

METAR sequence at KDIJ near the accident time:

031356Z AUTO VRB03KT 10SM FEW120 18/04 A3019 RMK AO2

Note: VRB indicates wind was from variable directions

[Edit Activity](#) [Add Activity Note](#)

Booked out

Available: 1 of 32 spots

Notes

Teton Village
Parking Lot

Teton Village
Parking Lot

Teton Village
Parking Lot

Teton Village
Parking Lot

Teton Village
Parking Lot

Teton Village
Parking Lot

Teton Village
Parking Lot

Teton Village
Parking Lot

**Teton Village
Parking Lot**

Notes

Hotel Terra

Notes

(not answered)