



March 31, 2008

MEMORANDUM FOR RICHARD E. STICKLER

Acting Assistant Secretary for  
Mine Safety and Health

FROM:

CHARLES J. THOMAS *Charles J. Thomas*  
Director, Office of Accountability

SUBJECT:

MSHA Office of Accountability Audit, St. Clairsville, Ohio  
Field Office, and [REDACTED]

### Introduction

This memorandum summarizes the Office of Accountability audit of the subject mine and MSHA field office. Audit subjects included MSHA field activities, level of enforcement, gravity and negligence determinations, supervisory oversight including Field Activity Reviews (FARs) and accompanied inspections, conditions and practices in the mine, approved plans, Peer Reviews, and the Uniform Mine File (UMF). The audit was conducted the week of [REDACTED] by Jerry Kissell, Arlie A. Webb, and Charles J. Thomas. Both positive findings and issues requiring attention are included in this audit report.

### Overview

The audit revealed several positive findings related to recent MSHA activities, including documentation indicative of complete, thorough inspections, significant on-site, in-mine, and section times. Likewise, there were several positive findings regarding the mine operator's efforts, such as the sealing of large, troublesome areas of the mine, comprehensive and detailed fire drills and escapeway drills, SCSR training, rock dusting, roof control, and well maintained record books.

There were also a number of recommendations that would enhance the inspector's ability to promote compliance, as well as issues that will require corrective actions. In-mine observations indicate the roof control plan and ventilation plan are adequate. Fire fighting and fire suppression equipment was functional and well maintained. Inspectors need to pay closer attention to detail regarding documentation of the violations, level of enforcement, and determination of gravity and negligence.

Issues were also identified regarding the UMF and the Peer Review process.

### Audit Results (Positive Findings)

1. E01 inspection reports and accompanying documentation for the 3<sup>rd</sup> quarter of FY 2007, and the 1<sup>st</sup> quarter of FY 2008 indicated the mine was inspected in its entirety;
  2. During the most recently completed E01 inspection (1<sup>st</sup> quarter of FY 2008), inspectors spent an average of nearly 74% of the total E01 time on-site, with 22% of the total E01 time spent on the active sections.
  3. 103(i) inspections (E02) were similar in that 76% of the total time was on-site, with 33% of the total being spent on the active sections;
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4. Rock dusting was well above average in most areas of the mine;
  5. The longwall section and two continuous miner sections inspected during the audit were adequately ventilated with no accumulations of methane detected;
  6. A simple, yet effective means for preventing serious injuries was observed along belt lines in this mine. A nylon cord was attached the belt control switch and then to roof bolts on opposite sides of the belt conveyor. (See Attachment A) This allows access to the switch without leaning or stretching over the moving belt conveyor, and is an excellent preventive measure for injuries related to pinch points; and
  7. The operator has initiated additional measures to control roof and rib. Roof "cutters" and sloughing of ribs appear to have been greatly reduced.

### Emergency Response Plan (ERP)

1. The tracking of employee locations at this mine involves the use of a "dispatcher" who communicates with personnel as they enter, leave, or move from one area of the mine to another. Company policy requires each employee to identify themselves by name, where they are located, and their destination. The mine is divided into "zones" and personnel moving from one zone to another are required to inform the dispatcher;
2. Lifelines are installed in the primary and alternate escapeways from the working sections to the shaft bottom and slope. The audit team observed that lifelines not only lead to the SCSR caches, but are tied to the caches themselves, substantially increasing the probability that escaping miners will find the SCSRs regardless of lack of visibility;

3. Examination of record books and interviews with miners revealed that fire drills were conducted as required. Drills were alternated between the primary and alternate escapeways, and all underground employees participated;
4. SCSR expectation training and storage of SCSRs underground are being done in accordance with the ERP. Note: Most SCSRs inspected have a storage life that does not expire until 2014; and
5. Numerous fire taps, valves and hoses were examined during this audit. All were found to be well maintained and in proper operating condition.

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### Mine Visit

The audit team conducted in-mine activities on the midnight shift (beginning in the late evening of March 11 and ending the morning of March 12), as well as on the day shift on March 12 and 13.

The mine was very clean and well maintained in almost all areas visited by the audit team. Production sections and associated haulage ways were also clean and well maintained.

Miners, miners' representatives, section foremen, and mine management appear to have developed a cooperative attitude toward safety and health issues. The mine foreman at this mine has been in his position for approximately 5 months, and has made several major improvements in mining practices.

The operator has initiated the use of a "shoulder bolt" to improve roof and rib control and prevent sloughing. Cable bolts, 8 feet in length, with long header boards, are being installed at a 45° angle at the juncture between the roof and rib in entries and crosscuts, and are proving effective in preventing roof "cutters" and sloughing of ribs.

During these activities, nine citations were issued for the following observed violations. Copies of the citations are included in Attachment B.

- 30 CFR § 75.380(d)(1) - A tripping hazard was observed in an intake air course at an overcast.
- 30 CFR § 75.364(b)(1) - An inadequate examination failed to reveal the tripping hazard in the aforementioned violation.
- 30 CFR § 75.515 - The power cable for a battery charger was not provided with a proper bushing.
- 30 CFR § 75.503 - Three illumination cable plugs on the Long wall were not maintained in permissible condition.

- 30 CFR § 75.380(d)(7)(i) - The life line for the Long wall section was severed in one location.
- 30 CFR § 75.1722(a) - The guard on a conveyor belt drive was not adequate to prevent contact with moving belts and rollers.
- 30 CFR § 75.1103-4(a)(1) - Fire sensors installed in the entry containing a conveyor belt were not situated directly above the belt.
- 30 CFR § 75.400 - An accumulation of combustible material was present for approximately 600 feet in a conveyor belt entry.
- 30 CFR § 75.220(a)(1) - The diagonal distance of a 4-way, 90 degree intersection exceeded the allowable distance specified in the roof control plan by eight feet.

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### Record Books

Company record books were found to be in good condition.

1. Preshift/Onshift record books indicated thorough examinations, with hazards and associated corrective actions listed; and
2. Seal examination records were complete and all observed hazardous conditions were adequately addressed.

### Audit Results (Issues Requiring Attention)

#### Inspections

1. Issues regarding E01 Event for the 3<sup>rd</sup> Quarter of FY 2007 include: (See Attachment C)
  - a. Inadequate inspection time on evening and midnight shifts.
  - b. Only 9.5% of the total inspection time was spent on mmus.
  - c. Level of enforcement did not appear commensurate with citations and documentation.
  - d. Gravity, negligence and S&S factors were inadequately documented.
  - e. Abatement times for citations appeared excessive.
2. Issues regarding E01 Event for the 4<sup>th</sup> Quarter of FY 2007 include: (See Attachment D)
  - a. The mine was not inspected in its entirety.
  - b. Almost 24% of the total inspection time was charged to "other."
  - c. There was no documentation of a close out conference.
  - d. Gravity, negligence and S&S factors were inadequately documented.
  - e. Level of enforcement did not appear commensurate with citations and documentation.

3. Issues regarding E01 Event for the 1<sup>st</sup> Quarter of FY 2008 include: (See Attachment E)
  - a. Gravity, negligence and S&S factors are inadequately documented.
  - b. Level of enforcement did not appear commensurate with citations and documentation.

*Note: Although the aforementioned inspections were the most recent, they were all conducted prior to the selection of the two current field office supervisors. However, the root causes for the listed issues still need to be addressed to prevent a recurrence.*

### Roof Control Plan

With one exception, the roof control plan appeared to be adequate and suitable for the conditions and equipment at the mine.

*Recommendation – Consideration should be given to revising the approved roof control plan to require floor-to-roof support in longwall gate entries where roof cavities have resulted from falls above the anchorage zone of cable bolts.*

### Enforcement

1. The gravity, negligence, and level of enforcement determinations did not always appear consistent with the nature of the violation cited and the accompanying documentation. Most notable are the repetitive nature of citations issued for poor roof conditions and damaged roof supports; and
2. Often the violation abatement time appeared to have been set for the convenience of the mine operator rather than for the safety of the miners.

Several citations were selected as examples, and are discussed in the attachments covering their respective inspection quarters.

### Field Activity Reviews (FARs)

The audit team could not determine whether or not Field Activity Reviews had been conducted during the 3<sup>rd</sup> and 4<sup>th</sup> quarters of FY 2007, because the records could not be produced. According to District 3 personnel, the FARs may have not been filed or may have been discarded when the previous supervisors retired.

Although the two recently selected supervisors in the field office have documentation to show that FARs are now being conducted, the documentation has not yet been finalized into memo form. However, the information has been entered into the appropriate database on the Agency's network server.

## Uniform Mine File (UMF)

Other issues regarding the UMF that can not be corrected at the field office or district level include:

1. The current Retention Schedule for underground mine files (MSHA Form 2000-166) and the Retention Schedule for surface mines (MSHA Form 2000-167) were last updated in December 1992 and May 1989 respectively; and
2. The instructions for content and maintenance of the UMF, found in the Uniform Mine File Procedures Handbook (PH94-V-9(2)), are not compatible with the current type, number, or nature of plans and information required for inspector review.

Field office clerical personnel, inspectors and specialists face conflicts in the written instructions regarding the type of files to be maintained as well as the length of time those files are to be retained. This creates the potential for loss of valuable information and incorrect information to be used by inspection when conducting inspections.

*Attention Required – As mentioned in previous Accountability Audit results, the Uniform Mine File Procedures Handbook and the accompanying retention schedules should be revised and maintained current to accurately reflect the plans districts are required to keep in the UMF.*

## Peer Reviews

Although Peer Reviews of field offices within Coal District 3 appear very thorough, the overall Peer Review process is inadequate. Although the district does not have an action plan at this time, a spreadsheet has been developed to identify root causes and corrective actions with timelines for completion. However, the spreadsheet does not identify a method of measurement to determine the effectiveness of corrective actions, and there is no documentation of second level reviews to ensure the corrective actions are being taken. In addition, there were no headquarters reviews conducted in District 3 during 2007. (Handbook AH04-III-10, pp 3 & 4)

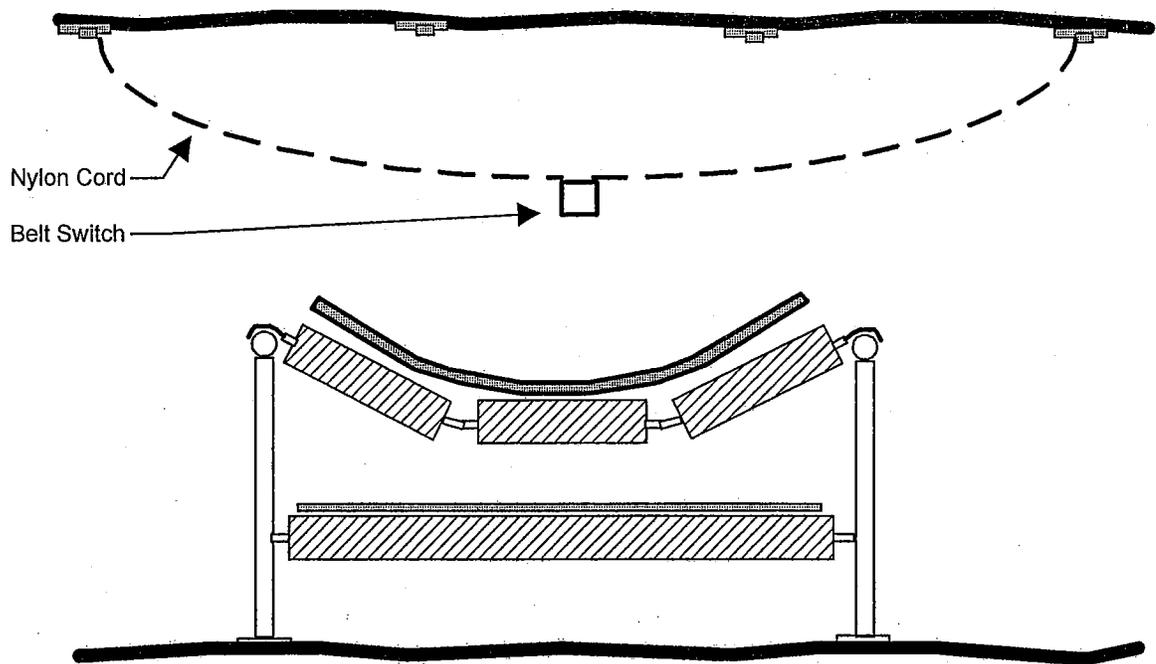
*Attention Required – Peer Reviews should be conducted as per the current handbook, and the process should not be considered complete until an action plan with timelines and methods for measurement are implemented by the District Manager. Managers should be more involved in the evaluating the success or failure of corrective actions.*

## Attachments

- A. Sketch of nylon cord for belt Control Switch
  - B. Citations issued during this audit
  - C. Review of E01 inspection report for 3<sup>rd</sup> quarter of FY 2007
  - D. Review of E01 inspection report for 4<sup>th</sup> quarter of FY 2007
  - E. Review of E01 inspection report for 1<sup>st</sup> quarter of FY 2008
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Attachment A

Nylon cord attached to belt stop switch



The cord allows the switch to be pulled to the person rather than leaning over the belt and structure to activate the switch. This is a safety measure to prevent persons from falling onto the moving belt conveyor or being caught between the belt, rollers, and/or frame.

Attachment B - Citations issued during audit

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)

8. Condition of Practice

Ba. Written Notice (103a)

The power cable for the energized battery charger [serial number 9506-3010] located in crosscut number three between the track and tailgate entries on 2 West was not substantially bushed where it passed through the metal frame of the charger. The power cable had been pulled out of the bushing so that the insulated power wires inside the cable were exposed and could be damaged. This condition also permits strain on the electrical connections of the cable inside the battery charger creating possible heat and a resulting fire. Persons working in the area would be exposed to smoke inhalation.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.515
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Section II - Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless/Disregard <input type="checkbox"/>				
12. Type of Action: 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	
F. Dated		Mo Da Yr		
15. Area or Equipment				

16. Termination Due:	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate The cable was pushed back through the bushing and the bushing was tightened around the cable.

18. Terminated:	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number	21. Primary or Mill
22. Signatu	23. AR Number		

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 400 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)

8. Condition or Practice

8a. Written Notice (103g)

The 3 West longwall MMU 029-0 was not being maintained in a permissible condition. The lead seal wires were not being maintained on three illumination light cable plugs. The lead seal wire for the cable plug on the tailgate side of the junction box at shield number 172 was broken and the lead seal wires for the cable plugs on both sides of the junction box at shield number 52 were missing. No methane gas was detected, the longwall face was adequately ventilated and both the shearer and tail gate methane monitors were calibrated this shift with a known methane air mixture and were found to be operating properly. Approval number 2G-3856A-1.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.503
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Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 003		

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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12. Type of Action	I04(a)	13. Type of Issuance (check one)	Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
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14. Initial Action	A. Citation <input type="checkbox"/>	B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Dated Mo Da Yr
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate The seal wires were replaced.

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number	21. Primary or Mill
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22. Signature	23. AR Number
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Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The life line installed in the 3 West longwall 029-0 MMU section primary escapeway was not being maintained, throughout the entire length of the escapeway. The lifeline was broken and laying on the mine bottom between crosscut numbers 14 and 15 for a distance of about 75 feet.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.380(d)(7)(i)
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Section II - Inspector's Evaluation

10. Gravely:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
	C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001	
11. Negligence (check one):	A. None <input type="checkbox"/>	B. Low <input checked="" type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
12. Type of Action	104(a)	13. Type of Issuance (check one)	Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action:	A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number	F. Dated Mo Da Yr
15. Area or Equipment					

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate	The lifeline was repaired.	
18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code)	20. Event Number	21. Primary or MHI
22. Signature	23. AR Number	

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Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The 5 West Intake Air Course is not being maintained to assure safe passage of all persons including disabled persons. When passing over the Cool Hill 3 Track Overcast a messenger cable was located 4 inches above the floor, approximately 2 feet from the inby side steps. Persons could easily trip on the cable and fall down the steps, resulting in severe injuries.

See Continuation Form (MSHA Form 7000-2a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.380(d)(1)

Section II - Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected: 001

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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12. Type of Action	104(a)	13. Type of Issuance (check one)	Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>
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14. Initial Action:	A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Date Mo Da Yr
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate: A heavy piece of belting was placed over the messenger wire, creating a smooth passible travelway.

18. Terminated	A. Date Mo Da Yr	Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code)	R01	20. Event Number	21. Primary of Mill
22. Signature			23. AFF Number

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Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date: <input type="checkbox"/> Mo <input type="checkbox"/> Da <input type="checkbox"/> Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To:		5. Operator
6. Mine		7. Mine ID
8. Condition of Practice		8a. Written Notice (103g) <input type="checkbox"/>

A suitable weekly examination of the 5 West Intake Air Course was not conducted for the first week of March, 2008. An obvious hazardous condition was not recorded in the approved record book provided for that purpose on the surface. When passing over the Cool Hill 3 Track Overcast, a messenger cable was located 4 inches above the floor, approximately 2 feet from the inby steps. Persons could easily trip on the cable and fall down the steps, resulting in severe injuries. The messenger wire extended the width of the entry.

See Continuation Form (MSHA Form 7000-38)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
75.364(b)(1)			

Section II - Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action: 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action: A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate		
18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1998, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date: [REDACTED]	3. Citation/Order Number: [REDACTED]
4. Served To: [REDACTED]	5. Operator: [REDACTED]
6. Mine: [REDACTED]	7. Mine ID: [REDACTED] (Contractor)

8. Condition or Practice: THE 4-WEST CONVEYOR BELT WAS NOT GUARDED ADEQUATELY ALONG THE BELT STORAGE AREA. THIS CONDITION EXISTED APPROXIMATELY 60 FEET ALONG THE WALKWAY SIDE OF THE CONVEYOR WHERE THE GUARD NEEDED EXTENDED ON TOP. THE MOVING ROLLER WAS 2- FEET FROM THE GUARD WHERE A PERSON COULD CONTACT THE MOVING PARTS.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.1722(a)

Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently Disabling  Fatal

C. Significant and Substantial: Yes  No  D. Number of Persons Affected: 001

11. Negligence (check one): A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action: 104(a)

13. Type of Issuance (check one): Citation  Order  Safeguard

14. Initial Action: A. Citation  B. Order  C. Safeguard  D. Written Notice

E. Citation/Order Number: [REDACTED] F. Dated: Mo Da Yr [REDACTED]

15. Area or Equipment

16. Termination Due: A. Date: Mo Da Yr [REDACTED] B. Time (24 Hr. Clock): [REDACTED]

Section III - Termination Action

17. Action to Terminate: THE MINE OPERATOR EXTENDED THE GUARDING ON TOP AND ELIMINATED THE EXPOSURE.

18. Terminated: A. Date: Mo Da Yr [REDACTED] B. Time (24 Hr. Clock): [REDACTED]

Section IV - Automated System Data

19. Type of Inspection (activity code): E01

20. Event Number: [REDACTED]

21. Primary or Mill: [REDACTED]

22. Signature: [REDACTED]

23. AR Number: [REDACTED]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-5247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 200 3rd Street, SW, MC 2120, Washington, DC 20410. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration

Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To		
6. Mine	7. Mine ID	(Contractor)

8. Condition or Practice

8a. Written Notice (103g)

THE FIRE SENSORS PROVIDED ALONG THE 4-WEST CONVEYOR BELT WERE NOT LOCATED ABOVE THE TOP BELT. THIS CONDITION EXISTED FROM XC-31 TO XC-32 100 FEET. THIS CONDITION COULD CAUSE THE SENSORS TO DELAY A SIGNAL SHOULD THE CONDITIONS WARRANT.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.1103-4(a)(1)
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Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently Disabling  Fatal

C. Significant and Substantial: Yes  No  D. Number of Persons Affected: 001

11. Negligence (check one): A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action 104(a) 13. Type of Issuance (check one): Citation  Order  Safeguard

14. Initial Action: A. Citation  B. Order  C. Safeguard  D. Written Notice  E. Citation/Order Number F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due: A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section III - Termination Action

17. Action to Terminate THE SENSORS WERE PLACED OVER THE TOP BELT.

18. Terminated: A. Date Mo Da Yr B. Time (24 Hr. Clock)

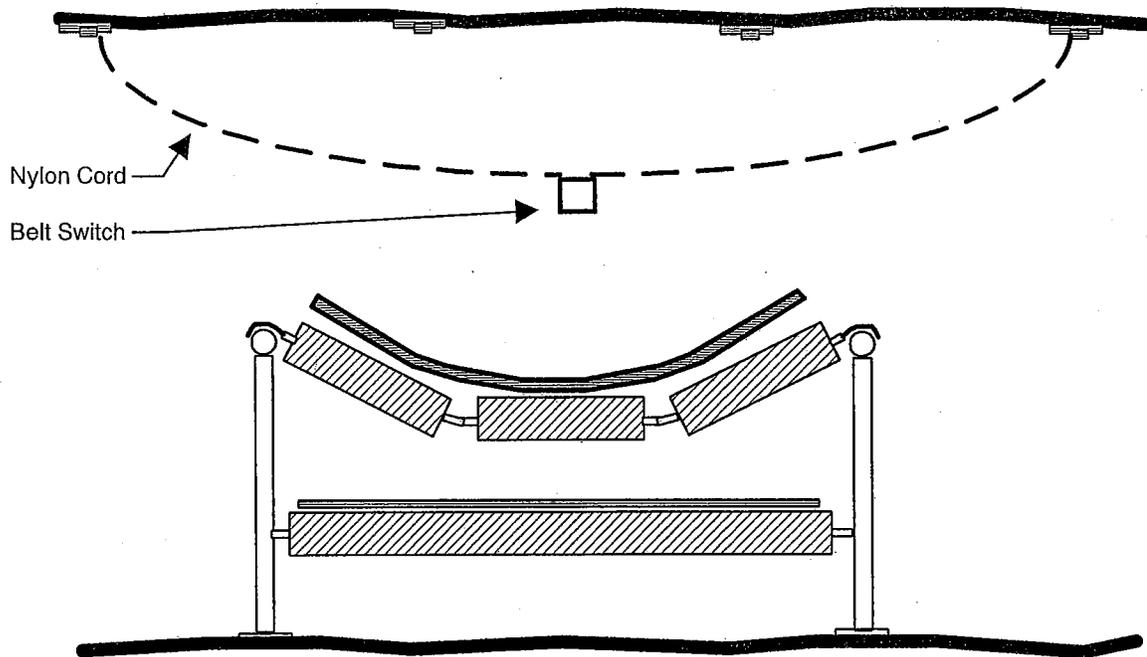
Section IV - Automated System

19. Type of Inspection (activity code) E01 20. Event Number 21. Primary of Mill 22. Signature 23. AR Number

MSHA Form 7000-3, Mar 85 (revised). In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 408 3rd Street, SW, NC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment A

Nylon cord attached to belt stop switch



The cord allows the switch to be pulled to the person rather than leaning over the belt and structure to activate the switch. This is a safety measure to prevent persons from falling onto the moving belt conveyor or being caught between the belt, rollers, and/or frame.

Attachment B - Citations issued during audit

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I-Violation Date

1. Date Mo Da Yr [Redacted]	2. Time (24 Hr. Clock) [Redacted]	3. Citation/ Order Number [Redacted]
4. Served To [Redacted]		5. Operator [Redacted]
6. Mine [Redacted]		7. Mine ID [Redacted] (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The power cable for the energized battery charger [serial number 9506-3010] located in crosscut number three between the track and tailgate entries on 2 West was not substantially bushed where it passed through the metal frame of the charger. The power cable had been pulled out of the bushing so that the insulated power wires inside the cable were exposed and could be damaged. This condition also permits strain on the electrical connections of the cable inside the battery charger creating possible heat and a resulting fire. Persons working in the area would be exposed to smoke inhalation.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.515
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Section II-Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 001	
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number	
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr [Redacted]	B. Time (24 Hr. Clock) [Redacted]
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Section III-Termination Action

17. Action to Terminate The cable was pushed back through the bushing and the bushing was tightened around the cable.

18. Terminated	A. Date Mo Da Yr [Redacted]	B. Time (24 Hr. Clock) [Redacted]
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Section IV-Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number [Redacted]	21. Primary or Mill
22. Signature [Redacted]		23. AR Number [Redacted]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20410. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Reported To		5. Operator
6. Mine		7. Mine ID (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The 3 West longwall MMU 029-0 was not being maintained in a permissible condition. The lead seal wires were not being maintained on three illumination light cable plugs. The lead seal wire for the cable plug on the tailgate side of the junction box at shield number 172 was broken and the lead seal wires for the cable plugs on both sides of the junction box at shield number 52 were missing. No methane gas was detected, the longwall face was adequately ventilated and both the shearer and tail gate methane monitors were calibrated this shift with a known methane air mixture and were found to be operating properly. Approval number 2G-3856A-1.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II - Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 003	
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number	
15. Area or Equipment				
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)				

Section III - Termination Action

17. Action to Terminate		The seal wires were replaced.		
18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)				

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I--Violation Data

1. Date Mo Da Yr [redacted]	2. Time (24 Hr. Clock) [redacted]	3. Citation/ Order Number [redacted]
4. Served To [redacted]	5. Operator [redacted]	
6. Mine [redacted]	7. Mine ID [redacted]	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The life line installed in the 3 West longwall 029-0 MMU section primary escapeway was not being maintained, throughout the entire length of the escapeway. The lifeline was broken and laying on the mine bottom between crosscut numbers 14 and 15 for a distance of about 75 feet.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.380(d)(7)(i)
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Section II--Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input checked="" type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				E. Citation/ Order Number
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr [redacted]	B. Time (24 Hr. Clock) [redacted]
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Section III--Termination Action

17. Action to Terminate The lifeline was repaired.

18. Terminated	A. Date Mo Da Yr [redacted]	B. Time (24 Hr. Clock) [redacted]
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number [redacted]	21. Primary or Mill
22. Signature [redacted]		23. AR Number [redacted]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr [redacted]	2. Time (24 Hr. Clock) [redacted]	3. Citation/ Order Number [redacted]
4. Served To [redacted]	5. Operator [redacted]	
6. Mine [redacted]	7. Mine ID [redacted]	(Contractor) <input type="checkbox"/>
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The 5 West Intake Air Course is not being maintained to assure safe passage of all persons including disabled persons. When passing over the Cool Hill 3 Track Overcast a messenger cable was located 4 inches above the floor, approximately 2 feet from the inby side steps. Persons could easily trip on the cable and fall down the steps, resulting in severe injuries.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.380(d)(1)
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Section II - Inspector's Evaluation

10. Gravity:	A. Injury or Illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>			
	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		D. Number of Persons Affected: 001	
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>
12. Type of Action	104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action	A. Citation <input type="checkbox"/>	B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>
	E. Citation/ Order Number		F. Dated Mo Da Yr	

15. Area or Equipment:

16. Termination Due	A. Date Mo Da Yr [redacted]	B. Time (24 Hr. Clock) [redacted]
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Section III - Termination Action

17. Action to Terminate A heavy piece of belting was placed over the messenger wire, creating a smooth passible travelway.

18. Terminated	A. Date Mo Da Yr [redacted]	Time (24 Hr. Clock) [redacted]
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number [redacted]	21. Primary or Mit
22. Signature [redacted]		23. AR Number [redacted]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20410. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I--Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

A suitable weekly examination of the 5 West Intake Air Course was not conducted for the first week of March, 2008. An obvious hazardous condition was not recorded in the approved record book provided for that purpose on the surface. When passing over the Cool Hill 3 Track Overcast, a messenger cable was located 4 inches above the floor, approximately 2 feet from the inby steps. Persons could easily trip on the cable and fall down the steps, resulting in severe injuries. The messenger wire extended the width of the entry.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input checked="" type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.364(b)(1)

Section II--Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number
			F. Dated Mo Da Yr
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III--Termination Action

17. Action to Terminate		
18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Signed To	5. Operator	
6. Mine	7. Mine ID (Contractor)	

8. Condition or Practice

8a. Written Notice (103g)

THE 4-WEST CONVEYOR BELT WAS NOT GUARDED ADEQUATELY ALONG THE BELT STORAGE AREA. THIS CONDITION EXISTED APPROXIMATELY 60 FEET ALONG THE WALKWAY SIDE OF THE CONVEYOR WHERE THE GUARD NEEDED EXTENDED ON TOP. THE MOVING ROLLER WAS 2- FEET FROM THE GUARD WHERE A PERSON COULD CONTACT THE MOVING PARTS.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.1722(a)

Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently Disabling  Fatal

C. Significant and Substantial: Yes  No  D. Number of Persons Affected: 001

11. Negligence (check one) A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action 104(a) 13. Type of Issuance (check one) Citation  Order  Safeguard

14. Initial Action A. Citation  B. Order  C. Safeguard  D. Written Notice  E. Citation/  
Order Number F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section III - Termination Action

17. Action to Terminate THE MINE OPERATOR EXTENDED THE GUARDING ON TOP AND ELLIMINATED THE EXPOSURE.

18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 21. Primary or Mill

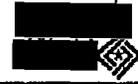
22. Signature 23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I-Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

THE FIRE SENSORS PROVIDED ALONG THE 4-WEST CONVEYOR BELT WERE NOT LOCATED ABOVE THE TOP BELT. THIS CONDITION EXISTED FROM XC-31 TO XC-32 100 FEET. THIS CONDITION COULD CAUSE THE SENSORS TO DELAY A SIGNAL SHOULD THE CONDITIONS WARRANT.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.1103-4(a)(1)
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Section II-Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001	
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input checked="" type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number	
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III-Termination Action

17. Action to Terminate THE SENSORS WERE PLACED OVER THE TOP BELT.

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV-Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20415. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration

Section I - Violation Data

1. Date Mo Da Yr [REDACTED]	2. Time (24-Hr. Clock) [REDACTED]	3. Citation/ Order Number [REDACTED]
4. Served To [REDACTED]	5. Operator [REDACTED]	
6. Mine [REDACTED]	7. Mine ID [REDACTED] (Contractor)	

8. Condition of Practice

8a. Written Notice (103g)

AN ACCUMULATION OF COMBUSTIBLE MATERIAL CONSISTING OF FLOAT COAL DUST, DARK GRAY, TO BLACK IN COLOR EXISTED ON ROCK DUSTED SURFACES OF THE MINE FLOOR ALONG THE 4-WEST CONVEYOR BELT. THIS CONDITION WAS PRESENT FROM XC-51 TO THE TAIL PIECE APPROXIMATELY 600 FEET. THE BOTTOM WAS DAMP AND .0% METHANE PRESENT.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.400
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Section II - Inspector's Evaluation

10. Gravity:				
A. Injury or Illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or Illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment				

16. Termination Date	A. Date Mo Da Yr [REDACTED]	B. Time (24-Hr. Clock) [REDACTED]
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Section III - Termination Action

17. Action to Terminate		
18. Terminated	A. Date Mo Da Yr [REDACTED]	B. Time (24-Hr. Clock) [REDACTED]

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number [REDACTED]	21. Primary or Mill
22. Signature [REDACTED]		23. AR Number [REDACTED]

MSHA Form 7000-3, Mar-85 (revised) (In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-800-REG-FAIR (1-800-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 400 3rd Street, SW MC 2124, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.)

Attachment B - Citations issued during audit (cont.)

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)

8. Condition or Practice

Ba. Written Notice (103g)

The approved mine roof control plan is not being complied with at the No. 12 Crosscut, in the No. 2 Track/Intake Entry of 4 West Gate Section. The diagonal distances of a 4-way 90 degree intersection exceeded 64 feet. The diagonal distances totaled 72 feet at the No. 12 Crosscut. The mine roof was fractured along the outby side of the crosscut between the No. 2 Track/Intake Entry and the Return Air Entry Stopping.

On Page No. 2 of the approved plan states the diagonal distances shall not exceed 64 feet in Gate Entry Sections.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.220(a)(1)
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Section II - Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 001	
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless/Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/ Order Number		F. Dated: Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code) EOI	20. Event Number	21. Primary or MII
22. Signal	23. AR Number	

MSHA Form 7000-3, Mar 88 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 400 3rd Street, SW, MC 2128, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment C

District 3 St. Clairsville, OH FO Audit of [REDACTED]

FY 2007 Quarter 3 Review

Positive Comments

1. The entire quarter E02 inspection time was correctly allocated to the methane spot inspections. No split times were observed or documented;
2. Field notes and tracking maps indicate the inspectors assigned to the mine conducted a complete inspection of the entire mine this quarter;
3. Safety talks on various subjects were well documented. In addition, discussions regarding Health were conducted;
4. An example of inspector attention to detail is the inspector citing the incorrect number of sprays on the longwall shearer drum, requiring the operator to have plan parameters changed to match the actual number of drum sprays. Another inspector removed surface contract miners from mine property for insufficient training on [REDACTED];
5. The inspector's field notes revealed excellent documentation of that SCSR examinations and training;
6. The tailgate and intake entries of the 3 West Longwall (MMU 029-0) are being maintained in excellent condition. The roof was adequately supported; there were no large accumulations of water, and travel ways were clear and unobstructed.

Issues Requiring Attention

1. Only 4.0 inspection hours were spent on one MMU, on Midnight (Shift 1) for this event to observe the work practices.

*Recommendation – Evening and midnight man trip operation, track haulage, dispatching, ERP tracking, on-shift examinations, and general work practices can not adequately be observed in a single or partial inspection shift. Time spent on off shifts should be determined on a mine-by-mine basis by the type of work being done on those shifts.*

2. The inspector's name and air quantities were not listed on sample bottles [REDACTED] (collected on [REDACTED] MMU [REDACTED] and [REDACTED] MMU 0-18 on [REDACTED] and sent to Mt. Hope for analysis. The analysis result was placed in UMF.

*Recommendation – Supervisors should review all sample analysis results and initial them prior to inclusion in the UMF.*

3. The inspection notes regarding at least 12 violations of 30CFR §75.400 and at least 20 violations of 30 CFR §75.202(a) indicate that a progressively higher level of enforcement may have been warranted.

*Recommendation – Inspector observation of the extent of exposed unsupported roof area or extent of accumulations of combustibles should serve as an indicator that higher negligence as well as an additional citation/order for inadequate examinations should be considered.*

4. Gravity and negligence determinations did not always appear consistent with the narrative of the citation and the supporting field notes. The facts relative to conditions or practices cited were not always recorded in the inspector's field notes as required by the Coal General Inspection Procedures Handbook. Specifically, the questions regarding "Who knew the violation existed?" and "How long has the violation existed?" were often answered with the words "unknown," or "undetermined."

*Recommendation – Inspectors should always check company record books to assist them in determining negligence and the proper level of enforcement to be applied. In many of the instances cited, an examination of company record books would have allowed the inspector to answer both questions accurately. In each case, the field notes should support and justify the inspector's evaluations.*

5. The root causes of violations are not adequately addressed in the inspection notes.

*Recommendation – Identification of root causes not only helps to support the citation/order being issued, but also serves as a discussion point to assist the operator in removing root causes and improving safety and health practices.*

6. Citation No. [REDACTED] did not identify the cited scoop by serial number, company asset number, or some other means to distinguish it from other scoops.

*Recommendation – Violations must be identified with specificity to support what the violation is, the time and location of the violation, and what equipment is involved or affected.*

7. Inspection notes for [REDACTED], state "Recommend more rock dust at LW tear down face." Inspection notes for [REDACTED], state "Recommend clean off rectifier top."

*Recommendation - The inspector could have spot sampled the Longwall tear down face area to verify compliance or non compliance instead of making a general recommendation in field notes. If combustible material or coal was on electrical equipment a 75.400 citation should have been issued.*

8. No noise surveys were conducted as part of this E01.

9. Only 4.0 hours time is listed on Time and Activity Sheets on MMU's for this midnight shift, and only 13.0 hours outby.

10. [REDACTED] signature does not appear on the event sheet, even though Time and Activity data and field notes indicate he participated in this inspection.

11. A total of 33 days of inspection time were not recorded on the event calendar, including one full week ([REDACTED]).

12. The supporting documentation in the field notes for some citations was inadequate to support the inspectors reasoning for determining exposure, or likelihood.

*Attention Required - Conditions or practices that constitute a violation should be evaluated and documented properly for negligence, gravity, and S&S, and the proper level of enforcement applied. The time allowed for abatement should be reasonable and determined by the seriousness of the violation, not by convenience for the mine operator.*

*Recommendation - The audit team recommends that MSHA Coal adopt or create the equivalent of MSHA Form 4000-49E (used by Metal/Nonmetal inspectors) to promote detailed, accurate documentation for the "eight questions." (Attached)*

Citation

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration

Section I - Violation Data

1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator		
6. Mine	7. Mine ID (Contractor)		

8. Condition or Practice

8a. Written Notice (103g)

Coal dust, oil, and grease was present on the frame and in the operators compartment on the floor. The accumulations of combustible material were up to 1/4 inch in depth. Located on the 1 West longwall section.

See Continuation Form (MSHA Form 7000-36)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30, CFR
			75.400

Section II - Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
	C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001	
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action	104(a)	13. Type of Issuance (check one)		Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due:	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate The scoop was cleaned.

18. Terminate	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number	21. Primary or Mill
22. S		23. AR Number	

MSHA Form 7000-3, Mar-85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, NO-2120, Washington, DC 20410. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

MNM Citation/Order Documentation Form (Front)

**CITATION / ORDER DOCUMENTATION**

DATE \_\_\_\_\_ CIT/ORD No. \_\_\_\_\_ EVENT No. \_\_\_\_\_  
TIME \_\_\_\_\_ CONTRACTOR ID No. \_\_\_\_\_

**VIOLATION**

DESCRIBE: CONDITION/PRACTICE/HAZARD/LOCATION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GRAVITY**

NO LIKELIHOOD  UNLIKELY  REASONABLY LIKELY  HIGHLY LIKELY  OCCURRED

JUSTIFICATION: \_\_\_\_\_  
\_\_\_\_\_

NO LOST WORKDAYS  LOST WORKDAYS OR RESTRICTED DUTY  PERMANENTLY DISABLING  FATAL

JUSTIFICATION: \_\_\_\_\_  
\_\_\_\_\_

**PERSONS AFFECTED**

JUSTIFICATION: \_\_\_\_\_  
\_\_\_\_\_

**NEGLIGENCE**

NONE  LOW  MODERATE  HIGH  RECKLESS DISREGARD

JUSTIFICATION: \_\_\_\_\_  
\_\_\_\_\_

**AREA/EQUIPMENT (ORDERS)**

\_\_\_\_\_  
\_\_\_\_\_

Page \_\_\_\_\_ of \_\_\_\_\_



Attachment D

District 3, St. Clairsville, OH FO Audit of [REDACTED]  
[REDACTED]

FY2007 Quarter 4 Review

Positive Comments

The field office has new supervisors who were already implementing corrective actions for many of the issues identified in this audit.

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Issues Requiring Attention

1. This inspection report, accompanying documentation and map, indicate that the entire mine was not inspected during the quarter. There was no final close-out information documented, there are no notes concerning "Root Cause" being discussed with the operator, and the notes themselves make it difficult to follow through the mine inspection process.
2. Citation [REDACTED] issued for a violation of 30 CFR §75.400, describes an area of accumulation covering 21 crosscuts, consisting of float coal dust that is "black in color." Citation [REDACTED] issued for 30 CFR §75.400, describes an area of accumulation for 8 crosscuts, consisting of float coal dust that is "black in color." These violations appear to be extensive and obvious, but were issued as a 104(a) with no explanation for the negligence other than "area traveled by examiner each shift," or "belt line is examined each shift."

*Recommendation – Proper level of enforcement should be applied for all violations. In addition, violations should be properly evaluated for negligence, and justification for the level of enforcement documented.*

3. There were 34 citations issued for violations of 30 CFR §75.202(a) from [REDACTED] with no elevation in the level of enforcement even though 27 of the 34 citations were evaluated as "S&S."

*Recommendation – An additional review of the company's record books may have given the inspector additional information relative to hazards in this area.*

4. Rock Dust sample documentation indicates that on [REDACTED], all areas on 2 West off cool springs hill (024-0 MMU) were too wet to sample. A total of 42 sample locations were not re-sampled to verify these areas were properly rock dusted. Field office personnel failed to ensure this area was sampled before it became inaccessible.

Citation

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	

8. Condition or Practice  
 AN ACCUMULATION OF COMBUSTIBLE MATERIAL CONSISTING OF FLOAT COAL DUST, BLACK IN COLOR, EXISTED ON ROCK DUSTED SURFACES OF THE MINE FLOOR ALONG THE A WEST DIAGONAL BELT LINE FROM CROSSCUT 17 TO CROSSCUT 24. THE TRACK IS ALSO PRESENT IN THIS AREA OF THE BELTLINE WITH AN ENERGIZED 300 VOLT TROLLEY WIRE. THIS CONDITION EXISTED MAINLY UNDER THE BOTTOM BELT.

8a. Written Notice (103g)

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.400
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Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently Disabling  Fatal

C. Significant and Substantial: Yes  No

D. Number of Persons Affected: 001

11. Negligence (check one): A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action: 104(a) 13. Type of Issuance (check one): Citation  Order  Safeguard

14. Initial Action: A. Citation  B. Order  C. Safeguard  D. Written Notice  E. Citation/Order Number F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due: A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section III - Termination Action

17. Action to Terminate

18. Terminated: A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code): E01 20. Event Number 21. Primary of Mill 22. Signature 23. AR Number

MSHA Form 7000-3, Mar 85 (revised) Pursuant to the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Citation

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	
8. Condition or Practice		8a. Written Notice (103g)

AN ACCUMULATION OF COMBUSTIBLE MATERIAL CONSISTING OF FLOAT COAL DUST, BLACK IN COLOR, EXISTED ON ROCK DUSTED SURFACES OF THE MINE FLOOR ALONG THE A WEST DIAGONAL BELT LINE FROM CROSSCUT 17 TO CROSSCUT 24. THE TRACK IS ALSO PRESENT IN THIS AREA OF THE BELTLINE WITH AN ENERGIZED 300 VOLT TROLLEY WIRE. THIS CONDITION EXISTED MAINLY UNDER THE BOTTOM BELT.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.400
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Section II - Inspector's Evaluation

10. Gravely:	A. Injury or Illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
	B. Injury or Illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
	C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		

11. Negligence (check one):	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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12. Type of Action	104(a)	13. Type of Issuance (check one)	Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
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14. Initial Action	A. Citation <input type="checkbox"/>	B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Dated	Mo Da Yr
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15. Area or Equipment:

16. Termination Due	A. Date (Mo Da Yr)	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate:

18. Terminated	A. Date (Mo Da Yr)	B. Time (24 Hr. Clock)
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number	21. Primary or Mill
22. Signature	23. AR Number		

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment E

District 3 St. Clairsville, OH FO Audit of [REDACTED]  
[REDACTED]

FY2008 Quarter 1 Review

Positive Comments

1. Inspection documentation and the tracking map indicate the inspection covered the entire mine; and
2. Field notes also document safety talks with various subjects being discussed.

Issues Requiring Attention

1. Dates on the event calendar for E01 event number [REDACTED] do not match the dates from the inspection notes and inspector time and activity data. The following 45 dates, on which inspection work was reported, do not appear on the event calendar.

10-04-2007	10-09-2007	10-12-2007	10-13-2007	10-16-2007
10-17-2007	10-18-2007	10-19-2007	10-20-2007	10-22-2007
10-23-2007	10-24-2007	10-27-2007	10-29-2007	10-30-2007
10-31-2007	11-02-2007	11-03-2007	11-05-2007	11-06-2007
11-07-2007	11-08-2007	11-09-2007	11-10-2007	11-13-2007
11-14-2007	11-19-2007	11-21-2007	11-23-2007	11-24-2007
11-26-2007	11-27-2007	11-28-2007	11-29-2007	11-30-2007
12-01-2007	12-04-2007	12-06-2007	12-07-2007	12-08-2007
12-10-2007	12-11-2007	12-12-2007	12-13-2007	12-17-2007

2. There are numerous instances where the citation documentation (8 questions) are not adequately answered or not addressed at all. The answer to the questions regarding "Who knew the violation existed?" and "How long has the violation existed?" are answered with indistinct words such as "Observable" or "Unknown."
3. Root causes of violations are not addressed in the inspection notes;
4. Uploaded time and activity data indicates that 107 man days were spent on the day shift (shift code 2), only 2 days were spent on the midnight shift (shift code 1), and no days were spent on the evening shift (shift code 3). Event calendars for this inspection also do not reflect any inspection activity on the evening shift;

5. Citation Nos. [REDACTED] issued on [REDACTED] states, "Additional roof supports and/or controls are needed in the air course from the A West Diagonal Track inby to the AW1-A EP. Roof bolts are dislodged at the following locations in the Old A West Track Entry; Crosscut Nos. 62; 67; 68; 69; 71 to 72; 72; 74; 76; 78; 79; 82; 84; 89; 93; 96 to 97; 97; 99; and AW1-B to AW1-a. The cited roof locations have 1 to 2 roof bolts dislodged, exposing unsupported mine roof measuring from 5 feet by 6 feet in area to 8 feet by 10 feet in area. In addition fall cavity edges are unsupported a 2 locations; 1 for 15 feet in length and 1 for 20 feet in length. The roof in the cited area is fractured at some locations and has recent as well as aged deterioration." The citation was evaluated as S&S, but was issued as a 104(a) citation. The inspector's notes indicate "observable" in reference to who knew the violation existed, and "some looks as recent as today some looks aged over time" in reference to how long the violation had existed. This citation clearly meets the criteria for a 104(d) citation;
6. Citation No. [REDACTED] also issued on [REDACTED] states "Additional roof supports and/or controls are needed from the B West EP, BW-1 outby to the B-West Air Shaft to the junction of the A West Diagonal Track. Conditions are as follows: (a) Check point BW-1 area the fall cavity edge is unsupported for 20 feet inby and 5 feet outby. (b) Also roof bolts are dislodged at the following locations outby B West Rooms: Crosscut Nos. 4; 4 to 3; 3; 3 to 2; at the B West Air Shaft Entrance Crosscut, the roof is fractured over the fall cavity roof support posts; outby the fall cavity toward the A West Diagonal Track Entry, 2 roof support posts are dislodged at 1 roof fall coming down from the Air Shaft; (d) roof bolts are also dislodged at the following crosscuts outby from the fan crosscut entrance to the A West Diagonal Track Entry; from the fan crosscut outby 3 crosscuts; then at Crosscut Nos. 64 to 65; 61 to 62; and 60 to 61. The unsupported areas have 1 to 2 roof bolts and/or posts dislodged, exposing unsupported mine roof measuring 5 feet by 8 feet to 10 feet by 10 feet in area. At 61 crosscut the fall cavity edge is unsupported for 5 feet and for 20 feet. The roof is fractured at several but not all of the areas." The citation was evaluated as S&S, but was issued as a 104(a) citation. The inspector's notes indicate "observable" in reference to who knew the violation existed, and "some recent and some over time" in reference to how long the violation had existed. This citation clearly meets the criteria for a 104(d) citation;
7. Citation No. [REDACTED], issued on [REDACTED] states "The mine roof was not being adequately supported or otherwise controlled at the 9 East seals in the entry to the #4 seal. The brawl on the inby side of the intake overcast had three dislodged bolts creating an area 10 foot wide b 8 feet long without support. This area is traveled once per week by an examiner. The inspector's notes indicate "Possibly examiner- last examined 1 week ago" in reference to

who knew the violation existed, and "at least 2 days" in reference to how long the violation had existed. Although the inspector's notes do not specify how the examiner would have known about this condition, the citation appears to meet the criteria for a 104(d) citation;

8. 104(a) Citation No. [REDACTED] was also issued on [REDACTED] for a failure to provide needed roof support in an air course from B West Rooms to an evaluation point, a violation of 30 CFR §75.202(a). This condition included dislodged roof bolts, unsupported mine roof, roof fractures and deterioration along an area more than 29 crosscuts in length. This citation also appears to meet all of the criteria under Section 104(d); and
- 
9. Information could not be found in the inspection notes to document observing miners donning SCSRs.

Citation

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Survey To	5. Operator	
6. Mine	7. Mine ID	(Contractor)

8. Condition or Practice

9a. Written Notice (103g)

Additional roof supports and/or controls are needed in the air course from the A West Diagonal Track Entry inby to the AW1-A EP.  
Roof bolts are dislodged at the following locations in the Old A West Track Entry:  
Crosscut Nos. 62; 67; 68; 69; 71 to 72; 72; 74; 76; 78; 79; 82; 84; 89; 93; 96 to 97; 97; 99; and AW1-B to AW1-A. The cited roof locations have 1 to 2 roof bolts dislodged, exposing unsupported mine roof measuring from 5 feet by 6 feet in area to 8 feet by 10 feet in area. In addition fall cavity edges are unsupported at 2 locations; 1 for 15 feet in length and 1 for 20 feet in length. The roof in the cited area is fractured at some locations and has recent as well as aged deterioration.

See Continuation Form (MSHA Form 7000-5a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.202(a)

Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently Disabling  Fatal

C. Significant and Substantial: Yes  No

D. Number of Persons Affected: 001

11. Negligence (check one) A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action: 104(a)

13. Type of Issuance (check one) Citation  Order  Safeguard

14. Initial Action

A. Citation  B. Order  C. Safeguard  D. Written Notice

E. Citation/Order Number

F. Dated Mo Da Yr

15. Area or Equipment:

16. Termination Due:

A. Date Mo Da Yr

B. Time (24 Hr. Clock)

Section III - Termination Action

17. Action to Terminate

18. Terminated

A. Date Mo Da Yr

B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code) E01

20. Event Number

21. Primary of Mine

22. Signature

23. AR Number

MSHA Form 7000-5, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Citation

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	

8. Condition or Practice Ba. Written Notice (103g)

Additional roof supports and/or controls are needed from the B West EP, BW-1 outby to the B West Air Shaft to the junction of the A West Diagonal Track. Conditions are as follows:

(a) Check Point BW-1 area the fall cavity edge is unsupported for 20 feet inby and 5 feet outby.

(b) Also roof bolts are dislodged at the following locations outby B West Rooms:  
Crosscut Nos. 4; 4 to 3; 3; 3 to 2;

© At the B West Air Shaft Entrance Crosscut, the roof is fractured over the fall cavity roof support posts; outby the fall cavity toward the A West Diagonal Track Entry, 2 roof support posts are dislodged at 1 roof fall

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.202(a)

Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently Disabling  Fatal

C. Significant and Substantial: Yes  No  D. Number of Persons Affected: 001

11. Negligence (check one) A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action: 104(a) 13. Type of Issuance (check one) Citation  Order  Safeguard

14. Initial Action A. Citation  B. Order  C. Safeguard  D. Written Notice  E. Citation/Order Number F. Dated Mo:Da Yr

15. Area or Equipment

16. Termination Due: A. Date Mo:Da Yr B. Time (24 Hr. Clock)

Section III - Termination Action

17. Action to Terminate

18. Terminated: A. Date Mo:Da Yr B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 21. Primary or Mill 22. Signature 23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Citation 7129160(cont.)

Mine Citation/Order  
Continuation

U.S. Department of Labor  
Mine Safety and Health Administration



Section I-Subsequent Action/Continuation Data

1. Subsequent Action: a. Continuation <input type="checkbox"/> b. Original Issue <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr	3. Citation/Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)

Continuation of 8. Condition or Practice

coming down from the Air Shaft:  
(d) roof bolts are also dislodged at the following crosscuts outby from the fan crosscut entrance to the A West Diagonal Track Entry: from the fan crosscut outby 3 crosscuts; then at Crosscut Nos. 64 to 65, 61 to 62, and 60 to 61. The unsupported areas have 1 to 2 roof bolts and/or posts dislodged, exposing unsupported mine roof measuring 5 feet by 8 feet to 10 feet by 10 feet in area. At 61 Crosscut the fall cavity edge is unsupported for 5 feet and for 20 feet.  
The roof is fractured at several but not all of the areas.

See Continuation Form

Section III-Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV-Inspection Data

9. Type of Inspection	E01	10. Event Number	
11. Signat	AR Number	12. Date Mo Da Yr	13. Time (24 Hr. Clock)

MSHA Form 7000-3a, Mar. 85 (revised)

Citation

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date: Mo. Da. Yr.	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. District	
6. Mine	7. Mine ID	(Contractor)
8. Condition of Practice		8a. Written Notice (103g)

The mine roof was not being adequately supported or otherwise controlled at the 9 East seals in the entry to the #4 seal. The brawls on the inby side of the intake overcast had three dislodged bolts creating an area 10 foot wide by 8 feet long without support. This area is traveled once per week by an examiner.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.202(a)

Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently Disabling  Fatal

C. Significant and Substantial: Yes  No

D. Number of Persons Affected: 001

11. Negligence (check one): A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action: 104(a)

13. Type of Issuance (check one): Citation  Order  Safeguard

14. Initial Action: A. Citation  B. Order  C. Safeguard  D. Written Notice

E. Citation/Order Number

F. Dated Mo. Da. Yr

15. Area or Equipment:

16. Termination Due: A. Date: Mo. Da. Yr. Time (24 Hr. Clock)

Section III - Termination Action

17. Action to Terminate

18. Terminated: A. Date: Mo. Da. Yr. B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code): EN

20. Event Number

21. Primary or Mill

22. Signature

23. AR Number

MSHA Form 7000-3 (Mar 85) (Rev. 8/88) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 400 3rd Street, SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration



Section I - Violation Data

1. Date: Mo Da Yr	2. Time: (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator	
6. Mine ID	(Contractor)	
8. Condition or Practice		8a. Written Notice (103g)

Additional roof supports and/or controls are needed in the air course from B West Rooms inby to EP AWI-B.  
Roof bolts are dislodged at the following locations:  
Crosscut Nos. 67 to 68; 68; 70; 71; 72; 73 to 74; 74 to 75; 75; 75 to 76; 76; 86; 86 to 87; 88; 92; 93; 93 to 94; 94 to 95; and 95 to 96. The cited roof locations have 1 to 5 dislodged roof bolts with areas of unsupported mine roof measuring from 6 feet by 8 feet to 10 feet by 10 feet. In addition fall cavity edges are unsupported at 3 Crosscuts with lineal measurement of not being supported, (7 feet and 7 feet); (12 feet and 12 feet); and (10 feet and 12 feet). These areas are included in the cited crosscut areas above. The mine roof is fractured at some but not all of the areas.

See Continuation Form (MSHA Form 7000-3a)

9. Violation:	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.202(a)

Section II - Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one):						
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action: 104(a)		13. Type of Issuance (check one):			Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action:				E. Citation/Order Number		F. Dated Mo Da Yr
A. Citation <input type="checkbox"/>		B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>		
15. Area or Equipment						

16. Termination Due:	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate:		
18. Terminated:	A. Date Mo Da Yr	B. Time (24 Hr. Clock)

Section IV - Automated System Data

19. Type of Inspection (activity code): E01	20. Event Number:	21. Primary or Mill
22. Signature:	23. AR Number:	

MSHA Form 7000-3a, Mar 83 ( revised ) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

