

#4/22  
~~PRESHIFT~~ ~~ONSHIFT~~  
and  
#1  
DAILY REPORT  
STARTED  
2-13-10

Company \_\_\_\_\_

Mine \_\_\_\_\_

SECTION \_\_\_\_\_

LOCATION \_\_\_\_\_

Post Office

County

State

*Fall*

Form 6-1489  
(March 1970)

Budget Bureau No. 42-R1589

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

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FORM# MS-014

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2/2

Shift 3rd

Area or Section HGA2

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
#1	.35% CH <sub>4</sub> needs cleaned & dusted	Reported
#1R	.35% CH <sub>4</sub> Scrap Cut	Reflecting
#2	.40% CH <sub>4</sub> None Observed	
#3	.40% CH <sub>4</sub> None observed	

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-3 140	212	.40% CH <sub>4</sub>			
1-3 430	520	.40% CH <sub>4</sub>			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	220	.40% CH <sub>4</sub>			
Return	525	.40% CH <sub>4</sub>			

Number of Bolts Tested

Number of Bolts Torqued Above Range Below Range

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

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

Ryle Anderson  
Assistant Mine

33238  
Certificate No.

Troy Moore  
Mine Foreman-Mine Manager

3359  
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 12-13 20-- Section or Area Examined HGB 22  
Time of Examination: from 5 a.m. or p.m. to 5:35 a.m. or p.m.  
Was this report phoned to outside? Yes no  
By whom R. Anderson Time 5:35 A.M. P.M.  
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. Entry 4 of 35 20.8	needs cleaned dusted	Reported
2. Entry .4 20.8	none obs	Reported
3. Entry .4 20.8	none obs	Reported
H&I RT	scrap cut	Reflectors
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOCC	14560		

Remarks: I always Power center Intake Phone clear

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.  
Signed By [Signature] 33238 Freshift-Mine Examiner Certificate No.  
Countersigned [Signature] 33359 Mine Manager - Mine Foreman  
Assistant Foreman  
[Signature] Assistant Foreman  
[Signature] Superintendent or Assistant  
1122-A Certificate No.  
2604

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 12-13-10 Shift Day Area or Section H6 #22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Includes entries for #1 Entry and #1 R CC.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Lists methane readings at various times and locations.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Lists methane readings in return aircourses.

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 2 Sect. 3 MAUP Plan. Pg. 4 Sect. 11 RCP at 646 am.

Assistant Mine, Certificate No. 1122-A, Mine Foreman-Mine Manager, Certificate No. 3357, Superintendent or Assistant



Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-13 2010 Section or Area Examined HG-22  
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.  
 Was this report phoned to outside: Yes  no   
 By whom BRANDON BOWLING Time 2:40 A.M. P.M.  
 Report received by Rick Hutchens  
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1R 20.8<sup>o2</sup> .3%CH<sub>4</sub></u>	<u>PIB</u>	<u>Tagged &amp; Reported</u>
2. <u>1 .3%</u>	<u>N/O</u>	<u>Reported</u>
3. <u>2 .10%</u>	<u>N/O</u>	<u>Reported</u>
4. <u>2R .10%</u>	<u>Scrap Curt</u>	<u>Tagged &amp; Reported</u>
5. <u>3 .2%CH<sub>4</sub></u>	<u>PIB</u>	<u>Tagged &amp; Reported</u>
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>15,337</u>	_____	_____
<u>20.8<sup>o2</sup></u>	_____	_____	_____
<u>0%<sup>CO</sup></u>	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: powercenter, R-ways, Chargers, HAULAGE Clear at Time of Exam  
Intake phone not working  
Air Chamber OK

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

Signed By Brandon Bowling 1122.A Rick Hutchens 37569  
 Preshift Mine Examiner Certificate No. Assistant Foreman Certificate No.  
 Countersigned Tony Moore 33559  
 Mine Manager—Mine Foreman Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-13-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for P/B and Scrap cut.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for 1-3 locations with 0% CH4.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for Return locations with 0% CH4.

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #1 3:55pm RCP

Signatures and titles: Richard Hutchins (Assistant Mine), Mine Foreman-Mine Manager, Certificate No., Superintendent of Accidents

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-13 Section or Area Examined H G 22  
 Time of Examination: from 10:15 a.m. or (p.m.) to 10:15 a.m. or (p.m.)  
 Was this report phoned to outside: Yes no  
 By whom Kirk Hutchens Time 11:20 A.M. P.M.  
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1	NOT R/LH	Reported
2.			
3.	#2	N/A	—
4.	2x2	N/A	—
5.	#3	N/A	—
6.			
7.			
8.	1-3	Soft Ribs	Reported
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
Job	14550		

Remarks: O<sub>2</sub>-44 power center & chargers Fresh air base - OK  
O<sub>2</sub>-20.8 intake phone - NOT working  
artaba

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

Signed By Kirk Hutchens 37569  
 Preshift-Mine Examiner Certificate No.  
 Countersigned T. Williams 33357  
 Mine Manager—Mine Foreman Certificate No.  
Kyle Anderson 33238  
 Assistant Foreman Certificate No.  
 Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-13 Shift 3rd Area or Section #C 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1	Not bolted	
2.		
3. #2	N/O	
4. 2R	N/O	
5. #3	N/O	
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	130	206	11.		
2.			12.		
3. 1-3	430	506	13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	212	140 CH <sub>4</sub>	6.		
2.			7.		
3. Return	511	140 CH <sub>4</sub>	8.		
4.			9.		
5.			10.		

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

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

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

Kyle Anderson 33238 Assistant Mine Certificate No.  
T. Moore 33389 Mine Foreman-Mine Manager Certificate No.  
 \_\_\_\_\_ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-14 2010 Section or Area Examined Headgate # 22
Time of Examination: from 430 a.m. or p.m. to 505 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson
Report received by Brash Boy (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains entry for LBB OCH4L with CFM 14, 210.

Remarks: Power Center, Chargers, Outby Shelter, Intake Phone - Not working at time, Travelways - OK at time of exam, OCH4L, 20.802, OPPM c/o

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

Signed By Kyle Anderson, Preshift-Mine Examiner, Certificate No. 33238
Countersigned T. Moore, Mine Manager - Mine Foreman, Certificate No. 33359
Assistant Foreman Brash Boy, Certificate No. 1122-A
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-14-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .2 CHV! 20.802	No + Bolted	Bolted + Reflectors
2. #2 Entry .25 CHV!	None Observed	Reported
3. #2R CC .25 CHV!	None Observed	Reported
4. #3 Entry .25 CHV! 20.802	None Observed	Reported
5. #1R CC	loose bolts - scaled top around bolts	Spotted 4 Bolts

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	7-730am	.2 CHV! 20.802	11.		
2. 1-3	9-930am	.25 CHV! 20.802	12.		
3. 1-3	11-1130am	.2 CHV! 20.802	13.		
4. 1-3	1-150pm	.25 CHV! 20.802	14.		
5. 1-3			15.		
6. 1-3			16.		
7. 1-3			17.		
8. 1-3			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	7:11am	.05 CHV! 20.802	6.		
2. Return	11:09am	.05 CHV! 20.802	7.		
3. Return			8.		
4.			9.		
5.			10.		

Number of Bolts Tested 12  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 2 sect. 3 MMS Plan

Pg 5 self 26 RCP at 6:45am.  
Josh King 1122-A T. Moore  
Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. 33354. Superintendent or Assistant



Use Indelible Pencil or Ink

# PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-14 Section or Area Examined HG-22  
 Time of Examination: from 1:00 a.m. or p.m. to 1:50 a.m. or p.m.  
 Was this report phoned to outside: Yes  No  Time 2:35 P.M.  
 By whom Brandon Bowling  
 Report received by Rick Hutchens (Signed)

### Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8°	P/B	Tagged & Reported
2.	↓	N/O	Reported
3.	2R	Scrap Cut	Tagged & Reported
4.	3	N/O	Reported
5.			
6.			
7.			
8.			
9.			
10.			

### Air Measurements

Location	CFM	Location	CFM
L0B	14770		
20.8°			
0%CO			

Remarks: powercenter, R-ways, Haulage Clear at Time of Exam  
Soft Flaking Ribs reported 1-3 Entries - Rib bolting - BB  
INTAKE phone NOT WORKING  
Charger OK  
Air Chamber OK

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

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

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-14-10 Shift EVE Area or Section H6-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1 20.8° 0.02% CH<sub>4</sub></u>	<u>P/B</u>	<u>Corrected</u>
2.	<u>2R 20.8° 0.02% CH<sub>4</sub></u>	<u>Scrap Cut</u>	<u>Corrected</u>
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>4:01-4:25</u>	<u>0 % CH<sub>4</sub></u>	11.			
2.	<u>1-3</u>	<u>6:00-6:30</u>	<u>0 %</u>	12.			
3.	<u>1-3</u>	<u>8:00-8:30</u>	<u>0 %</u>	13.			
4.	<u>1-3</u>	<u>10:30-11:00</u>	<u>0 % CH<sub>4</sub></u>	14.			
5.				15.			
6.	<u>20.8°</u>			16.			
7.	<u>0.02% CH<sub>4</sub></u>			17.			
8.	<u>0% C°</u>			18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

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

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #13 3:55pm RCP  
Section Safe & Clean at Time of Exam  
Rick Hutchins 37569 Assistant Mine Certificate No. T. Mann Mine Foreman-Mine Manager Certificate No. 33357 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 9-14 10 Section or Area Examined H6 22
Time of Examination: from 10:00 a.m. or p.m. to 11:00 a.m. or p.m.
Was this report phoned to outside: Yes
By whom Rich Hutchens Time A.M. 11:21 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for 'Pob' with CFM 14160.

Remarks: CH4 power center, chargers fresh air base
208 intake phone not working

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

Signed By Rich Hutchens 37564 Preshift-Mine Examiner Certificate No.
Countersigned T. Man Mine Manager-Mine Foreman Certificate No. 33238
Assistant Foreman Kyle Anderson
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-14 Shift 3rd Area or Section HG22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1	N/O	
2.		
3. #2	N/O	
4. 2R	Part bolted	Replenish
5. #3	N/O	
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	110	136 26 CH <sub>4</sub>	11.		
2.			12.		
3. 1-3 501	536	26 CH <sub>4</sub>	13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	140	1.25% CH <sub>4</sub>	6.		
2.			7.		
3. Return	541	1.25% CH <sub>4</sub>	8.		
4.			9.		
5.			10.		

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

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

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

Kyle Anderson  
Assistant Mine

38238  
Certificate No.

T. M. ...  
Mine Foreman-Mine Manager

33357  
Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-15 2010 Section or Area Examined Headgate #22
Time of Examination: from 5:00 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson Time 5:33 A.M. P.M.
Report received by Brad Bong (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains entry for LOB with CFM 14,110.

Remarks: Power Center, chargers, Outby chamber, Travelways, OCHyl. 20.802 OPPM c/o, Intake Phone Not working at time of exam.

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

Signed By Kyle Anderson 33238 Brad Bong 1122-A
Countersigned T. Moore 33359
Titles: Preshift-Mine Examiner, Mine Manager-Mine Foreman, Assistant Foreman, Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-15-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#2R CC .05 CHV! 20.802	Part Bolted	Bolted + Reflectors
2.			
3.	#2 Int .05 CHV! 20.802	loose Rib-Brow	Spotted 2 Rib Bolts
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	7-730AM	35 CHV! 20.802	11.			
2.				12.			
3.	1-3	9-430AM	4 CHV! 20.802	13.			
4.				14.			
5.	1-3	11-1130AM	4 CHV! 20.802	15.			
6.				16.			
7.	1-3	1-200PM	#1-4 CHV! 35 CHV! 20.802	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 9  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 RCP Sect 12 Pg. 2

sect 5 MMU Plan 644 Am.  
Brady Berg 1122-A T. Moore 33354  
Assistant Mine Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant



Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-15 2010 Section or Area Examined HG-22  
Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.  
Was this report phoned to outside: Yes  No   
By whom Brandon Bowling Time 2:40 P.M.  
Report received by Rick Hutchins (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8 <sup>02</sup> .4 %CH <sub>4</sub>	Scrap	Tagged Reported
2.	20.8 <sup>02</sup> .3 %CH <sub>4</sub>	P/B	Tagged + Reported
3.	20.8 <sup>02</sup> .2 %CH <sub>4</sub>	N/O	Reported
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	13,365		
20.8 <sup>02</sup>			
0% CH <sub>4</sub>			
0% C <sup>0</sup>			

Remarks: powercenter, Chargers, R-ways, Haulage Clear at Time of EXAM  
Flaking Brows - Ribs 1-3 Entries  
INTAKE phone NOT WORKING  
AIR Chamber OK

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

Signed By *Barry* Preshift-Mine Examiner Certificate No. 1122-A  
Countersigned *T. Mans* Mine Manager - Mine Foreman Certificate No. 37569  
Assistant Foreman *Rick Hutchins* Assistant Foreman Certificate No. 33354  
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-15-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	20.8 <sup>02</sup> .2 %CH <sub>4</sub>	Scrap	Corrected
2.	20.8 <sup>02</sup> .2 %CH <sub>4</sub>	P/B	Corrected
3.	20.8 <sup>02</sup> .2 %CH <sub>4</sub>	N/O	Reported
4.			
5.			
6.	1-3	Soft Rules	spot Bolted, set Jacks
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-3	4:00-4:18	0 %CH <sub>4</sub>			
1-3	6:00-6:19	0 %			
1-3	8:00-8:30	0 %			
1-3	10:00-10:30	0 %CH <sub>4</sub>			
20.8 <sup>02</sup>					
0%CH <sub>4</sub>					
0%CO					

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	3:58pm	0 %CH <sub>4</sub>			
Return	7:58pm	0 %CH <sub>4</sub>			

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4#3 3:55pm RCP  
Section Safe + Clear at time of EXAM

Assistant Mine \_\_\_\_\_ Certificate No. \_\_\_\_\_  
T. [Signature] Mine Foreman-Mine Manager Certificate No. 35359  
Superintendent of Mines \_\_\_\_\_

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-13 2010 Section or Area Examined AG 22
Time of Examination: from 10:15 a.m. or p.m. to 10:50 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Hutchens Time A.M. 11:19 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains entry for 'pob' with CFM 17,500.

Remarks: O2 chy power cables, chargers fresh air base 208 make phone Clean at time of exam

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

Signed By Rick Hutchens 37569 Preshift-Mine Examiner Certificate No.

Countersigned T. Moore Mine Manager-Mine Foreman

Kyle Anderson Assistant Foreman

Certificate No. 33228

Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-15 Shift 3rd Area or Section H 6 22

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3 120	150	0.2% CH <sub>4</sub>	11.		
2.			12.		
3. 1-3 430	526	0.2% CH <sub>4</sub>	13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	153	0% CH <sub>4</sub>	6.		
2.			7.		
3. Return	530	0% CH <sub>4</sub>	8.		
4.			9.		
5.			10.		

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

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

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

Ryle Anderson 33238 Assistant Mine Certificate No.  
T. Moore Mine Foreman-Mine Manager  
33359 Superintendent or Assistant Certificate No.

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-16-10 20. Section or Area Examined H622  
Time of Examination: from 4:30 or p.m. to 5:26 or p.m.  
Was this report phoned to outside: Yes no  
By whom Kyle Anderson Time 5:30 A.M. P.M.  
Report received by Dee Jan (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHY 25</u>	<u>no 063 20.8</u>	<u>me 0</u>
2. <u>INT 20</u>	<u>no + 30 steel 20.8</u>	<u>reflects 0</u>
3. <u>2nd 0</u>	<u>Scrap cut 20.8</u>	<u>reflects 0</u>
4. <u>3 0</u>	<u>me 063 20.8</u>	<u>me 0</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location

CFM

Location

CFM

WB

16.840

Remarks: 0.25 CHY 20.802 000 detected (measures)  
2 Huleys ok at time of ECR P. 6 hrs  
Chm ok

sketches  
enter to plane 7 OK

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

Signed By Kyle Anderson Certificate No. 33258  
Preshift-Mine Examiner  
Dee Jan Assistant Foreman Certificate No. 3022  
Countersigned T. Moore Mine Manager—Mine Foreman Certificate No. 33359

Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-16-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>new dgs</u>	<u>new</u>
2. <u>1st</u>	<u>not bolted</u>	<u>Bolted</u>
3. <u>2nd</u>	<u>scraped</u>	<u>Scraped &amp; Bolted</u>
4. <u>3</u>	<u>new dgs.</u>	<u>new</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 11  
Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed with 60A  
rep #30 at 6:40 AM Dist Control Plan #10, 11

[Signature]  
Assistant Mine

3625  
Certificate No.

[Signature]  
Mine Foreman-Mine Manager

3309  
Certificate No.

Inspector or Assistant



Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-16-10 Section or Area Examined Headgate # 22
Time of Examination: from 1:00 a.m. or p.m. to ... a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Deano Jones Time A.M. 2:35 P.M.
Report received by Brush (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for LOB OCHYL 20.80 OPPM C/O with CFM 15,680.

Remarks: Power Center, Chargers, Tracelways, Dobby Chamber, Intake Phone, OCHYL 20.80 OPPM C/O. OK at time of exam.

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

Signed By [Signature] Certificate No. 3852 Assistant Foreman [Signature] Certificate No. 1122-A
Countersigned T. [Signature] Mine Manager - Mine Foreman Certificate No. 33359
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-16-10 Shift Day Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .10CHV! 20.802	Not Bolted	Bolted + Reflectors
2. #1R CC .05CHV! 20.802	Part Bolted	Bolted + Reflectors
3. #3 Entry .15CHV! 20.802	Scrap Cut	Bolted + Reflectors
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430pm	.15CHV! 20.802	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. 1-3	6-630pm	.10CHV! 20.802	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. 1-3	8-830pm	.10CHV! 20.802	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. 1-3	10-1050am	.15CHV! 20.802	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:15pm	0CHV! 20.802	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. Return	8:13pm	.05CHV! 20.802	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 11  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 3 MMW sect. 21  
Pg. 4 Sect. 6 RCP at 3:42pm.

Bank Bay Assistant Mine 1102-A Certificate No. T. Moore Mine Foreman-Mine Manager 33859 Certificate No. \_\_\_\_\_ Superintendent or Assistant

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-16 2010 Section or Area Examined HG 22  
 Time of Examination: from 1000 a.m. or p.m. to 1050 a.m. or p.m.  
 Was this report phoned to outside: Yes  no   
 By whom Brandon Time 1120 A.M. P.M.  
 Report received by Ryle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 D.10	Scrap cut	Reflected
2.			
3.	#2 .15	None Observed	Reported
4.	2R .15		
5.	#3 .15	None Observed	Reported
6.			
7.			
8.			
9.			
10.			

Location		Air Measurements	Location	CFM
	Job	15150		

Remarks: 10 CH4 power centers & chargers fresh air base intake phone  
20.8 Clear at time of exam

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

Signed By Brandon Preshift-Mine Examiner Certificate No. 1122-A  
 Countersigned Ryle Anderson Mine Manager—Mine Foreman Certificate No. 33389  
Ryle Anderson Assistant Foreman Certificate No. 33238  
 Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-16 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 1020th	scrap	Replaster
2.			
3.	#2 0.152th	N/O	
4.	2R 0.152th		
5.	#3 0.152th	N/O	
6.			
7.			
8.			

Examinations for Methane in Working Places

1.	Location	Time	Methane Content	11.	Location	Time	Methane Content
1.	1-3 132	199	0.152th	11.			
2.				12.			
3.	1-3 426	521	0.052th	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

1.	Location	Time	Methane Content	6.	Location	Time	Methane Content
1.	Return	204	0.152th	6.			
2.				7.			
3.	Return	525	0.052th	8.			
4.				9.			
5.				10.			

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

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

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

Kyle Anderson  
Assistant Mine

33038  
Certificate No.

T. Moore  
Mine Foreman-Mine Manager

33257  
Certificate No.

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-17-10 2010 Section or Area Examined H622  
Time of Examination: from 4:26 a.m. or p.m. to 5:25 a.m. or p.m.  
Was this report phoned to outside: Yes  no   
By whom Kyle Anderson Time 5:35 A.M. P.M.  
Report received by Dean Jahn (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHY/2</u>	<u>part of 131 feet (2005) 20.8</u>	<u>reflector</u>
2. <u>2</u>	<u>new 06)</u>	<u>new</u>
3. <u>2N</u>	<u>scrap cut</u>	<u>reflector</u>
4. <u>3</u>	<u>new 06)</u>	<u>new</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>Low</u>	<u>16,300</u>		

Remarks: 0. or city 20.802 00 detailed tunnels  
7 tunnels OK, at time of EFM P.C. cup  
churns OK. (Breiter Dusting Section)  
shelter  
interke pne > OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.  
Signed By Kyle Anderson 33238 Dean Jahn 3602r  
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.  
Countersigned T. Moore 3339  
Mine Manager—Mine Foreman  
Assistant Foreman  
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-17-0 Shift ney Area or Section 11622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>Part Bolting</u>	<u>Bolting</u>
2. <u>2</u>	<u>near OGS</u>	<u>ney</u>
3. <u>2nd</u>	<u>Scrap cut</u>	<u>Cleaned up? Bolting</u>
4. <u>3</u>	<u>near OGS</u>	<u>ney</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

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

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

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

Discussed next 50 +  
Rep #29 At 6:34 AM. Dust control plan 13.14.

[Signature]  
Assistant Mine

36528  
Certificate No.

[Signature]  
Mine Foreman-Mine Manager

33359  
Certificate No.

Superintendent or Assistant



Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-17-10 Section or Area Examined Headgate #22
Time of Examination: from 12:00 a.m. or p.m. to 2:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Dean Jones Time 2:35 P.M.
Report received by Bruce Bong (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains measurement for LOB at 15,800 CFM.

Remarks: Power Center, Travelways, Chargers, Outbox Shelter, Intake Shelter. All ok at time of exam. OCH4 20.80% O2 20.80% O3 ppm c/o

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

Signed By [Signature] 30525 Certificate No. Assistant Foreman 1122-A Certificate No.
Countersigned T. Moore Mine Manager - Mine Foreman 33253 Assistant Foreman
Superintendent or Assistant

Use Indefinible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-17-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .10CH <sub>4</sub> 20.802	Part Bolted	Bolted + Reflectors
2. #2R CC .10CH <sub>4</sub> 20.802	Scrap cut	Bolted + Reflectors
3. #3 Entry .10CH <sub>4</sub> 20.802	Needs Cleaned + Bolted	Cleaned + Bolted
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-4:30pm	.10CH <sub>4</sub> 20.802	11. _____	_____	_____
2. 1-3	6-6:30pm	.10CH <sub>4</sub> 20.802	12. _____	_____	_____
3. 1-3	8-8:30pm	.10CH <sub>4</sub> 20.802	13. _____	_____	_____
4. 1-3	10-10:55pm	.10CH <sub>4</sub> 20.802	14. _____	_____	_____
5. _____	_____	_____	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. _____	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:14pm	.05CH <sub>4</sub> 20.802	6. _____	_____	_____
2. Return	8:11pm	.0CH <sub>4</sub> 20.802	7. _____	_____	_____
3. _____	_____	_____	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 8  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 3 MMV Plan Section 13  
Pg. 4 Sect. 7 RUP at 3:41 PM.

Brinkley Assistant Mine 1122A Certificate No. T. [Signature] Mine Foreman-Mine Manager 33359 Certificate No. [Signature] Superintendent or Assistant

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-17-10 Section or Area Examined HG 22  
Time of Examination: from 1000 a.m. or p.m. to 1055 a.m. or p.m.  
Was this report phoned to outside: Yes  no   
By whom Bryan Time 1116 P.M.  
Report received by Kyle Anderson  
(Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 .10	Part balled	Reflectors
2.			
3.	#2 .10	Scrap	Reflectors
4.			
5.	#3 .05	None observed	
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
POB	15140		

Remarks: 10 cty power center & chargers fresh air base intake phone  
20-8 Clear at time of exam

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

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

Use Indelible  
Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be  
signed when made

Date 2-17 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 10	Part bolted	Refastened
2.			
3.	#2 10	Scrap	Refastened
4.			
5.	#3 05	N/O	
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3 149	216	.10	11.			
2.				12.			
3.	1-3 436	511	.10	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	221	.10	6.			
2.				7.			
3.	Return	514	.10	8.			
4.				9.			
5.				10.			

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

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

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

Kyle Anderson  
Assistant Mine

33238  
Certificate No.

T. Moore  
Mine Foreman-Mine Manager

33557  
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-18-10 20 Section or Area Examined H022  
Time of Examination: from 4:30 a.m. or p.m. to 5:10 a.m. or p.m.  
Was this report phoned to outside: Yes no  
By whom [Signature] Time 5:32 A.M. P.M.  
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. City 10	no safety 20.8	reflect 0
2. 08	new 06 20.8	new 0
3. 08	new 06 20.8	new 0
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	17,250		

Remarks: 0 City 20.802 .000 detected trucks  
2 trucks OK at time of Exam P.C.  
and Champ OK

Shelter  
Intake phase OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.  
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238  
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 36028  
Assistant Foreman  
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-18-70 Shift day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>not Bolted</u>	<u>Bolted</u>
2. <u>2</u>	<u>new CGS</u>	<u>mp</u>
3. <u>3</u>	<u>new CGS</u>	<u>mp</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

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

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

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

discussed page 6 of  
Rep # 3891 6:32 AM DYS7 control room 10/1/6  
[Signature] Assistant Mine  
3025 Certificate No.  
[Signature] Mine Foreman-Mine Manager  
3057 Certificate No.

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-18 Section or Area Examined Headgate #22
Time of Examination: from 12:00 a.m. to 1:30 a.m.
Was this report phoned to outside: Yes no
By whom Deano Jones Time A.M. 2:31 P.M.
Report received by Branch Bong

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

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

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

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report. Signed By [Signature] Certificate No. 35225 Assistant Foreman Branch Bong Certificate No. 1122-A Countersigned T. Mune Mine Manager--Mine Foreman Assistant Foreman Superintendent or Assistant



Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-18-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. # 1 Entry, 15CH <sub>4</sub> 20.80%	Needs Cleaned + Dusted	Cleaned + Dusted
2. # 1R CC, 10CH <sub>4</sub> 20.80%	Part Bolted	Bolted + Reflectors
3. # 2 Entry, 10CH <sub>4</sub> 20.80%	Part Bolted	Bolted + Reflectors
4. # 3 Entry, 15CH <sub>4</sub> 20.80%	Scrap Cut	Bolted + Reflectors
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430pm	.10CH <sub>4</sub> 20.80%	11.		
2.			12.		
3. 1-3	6-630pm	.10CH <sub>4</sub> 20.80%	13.		
4.			14.		
5. 1-3	8-830pm	.10CH <sub>4</sub> 20.80%	15.		
6.			16.		
7. 1-3	10-1100pm	.15CH <sub>4</sub> 20.80%	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4-12pm	.05CH <sub>4</sub> 20.80%	6.		
2.			7.		
3. Return	8-15pm	.05CH <sub>4</sub> 20.80%	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 7  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

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

Pg. 2 section 10 MMC plan at 340pm.  
Pg. 3 sect. 0 RCP

Bob May  
Assistant Mine

1122-A  
Certificate No.

J. M. ...  
Mine Foreman - Mine Manager

338  
Certificate No.

Superintendent of Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-18 10 Section or Area Examined HC 22  
Time of Examination: from 1000 a.m. or p.m. to 1100 a.m. or p.m.  
Was this report phoned to outside: Yes no  
By whom Brandt Time A.M. 11:15 P.M.  
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
#1 .15	Needs cleaned	Reported
2 Right in by corner	needs bolted	Damaged off
#1 Right .15	Scrap Cut	Reflective lining
2 .01	None Observed	
#3 .01	Part Bolted	Reflective lining
6		
7		
8		
9		
10		

Air Measurements

Location	CFM	Location	CFM
	15226		

Remarks: 15% CH4 power center charges intake phone and Fresh air base Close at time of exam 20.8

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

Signed By Brandt Berg 11227 Preshift-Mine Examiner Certificate No. 33359  
Countersigned T. P. Phares Mine Manager - Mine Foreman  
Assistant Foreman Kyle Anderson Assistant Foreman Certificate No. 33238  
Superintendent or Assistant

Date 2-18 Shift 3rd Area or Section HG22

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for items 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for items 1, 2, 3, 4, 5, 6, 7, 8, 9, 10.

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

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

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

Kyle Anderson Assistant Mine

33238 Certificate No.

T. Moore Mine Foreman-Mine Manager

33359 Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-19-10 20. Section or Area Examined H622
Time of Examination: from 4:30 a.m. or p.m. to 5:12 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:40 A.M. P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 4 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1, 2, 3, 4 with details on O2 levels and corrective actions like 'reflected'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for location C03 with CFM value 12.500.

Remarks: OCHP 20.802 O2 detected in lines?
Wheleys OK at time of ETR pic and clip OK
Shelke > OK
Interke phone >

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

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned [Signature] Mine Manager-Mine Foreman Certificate No. 33359
Assistant Foreman [Signature] Certificate No. 36526
Superintendent or Assistant [Signature]

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-19-10 Shift Day Area or Section 17622

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1</u>	<u>me 065</u>	<u>me</u>
2.	<u>1st</u>	<u>Scrap</u>	<u>reflects</u>
3.	<u>3</u>	<u>me 065</u>	<u>me</u>
4.		<u>part 501</u>	<u>reflects</u>
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1st</u>			6.			
2.				7.			
3.	<u>1st</u>			8.			
4.				9.			
5.				10.			

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

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

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

[Signature]  
Assistant Mine

39525  
Certificate No.

[Signature]  
Mine Foreman-Mine Manager

33359  
Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-19 2010 Section or Area Examined HG-22  
Time of Examination: from 12:30 a.m. or p.m. to 2:00 a.m. or p.m.  
Was this report phoned to outside: Yes / no  
By whom DEAN JONES Time A.M. 2:30 P.M.  
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8° 135% CH4	N/Clean	Reported
2.	IR 135%	Scrap	Tagged & Reported
3.	2 25%	N/O	Reported
4.	3 V 135% CH4	P/B	Tagged & Reported
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	12,600		
20.8°			

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

Intake phone OK  
Air Chambers OK

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

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

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-19-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	20.8 <sup>02</sup>	1 % CH <sub>4</sub> N/Clean	Report
2.	1R ↓	1 % CH <sub>4</sub> Scrap	Report
3.	3 ↓	1 % CH <sub>4</sub> P/B	Report
4.			
5.			
6.	NO PRODUCTION		
7.	Section Idle		
8.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	10:45 pm	0 % CH <sub>4</sub>	6.			
2.	Return		0 % CH <sub>4</sub>	7.			
3.				8.			
4.				9.			
5.				10.			

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 5 #29 3:55pm REP

Rich Hutchins  
Assistant Mine

37569  
Certificate No.

T. Mann  
Mine Foreman-Mine Manager

33359  
Certificate No.

Superintendent or Assistant



Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-19 2010 Section or Area Examined HG 20

Time of Examination: from 10:45 a.m. or p.m. to 10:45 a.m. or p.m.

Was this report phoned to outside: Yes  no

By whom \_\_\_\_\_ Time 11:07 A.M. P.M.

Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	CH <sub>4</sub>	Violation or Hazardous Condition	Action Taken
1. #1	.1%	needs cleaned	Reported
2. IR	.1%	Scrap	Reported
3. #2	.1%	None observed	Reported
4.			
5. #3	.2%	Part Belted	Reported
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>Job 1360 CFR</u>			

Remarks: CH<sub>4</sub> powercenter & chargers intake phone fresh air base

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

Signed By Kirk Hutchins 37569 Preshift-Mine Examiner Certificate No. 33557

Countersigned T. Moore Mine Manager—Mine Foreman

Kyle Anderson Assistant Foreman Certificate No. 33238

Assistant Foreman

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-19 Shift 3rd Area or Section H322

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1	needs cleaned	Reported
2.	IR	Scrap	Reflected
3.	#2	N/O	
4.			
5.	#3	Part bolted	Reflected
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	150	0.15 10% dth	11.			
2.				12.			
3.	1-3	501	0.36 0% dth	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	220	0.5 0% dth	6.			
2.				7.			
3.	Return	540	0% dth	8.			
4.				9.			
5.				10.			

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

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

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

Lyle Anderson  
Assistant Mine

33238  
Certificate No.

T. Moore  
Mine Foreman-Mine Manager

33359  
Certificate No.

Superintendent or Assistant

Date of Examination 2-20-13 20. Section or Area Examined H622  
 Time of Examination: from 5:40 a.m. or p.m. to 5:50 p.m.  
 Was this report phoned to outside: Yes no  
 By whom Kyle Anderson Time 5:36 A.M. P.M.  
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CH4</u>	<u>Needs dust 20.8</u>	<u>rep</u>
2. <u>INT</u>	<u>Scrap metal 20.8</u>	<u>reflect</u>
3. <u>2</u>	<u>new UG 20.8</u>	<u>rep</u>
4. <u>3</u>	<u>part bolted 20.8</u>	<u>reflector</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>15,010</u>		

Remarks: 0.05 CH4 20.802 0.00 detected  
trucks? (beliefs) at time of  
etc. p.c. and chm ck

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

Signed By Kyle Anderson 33238 [Signature] 38028  
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.  
 Countersigned T. Moore 33259  
 Mine Manager—Mine Foreman  
 Assistant Foreman  
 Superintendent or Assistant

Use Indelible  
Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be  
signed when made

Date 2-20-73 Shift Ny Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>needs deck</u>	
2. <u>inf</u>	<u>scrap up</u>	
3. <u>2</u>	<u>we O.G.</u>	
4. <u>3</u>	<u>part Bolts</u>	
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. _____	_____	_____	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. <u>scite</u>	<u>Idle</u>	<u>no read</u>	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. _____	_____	_____	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. _____	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

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

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

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

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

Kyle Anderson 33238  
Assistant Mine Certificate No.

T. M. ...  
Mine Foreman-Mine Manager

3307  
Certificate No.

SUPERINTENDENT OF AIRSHANT

... 5602

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-20 20 10 Section or Area Examined HG-22  
Time of Examination: from 12:30 a.m. or p.m. to 1:30 a.m. or p.m.  
Was this report phoned to outside: Yes  no   
By whom Dean Jones Time 2:30 A.M. P.M.  
Report received by Rick Hutchens  
(Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Location	CFM	Location	CFM
LOB	12,146		
20.8			
0%CH <sub>4</sub>			
0%CO			

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

Intake phone not working  
Air Chamber Clear

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

Signed By Dean Jones Preshift-Mine Examiner Certificate No. 3335  
T. Moore Mine Manager—Mine Foreman  
Rick Hutchens Assistant Foreman Certificate No. 37569  
 Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND NON-SHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-20-10

Shift Eve

Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. 1	%CH <sub>4</sub> N/C	
2. IR	%   Scrap Cut	
3. 3	%CH <sub>4</sub> P/B	
4.		
5.		
6.		
7.		
8.		

Section Idle

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3		%CH <sub>4</sub>			
2. 1-3		%			
3. 1-3		%			
4. 1-3		%CH <sub>4</sub>			
5.					
6.					
7.					
8.					
9.					
10.					

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return		%CH <sub>4</sub>			
2. Return		%CH <sub>4</sub>			
3.					
4.					
5.					

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #13 3:55pm RCP

Went over Roof + Ribs with Crew

Rick Hutchins 37569  
Assistant Mine Certificate No.

T. Moore  
Mine Foreman-Mine Manager

3337  
Certificate No.

Superintendent or Assistant

Use Indelible  
Pencil or Ink

### PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-20 2010 Section or Area Examined HG-22  
 Time of Examination: from 10:00 a.m. or p.m. to 10:45 a.m. or p.m.  
 Was this report phoned to outside: Yes no  
 By whom Brought out Time          A.M.          P.M.  
 Report received by          (Signed)

#### Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>.2% CH4</u>	<u>N/C</u>
2. <u>1R</u>	<u>.2% CH4</u>	<u>Scrap</u>
3. <u>2</u>	<u>.2% CH4</u>	<u>N/O</u>
4. <u>3</u>	<u>.2% CH4</u>	<u>P/B</u>
5. <u>        </u>	<u>        </u>	<u>        </u>
6. <u>        </u>	<u>        </u>	<u>        </u>
7. <u>        </u>	<u>        </u>	<u>        </u>
8. <u>        </u>	<u>        </u>	<u>        </u>
9. <u>        </u>	<u>        </u>	<u>        </u>
10. <u>        </u>	<u>        </u>	<u>        </u>

#### Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>13,000</u>	<u>        </u>	<u>        </u>
<u>20.80%</u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>.2% CH4</u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>0% CO</u>	<u>        </u>	<u>        </u>	<u>        </u>

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

Intake phone Not working  
Air Chamber OK

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

Signed By Rick Hutchins 37569 Assistant Foreman Certificate No.  
 Countersigned T. Moore 33357 Mine Manager—Mine Foreman  
 Assistant Foreman  
 Superintendent or Assistant



Use Indelible  
Pencil or Ink

**DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT**

Report shall be  
signed when made

Date \_\_\_\_\_ Shift \_\_\_\_\_ Area or Section \_\_\_\_\_

*Violations and other Hazardous Conditions Observed and Reported*

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

*Examinations for Methane in Working Places*

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

*Examinations for Methane in Return Aircourses*

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

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

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

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

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-21 2060 Section or Area Examined H622  
 Time of Examination: from 3:45 a.m. or p.m. to 4:15 a.m. or p.m.  
 Was this report phoned to outside: Yes  no   
 By whom Brought out Time          A.M.          P.M.  
 Report received by          (Signed)

Location	Violations and other Hazardous Conditions Observed and Reported		Action Taken
	CH <sub>4</sub>	Violation or Hazardous Condition	
1. #1	.2%	needs cleaned	Reported
2. #1R	.2%	SCRAP	Hung Reflectors + Reported
3. #2	.2%	none observed	none/Reported
4. #3	.2%	Part Bolted	Hung Reflectors + Reported
5. <u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
6. <u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
7. <u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
8. <u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
9. <u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
10. <u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>

Air Measurements		Air Measurements	
Location	CFM	Location	CFM
<u>LOB</u>	<u>12.675</u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>
<u>        </u>	<u>        </u>	<u>        </u>	<u>        </u>

Remarks: 20.8% O<sub>2</sub>, .2% CH<sub>4</sub>, 0% CO - Detected at  
Travelways, Chargers, D-Box; Clearcut Exam  
Intake Phone is not working - Section Refuge chamber OK at Exam

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

Signed By William Campbell Preshift-Mine Examiner Certificate No. 1354-R  
 Countersigned Fred Moore Mine Manager - Mine Foreman Certificate No. 36526  
Joe Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-21-10 Shift day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. <u>Seith Side No Prohibit</u>	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

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

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

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

[Signature]  
Assistant Mine

3625  
Certificate No.

[Signature]  
Mine Foreman-Mine Manager

3359  
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-21-10 Section or Area Examined HG-22
Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom DEAN JONES Time 2:35 P.M.
Report received by Rick Hutchens

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1, 2, 3, 4 with violations like 'N/C', 'Scrap', 'N/O', 'P/B' and actions like 'Reported', 'Tagged & Reported'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for LOB with CFM 12,136 and gas measurements 20.8% O2, 1.2% CH4, 0% CO.

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

Intake phone not working

Air Chamber OK

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

Signed By [Signature] 3602 Rick Hutchens 37569
Certificate No. 33359
Countersigned [Signature] Mine Manager-Mine Foreman
Assistant Foreman
Superintendent or Assistant

Use Indefible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-21-10 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>N/C</u>	
2. <u>1R</u>	<u>Scrap</u>	
3. <u>3</u>	<u>P/B</u>	
4. _____		
5. _____		
6. _____		
7. _____		
8. _____		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. _____			11. _____		
2. _____			12. _____		
3. <u>Section Idle</u>			13. _____		
4. _____			14. _____		
5. <u>NO PRODUCTION</u>			15. _____		
6. _____			16. _____		
7. _____			17. _____		
8. _____			18. _____		
9. _____			19. _____		
10. _____			20. _____		

Examinations for Methane in Return Aircourses

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

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #12 3:55 RCP

Rich Hutchins 37569  
Assistant Mine Certificate No.

T. Moore  
Mine Foreman-Mine Manager

3337  
Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-21 2010 Section or Area Examined #622
Time of Examination: from 1015 a.m. or p.m. to 1045 a.m. or p.m.
Was this report phoned to outside: Yes/No
By whom Rick Haulchens Time A.M./120 P.M.
Report received by Kip Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Handwritten entry: Job 12,800.

Remarks: 102 CH4 power center & charges intake phone NOT WORKING fresh air base 208 Clear at time of exam

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

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

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-21 Shift 3rd Area or Section HB 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1	needs cleaned	Reported
2. 1 Right	Scrap	Reflectors
3. #2	N/O	
4. #3	Part bolted	Reflectors
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	125	218	11.		.252 CH <sub>4</sub>
2. 1-3	304	590	12.		.252 CH <sub>4</sub>
3.			13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	224	.252	6.		
2.			7.		
3. Return	545	.252	8.		
4.			9.		
5.			10.		

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

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

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

Kyle Anderson  
Assistant Mine

33238  
Certificate No.

William  
Mine Foreman-Mine Manager

33359  
Certificate No.

Superintendent or Assistant



PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-22-10 Section or Area Examined Headgate #22
Time of Examination: from 5:00 a.m. or p.m. to 5:40 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson Time 5:40 A.M. P.M.
Report received by Barb Bony (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains measurement for LOB at 12,280 CFM.

Remarks: Power Centers, Travelways, Chargers, Intake Phone, Outby Shelter. All other OK at time of exam. Section Phase not working at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 Certificate No.
Countersigned T. Moore 33359 Mine Manager-Mine Foreman
Assistant Foreman Barb Bony 1122-A Certificate No.
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-22-10 Shift Day Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry, 20.80% CH <sub>4</sub>	Needs Cleared	Reported
2. #IRCC, 20.80% CH <sub>4</sub>	Scrap cut	Reflectors
3. #3 Entry, 20.80% CH <sub>4</sub>	Part Bolted	Reflectors
4. Section Idle	No Production	

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	1-200pm	.25% CH <sub>4</sub>			
2.		20.80%			
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	117pm	.05% CH <sub>4</sub>			
2.		20.80%			
3.					
4.					
5.					

Number of Bolts Tested 0  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 2 mmv Sect 11  
Pg. 5 Sect. 29 RCP at 649 AM.

Bush Assistant Mine Foreman  
1122-A Certificate No.  
T. Moore Mine Foreman-Mine Manager  
33309 Certificate No.  
Superintendent or Assistant

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-22 20 10 Section or Area Examined HG-22  
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.  
 Was this report phoned to outside: Yes  no   
 By whom Bradon Bowling Time 2:30 A.M. P.M.  
 Report received by Rick Hutchins  
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>.25% CH4</u>	<u>N/C</u>
2. <u>IRT</u>	<u>.20%</u>	<u>Scrap</u>
3. <u>2</u>	<u>.20%</u>	<u>N/O</u>
4. <u>3</u>	<u>.20% CH4</u>	<u>P/B</u>
5.		
6.		
7.		
8.		
9. <u>IRT CORNER</u>	<u>IRBY CORNER</u>	
10.		

Air Measurements

Location	CFM	Location	CFM
<u>HOB</u>	<u>12148</u>		

20.802  
.2% CH4  
0% CO

Remarks: Powercenter, R-ways, Chargers HAUTAGE  
Clear at time of Exam  
Soft Flaky - Ribs # 1-3 Entries  
Intake phone NOT working

Air Chamber OK

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

Signed By Rick Hutchins Preshift-Mine Examiner Certificate No. 37569  
 Assistant Foreman Certificate No.  
 Countersigned T. Moore Mine Manager—Mine Foreman Certificate No. 3829  
 Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-22-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>N/C</u>	
2. <u>1/2T</u>	<u>Scrap</u>	
3. <u>3</u>	<u>P/B</u>	
4. _____		
5. _____		
6. _____		
7. _____		
8. _____		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. _____			11. _____		
2. _____			12. _____		
3. _____			13. _____		
4. <u>Section</u>			14. _____		
5. <u>Idle</u>			15. _____		
6. _____			16. _____		
7. _____			17. _____		
8. <u>NO PRODUCTION</u>			18. _____		
9. _____			19. _____		
10. _____			20. _____		

Examinations for Methane in Return Aircourses

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

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #10 3:55 RCP

Reck Hutchins 37569  
Assistant Mine Certificate No.

T. Moore  
Mine Foreman-Mine Manager

33359  
Superintendent or Assistant Certificate No.

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-22-10 Section or Area Examined HG 22  
Time of Examination: from 10:00 a.m. or (P.M.) to 11:00 a.m. or (P.M.)  
Was this report phoned to outside: Yes  no   
By whom Rich Hutcherson Time A.M. 11:00 P.M.  
Report received by JOHN SKAGGS  
(Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u> <u>.2 CH4</u>	<u>N/C</u>	<u>REPORTED</u>
2. <u>1 RT</u> <u>.20%</u>	<u>SCRAP</u>	<u>TAGGED REPORTED</u>
3. <u>2</u> <u>.20%</u>	<u>N/O</u>	<u>REPORTED</u>
4. <u>3</u> <u>.20%</u>	<u>P/B</u>	<u>TAGGED REPORTED</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. <u>1 RT CORNER</u>	<u>INBY CORNER</u>	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOK</u>	<u>12670</u>	_____	_____
<u>20.8% O2</u>	_____	_____	_____
<u>.2% CH4</u>	_____	_____	_____
<u>0% CO</u>	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REMARKS: ISTAKE PHONE NOT WORKING  
POWER CENTER R/WAY CHARGERS  
SOFT FLAKY RIBS # 1-3 ENTRIES  
ROCK FALL BOTTED AND BRING WORK ON  
AIR CHAMBERS OK

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

Signed By Rich Hutcherson 37569  
Preshift-Mine Examiner Certificate No.  
Countersigned T. Moore 33357 Kyle Anderson 33238  
Mine Manager - Mine Foreman Assistant Foreman Certificate No.  
Assistant Foreman  
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-22 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u> <u>.20%</u>	<u>N/C</u>	<u>Reported</u>
2. <u>1R</u> <u>.20%</u>	<u>Scrap</u>	<u>Reflected</u>
3. <u>2</u> <u>.20%</u>	<u>N/C</u>	
4. <u>3</u> <u>.20%</u>	<u>P/B</u>	<u>Reflected</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>130</u>	<u>210</u>	<u>.20%</u>	11. _____	_____
2. _____	_____	_____	_____	12. _____	_____
3. <u>1-3</u>	<u>430</u>	<u>520</u>	<u>.20%</u>	13. _____	_____
4. _____	_____	_____	_____	14. _____	_____
5. _____	_____	_____	_____	15. _____	_____
6. _____	_____	_____	_____	16. _____	_____
7. _____	_____	_____	_____	17. _____	_____
8. _____	_____	_____	_____	18. _____	_____
9. _____	_____	_____	_____	19. _____	_____
10. _____	_____	_____	_____	20. _____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>215</u>	<u>.20%</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Rtn</u>	<u>520</u>	<u>.20%</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

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

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

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

Kyle Anderson  
Assistant Mine

33238  
Certificate No.

T. Moore  
Mine Foreman-Mine Manager

35357  
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-23 2010 Section or Area Examined Headgate #22
Time of Examination: from 430 a.m. or p.m. to 520 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Shawn Walker Time 528 A.M. P.M.
Report received by B. Bony (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains 10 entries for various entries and IRCC with observations like 'None Observed', 'Scrap Cut', 'Part Bolted', and 'Water in face area'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains one entry for LOB with CFM 13,020 and OCH4 20.802 OPPM C/O.

Remarks: Power Center, Chargers, Outby Shelter, Travelways, Soft Flaky Ribs #1-3 Entries, Intake phone not working. All ok at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By [Signature] Preshift-Mine Examiner Certificate No. 1941-A
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 33557
Assistant Foreman [Signature] Certificate No. 1122-A
Superintendent or Assistant



Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-23-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1R CC .10CH <sub>4</sub> 20.802	Sloop Cut	Reflectors
2.			
3.	#3 Entry .05CH <sub>4</sub> 20.802	Part Bolted	Reflectors
4.			
5.	#3 Entry .05CH <sub>4</sub> 20.802	Water in face area	Reported
6.			
7.	#1R CC	Corner Not bolted - Brow loose	Spotted 2 Bolts 3 Rib bolts
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	1-15pm	.10CH <sub>4</sub> 20.802	11.			
2.				12.			
3.				13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	114pm	.05CH <sub>4</sub> 20.802	6.			
2.				7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested 2  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) loose Coal-Rock Brows.  
Pulling brows - Rib bolting. Pg. 4 Sect. 8 RCR Pg. 2 minv sect 6  
Branch Buy 1122-A T. Moore 645 AM.  
Assistant Mine \_\_\_\_\_ Certificate No. \_\_\_\_\_ Mine Foreman-Mine Manager \_\_\_\_\_ Certificate No. \_\_\_\_\_ Superintendent or Assistant \_\_\_\_\_

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-23 2010 Section or Area Examined H6-22
Time of Examination: from 1:00 a.m. or p.m. to 1:50 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Brandon Bowling Time A.M. 2:35 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1-4 with conditions like '10% CH4', 'Scrap Cut', 'N/O', 'PIB-water' and actions like 'Reported', 'Tagged & Reported'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten data for 'LOB' with CFM '13,370' and air quality measurements '20.8% CH4', '1.2% CH4', '0% CO2'.

Remarks: powercenter, R-ways, Chargers, Haulage - Clear at Time of Exam
Ribs Flaking - Soft #1-3 Entries
Intake phone NOT Working
Air Chamber needs Detector

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

Signed By [Signature] 1122-A Rick Hutchens 37569
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned [Signature] 33307
Mine Manager-Mine Foreman Assistant Foreman
Superintendent or Assistant

Date 2-23-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	1 20.8° <sup>2</sup>	2 % CH <sub>4</sub> N/C	Corrected
2.	1R ↓	2 % CH <sub>4</sub> Scrap Cut	Corrected
3.	3 ↓	2 % CH <sub>4</sub> PIB	Corrected
4.			
5.			
6.			
7.	Soft Ribs	1-3	Reported
8.			pulled Bad Brows & spot Bolted Ribs

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4:00-4:18	2 % CH <sub>4</sub>			
2. 1-3	6:00-6:20	2 %			
3. 1-3	8:00-8:20	2 %			
4. 1-3	10:15-10:45	2 % CH <sub>4</sub>			
5.					
6. 20.8° <sup>2</sup>					
7. 2 % CH <sub>4</sub>					
8. 0 % CO					
9.					
10.					

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	3:58pm	0 % CH <sub>4</sub>			
2.					
3. Return	7:59pm	0 % CH <sub>4</sub>			
4.					
5.					

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #7 3:50pm RCP  
CAUTION Crew about Roof + Ribs on Section

Rick Hutchins Assistant Mine 37569 Certificate No. T. Moore Mine Foreman-Mine Manager 33359 Certificate No. Superintendent or Assistant

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-23 2010 Section or Area Examined HG 22  
 Time of Examination: from 10:15 a.m. or p.m. to 10:50 a.m. or p.m.  
 Was this report phoned to outside; Yes  no   
 By whom Rick Hutchins Time 11:21 A.M. P.M.  
 Report received by Ryle Anderson  
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 120	needs cleaned & dusted	Reported
2.		
3. #2 120	Scrap	Reflectors hung
4.		
5. #3 120	needs cleaned & dusted	Reported
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Job	15120		

Remarks: CHX power center & chargers ~~in~~ fresh air base  
20.8 inlet phone not working  
all else clear at time of exam

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

Signed By Rick Hutchins 37569 Certificate No.  
 Freshift-Mine Examiner  
 Countersigned T. Moore 33238 Certificate No.  
 Mine Manager—Mine Foreman  
Ryle Anderson Assistant Foreman  
 Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-23 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 .20	needs C/D	Reported
2.			
3.	#2 .20	S Cut	Replaster
4.			
5.	#3 .20	needs C/D	Reported
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	L-3 130	205	.20% CH <sub>4</sub>	11.			
2.				12.			
3.	L-3 450	530	.20% CH <sub>4</sub>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	210	.20% CH <sub>4</sub>	6.			
2.				7.			
3.	Return	535	.20% CH <sub>4</sub>	8.			
4.				9.			
5.				10.			

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

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

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

Kyle Anderson  
Assistant Mine

33238  
Certificate No.

Tony Moore  
Mine Foreman-Mine Manager

33307  
Certificate No.

Superintendent or Assistant

MINING EXAMINER'S REPORT

Report shall be signed when made

Section or Area Examined Headgate # 22

Time 5:36 A.M. P.M.

Violations and other Hazardous Conditions Observed and Reported

Violation or Hazardous Condition

Action Taken

Needs Cleaned

Reported

Needs Cleaned + Dusted

Reported

Not Bolted

Not Bolted

None observed

Reported

OPPM c/o

Air Measurements

Location

CFM

Location

CFM

LOB

15,110

OCH<sub>4</sub> 20.802

OPPM c/o

Remarks: Power Center

Travelways

Chargers

Outby Chamber

Intake Phone - Not Working.

OCH<sub>4</sub> 20.802 OPPM c/o

All OK at time of exam. Reported

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

Signed By Kyle Anderson  
FRESHFILL Mine Examiner

33238  
Certificate No.

David Young  
Assistant Foreman

1122-A  
Certificate No.

Countersigned Tony Moore  
Mine Manager - Mine Foreman

33357

Assistant Foreman

Superintendent or Assistant

Report shall be signed when made



Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-24-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 Entry .10 CH <sub>4</sub> 20.802	Needs Cleaned	Cleaned + Dusted
2.			
3.	#1 R.C. .05 CH <sub>4</sub> 20.802	Needs Cleaned + Dusted	Cleaned + Dusted
4.			
5.	#2 R.C. .15 CH <sub>4</sub> 20.802	Not Bolted	Bolted + Rechecked
6.			
7.	#2 Int	loose Rock Ribs - brow	Spotted 2 Bolts
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	7-730 AM	.10 CH <sub>4</sub> 20.802	11.			
2.				12.			
3.	1-3	9-930 AM	.10 CH <sub>4</sub> 20.802	13.			
4.				14.			
5.	1-3	11-1130 AM	.15 CH <sub>4</sub> 20.802	15.			
6.				16.			
7.	1-3	1-200 PM	.15 CH <sub>4</sub> 20.802	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	716 AM	.05 CH <sub>4</sub> 20.802	6.			
2.				7.			
3.	Return	1114 AM	.05 CH <sub>4</sub> 20.802	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 8  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 2 sect 5 M.M.U. Plan  
Pg. 5 sect 25 RCP at 643 AM.  
March 2010 1122-A Tom White 3225-9  
 Assistant Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant



Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-24 Section or Area Examined HG-22  
Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.  
Was this report phoned to outside: Yes 1 no \_\_\_\_\_  
By whom Brandon Bowling Time 2:35 P.M.  
Report received by Rick Hutchins  
(Signed)

Violations and other Hazardous Conditions Observed and Reported:

Location	Violation or Hazardous Condition	Action Taken
1 20.8 <sup>02</sup> .15% CH <sub>4</sub>	Scrap	Tagged & Reported
2 ↓ .1% CH <sub>4</sub>	P/B	Tagged & Reported
3 2R ↓ .15% CH <sub>4</sub>	N/C/D	Reported
4 3 ↓ .2% CH <sub>4</sub>	N/Clean	Reported
5		
6		
7		
8		
9		
10		

Air Measurements

Location	CFM	Location	CFM
LOB	16490		
20.8 <sup>02</sup>			
.2% CH <sub>4</sub>			
0% CO			

Remarks: powercenter, R-ways, Chargers, Haulage Clear  
at Time of Exam  
Soft Ribs #1-3  
Intake phone NOT working  
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory condition and practices observed by me are listed in this report.  
Signed By Brandon Bowling 11224 Rick Hutchins 37569  
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.  
Countersigned T. Mann 33359  
Mine Manager—Mine Foreman  
Assistant Foreman  
Superintendent or Assistant

Use Indefilible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-24-10 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains 4 rows of data with handwritten entries like '20.8% CH4', 'Scrap', 'Corrected'.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains 10 rows of data with handwritten entries like '1-3', '4:00-4:18', '0% CH4'.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains 5 rows of data with handwritten entries like 'Return', '3:59 pm', '0% CH4'.

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #10 3:55 RCP TALK TO CREW ABOUT RIBS + ROOF

Signature and Certificate No. for Assistant Mine Foreman (Rick Hutchins) and Superintendent or Assistant (T. Moore).

Use Indelible Pencil or Ink

# PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-24 Section or Area Examined HG 22  
 Time of Examination: from 6:15 a.m. or p.m. to 6:30 a.m. or p.m.  
 Was this report phoned to outside: Yes  no   
 By whom Rick Henderson Time 11:20 A.M. P.M.  
 Report received by Ryle Anderson (Signed)

### Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1	20% off	None Observed
2. #2	20% off	Needs cleaned
3. R	20% off	Needs Add. Cleaning
4. #3	0% off	None Observed
5.		
6.		
7.		
8.		
9.		
10.		

### Air Measurements

Location	CFM	Location	CFM
Job	14110		

Remarks: 20 off power center & chargers fresh air base  
 208 intake phone not working fresh air base clear

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

Signed By Rick Henderson 37569 Certificate No.  
 Countersigned T. Moore 33387 Certificate No. 33238  
 Assistant Foreman  
 Superintendent or Assistant

Date 2-24 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1	N/O	
2.			
3.	#2	roads cleaned	Reported
4.	2R	needs add. cleaning	Reported
5.			
6.	#3	N/O	
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	140	212	10%			
2.							
3.	1-3	436	502	10%			
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	215	10%	6.			
2.				7.			
3.	Return	530	10%	8.			
4.				9.			
5.				10.			

Number of Bolts Tested \_\_\_\_\_

Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

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

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-25-10 20 Section or Area Examined H622  
Time of Examination: from 4:30 a.m. or p.m. to 5:22 a.m. or p.m.  
Was this report phoned to outside: Yes  no  
By whom Kyle Anderson Time 5:40 A.M. P.M.  
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	CFM	Action Taken	
1.	city 3	none	06	20.8	me
2.	10	needs decl	20.8	me	
3.	0	none	06	20.8	me
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Air Measurements

Location	CFM	Location	CFM
COB	14,288		

Remarks: 0-10 city 20.8 or .000 detected trailers  
2 trailers OK at time of Etn pile and  
clean OK

Stelte OK  
Inferke phone does not work

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

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

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-25-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>near dgs</u>	<u>rel</u>
2. <u>2</u>	<u>needs dgs</u>	<u>rel</u>
3. <u>3</u>	<u>rel dgs</u>	<u>rel</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>ret</u>	<u>8:00</u>	<u>.20</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>ret</u>	<u>12:00</u>	<u>.20</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed per # 5 O & Rep # 29 at 7:30 AM Dyst control Plan 16, 17, 18

Assistant Mine [Signature] Certificate No. 36028 Mine Foreman-Mine Manager [Signature] Certificate No. 35029 Superintendent or Assistant [Signature]

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-25 2010 Section or Area Examined Headgate # 22
Time of Examination: from 1200 a.m. or p.m. to 200 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Deano Jones Time A.M. 240 P.M.
Report received by Branch Bony (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for items #1 through #10, including locations like '#1 R CC - 20 CH4' and actions like 'Scrap Cut', 'Reflectors', 'Part Bolted', 'Needs cleaned + Dusted'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for 'LOB' with a CFM value of '13,680' and other measurements like '0 CH4' and '20.802'.

Remarks: Power Center, Chargers, Tracelways, Outby Shelter, Intake Phone - Reported not working, Section needs add 3 dusty. All ok at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By [Signature] 36520 Branch Bony 1122-A
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned [Signature] Mine Manager - Mine Foreman 37309
Assistant Foreman
Superintendent or Assistant



Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-25-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	# 1R CC .20CHV! 20.802	Scrap Cut	Bolted + Reflectors
2.			
3.	# 2 Entry .20CHV! 20.802	Part Bolted	Bolted + Reflectors
4.			
5.	# 2-3 CC .05CHV! 20.802	Needs cleaned + dusted	Cleaned + Dusted
6.			
7.	# 3 Entry .20CHV! 20.802	Not Bolted	Bolted + Reflectors
8.	# 2 Entry	Spotted cable bolts - Bolted loose corner	

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4-4:25pm	.20CHV! 20.802	11.			
2.				12.			
3.	1-3	6-6:30pm	.15CHV! 20.802	13.			
4.				14.			
5.	1-3	8-8:30pm	.20CHV! 20.802	15.			
6.				16.			
7.	1-3	10-10:50pm	.20CHV! 20.802	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	4:17pm	.05CHV! 20.802	6.			
2.				7.			
3.	Return	8:15pm	.05CHV! 20.802	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 10  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 1 NMV Face Ventilation  
Pg. 5 sect 25 RCP at 347PM.

Grant King Assistant Mine Certificate No. 1122-A  
T. Moore Mine Foreman-Mine Manager Certificate No. 33359  
Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-25 2010 Section or Area Examined H G 22
Time of Examination: from 1100 a.m. or p.m. to 1050 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom [Signature] Time A.M. 1100 P.M.
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for location 'Job' with CFM '15,580'.

Remarks: 25 city power center, chargers fresh air base
20.8 intake phone doesn't work

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

Signed By [Signature] 1122-A Certificate No. 33502
Countersigned [Signature] Mine Manager - Mine Foreman
Assistant Foreman [Signature]
Superintendent or Assistant [Signature]

Use Indelible  
Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be  
signed when made

Date 2-25 Shift 3rd Area or Section HG 20

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1	Scrap Cut	Reflectors
2.	IR	needs cleaned	Reported
3.	#2	N/O	
4.	#3	N/O	
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	1:30	2.52%	11.			
2.				12.			
3.	1-3	4:30	5.22% 2.5 botly	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	2:10	2.52% 4%	6.			
2.				7.			
3.	Return	5:24	2.52% 4%	8.			
4.				9.			
5.				10.			

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

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

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

Kyle Anderson  
Assistant Mine

33238  
Certificate No.

T. M. M...  
Mine Foreman-Mine Manager

33357  
Certificate No.

Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-26-10 20. Section or Area Examined H622  
 Time of Examination: from 4:30 a.m. or p.m. to 5:00 a.m. or p.m.  
 Was this report phoned to outside: Yes  no   
 By whom Kyle Anderson Time 5:30 A.M. P.M.  
 Report received by [Signature] (Signed)

Location		Violations and other Hazardous Conditions Observed and Reported		Action Taken	
		Violation or Hazardous Condition			
1.	<u>1</u>	<u>CH<sub>4</sub> %</u>	<u>needs check 20.8</u>	<u>rep</u>	<u>.00</u>
2.	<u>int</u>	<u>CH<sub>4</sub> %</u>	<u>needs check 20.8</u>	<u>rep</u>	<u>.00</u>
3.	<u>2</u>	<u>OR</u>	<u>needs check 20.8</u>	<u>rep</u>	<u>.00</u>
4.	<u>3</u>	<u>OR</u>	<u>not bolted 20.8</u>	<u>reflects</u>	<u>.00</u>
5.					
6.					
7.					
8.					
9.					
10.					

Location		Air Measurements	
		CFM	Location
	<u>C03</u>	<u>14,860</u>	

Remarks: 0-.20 CH<sub>4</sub> 20.802 .000 detected tractors  
2 haulers at time of Exm P.C. and  
chargers OK  
shelter OK  
Intake Phone Not working

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

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238  
 Countersigned [Signature] Mine Manager—Mine Foreman Certificate No. 36525  
 Assistant Foreman  
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-26-13 Shift PM Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>needs deep</u>	<u>Deep</u>
2. <u>1A</u>	<u>needs deep</u>	<u>Deep</u>
3. <u>2</u>	<u>nee c6</u>	<u>nil</u>
4. <u>3</u>	<u>not bolted</u>	<u>Bolting</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:40</u> <u>7:50</u>	<u>.20</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>.20</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>.20</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:50</u>	<u>.20</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Ref</u>	<u>8:00</u>	<u>.20</u>	6. _____	_____	_____
2. _____	<u>1</u>	_____	7. _____	_____	_____
3. <u>Ref.</u>	<u>12:00</u>	<u>.20</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 14 Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed meth 50t  
Rep # 10 at 6:32 AM Dust control 19, 20, 21

[Signature] Assistant Mine 3652 Certificate No. [Signature] Mine Foreman-Mine Manager 33359 Certificate No. \_\_\_\_\_ Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-26 Section or Area Examined Hoadgate #22  
 Time of Examination: from 1200 a.m. or 200 p.m. to 200 a.m. or 200 p.m.  
 Was this report phoned to outside: Yes  no   
 By whom Deano Jones Time 240 P.M.  
 Report received by Bushbury (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 Entry, 20 CH <sub>4</sub> , 20.802	Needs Clean & Oiled	Reported
2.			
3.	#2 Entry, 20 CH <sub>4</sub> , 20.802	None Observed	Reported
4.			
5.	#2 RCC, 20 CH <sub>4</sub> , 20.802	Scrap Cut	Reflectors
6.			
7.	#3 Entry, 20 CH <sub>4</sub> , 20.802	Part Bolted	Reflectors
8.			
9.	OPPM c/o		
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	14,651		
OCH <sub>4</sub>			
20.802			
OPPM c/o			

Remarks: Power Centers

Chargers

Travelways

Outby Shelter

Intake Phone - Not working

OCH<sub>4</sub> 20.802 OPPM c/o

All OK at time of exam

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

Signed By [Signature] 3626 [Signature] Assistant Foreman Certificate No. 1122-A  
 Countersigned T. Jones Mine Foreman Certificate No. 33357  
 Assistant Foreman Superintendent or Assistant



Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-26-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .20CH <sup>4</sup> 20.802	Needs Cleaned + Dusted	Cleaned + Dusted
2. #2 R.C.C. .20CH <sup>4</sup> 20.802	Scrap Cut	Bolted + Reflectors
3. #3 Entry .20CH <sup>4</sup> 20.802	Part Bolted	Bolted + Reflectors
4. section Power Center	loose Brows + Ribs Spotted R Inby Corner at P/C	set 3 jacks

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-4:25pm	.20CH <sup>4</sup> 20.802	11.		
2.			12.		
3. 1-3	6-6:30pm	.20CH <sup>4</sup> 20.802	13.		
4.			14.		
5. 1-3	8-8:30pm	.25CH <sup>4</sup> 20.802	15.		
6.			16.		
7. 1-3	10-11:00pm	.20CH <sup>4</sup> 20.802	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:15pm	.10CH <sup>4</sup> 20.802	6.		
2.			7.		
3. Return	8:13pm	.05CH <sup>4</sup> 20.802	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 8  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 2 sect 4 mnu plan  
Pg. 5 Sect 23 RCP at 3:45 pm

[Signature] Assistant Mine Certificate No. 11024  
[Signature] Mine Foreman-Mine Manager Certificate No. 3335  
[Signature] Superintendent or Assistant



PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-26 2010 Section or Area Examined H B 22  
 Time of Examination: from 1000 a.m. or p.m. to 1100 a.m. or p.m.  
 Was this report phoned to outside: Yes no  
 By whom Brandon Time 1115 P.M.  
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>#1</u> <u>.20</u>	<u>Scrap Cut</u>	<u>Reflectors</u>
2.			
3.	<u>#2</u> <u>.30</u>	<u>None Observed</u>	
4.	<u>R</u> <u>.20</u>	<u>Part B Altered</u>	<u>Reflectors</u>
5.	<u>#3</u> <u>.20</u>	<u>Part B Altered</u>	<u>Reflectors</u>
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>Job</u>	<u>14885</u>		

Remarks: .20 cthy power centers, charges hull ways, fresh air base  
208 intake phone do not work all else clear  
Soft - Rib # 1-3 entry's

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

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

Indelible  
Ball or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be  
signed when made

2-26 Shift 3rd Area or Section HB 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
#1 20	Scrap Cut	Reflected
#2 130	None observed	
2R 120	Part bolted	Reflected
#3 120	Part bolted	Reflected

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-3 140	200	1.30	11.		
1-3 435	500	1.30	12.		
			13.		
			14.		
			15.		
			16.		
			17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	225	1.30	6.		
Return	530	1.30	7.		
			8.		
			9.		
			10.		

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

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

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

Kyle Anderson 33238 Assistant Mine Foreman  
 T. Moore Mine Foreman-Mine Manager  
 33259 Superintendent or Assistant

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-27-10 20. Section or Area Examined H 622  
Time of Examination: from 4:30 am or p.m. to 5:26 am or p.m.  
Was this report phoned to outside: Yes  no   
By whom Kyle Anderson Time 5:34 A.M. P.M.  
Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>city 60/ps not bolted 20.8</u>	<u>reflected 60</u>
2. <u>2</u>	<u>.28 new obs 20.8</u>	<u>me 0</u>
3. <u>2nd</u>	<u>.30 new obs 20.8</u>	<u>me 0</u>
4. <u>3</u>	<u>.20 new obs 20.8</u>	<u>me 0</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>Cor 3</u>	<u>14,480</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: 0-60 city 20.8 oz oco detected today  
3 Huleys OK. qd time of 8th p.c. Check  
OK

Skelthe chamber OK  
Phere not working

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.  
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238  
Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 36025  
Assistant Foreman Certificate No. \_\_\_\_\_  
Superintendent or Assistant \_\_\_\_\_

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-27-0 Shift Day Area or Section 14622

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for locations 1-4.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for locations 1-7.

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 8 Below Range

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed with 6 others #30 at 6:32 AM dust control plan A, 6 Apr #1

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

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-27 2010 Section or Area Examined Hedgegate 22#  
Time of Examination: from 1200 a.m. or p.m. to 2000 a.m. or p.m.  
Was this report phoned to outside: Yes  no   
By whom Deano Jones Time A.M. 2:35 P.M.  
Report received by Brad Bay (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
# 1 Entry .45 CHV!	None Observed	Reported
# 1 R CC .45 CHV!	None Observed	Reported
20.802		
# 2 Entry .20 CHV!	None Observed	Reported
20.802		
# 2 R CC .25 CHV!	None Observed	Reported
20.802		
# 3 Entry .20 CHV!	Needs Cleared + Dusted	Reported
20.802		
OPPM c/o		

Air Measurements

Location	CFM	Location	CFM
LOB	13.822		
.10 CHV!			
20.802			
OPPM c/o			

Remarks: Power center  
Chargers  
Travelways  
Outby Shelter  
Intake Man - Not working - Reported  
OCHV! 20.802 OPPM c/o  
All OK at time of exam.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.  
Signed By [Signature] Freshift-Mine Examiner Certificate No. 36525  
Countersigned Tim Jones Mine Manager - Mine Foreman Certificate No. 37357  
Assistant Foreman [Signature] Certificate No. 1122-A  
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-27-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #3 Entry 10 CHVl 20.802	Needs Cleared + Dusted	Cleared - Dusted
2.		
3. Section Pass Center	Loose Rib - Brow	Set 2 Sand Jacks
4. #2 Int	L-Corner not Bolted	Spotted corner Bolt
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430pm	20 CHVl 20.802			
2.					
3. 1-3	6-630am	15 CHVl 20.802			
4.					
5. 1-3	8-830pm	20 CHVl 20.802			
6.					
7. 1-3	10-1050	20 CHVl 20.802			
8.					
9.					
10.					

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	415pm	10 CHVl 20.802			
2.					
3. Return	813pm	05 CHVl 20.802			
4.					
5.					

Number of Bolts Tested 5  
Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 5 sect. 21 REP at 339pm. Pg 3 MMV sect 13 MMV Plan.

Frank King Assistant Mine Certificate No. 1122A T. Moore Mine Foreman-Mine Manager Certificate No. 37359 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-27 Section or Area Examined H.G. 22  
 Time of Examination: from 10:00 a.m. or p.m. to 10:00 a.m. or p.m.  
 Was this report phoned to outside: Yes  no   
 By whom [Signature] Time 11:25 A.M. (P.M.)  
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>#1</u>	<u>off</u>	<u>Reported</u>
2.	<u>2</u>	<u>SCRAP</u>	<u>Reported</u>
3.	<u>3</u>	<u>NEEDS CLEANED</u>	<u>Reported</u>
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>14422</u>		

Remarks: Travelways & Hallways clean at time of exam  
Power Center of charger off  
O<sub>2</sub> - 20.8% CO - 0%  
Water pump - don't work

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

Signed By [Signature] Certificate No. 11227 Assistant Foreman [Signature] Certificate No. 30894  
 Countersigned [Signature] Mine Manager - Mine Foreman 33389  
 Assistant Foreman  
 Superintendent or Assistant



Use Indelible  
Pencil or Ink

# DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be  
signed when made

Date 2-28-10 Shift 3rd Area or Section H.G. 22

### Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>2</u>	<u>scrap</u>	<u>Patrol and</u>
2. <u>3</u>	<u>needs done</u>	<u>Reported</u>
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

### Examinations for Methane in Working Places

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

### Examinations for Methane in Return Aircourses

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

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

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

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

[Signature]  
Assistant Mine

32294  
Certificate No.

[Signature]  
Mine Foreman-Mine Manager

32259  
Certificate No.

[Signature]  
Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-28-10 20. Section or Area Examined H622

Time of Examination: from \_\_\_\_\_ a.m. or p.m. to \_\_\_\_\_ a.m. or p.m.

Was this report phoned to outside: Yes  no

By whom Harry Ferner Time 0500 A.M. 0 P.M.

Report received by Shelton (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CH4 9</u> <u>1</u> <u>12</u>	<u>none observed</u>	<u>Reported</u>
2. <u>TNT</u> <u>120</u> <u>12</u>	<u>needs</u>	<u>me</u>
3. <u>2</u> <u>12</u>	<u>scrap cut</u>	<u>Reported</u>
4. <u>3</u> <u>CH4</u> <u>12</u>	<u>needs cleared</u>	<u>Reported</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>1270</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: Walkway, not chaser OK at line of exam  
P.C. OK, section needs w/dl parts

Shelton Chamber OK  
In take pure not working

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

Signed By [Signature] Preshift-Mine Examiner Certificate No. 90294

Countersigned [Signature] Mine Manager—Mine Foreman Certificate No. 37339

[Signature] Assistant Foreman Certificate No. 1446-1

[Signature] Superintendent or Assistant Certificate No. 36825

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-28-10 Shift my Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1</u>	<u>new OGS</u>	<u>my</u>
2.	<u>1st</u>	<u>new OGS</u>	<u>my</u>
3.	<u>2</u>	<u>scrap cut</u>	<u>discussible</u>
4.	<u>3</u>	<u>needs level</u>	<u>my</u>
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-3</u>	<u>7:00</u> <u>7:50</u>	<u>.20</u>	11.		
	<u>9:00</u>		12.		
<u>1-3</u>	<u>9:50</u>	<u>.20</u>	13.		
	<u>11:00</u>		14.		
<u>1-3</u>	<u>11:50</u>	<u>.20</u>	15.		
	<u>1:00</u>		16.		
<u>1-3</u>	<u>1:50</u>	<u>.20</u>	17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>ret</u>	<u>8:00</u>	<u>.20</u>	6.		
			7.		
<u>ret</u>	<u>12:00</u>	<u>.20</u>	8.		
			9.		
			10.		

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discuss ret # of ret # 7 at 6:50 AM discussed per root bolt AB COLE

[Signature] Assistant Mine 36525 Certificate No. T. M. [Signature] Mine Foreman-Mine Manager 33359 Certificate No. [Signature] Superintendent or Assistant

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination 2-28 Section or Area Examined Hedgemo 22  
Time of Examination: from 12:00 a.m. or 1:30 a.m. or 9:00 a.m. or 3:00 p.m.  
Was this report phoned to outside: Yes  no   
By whom Dem Jones Time 2:30 P.M.  
Report received by Patrick Hilbert  
(Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>#1 CH4 30</u>	<u>Needs cleaned + Distal .30 CH4 20.802</u>	<u>Reported</u>
2.	<u>#1R CH4 30</u>	<u>Needs cleaned + Distal .30 CH4 20.802</u>	<u>Reported</u>
3.	<u>#2 CH4 20</u>	<u>Scrap Cut .20 CH4 20.802</u>	<u>Reflectors</u>
4.	<u>#3 CH4 20</u>	<u>Part Bolted .20 CH4 20.802</u>	<u>Reflectors</u>
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>15675</u>		

Remarks: Power Center + Chargers OK shelter OK  
at time of examination  
intake phone Does NOT work

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

Signed By [Signature] Preshift Mine Examiner Certificate No. 3602  
Assistant Foreman Paul Ruler Certificate No. 2041  
Countersigned T. Moore Mine Manager - Mine Foreman Certificate No. 3759  
Assistant Foreman  
Superintendent or Assistant

Date 2-28-10 Shift EVE Area or Section Headgate 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Nec .30 CH4 20.8.02	Needs cleaned and Dusted	Miner Down in #1 Dusted
2. <del>Needs cleaned and Dusted</del>		
3. #1 R .30 CH4 20.8.02	Needs Cleaned & Dusted	Miner Down in #1 Dusted
4. _____		
5. #2 .20 CH4 20.8.02	Scrap cut	Reflectors
6. _____		
7. #3 .20 CH4 20.8.02	Part Bolted	Bolted
8. _____		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430	.25 CH4 20.802	11. _____	_____	_____
2. _____			12. _____	_____	_____
3. 1-3	6-630	.20 CH4 20.802	13. _____	_____	_____
4. _____			14. _____	_____	_____
5. 1-3	8-830	.20 CH4 20.802	15. _____	_____	_____
6. _____			16. _____	_____	_____
7. 1-3	10-11 pm	.20 CH4 20.962	17. _____	_____	_____
8. _____			18. _____	_____	_____
9. _____			19. _____	_____	_____
10. _____			20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:15 pm	.10 CH4 20.852	6. _____	_____	_____
2. Return	8:10 pm	.20 CH4 20.802	7. _____	_____	_____
3. _____			8. _____	_____	_____
4. _____			9. _____	_____	_____
5. _____			10. _____	_____	_____

Number of Bolts Tested 25  
 Number of Bolts Torqued Above Range \_\_\_\_\_ Below Range \_\_\_\_\_

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Went over page 1 paragraph 1 Area  
Page 4, paragraph 5 Roof control plan withentive crew  
Ronob K. [Signature] 2014-A T. [Signature]  
 Assistant Mine Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2.28 Section or Area Examined H.G.22  
 Time of Examination: from 10:00 a.m. or 11:00 a.m. to 11:05 a.m. or 11:05 p.m.  
 Was this report phoned outside? Yes no  
 By whom Patricia Fey Time 11:05 A.M. 11:05 P.M.  
 Report received by Fey (Signed)

Violations and other Hazardous Conditions Observed and Reported.

Location	Violation or Hazardous Condition	Action Taken
1. #1 CM4 .30%	NEED ADD cleaning	Reported
2. #2 .25%	Paint Beltd	Reported
3. #3 .25%	SCAMP	Reported
4. #1X	n/a	
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOA	15,600		

Remarks: Track of trackways clean pt tank of exam  
 Power Cord + charger - n/a  
 make Pflur - not working  
 Air Chamber - ok

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

Signed By Patricia Fey Preshift-Mine Examiner Certificate No. 33357  
 Countersigned T. Moore Mine Manager - Mine Foreman Assistant Foreman  
32274 Assistant Foreman Certificate No.  
 Superintendent or Assistant



Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT  
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 3-1-10 Shift 3:00 Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>#1</u>	<u>Needs add cleaning</u>	<u>Liquid</u>
2. <u>2</u>	<u>Part below</u>	<u>L. H. H. H.</u>
3. <u>3</u>	<u>scrap</u>	<u>L. H. H. H.</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

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

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

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

[Signature] Assistant Mine  
32294 Certificate No.  
[Signature] Mine Foreman-Mine Manager  
3305 Certificate No.  
[Signature] Superintendent or Assistant



Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 3-1-10 20 Section or Area Examined HGR  
Time of Examination: from 4:10 a.m. or p.m. to 5:10 a.m. or p.m.  
Was this report phoned to outside: Yes no  
By whom Kenney (Signed) Time 5:18 A.M. P.M.  
Report received by (Signed)

Location	Violations and other Hazardous Conditions Observed and Reported	Action Taken
1. CHY	needs adel day 20.8	rep
2. INT	needs adel day 20.8	rep
3. 2	part socket 20.8	reflector
4. 3	scrap cut 20.8	reflector
5.		
6.		
7.		
8.		
9.		
10.		

Location	Air Measurements	Location	CFM
COB	13.050		

Remarks: 0-30 CHY 20.802 -000 defective Trainers  
2 Huleys OK at time of Exam P.C. and  
Chaper OK  
Stette Chamber -> OK  
Interke phone Not working

This is to certify that (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.  
Signed By [Signature] Preshift-Mine Examiner Certificate No. 32294  
Countersigned [Signature] Mine Manager-Mine Foreman Certificate No. 33354  
Assistant Foreman [Signature] Certificate No. 36024  
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 3-1-10 Shift ny Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for locations 1-4.

Examinations for Methane in Working Places

Table with 5 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for locations 1-7.

Examinations for Methane in Return Aircourses

Table with 5 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for locations 1-3.

Number of Bolts Tested y Number of Bolts Torqued: Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed with y of Rep #3 at 6:37 Am. Dist control Plan #16

Assistant Mins Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 3-1 Section or Area Examined Headgate #22  
 Time of Examination: from 12:00 a.m. or 2:00 p.m. to 2:00 a.m. or 6:00 p.m.  
 Was this report phoned to outside: Yes  no   
 By whom Dean Jones Time 2:40 A.M. 2:40 P.M.  
 Report received by Patrick Hilbert (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 .40 ch <sup>4</sup> 20.8 <sup>02</sup>	Needs additional cleaning	Reported
2.			
3.	#1R .40 ch <sup>4</sup> 20.8 <sup>02</sup>	Needs additional cleaning	Reported
4.			
5.	#2 .25 ch <sup>4</sup> 20.8 <sup>02</sup>	NONE observed	
6.			
7.	#2R .25 ch <sup>4</sup> 20.8 <sup>02</sup>	Scrap cut	Reflectors
8.			
9.	#3 .30 ch <sup>4</sup> 20.8 <sup>02</sup>	Part Bolted	Reflectors
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	16,641		

Remarks: Power Center, Hadage, Travel ways shelter & Charges OK at time of Examination  
 intake phone not working

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

Signed By Dean Jones 36525 Preshift-Mine Examiner Certificate No. 31359  
 Countersigned Patrick Hilbert Assistant Foreman  
To Jones Mine Manager - Mine Foreman  
 Assistant Foreman  
 Superintendent or Assistant

2014-A  
 Certificate No.