



[REDACTED]

MEMORANDUM FOR MICHAEL A. DAVIS

Deputy Assistant Secretary for Operations
Mine Safety and Health Administration

THROUGH:

PETER J. MONTALI *Peter J. Montali*
Acting Director of Accountability for
Mine Safety and Health Administration

FROM:

ARLIE A. WEBB *Peter J. Montali fu*
Accountability Specialist

SUBJECT:

MSHA Office of Accountability Audit, MSHA Coal District
3, Morgantown, West Virginia, Field Office, [REDACTED]
[REDACTED]

Introduction

This memorandum summarizes the Office of Accountability audit of the subject field office and mine. Audit subjects included but were not limited to, MSHA field activities, level of enforcement, Field Activity Reviews, Accompanied Activities, MSHA supervisory and managerial oversight, mine plans, and the conditions and practices at the mine. The audit was conducted by Arlie A. Webb and Jerry Kissell, during the week of [REDACTED] Peter J. Montali, Acting Director for the Office of Accountability, also participated in this audit. Positive findings and issues requiring attention are included in this audit report.

Overview

The field office review was conducted on May 9th and the on-site portion of the audit was conducted on May 10th and 11th. Accompanying the Accountability Specialists were [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

On-site areas examined included [REDACTED] two continuous mining machine sections, various belt conveyor entries, track haulage, escapeways, lifelines, emergency shelters, intakes, returns, stopping lines, water lines, communication, and tracking methods. Several pieces of equipment at various locations in the mine were checked for permissibility, fire suppression, and safe operating condition. In addition to the underground portion of the mine, an examination was conducted of the impoundments, including roadways and berms, monitoring points, spillways, groin ditches, dam construction, and water treatment.

During this audit, a member of the audit team accompanied the inspector on an investigation of a hazardous complaint received by the field office regarding the subject mine.

S&S Rate Comparison

Although the S&S rates for the Morgantown, West Virginia field office were comparable to the district and national averages for FY 2008, they have fallen below those levels during the first half of FY 2009.

S & S Rate Comparison

| Fiscal Year | Field Office | District 3 | National Average |
|-------------|--------------|------------|------------------|
| 2008 | 36.4% | 34.2% | 35.1% |
| 2009 | 32.5% | 33.8% | 34.5% |

Time and Activity Comparison

Time distribution for E01 inspections conducted out of the Morgantown, West Virginia field office from October 01, 2008 to March 31, 2009 is highly commendable, with an overall average of 71.5 percent of the total inspection time being spent on-site.

Surface Facilities - E01 Inspections

| | Travel | Other | On Site | Citations Written On-site | Citations Written Off-site | Total Percent |
|------------|--------|-------|---------|---------------------------|----------------------------|---------------|
| % of Total | 14.1 | 12.9 | 72.2 | 1.9 | 0.7 | 100.0 |

Surface Mines - E01 Inspections

| | Travel | Other | On Site | Citations Written On-site | Citations Written Off-site | Total Percent |
|------------|--------|-------|---------|---------------------------|----------------------------|---------------|
| % of Total | 17.9 | 12.1 | 69.9 | 5.2 | 0.1 | 100.0 |

Underground Mines - E01 Inspections

| | Travel | Other | On Site | Citations Written On-site | Citations Written Off-site | Total Percent |
|------------|--------|-------|---------|---------------------------------|----------------------------------|------------------|
| % of Total | 16.6 | 10.8 | 72.3 | 6.6 | 0.3 | 100.0 |

Audit Results

The audit revealed positive findings in several areas, including the following:

1. Supervisors and managers are visiting mines on a regular basis.
2. CLR decisions and advice given to inspection personnel appears to be in compliance with national guidelines.
3. Inspector on-site time is commendable, and time spent in the "other" category is low.

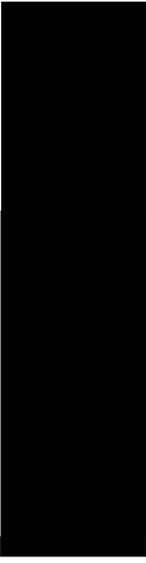
The audit also revealed several issues that require corrective actions, including the following:

1. The Agency needs to inform miners, mine operators, and training personnel of a potential hazard with different types of smoke during SCSR expectation training. (HQ)
2. There appear to be inconsistencies in the enforcement policy regarding the abatement of citations issued for exceeding the maximum entry/crosscut width (or maximum diagonal distances for intersections) permitted by the approved roof control plan. (HQ/District)
3. The field office needs to insure that operators correctly complete MSHA Form 7000-1 (Mine Accident and Injury), especially with regard to information concerning actions to prevent similar accidents in the future. (FO/District)
4. Accountability reviews should include methods for follow up and evaluation of corrective actions. (District)
5. Field Activity Reviews and Accompanied Activity Reports should contain detailed documentation of positive and negative observations regarding inspector work products and performance, and should document the supervisor's corrective actions. (FO/District)
6. Inspection notes do not always address or support the [REDACTED] the operator's negligence listed on citations and orders. (FO/District)

7. Numerous MSHA Forms 2000-22 (Mine Activity Data Sheet) were found in E01 reports, making a review of the event calendar and persons participating in the inspection difficult to determine. (FO/District)

Attachments

- A. Office of Accountability Checklist with comments, recommendations, and references.
- B. Selected citations with apparent evaluation inconsistencies
- C. Citations issued during the audit

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|----|--|--------------|
| a. |  | 75.1403 |
| b. | | 75.360(f) |
| c. | | 75.220(a)(1) |
| d. | | 75.400 |
| e. | | 75.202(a) |
| f. | | 75.816(a)(1) |
| g. | | 75.400 |
| h. | | 75.333(h) |
| i. | | 75.1722(b) |
| j. | | 75.202(a) |
| k. | | 75.517 |
| l. | | 75.1403 |
| m. | | 75.202(a) |
| n. | | 75.360(f) |

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|---|--------------------------|------------|-------------------------------------|----------------|--------------------------|----------------|
| Evaluate supervisory review of inspection reports and documentation for completeness. | | | | | | |
| Adequate | <input type="checkbox"/> | Inadequate | <input checked="" type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |

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There were 10 separate instances in the E01 reports reviewed where the inspector's notes did not address the inspector's evaluation of the operator's negligence.

Action Required - The supervisor must ensure that Inspection notes contain documentation to support his/her determination of the operator's negligence.

Reference - Citation and Order Writing Handbook (PH08-I-1) Section IX

In addition, the report for E01 event contained 6 different Mine Activity Data Sheets (MSHA Form 2000-22), and the report for E01 event contained 11 different Mine Activity Data Sheets. Both reports contained multiple inspection event calendars, making it difficult to determine which days and shifts were covered during the inspection.

Recommendation - The lead inspector should maintain the Mine Activity Data Sheet and ensure that all inspectors sign it. The supervisor should ensure the event calendar is kept up to date and accurate.

2. Determine if supervisors address report deficiencies immediately

Adequate Inadequate Not Applicable Comments Below

3. Determine if supervisors are visiting each assigned mine at least annually

Adequate Inadequate Not Applicable Comments Below

4. Evaluate the quality of Field Activity Review reports (FARs)

Adequate Inadequate Not Applicable Comments Below

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[REDACTED]

5. Determine if supervisors/ managers are identifying and addressing performance or behavior based issues during and after accompanied inspections are conducted

Adequate Inadequate Not Applicable Comments Below

During a Field Activity Review/ Accompanied Activity the [REDACTED]

[REDACTED]

During the 2nd level review of the same activity, the [REDACTED] observed [REDACTED] lack of confidence in using elevated enforcement and was addressing the issue.

However, no documentation was provided to show 1) what actions were taken to address this issue, 2) whether or not the enforcement action taken by the inspector was modified to the proper level, or 3) whether or not any follow-up was conducted.

Recommendation - Observed deficiencies should be corrected immediately and proper follow up conducted to prevent a repetition. Supervisory activities are to be documented.

Reference - Sago, Aracoma, and Darby Internal Reviews, Corrective Action Plan, Page B-4. Coal Mine Safety and Health Supervisor's Handbook (AH-08-III-1), Chapter 1 - Section IV, Item F, and Section VI, Item E.

6. Evaluate the quality of Accompanied Inspections

Adequate Inadequate Not Applicable Comments Below

During an interview conducting as part of this audit, [REDACTED] stated that, although he did discuss and document the issue regarding low level of enforcement [REDACTED] no immediate remedial actions were taken and level of enforcement (citation) was allowed to remain as issued.

Recommendation - Observed deficiencies should be corrected immediately and proper follow up conducted to prevent a repetition. Supervisory activities are to be documented.

Reference - Sago, Aracoma, and Darby Internal Reviews, Corrective Action Plan, Page B-4.

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Coal Mine Safety and Health Supervisor's Handbook (AH-08-III-1), Chapter 1 - Section IV, Item F, and Section VI, Item E.

7. Determine if supervisors are thoroughly reviewing mine files at least annually

Adequate Inadequate Not Applicable Comments Below

8. Determine if Assistant District Manager is holding supervisor accountable for general mine visits, FARs, and accompanied activities

Adequate Inadequate Not Applicable Comments Below

Second-level reviews were conducted during the period audited.

Note: At the time of this audit, the new ADM had been in place for approximately 5 weeks, and had already begun addressing issues listed in Items 1, 5, and 6.

9. Determine if District Manager is using Performance Management System to hold ADMs accountable for oversight of subordinates

Adequate Inadequate Not Applicable Comments Below

11. Determine if ADMs and DMs are visiting mines with poor compliance at least monthly

Adequate Inadequate Not Applicable Comments Below

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| | | | | | |
|-----|---|--|-------------------------------------|---|----------------|
| 12. | Evaluate required monthly reports of supervisory and management mine visits | Adequate <input checked="" type="checkbox"/> | Inadequate <input type="checkbox"/> | Not Applicable <input type="checkbox"/> | Comments Below |
|-----|---|--|-------------------------------------|---|----------------|

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|-----|--|--|-------------------------------------|---|----------------|
| 13. | Evaluate the location, workload, and availability of specialists (roof control, ventilation, electrical, etc.) within the district | Adequate <input checked="" type="checkbox"/> | Inadequate <input type="checkbox"/> | Not Applicable <input type="checkbox"/> | Comments Below |
|-----|--|--|-------------------------------------|---|----------------|

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|-----|--|-----------------------------------|--|---|----------------|
| 14. | Evaluate supervisory and management review of 103(i) (spot inspection) tracking system for compliance with time frames | Adequate <input type="checkbox"/> | Inadequate <input checked="" type="checkbox"/> | Not Applicable <input type="checkbox"/> | Comments Below |
|-----|--|-----------------------------------|--|---|----------------|

This mine is on a 5-day spot inspection frequency due to methane liberation in excess of 7 million cubic feet of methane per 24 hours.

The Mine Act requires that the agency "...shall provide a minimum of one spot inspection by his authorized representative of all or part of such mine during every five working days at irregular intervals."

Although the interval between 103(i) spot inspections averaged 5 days for the period from October 01, 2008 through April 02, there were 18 occasions when that interval exceeded 5 days. In addition, there was one occasion when 103(i) spot inspections were conducted on three consecutive Tuesdays (01/20/2009, 01/27/2009, and 02/03/2009.

[REDACTED]

there were no 103(i) Spot inspections conducted on any Friday or Saturday during the time period audited.

Action Required - 103(i) Spot inspections are to be conducted in accordance with the time frames set forth in the Mine Act. Practices, policies and/or instructions contrary to the plain wording of the Mine Act should be revised or revoked.

Reference - Federal Mine Safety and Health Act of 1977, §103(i).

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15. Determine if supervisors and managers are ensuring that 103(i) inspections are not combined with any other type of inspection
Adequate Inadequate Not Applicable Comments Below

17. Determine if supervisors are monitoring inspector time and activity documentation to ensure proper use of time by inspector
Adequate Inadequate Not Applicable Comments Below

20. Determine if supervisors are adequately evaluating the level of enforcement by visiting each producing mine
Adequate Inadequate Not Applicable Comments Below

21. Determine if District Manager is monitoring the ACRI program and using the Performance Management System to ensure that CLR's justify changes
Adequate Inadequate Not Applicable Comments Below

23. Determine if Peer Reviews are used to assess supervisory review of enforcement actions
Adequate Inadequate Not Applicable Comments Below

25. Evaluate inspector/ specialist knowledge of documentation required and process for completing PKW Forms.
Adequate Inadequate Not Applicable Comments Below

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26. Evaluate the district's process for performing Possible Knowing/Willful (PKW) reviews and initiating or denying special investigations

Adequate Inadequate Not Applicable Comments Below

29. Determine if complete and thorough inspections are being conducted and adequately documented

Adequate Inadequate Not Applicable Comments Below

30. Determine if inspection notes, air samples, rock dust samples, and tracking map/diagram support the inspector's assertion that the mine was inspected in its entirety

Adequate Inadequate Not Applicable Comments Below

31. Determine that the inspector spent sufficient time on off-shifts and on weekends

Adequate Inadequate Not Applicable Comments Below

32. Determine if the SCSR inventory database has been implemented to track inspections of SCSRs

Adequate Inadequate Not Applicable Comments Below

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| 33. | Determine if areas deemed "too wet" for rock dust surveys are re-visited and sampled |
| Adequate <input checked="" type="checkbox"/> | Inadequate <input type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below |

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|--|---|
| 34. | Determine if all mine record books, postings, and other required materials are examined during the inspection |
| Adequate <input checked="" type="checkbox"/> | Inadequate <input type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below |

| | |
|---|---|
| 35. | Determine if all provisions of the MINER Act are evaluated during the inspection |
| Adequate <input type="checkbox"/> | Inadequate <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below |
| <p>The emergency shelter [REDACTED] was not located in a crosscut. The shelter was located in the track entry outby the longwall. This location is considered to be in the direct line of the working face.</p> <p><i>Action Required - The district must ensure that emergency shelters are not located in the direct line of the working face.</i></p> <p><i>Reference - MSHA Q&A for Refuge Alternatives, Questions 108, 111, and 118.</i></p> <p><u>Note: The district is currently addressing this issue and has issued a citation to the mine for non compliance with the applicable standard.</u></p> | |

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| 36. | Determine if the amount of time expended on each inspection activity and area of the mine is sufficient to accomplish inspection goals |
| Adequate <input checked="" type="checkbox"/> | Inadequate <input type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below |

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37. Evaluate each citation/order/safeguard for inspector's determination of gravity, negligence, number of persons affected, and the level of enforcement

Adequate Inadequate Not Applicable Comments Below

There were 10 separate instances in the E01 reports reviewed where the inspector's notes did not address the inspector's evaluation of the operator's negligence.

In addition, Attachment B contains selected citations/orders where evaluations of gravity, negligence, and/or number of persons affected do not appear to be consistent with the condition or practice cited and facts surrounding the violations.

Recommendation - Evaluations of gravity, operator negligence, and number of persons affected must be consistent with the nature and extent of the violation, and must be documented in the body of the citation and supported by the inspector's notes.

Reference - Citation and Order Writing Handbook for Coal Mines and Metal and Nonmetal Mines (PH08-I-1), Chapter 1 - Sections II & IV, Chapter 3 - Section II D, and Chapter 4 - Section V.

38. Accompany and evaluate inspector's imminent danger run

Adequate Inadequate Not Applicable Comments Below

39. Check adequacy of preshift/onshift examinations

Adequate Inadequate Not Applicable Comments Below

40. Evaluate inspector's observation of roof conditions. Is a copy of the currently approved roof control plan maintained on the section?

Adequate Inadequate Not Applicable Comments Below

There appear to be inconsistencies in the termination of citations issued in areas when the operator exceeds the maximum entry/crosscut width (or the maximum diagonal distance for intersections) allowed by the approved roof control plan. These same inconsistencies appear when the inspector encounters the same conditions outby the working section.

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No indications were found to show the inspector or operator considered installation of any means of support other than an additional bolt or bolts (such as timbers, cribs, crossbars, etc.) as a means to reduce the entry width and control the roof in cited areas.

Recommendation – MSHA Headquarters should consider providing guidance (policy statement) to enforcement personnel to base the operator’s abatement actions for excessive widths on the specific roof, rib, and floor conditions at the site of the violation.

The installation of additional roof bolts should not always be the sole accepted means of abatement. When roof, rib, or floor conditions dictate, or the excessive widths are extreme, the installation of floor to roof support should be required. The inspector or specialist should utilize their judgment and experience to determine what is acceptable as the type of roof support needed to provide protection for the miners.

Note: During the audit close out conference, the district acknowledged this may be common deficiency in other roof control plans, and has initiated corrective actions.

41. Evaluate operator’s workplace examinations
Adequate Inadequate Not Applicable Comments Below

42. Evaluate conditions on working section and observe work cycle
Adequate Inadequate Not Applicable Comments Below

43. Observe air quantity, quality, and gas checks by inspector
Adequate Inadequate Not Applicable Comments Below

44. Determine adequacy of Emergency Response Plan training (interview miners)

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|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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45. Determine adequacy of training regarding roof, ventilation, and other plans (interview miners). Do inspection notes document evaluation of this type training?

| | | | | | | |
|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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46. Evaluate Self-Contained, Self-Rescuer condition, storage, signage

| | | | | | | |
|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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47. Determine if the mine operator has conducted SCSR donning expectation training and if the inspector has observed and evaluated the training

| | | | | | | |
|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|

Documentation and interviews with miners indicated that SCSR donning expectation training has been conducted.

However, [redacted] raised a concern about the use of a vegetable based or "theatrical" smoke during expectation training resulting in overheating and possible combustion within the training cartridge. Research indicates that additional testing of the training cartridge reveals this appears to be a valid concern. MSHA Technical Support is currently working with the manufacturer to develop a "User Notice" regarding precautions to be taken during expectation training.

Recommendation - MSHA Headquarters should ensure that miners, mine operators, and training personnel are made aware of the precautions that need to be taken during expectation training.

48. Examine electrical cables on several pieces of equipment

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|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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49. Evaluate several pieces of equipment for permissibility

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|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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50. Examine lifelines, manddoors, and related signage

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| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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51. Examine escapeway map for compliance with regulations

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|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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52. Evaluate integrity of primary and alternate escapeways

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|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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53. Evaluate integrity of return side stopping line

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|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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54. Travel and evaluate condition and maintenance of section conveyor belt, structures, and entries

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|----------|-------------------------------------|------------|--------------------------|----------------|--------------------------|----------------|
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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|----------|---|------------|--------------------------|----------------|--------------------------|----------------|
| 55. | Evaluate conveyor belt isolation from other air courses | | | | | |
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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|----------|--|------------|--------------------------|----------------|--------------------------|----------------|
| 56. | Evaluate fire valves and hoses (condition, compatibility of fittings, pressure test) | | | | | |
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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| 58. | Evaluate cleanup of accumulations and application of rock dust | | | | | |
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
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|----------|--|------------|--------------------------|----------------|--------------------------|----------------|
| 59. | Evaluate condition of conveyor belt drives, and fire suppression systems | | | | | |
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
| | | | | | | |

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| 60. | Determine if all required record books are adequately completed and in compliance with applicable standards | | | | | |
| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
| | | | | | | |

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61. Examine mine map for accuracy of workings and escapeway locations

Adequate Inadequate Not Applicable Comments Below

62. Examine mine bulletin board and evaluate adequacy of all required postings

Adequate Inadequate Not Applicable Comments Below

63. Interview responsible person(s) and evaluate knowledge of emergency response, evacuation procedures, and fire fighting processes

Adequate Inadequate Not Applicable Comments Below

65. Examine and evaluate at least one set of seals, including methods for obtaining samples from sealed area

Adequate Inadequate Not Applicable Comments Below

68. Determine if Peer Reviews identify root causes of deficiencies, corrective actions, set time lines for corrections, and identify a method for accurately measuring the success or failure of corrective actions.

Adequate Inadequate Not Applicable Comments Below

The district's tracking sheet provides information relative to follow-up, monitoring and evaluation of corrective actions for issues identified during their audits.

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Although headquarters-level reviews identified root causes and proposed corrective actions, quarterly updates regarding the monitoring and reconciliation of identified issues were not provided to the Director of the Office of Accountability.

Recommendation – Follow-up and evaluation of corrective actions is an important part of the review process, and should be addressed in quarterly reports as identified in the Accountability Handbook.

Reference – Accountability Program Handbook (AH08-III-4), Page 8

70. Determine if Peer Reviews include a visit to the mine, and include observation of the producing section, conveyor belt entries, escapeways and the ERP provisions
 Adequate Inadequate Not Applicable Comments Below

71. Determine if Peer Reviews accurately reflect and evaluate MSHA activities at all types of mining (underground/surface/surface facilities) within the district
 Adequate Inadequate Not Applicable Comments Below

72. Determine if approved plans and the Uniform Mine File books are addressed during each Peer Review
 Adequate Inadequate Not Applicable Comments Below

73. Evaluate the approved roof control plan after in-mine visit
 Adequate Inadequate Not Applicable Comments Below

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74. Evaluate approved ventilation plan after in-mine visit

Adequate Inadequate Not Applicable Comments Below

75. Evaluate approved training plan after discussion with miners

Adequate Inadequate Not Applicable Comments Below

77. Evaluate the two most current completed E01 (regular) inspection reports (two quarters)

Adequate Inadequate Not Applicable Comments Below

The inspections appear thorough and complete.

78. Ten most current completed E02 (103(i) spot) inspection reports

Adequate Inadequate Not Applicable Comments Below

80. Determine if 104(d) tracking system is in place at the office being audited, and is being kept up to date

Adequate Inadequate Not Applicable Comments Below

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85. Determine if miners are adequately trained in the provisions of any new plan prior to its implementation

Adequate Inadequate Not Applicable Comments Below

90. Determine if dated copy of approval/disapproval letter is in file

Adequate Inadequate Not Applicable Comments Below

91. Determine if copies of the plan are distributed as per an established list

Adequate Inadequate Not Applicable Comments Below

92. Determine if a copy of the most recent plan is provided for inclusion in the Uniform Mine File

Adequate Inadequate Not Applicable Comments Below

96. Determine if comments from miner's representatives are addressed

Adequate Inadequate Not Applicable Comments Below

99. Determine if the uniform mine file is reviewed for information related to plan adequacy

Adequate Inadequate Not Applicable Comments Below

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111. Determine if plans contain required safety precautions for operating remote controlled equipment

Adequate Inadequate Not Applicable Comments Below

114. Determine if spreadsheets and/or databases provided for tracking of mine visits by supervisors and managers is kept up to date

Adequate Inadequate Not Applicable Comments Below

115. Evaluate the effectiveness of management's support of, and communication with, inspectors and specialists

Adequate Inadequate Not Applicable Comments Below

116. Review documentation of staff meetings/safety meetings to determine their effectiveness and relevance to the Agency's mission and current issues

Adequate Inadequate Not Applicable Comments Below

117. Are MSHA Forms 7000-1 accurately reviewed for proper information and potential violations, unsafe practices, or conditions?

Adequate Inadequate Not Applicable Comments Below

The UMF contained a total of 44 MSHA Forms 7000-1. Of those, there were 7 for immediately reportable accidents.

Section B, Item 4 "Steps Taken to Prevent Recurrence of Accident" was not completed on 3 of the 7 MSHA Forms 7000-1 submitted for immediately reportable accidents.

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These accidents were as follows:



No citations were found regarding the company's failure to properly address actions to prevent future accidents, and no revised Forms 7000-1 were found for these accidents.

Action Required - Increased attention to detail when reviewing Forms 7000-1, and proper enforcement actions when information is found to be incorrect or lacking.

Reference - 30 CFR Sections 50.2 and 50.10.

Additionally, 24 of the remaining 37 Forms 7000-1 had information entered in Section B, even though the accidents did not meet the immediate reporting criteria.

Recommendation - Operators should be instructed in the proper completion of MSHA Form 7000-1. A revised 7000-1 should be required anytime a review reveals incorrect or incomplete information has been entered.

118. Determine if inspectors have sufficient equipment and supplies to conduct thorough inspections.

Adequate Inadequate Not Applicable Comments Below

119. Determine if adequate close-out conferences are being conducted at the end of each inspection.

Adequate Inadequate Not Applicable Comments Below

121. Determine if manpower at the field office is sufficient to ensure adequate, complete inspections, investigations, and other activities.

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| Adequate | <input checked="" type="checkbox"/> | Inadequate | <input type="checkbox"/> | Not Applicable | <input type="checkbox"/> | Comments Below |
| | | | | | | |

Selected citations with apparent inconsistencies (highlighted) in evaluations

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|---|-----------------|--------|-----|------------|----------------------------|
| <input type="text" value="[REDACTED]"/> | 104(a) Citation | 75.807 | N | Mod | 1 |
| <p>The operator failed to guard the 7,200 volt high voltage cable where men are required to work or travel. At 49 block along 4 Right haulage there is a mandoor to access the intake escapeway from the track. Where men are required to travel the high voltage cable is unguarded, and when measured, was only 67 inches from the mine floor. Also, there is tagged out scoop parked in the crosscut, so any persons doing the repairs would be required to travel under this cable as well.</p> | | | | | |

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District Coal District 3 Field Office Morgantown, WV Mine ID [REDACTED]

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|---------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.1403 | N | Mod | 1 |
| <p>The operator failed to maintain the scoop haul road in the 54 block crosscut, on the 4 Right section, free of extraneous material. There were several track rails laying in the scoop's travelway. The company number 818 scoop was found to be sitting on one of these rails, and inby numerous others. Other scoops may be required to enter this area because the scoop battery charging station is set up in this crosscut.</p> | | | | | |

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|-----------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.333(h) | N | Mod | 1 |
| <p>The operator failed to maintain ventilation controls in order to serve the purpose for which they were intended. The 3 South number 1, 2, 3, and 4 seals were found to be leaking. The 3 South number 1 seal was found to be leaking along the inby rib and also along the top center. The 3 South number 2 seal was found to be leaking above the door on the inby side. The 3 South number 3 seal was found to be leaking at the inby rib. The 3 South number 4 seal was found to be leaking around the inby rib. All 4 seals were found to be out gassing at the time of inspection.</p> | | | | | |

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|------------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 77.1605(k) | N | Low | 1 |
| <p>The operator failed to maintain an effective berm or guard rail on the elevated road way [REDACTED]. The area is approximately 300 feet long and has a ditch in close proximity the entire length of the road way measuring from 18 inches deep on one end to 44 inches deep on the other end and is up to 6 feet wide. This roadway is traveled each shift by large haul trucks, small pick-up trucks, and front end loaders. Failure to provide effective berms and/or to guard against a rollover of vehicles along an elevated road way would allow equipment to travel off the roadway, causing the operators to suffer contusions, lacerations, and/or fractures.</p> | | | | | |

Selected citations with apparent inconsistencies (highlighted) in evaluations

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|---------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.1403 | N | Low | 1 |
| <p>The motor barn track switch is not provided with lights or reflectors or other suitable devices to enable approaching rail equipment operators to determine the direction of switch alignment at a distance sufficient to permit the equipment to be stopped entering the switch. Safeguard [REDACTED] was issued at this mine on [REDACTED] requiring such devices. This is a violation of a mandatory standard.</p> | | | | | |

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons |
|----------|-------------|--------|-----|------------|-------------------|
| | | | | | |

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| | | | | | Affected |
|--|-----------------|-----------|---|-----|----------|
| <input type="text" value=""/> | 104(a) Citation | 75.202(a) | N | Mod | 1 |
| <p>The operator failed to adequately support or otherwise control the top. 2 blocks inby A Shaft, on the South side, the roof has fallen out on the walkway side of the track. The roof fall was measured from the outby corner of the crosscut 10 feet 6 inches along the track, and extended 87 inches back into the crosscut. This is the supply track used by the suppliers to remove cars from and place cars on the hoist.</p> | | | | | |

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|---|-----------------|-----------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.202(a) | N | Low | 1 |
| <p>The operator failed to control the roof at the face of the number 4 seal in the 6 Left Bleeder set of seals in that material has fallen from around a roof bolt exposing an unsupported area of roof along the right side of the seal. The unsupported area measured 7 feet-6 inches by 9 feet-8 inches. The roof of areas where persons work or travel shall be supported or otherwise controlled to protect persons from hazards related to falls of the roof.</p> | | | | | |

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|---|-----------------|--------------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.370(a)(1) | N | Mod | 3 |
| <p>The currently approved mine ventilation plan is not being complied with on the 4 Right Section (<input type="text" value=""/> MMU). When air quantity was checked with a properly calibrated MSHA anemometer (serial number 91920B), a total of 36,418 CFM was detected that was available for the longwall face. The currently approved mine ventilation plan, on page 27 requires a minimum of 42,500 CFM available for the longwall face.</p> | | | | | |

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|---|-----------------|--------------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.370(a)(1) | N | Mod | 3 |
| <p>The currently approved mine ventilation plan is not being complied with on the 4 Right Section (<input type="text" value=""/> MMU). When air velocity was checked with a properly calibrated anemometer (serial number 91920B) at number 15 shield on the longwall face, a total of 478 FPM was detected. The currently approved mine ventilation plan, on page 27 requires a minimum air velocity of 550 FPM.</p> | | | | | |

Selected citations with apparent inconsistencies (highlighted) in evaluations

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|-------------------------------|-----------------|--------------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.370(a)(1) | N | Mod | 1 |

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The currently approved mine ventilation plan not being complied with on the 1 South Mains Section, [REDACTED], for the existing conditions: 1) 17 BD-3 sprays are in the left end ring spray block; right end ring spray block, and the conveyor tunnel spray block, when a minimum of BD-5 sprays should have been in place. 2) 8 BD-3 sprays are in the throat spray block and the cutter boom ductwork spray block, when a minimum of BD-8 sprays should be in place. 3) The conveyor boom spray block is bent up at an approximate angle of 45 degrees and facing in a backward direction. Page 58 of the approved ventilation plan states that they will spray down and ahead.

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|--------------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.362(a)(2) | N | Mod | 1 |

The mine operator failed to assure compliance with the parameters contained in the currently approved mine ventilation plan on the 1 South Mains Section, [REDACTED] Upon examining the continuous miner, company number 137, and finding the conditions cited in citation number [REDACTED] which include 25 sprays of incorrect size in place and one (1) spray block spraying in an improper direction. Due to these conditions and evidence that the machine was used to produce coal on the previous shift, it is determined that an inadequate examination of the continuous miner was conducted.

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|-----------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.202(a) | N | Hi | 1 |

The following conditions existed in the 1 North Left Return one block inby spad station 27073 (68 block): - one bolt broken off above the bolt head - one bolt exposed by 10 inches out of the top - one bolt exposed by 4 1/2 inches out of the top also inby the Number 1 Heading Regulator: - exposed bolt by 12 inches out of the top.

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|--------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.400 | N | Hi | 1 |

The return entries from the 6 Right section regulator to the Broadwater shaft has an accumulation of float coal dust, medium to dark gray in color. These accumulations are on the previously rockdusted surfaces of the mine floor, including crosscuts.

Selected citations with apparent inconsistencies (highlighted) in evaluations

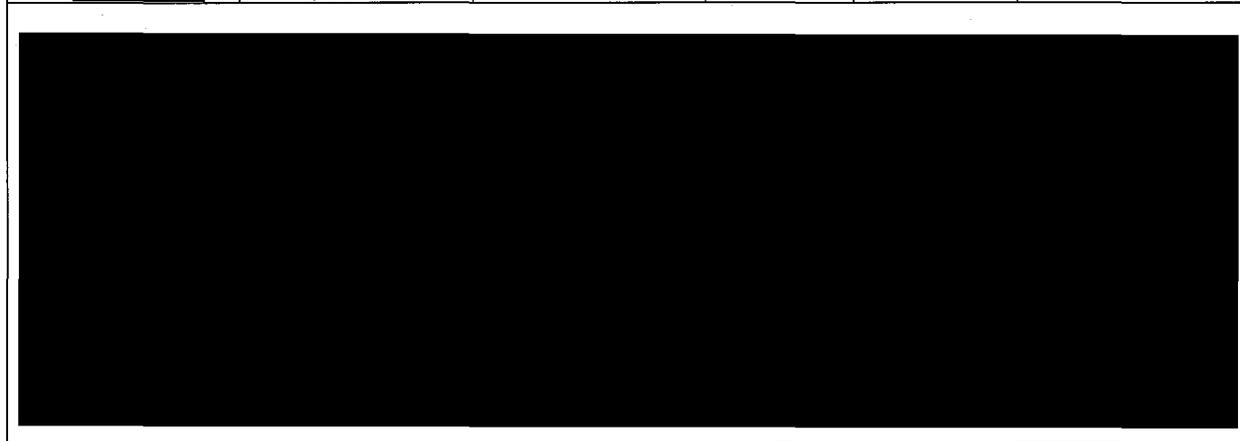
| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|--|-----------------|-----------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.363(a) | N | Hi | 1 |

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The operator failed to correct hazardous conditions in the 1 North Left Return airway. The condition of float coal dust, medium grey in color, has been recorded in the weekly examination book since day shift of [REDACTED] with no corrective action being taken. Also, the condition of missing or broken roof bolts from the #1 heading return regulator to 7 blocks inby, has been recorded in the weekly examination book since day shift on [REDACTED] with no corrective action being taken. These reports have been countersigned by [REDACTED] or an authorized representative acting in his capacity. This citation is issued in conjunction with citation numbers [REDACTED]

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|------------|-----------------|--------|-----|------------|----------------------------|
| [REDACTED] | 104(d)(2) Order | 75.400 | Y | Hi | 1 |



| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|------------|-----------------|--------------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.360(b)(3) | Y | Mod | 1 |

The operator failed to conduct an adequate preshift examination of an area that is a working section. The hazard of accumulations of combustible materials was found at the headgate area and tail drive motor area of the 4 Right Longwall face [REDACTED]. The accumulations of loose coal and coal fines at the headgate extended from number 1 shield to the number 5 shield and measured up to 46 inches in depth. The accumulations of loose coal and coal fines at the tail drive motor area were surrounding the tail drive motors and measured up to 16 inches in depth. Both of these conditions should have been obvious to a prudent examiner and were not reported on the preshift examination on the midnight shift of [REDACTED]

Selected citations with apparent inconsistencies (highlighted) in evaluations

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|------------|-----------------|--------|-----|------------|----------------------------|
| [REDACTED] | 104(a) Citation | 75.400 | N | Mod | 1 |

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The Fletcher twin boom roof bolter, company number 29, located on South Mains, has oil soaked coal and coal fines in the following locations: on the right side boom valve bank measuring 1/4 inch deep; on the left side boom valve bank measuring up to 1 inch deep; in the deck measuring up to 1 1/2 inches deep. There is also a layer of oil soaked coal fines on top of the oil tank.

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|-------------------------------|-----------------|-----------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.202(a) | N | Low | 1 |

The mine operator failed to support the roof along the walkways of the 1 Right bleeder entry in the No. 1 entry between 16 and 17 crosscut. Five roof bolts were either missing or loose from the roof. The roof of areas where persons work or travel shall be supported or otherwise controlled to protect persons from hazards related to falls of the roof.

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|-------------------------------|-----------------|--------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.400 | N | Mod | 1 |

Accumulations of loose coal was allowed to exist in the # 4 roadway where the material measured to be up to 9 inches deep, 21 feet long and 11.5 feet wide.

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|-------------------------------|-----------------|--------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.402 | N | Mod | 1 |

The #.4 to 5 of the cross-cut of the 1 south mains was not rock dusted to within 40 feet of the face. The No. 4 to 5 crosscut is a distance of 49 feet without rock dust. This condition has existed for more than one shift and has not been cleaned.

| Viol No. | Type Action | 30 CFR | S&S | Negligence | Number of Persons Affected |
|-------------------------------|-----------------|--------------|-----|------------|----------------------------|
| <input type="text" value=""/> | 104(a) Citation | 75.220(a)(1) | N | Mod | 1 |

The width of the openings specified in the roof control plan of (16 feet) is exceeded by at 12 inches for more than 5 feet distance though out the 1 south mains section. These areas are from the section dumping point to the faces where the widths were measured to be 17 to 19.5 feet. The mining width of these areas was found to meet the required 16 feet but the ribs has slough which left the entries more than the maximum width. This inspector believes this problem is cause by the following; amount of overburdens, softness of the coal rib, continuous miner having a squire head, speed of advancement, and continue clean up of rib sloughing. This order is modified to allowed the following; make required exams, clean up any spillage and add roof support. The company may also cut overcast provided all roadway used to do so are narrow down to 16 feet wide or additional roof bolts are added along the rib line of that roadway, and move equipment out of the affected area.

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| | |
|--|--|
| Section I-Violation Data | |
| 1. Date <input type="text" value="[REDACTED]"/> | 3. Citation/Order Number <input type="text" value="[REDACTED]"/> |
| 4. Served To <input type="text" value="[REDACTED]"/> | 5. <input type="text" value="[REDACTED]"/> |
| | 7. <input type="text" value="[REDACTED]"/> (Contractor) |

8. Condition of Practice 8a. Written Notice (103g)

The track switch reflector at the 1 South No.1 switch is broken. Switch reflectors enable the track equipment operator to determine the direction of switch alignment, at a distance sufficient to permit the equipment to be stopped entering the switch.

See Continuation Form (MSHA Form 7000-3a)

| | | | |
|--------------|--|-------------------|--|
| 9. Violation | A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/> | B. Section of Act | C. Part/Section of Title 30 CFR <input type="text" value="75.1403"/> |
|--------------|--|-------------------|--|

Section II-Inspector's Evaluation

10. Gravity:

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

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

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

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

12. Type of Action 13. Type of Issuance (check one) Citation Order Safeguard Written Notice

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

15. Area or Equipment

| | | |
|---------------------|--|--|
| 16. Termination Due | A. Date <input type="text" value="Mo Da Yr [REDACTED]"/> | B. Time (24 Hr. Clock) <input type="text" value="[REDACTED]"/> |
|---------------------|--|--|

Section III-Termination Action

17. Action to Terminate

| | | |
|----------------|--|--|
| 18. Terminated | A. Date <input type="text" value="Mo Da Yr [REDACTED]"/> | B. Time (24 Hr. Clock) <input type="text" value="[REDACTED]"/> |
|----------------|--|--|

Section IV-Automated System Data

| | | |
|---|--|---|
| 19. Type of Inspection (activity code) <input type="text" value="E01"/> | 20. Event Number <input type="text" value="[REDACTED]"/> | 21. Primary or Mill <input type="text" value=""/> |
| 22. Signature <input type="text" value="[REDACTED]"/> | 23. AR Number <input type="text" value="[REDACTED]"/> | |

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

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Section I--Violation Data

| | | |
|--|---|---|
| 1. Date Mo Da Yr | 2. Time (24 Hr. Clock) | 3. Citation/ Order Number |
| <input type="text" value="[REDACTED]"/> | <input type="text" value="[REDACTED]"/> | <input type="text" value="[REDACTED]"/> |
| 4. Served To | | (Contractor) |
| <input type="text" value="[REDACTED]"/> | | <input type="text" value="[REDACTED]"/> |
| 8a. Written Notice (103g) <input type="checkbox"/> | | |

Handrails for steps at the No.22 and No.45 block on the 1 South belt are not provided. These steps are used for the examiner to check for methane. The steps are 5 foot high. This hazard has not been recorded in the book for that purpose.

See Continuation Form (MSHA Form 7000-3a)

| | | | | |
|--------------|---|-------------------|---------------------------------|-----------|
| 9. Violation | A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/> | B. Section of Act | C. Part/Section of Title 30 CFR | 75.360(f) |
|--------------|---|-------------------|---------------------------------|-----------|

Section II--Inspector's Evaluation

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

| | | |
|---------------------|---|---|
| 16. Termination Due | A. Date Mo Da Yr | B. Time (24 Hr. Clock) |
| | <input type="text" value="[REDACTED]"/> | <input type="text" value="[REDACTED]"/> |

Section III--Termination Action

| | | |
|-------------------------------|-------------------------------|-------------------------------|
| 17. Action to Terminate | | |
| <input type="text" value=""/> | | |
| 18. Terminated | A. Date Mo Da Yr | B. Time (24 Hr. Clock) |
| | <input type="text" value=""/> | <input type="text" value=""/> |

Section IV--Automated System Data

| | | |
|---|---|-------------------------------|
| 19. Type of Inspection (activity code) | 20. Event Number | 21. Primary or Mill |
| E01 | <input type="text" value="[REDACTED]"/> | <input type="text" value=""/> |
| 22. Signature | 23. AR Number | |
| <input type="text" value="[REDACTED]"/> | <input type="text" value="[REDACTED]"/> | |

MSHA Form 7000-3, Apr 03 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Section I--Violation Data

1. Date 2. Time (24 Hr. Clock) 3. Citation/Order Number

4. Served To (Contractor)

8. Condition or Practice

8a. Written Notice (103g)

In the 1 South Mains section the approved roof control plan is not being followed. The 90 degree, 4 way intersection, at spad No. 27534, No.3 entry, one block outby the last open break, has a diagonal distance of 63 feet, without additional support added. The maximum diagonal distance allowed in the approved roof control plan is 62 feet.

See Continuation Form (MSHA Form 7000-3a)

9. Violation A. Health Safety Other B. Section of Act C. Part/Section of Title 30 CFR

Section II--Inspector's Evaluation

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

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

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

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

12. Type of Action 13. Type of issuance (check one) Citation Order Safeguard Written Notice

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

15. Area or Equipment

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

Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

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

22. Signature 23. AR Number

MSHA Form 7000-3, Apr 08 (rev/isd) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Section I--Violation Data

| | | |
|-----------------------------------|--------------------------------------|--|
| 1. Date Mo Da Yr [REDACTED] | 2. Time (24 Hr. Clock) [REDACTED] | 3. Citation/ Order Number [REDACTED] |
| [REDACTED] | | (Contractor) 8a. Written Notice (103g) <input type="checkbox"/> |

There is black, fine, dry, coal dust deposited on the rock-dusted surfaces, for a distance of 500 feet, inby the airlock door on the 1 South belt.

See Continuation Form (MSHA Form 7000-3a)

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

Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

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

Section III--Termination Action

17. Action to Terminate The area was rock-dusted.

18. Terminated A. Date B. Time (24 Hr. Clock) 1430

Section IV--Automated System Data

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

22. Signature 23. AR Number

MSHA Form 7000-3, Apr 03 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Section I--Violation Data

| | | |
|--|--|--|
| 1. Date Mo Da Yr <input type="text"/> | 2. Time (24 Hr. Clock) <input type="text"/> | 3. Citation/ Order Number <input type="text"/> |
| 4. Served To <input type="text"/> | | 5. Operator <input type="text"/> |
| | | (Contractor) <input type="checkbox"/> |
| 8a. Written Notice (103g) <input type="checkbox"/> | | |

On the 11 Left section MMU loose hanging ribs were observed on the left rib from 27 to 29 block, a distance of 240 feet. This area is located one block outby the last open break. Loose ribs create a hazard to the miners working in this area. The loose ribs when taken down broke up in to unconsolidated pieces.

See Continuation Form (MSHA Form 7000-3a)

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

Section II--Inspector's Evaluation

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

| | | |
|---------------------|---------------------------------------|---|
| 16. Termination Due | A. Date Mo Da Yr <input type="text"/> | B. Time (24 Hr. Clock) <input type="text"/> |
|---------------------|---------------------------------------|---|

Section III--Termination Action

17. Action to Terminate The loose ribs were taken down with a slate bar. Taking down loose ribs was discussed with the foreman.

| | | |
|----------------|---------------------------------------|---|
| 18. Terminated | A. Date Mo Da Yr <input type="text"/> | B. Time (24 Hr. Clock) <input type="text"/> |
|----------------|---------------------------------------|---|

Section IV--Automated System Data

| | | |
|--|---------------------------------------|--|
| 19. Type of Inspection (activity code) E01 | 20. Event Number <input type="text"/> | 21. Primary or Mill <input type="text"/> |
| 22. Signature <input type="text"/> | | 23. AR Number <input type="text"/> |

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District Coal District 3 Field Office Morgantown, WV Mine ID [REDACTED]

Mine Citation/Order

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



Section I--Violation Data

| | | |
|---|---|---|
| 1. Date [REDACTED] | 2. Time (24 Hr. Clock) [REDACTED] | 3. Citation/Order Number [REDACTED] |
| 4. Served To [REDACTED] | | 5. Operator [REDACTED] |
| | | (Contractor) <input type="checkbox"/> |
| 8. Condition or Practice | | 8a. Written Notice (103g) <input type="checkbox"/> |

The 7200VAC transmission cable is not guarded where miners regularly work or travel on the 4 Right Longwall section in that the cable is hung across the 2 Block XC where an airlock door is located and an area extending approximately 4' from the plug on the power center. The operator dangled off the two cited areas until corrected.

See Continuation Form (MSHA Form 7000-3e)

| | | | | |
|--------------|--|-------------------|---------------------------------|--------------|
| 9. Violation | A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/> | B. Section of Act | C. Part/Section of Title 30 CFR | 75.816(a)(1) |
|--------------|--|-------------------|---------------------------------|--------------|

Section II--Inspector's Evaluation

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

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

Section III--Termination Action

17. Action to Terminate The cable is now guarded where miners regularly work or travel.

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

Section IV--Automated System Data

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

MSHA Form 7000-3e (Rev. 10/96) Pursuant to the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District Field Office Mine ID

Mine Citation/Order

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



Section I--Violation Data

| | | |
|-----------------------------------|--------------------------------------|--|
| 1. Date Mo Da Yr [REDACTED] | 2. Time (24 Hr. Clock) [REDACTED] | 3. Citation/ Order Number [REDACTED] |
| 4. Section [REDACTED] | 5. Operator [REDACTED] | (Contractor) <input type="checkbox"/> |

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

Combustible material is being allowed to accumulate around the head drive motor on the face of the 4 Right Longwall section. Coal fines and lump coal is observed measuring approximately 4" high, surrounding the motor. The accumulations are wet due to the location and normal practices of this type mining.

See Continuation Form (MSHA Form 7000-3a)

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

Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

12. Type of Action 104(a) 13. Type of issuance (check one) Citation Order Safeguard Written Notice

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

15. Area or Equipment

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

Section III--Termination Action

17. Action to Terminate The accumulations are now removed.

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

Section IV--Automated System Data

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

22. Signature [REDACTED] 23. AR Number [REDACTED]

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District Field Office Mine ID

Mine Citation/Order

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



Section I--Violation Data

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

8. Condition or Practice

8a. Written Notice (103g)

The permanent stopping located on the 4 Right Longwall section at 1 block separating the belt aircourse and track intake is not being maintained to serve the purpose it was built in that an approximately 2" diameter rock dust hose is observed being left through the rock dust hole box allowing the intake air to course to the belt entry.

See Continuation Form (MSHA Form 7000-3a)

| | | | |
|--------------|--|----------------------|---|
| 9. Violation | A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/> | B. Section of Act | C. Part/Section of Title 30 CFR 75.333(h) |
|--------------|--|----------------------|---|

Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

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

Section III--Termination Action

17. Action to Terminate Rock dust hose is removed, the rock dust hole box lid is shut, and the stopping is now maintained to serve the purpose it was built.

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

Section IV--Automated System Data

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

22. Signature [REDACTED] 23. AR Number [REDACTED]

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small business about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District Coal District 3 Field Office Morgantown, WV Mine ID [REDACTED]

Mine Citation/Order

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



Section I--Violation Data

| | | |
|---------------------------|--------------------------------------|--|
| 1. Date [REDACTED] | 2. Time (24 Hr. Clock) [REDACTED] | 3. Citation/ Order Number [REDACTED] |
| 4. Operator [REDACTED] | | 5. Operator [REDACTED] (Contractor) |

8. Condition or Practice

8a. Written Notice (103g)

The take-up roller (idler) on the 4 Right belt is not being sufficiently guarded in that the guarding that is currently installed there is allowing a gap measuring approximately 4" by 15" where a person could reach behind the guard and become caught between the belt and pulley.

See Continuation Form (MSHA Form 7000-3a)

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

Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

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

Section III--Termination Action

17. Action to Terminate The guard is now being maintained to prevent a person from reaching behind the guard.

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

Section IV--Automated System Data

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

22. Signature [REDACTED] 23. AR Number [REDACTED]

MSHA Form 7000-3, Apr 06 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District Field Office Mine ID

Mine Citation/Order U.S. Department of Labor
 Mine Safety and Health Administration

| | | | |
|--|----------|------------------------|--------------------------|
| Section I--Violation Data | | | |
| 1. Date | Mo Da Yr | 2. Time (24 Hr. Clock) | 3. Citation/Order Number |
| 4. Served To | | | |
| | | (Contractor) | |
| 8a. Written Notice (103g) <input type="checkbox"/> | | | |

The roof located and measured approximately 80" from the face of the #7 seal of the 2 South bank of seals is not being supported or otherwise controlled to protect persons from hazards related to falls of roof. The previously installed strap and 2 bolt pattern installation, the head coal is ate out around the bolts and strap measuring approximately 24" of exposed bolt. The insufficient supported area measures approximately 10' diameter area and at this time of inspection the unsupported roof is smooth and consolidated. This area is not directly in the examiners walkway but if the roof would fall, rock could roll down off the sloughed pile into the supported area where the examiner inspects at the face of the seal. The walkway for the examiner is cribbed, posted, or bolted.

See Continuation Form (MSHA Form 7000-3a)

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

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

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

Section III--Termination Action

17. Action to Terminate

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

| | | |
|--|------------------|---------------------|
| Section IV--Automated System Data | | |
| 19. Type of Inspection (activity code) E01 | 20. Event Number | 21. Primary or Mill |
| | | |
| 22. Signature | | 23. AR Number |
| | | |

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
 Mine Safety and Health Administration
 Office of Accountability

District Field Office Mine ID

Mine Citation/Order U.S. Department of Labor
 Mine Safety and Health Administration

Section I--Violation Data

| | | |
|---|--|--|
| 1. Date <input type="text" value="Mo Da Yr"/> | 2. Time (24 Hr. Clock) <input type="text" value=""/> | 3. Citation/Order Number <input type="text" value=""/> |
| 4. Served To <input type="text" value=""/> | | (Contractor) <input type="checkbox"/> |

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

The control box for the AC Mixer, 480VAC, located at the main sump area off the 27 spur rock dust chute has come loose from the entrance and the insulated individual wires are exposed and not fully protected measuring 1/4" circumference around the entrance to the pump. The operator endangered off the pump area until corrected.

See Continuation Form (MSHA Form 7000-3a)

| | | | |
|--------------|---|-------------------|---|
| 9. Violation | A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/> | B. Section of Act | C. Part/Section of Title 30 CFR 75.517 |
|--------------|---|-------------------|---|

Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

12. Type of Action 13. Type of issuance (check one) Citation Order Safeguard Written Notice

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

15. Area or Equipment

18. Termination Due A. Date B. Time (24 Hr. Clock)

Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

| | | |
|---|--|---|
| 19. Type of Inspection (activity code) <input type="text" value="E01"/> | 20. Event Number <input type="text" value=""/> | 21. Primary or Mill <input type="text" value=""/> |
| 22. Signature <input type="text" value=""/> | | 23. AR Number <input type="text" value=""/> |

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Safety and Health Administration
Office of Accountability

District Field Office Mine ID

Mine Citation/Order

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



Section I--Violation Data

1. Date 2. Time (24 Hr. Clock) 3. Citation/Order Number

(Contractor)

8. Condition of Practice

See Written Notice (103g)

The 24 inch clearance space is obstructed with a rib roll, for a distance of 50 feet, between 25 and 24 block on the 11 Left belt. This creates a trip and fall hazard to miners who travel this area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation A. Health Safety Other B. Section of Act C. Part/Section of Title 30 CFR

Section II--Inspector's Evaluation

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

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

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

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

12. Type of Action 13. Type of Issuance (check one) Citation Order Safeguard Written Notice

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

15. Area or Equipment

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

Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

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

22. Signature 23. AR Number

MSHA Form 7000-3, Apr 03 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District Coal District 3 Field Office Morgantown, WV Mine ID [REDACTED]

Mine Citation/Order

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



Section I--Violation Data

| | | |
|-----------------------------------|--------------------------------------|--|
| 1. Date Mo Da Yr [REDACTED] | 2. Time (24 Hr. Clock) [REDACTED] | 3. Citation/ Order Number [REDACTED] |
| 4. Served To [REDACTED] | | (Contractor) [REDACTED] |

8. Condition or Practice

8a. Written Notice (103g)

Loose hanging ribs need taken down on the tight side of the 11 Left belt between 22 and 25 block, and between 18 and 19 block. Loose hanging ribs create a hazard to miners who work and travel in these areas. The loose ribs when taken down broke in to unconsolidated pieces.

See Continuation Form (MSHA Form 7000-3a)

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

Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

12. Type of Action 104(a) 13. Type of issuance (check one) Citation Order Safeguard Written Notice

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

15. Area or Equipment

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

Section III--Termination Action

17. Action to Terminate The loose ribs were taken down with a slate bar.

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

Section IV--Automated System Data

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

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor
Mine Safety and Health Administration
Office of Accountability

District Field Office Mine ID

Mine Citation/Order

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



Section I-Violation Data

| | | |
|--|--------------------------------------|--|
| 1. Date Mo Da Yr [REDACTED] | 2. Time (24 Hr. Clock) [REDACTED] | 3. Citation/ Order Number [REDACTED] |
| 4. Served To [REDACTED] | | 5. Operator [REDACTED] (Contractor) |
| 8a. Written Notice (103g) <input type="checkbox"/> | | |

On 5-13-09 on the 1 South Section MMU [REDACTED] the midnight shift preshift mine examiner entered No.4 entry roof unsupported, in the preshift record book. The day shift preshift mine examiner did not record any corrected action of this condition in the record book.

See Continuation Form (MSHA Form 7000-3a)

| | | | |
|--------------|--|-------------------|--|
| 9. Violation | A. Health Safety <input type="checkbox"/> Other <input type="checkbox"/> | B. Section of Act | C. Part/Section of Title 30 CFR 75.360(f) |
|--------------|--|-------------------|--|

Section II-Inspector's Evaluation

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

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

Section III-Termination Action

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

Section IV-Automated System Data

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

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