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

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

TAMEROUM OFFICE													
BASIC INFORMATION Accident/Incident Location													
Accident/Incident Locati Nearest City/Place: Mukwo				24~4-	. <u>WI</u>	Date/Time							
Nearest City/Place: Mid-Worlage State:						Date: 03/05/2012 Local Time: 2:30							
ZTP: 35149 Country: 55A Latitude: 42:51:56N (dd:mm:ss N/S) Longitude: 88:18:04W (ddd:mm:ss E/W)						ļi		=	Time	Zone: CS7	l'		
	T (Q/kt sg·mm·n	TonRinge: 00'	()		144 /	_	ollision with O	ther Aircraft		Altitude of	In_Fligh+		
Phase of Operation Standing Takeoff (incl, initial clim	nb) 🗌 Cruise	, I	ΗП	lover	l⊏	Midair	mer witch		Mutuae or Occurrenc			
Taxi Climb		☐ Manet	ivering	٥□	Other		On-ground) (CT	
☐ Descent ☑ Landing		Appro			Jnknown] None	52. THE C. I. S.		JANSON 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		MSL	
AIRCRAFT INFOR	MATION				THE SECOND				nantini <u>Nantini</u>	<u> </u>			
Manufacturer: Piper								eight:					
Model: PA-22-150								ne of Accident			1,25	5 <u>0</u> 1bs	
Serial Number: 22-4148	8		_				Location of C	Center of Grav	ity at	Time of A	ccident/Inc	cident:	
Registration Number: N		A	lmateur-bi	uilt:	☐ Yes 🗹 N	Го					or 🗌 datum		
							-OI				namic Cord (%		
Category of Aircraft		worthiness C	ertificate		Number of	Se	eats:			g Gear	☐ Retracta		
Airplane Balloon	(Check all tha Standard	<i>at apply)</i> Speci	iaì	ļ	If Large Aim	'Iafi	t, how many seats			my additions ration that a	al landing gea	r	
☐ Blimp/Dirigible	Standard ☑ Normal	-	stricted						Tricy		pp⊔es: ☐ Tai	lw/hee!	
☐ Glider ☐ Gyrocraft	Utility	Lir	nited		i		r			-			
☐ Helicopter	Acrobatic Transport	∐ Pro □ Ev	ovisional perimental				r	1 1		phibian ergency Floa		gh Skid id	
☐ Powered lift ☐ Ultralight		☐ Sp	ecial Flight		Passeng	ers:		[] Floa	ıt	☐ Ski	i	
Unknown		□ Liį	ght Sport			☐ Hull ☐ Ski/Wheel☐ Unknown							
Type of Maintenance Pr	rogram		Last Insp	oecti	on Type								
Annual			100 Ho	•		ous	Date Last Inspection: bus Airworthiness						
Conditional (Amateur-bu			☐ AAIP		Conditio	onal							
☐ Manufacturer's Inspection ☐ Other Approved Inspecti	ion Program (A.	AIP)	Annual		☐ Unknow	VII.		Airframe To				hrs	
Continuous Airworthines										at <i>(check o</i> ion 🏻 Ti	•	nt/Incident	
☐ Other, specify: IFR Equipped			Stall Was	l Warning System Installed				Last Inspection Time of Accident/Incident Type of Fire Extinguishing System					
IFK Equipped ☑ Yes □ No □ Unk	nown		Stall Warning System Ins				l "				ig bystem		
سان ہے۔ ہے									Specify				
		<u></u>			***************************************			<u> </u>				·	
	LT Activated	-	ELT Mai	nufa	cturer:							_	
☑ Yes ☐ No ☐	Yes No		1										
ELT Aided in Locating	Accident/In	cident	Serial Nu										
☐ Yes ☑ No			Battery 7					F	}atter	 ry Exp. Da	ıte:		
Engine Type		Reciprocation	ig Fuel		ropeller								
Reciprocating Tu	ırbo Jet	System Type	e		•		36.0	- h					
☐ Turbo Shaft ☐ Turbo Fan ☑ Carburetor ☑ Fixed Pitch					Fixed Pitch Controllable	P ;+		cturer:					
Transcript [10]	TWIN ALTT		——т	1-		_ 10	ch Model:	Engine Rated		T	T-	 _	
			- 1					Power Measu			Time	Time	
				~ ~	andre 6		Date	as (check one)	ror ·	Total	Since	Since	
Engine Engine Manufac		Ingine Aodel/Series			ufacturer's al Number_		of Mfg. mm/dd/yyyy	☐ Horsepow		Time (hours)	Inspection (hours)	Overhaul (hours)	
Eng. 1 Lycoming)-320		4467-2					150		38		
Eng. 2													
Eng. 3											_		
Eng. 4								1				L	

OWNER/OPERATOR INFORMATIO							
Registered Aircraft Owner		Owner Address					
Name: Vaughan Weeks	City:State: WI ZIP: 53404						
Fractional Ownership Aircraft: Yes 🔽 No	Country: USA						
Operator of Aircraft	Operator Address						
Name:	City: ZIP:						
Doing Business As: Air Carrier/Operator Designator (4 Character Coo	State: ZIP:						
	··).						
Regulation Flight Conducted Under	DELLE FIRST CO.	Revenue Sightseeing Flight					
		Air Medical Flight					
FAR 121 FAR 135 Non-US, Non-C		Air Medicai Fiight					
	7						
Purpose of Flight for FAR 91, 103, 133, 137 (Select one)	Revenue Operation for FAR 121, 125, 129, 135 (Select one)	Type of Commercial Operating Certificate Held (Check all that apply)					
☑ Personal	Scheduled or Commuter	None					
Business Executive/Corporate	Non-Scheduled or Air Taxi	☐ Flag Carrier Operating Certificate (121) ☐ Supplemental					
Other Work Use	Daniella au Tutomotional	☐ Air Cargo					
Instructional	Domestic or International	Foreign Air Carriers (129) Commuter Air Carrier (135)					
Ferry Positioning	Domestic International	On-Demand Air Taxi (135)					
Aerial Application	Course Or water	Large Helicopter (127)					
☐ Aerial Observation ☐ Air Drop	Cargo Operation Passenger/Cargo	Rotorcraft External Load (133)					
Air Race / Show	Passenger How many?	Agricultural Aircraft (137)					
☐ Flight Test ☐ Public Use	Cargolbs	Other Operator of Large Aircraft					
Unknown	473411	- Cutof Operator of Dango America					
OTHER AIRGRAFT - COLLISION:	lf air or ground collision occurred, complete	His section for other aircraft)					
	**	Damage to Other Aircraft					
Registered Owner of Other Aircraft		Substantial None					
l ~	Cit						
First Name: Middle Initial:	State:	ZIP:					
Last Name:	Country:						
Pilot of Other Aircraft							
First Name:		ZIP:					
Middle Initial: Last Name:	State: Country:	Mr:					
MEGRANICAL MAJEUNCTIONBA	NAMES OF THE PROPERTY OF THE P						
	GEOGRAFIA AND AND AND AND AND AND AND AND AND AN	Car Mark Control (1975) Control (197					
Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no.	☐ Yes ☐ No ☑ Unknown , serial no., and describe the failure.)	Total Time/Cycles On Part					
		Hours					
		Cycles					
		Cycles					
		Time Since This Part Inspected/Overhauled					
		Hours					
DAMAGE TO AIRCRAFT AND OTH	ER PROPERTY						
Aircraft Damage Aircraft		Aircraft Explosion					
☐ None ☐ Substantial ☑ None	Both Ground and In-Flight	▼ None ☐ Both Ground and In-Flight					
Minor ☐ Destroyed ☐ In-Flig		☐ In-Flight ☐ Unknown Origin ☐ On-Ground					

Description of Damage to Aircraft and Other Property (use additional sheet if necessary)									
Nose wheel bent, front and underside cowling damaged, prop bent									
AIRPORT INFORMATION (IF the	accident/incident occu	irred on appr	each, takeoff or	within 3 miles	of an airport,	complete this section)			
Airport Identifier:			Distance Fron	n Airport Cente	er:	SM			
Airport Name:						degrees MAG			
Proximity to Airport Off Airport/Airst	in D On Airport D	On Airstrip	Airport Eleva			ft. MSL			
	The Crewithous C. J.	On Wilsonth	An port Eleva			Tr. IAIDTA			
Approach Segment (Select one)		a 1a	ندد لـــــا	inat		[] Go 4			
☐ On Instrument Approach ☐ Landin☐ Crosswind ☐ Downy		e leg v Approach	□ Fi	mai Sborted Landing (a	fter touchdown	☐ Go Around n)			
IFR Approach (Check all that apply)				h (Check all that	·	<u></u>			
None PAR	☐ MLS ☐	Practice	None			op and Go			
☐ ADF/NDB ☐ Sidestep	□ LDA □	GPS	☐ Traffic Pattern	n	☐ To	uch and Go			
SDF DLS		Loran	Straight-In	- Palloni		nulated Forced Landing			
☐ VOR/TVOR ☐ Localizer Only ☐ VOR/DMB ☐ LOC-back course	☐ Visual ☐ Contact	Unknown	☐ Valley/Terrain☐ Go Around	и гоноwing		rced Landing ecautionary Landing			
TACAN RNAV	☐ Contact		Full Stop			known			
Runway Information			ļ	tunway/Landin	g Surface	Check all that apply)			
Runway ID:(L/R/C) Length:	ft. Width-	ft	☐ Dry	☐ Snow-	Compacted	☐ Water-Calm			
		16	Holes	Snow-		Water-Choppy			
Runway/Landing Surface (Check all that of	_	l	☐ Ice Covered☐ Rough	Snow-		☐ Water-Glassy ☐ Wet			
☐ Asphalt ☐ Grass/Turf ☐ Mac.	adam. Water il/Wood Unknown	1	Rubber Depo		,, 00	Unknown			
☐ Concrete ☐ Gravel ☐ Meta ☐ Dirt ☐ Ice ☐ Snov		•	Slush Covere		ation				
FLIGHT ITINERARY INFORMA	TION	in the second							
Last Departure Point	Time of Departure	Destination	<u> </u>	<u> </u>	Type Flight	t Plan Filed			
Airport ID: 3D2	-	Airport ID:			✓ None	☐ VFR/IFR			
City: Ephriam	Time: 1:00 PM	City: Burlin			☐ Company				
	Time Zone: CSt	State: WI	192011		☐ Military \ ☐ VFR	VFR Unknown			
State: WI	I IIII O ZIOHE.		olpo		Activated? Yes No				
Country: Door		Country: Ra	Cirie		ALGER AUGE	——————————————————————————————————————			
Type of ATC Clearance/Service (Checka		Sal TEXP	" " ~ ~	ED DULLA TANT		Comingo			
☐ None ☐ Special VFR ☐ VFR ☐ IFR	☐ Speci ☐ VFR			FR Flight Followi raffic Advisory	шg	Cruise Unknown/NA			
Airspace where the accident/incident occ		<i>pply)</i> ohibited Area		☐ Jet Training	Area	☐ Special			
Class A Class E Class G	☐ Re:	stricted Area		☐ TRSA	,	Air Traffic Control Area			
Class C Demo Area	Ш́мі	litary Operation	is Area (MOA)	☐ FAR 93		Unknown			
Class D Warning Area	ı 🗌 Air	rport Advisory A	Area			w-P			
Aircraft Load Description (Check all that									
☐ None ☐ Towing Glide	~ =	rachutists		Livestock					
✓ Passengers ☐ Towing Bang ☐ Cargo ☐ Other Externs	····	ater nemical/Fertilize	r/Seeds	Unknown					
FUEL & SERVICES INFORMA									
	Fuel Type	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>	<u> 2015. (1875) (2017)</u>				
Fuel on Board at Last Takeoff (convert from pounds, as necessary)	Ruel Type □ 80/87	115/145	☐ JP3	ΠOffi	er, specify				
	₩ 100 Low Lead	☐ 115/145 ☐ Jet A	☐ JP4		, op~my				
Gallons	100/130	Automotiv							
Other Services, if Any, Prior to Departu	re								

EVACUATION OF AIR	(GRVAFIL:	toria is	10	7.00			969 Z. 869(2 55))		
Was an emergency evacuation	on of the aircraft	performed		☐ Yes	☑ No				
Method of Exit - Describe how the occupants exited and how many occupants evacuated each location									
WEATHER INFORMA	TEON/ATE:TE	ACCID	ENI	MNCIDE	NITSITE:				
Weather Observation Facilit	у				er Information			Method of Briefing	
Facility ID:		_		<i>k all that appi</i> itional Weath	• •		☐ Company	(Check all that apply) ☐ In Person	
Observation Time:		-	∏ Fi	ght Service S			☐ Military	☐ Teletype	
		- [7/Radio ntomated Rep	ort		☐ Internet ☐ Unknown		
Distance from Accident Site:		M	Co	ommercial We	eather Service (DUA	TS)		☐ TV/Radio	
Direction from Accident Site:	degr	es MAG	Tinh					Unknown	
Briefing Type/Completeness ☐ Full	☐ Abbreviate	.d		t Condition	Dusk	П	Dark Night	Visibility	
Partial / Limited By Pilot Partial / Limited By Briefer	☐ Unknown ☑ Not Pertin	1	Z Da		Night		Bright Night Not Reported	10_miles	
Sky/Lowest Cloud Condition	_	Ceiling		_	- .		estriction to Visibility		
Clear	Thin Broken Thin Overcast	☐ None (☐ Broker	None (clear) Doscured Broken Indefinite				None Blowing Dust	☐ Fog ☐ Ground Fog	
Partial Obscuration	Unknown	Overca					Blowing Sand	Haze	
Lowest Cloud Condition Hei	œh+	Ceiling I	Haight				Blowing Snow Blowing Spray	☐ Ice Fog ☐ Smoke	
Lowest Cloud Condition Her	gni ft AGL	Cennig	rrengmi		ft AGL		Dust	Unknown	
Wind Direction	Wind Speed	l 	ij	Wind Gus		T	ype of Turbulence (C)	beat all that amby	
☐ Indicated:	Velocity:	KTS		Velocity:		1	None		
degrees MAG	-or-							nity of Thunderstorm	
□ Mariabla	☐ Calm ☐ Light and Vari	-1-1-		Gusting		ı	verity of Turbulence		
☐ Variable	Light and van	able	☐ Not Gusting				Extreme Mode Severe Mode	erate	
NOTAMs (D, L and FDC), AIRMETs, S	IGMETs,	PIRI	CPs in effe	ct at the time o				
•		·							
<u> </u>		cing Forec	aet				Type of Precipitati	on (Check all that apply)	
Temperature:(C)	Ì_	Amoun	ıt		Туре			Oli (Check dit that appty) Drizzle	
or(F)	l F	None Trace		vioderate Severe	☐ Rime ☐ Clear		Rain	Ice Pellets	
Altimeter Setting:	in. HG	Light	٠ اسا	00.010	☐ Mixed		Snow Hail	☐ Snow Pellets ☐ Snow Grains	
Density Altitude:	<u></u>	cing Actua	l				Rain Showers Freezing Rain	☐ Ice Crystals ☐ Ice Pellets Shower	
Dew Point:(C)		Amoun	ıt	la danst-	Type			Freezing Drizzle	
or(F)	[None Trace		Aoderate Severe	☐ Rime ☐ Clear		Intensity of Precipi	tation	
		Light			☐ Mixed		l ^	oderate Heavy	

PILOT (A: INFORM			6.7				10 PS 12		2.0	
Pilot "A" Responsibilities 2 ✓ Pilot □ Co-Pilot	at the Time of Acci	i dent/Incide Flight Ins		heck Pilot [] Flight E	ngineer	Other Fl	ight Crew		
Pilot "A" Identification				~ .	Daoine					
First Name: Vaughan Middle Initial: B				City: State:	Racine	711	P: 53404			
Middle Initial: D Last Name: Weeks					ry:	∠ມ				
Age at time of Accident/Inci	ident:59_	Date of Birt		Certi	ficate Nur	nber				
			mm/dd/yyy							·
Degree of Injury	Seat Occupie		гт ·	Seat I			I '	Shoulder Ha		7 1 5 7
None Fatal Minor Unknown	✓ Left ☐ Right	☐ Front ☐ Rear	Unknowi					Used		∑ No ∑ No
✓ Minor ☐ Unknown ☐ Serious	Center	☐ Single		Availa	ve K	Yes 🗌	No A	Available	—் பாழை	
Pilot Certificate(s) (Check	all that apply)							<u>_</u>		
□ None □ Str		Recrea		Commercial			Flight Engine	er [☐ Foreign	
	ght Instructor	☐ Sport		Airline Tran	sport		J.S. Military			
Principal Occupation	Medical Certifica	te		Medi	al Certif	icate Vali	dity	Date of La	st Medical	
☐ Pilot		Class 3	/m	1 == 1		tions/waiv	ers	-		
☑ Other		Driver's Licen Unknown	se (Sport Pilot o		th limitatio known	us/waivers		mm/dd/s	יטטט	
Unknown		CTIVITIO MIT						L		
Medical Certificate Limita	ations									
Corrective lenses										
Madical Contif anto William										·
Medical Certificate Waive	CL 8									
Dota off on Disable Desir	***	Trical-4	Davier Aire	raft						
Date of Last Flight Review or Equivalent, Including	Y		Review Airc							
FAR 121/135 Checks:										
	mm/dd/yyyy	Model:								
Airplane Rating(s)	Other Aircraft			ent Rating(s)	1		Rating(s)			
(Check all that apply)	(Check all that ap	יעוקני)	1 '	that apply)	1 1	<i>Check all ti</i> □ None	nat appty)	r -1	Instrument A	\imlane
☐ None ☑ Single-Engine Land	☐ None ☐ Airship		☐ None ☑ Airplan	ne			Single-Engi		Instrument I	
Single-Engine Sea	Free Balloon		Helico	pter	1 [Airplane	Multi-Engir	ne 🔲	Helicopter	
☐ Multiengine Land	Glider		Power	ed Lift	[Gyroplan Powered	ne II: 0		Glider Sport	
☐ Multiengine Sea	☐ Gyroplane ☐ Helicopter						LLILL	لـا	oport	
	☐ Powered Lift									
Type Ratings					5	Student E	ndorsemer	its (Include a	lates)	
					Ì					
					1					
\					-					
1										
			Airplane						T	I
Flight Time (enter appropri		This Make	Single	Airplane	*** * .		rument	- n-4 ~	CT: 1	Lighter Than Air
number of hours in each box)	Aircraft	& Model	Engine	Multiengine 0	Night 48	Actual 44	Simulated	Rotorcraft	Glider 0	Than Air
Total Time	952	371	952	0	48	44	104	1		
Pilot in Command (PIC)			-					-		-
Time as Instructor						-			<u></u>	
This Make/Model	4		4	0	0	0	0	0	0	
Last 90 Days	4	4	4	ļ		 	 	1		
Last 30 Days						_	 	-		
Last 24 Hours	i i	[!		l	1	i	I	I

PALOT "B" IMFORWATION										
Pilot "B" Responsibilities at the		n t/In ciden] Flight Inst		Check Pilot	☐ pilat	nt Engineer	Other F	light Cray		
	l prodestit trot	1 v. rr.Brir mize				re rankmeer	Order t			
Pilot "B" Identification										
First Name: Middle Initial:				Ci	у:					
Middle Initial:				Sta	ite:	ZI	P:			
Last Name:										
Age at time of Accident/Incident: Date of Birth: Certificate Number:										
	Seat Occupied				t Belt			Shoulder H	arness	
□ None □ Fatal			Unknown	Use	d	Yes	No	Used		☐ ½°
		Rear Single		Ava	ilable	Yes 🗌	No .	Available	☐ Yes [□ No
Pilot Certificate(s) (Check all the										
None Certificate(s) (Check all the		☐ Recreati	iona1	☐ Commerc	vial	Пт	Flight Engine	eer r	Foreign	
Private Flight I		Sport		Airline T			U.S. Military		* ATAIÈII	
Principal Occupation Me	dical Certificate	· · · · · · · · · · · · · · · · · · ·		Me	dical Cer	tificate Vali	dity	Date of La	ast Medical	
□ Pilot □ 1	None 🔲 Clas		45		Without lin	nitations/waive	-			
Other	Class 1 Driv Class 2 Dunk		se (Sport Pilot o		With limita Unknown	tions/waivers	i	mm/dd/y		
					OTIVITO MI			,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Medical Certificate Limitation	us ——			_	_		_			
Madical Contifeet Wi										
Medical Certificate Waivers										
			•							
Date of Last Flight Review		Rlight T	Review Aircı	raft						
or Equivalent, Including		1 -								
FAR 121/135 Checks:		1								
	mm/dd/yyyy	Model:				~				
	Other Aircraft Ra Check all that apply)			ent Rating(that apply)	s)	Instructor 1				
1 ' '	Check all that apply) None	,	(Check all	иш арріу)	ply) (Check all that apply) ☐ None ☐ Instrument Airplane					
Single-Engine Land	Airship		Airplan	1e	1	Airplane S		ne 🔲 I	Instrument H	
☐ Single-Engine Sea	Free Balloon		Helicon Powere	pter ⊶ T:≏	-	Airplane l	Multi-Engine	e 🔲 I	Helicopter	-
☐ Multiengine Land ☐ Multiengine Sea	Glider Gyroplane		rowere	JUL LILL	1	Gyroplane Powered I	Lift	H':	Glider Sport	
اً ا	Helicopter							۱ بـــا	~	
Type Deti- or	Powered Lift					Student Ti	dorac	ts (Include da	rtog)	
Type Ratings						student En	aursemen	is unciude da	ues)	
\					1					
[,				
Flight Time (enter appropriate	, n	is M-7	Airplane	A 45-27	T	Instr	rument			F3.3 *
riight lime (enter appropriate number of hours in each box)		is Make Model	Single Engine	Airplane Multiengin	e Night		Simulated	Rotorcraft	Glider	Lighter Than Air
Total Time										1
Pilot in Command (PIC)										
Time as Instructor										
This Make/Model										
Last 90 Days		\Box								
Last 30 Days		\Box								
Last 24 Hours		Γ			1				1	

AND DATH ON VAL FILIGIAT CINE	w members	(ট্রিলেনিকে তা ভর্মান র	iendans, complee the	e (tell) (existing	હો પાછાપુ⊚ાં	meijt	(600	<u> </u>
Pilot Name and Address							Degree of In	
First Name:		City:					☐ None ☐ Minor	Fatal Unknown
Middle Initial:		State:	ZIP:				Serious	Unknown
Last Name:		Country:						*
Pilot Certificate(s) (Check all that			-	<u></u>		l	Seat Occupi	ed Front
☐ None ☐ Student ☐ Private ☐ Flight Instructor	☐ Recreational ☐ Sport	☐ Commercial ☐ Airline Transport	☐ Flight Engineer ☐ U.S. Military	☐ Fo	reign.		☐ Right	Rear
Type Rating/Endorsement for	<u> П зрогг</u>		ime at the Time				Center	☐ Single
Accident/Incident Aircraft?	☐ Yes ☐ No	of this Acciden		hrs				Unknown
Pilot Name and Address							Degree of In	jury
		City:					☐ None	☐ Fatal
First Name: Middle Initial:		State:	ZIP:				☐ Minor ☐ Serious	Unknown
		Country:						
Pilot Certificate(s) (Check all that	apply)						Seat Occupi	ed
☐ None ☐ Student	Recreational	Commercial	Flight Engineer	☐ Fo	reign	1	☐ Left ☐ Right	☐ Front ☐ Rear
Private Flight Instructor	☐ Sport	Airline Transport					Center	☐ Rear ☐ Single
Type Rating/Endorsement for Accident/Incident Aircraft?	☐ Yes ☐ No	of this Acciden	ime at the Time	hrs		ł		Unknown
	☐ 163 ☐ 140	of this Accide	TO MCIACALE.					
Pilot Name and Address							Degree of In ☐ None	ıjury □ Fatal
First Name:		City:					None Minor	☐ Fatal ☐ Unknown
Middle Initial:		State: Country:	ZIP:				Serious	
Last Name:		County					Seat Occupi	had
Pilot Certificate(s) (Check all that	Recreational	Commercial	Flight Engineer	□Fo	reim		Left	☐ Front
	Sport	☐ Airline Transport			noign		Right	Rear
Private Flight Instructor								Single
Private Flight Instructor Type Rating/Endorsement for	L bport		ime at the Time				☐ Center	
Type Rating/Endorsement for Accident/Incident Aircraft?	Yes No	Total Flight T	ime at the Time nt/Incident:	hrs			∐ Center	Unknown
Type Rating/Endorsement for Accident/Incident Aircraft?	Yes No	Total Flight T of this Accide	nt/Incident:		N	955a		
Type Rating/Endorsement for	Yes No	Total Flight T of this Accide	nt/Incident:		ijî vise	9 5 5@1	(V))	☐ Unknown
Type Rating/Endorsement for Accident/Incident Aircraft?	Yes No	Total Flight T of this Accide	nt/Incident:			essa & 4	(V))	☐ Unknown
Type Rating/Endorsement for Accident/Incident Aircraft?	Yes No	Total Flight T of this Accide	nt/Incident:		Seat Seat	Crew Ogn-	(V))	☐ Unknown
Type Rating/Endorsement for Accident/Incident Aircraft? PASSENCIER(S) / OTHER Name and Address First Name:	☐ Yes ☐ No	Total Flight T of this Accide	nt/Incident:			Crew	Revenue Revenue Non- Occupant FAA	Fattal Serious Injury Minor Injury No Injury No Injury
Type Rating/Endorsement for Accident/Incident Aircraft? PASSENCIER(S) / OTHER Name and Address First Name: Middle Initial:	Yes No	Total Flight T of this Accide	nt/Incident: នាស់ន, ខេត្តសំពេមe ខ្មត់ នង្សខ្មំព ZIP:			Crew	Revenue Revenue Non- Occupant FAA	☐ Unknown
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RVARIRATIVE HISTORY OF FLIGHT (Please type or print in inta)

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 time and point of departure, intended destination, and services obtained. Aircraft fueled at BUU. Wing tanks (18gal each) and aux (8gal). Total fuel on board 44 gal. Per the aircraft manual and experience in this aircraft a conservative fuel burn rate for this flight was 10gph.

Departed BUU on a GPS (handheld) course direct to 3D2, at approximately 7:15 AM CST. Running on right tank. Engine was leaned when cruising altitude (5500 ft) was reached.

VFR-Following was requested and provided shortly after take-off from MKE Approach, and continued later handed off to GRB approach.

Changed to left tank after 1 hour of flight, approximately over Manitowoc Wi. Began transferring fuel from aux to right. Landed 3D2 after about 1 hour 40 minutes of total flight time

The plane was left unattended at the open but unattended airport for approximately 3 hours.

Upon return nothing unusual was discovered during preflight walk around.

Took off direct BUU running on right tank at about 1:00 PM CST. VFR following was picked up from GRB approach, later handed off to MKE approach.

After about 1 hour 15 minutes of flight, just south of Waukesha WI, MKE approach OK'd a descent from 4500 ft (cruise altitude) to 3500 ft for arrival at BUU. Very shortly after arriving at 3500 ft the engine quit.

The fuel selector was changed to left tank and the engine restarted ran for about 30 seconds then quit.

The engine-out situation was announced to MKE approach and vectors to the nearest airport were requested, East Troy WI was suggested, distance given as 6 miles.

A glide was established approximately paralleling I-43 South. this path aligned with both a course for East Troy and a farm field about 2000 feet long which was chosen for emergency landing if the glide could not be extended.
The engine was restarted in short bursts by hand pumping the accelerator pump and the primer pump until prop stopped turning about 300 ft AGL and restart attempts were abandoned.
Aircraft landed in line with but short of the selected field in the Mukwanago river about 400 feet west of i-43
Pilot waded ashore, called 911, and was picked up by first responders.
RECOMMENDATION (How could this acatemianatemi have been prevented?)
Operator/Owner Safety Recommendation

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