

H 6 22

PRESHIFT - ONSHIFT and DAILY REPORT

Started 1-11-2010

Finish

Company UBB
Mine Performance Coal Company
SECTION H 6 22
LOCATION Naomy Raleigh WV
Post Office County State

Form 6-1489
(March 1970)

Budget Bureau No. 42-R1589

When this book is completed it shall be retained at the mine for a period of one year after the date of the last entry in the book, regardless of change of ownership. When a mine is temporarily closed or abandoned, the operator shall retain this book in a safe place during the period of closure or for a period of one year after the mine is abandoned. **Do not** mail this book to the Bureau of Mines.

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FORM# MS-014

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-11-2010 20____ Section or Area Examined H 627
Time of Examination: from 5:20 a.m. or p.m. to 5:35 a.m. or p.m.
Was this report phoned to outside: Yes ✓ no____
By whom Kyle Anderson Time 5:31 A.M. _____ P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported.

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHY</u>	<u>Scrap cut 2018</u>	<u>reflected</u>
2. <u>0</u>	<u>nae obs 2018</u>	<u>rep</u>
3. <u>0</u>	<u>nae obs 2018</u>	<u>rep</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>13,110</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: CHY 20.80L SCC detected Tuesday
Huels OK at time of ET p.c. and
chem OK.

Shelter
Intake phone OK.

This is to certify that: (a) This section of the mine was properly examined by me; (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Certificate No. 33230
Countersigned [Signature] Mine Manager—Mine Foreman Certificate No. 3620
Assistant Foreman
Superintendent or Assistant

Use Indefinible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-11-2010 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>Scrap out</u>	<u>Order 2 Bolts</u>
2. <u>2</u>	<u>high CO2</u>	<u>nil</u>
3. <u>3</u>	<u>high CO2</u>	<u>nil</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u>	<u>.08</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>.08</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>.08</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:00</u>	<u>.08</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>ret.</u>	<u>8:00</u>	<u>.08</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>ret.</u>	<u>12:00</u>	<u>.08</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed with 7 of

Rep # 20 at 6:45 AM
[Signature] Assistant Mine 36526 Certificate No. [Signature] Mine Foreman-Mine Manager 33257 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-11-10 Section or Area Examined Headgate # 22
Time of Examination: from 1230 a.m. or p.m. to 130 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Deane Jones Time A.M. 230 P.M.
Report received by Mark Bony (Sign)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains entries for #1 Entry, #2 Entry, #3 Entry, and OPPM C/O.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains measurements for LDB and OCHYI.

Remarks: Power Center, Chargers, Intake Phone - Shelter, Travelways, OCHYI, 20.802 OPPM C/O. All ok at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] 36525 Certificate No. 11221A
Countersigned T. Moore Mine Manager - Mine Foreman
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-11-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 Entry .05CH ₄ 20.802	Needs Cleared	Cleared + Dusted
2.			
3.	#2 Entry .05CH ₄ 20.802	Scrap Cut	Bolted + Relected
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-3	4-430pm	.05CH ₄ 20.802			
1-3	6-630pm	.05CH ₄ 20.802			
1-3	8-830pm	.05CH ₄ 20.802			
1-3	10-1100pm	.05CH ₄ 20.802			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	410pm	.05CH ₄ 20.802			
Return	812pm	.05CH ₄ 20.802			

Number of Bolts Tested 9
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) 19.6 sect 31 RCP at 345 PM. Roof + Rib talk.

Bush Assistant Mine 1122-A Certificate No. T. Moore Mine Foreman-Mine Manager 33357 Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-18 2010 Section or Area Examined H.G. 22
 Time of Examination: from 10:00 a.m. or p.m. to 11:00 a.m. or p.m.
 Was this report phoned to outsider? Yes (no) No (no)
 By whom Bradley Time 11:15 A.M. P.M.
 Report received by Henry (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>105</u>	<u>n/a</u>	<u>---</u>
2.	<u>2</u>	<u>needs cleaned</u>	<u>Reported</u>
3.	<u>2XC</u>	<u>needs cleaned</u>	<u>Reported</u>
4.	<u>3</u>	<u>scrap</u>	<u>Let it go</u>
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>18,880</u>		

Remarks: CO - 0.1, O2 - 20.8%
trackways clear at time of exam
Power Cables & Chimes - n/a
Air Chamber - OK
antake PHONS - OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Bradley Certificate No. 1122-A
 Preshift-Mine Examiner Assistant Foreman
 Countersigned T. Moore Certificate No. 33359
 Mine Manager - Mine Foreman

Assistant Foreman

Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 1-11 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1 05</u>	<u>N/O</u>	
2.	<u>2 105</u>	<u>needs cleaned</u>	<u>Reported</u>
3.	<u>2xc 105</u>	<u>needs cleaned</u>	<u>Reported</u>
4.	<u>3 105</u>	<u>Scrap</u>	<u>Reflector hung</u>
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3 1251</u>	<u>118</u>	<u>0.6 off 1</u>	11.			
2.				12.			
3.	<u>1-3 430</u>	<u>525</u>	<u>0.6 off 1</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>105</u>	<u>0.6 off 1</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>534</u>	<u>0.6 off 1</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Anderson
Assistant Mine

39238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-12-2010 20 Section or Area Examined H622
Time of Examination: from 4:30 a.m. or p.m. to 5:26 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:26 A.M. P.M.
Report received by Dean (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u> <u>CHY 20.8</u>	<u>Scrap cut 20.8</u>	<u>reflect 0</u>
2. <u>2</u> <u>D</u>	<u>near OGS 20.8</u>	<u>ref 0</u>
3. <u>2nt</u> <u>.05</u>	<u>near OGS 20.8</u>	<u>ref 0</u>
4. <u>3</u> <u>.05</u>	<u>part bolted 20.8</u>	<u>reflect 0</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>L03</u>	<u>15,300</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: 0 CHY 20.8 or .000 detailed trailers
> trailers OK at time of Exam P.C. and
charges ok.

Shelter
Intake phase

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 Preshift-Mine Examiner Certificate No. 33238
Countersigned Dean 36125 Assistant Foreman Certificate No. 36125
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-12-2010 Shift ny Area or Section H022

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>Scrap cut</u>	<u>clean up; 30/1/10</u>
2. <u>2</u>	<u>new obs</u>	<u>ny</u>
3. <u>2Rt</u>	<u>new obs</u>	<u>ny</u>
4. <u>3</u>	<u>part 30/1/10</u>	<u>30/1/10</u>
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u> <u>7:50</u>	<u>.08</u>	11.		
2.	<u>8:00</u>		12.		
3. <u>1-3</u>	<u>9:00</u> <u>9:50</u>	<u>.08</u>	13.		
4.	<u>11:00</u>		14.		
5. <u>1-3</u>	<u>11:50</u>	<u>.08</u>	15.		
6.	<u>1:00</u>		16.		
7. <u>1-3</u>	<u>1:00</u>	<u>.08</u>	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>ret</u>	<u>8:00</u>	<u>.08</u>	6.		
2.			7.		
3. <u>ret</u>	<u>12:00</u>	<u>.08</u>	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed next # 5 ok

Rep # 5 at 6:00 AM
Dec 8 Assistant Mine 36525 Certificate No. T. Williams Mine Foreman-Mine Manager 33359 Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-12 Section or Area Examined Headgate #22
 Time of Examination: from 1200 a.m. or 200 p.m. to 200 a.m. or 0 p.m.
 Was this report phoned to outside? Yes no
 By whom Deana Jones Time 250 A.M. 0 P.M.
 Report received by Branch Henry (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Entry .0 CH ₄ !	Needs Cleared	Reported
20.802		
2.		
3. #2 Entry .10 CH ₄ !	None Observed	Reported
20.802		
4.		
5.		
6. #2R CC .10 CH ₄ !	Scrap Cut	Reflectors
20.802		
7.		
8. #3 Entry .05 CH ₄ !	Needs Cleared + Dusted	Reported
20.802		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	20,145		

Remarks: Power Center
 Travelways
 Outby shelter - Intake Rooms
 Chargers
 0 CH₄! 20.802 OPPM c/o
 OK at time of exams

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Deana Jones Preshift-Mine Examiner Certificate No. 30225
 Countersigned Branch Henry Mine Manager - Mine Foreman Certificate No. 1122-A
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-12-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #2R CCut .05 CH ₄ 20.807	Scrap Cut	Bolted + RePlectors
2. #1 Entry .05 CH ₄ 20.802	Needs cleaned	Cleaned + Dusted
3. #3 Entry .05 CH ₄ 20.802	Needs cleaned + Dusted	Cleaned + Dusted
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430pm	.05 CH ₄ 20.802	11. _____	_____	_____
2. 1-3	6-630pm	.05 CH ₄ 20.802	12. _____	_____	_____
3. 1-3	8-830pm	.05 CH ₄ 20.802	13. _____	_____	_____
4. 1-3	10-1100pm	.05 CH ₄ 20.802	14. _____	_____	_____
5. 1-3	_____	_____	15. _____	_____	_____
6. 1-3	_____	_____	16. _____	_____	_____
7. 1-3	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:10pm	.05 CH ₄ 20.802	6. _____	_____	_____
2. Return	8:12pm	.05 CH ₄ 20.802	7. _____	_____	_____
3. Return	_____	_____	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 6
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 6 sect 30 RUP at 3:47 PM.

Bob King Assistant Mine Certificate No. 11027A
T. Moore Mine Foreman-Mine Manager Certificate No. 33359
 _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-12-2009 Section or Area Examined Headsate 22
Time of Examination: from 10:22 a.m. or p.m. to 11:00 a.m. or p.m.
Was this report phoned to outside: Yes [checked] no
By whom Brandon B. [signature] Time 11:05 P.M.
Report received by [signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Row 1: .05 CH4, 20.802, SCRP, Reported. Row 2: .05 CH4, 20.802, Part Bolted, Reported. Row 3: 0 CH4, 20.802, None, Reported.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Row 1: LOB, 19460.

Remarks: 1.05 CH4 0% CO 20.802 All Power Center Shelter clear at time of exam

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [signature] Certificate No. 1102-A
Countersigned [signature] Mine Manager-Mine Foreman Certificate No. 33359
[signature] Assistant Foreman Certificate No. 19460A
[signature] Superintendent or Assistant Certificate No. 33238

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-12 Shift 3rd Area or Section H322

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1, OS CHY</u>	<u>Scrap</u>	<u>Reflector</u>
2.	<u>1, OS CHY</u>	<u>Part bolted</u>	<u>Reflector hung</u>
3.	<u>002</u>	<u>none observed</u>	
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>110</u>	<u>140</u>				
2.							
3.	<u>1-3</u>	<u>457</u>	<u>530</u>				
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>145</u>	<u>0.2 CH4</u>				
2.							
3.	<u>Return</u>	<u>535</u>	<u>0.2 CH4</u>				
4.							
5.							

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Anderson
Assistant Mine

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33353
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-13-10 20 Section or Area Examined H622
Time of Examination: from 4:10 a.m. or p.m. to 5:25 a.m. or p.m.
Was this report phoned to outside: Yes [checked] no
By whom Kyle Anderson Time 5:28 A.M. P.M.
Report received by [Signature] (Signed)

Table with 4 columns: Location, Violations and other Hazardous Conditions Observed and Reported, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1, 2, and 3.

Table with 4 columns: Location, Air Measurements, Location, CFM. Contains handwritten entry for location C03 with CFM 14.460.

Remarks: OCHy 20.8 O2 .000 detected Tuesday
3 Huelers OK at time of Etn Pul
and Chargers OK

Shelter > OK
Intake phone

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 Certificate No. Assistant Foreman [Signature] 36525 Certificate No.
Countersigned [Signature] Mine Manager-Mine Foreman 33359
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-13-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>none OGS</u>	<u>none</u>
2. <u>2st</u>	<u>not Bolted</u>	<u>Bolted</u>
3. <u>2</u>	<u>Needs add chgs</u>	<u>check notes</u>
4. <u>3</u>	<u>none OGS</u>	<u>none</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u>	<u>0.05</u>	11. _____	_____	_____
2. _____	<u>7:30</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>0.05</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>0.05</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:00</u>	<u>0.05</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>het</u>	<u>8:00</u>	<u>0.05</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>het</u>	<u>12:00</u>	<u>0.05</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 12
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed ref # 205

Rep # 3194 6:50 AM
[Signature] Assistant Mine [Signature] Mine Foreman-Mine Manager
Certificate No. 36025 Certificate No. 33357
Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination: 1-13 2010 Section or Area Examined: Headgate #22
 Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom: Deano Jones Time: 2:30 P.M.
 Report received by: Branch King (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. # 1 Entry .05 CH ₄ ! 20.802	Part Bolted	Reflectors
2. _____	_____	_____
3. # 2 Entry .05 CH ₄ ! 20.802	Scrap cut	Reflectors
4. _____	_____	_____
5. # 2L CC .05 CH ₄ ! 20.802	None observed	Reported
6. _____	_____	_____
7. # 3 Entry .05 CH ₄ ! 20.802	Needs cleaned + dusted	Reported
8. _____	_____	_____
9. _____	_____	_____
10. OPPM c/o	_____	_____

Air Measurements

Location	CFM	Location	CFM
LOB	20,263		
0 CH ₄ !			
20.802			
OPPM c/o			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: Power Center
Chargers
Intake Phone
Shelter
Travelways
0 CH₄! 20.802 OPPM c/o
 All ok at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By: [Signature] 30525 Preshift-Mine Examiner Certificate No. _____
 Countersigned: [Signature] Mine Manager—Mine Foreman Assistant Foreman Certificate No. 1122A
 _____ Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-13-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .05 CH ₄ 20.802	Part Bolted	Bolted + Reflectors
2. #2 Entry .05 CH ₄ 20.802	Scrap Cut	Bolted + Reflectors
3. #3 Entry .05 CH ₄ 20.802	Needs Cleaned + Bolted	Cleaned + Bolted
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. Machine dusted Return and section	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430pm	.05 CH ₄ 20.802	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. 1-3	6-630pm	0 CH ₄ 20.802	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. 1-3	8-830pm	0 CH ₄ 20.802	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. 1-3	10-1100pm	.05 CH ₄ 20.802	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	0 CH ₄ 20.802	_____	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. Return	0 CH ₄ 20.802	_____	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 10
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 6 Sect 28 RCP at 3:43 PM.

Brub King Assistant Mine 1122-A Certificate No. Chase Mine Foreman-Mine Manager 20211 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-13 2010 Section or Area Examined HG 22
Time of Examination: from 10:00 a.m. or p.m. to 1:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Brandon Time A.M. 11:23 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1	Part Bolted	Reflectors hung
2	Scrap Cut	Reflectors hung
3	Nails cleaned & uncut	Reported
4	None observed	
5		
6		
7		
8		
9		
10		

Air Measurements

Location

CFM

Location

CFM

Job

20120

Remarks: 26 208 power center & chargers fresh air base clear at time of exam

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Brandon [Signature] 11221A Kyle Anderson 33238
Certificate No. 20211 Assistant Foreman
Countersigned [Signature] Mine Manager - Mine Foreman

Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-13 Shift 3rd Area or Section H B 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>Part bolted</u>	<u>Reflected</u>
2. <u>2</u>	<u>Scoop Cest</u>	<u>Reflected</u>
3. <u>22</u>	<u>welds cleaned & dusted</u>	<u>Reported</u>
4. <u>3</u>	<u>None observed</u>	
5. _____		
6. _____		
7. _____		
8. _____		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3 / 240</u>	<u>116</u>	<u>0.6 cft/l</u>	11. _____		
2. _____			12. _____		
3. <u>1-3 500</u>	<u>526</u>	<u>0.6 cft/l</u>	13. _____		
4. _____			14. _____		
5. _____			15. _____		
6. _____			16. _____		
7. _____			17. _____		
8. _____			18. _____		
9. _____			19. _____		
10. _____			20. _____		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>120</u>	<u>0.6 cft/l</u>	6. _____		
2. _____			7. _____		
3. <u>Return</u>	<u>531</u>	<u>0.6 cft/l</u>	8. _____		
4. _____			9. _____		
5. _____			10. _____		

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Anderson
Assistant Mine

33228
Certificate No.

E. Hagan
Mine Foreman-Mine Manager

26041
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-14-10 20... Section or Area Examined H622
 Time of Examination: from 5:00 a.m. or p.m. to 5:25 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom R. Anderson Time 5:30 A.M. P.M.
 Report received by [Signature] (Signed)

	Location	Violations and other Hazardous Conditions Observed and Reported	Violation or Hazardous Condition	Action Taken
1.	<u>CHY</u>	<u>none obs</u>	<u>02</u>	<u>me</u>
2.	<u>0</u>	<u>part bolted (1 Row)</u>	<u>2.8</u>	<u>reflect</u>
3.	<u>0</u>	<u>none obs</u>	<u>2.8</u>	<u>me</u>
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Air Measurements			
Location	CFM	Location	CFM
<u>C03</u>	<u>17.850</u>		

Remarks: CHY 20.802 COO detected Trukeys
Henry's OK at time of Ex. p.c. and
chargers OK

Shelter
Intake phone OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By R. Anderson Preshift-Mine Examiner Certificate No. 33238
 Countersigned [Signature] Mine Manager—Mine Foreman Certificate No. 2641
[Signature] Assistant Foreman Certificate No. 3626
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-14-12 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1</u>	<u>me o6s</u>	<u>none</u>
2.	<u>2</u>	<u>part bolts</u>	<u>bolts</u>
3.	<u>3</u>	<u>me o6s</u>	<u>none</u>
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>7:00</u> <u>7:00</u>	<u>.05</u>	11.			
2.				12.			
3.	<u>1-3</u>	<u>9:00</u> <u>9:00</u>	<u>.05</u>	13.			
4.				14.			
5.	<u>1-3</u>	<u>11:00</u> <u>11:00</u>	<u>.05</u>	15.			
6.				16.			
7.	<u>1-3</u>	<u>1:00</u> <u>1:00</u>	<u>.05</u>	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>net</u>	<u>8:00</u>	<u>.10</u>	6.			
2.				7.			
3.	<u>net</u>	<u>12:00</u>	<u>.10</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 16
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed next # 5 or

Rep # 25 at 6:00 AM
[Signature]
Assistant Mine

36526
Certificate No.

[Signature]
Mine Foreman-Mine Manager

26121
Certificate No.

[Signature]
Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-14 2010 Section or Area Examined #C-22
Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom DEAN JONES Time A.M. 2:30 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8 ⁰² .00%CH ₄	N/O	Reported
2.	20.8 ⁰² .00%CH ₄	C/D	Reported
3.	2R 20.8 ⁰² .00%CH ₄	Scrap cut	Taged & Reported
4.	3 20.8 ⁰² .10%	N/C	Reported
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
L O B	20,185		
20.8 ⁰²			
0% CH ₄			
0% C ^o			

Remarks: power centers, R-ways, Chargers, HAULAGE Clear at Time of Exam
Intake phone OK
Chargers OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] 36526 Assistant Foreman Certificate No.
Countersigned [Signature] 26221 Mine Manager - Mine Foreman
Rick Hutchens 37569 Assistant Foreman Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-14-10 Shift EVE Area or Section H6-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>2 20.8° 0% CH₄</u>	<u>Needs CLEAN & Dust</u>	<u>Corrected</u>
2.	<u>2R 20.8° 0% </u>	<u>Scrap Cut</u>	<u>Corrected</u>
3.	<u>3 20.8° 0% CH₄</u>	<u>Needs CLEAN</u>	<u>Corrected</u>
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>4:00-4:20</u>	<u>0 % CH₄</u>	11.			
2.	<u>1-3</u>	<u>6:00-6:23</u>	<u>0 %</u>	12.			
3.	<u>1-3</u>	<u>8:05-8:30</u>	<u>0 %</u>	13.			
4.	<u>1-3</u>	<u>10:00-10:40</u>	<u>0 % CH₄</u>	14.			
5.				15.			
6.	<u>20.8°</u>			16.			
7.	<u>0% CH₄</u>			17.			
8.	<u>0% C°</u>			18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>3:58pm</u>	<u>0 % CH₄</u>	6.			
2.	<u>Return</u>	<u>8:00pm</u>	<u>0 % CH₄</u>	7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 6 # 19 3:50pm RCP

Section Safe & Clear at Time of Exam
Rich Halden 37569 Wagner 26041
Assistant Mine Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-14-13 20. Section or Area Examined H 622
 Time of Examination: from 10:15 a.m. or 10:45 a.m. or 11:15 p.m.
 Was this report phoned to outside: Yes no
 By whom Roy Jan Time 11:15 P.M.
 Report received by Roy Jan (Signed)

	Location	Violations and other Hazardous Conditions Observed and Reported	Action Taken
1.	#1	scrap	Let Hectford
2.	2	np	
3.	2X2	np	
4.	3	np	
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements	
Location	CFM
Lod	17,980

Remarks: CO-0% O₂-20.8%
haulways haulways clear at time of exam
Power Center + changers - np.
see chamber - np.
intake blow - np.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Roy Hutchins 37569 Roy Jan 32224
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned Wagner 26001
 Mine Manager—Mine Foreman Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-15-10 Shift 3rd Area or Section H.G. 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
# 1	SCRAP	RETRACTED
2.		
3.		
4.		
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1.			11.		
2.			12.		
3.			13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Production

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

[Signature]
Assistant Mine

30284
Certificate No.

[Signature]
Mine Foreman-Mine Manager

33357
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-15-10 20 Section or Area Examined H622
Time of Examination: from 4:00 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kevin [Signature] Time 5:40 A.M. P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHY 20</u>	<u>Scrap cut 20.8</u>	<u>Reflects 0</u>
2. <u>0</u>	<u>nae 065 20.8</u>	<u>ref 0</u>
3. <u>2et .06</u>	<u>nae 065 20.8</u>	<u>ref 0</u>
4. <u>3 .06</u>	<u>nae 065 20.8</u>	<u>ref 0</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,200</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: 0 CHY 20.8 O2 .000 detected trackleys
3 Huleys ok at time of 8:10 p.m. and
Cher ok

Shelter Chamber -> ok
Intake phone -> ok

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By [Signature] Preshift-Mine Examiner
Countersigned [Signature] Mine Manager—Mine Foreman
Certificate No. 32294 Assistant Foreman
Certificate No. 3602
Assistant Foreman
Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Shift PM Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
	Scrap cut	Clean up 13/4 up
	me 06)	me
	me 06)	me
	me 06)	me

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
6-3	7:40	.05	11.		
	7:50		12.		
1-3	9:00	.05	13.		
	11:00		14.		
1-3	11:50	.05	15.		
	1:00		16.		
1-3	1:00	.05	17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
het	8:00	.05	6.		
			7.		
het	12:00	.05	8.		
			9.		
			10.		

Number of Bolts Tested 9 Below Range 0
 Number of Bolts Torqued Above Range 0
 If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

(Statement as to General Conditions of Mine or Area of Mine) discussed pgs # 508

P # 29 9H 6:45 AM
3625 Assistant Mine Foreman
3609 Certificate No. Superintendent or Assistant Mine Foreman-Mine Manager

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-15 2010 Section or Area Examined HG-22

Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.

Was this report phoned to outside: Yes no

By whom Dean Jones Time 2:40 P.M.

Report received by Rick Hutchens
(Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>20.8⁰² .05 % CH₄</u>	<u>N/O 20.8</u>	<u>Reported 0</u>
2. <u>20.8⁰² .01 %</u>	<u>N/O 20.8</u>	<u>Reported 0</u>
3. <u>2R 20.8⁰² .10 %</u>	<u>Need Dust 20.8</u>	<u>Reported 0</u>
4. <u>3 20.8⁰² .05 % CH₄</u>	<u>N/C/D 20.8</u>	<u>Reported 0</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,086</u>		
<u>20.8⁰²</u>			
<u>0% CH₄</u>			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: powercenter, R-ways, Chargers HAULAGE Clear
at Time of Exam

INTAKE phone OK
AIR Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Dean Jones Preshift-Mine Examiner Certificate No. 36021
 Assistant Foreman Certificate No. _____
 Countersigned Tom Moore Mine Manager-Mine Foreman Certificate No. 33359
Richard Hutchens Assistant Foreman Certificate No. 37569
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-15-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	2R 20.8 ^{oz}	.05%CH ₄	Need Dusted
2.	3 20.8 ^{oz}	.05%CH ₄	N/C/O
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4:00-4:15	0 %CH ₄	11.			
2.	1-3	6:15-6:30	0 %	12.			
3.	1-3	8:20-8:40	0 %	13.			
4.	1-3	10:45-11:15	0 %CH ₄	14.			
5.				15.			
6.	20.8 ^{oz}			16.			
7.	0%CH ₄			17.			
8.	0%CO			18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	3:59pm	0 %CH ₄	6.			
2.	Return	8:17pm	0 %CH ₄	7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 8 #15 3:50pm RCP

Sector Safe + Clean at Time of Exam
Rick Hutchins 37569 T. Thomas 5507
Assistant Mine Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-15 2010 Section or Area Examined HG 22
Time of Examination: from 10:15 a.m. or p.m. to 10:45 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Hutcherson Time A.M. 11:16 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. 1 26 off	Scrap Cut	Reflectors
2. 2-2R 26 off	None Observed	none
3. 3 26 off	Part Bolted	Reflectors
4. -----	-----	-----
5. -----	-----	-----
6. -----	-----	-----
7. -----	-----	-----
8. -----	-----	-----
9. -----	-----	-----
10. -----	-----	-----

Air Measurements

Location	CFM	Location	CFM
Job	20110		
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----

Remarks: 26 off power center changed fresh air base, intake phone 20.8

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutcherson 37569 Certificate No. Kyle Anderson 33238 Certificate No.
Countersigned T. Moore Mine Manager—Mine Foreman Assistant Foreman
Assistant Foreman Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-15 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for items 1, 2, and 3.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for items 1 and 3.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for items 1 and 3.

Number of Bolts Tested Number of Bolts Torqued Above Range Below Range

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine)

Signatures and Certificate Numbers for Assistant Mine, Mine Foreman-Mine Manager, and Superintendent or Assistant.

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-16-2010 20. Section or Area Examined HG 22
Time of Examination: from 5:00 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:40 A.M. P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported			
Location	Violation or Hazardous Condition		Action Taken
1. <u>1</u>	<u>CHY 10</u> <u>needs cleaned nited 20.8</u>	<u>02</u>	<u>Per</u> <u>CO</u>
2. <u>2</u>	<u>new obs</u>	<u>20.8</u>	<u>none</u> <u>0</u>
3. <u>2nd</u>	<u>new obs</u>	<u>20.8</u>	<u>none</u> <u>0</u>
4. <u>3</u>	<u>scrap at</u>	<u>20.8</u>	<u>reflects</u> <u>0</u>
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements			
Location	CFM	Location	CFM
<u>COB</u>	<u>1330</u>		

Remarks: ochty 20.802, oco detected trailers
2 trailers OK at time of ETR P.C. aug
chain OK.

skelke
Intake phone OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 [Signature] 36528
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned T. Moore 33337
Mine Manager—Mine Foreman
Assistant Foreman
Superintendent or Assistant

John A. Bickford 26176

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-16-2010 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>needs cleared - noted</u>	<u>Cleared - Asstel</u>
2. <u>2</u>	<u>near c63</u>	<u>None</u>
3. <u>2nd</u>	<u>near c61</u>	<u>None</u>
4. <u>3</u>	<u>Scrap cut</u>	<u>Cleared 4P 7:30 Htd</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u>	<u>.05</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>.08</u>	13. _____	_____	_____
4. <u>1</u>	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>.08</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>13</u>	<u>1:00</u>	<u>.08</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Let</u>	<u>8:00</u>	<u>.08</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Let</u>	<u>12:00</u>	<u>.08</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed ppg # 5 of

Rep # 18 at 6:45 Am

[Signature] 36525 T. [Signature] 33757
Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 1-16 20-10 Section or Area Examined H6-22
Time of Examination: from 12:00 a.m. or p.m. to 2:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom DEAN JONES Time A.M. 2:35 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for CH4 levels and bolt conditions.

Air Measurements

Location

CFM

Location

CFM

LOB

19,285

20.8% O2
0% CH4
0% CO

Remarks: powercenter, R-ways, Chargers, HAULAGE Clear at Time of Exam

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Dean Jones 36528 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned T. Malone Mine Manager-Mine Foreman 35359
Rick Hutchens 37569 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-16-10 Shift Eve Area or Section 1-16-10

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>0 % CH₄</u>	<u>N/O</u>	<u>Corrected</u>
2.	<u>0 % CH₄</u>	<u>part Bolt</u>	<u>Corrected</u>
3.	<u>0 % CH₄</u>	<u>N/O</u>	<u>Corrected</u>
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-3</u>	<u>4:00-4:17</u>	<u>0 % CH₄</u>			
<u>1-3</u>	<u>6:00-6:20</u>	<u>0 %</u>			
<u>1-3</u>	<u>8:00-8:30</u>	<u>0 %</u>			
<u>1-3</u>	<u>10:00-10:30</u>	<u>0 % CH₄</u>			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>3:58pm</u>	<u>0 % CH₄</u>			
<u>Return</u>	<u>7:57pm</u>	<u>0 % CH₄</u>			

Number of Bolts Tested 10 Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 8 #13 3:50pm RCP

Rick Hutchins Assistant Mine 37569 Certificate No. T. Mann Mine Foreman-Mine Manager 53329 Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-16 2010 Section or Area Examined HG 22
Time of Examination: from 10:15 a.m. or p.m. to 10:55 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Hutchens Time A.M 11:00 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1, 2L, 2, and 3.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for LOB with CFM 20,243 CFM and 20.80% CH4.

Remarks: power center, R-ways, Chargers Clean at Time of Exam

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Preshift-Mine Examiner Certificate No. Kyle Anderson 33238 Assistant Foreman Certificate No.
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 33359
Assistant Foreman
Superintendent or Assistant

Use Indefilble
Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 1-16 Shift 3rd Area or Section HG 20

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>26 cty</u>	<u>needs cleaned</u>	<u>Reported</u>
2.	<u>2L</u>	<u>not bolted</u>	<u>Reflector being</u>
3.	<u>2</u>	<u>needs cleaned</u>	<u>Reported</u>
4.	<u>3</u>	<u>N/A</u>	
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-3 120</u>	<u>150</u>	<u>0.6 cty</u>	11.		
			12.		
<u>1-3 435</u>	<u>512</u>	<u>0.6 cty</u>	13.		
			14.		
			15.		
			16.		
			17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Rtn</u>	<u>200</u>	<u>0.6 cty</u>	6.		
			7.		
<u>Rtn</u>	<u>515</u>	<u>0.6 cty</u>	8.		
			9.		
			10.		

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

[Signature]
Assistant Mine

33778
Certificate No.

[Signature]
Mine Foreman-Mine Manager

3359
Certificate No.

Supervisor or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-17-10 Section or Area Examined H622
Time of Examination: from 4:30 a.m. or p.m. to 5:20 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Time 5:50 P.M.
Report received by Dan Williams 15394 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 20.802 1, 2, 3, 4 with descriptions like 'OCH4', 'none', 'cleaned + dusted', and actions like 'Reported', 'Reflectors'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry: LQB, 18340.

Remarks: O2 24.4, O2 CO, 20.8202
PC'S Charger, TRK Travelways Refuge Intake Phone
All OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 35359
Assistant Foreman
Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
Entry .05 CH ₄	Cleaned + Dusted (Needs)	Cleaned + Dusted
CC .0 CH ₄	Not Bolted	Bolted + Reflectors
Entry .05 CH ₄	Cleaned + Dusted (Needs)	Cleaned + Dusted
Entry .05 CH ₄	Wide at Mouth	Set 2 Jacks

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
3	7-730am	.05 CH ₄ 20.802			
3	9-930am	.05 CH ₄ 20.802			
3	11-1130am	.05 CH ₄ 20.802			
3	1-200pm	.05 CH ₄			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	713am	0 CH ₄			
Return	1111am	0 CH ₄			

Number of Bolts Tested 10
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 3 sect E RCP

Brush Bay Assistant Mine
1122-A Certificate No.
T. Moore Mine Foreman-Mine Manager
33359 Certificate No.
Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-17 2010 Section or Area Examined HG-22
Time of Examination: from 7:00 a.m. or p.m. to 2:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Brandon Bowling Time A.M. 2:35 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. 20.8 ⁰² , 05%CH ₄	N/O	Reported
2. 20.8 ⁰² , 05%CH ₄	Scrap Cut	Tagged & Reported
3. 20.8 ⁰² , 05%CH ₄	part Bolt	Tagged & Reported
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	18,740		
20.8 0%CH ₄			

Remarks: powercenter, R-way, Chargers Haulage Clear at Time of Exam

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Brandon Bowling 1122-A Rick Hutchens 37569
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned T. M. Mine Manager-Mine Foreman 3339
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-17-10 Shift Eve Area or Section H6-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	2 20.8 ⁰² 0.5%CH ₄	Scrap Cut	Corrected
2.	3 20.8 ⁰² 0.5%CH ₄	part Bolted	Corrected
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4:00-4:17	0 %CH ₄	11.			
2.	1-3	6:00-6:20	0 %	12.			
3.	1-3	8:15-8:40	0 %	13.			
4.	1-3		%CH ₄	14.			
5.				15.			
6.	Left Section To			16.			
7.	Work on Belt at			17.			
8.	Ellish Tail			18.			
9.		20.8 ⁰²		19.			
10.		0%CH ₄		20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	3:58pm	0 %CH ₄	6.			
2.	Return	8:00pm	0 %CH ₄	7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #13 3:50pm

Section Safe & Clear at Time of Exam

Rick Hutchins 37569 Assistant Mine Certificate No. T. Munn 33307 Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-17 2010 Section or Area Examined HG 22
Time of Examination: from 800 a.m. or p.m. to 900 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Hutchings Time 1050 P.M.
Report received by Kyle Anderson (Signed)

Location	Violations and other Hazardous Conditions Observed and Reported	Action Taken
1. 1	None observed	
2. 2	Part Bolted	Reflectors being
3. 3	Scrap Cut	Reflectors being
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Location	Air Measurements	Location	CFM
Lab	199.80		

Remarks: abctty power center charges fresh air base
intake phone All clear at time of exam
208

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Rick Hutchings 37569 Preshift-Mine Examiner Certificate No. Kyle Anderson 33038 Assistant Foreman Certificate No.
Countersigned T. Moore Mine Manager-Mine Foreman 33337
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-17 Shift 3rd Area or Section HG22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>None observed</u>	
2. <u>2</u>	<u>Part bolted</u>	<u>Reflectors hung</u>
3. <u>3</u>	<u>Scrap Cut</u>	<u>Reflectors hung</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3 120</u>	<u>440</u>	<u>0.6 CH4</u>	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. <u>1-3 501</u>	<u>535</u>	<u>0.6 CH4</u>	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. _____	_____	_____	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. _____	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>145</u>	<u>0.6 CH4</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Return</u>	<u>336</u>	<u>0.6 CH4</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Johnson
Assistant Mine

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-18 2010 Section or Area Examined Headgate #22
Time of Examination: from 5:01 a.m. or p.m. to 5:35 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson Time 5:40 A.M. P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Entry OCHYL 20.802	None Observed	Reported
2.		
3. #2 Entry OCHYL 20.802	Scrap Cut	Reflectors
4.		
5. #3 Entry OCHYL 20.802	Scrap Cut	Reflectors
6.		
7. OPPM c/o		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	18,210		
OCHYL 20.802			
OPPM c/o			

Remarks: Power Center
Travelways
Outby Chamber
Intake Phone
Chargers
All OK at time of exam.
OCHYL 20.802 OPPM c/o

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager—Mine Foreman Certificate No. 33357
Assistant Foreman [Signature] Assistant Foreman Certificate No. 1022-A
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-18-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #2 Entry .0CHV! 20.80z	Scrap Cot	Batted + Reflectors
2. #3 Entry .0SCHV! 20.80z	Scrap Cot	Batted + Reflectors
3. #2 Intersection OPPM C/O	Wide Entry	set 3 Jacks
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	7-730am	.0CHV! 20.80z	11. _____	_____	_____
2. 1-3	9-930am	.0CHV!	12. _____	_____	_____
3. 1-3	11-1130am	.CHV! 20.80z	13. _____	_____	_____
4. 1-3	1-200pm	.0SCHV! 20.80z	14. _____	_____	_____
5. 1-3	_____	_____	15. _____	_____	_____
6. 1-3	_____	_____	16. _____	_____	_____
7. 1-3	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	7/2am	.0CHV! 20.80z	6. _____	_____	_____
2. Return	11/3am	.0CHV! 20.80z	7. _____	_____	_____
3. Return	_____	_____	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 7
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 3 sect D of RCP
at 642 AM.

B. M. M. M. M. Assistant Mine
1122-A Certificate No.
T. M. M. M. M. Mine Foreman-Mine Manager
3358 Certificate No.
Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-18 2010 Section or Area Examined HG-22
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Bowling Time 2:35 A.M. P.M.
 Report received by Rick Hutchens
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8 ⁰² .05% CH ₄	Scrap Cut	Taged & Reported
2.	20.8 ⁰² .05% CH ₄	P/B	Taged & Reported
3.	20.8 ⁰² .05% CH ₄	N/O	Reported
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>19,408</u>		
<u>20.8</u>			
<u>0% CH₄</u>			
<u>0% C⁰</u>			

Remarks: Powercenter, R-ways, Chargers, Hoistage Clear at
Time of Exam

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Brandon Bowling Certificate No. 1122-A Rick Hutchens Assistant Foreman Certificate No. 37569
 Countersigned T. Moore Mine Manager—Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-18-10 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	20.8° ² , 0.5%CH ₄	Scrap Cut	Corrected
2.	20.8° ² , 0.5%CH ₄	P/B	Corrected
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-3	4:00-4:17	0 %CH ₄	11.		
1-3	6:00-6:20	0 %	12.		
1-3	8:00-8:30	0 %	13.		
1-3	10:15-10:45	0 %CH ₄	14.		
			15.		
			16.		
			17.		
			18.		
			19.		
			20.		

20.8°²
0%CH₄

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	3:59 pm	0 %CH ₄	6.		
Return	7:58 pm	0 %CH ₄	7.		
			8.		
			9.		
			10.		

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #13 3:55 pm RCP
Read Also Comprehensive plan (mine safety program)

Rach Hutchins
Assistant Mine

37569
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-18 2010 Section or Area Examined HG 22
 Time of Examination: from 10:15 a.m. or p.m. to 10:45 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Ryle H. Jensen Time 11:20 A.M. P.M.
 Report received by Ryle H. Jensen (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1 .05</u>	<u>Scrap Cut</u>	<u>Reflectors</u>
2. <u>2R .05</u>	<u>Part Bolted</u>	<u>Reflectors</u>
3. <u>3 obcH</u>	<u>None Observed</u>	
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>19967</u>		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: obcH power center & charges fresh air base intake phone
208 clear at time of exam

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Ryle H. Jensen 33238
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned T. Moore 35334
 Mine Manager—Mine Foreman Assistant Foreman

 Assistant Foreman Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-18 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1 .05</u>	<u>Scrap Cut</u>	<u>Reflectors</u>
2.	<u>2R .05</u>	<u>Part bolted</u>	<u>Reflectors</u>
3.	<u>3 0.6 CH4</u>	<u>none observed</u>	
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

1.	Location	Time	Methane Content	11.	Location	Time	Methane Content
	<u>1-3</u>	<u>1:30</u>	<u>0.2 CH4</u>				
2.				12.			
3.	<u>1-3</u>	<u>5:2</u>	<u>0.2 CH4</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

1.	Location	Time	Methane Content	6.	Location	Time	Methane Content
	<u>Return</u>	<u>2:10</u>	<u>0.6 CH4</u>				
2.				7.			
3.	<u>Return</u>	<u>5:41</u>	<u>0.6 CH4</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Johnson Assistant Mine 33238 Certificate No. T. McNeal Mine Foreman-Mine Manager 33231 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-18 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for items 1, 2, and 3.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for items 1, 2, and 3.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for items 1, 2, and 3.

Number of Bolts Tested Number of Bolts Torqued Above Range Below Range

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine)

Signatures and Certificate Numbers for Assistant Mine, Mine Foreman-Mine Manager, and Superintendent or Assistant.

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-19-10 Section or Area Examined Headgate #22
Time of Examination: from 5:02 a.m. or p.m. to 5:35 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson Time 5:35 A.M. P.M.
Report received by Bruce Boyl (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains entries for #1 Entry, #2 Entry, #2 RCC, and #3 Entry.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains one entry for LOB OCHyl.

Remarks: Power Center
Travelways
Chargers
Intake Phone
Outby shelter

All ok at time of exam.
OCHyl 20.802 OPPM c/o

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager - Mine Foreman Certificate No. 33757
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-19-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .10 CHV% 20.802	Not Bolted	Bolted + Reflectors
2.		
3. #2R CC .0CHV% 20.802	Scrap Cut	Bolted + Reflectors
4.		
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	7-730AM	0CHV% 20.802	11.		
2.			12.		
3. 1-3	9-930AM	.05CHV% 20.802	13.		
4.			14.		
5. 1-3	11-1130AM	.0CHV% 20.802	15.		
6.			16.		
7. 1-3	1-200PM	.10 CHV% 20.802	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	709AM	0CHV% 20.802	6.		
2.			7.		
3. Return	1111AM	0CHV% 20.802	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 10
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine)

649 AM. SCSRS OK.

Brady Boy
Assistant Mine

1122-A
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Pg 4 section 8 KCP at

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-19 2010 Section or Area Examined HG-22
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Bowling Time 2:30 A.M. P.M.
 Report received by Rick Hutchins (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>20.8°² 10% ch₄</u>	<u>N/O</u>	<u>Reported</u>
2.	<u>20.8°² 0% ch₄</u>	<u>N/O</u>	<u>Reported</u>
3.	<u>2R 20.8°² 0% ch₄</u>	<u>Scrap</u>	<u>Tragedy & Reported</u>
4.	<u>3 20.8°² 0% ch₄</u>	<u>N/O</u>	<u>Reported</u>
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>21,212</u>		
<u>20.8°²</u>			
<u>0% ch₄</u>			

Remarks: powercenter, R-ways, Chargers HAULAGE CLEAR
at Time of EXAM
Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Brandon Bowling 1122-A Rick Hutchins 31569
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned T. Moore 53387
 Mine Manager—Mine Foreman Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-19-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken	
1.	<u>2R 20.8⁰</u>	<u>0% CH₄</u>	<u>Scrap Cut</u>	<u>Corrected</u>
2.				
3.				
4.				
5.				
6.				
7.				
8.				

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>4:00-4:18</u>	<u>0% CH₄</u>	11.			
2.	<u>1-3</u>	<u>6:10-6:30</u>	<u>0%</u>	12.			
3.	<u>1-3</u>	<u>8:05-8:30</u>	<u>0%</u>	13.			
4.	<u>1-3</u>	<u>10:15-10:45</u>	<u>0% CH₄</u>	14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>3:58pm</u>	<u>0% CH₄</u>	6.			
2.	<u>Return</u>	<u>7:59pm</u>	<u>0% CH₄</u>	7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #5 3:50pm RCP

Section Safe + Clean at Time of Exam
Rich Hultine Assistant Mine 37569 Certificate No. T. Mann Mine Foreman-Mine Manager 33359 Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-19 2010 Section or Area Examined H.G. 22
 Time of Examination: from 0:00 a.m. or 0:00 p.m. to 0:00 a.m. or 0:00 p.m.
 Was this report phoned to outside? Yes no
 By whom [Signature] Time 11:00 A.M. (P.M.)
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>of</u>	<u>[Signature]</u>
2. <u>2xc</u>	<u>scrap</u>	<u>[Signature]</u>
3. <u>2</u>	<u>[Signature]</u>	<u>[Signature]</u>
4. <u>3</u>	<u>was cleaned</u>	<u>[Signature]</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,130</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: Trussways clean at time of exam.
Pump Control - n/a
Chargers - n/a
Intake Phone - n/a
Air Chamber - methane detector needs calibration

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchins 37569 Kyle Anderson 33238
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned T. M. [Signature] 33389
 Mine Manager - Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-19 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1</u>	<u>N/O</u>	
2.	<u>2xc</u>	<u>Scrap</u>	<u>Reflectors</u>
3.	<u>2</u>	<u>N/O</u>	
4.	<u>3</u>	<u>needs cleaned</u>	<u>Reported</u>
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>140</u>	<u>0.2CH₄</u>	11.			
2.				12.			
3.	<u>1-3</u>	<u>505</u>	<u>0.2CH₄</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>225</u>	<u>0.2CH₄</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>543</u>	<u>0.2CH₄</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Anderson
Assistant Mine

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33307
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-20-2010 20 Section or Area Examined H622
Time of Examination: from 5:00 a.m. or p.m. to 5:45 p.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:45 A.M. P.M.
Report received by (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. CH4 20.8	none 20.8	none
2. 20	none 20.8	none
3. 20	not B1 step 20.8	fixed
4. 3	needs deal inter 20.8	rep
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
COB	1902P		

Remarks: 0 CH4 20.802, 0 CO detected Trukey
Holes OK at time of EXR P.C. also
Clear OK.

Skelton
Intake phone → OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 33227
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-20-210 Shift Puy Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for locations 1-3.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for locations 1-3 at various times.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for locations 1-3 at different times.

Number of Bolts Tested 8 Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed page # 5 of

Rep # 15 9+ 6:46 AM [Signature] 36526 [Signature] 3387

Assistant Mine

Certificate No.

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-20-20 Section or Area Examined Headgate 22 #
Time of Examination: from 1200 a.m. or p.m. to 130 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Deano Jones Time A.M. 233 P.M.
Report received by Branch Bond (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for #1 Entry, #2 Entry, #2 LCC, and #3 Entry.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten air measurement data for LOB and OCHYL.

Remarks: Power Center, Travelways, Intake Phone, Outby Shelter, Chargers. All ok at time of exam. OCHYL 20.802 OPRM c/o

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] Certificate No. 3025 Assistant Foreman
Countersigned [Signature] Mine Manager-Mine Foreman
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-20-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. # 2 Entry .05CH ₄ 20.802	Scrap Cut	Bolted + Reflectors
2. _____	_____	_____
3. # 2L CC 0CH ₄ ! 20.802	Needs Cleaned	Cleaned + Dusted
4. _____	_____	_____
5. # 3 Entry .10CH ₄ ! 20.802	Part Bolted	Bolted + Reflectors
6. _____	_____	_____
7. <u>OPPM C/O</u>	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-4:30pm	.05CH ₄ ! 20.802	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. 1-3	6-6:30pm	.05CH ₄ ! 20.802	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. 1-3	8-8:30pm	.10CH ₄ ! 20.802	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. 1-3	10-11:00pm	.05CH ₄ ! 20.802	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:11pm	0CH ₄ ! 20.802	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. Return	8:13pm	.05CH ₄ !	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 9
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 section 7 RCP

at 3:46pm.

Paul King
Assistant Mine

11224
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33369
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-20 Section or Area Examined H.G. 22
 Time of Examination: from 11:00 a.m. or 11:00 p.m. to 11:00 a.m. or 11:00 p.m.
 Was this report phoned to outside: Yes no
 By whom [Signature] Time 11:10 A.M. (P.M.)
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1	.05?	
2	.10?	Retained
3	.10?	
4		
5		
6		
7		
8		
9		
10		

Air Measurements

Location	CFM	Location	CFM
LOB	20,175		

Remarks: Travelways of haulways clean at time of
EXAM
Power Cords & cables up
rotated floor -OK
on chamber -OK 20.8% O₂ 0% CO

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] 1122-A Certificate No. [Signature] 32294
 Preshift Mine Examiner Assistant Foreman
 Countersigned T. Moore 33357
 Mine Manager - Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-21-10 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>2</u>	<u>scrap</u>	<u>Let Hadan</u>
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

1.	Location	Time	Methane Content	11.	Location	Time	Methane Content
1.				11.			
2.				12.			
3.				13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

1.	Location	Time	Methane Content	6.	Location	Time	Methane Content
1.				6.			
2.				7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

[Signature]
Assistant Mine

22294
Certificate No.

[Signature]
Mine Foreman-Mine Manager

23809
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-21-10 Section or Area Examined H 622
 Time of Examination: from 7:00 a.m. or p.m. to 7:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Renny Perry Time 5:41 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CH4 10</u>	<u>near VGS 20.8</u>	<u>none</u>
2. <u>10</u>	<u>part 501 key 20.8</u>	<u>rechecked</u>
3. <u>10</u>	<u>near VGS 20.8</u>	<u>none</u>
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>17.430</u>		

Remarks: 10 CH4 20.8oz. acc detected in VGS
Hellers ok at time of Ex p.c. and
Chrys ok.
sketch intake phone OK.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] Preshift-Mine Examiner Certificate No. 32294
 Countersigned [Signature] Mine Manager—Mine Foreman Certificate No. 35357
 Assistant Foreman Certificate No. 36025
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-24-10 Shift Day Area or Section HG22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>near dgs</u>	<u>None</u>
2. <u>2</u>	<u>part bolts</u>	<u>Bolts</u>
3. <u>3</u>	<u>near dgs</u>	<u>rep</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:50</u>	<u>.05</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:50</u>	<u>.05</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:50</u>	<u>.05</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:50</u>	<u>.05</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>ref</u>	<u>8:00</u>	<u>.05</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>ref</u>	<u>12:00</u>	<u>.05</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 12
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) dis used part #5 of rep

[Signature] Assistant Mine 36520 Certificate No. [Signature] Mine Foreman-Mine Manager 53309 Certificate No. [Signature] Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-21-20 Section or Area Examined Headgate #22
Time of Examination: from 1200 a.m. or p.m. to 130 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Deano Jones Time A.M. 233 P.M.
Report received by Branch (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Entries include #1 Entry .10 CHYL Scrap Cut Reflectors, #2 Entry .15 CHYL Needs Cleaned Reported, #2R CC .15 CHYL Part Bolted Reflectors, #3 Entry .10 CHYL None Observed Reported, and OPPM c/o.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Entry: LOB 0 CHYL 20.802 OPPM c/o, CFM 20,132.

Remarks: Power Center, Travelways, Outby Chokes, Intake Phone Chargers, OPPM c/o. All ok at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Deano Jones 3628 Preshift-Mine Examiner Certificate No. Branch Boy Assistant Foreman 1122-A Certificate No.
Countersigned T. Moore Mine Manager-Mine Foreman 33359 Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-21-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 Entry .10CH ₄ ! 20802	Scrap Cut	Bolted + Reflectors
2.			
3.	#2 Entry .05CH ₄ ! 20802	Needs Cleaned	Cleaned + Ousted
4.			
5.	#2R CC .05CH ₄ ! 20802	Part Bolted	Bolted + Reflectors
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4-430pm	.05CH ₄ ! 20802	11.			
2.				12.			
3.	1-3	6-630pm	.01CH ₄ ! 20802	13.			
4.				14.			
5.	1-3	8-830pm	.05CH ₄ ! 20802	15.			
6.				16.			
7.	1-3	10-1100pm	.05CH ₄ ! 20802	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	4:15pm	.05CH ₄ ! 20802	6.			
2.				7.			
3.	Return	8:13pm	.05CH ₄ ! 20802	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 7
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 Sect 6 REC at 350pm.

Frank Ray Assistant Mine 1122-A Certificate No. T. Moore Mine Foreman-Mine Manager 35257 Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-21-10 Section or Area Examined HG22
 Time of Examination: from 0600 a.m. or 0600 p.m. to 1100 a.m. or 1100 p.m.
 Was this report phoned to outside: Yes no
 By whom Branford Time 1115 A.M. P.M.
 Report received by Henry Lee (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CH4</u>	<u>1/2</u>	<u>—</u>
2. <u>.05</u>	<u>1/2</u>	<u>—</u>
3. <u>2x2</u>	<u>1/2</u>	<u>—</u>
4. <u>.10</u>	<u>1/2</u>	<u>—</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,170</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: haulways & haulways seen at haul of
Exam
Power Cuts of chargers - 1/2
per chamber 7 OK
antenna phone
20.8% - O2 0% - CO

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Branford Perry Preshift-Mine Examiner Certificate No. 33359
 Countersigned Henry Lee Assistant Foreman Certificate No. 72294
 _____ Assistant Foreman
 _____ Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-22-10 Shift 3:10 Area or Section H.G. 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>Back Area</u>	<u>N/A</u>	<u>_____</u>
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. _____	_____	_____	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. _____	_____	_____	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. _____	_____	_____	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. _____	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. _____	_____	_____	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. _____	_____	_____	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

[Signature] Assistant Mine 32254 Certificate No. [Signature] Mine Foreman-Mine Manager 33354 Certificate No. Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-22-10 Section or Area Examined #622

Time of Examination: from 10 a.m. or p.m. to 5:30 a.m. or p.m.

Was this report phoned to outside: Yes no

By whom Kenny Farmer Time 5:31 A.M. P.M.

Report received by [Signature]
(Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u> <u>CHP/O</u>	<u>noe 065</u>	<u>ref</u>
2. <u>2</u> <u>.10</u>	<u>noe 065</u>	<u>ref</u>
3. <u>2nt</u> <u>.10</u>	<u>noe 065</u>	<u>ref</u>
4. <u>3</u> <u>.10</u>	<u>noe 065</u>	<u>ref</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C003</u>	<u>18,000</u>		

Remarks: only 20,800 de tubes
? Unless ok at time of EXR p.c.i
and chyp ok

Intake pher 7 ok
ste-1-fer

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] Certificate No. 32294
Preshift-Mine Examiner Assistant Foreman Certificate No. 36520

Countersigned [Signature] Mine Manager—Mine Foreman

Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-22-13 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1</u>	<u>near 061</u>	<u>None</u>
2.	<u>2</u>	<u>near 065</u>	<u>None</u>
3.	<u>2nd</u>	<u>near 063</u>	<u>None</u>
4.	<u>3</u>	<u>near 063</u>	<u>None</u>
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>7:00</u>	<u>.08</u>	11.			
2.		<u>9:00</u>		12.			
3.	<u>1-3</u>	<u>9:00</u>	<u>.08</u>	13.			
4.		<u>11:00</u>		14.			
5.	<u>1-3</u>	<u>11:50</u>	<u>.05</u>	15.			
6.		<u>1:00</u>		16.			
7.	<u>1-3</u>	<u>1:00</u>	<u>.08</u>	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>hed</u>	<u>8:00</u>	<u>.08</u>	6.			
2.				7.			
3.	<u>hed</u>	<u>12:00</u>	<u>.08</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 10 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed ref # 5

02 Ref # 1491 @ 1:32 AM

[Signature]
Assistant Mine

36526
Certificate No.

[Signature]
Mine Foreman-Mine Manager

33389
Certificate No.

[Signature]
Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-22 Section or Area Examined Headgate #22
Time of Examination: from 1200 a.m. to 130 a.m.
Was this report phoned to outside: Yes X no
By whom Deano Jones Time A.M. 240 P.M.
Report received by Blank (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains entries for #1 Entry, #2 Entry, #2L CC, and #3 Entry.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains entry for LOB with CFM 20,041.

Remarks: Power Center, Travelways, Chargers, Outby Shelter, Intake Phone. All ok at time of exam.
OCH4 20.8 02 OPPM c/o

This is to certify that: (a) This section of the mine was properly examined by me (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By [Signature] Certificate No. 36025
Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 83357
Assistant Foreman Certificate No. 1122-A
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-22-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	# 1 Entry, 10CHV! 20.802	Needs Cleaned + Dusted	Cleaned + Dusted
2.	# 2 Entry, 05CHV! 20.802	Needs Cleaned + Dusted	Cleaned + Dusted
3.			
4.	# 2 LCC 0CHV! 20.802	Scrap Cut	Bolted + Retested
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-4:30pm	.10CHV! 20.802	11.		
2.			12.		
3. 1-3	6-6:30pm	.05CHV! 20.802	13.		
4.			14.		
5. 1-3	8-8:30pm	.05CHV! 20.802	15.		
6.			16.		
7. 1-3	10-11:00pm	.10CHV! 20.802	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:14pm	0CHV! 20.802	6.		
2.			7.		
3. Return	8:11pm	0CHV! 20.802	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 10
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) pg. 3 set A RCPat

3:44 PM
Brian King Assistant Mine 1122-A Certificate No. T. Moore Mine Foreman-Mine Manager 33359 Certificate No. _____ Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-22 2010 Section or Area Examined HG-22
Time of Examination: from 1000 a.m. or p.m. to 1100 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Brandon Time 1117 A.M. P.M.
Report received by [Signature]
(Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1, 01</u>	<u>None Observed</u>	
2. <u>2, 05</u>	<u>None Observed</u>	
3. <u>2L, 05</u>	<u>Scrap Cut</u>	<u>Reflected being</u>
4. <u>3, 05</u>	<u>Needs cleaned/dusted</u>	<u>Reported</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>Job</u>	<u>20900</u>		

Remarks: .05 20.8 power center & charges Handways
intake phones, fresh air base

This is to certify that, (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By [Signature] Preshift-Mine Examiner Certificate No. 1122-A Kyle to deman
Countersigned [Signature] Mine Manager—Mine Foreman Certificate No. 33238
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-22 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1 .01</u>	<u>none observed</u>	
2.			
3.	<u>2 .05</u>	<u>none observed</u>	
4.	<u>2h .05</u>	<u>Scrap Cut</u>	<u>Reflected being Reported</u>
5.	<u>3 .05</u>	<u>nuds cleared & dusted</u>	
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>140</u>	<u>0.2%</u>	11.			
2.				12.			
3.	<u>1-3</u>	<u>505</u>	<u>0.2%</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>215</u>	<u>0.6%</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>545</u>	<u>0.6%</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Anderson Assistant Mine 33238 Certificate No. T. M. ... Mine Foreman-Mine Manager 33359 Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-23-10 20 Section or Area Examined H622
Time of Examination: from 5:00 a.m. or p.m. to 5:45 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:45 A.M. P.M.
Report received by (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 4 columns: Location, Violation or Hazardous Condition, Action Taken, and a numerical column. Contains 4 entries: 1. CH4% 0, none obs 20.8, none 0; 2. 2st 0, not bolted 20.8, Reflector 0; 3. 2 0, none obs 20.8, none 0; 4. 3 0, needs level dust 20.8, Rep 0.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Entry: Lab 20,288.

Remarks: 0 CH4 20.8 O2 20.0 detected Truelers 2 Whaley OK at time of Exn p.c. and chym OK.

Intake Pump Shut

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Freshift-Mine Examiner Certificate No. 33238
Countersigned [Signature] Mine Manager-Mine Foreman Certificate No. 36526
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-23-0 Shift ny Area or Section A627

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>noe obs</u>	<u>noe</u>
2. <u>224</u>	<u>not bolted</u>	<u>Bolted</u>
3. <u>2</u>	<u>noe obs</u>	<u>noe</u>
4. <u>3</u>	<u>needs dust tested</u>	<u>dust tested</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u> <u>7:00</u>	<u>0%</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>0%</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:50</u>	<u>0%</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:00</u>	<u>0%</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>net</u>	<u>8:00</u>	<u>0%</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>net</u>	<u>12:00</u>	<u>0%</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 14
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed net 8 OK

rec #29 At 6:30 Am

[Signature] Assistant Mine Foreman
56526 Certificate No.

T. Moore Mine Foreman-Mine Manager
3357 Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-23-20 Section or Area Examined HG-22
Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom DEAN JONES Time A.M. 2:36 P.M.
Report received by RICK HUTCHENS (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8 ^{oz} , .05%CH ₄	N/O	Reported
2.	20.8 ^{oz} , .05%CH ₄	Scrap Cut	Tagged & Reported
3.	20.8 ^{oz} , .05%CH ₄	P/B	Tagged & Reported
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
L0B	14,426		
20.8 ^{oz}			
0%CH ₄			
0%CO			

Remarks: Powercuts, R-ways, Travelways, Charges Clear at Time of Exam

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] 36525 Rick Hutchens 37569
Preshift-Mine Examiner Assistant Foreman Certificate No.
Countersigned [Signature] 33359
Mine Manager—Mine Foreman
Assistant Foreman Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-23-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	2 20.8% .05% CH ₄	Scrap Cut	Clean & Dusted
2.	3 20.8% .05% CH ₄	P/B	Bolted & Clean & Dusted
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4:00-4:20	0% CH ₄	11.			
2.	1-3	6:00-6:19	0%	12.			
3.	1-3	8:00-8:23	0%	13.			
4.	1-3	10:15-10:45	0% CH ₄	14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	3:58pm	0% CH ₄	6.			
2.				7.			
3.	Return	7:57pm	0% CH ₄	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 10
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 8 #27 3:50pm RCP

Rick Hutchins 37569
Assistant Mine Certificate No.

T. Moore
Mine Foreman-Mine Manager

33353
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-23 2010 Section or Area Examined HG 22
 Time of Examination: from 10:15 a.m. or p.m. to 10:45 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom [Signature] Time 11:08 P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1	.05% CH ₄ None Observed	
2	2R .05% CH ₄ needs chand dusted	Reported
3	3 .05% CH ₄ Scrap Gut	Reflected
4		
5		
6		
7		
8		
9		
10		

Air Measurements

Location	CFM	Location	CFM
Job	17,980		

Remarks: 060CH power center + chiggers intake phone
air base Clear at time of exam

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Kyle Anderson 33238
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned T. Moore 33359
 Mine Manager—Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-23 Shift 3rd Area or Section 4622

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for locations 1, 2R, and 3.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for locations 1-3.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for Return locations.

Number of Bolts Tested _____ Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Signatures and titles: Assistant Mine, Mine Foreman-Mine Manager, Superintendent or Assistant.

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 1-24-10 20. Section or Area Examined H622
 Time of Examination: from 4:20 a.m. or p.m. to 5:35 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:40 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported			
Location	Violation or Hazardous Condition	CFM	Action Taken
1. <u>1</u>	<u>CHY²⁰ OR</u>	<u>20.8</u>	<u>rep</u>
2. <u>2</u>	<u>OR</u>	<u>20.8</u>	<u>rep</u>
3. <u>2nd</u>	<u>OR</u>	<u>22.8</u>	<u>reflected</u>
4. <u>3</u>	<u>OR</u>	<u>needs decl. mtd 22.8</u>	<u>rep</u>
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements			
Location	CFM	Location	CFM
<u>LOB</u>	<u>14.130</u>		

Remarks: 5CHY 20.8 or 20.0 detected tailings?
Analysis ok at time of Exam p.c. and
chargers ok.

sketch
Intake phase → OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Kyle Anderson 33038 Assistant Foreman [Signature] Certificate No. 3652r
 Countersigned H. Moore Mine Manager—Mine Foreman 33359

Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-24-10 Shift PM Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>nae dg</u>	<u>nae</u>
2. <u>2</u>	<u>nae dg</u>	<u>nae</u>
3. <u>ZRT</u>	<u>Scrap cut</u>	<u>clean up bolts</u>
4. <u>3</u>	<u>needs deal noted</u>	<u>deal, noted</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u> <u>7:00</u>	<u>.05</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>.05</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>.05</u>	15. _____	_____	_____
6. _____	<u>11:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:50</u>	<u>.08</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>red</u>	<u>8:00</u>	<u>.05</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>red</u>	<u>11:00</u>	<u>.06</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 4
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed by # 1201 rep

1, 2, 3, 4 at 6:40 AM

Assistant Mine _____ Certificate No. 3602 Mine Foreman-Mine Manager T. Moore Certificate No. 3339 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-24 2010 Section or Area Examined HG-22
 Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom DEAN JONES Time 2:35 P.M.
 Report received by Rick Hutchens
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>20.8°</u> <u>.05% CH₄</u>	<u>N/O</u>	<u>Reported</u>
2. <u>2R 20.8°</u> <u>.10% CH₄</u>	<u>Scrap Curt</u>	<u>Taged + Reported</u>
3. <u>3 20.8°</u> <u>.10% CH₄</u>	<u>Needs Clean</u>	<u>Reported</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,850</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: powercenter, R-ways, Chorgus, HAULAGE Clear
at Time of EXAM

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] Certificate No. 36525 Assistant Foreman Rick Hutchens Certificate No. 37569
 Countersigned [Signature] Mine Manager—Mine Foreman
 Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-24-70 Section or Area Examined HG 22
Time of Examination: from 10:15 a.m. or p.m. to 10:45 a.m. or p.m.
Was this report phoned to outside: Yes
By whom Rick Hutchins Time 11-11 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Row 1: Location 1, Scrap Cut, Reflectors. Row 2: Location 2R, Part Bolled, Reflectors. Row 3: Location 3, None Observed.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Row 1: Location PoB, CFM 18390.

Remarks: 2 of 4 power centers + changes intake phone fresh air flow clear at base of fan 20.8

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchins 37569 Preshift-Mine Examiner Certificate No. Kyle Anderson 33238 Assistant Foreman Certificate No.
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 33389 Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-24 Shift 3rd Area or Section HG 02

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1</u>	<u>Scrap Card</u>	<u>Reflector hung</u>
2.	<u>2R</u>	<u>Part bolted</u>	<u>Reflector hung</u>
3.			
4.			
5.	<u>3</u>	<u>none observed</u>	
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3 120</u>	<u>205</u>	<u>0.6%</u>	11.			
2.				12.			
3.	<u>1-3 505</u>	<u>335</u>	<u>0.6%</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>210</u>	<u>0.6%</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>541</u>	<u>0.6%</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

R. Anderson
Assistant Mine

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33357
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-25-10 20. Section or Area Examined H622
Time of Examination: from 8:00 a.m. or p.m. to 5:39 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:38 A.M. P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>CHY 10</u> part bolted <u>20.8</u>	<u>reflects</u> <u>CO</u>
2. <u>2</u>	<u>0</u> none obs <u>20.8</u>	<u>me</u> <u>0</u>
3. <u>2nd</u>	<u>0</u> scrap cut <u>20.8</u>	<u>reflects</u> <u>0</u>
4. <u>3</u>	<u>0</u> none obs <u>20.8</u>	<u>me</u> <u>0</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>17,640</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: 05 CHY 20.802 000 detected Truellys
7 Wheelys OK at time of Exn P.C. and
Chm OK

Skeller OK
Intake plum OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager—Mine Foreman Certificate No. 36122
[Signature] Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-25-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>part Bolts</u>	<u>Bolts</u>
2. <u>2</u>	<u>near 061</u>	<u>up</u>
3. <u>2nd</u>	<u>Scrap cut</u>	<u>clean up in Bolts</u>
4. <u>3</u>	<u>near 065</u>	<u>near</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:20</u>	<u>0</u>	11. _____	_____	_____
2. _____	<u>9:40</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>.00</u>	13. _____	_____	_____
4. _____	<u>11:40</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>.00</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:00</u>	<u>.00</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Let</u>	<u>8:40</u>	<u>.10</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Let</u>	<u>12:40</u>	<u>.10</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 8
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed ref # 6 of
REP # 30 AT 6:40 AM

Deery 3652 Assistant Mine
T. Moore 35359 Mine Foreman-Mine Manager
Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-25 2010 Section or Area Examined HG-22
Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom DEAN JONES Time A.M. 2:35 P.M.
Report received by Rick Hutchins (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8% ^{o2} .10%CH ₄	N/C/D	Reported
2.	20.8% ^{o2} .10%CH ₄	N/O	Reported
3.	21 20.8% ^{o2} .10%CH ₄	Scrap	Tagged + Reported
4.	3 20.8% ^{o2} .10%CH ₄	N/O	Reported
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	16,168		
20.8% ^{o2}			
0%CH ₄			
0%CO			

Remarks powercenter, R-ways, Chargers, Haulage Clear at Time of EXAM

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By [Signature] 3652x Rick Hutchins 37569
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned T. [Signature] 33389
Mine Manager - Mine Foreman Certificate No.
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-25-10 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1 20.8^{oz} 105% CH₄</u>	<u>N/C/D</u>	<u>Corrected</u>
2.	<u>2L 20.8^{oz} 105% CH₄</u>	<u>Scrap Cut</u>	<u>Corrected</u>
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>4:00-4:17</u>	<u>0 % CH₄</u>	11.			
2.	<u>1-3</u>	<u>6:00-6:18</u>	<u>0 %</u>	12.			
3.	<u>1-3</u>	<u>8:00-8:30</u>	<u>0 %</u>	13.			
4.	<u>1-3</u>	<u>10:15-10:45</u>	<u>0 % CH₄</u>	14.			
5.				15.			
6.	<u>20.8^{oz}</u>			16.			
7.	<u>0% CH₄</u>			17.			
8.	<u>0% CO</u>			18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>3:57pm</u>	<u>0 % CH₄</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>7:58pm</u>	<u>0 % CH₄</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 10
Number of Bolts Torqued Above Range 0 Below Range 0

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) Page 7 1-5 3:48pm REP

Check SCSR's, Smoke Search on Section

Rick Hutchins
Assistant Mine

37569
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-28-2010 Section or Area Examined Headgate 22
Time of Examination: from 1615 a.m. or p.m. to 1635 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Hutchens Time 1100 A.M. P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. 1	0.6 CH4 none observed	Reported
2. 2L	0.6 CH4 scrap cut	Reported
3. 2	0.6 CH4 need cleaned dusted	Reported
4. 3	0.6 CH4 none observed	Reported
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	18260		

Remarks: 0.05 CH4 0% CO 20.8 O2 charges and power center intake phones and shelters all clear at time of exam

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Preshift-Mine Examiner Certificate No.
Countersigned T. Moore 33359 Mine Manager—Mine Foreman
Assistant Foreman
Assistant Foreman Kyle Anderson 33238
Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 1-25 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>N/O</u>	
2. <u>2L</u>	<u>Scrap Cut</u>	<u>Reflected</u>
3. <u>2</u>	<u>needs cleaned & dusted</u>	<u>Repaired</u>
4. <u>3</u>	<u>N/O</u>	
5. _____		
6. _____		
7. _____		
8. _____		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3 140</u>	<u>212</u>	<u>0.6 d/y</u>	11. _____		
2. _____			12. _____		
3. <u>1-3 958</u>	<u>529</u>	<u>0.6 d/y</u>	13. _____		
4. _____			14. _____		
5. _____			15. _____		
6. _____			16. _____		
7. _____			17. _____		
8. _____			18. _____		
9. _____			19. _____		
10. _____			20. _____		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>218</u>	<u>0.6 d/y</u>	6. _____		
2. _____			7. _____		
3. <u>Return</u>	<u>594</u>	<u>0.6 d/y</u>	8. _____		
4. _____			9. _____		
5. _____			10. _____		

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Kyle Anderson
Assistant Mine

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33359
Certificate No. Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-26 2010 Section or Area Examined Headgate # 22
Time of Examination: from 4:55 a.m. or p.m. to 5:28 a.m. or p.m.
Was this report phoned to outside: Yes X no _____
By whom Kyle Anderson Time 5:38 A.M. P.M.
Report received by Bruce Boy (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Entry OCHyl. 20.802	None Observed	Reported
2. _____	_____	_____
3. #2 Entry OCHyl. 20.802	Not Belted	Reflectors
4. _____	_____	_____
5. #2L CC OCHyl. 20.802	Needs Cleaned + Dusted	Reported
6. _____	_____	_____
7. #3 Entry OCHyl. 20.802	None Observed	Reported
8. _____	_____	_____
9. OPPM c/o 1-3	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
LOB	17,300	_____	_____
OCHyl	_____	_____	_____
20.802	_____	_____	_____
OPPM c/o	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: Power Center
Travelways
Chargers
Outby Shelter
Intake Phone
OCHyl, 20.802 OPPM c/o
All reported OK at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned Bruce Boy Assistant Foreman Certificate No. 1122-A
T. Moore Mine Manager - Mine Foreman
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-26-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #2 Entry . 10 CHV! 20.802	Not Bolted	Bolted & Reflectors
2.		
3. #2L . 0CHV! 20.802	Needs Cleaned + Ousted	Cleaned + Ousted
4.		
5. #2		
6. Machine Ousted	Section - Return	
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	7-7:30am	.10 CHV! 20.802	11.		
2.			12.		
3. 1-3	9-9:30am	.05 CHV! 20.802	13.		
4.			14.		
5. 1-3	11-11:30am	.05 CHV! 20.802	15.		
6.			16.		
7. 1-3	1-2:00pm	.10 CHV! 20.802	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	7:11am	.0 CHV! 20.802	6.		
2.			7.		
3. Return	11:13am	.0 CHV! 20.802	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 8
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 3 Sect B REP at

045 AM SGR'S OK

B. ...
Assistant Mine

1122-A
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33352
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-26 2010 Section or Area Examined HG-22
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Bowling Time 2:37 A.M. P.M.
 Report received by Rick Hutchens
(Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>20.8⁰².05</u>	<u>Scrap</u>	<u>Tagged & Reported</u>
2.	<u>20.8⁰².10</u>	<u>P/B</u>	<u>Tagged & Reported</u>
3.	<u>20.8⁰².05</u>	<u>N/C</u>	<u>Reported</u>
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,212</u>		
<u>20.8⁰²</u>			
<u>0% CH₄</u>			
<u>0% C^o</u>			

Remarks: powercenter, R-ways, Chargers, Haulage Clear
at Time of Exam

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Brandon Bowling 1122-A Rick Hutchens 37569
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned T. M. [Signature] 33359
Mine Manager—Mine Foreman Assistant Foreman

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-26 2070 Section or Area Examined H6 22
Time of Examination: from 10:15 a.m. or p.m. to 10:45 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom [Signature] Time 11:15 P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 .05	Scrap cut	Reflected
2. 2R .05	Part bolted	Reflected
3. 3 .05	None Observed	
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>Sub</u>	<u>17,980</u>		

Remarks: 20 power center & chargers in the phone fresh air base
20 clear at time of exam

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Certificate No. [Signature] Assistant Foreman 33238 Certificate No.
Countersigned [Signature] Mine Manager—Mine Foreman 33359
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-26 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken	
1.	<u>1</u>	<u>.05 #4</u>	<u>Scrap Cut</u>	<u>Reflectors</u>
2.	<u>2R</u>	<u>.05 #4</u>	<u>Part bolted</u>	<u>Reflectors</u>
3.	<u>3</u>	<u>.05 #4</u>	<u>N/O</u>	
4.				
5.				
6.				
7.				
8.				

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>135</u>	<u>210</u>		<u>.05 #4</u>		
2.							
3.	<u>1-3</u>	<u>501</u>	<u>535</u>		<u>.05 #4</u>		
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>216</u>	<u>.05</u>				
2.							
3.	<u>Return</u>	<u>538</u>	<u>.05</u>				
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Number of Bolts Tested _____
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) _____

Ryle Anderson
Assistant Mine

33238
Certificate No.

Tony Moore
Mine Foreman-Mine Manager

33357
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-27 2010 Section or Area Examined Headgate #22
Time of Examination: from 10:00 a.m. or p.m. to 5:35 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson Time 5:38 A.M. P.M.
Report received by Brad Bony (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains entries for #1 Entry (OS CHY! Scrap Cut), #2 Entry (OS CHY! None Observed), and #3 Entry (OS CHY! Needs Add Cleaning).

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains measurement for LOB at 15,380 CFM and OCHY! at 20.802 ppm c/o.

Remarks: Power Center, Travelways, Chargers, Airby shelter, Intake phase, OCHY! 20.802 ppm c/o. All ok at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned Brad Bony Assistant Foreman Certificate No. 1122-A
Troy Mene Mine Manager - Mine Foreman Certificate No. 33759
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-27-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 Entry .01CH ₄ 20.862	Scrap cut	bolts + Reflectors
2.			
3.	#3 Entry .05CH ₄ 20.802	Needs Add Cleaning	Cleaned + dusted
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	7:30 AM	.05CH ₄ 20.802	11.			
2.				12.			
3.	1-3	9-930 AM	.0CH ₄ 20.862	13.			
4.				14.			
5.	1-3	11-1130 AM	.05CH ₄ 20.802	15.			
6.				16.			
7.	1-3	1-200 PM	.10CH ₄ 20.802	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	7:13 AM	.0CH ₄ 20.804	6.			
2.				7.			
3.	Return	11:11 AM	.0CH ₄ 20.802	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 6
Number of Bolts Torqued Above Range _____ Below Range _____

If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 5 sect 27 RCP at

6:44 AM
Burl Young Assistant Mine 1122-A Certificate No. Tony Moore Mine Foreman-Mine Manager 33359 Certificate No. Superintendent or Assistant