KEN PAXTON
ATTORNEY GENERAL of TEXAS

CUSTODIAL DEATH REPORT

Agency Information

CDR Number:	26-137-C	Version Type:	AMENDED
Report Date:	2/23/2026 7:48 AM	Status:	Submitted

Agency/Facility Information

Agency Name:	Wood County Sheriff's Dept.	Agency Address:	PO BOX 307
Agency City:	Quitman	Agency State:	TX
Agency Zip:	75783		

Director Information

Director Salutation:	Sheriff	Director First Name:	Kelly
Director Middle Name:			
Director Last Name:	Cole		
Reporter Name:	Michael Chilson	Reporter Email:	mchilson@mywoodcounty.com

Decedent Information

Identity of Deceased

First Name: Cody

Middle Name: Joe

Last Name: Henderson

Suffix:

Date of Birth: 4/4/1980 Sex: Male

Race: Anglo or White

Age At Time Of Death: 45

Date/Time of Custody (arrest, incarceration) (mm/dd/yyyy hh:mm AM/PM):

Date/Time of Custody or Incident: 2/14/2026 10:00 PM

Date/Time of Death (mm/dd/yyyy hh:mm AM/PM):

Death Date and Time: 2/15/2026 4:25 AM

Manner / Cause of Death

Has a medical examiner or coroner conducted an evaluation to determine a cause of death?

Medical Examiner/Coroner Evaluation?: Yes, results are available

What was the manner of death? (select only one)

Manner of Death: Homicide (includes Justifiable Homicide)

Medical Cause of Death:

Medical Cause of Death:

Firearm wounds

Had the decedent been receiving treatment for the medical condition that caused the death after admission to your jail's jurisdiction?

Medical Treatment:	Not Applicable

If death was an accident, homicide or suicide, who caused the death?

Who caused the death?:	Law enforcement/correctional personnel

If a weapon caused the death, what type of weapon caused the death? (Hold CTRL to select all that apply)

Type of weapon that caused death?:	Rifle/shotgun

Was the cause of death the result of a pre-existing medical condition or did the decedent develop the condition after admission?

Pre existing medical condition?:	Not Applicable; cause of death was accidental injury, intoxication, suicide or homicide

If death was an accident, homicide or suicide, what was the means of death?

Means of Death:	Firearm

Location / Custody Information

Where did the event causing the death occur?

Street Address:	3961 FM 2966	City:	Quitman
County:	Wood	Zip:	75783

What location category best describes where the event causing the death occurred?

Location Category: Residence/Home

What type of custody/facility was the Decedent in at the time of death:

Type of Custody: Police Custody (pre-booking)

Specific type of custody/facility:

Specific Type of Custody/Facility:

N/A

What was the time and date of the deceased's entry into the law enforcement facility where the death occurred (mm/dd/yyyy hh:mm AM/PM):

Entry Date Time:

Entry Date Time N/A: ☑

Where did the death occur?

Death Location: Medical facility

General Information

Did any other law enforcement agencies respond to calls for service related to this incident?

Other Agencies Respond?:	Yes

What were the most serious offense(s) with which the deceased was (or would have been) charged with at the time of death?

Offense 1:

Aggravated Assault on Peace Officer

Offense 2:

Aggravated Assault on Peace Officer

Offense 3:

Unlawful Poss. F.A. by Felon, Poss CS X2, UUMV, Theft of Firearm, Evading Arrest w/ Vehicle

Were the Charges::	Not filed at time of death

What were the types of charges or reason for contact? (Hold CTRL to select all that apply)

Type of Offense:	Violent Crime Against Persons; Alcohol / drug offense; Crime Against Property

At any time during the incident and/or entry into the law enforcement facility, did the decedent display or use a weapon?

Decedent display/use of weapons:	Yes, mark all that apply
Decedent Display or Use Weapon Details:	Discharged firearm

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Attempt to Injure Others?:	Yes (select all that apply)
Ways Decedent Attempted To	Injured law enforcement

Injure Others:	personnel

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Appear intoxicated (alcohol or drugs):	Unknown	Make suicidal statements?:	No
Exhibit any mental health problems?:	Unknown	Exhibit any medical problems?:	Unknown

At any time during the incident and/or entry into the law enforcement facility, did the decedent:

Barricade self or initiate standoff?:	Yes	Resist being handcuffed or arrested?:	Yes
Physically attempt/assault officer(s):	Yes	Gain possession of officer's weapon:	No
Verbally threaten other(s) including law:	Unknown	Escape or attempt to escape/flee custody:	No
Attempt gain possession officer's weapon:	No		

Was the deceased under restraint in the time leading up to the death or the events causing the death?

Under Restraint:	No

Summary of Incident

Summary of How the Death Occurred: (max. 30,000 characters)

Summary:

When LEOs attempted to make contact with the suspect, the suspect fired several shots at them, striking a Wood County Deputy four times and a DPS Trooper once. Injured LEOs were evacuated by patrol vehicles to nearby hospitals. WCSO SRT was deployed, along with assistance from DPS SRT-1. A lengthy standoff ensued, in which numerous attempts were made to get the suspect to surrender & resolve the incident peacefully. Loud hails to surrender were made on marked patrol vehicle PA systems, DPS Negotiators attempt to contact the suspect several times, & chemical munitions were deployed into the residence. The suspect failed to comply and continued to fire rounds at LEOs on scene. An armored apparatus was utilized to breach a wall of the residence where the suspect was believed to be shooting at LEOs. The suspect opened fire again on LEOs and armored apparatus. Once the breach point was large enough, more chemical

munitions were deployed. The suspect, again, refused to comply & pointed his firearm towards LEOs that were deploying chemical munitions. LEOs discharged their rifles, neutralizing the threat. The suspect was transported by EMS to a nearby ER, where he was pronounced deceased.