

5-18-10-03

③

Sw

Head Gate

22

Finish

**PRE-SHIFT - ONSHIFT
and
DAILY REPORT**

STARTED 11-6-09

FINISHED 11-21-09

Company PERFORMANCE COAL
Mine UBB
SECTION HG-22
LOCATION NAOMA WV RA,
Post Office County State

25

Re-order from
BJW Printing and
Office Supplies
P. O. Box 1309
Beckley, WV 25801
Phone (304) 253-7361

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-6 2006 Section or Area Examined # Headgate 22
 Time of Examination: from 506 a.m. or p.m. to 535 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 540 A.M. P.M.
 Report received by Branch Boy (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. # 1L CC	Not Bolted	Reflectors
2. # 1 Entry	Water in face	Reported
3. # 2-3-3R-4	None Observed	Reported
4. DCH4!		
5. 20.802		
6. 0 PPM C/F		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	18,680		
DCH4!			
20.802			
0 PPM C/F			

Remarks: Power Center
 Travelways
 Chargers
 Intake Phone
 Outby Chamber
 All clear and OK at time of exam

DCH4! 20.802 0 PPM C/F

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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.
 Preshift Mine Examiner
 Countersigned Branch Boy 3506007 Assistant Foreman
 Mine Manager Mine Foreman

Assistant Foreman

Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-6-09 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #12 CC	Not Bolted	Bolted + Reflectors
2. #1 Entry	Water in face	Pumped water
3. <u>ACH4!</u>		
4. <u>20.5oz</u>		
5. <u>off m</u>		
6. <u>c/o</u>		
7. #3R Outby Corner	Rib-Roll - Pulled Rib	Spotted corner
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-4	7-730am	0 CH4!	11.		
2. 1-4	9-930am	0	12.		
3. 1-4	11-1130am	0	13.		
4. 1-4	1-150am	0	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	701am	0 CH4!	6. SCRUBBER Reading		
2. Return	1103am	0	7. RT Miker	7704 CFM	
3. Return	106pm	0	8. Lt Miker	7164 CFM	
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. 4 Sect 11 RUP at 649 AM.

Bruce By
Assistant Mine Foreman

1122-A
Certificate No. Mine Foreman-Mine Manager

3500000
Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-6 2009 Section or Area Examined HG-22
 Time of Examination: from 11:00 a.m. or p.m. to 1:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom BRADA Bowling Time A.M. 1:40 P.M.
 Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1LT</u>	<u>Scrap</u>	<u>Tagged Reported</u>
2. <u>1</u>	<u>water in Entry</u>	<u>Reported</u>
3. <u>2</u>	<u>water</u>	<u>Reported</u>
4. <u>3, 3R</u>	<u>N/C</u>	<u>Reported</u>
5. <u>4</u>	<u>N/O</u>	<u>Reported</u>
6.		
7.		
8.		
9. <u>1-4</u>	<u>Soft Rib</u>	<u>Reported</u>
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>18,449</u>		
<u>20.8°</u>			
<u>0% ch4</u>			
<u>0% CO</u>			

Remarks: powercenter, Rways, Chargers, Haulage Clear at time of EXAM
Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 BRADA Bowling 1122-A Certificate No. _____ Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] 3300000 Mine Manager Mine Foreman _____
Rick Hutchens 37569 Assistant Foreman _____ Superintendent or Assistant _____

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

Date 11-6-09 Shift Eve Area or Section H6 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1LT	Scrap Cut	Corrected
2.	1	WATER in Entry	Corrected Run Pump
3.	2	WATER in Entry	Corrected
4.	3, 3R	N/C	Corrected
5.	4	N/O	Corrected
6.			
7.			
8.			
9.	Soft Ribs 1-4	Soft Ribs	Set Jacks Around PC
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1LT-4	4:30-5:00	0 % CH ₄	11.		
2. 1LT-4	6:00-6:30	0 %	12.		
3. 1LT-4	8:00-8:30	0 %	13.		
4. 1LT-4	10:00-10:30	0 % CH ₄	14.		
5.			15.		
6. 20.80 ²			16.		
7. 0% CH ₄			17.		
8. 0% CO			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:27 pm	0 % CH ₄	6.		
2. Return	7:58 pm	0 % CH ₄	7.		
3.			8.		
4.			9.		
5.			10.		

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) 5 # Page 14 4:25 pm RCP

Section Safe & Clear at Time of Exam

Reck Hutchins 37569 Cal Cat 3rd Supervisor

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-6 20 7 Section or Area Examined HG 22
 Time of Examination: from 1000 a.m. or p.m. to 1040 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time 1110 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>1L</u>	<u>Scrap Cut</u>	<u>Reflectors hung</u>
2. <u>1-2</u>	<u>N/O</u>	
3. <u>3P</u>	<u>N/O</u>	
4. <u>4</u>	<u>N/O</u>	
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>inlike</u>	<u>18320</u>		

Remarks: ob ch 4
power center charges, hallways, air base, inlike phone
268 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 W. Va. Mining Laws and the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Certificate No.
 Preshift-Mine Examiner
 Countersigned Kyle Anderson 33038 Certificate No.
 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 11-6 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1L</u>	<u>Scrap Cut</u>	<u>Reflecting Injury</u>
2.	<u>1-2</u>	<u>N/O</u>	<u>Report</u>
3.	<u>3R</u>	<u>N/O</u>	
4.	<u>4</u>	<u>N/O</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-4</u>	<u>212</u>	<u>0.6 CH₄</u>	11.			
2.				12.			
3.	<u>1-4</u>	<u>506</u>	<u>0.6 CH₄</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>245</u>	<u>0.6 CH₄</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>540</u>	<u>0.6 CH₄</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson 33238 [Signature] 3900000
 Assistant Mine Foreman 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 11-7 2009 Section or Area Examined #1 Section H622
 Time of Examination: from 506 a.m. or p.m. to 535 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 541 A.M. P.M.
 Report received by Brash Boony (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 L CC	Not Bolted	Reflectors
2. #1 Entry	Water in face	Reported
3. #2-3-3R-4 Entries	None Observed	Reported
4. OCH ₄ 20.802		
5. OPPM c/o		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
L013	18,680		
OCH ₄			
20.802			
OPPM c/o			

Remarks: Power Center
Travelways
Chargers
Intake Phone - Outby Chamber } All ok at time of report

OCH₄ 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 W. Va. Mining Laws and 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. Brash Boony Assistant Foreman 1122-A Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman [Signature] Assistant Foreman
 Superintendent or Assistant

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

Date 11-7-9 Shift Day Area or Section #1 section HG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. # 12 CC	Not Bolted	Bolted + Reflectors
2. #1 Entry	Water in face	Running Pump
3. <u>0CH4</u>		
4. <u>20.80L</u>		
5. <u>0ppm c/o</u>		
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 12-4	7-733A	0 CH4!	11.		
2.			12.		
3. 12-4	9-930am	0	13.		
4.			14.		
5. 12-4	11-1130am	0	15.		
6.			16.		
7. 12-4	1-200pm	0	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	710am	0 CH4!	6.		
2. Return	1102am	0	7.		
3. Return	105pm	0	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. 5 sect 15 RUP at 645AM.

Bruce Perry Assistant Mine Foreman 1122-A Certificate No. Cash Mine Foreman-Mine Manager 39112000 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-7 2009 Section or Area Examined H6 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 A.M. 2:35 P.M.
 Report received by Rick Hutchins (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1LT</u>	<u>0% CH4</u>	<u>Tagged & Reported</u>
2. <u>1</u>	<u>Water</u>	<u>Tagged & Reported</u>
3. <u>2</u>	<u>Scrap</u>	<u>Tagged & Reported</u>
4. <u>3</u>	<u>n/o</u>	<u>Reported</u>
5. <u>4</u>	<u>part Bolted</u>	<u>Tagged + Reported</u>
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>18,000</u>		
<u>20.80%</u>			
<u>0% CH4</u>			
<u>0% CO</u>			

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

Intake phone OK
Air Chamber OK

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

Signed By Brandon Bowling Certificate No. 1102-A
 Assistant Foreman _____ Certificate No. _____
 Countersigned Rick Hutchins Mine Manager Mine Foreman Certificate No. 3906-1088
 Assistant Foreman _____ Certificate No. _____
Rick Hutchins Assistant Foreman Certificate No. 37569
 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-7-09 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 LT</u>	<u>0 % CH₄</u>	<u>Corrected</u>
2.	<u>1</u>	<u>P/B</u>	<u>{ }</u>
3.	<u>2</u>	<u>WATER</u>	
4.	<u>4</u>	<u>Scrap</u>	
		<u>part Bolted</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>3:59 pm</u>	<u>0 % CH₄</u>			
<u>Return</u>	<u>7:58 pm</u>	<u>0 % CH₄</u>			

Number of Bolts Tested 10

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #1 3:50 pm RCP
Section Safe + Clear at Time of Exam

Rick Hutchens 31569 Carl Cook 35062018
Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use indelible Pencil or Ink

Date of Examination 11-7-09 Section or Area Examined Hdgate 22
 Time of Examination: from 10:00 a.m. or p.m. to 10:30 a.m. or p.m.
 Was this report phoned to outside: yes no
 By whom Rick Hutchens Time 11:12 P.M.
 Report received by _____ (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>HL</u>	<u>scrap</u>	<u>Rick Hutchens</u>
2. <u>#2 return air</u>	<u>water</u>	<u>Ripond</u>
3. <u>2</u>	<u>n/p</u>	<u>---</u>
4. <u>1</u>	<u>n/p</u>	<u>---</u>
5. <u>3</u>	<u>n/p</u>	<u>---</u>
6. <u>4/12</u>	<u>not a/d</u>	<u>Rick Hutchens</u>
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>18,360</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: traveways of haulways clean at time
of EXAM
Power Cuts - OK
any change - OK
return air - OK

CO 0.9
O2 20.8%

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

Signed By Rick Hutchens 37569 Certificate No. 32294 Certificate No.
 Countersigned [Signature] 37569 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 11-8-09 Shift 3rd Area or Section Hdgate 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1st</u>	<u>Scrap</u>	<u>Relocated</u>
2. <u>2 extra extra</u>	<u>water</u>	<u>Spilled</u>
3. <u>4th</u>	<u>not with</u>	<u>Relocated</u>
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1.			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 Foreman 32254 Certificate No. [Signature] Mine Foreman-Mine Manager 3206008 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 11-8 2009 Section or Area Examined #1 section HG22
 Time of Examination: from 345 a.m. or p.m. to 430 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kenny Farmer Time 535 A.M. P.M.
 Report received by Burch Bony (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
#1 L CC	Scrap Cut	Reflectors
#1-2-3-4	None Observed	Reported
#4A CC	Not Bolted	Reflectors
OCH ₄ !		
20.802		
OPPM c/o		

Air Measurements

Location	CFM	Location	CFM
LOB	18,680		
OCH ₄ !	20.802		
OPPM c/o			

Remarks: Power Center
Travelways
chargers
Intake Phone - Outby Chamber } All OK at time of exam.

OCH₄! 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 W. Va. Mining Laws and 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. 30284
 Countersigned: [Signature] Mine Manager Mine Foreman Certificate No. 3100008
[Signature] Assistant Foreman Certificate No. 1102-A
[Signature] Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-8-9 Shift Day Area or Section HG 22#

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1L CC	Scrap cut	Bolted + Reflectors
2.	#4R CC	Not Bolted	Bolted + Reflectors
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

1.	Location	Time	Methane Content	11.	Location	Time	Methane Content
1.	1L-4R	7-730am	0 CH ₄ !	11.			
2.				12.			
3.	1L-4R	9-430am	0	13.			
4.				14.			
5.	1L-4R	11-1130am	0	15.			
6.				16.			
7.	1L-4R	1-200pm	0	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	702am	0 CH ₄ !	6.			
2.	Return	1103am	0	7.			
3.	Return	101pm	0	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 6

Number of Bolts Torqued Above Range _____ Below Range _____

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) pg. 3 sect A of RUP at 652 am.

[Signature] Assistant Mine Foreman 1122-A Certificate No. [Signature] Mine Foreman-Mine Manager 39000008 Certificate No. _____ Superintendent or Assistant

Report shall be signed when made

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-8 2009 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 Brandia Bowling Time 2:45 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>1LT</u>	<u>0% ch4</u> <u>Scrap Cut</u>	<u>Taged/Reported</u>
2. <u>1</u>	<u>N/O</u>	<u>Reported</u>
3. <u>2</u>	<u>N/C/O</u>	<u>Reported</u>
4. <u>3</u>	<u>Scrap -15 FT</u>	<u>Taged + Reported</u>
5. <u>4</u>	<u>N/O</u>	<u>Reported</u>
6. <u>4R</u>	<u>N/O</u>	<u>Reported</u>
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>17,000</u>	_____	_____
<u>20.802</u>	_____	_____	_____
<u>0% ch4</u>	_____	_____	_____
<u>0% CO</u>	_____	_____	_____

Remarks: powercenter, R-ways, haulage, CHARGERS Clean
at Time of Exam

INTAKE phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Brandia Bowling 1122-A Certificate No. _____ Assistant Foreman _____ Certificate No. _____
 Countersigned Rick Hutchens 37569 Mine Manager Mine Foreman _____
Rick Hutchens 37569 Assistant Foreman _____ Superintendent or Assistant _____

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-8-09 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1LT</u>	<u>0%CH4</u>	<u>Scrap</u>
2.	<u>1</u>	<u>N/A</u>	<u>Corrected</u>
3.	<u>2</u>	<u>N/A/D</u>	<u>Corrected</u>
4.	<u>3</u>	<u>Scrap Cut</u>	<u>Corrected</u>
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1LT-4RT</u>	<u>4:00-4:20</u>	<u>0 %CH4</u>			
<u>1LT-4RT</u>	<u>6:00-6:25</u>	<u>0 %</u>			
<u>1LT-4RT</u>	<u>8:00-8:30</u>	<u>0 %</u>			
<u>1LT-4RT</u>	<u>10:00-10:30</u>	<u>0 %CH4</u>			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>3:59pm</u>	<u>0 %CH4</u>			
<u>Return</u>	<u>7:58pm</u>	<u>0 %CH4</u>			

Number of Bolts Tested 10

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 5 #14 3:50pm RCP
Section Safe & Clear at Time of Exam

Rick Hutchins 39569 [Signature] 39060-08
Assistant Mine Foreman 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 11-8 209 Section or Area Examined HG 22
 Time of Examination: from 1600 a.m. or p.m. to 1630 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom _____ Time 14 A.M. 14 P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #11	None observed	
2. 1-2	Water in it	Reported
3. 2R	Scrap Crit	Refuses being
4. 3	needs cleaned & dusted	Reported
5. 4	needs cleaned	
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
intake	17230		

Remarks: 26 cfm
power center & chargers hallways air base intake phone
clear 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 W. Va. Mining Laws and the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Certificate No. Kyle Anderson 33238 Certificate No.
 Countersigned _____ 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 11-8 Shift 3rd Area or Section H. B. 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1C	none observed	
2.	1-2	Water in it	Reported
3.	2 R	Scrap Cut	Reflectors being
4.	3	needs cleaned & dusted	Reported
5.	4	needs cleaned	
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-4	1230	104	0.2 CH ₄	11.		
2.					12.		
3.	1-4	505	535	0.2 CH ₄	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	108	0.2 CH ₄	6.			
2.				7.			
3.	Return	541	0.2 CH 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) _____

Ryle Anderson 33238 [Signature] 390000
 Assistant Mine Foreman 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 11-9-09 20 Section or Area Examined H622
 Time of Examination: from 4:20 a.m. or p.m. to 5:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:43 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
<u>1st</u>	<u>near 065</u>	<u>rep</u>
<u>1</u>	<u>H2O</u>	<u>rep</u>
<u>2</u>	<u>needs deep</u>	<u>rep</u>
<u>3</u>	<u>not Boil</u>	<u>reflect</u>
<u>4</u>	<u>needs deep</u>	<u>rep</u>
<u>5</u>	<u>needs deep</u>	<u>rep</u>
<u>6</u>		
<u>7</u>		
<u>8</u>		
<u>9</u>		
<u>10</u>		

Air Measurements

Location	CFM	Location	CFM
<u>COB</u>	<u>19.344</u>		

Remarks: OCHP 20, 802, 200 all tested
trucks, unless OK at some of Ex
air and chrs OK

Intake Phone OK
Stelco Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 33238 Assistant Foreman [Signature] Certificate No. 36025
 Countersigned [Signature] Mine Manager Mine Foreman [Signature] Assistant Foreman [Signature] Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-9-09 Shift Reef Area or Section #6 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1st	None Obs	None
2.	1	4 2nd	None
3.	2	roofs deep	None
4.	2nd	not better	None
5.	3	roofs deep	None
6.	4th	roofs deep	None
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Reef	7:00	0	6.		
2.			7.		
3. Reef	12:00	0	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) disassembled per # 6
of acp #19 at 7:54 Am

[Signature] 36526 [Signature] 390600

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

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-09 2009 Section or Area Examined H6 # 22
 Time of Examination: from 100 a.m. or 200 p.m. to 200 a.m. or 200 p.m.
 Was this report phoned to outside: Yes no
 By whom Deane Jones Time 2:45 P.M.
 Report received by _____ (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. # 1 Entry	Scrap Cut	Reflectors
2. # 2 + 2 R CC	None Observed	Reported
3. # 3	Needs Cleaned & Dusted	Reported
4. # 4 OCHY!	Scrap Cut	Reflectors
5. 20.802		
6. O P P M C / O		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	17,785		
OCHY!			
20.802			
O P P M C / O			

Remarks: Power Center
 Chargers
 Travelways
 Intake Phone
 Outby Shelter
 All OK at time of exam.

OCHY! 20.802 O P P M C / O

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 36020
 Countersigned [Signature] Mine Manager [Signature] Mine Foreman [Signature] 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 11-9-09 Shift EVE Area or Section H6 # 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 Entry	Scrap cut	Bolted + Reflectors
2.	#3	Needs cleaned + dusted	Cleaned + dusted
3.	#4 OCH ₄	Scrap cut	Bolted + Reflectors
4.	20.802 OPRMC/O		
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-4	4-435pm	0 CH ₄	11.			
2.				12.			
3.	1-4	6-630pm	0	13.			
4.				14.			
5.	1-4	8-840pm	0	15.			
6.				16.			
7.	1-4	10-1050pm	0	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	401pm	0 CH ₄	6.			
2.				7.			
3.	Return	805pm	0	8.			
4.				9.			
5.	Return	1002pm	0	10.			

Number of Bolts Tested 7

Number of Bolts Torqued Above Range _____ Below Range _____

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 set 10 RUP at 347pm.
Roof + Ribs talk + checks.

Branch Boy Assistant Mine Foreman 1122-A Certificate No. _____ Mine Foreman-Mine Manager 3906 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-9 209 Section or Area Examined 1 section
 Time of Examination: from 1000 a.m. or p.m. to 1200 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 1/20 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>Scrap Guf</u>	<u>Reflectors hung</u>
2. <u>2-3</u>	<u>None Observed</u>	
3. <u>4</u>	<u>None Observed</u>	
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
	<u>17160</u>		

Remarks: 26 dth
power center & chargers hallways air base intake phone
Clear at least of exam
208

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Brian Boy 1122-A Kyle Anderson 33038
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned John Cook 3706002
 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 11-9 Shift 3rd Area or Section 1 seal

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>Scrap Cut</u>	
2.	<u>2 and 3</u>	<u>N/O</u>	
3.	<u>4</u>	<u>N/O</u>	
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-4</u>	<u>1252</u>	<u>0.6 CH₄</u>	11.			
2.				12.			
3.				13.			
4.	<u>1-4</u>	<u>535</u>	<u>0.6 CH₄</u>	14.	<u>535</u>	<u>0.6</u>	
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>148</u>	<u>0.6 CH₄</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>540</u>	<u>0.6 CH₄</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson 33238 Code Book 3300000
 Assistant Mine Foreman 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 11-10-09 Section or Area Examined #6 22
 Time of Examination: from 5:00 a.m. or p.m. to 5:35 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:40 A.M. P.M.
 Report received by Deary (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1st City 2</u>	<u>new obs</u>	<u>nap</u>
2.	<u>1</u>	<u>scaput</u>	<u>reflect</u>
3.	<u>2</u>	<u>new obs</u>	<u>nap</u>
4.	<u>2nd</u>	<u>new obs</u>	<u>nap</u>
5.	<u>3</u>	<u>needs add tag</u>	<u>rep</u>
6.	<u>4</u>	<u>new obs</u>	<u>nil</u>
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>19,200</u>		

Remarks: 0 City 20,800 OCO detectors
trucks - bulbs ok at time of exam
pic and charges ok.

Shelter Chamber - OK
Intake Phone - OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 33238
 Countersigned Deary Certificate No. 3602r
 Countersigned [Signature] Certificate No. 3501111
 Assistant Foreman
 Superintendent or Assistant

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

Date 11-20-09 Shift Permy Area or Section H6 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1st	near OGI	near
2.	1	Scrap	clean 3/1 key
3.	2	near OGI	nil
4.	2nd	near OGI	nil
5.	3	needs clean notes	clean notes
6.	4	near OGI	near
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content %	Location	Time	Methane Content
1-4	7:00	0	11.		
1-4	7:15	0	12.		
1-4	8:00	0	13.		
1-4	11:00	0	14.		
1-4	11:50	0	15.		
1-4	1:00	0	16.		
1-4	1:05	0	17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content %	Location	Time	Methane Content
ret.	7:00	0	6.		
ret.	12:00	0	7.		
			8.		
			9.		
			10.		

Number of Bolts Tested 13

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 the 5 of rep # 5 at 6:57 AM

[Signature] Assistant Mine Foreman Certificate No. 36526 [Signature] Mine Foreman-Mine Manager Certificate No. 39000 [Signature] Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 11-10 2009 Section or Area Examined H6 #22
 Time of Examination: from 100 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 230 A.M. P.M.
 Report received by Bruce Bony (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 L CC	None Observed	Reported
2. #1 Entry OCH ₄	Needs Cleaned + Dusted	Reported
3. #2-3 20.802	None Observed	Reported
4. #4 O ₂ PPM	Needs Cleaned	Reported
5. #3R c/o	Part Bolted	Reflectors
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	24,395		
OCH ₄			
20.802			
O ₂ PPM c/o			

Remarks: Power Centers - Chargers
Travelways
Intake Phone - Outby Chamber } All ok at time of exam.
OCH₄ 20.802 O₂ PPM c/o

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

Signed By [Signature] Certificate No. 36525
 Countersigned [Signature] Mine Manager [Signature] Mine Foreman [Signature] Assistant Foreman [Signature] Certificate No. 1122-A
 Assistant Foreman _____ Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-10-09 Shift EVE Area or Section H6#22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 Entry	Needs Cleaned + Dusted	Cleaned + Dusted
2.	#4 Entry	Needs Cleaned	Cleaned + Dusted
3.	#3 R.C.C.	Part Bolted	Bolted + Reflectors
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1L-4	4-4:35pm	0 CH ₄ %	11.			
2.				12.			
3.	1L-4	6-6:30pm	0	13.			
4.				14.			
5.	1L-4	8-8:30pm	0	15.			
6.				16.			
7.	1L-4	10-11:00pm	0	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	4:05pm	0 CH ₄ %	6.			
2.				7.			
3.	Return	8:03pm	0	8.			
4.				9.			
5.	Return	10:04pm	0	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 Sect 7 RLP at 3:49 pm.

Brush Bay Assistant Mine Foreman 1122-A Certificate No. Carlin Coal Mine Foreman-Mine Manager 3900000 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-16 209 Section or Area Examined 1 section
 Time of Examination: from 1008 a.m. or p.m. to 1100 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Time 1110 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>1L</u>	<u>None Observed</u>	<u>Reflected</u>
2. <u>1</u>	<u>Scarf Cut</u>	<u>Reflected</u>
3. <u>2L</u>	<u>Part bolted</u>	<u>Reflected</u>
4. <u>3-3R</u>	<u>Nuts changed</u>	<u>Reported</u>
5. <u>4</u>	<u>None Observed</u>	
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>intake</u>	<u>18,900</u>		

Remarks: 20A4
power center charges air base
clean at time of exam
intake phone needs batteries
20.8

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Certificate No. 1122-A
 Countersigned Kyle Anderson Assistant Foreman Certificate No. 33230
[Signature] Mine Manager / Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-10 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1L</u>	<u>N/O</u>	<u>Reflector being</u>
2. <u>1</u>	<u>Scrap Cut</u>	<u>11</u>
3. <u>2L</u>	<u>Part bolted</u>	<u>11</u>
4. <u>3R-3R</u>	<u>nuts cleaned & deoiled</u>	<u>Reported</u>
5. <u>4</u>	<u>N/O</u>	
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-4</u>	<u>110</u>	<u>0.6 cft/y</u>	11.		
2.			12.		
3. <u>1-H</u>	<u>501</u>	<u>0.6 cft/y</u>	13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>153</u>	<u>0.6 cft/y</u>	6.		
2.			7.		
3. <u>Return</u>	<u>546</u>	<u>0.6 cft/y</u>	8.		
4.			9.		
5.			10.		

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Nyle Anderson
Assistant Mine Foreman

37238
Certificate No.

Carl Cook
Mine Foreman-Mine Manager

39060-00
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-11-09 20 Section or Area Examined H622
 Time of Examination: from 6:00 a.m. or p.m. to 5:41 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Cyle Anderson Time 0743 A.M. P.M.
 Report received by Deag (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1st</u>	<u>near OGS</u>	<u>map</u>
2. <u>1</u>	<u>Scrap up</u>	<u>reflect</u>
3. <u>2nd</u>	<u>needs level notes</u>	<u>per</u>
4. <u>2</u>	<u>near OGS</u>	<u>are</u>
5. <u>3</u>	<u>near OGS</u>	<u>up</u>
6. <u>3rd</u>	<u>near OGS</u>	<u>up</u>
7. <u>4</u>	<u>near OGS</u>	<u>will</u>
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C083</u>	<u>181210</u>		

Remarks: OCHY 20.802 CO detected Tuleys
& Tuleys OK at time of Exr p.c.
encl Chasr OK.

Stetter Chamber →
Intake Phone →

This is to certify that: (a) This section of the mine was properly examined by me; (b) all violations of the W. Va. Mining Laws and 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 Cyle Anderson Certificate No. 33238
 Countersigned Deag Mine Manager Mine Foreman Certificate No. 3620
 Assistant Foreman
 Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-11-09 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1st	new o6s	none
2.	1	Scraps	clean up Bolts
3.	2nd	needs decl. dustey	decl. ruled
4.	3	new o6s	rip
5.	3	new o6s	rip
6.	3rd	new o6s	rip
7.	4	new o6s	rip
8.			
9.			
10.			

Examination for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. net	7:00	0	6.		
2. net	12:00	0	7.		
3.			8.		
4.			9.		
5.			10.		

Number of Bolts Tested 14

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed net # 702

Rep # 31 out 7:00 Am.

Deo Assistant Mine Foreman 36526 Certificate No. Carla Mine Foreman-Mine Manager 370000 Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-11 Section or Area Examined H6 #22
 Time of Examination: from 100 a.m. or p.m. to 200 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Deano Jones Time 230 A.M. P.M.
 Report received by Deano Jones (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 LCC OCHYL	None Observed	Reported
2. #1 Entry OCHYL	Needs Cleaned & Dusted	Reported
3. #2 RCC OCHYL	Scrap Cut	Reflectors
4. #2-3 OCHYL	None Observed	Reported
5. #4 OCHYL	Needs Cleaned	Reported
6. #4 REC OCHYL	Part Bolted	Reflectors
7. OCHYL		
8. 20.802		
9. OPPM c/o		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB OCHYL	19,670		
20.802			
OPPM c/o			

Remarks: Power Center
 Chargers
 Outby Shifter
 Intake Phone
 Travelways
 OK at time of exam.

OCHYL 20.8 02 OPPM c/o

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

Signed By Deano Jones Certificate No. 36525 Assistant Foreman Deano Jones Certificate No. 1122-A
 Countersigned Deano Jones Mine Manager Mine Foreman 3700008
 Assistant Foreman
 Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-11-9 Shift EVE Area or Section #H6 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	# 1 Entry 2CH4l.	Needs cleaned + dusted	Cleaned + dusted
2.	# 2R CC 0CH4l.	scrap cut	Bolled + reflectors
3.	# 4 2CH4l.	Needs cleaned	Cleaned + dusted
4.	# 4R CC CH4l.	Part Bolled	Bolled + Reflectors
5.			
6.	Oppm C/O		
7.	20.802		
8.	# 4R Punch thru Int.	Spotted 5 cable bolts	
9.	# 2 Int.	Spotted 4 cable bolts	
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1L-4R	4:00-4:35pm	0 CH4l.	11.		
2.			12.		
3. 1L-4R	6-6:30pm	0 CH4l.	13.		
4.			14.		
5. 1L-4R	8-8:29pm	0 CH4l.	15.		
6.			16.		
7. 1L-4R	10-10:50pm	0 CH4l.	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:10pm	0 CH4l.	6.		
2.			7.		
3. Return	8:05pm	0 CH4l.	8.		
4.			9.		
5. Return	10:02pm	0 CH4l.	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. 5 Sect 15 REP at 3:45 pm.

Burdh Puz Assistant Mine Foreman 1122-A Certificate No. Charles Cook Mine Foreman-Mine Manager 3500000 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-11-09 20 11 Section or Area Examined #1 Section H-2-B
 Time of Examination: from 10:20 a.m. or 10:50 a.m. or 11:00 a.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Dowling Time 11:15 AM
 Report received by Steve Geln (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	CH ₄	Violation or Hazardous Condition	Action Taken
#1 left	OK	None observed	None
#1 left upper	OK	Scrap cut	Reflected
#1	OK	None observed	None
#2	OK	None Observed	" "
#3	OK	None Observed	" "
#4	OK	None Observed	" "
#4 Right	OK	None Observed	" "
#4 Right Lower	OK	Needs cleaned	Reported
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
L-0-3	18,470		

Remarks: OK CH₄ approx 20.3% detected at time of exam
Track, Travelways, powercables, chargers, Hodgecamps, intake phone, refuge chambers OK at L-0-B.
Section needs Add cleaning 1 line of breaks inby feeder - BB

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Dowling Certificate No. 1122-A
 Preshift-Mine Examiner
 Countersigned Steve Geln Assistant Foreman
 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 11-12-09 Shift 3rd Area or Section Headgate 22 18ation

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1 Left</u>	<u>NU</u>	<u>reported</u>
2.	<u>1 Left upper</u>	<u>needs dusted</u>	<u>reported</u>
3.	<u>1</u>	<u>needs cleared</u>	<u>reported</u>
4.	<u>2</u>	<u>Scrap</u>	<u>reported</u>
5.	<u>3</u>	<u>None observed</u>	<u>reported</u>
6.	<u>4</u>	<u>needs additional clearing</u>	<u>reported</u>
7.	<u>4R</u>	<u>NU</u>	<u>reported</u>
8.			
9.			
10.			

Examinations for Methane in Working Places

1.	Location	Time	Methane Content	11.	Location	Time	Methane Content
	<u>40B</u>		<u>20.382</u>				
2.				12.			
3.				13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

1.	Location	Time	Methane Content	6.	Location	Time	Methane Content
	<u>Return</u>	<u>150</u>	<u>0% CH4</u>				
2.	<u>Return</u>	<u>320</u>	<u>0% CH4</u>	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 Foreman

1981A
Certificate No.

[Signature]
Mine Foreman-Mine Manager

3906004
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-12-09 20 Section or Area Examined H622
 Time of Examination: from 5:00 a.m. or p.m. to 5:47 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Shawn Walker Time 5:47 A.M. P.M.
 Report received by Dea [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>Wld</u>	<u>needs</u>	<u>buy</u>
2. <u>Wld</u>	<u>needs</u>	<u>buy</u>
3. <u>Wld</u>	<u>needs</u>	<u>buy</u>
4. <u>2</u>	<u>Scrap</u>	<u>reflect</u>
5. <u>3</u>	<u>needs</u>	<u>buy</u>
6. <u>4</u>	<u>needs</u>	<u>buy</u>
7. <u>Wld</u>	<u>needs</u>	<u>buy</u>
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,382</u>		

Remarks: 2 of 4 W. 802 - 500 defects - under
2 delays at time of exam p.c. case
Chaper OK

Shelter Chamber OK
Intake phone OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 1911A
 Preshift Mine Examiner
 Countersigned [Signature] Certificate No. 36826
 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 11-10-09 Shift Day 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 items 1-10.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for items 1-10.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for items 1-5.

Number of Bolts Tested 13

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 #70 + rep #22 at 6:55 AM

Assistant Mine Foreman [Signature] Certificate No. 3652 Mine Foreman-Mine Manager [Signature] Certificate No. 390000 Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 11-12 2009 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 Dean Jones Time 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
Lower 1. 1LT	0% ch4 N/O	Reported
Upper 2. 1LT	0% ch4 P/B	Taged + Reported
3. 1	0% ch4 N/O	Reported
4. 2	0% ch4 N/C/O	Reported
5. 3, 4, 4R	0% ch4 N/O	Reported
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	17,955		
20.802			
0% ch4			
0% CO			

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

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 36526
 Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] Mine Manager Mine Foreman Certificate No. 3506000
 Assistant Foreman Richard Hutchens 37569
 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-12-09 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
UPPER	1LT	0% CH ₄	Corrected
2.	2	0% CH ₄	Corrected
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1LT-4RT	4:00-4:30	0 % CH ₄	11.		
2. 1LT-4RT	6:00-6:30	0 %	12.		
3. 1LT-4RT	8:00-8:30	0 %	13.		
4. 1LT-4RT	10:00-10:30	0 % CH ₄	14.		
5.			15.		
6.			16.		
7. 20.8°			17.		
8. 0% CH ₄			18.		
9. 0% C°			19.		
10.			20.		

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 80
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 9 part G+H 3:50 pm RCP
Section Safe & Clear at Time of EXAM

Rick Hutchins 37569 Carl Cook 38000
Assistant Mine Foreman 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 11-12-09 20 Section or Area Examined #1 Section H6-22
 Time of Examination: from 10:00 a.m. or P.M. to 10:30 a.m. or P.M.
 Was this report phoned to outside: Yes no
 By whom Rich Hutchens Time 11:10 P.M.
 Report received by Steve Glen (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	CH ₄	Violation or Hazardous Condition	Action Taken
1. #1 left Lower	OK	None observed	None
2. #1 left Upper	OK	Scrap Cut	Reflected
3. #1	OK	None observed	None
4. #2 Right	OK	None observed	None
5. #3	OK	None observed	None
6. #4	OK	None observed	None
7. #4 Right	OK	None observed	None
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>L-0-2</u>	<u>18,110</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: OK CH₄ open c₂ 20.2% detected at time of exam
Travelways, chiggers, power centers, haulageways, intake phone, Intake Air chamber 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 W. Va. Mining Laws and 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 37569 Certificate No. _____ Assistant Foreman _____
 Countersigned Steve Glen 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 11-13-09 Shift OWL Area or Section Head Gate 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. _____	_____	_____
2. _____	_____	_____
3. <u>Section</u>	_____	_____
4. <u>Idol</u>	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

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 Foreman
 1479-A Certificate No.
 [Signature] Mine Foreman-Mine Manager
 [Signature] Certificate No.
 _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-13-09 20 Section or Area Examined H022
 Time of Examination: from 3:00 a.m. or p.m. to 3:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Jason Thomas Time 5:30 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 Room	new obs	new
2 new	no 30 lder	reflects
3 1	needs a del aly	new
4 2	new obs	new
5 2A	Scrap out	reflects
6 3	new obs	new
7 4	new obs	new
8 4B	new obs	new
9		
10		

Air Measurements

Location	CFM	Location	CFM
C013	14,600		

Remarks: OCH 20.802 wco detected Trukeys
2 Trukeys ok at time of Exam P.C. day
charges ok.

sketch chamber OK
Intake phone OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 147A-A
 Countersigned [Signature] Mine Manager Mine Foreman Certificate No. 36020
 Assistant Foreman
 Superintendent or Assistant

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Date 11-13-09 Shift Day Area or Section 1602

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Includes handwritten entries like '1 Room', 'None obs', 'Action Taken'.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Includes handwritten entries for locations '1-4' and times like '7:00'.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Includes handwritten entries for location 'Ret' and time '7:00'.

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 with 10 at NCP on turning W! at 15:45

Assistant Mine Foreman [Signature] Certificate No. 36025 Mine Foreman-Mine Manager [Signature] Certificate No. 39000 Superintendent of Ass'n [Signature]

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-13 2009 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 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. RM 1	0% CH ₄	Reported
2. RM 2	0%	Tagged & Reported
3. 1, 2	0%	Reported
4. 2R	0%	Tagged Reported
5. 3, 4, 4R	0% CH ₄	
6.	N/O	
7.	P/B	
8.	N/O	
9.	Scrap cut	
10.	N/O	

Air Measurements

Location	CFM	Location	CFM
L0B	15,640		
20.8 ⁰²			
0% CH ₄			
0% CO			

Remarks: powercenter, Chargers, R-ways, Haulage Clear at Time of Exam
Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 36528 Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] Mine Manager Mine Foreman _____ Certificate No. _____
Rick Hutchens Assistant Foreman Certificate No. 37569 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-13-09 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	Rm 2	0% CH ₄	Corrected
2.	2 RT	0% CH ₄	Corrected
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. Rm 1 - 4RT	4:00-4:30	0% CH ₄	11.		
2. Rm 1 - 4RT	6:00-6:30	0%	12.		
3. Rm 1 - 4RT	8:00-8:30	0%	13.		
4. Rm 1 - 4RT	10:00-10:30	0% CH ₄	14.		
5.			15.		
6. 20.80%			16.		
7. 0% CH ₄			17.		
8. 0% CO			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 5 # 14 3:50 pm RCP
Section Safe & Clean at time of Exam

Rick Hutchins 37569 Assistant Mine Foreman 3900000 Mine Foreman-Mine Manager 3900000 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-13-09 2009 Section or Area Examined 22 head gate
 Time of Examination: from 1000 a.m. or 1030 a.m. or 1030 p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Time 1125 A.M. P.M.
 Report received by Jason Thomas 1479A (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. Room #1	needs cleaned dusted	Reported
2. Room #2	none observed	Reported
3. 1 Face	none observed	Reported
4. 2 Face	none observed	Reported
5. 2 Right	none observed	Reported
6. 3 Face	part bolted	Tagged-Reported
7. 4 Right	scrap cut	tagged-Reported
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Last open Break	19,320		

Remarks: powercenter
 Chargers
 Air Bay
 Intake phone
 Travelways
 } 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 W. Va. Mining Laws and 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.
 Countersigned Jason Thomas 330000 Assistant Foreman Certificate No. 1479A
 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 11-14-9 Shift 3rd Area or Section Head gate 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. <u>Section</u>	_____	_____
5. <u>Idol</u>	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

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) Read page 9 para 6-H to crew at 11:30pm. S.C.S.R'S OK

[Signature]
Assistant Mine Foreman

1477-A
Certificate No.

[Signature]
Mine Foreman-Mine Manager

[Signature]
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 11-14-09 Section or Area Examined A622
 Time of Examination: from 4:00 a.m. or p.m. to 4:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom [Signature] Time 5:20 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 Row</u>	<u>needs Seal</u>	<u>Rep</u>
2. <u>2 Row</u>	<u>H2O In Face</u>	<u>Rep</u>
3. <u>1</u>	<u>new obs</u>	<u>rep</u>
4. <u>2</u>	<u>new obs</u>	<u>rep</u>
5. <u>2nt</u>	<u>new obs</u>	<u>rep</u>
6. <u>3</u>	<u>part bolted</u>	<u>refliten</u>
7. <u>4nt</u>	<u>Not Bolted</u>	<u>refliten</u>
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>COB</u>	<u>19,444</u>		

Remarks: Oct 20-802 OCO detected tables;
tables ok at time of Exam P.C. any
charges ok.

Stalk Chamber OK
Intake phone OK

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

Signed By [Signature]
 Preshift-Mine Examiner
 Countersigned [Signature]
 Mine Manager Mine Foreman
 Assistant Foreman

1129-A
 Certificate No.
3900000

[Signature]
 Assistant Foreman
36020
 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 11-14-09 Shift my Area or Section 1+622

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for items 1-10.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for items 1-10.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for items 1-10.

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 with 7 of rep # 23 at 6:57 AM

Assistant Mine Foreman [Signature] Certificate No. 3625 Mine Foreman-Mine Manager [Signature] Certificate No. 3910 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-14 2009 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 Drew Jones Time 2:30 A.M. PM
 Report received by Rick Hutchens
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>RM 1</u> <u>0% CH4</u>	<u>need Clean</u>	<u>Reported</u>
2. <u>Rm 2</u> <u>0% CH4</u>	<u>Water</u>	<u>Taged & Reported</u>
3. <u>1, 2</u> <u>0% CH4</u>	<u>N/D</u>	<u>Reported</u>
4. <u>3</u> <u>0% CH4</u>	<u>part Bolt</u>	<u>Taged & Reported</u>
5. <u>4, 4R</u> <u>0% CH4</u>	<u>N/C/D</u>	<u>Reported</u>
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>16,875</u>	_____	_____
<u>20.8°</u>	_____	_____	_____
<u>0% CH4</u>	_____	_____	_____
<u>0% CO</u>	_____	_____	_____

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

Intake phone OIK
Air Chamber OIK

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

Signed By [Signature] Certificate No. 36525 Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] Mine Manager _____ Mine Foreman [Signature] Certificate No. 39000
[Signature] Assistant Foreman _____ Certificate No. 37569 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-14-09 Shift EVC Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	Rm 1	0 % CH ₄	Need Clean
2.	Rm 2	0 %	water
3.	3	0 %	part Bolted
4.	4, 4R	0 % CH ₄	N/C/D
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 0-4	4:00-4:30	0 % CH ₄	11.		
2. 0-4	6:00-6:30	0 %	12.		
3. 0-4	8:00-8:30	0 %	13.		
4. 0-4	10:00-10:30	0 % CH ₄	14.		
5.			15.		
6.			16.		
7. 20.802			17.		
8. 0 % CH ₄			18.		
9. 0 % CO			19.		
10.			20.		

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 # 1 3:50pm RCP
Check SCSR'S OK

Rick Hultine 37569 [Signature] 3900000
Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-14 20 9 Section or Area Examined H G 22
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchins Time 11:30 P.M.
 Report received by Ryle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>Lower room</u>	<u>needs cleaned</u>	<u>Reported</u>
2. <u>upper room</u>	<u>Water</u>	<u>Reported</u>
3. <u>1</u>	<u>None observed</u>	<u>Reported</u>
4. <u>2L</u>	<u>Scrap Cut</u>	<u>Reflectors hung</u>
5. <u>2R</u>	<u>None observed</u>	<u>Reported</u>
6. <u>3R</u>	<u>Part Bolted</u>	<u>Reflectors hung</u>
7. <u>4</u>	<u>Part Bolted</u>	<u>Reflectors hung</u>
8. <u>4R</u>	<u>needs cleaned</u>	<u>Reported</u>
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>intake</u>	<u>18,360</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: 0% CHH
power center & chargers hallways intake phone air base
clean 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 W. Va. Mining Laws and 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. Ryle Anderson 33238 Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman
 _____ Assistant Foreman
 _____ Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date _____ 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. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

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) _____

Assistant Mine Foreman

Certificate No.

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-15 2009 Section or Area Examined HG #22
 Time of Examination: from 330 a.m. or p.m. to 400 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brought Out Time 540 P.M.
 Report received by Kyle (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. L Room	needs cleaned	Reported
2. upper Room	Water in it	Reported
3. L	needs cleaned	Reported
4. R	needs cleaned	Reported
5. R	needs cleaned	Reported
6. R	Part bolted	Reflectors hung
7. 4	Part bolted	Reflectors hung
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LDB 0.0 CH ₄	18410		

Remarks: Power Center
 Chargers
 Travelways
 Intake Phone -
 Outby shelter - } all clean at time of exam
 208
 0.2 CH₄

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 1122-A
 Preshift Mine Examiner Assistant Foreman
 Countersigned Chris Cook 390622
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-15-09 Shift Day Area or Section H6#22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
Lower Room OCHYL	Needs Cleaned	Cleaned + Dusted
Upper Room OCHYL	Water in Face	Pumped water
#1 Entry OCHYL	Needs Cleaned	Cleaned + Dusted
#1 R CC OCHYL	Needs Cleaned	Cleaned + Dusted
#2 OCHYL	Needs Cleaned	Aligned + Dusted
#3 R CC OCHYL	Part Bolted	Bolted + Reflectors
#4 OCHYL	Part Bolted	Reflectors - Bolted
	20.802	Down
	0ppm c/o	

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1L-4R	7-330am	0CHYL	11.		
1L-4R	9-430am	0CHYL	12.		
1L-4R	11-1130am	0CHYL	13.		
1L-4R	1-40pm	0CHYL	14.		
			15.		
			16.		
			17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	703am	0CHYL	6.		
Return	1102am	0CHYL	7.		
Return	100pm	0CHYL	8.		
			9.		
			10.		

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 2 Sect. A RCP at 650am.

Brand Perry 1122.4 Charles Cook 3906000
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Report shall be signed when made

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-15 2009 Section or Area Examined HG-22
Time of Examination: from 1:00 a.m. or p.m. to 1:40 a.m. or p.m.

Was this report phoned to outside: Yes no
By whom Brandon Bowling Time 2:35 P.M.

Report received by Rick Hutchens
(Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. Rm 1	0% ch4 N/C/D	Reported
2. Rm 2	0% ch4 water	Reported
3. 1	0% ch4 N/O	Reported
4. 2L	0% ch4 Not Bolt	Taged + Reported
5. 3	0% ch4 N/O	Reported
6. 4, 4R	0% ch4 need CLEAN	Reported
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
L0B	18,700		

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

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Brant Bony 1122A
Preshift-Mine Examiner Certificate No.

Countersigned Chris Cook 390000
Mine Manager Mine Foreman

Rick Hutchens 37569
Assistant Foreman Superintendent or Assistant

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 11-15-09 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. Rm 1	0%CH4 N/C / D	Corrected
2. Rm 2	0%CH4 water	Reported
3. 2L	0%CH4 NOT Bolt	Corrected
4. 4, 4R	0%CH4 need Clean	Corrected
5.		
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 0-4R	4:00-4:30	0%CH4	11.		
2. 0-4R	6:00-6:30	0%	12.		
3. 0-4R	8:00-8:30	0%	13.		
4. 0-4R	10:00-10:30	0%CH4	14.		
5.			15.		
6. 20.802			16.		
7. 0%CH4			17.		
8. 0%CO			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	3:55pm	0%CH4	6.		
2. Return	7:57pm	0%CH4	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 9 #6 3:50pm RCP

Section Safe & Clear at Time of Exam

Rich Hutchens 37569 Assistant Mine Foreman 3900000 Superintendent or Assistant

Assistant Mine Foreman

Certificate No.

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

Report shall be signed when made

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-15-07 20 Section or Area Examined #1 Section H6-2d
 Time of Examination: from 10:00 a.m. or 10:30 a.m. or 11:00 p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time 11:15 A.M.
 Report received by Steve Gelski (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	CHY	Violation or Hazardous Condition	Action Taken
1.	Room #1	0%	Needs cleaned	Reported
2.	Room #2	0%	Water in Face Passage	Reported
3.	#1	0%	Scrap cut	Reflected
4.	#2 left	0%	Needs cleaned & dusted	Reported
5.	#3	0%	None observed	None
6.	#4	0%	Part bolted	Reflected
7.	#4 Right	0%	None observed	None
8.				
9.				
10.				

Air Measurements

Location	CFM	Location	CFM
L-0-3	18,360		

Remarks: 0% CHY oppm co, do not see detected at time of exam
Track, roadway, haulage way, power center, chargers, intake phone, refuge etc 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 W. Va. Mining Laws and the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Certificate No.
 Preshift-Mine Examiner
 Countersigned Steve Gelski 35000
 Mine Manager Mine Foreman
 Assistant Foreman
 Assistant Foreman
 Superintendent of 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. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

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) _____

Assistant Mine Foreman

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 11-16-09 20 09 Section or Area Examined #1 sec HG 22
 Time of Examination: from 3:00 a.m. or p.m. to 3:35 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom _____ Time _____ A.M. _____ P.M.
 Report received by Brought out (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	Room #1	0% CH ₄ Needs cleaned	Reported
2.	Room #2	0% CH ₄ Water in face	Reported
3.	#2	0% CH ₄ Part Bolted	Reflectors
4.	#2 LEFT	0% CH ₄ Needs cleaned and dusted	Reported
5.	#3	0% CH ₄ None observed	Reported
6.	#4	0% CH ₄ Part Bolted Needs 1 Row	Reflectors
7.	4 Right	0% CH ₄ None observed	Reported
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	18,415		

Remarks: 0% CH₄, 20.8% O₂, 0ppm C.O. Detected At Time of exam

Track, Travelways, Haulage ways, Powercenters, Chargers, Intake Phone, Outby Chamber, 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 W. Va. Mining Laws and 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] 1947-A Certificate No. [Signature] Assistant Foreman 1122-A Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman [Signature] Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-16-09 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. Contains handwritten entries for rooms #1, #2, entry #1, ZLCC, and #4.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for location 1L-4R at various times.

Examinations for Methane in Return Aircourses

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

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. 4 Sect 12 RCP at 6:45 AM, SCSR's checks OK.

Assistant Mine Foreman: Brad Bay 1122-A. Mine Foreman-Mine Manager: [Signature]. Certificate No. 3906000. Superintendent or Assistant: [Signature].

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-16 2009 Section or Area Examined #6-22
 Time of Examination: from 1:00 a.m. or p.m. to 1:40 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 Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. Rm 1	0 % CH ₄ N/C	Reported
2. Rm 2	0 % N/C	Reported
3. 1	0 % N/O	Reported
4. 2L	0 % N/O	Reported
5. 3, 3R	0 % N/O	Reported
6. 4	0 % CH ₄ N/C/D	Reported
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
L0B	18,214		
0 % CH ₄			
20.8 O ₂			
0 % CO			

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

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Blash Bowry 1122-A Assistant Foreman Certificate No. _____
 Countersigned Chris Cook 3906022 Mine Manager Mine Foreman
Rick Hutchens 37569 Assistant Foreman Superintendent or Assistant

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

Date 11-16-09 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken	
1.	Rm 1	0% CH ₄	N/C	Corrected
2.	Rm 2	0% CH ₄	N/C	Corrected
3.	4	0% CH ₄	N/C/D	Corrected
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	0-4	4:00-4:30	0% CH ₄	11.			
2.	0-4	6:00-6:30	0%	12.			
3.	0-4	8:00-8:30	0%	13.			
4.	0-4	10:00-10:30	0% CH ₄	14.			
5.				15.			
6.	20.80%			16.			
7.	0% CH ₄			17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	4:33pm	0% CH ₄	6.			
2.	Return	7:58pm	0% CH ₄	7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested 8
 Number of Bolts Torqued Above Range 0 Below Range 0
 If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) Page 5 #11 3:50pm RCP
Check SCSR'S OK

Rick Hutchins 37569
 Assistant Mine Foreman 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 11-16 2009 Section or Area Examined HG 22
 Time of Examination: from 10:00 a.m. or 10:30 a.m. or 6 p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time 11:10 P.M.
 Report received by Mary Col 1947-A (Signed)

Violations and other Hazardous Conditions Observed and Reported

#	Location	Violation or Hazardous Condition	Action Taken
1. <u>#0</u>	<u>0% CH4</u>	<u>part bottles</u>	<u>Reflectors</u>
2. <u>#2</u>	<u>0% CH4</u>	<u>Cleaned and Dusted</u>	<u>Reported</u>
3. <u>#2 LEFT</u>	<u>0% CH4</u>	<u>NONE OBSERVED</u>	<u>Reported</u>
4. <u>#3</u>	<u>0% CH4</u>	<u>NONE OBSERVED</u>	<u>Reported</u>
5. <u>#4</u>	<u>0% CH4</u>	<u>NONE OBSERVED</u>	<u>Reported</u>
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>19,670</u>		

Remarks: 0% CH4, 20.8% O2, 0PPM C.O., Detected At Time of exam
Powercenters, Chargers, Travelways, Walkways, Haulageways,
Intake Phone, Outby Chamber, 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 W. Va. Mining Laws and the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Rick Hutchens 37569 Certificate No.
 Preshift-Mine Examiner
 Assistant Foreman
 Certificate No.
 Countersigned _____
 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. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

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) _____

Assistant Mine Foreman

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 11-17 2009 Section or Area Examined HG 22
 Time of Examination: from 3:05 a.m. or p.m. to 3:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom _____ Time _____ A.M. _____ P.M.
 Report received by Brought out (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	# 0	0% CH ₄ Not Bolted	Reflectors Reported
2.	# 1	0% CH ₄ Need cleaned and dusted	Reported
3.	# 2	0% CH ₄ None observed	Reported
4.	# 3	0% CH ₄ None observed	Reported
5.	# 4	0% CH ₄ None observed	Reported
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	18,547		

Remarks: 0% CH₄, 20.8% O₂, 0ppm C.O., Detected At time of exam
Travelways, walkways, Haulageways, Intake Phone, outby
Chamber, chargers, 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 W. Va. Mining Laws and 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. 1947-A Assistant Foreman [Signature] Certificate No. 1122-A
 Countersigned [Signature] Mine Manager / Mine Foreman
 Assistant Foreman _____ Superintendent or Assistant _____

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-17-9 Shift Day Area or Section H6 #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#0 Entry OCH ₄ !	Not Bolted	Bolted + Reflectors
2.	#1 Entry OCH ₄ !	Needs cleaned + Dusted	Cleaned + Dusted
3.	OPPMc/O		
4.	20.802		
5.	#0 Int.	Spotted 5 cable Bolts	
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	70AM	OCH ₄ !	6.			
2.				7.			
3.	Return	903AM	OCH ₄ !	8.			
4.				9.			
5.	Return	100PM	OCH ₄ !	10.			

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. 3 sect B of RCP at 652AM.

Brash Berg Assistant Mine Foreman 1122-A Certificate No. Carl Cook Mine Foreman-Mine Manager 3 21/2 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-17 2009 Section or Area Examined HB-22
 Time of Examination: from 1:00 a.m. or p.m. to 1:45 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Bowling Time 2:30 A.M. PM.
 Report received by Rick Hutchins (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. RM 1	0 %CH ₄	Reported
2. 0	0 %CH ₄	Tagged & Reported
3. 1	0 %CH ₄	Reported
4. 2h	0 %CH ₄	Reported
5. 2	0 %CH ₄	Tagged & Reported
6. 3,4	0 %CH ₄	Reported
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	18,940		
20.802			
0 %CH ₄			
0 %CO			

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

Intake phone OK
Air Chamber OK

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

Signed By Brandon Bowling Certificate No. 1122-A Assistant Foreman
 Countersigned Rick Hutchins Mine Manager Mine Foreman Certificate No. 37569
Richard Hutchins 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 11-17-09 Shift EvC Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>0</u>	<u>0 % CH4</u>	<u>Scrap Cut</u>
2.	<u>2L</u>	<u>0 % CH4</u>	<u>n/c</u>
3.	<u>2</u>	<u>0 % CH4</u>	<u>Scrap Cut</u>
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>3:58 pm</u>	<u>0 % CH4</u>			
<u>Return</u>	<u>7:55 pm</u>	<u>0 % CH4</u>			

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 5 #10+11 3:50pm RCP

Section) Safe & Clear at Time of EXAM

Richard Hutchins 37569 Assistant Mine Foreman 390000 Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-17 Section or Area Examined H622
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom _____ Time 1120 P.M.
 Report received by Ryle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>10</u> <u>2p cttf</u>	<u>Not Batted</u>	<u>Reflectors being Reported</u>
2. <u>16</u>	<u>None Observed</u>	<u>Reported</u>
3. <u>1</u>	<u>None Observed</u>	<u>Reported</u>
4. <u>2</u>	<u>Scrap Set</u>	<u>Reflectors being Reported</u>
5. <u>3-4</u>	<u>None Observed</u>	<u>Reported</u>
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>intake</u>	<u>18590</u>		

Remarks: electrical power center & chargers hullways air base intake phone clear 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 W. Va. Mining Laws and 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. Ryle Anderson Assistant Foreman 33238 Certificate No.
 Countersigned Charles Cook Mine Manager Mine Foreman 3506000
 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 11-17 Shift 3rd Area or Section H B 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	0	Not bolted	Reflecting having
2.	1L	none observed	Reported
3.	5	none observed	Reported
4.	2	Scrap feet	Reflecting having
5.	3-4	none observed	Reported
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-4	1255	128	0.6%	11.		
2.					12.		
3.	1-4	530	530	0.6%	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	0.6%	6.			
2.				7.			
3.	Return	535	0.6%	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 Adams
Assistant Mine Foreman

330358
Certificate No.

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

Report shall be signed when made

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-18-09 20 H622 Section or Area Examined
 Time of Examination: from 6:00 a.m. or p.m. to 6:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 6:04 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>CHY7</u>	<u>not balanced</u>	<u>reflects</u>
2. <u>alt</u>	<u>new obs</u>	<u>nil</u>
3. <u>2</u>	<u>new obs</u>	<u>nil</u>
4. <u>3</u>	<u>scrap up</u>	<u>reflects</u>
5. <u>4</u>	<u>new obs</u>	<u>nil</u>
6. <u>5</u>	<u>new obs</u>	<u>nil</u>
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>23,000</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: Setty 20.802 PC detected in deep?
Heiler ok got fine OR EX PC and
charges ok.

Chamber Shelter ok
Intake Phone ok

This is to certify that: (a) This section of the mine was properly examined by me; (b) all violations of the W. Va. Mining Laws and 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. 33238 Assistant Foreman [Signature] Certificate No. 3612
 Countersigned _____ Mine Manager Mine Foreman _____ Assistant Foreman _____ Superintendent or Assistant

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

Date 11-18-0 Shift day 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>net to head</u>	<u>B Hwy</u>
2. <u>2</u>	<u>net OGS</u>	<u>net</u>
3. <u>2</u>	<u>net OGS</u>	<u>net</u>
4. <u>3</u>	<u>Scraping</u>	<u>Order B Hwy</u>
5. <u>4</u>	<u>net OGS</u>	<u>net</u>
6. <u>6</u>	<u>net OGS</u>	<u>net</u>
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>net</u>	<u>7:00</u>	<u>0</u>	6.		
2. <u>net</u>	<u>12:00</u>	<u>0</u>	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) discussed net # 7 of
net # 31 at 7:00 am

[Signature] 36325 [Signature] 5300000

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-18 2009 Section or Area Examined H6 #22
 Time of Examination: from 180 a.m. or p.m. to 200 a.m. or p.m.
 Was this report phoned to outside: Yes No
 By whom Deano Funes Time 230 P.M.
 Report received by Frank Bow (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. # 1 Room OCH4!	None Observed	Reported
2. # 2 Room OCH4!	None Observed	Reported
3. # 1 Entry OCH4!	None Observed	Reported
4. # 1 CC OCH4!	Scrap Cut	Reflectors
5. # 2 Entry OCH4!	None Observed	Reported
6. # 3 Entry OCH4!	Part Bolted	Reflectors
7. # 4 Entry OCH4!	Not Bolted	Reflectors
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB OCH4!	16,180		
20.802			
0 PPM c/o			

Remarks: Power Center
 Travelways
 Chargers
 Intake Phone
 Outby Chamber

All OK at time of exam.

OCH4! 20.8 0 PPM c/o

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

Signed By [Signature] Certificate No. 36525 Assistant Foreman [Signature] Certificate No. 1122-A
 Countersigned [Signature] Mine Manager [Signature] Mine Foreman [Signature]
 Assistant Foreman _____ Superintendent or Assistant _____

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-18-9 Shift EVE Area or Section H6 # 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	# 1/2 CC OCHYL	Scrap cut	Bolted + Reflectors
2.	# 3 Entry OCHYL	Part Bolted	Bolted + Reflectors
3.	# 4 Entry OCHYL	Not Bolted	Bolted + Reflectors
4.			
5.	# 3 Int	Cable Bolted Int.	
6.	# 2 Entry	Cable Bolted heading	
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	O-4	4-430pm	0 CHYL	11.			
2.				12.			
3.	O-4	6-630pm	0 CHYL	13.			
4.				14.			
5.	O-4	8-830pm	0 CHYL	15.			
6.				16.			
7.	O-4	10-100pm	0 CHYL	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	403pm	0 CHYL	6.			
2.				7.			
3.	Return	802pm	0 CHYL	8.			
4.				9.			
5.	Return	1004pm	0 CHYL	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. 4 Sect 14 RCP at 348 pm.
Roof + Rib checks.

Brock Bony Assistant Mine Foreman 1122-A Certificate No. [Signature] Mine Foreman-Mine Manager 3506000 Certificate No. _____ Superintendent or Assistant

Report shall be signed when made

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-18 Section or Area Examined HQ 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 11/3 P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. / Room L	None Observed	Reflector being Reported
2. 2R R	Scrap Cut	Reflector being Reported
3. 1	None Observed	Reflector being Reported
4. 2	Part Botted	Reflector being Reported
5. 3	Scrap Cut	Reflector being Reported
6. 4	W O	Reflector being Reported
7. 2 Right	Ribs are wide	Reflector being Reported
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
intake	18174		

Remarks: 2084
power center & changers hallways air base and intake phone
Clear at time of exam
208

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 King Certificate No. 1122-4
 Preshift-Mine Examiner
 Countersigned Kyle Anderson Certificate No. 3900074
 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 11-18 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1R Left	None observed	Reflectors hung
2.	2R Right	Scrap Cut	Reflectors hung
3.	1	None observed	Reflectors hung
4.	2	Part bolted	Reflectors hung
5.	3	Scrap Cut	Reflectors hung
6.	4	None observed	
7.	2 Right	Ribs are wide	needs spot bolted
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-4	1-4 1236	104 0.2 dH ₁₁	12.			
2.				13.			
3.	1-4	1-4 446	535 0.2 dH ₁₁	14.			
4.				15.			
5.				16.			
6.				17.			
7.				18.			
8.				19.			
9.				20.			
10.							

Examinations for Methane in Return Aircourses

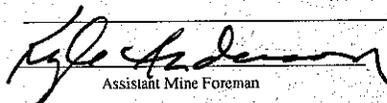
	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	1241	0.2 dH ₁₁	6.			
2.				7.			
3.	Return	540	0.2 dH ₁₁	8.			
4.				9.			
5.				10.			

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) _____

 33238  3900000
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Report shall be signed when made

PRESHIFT-MINE EXAMINER'S REPORT

Use Indelible Pencil or Ink

Date of Examination 11-19-29 20 Section or Area Examined H622
 Time of Examination from 4:00 a.m. or p.m. to 8:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:40 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1 Down</u>	<u>new vbs</u>	<u>rep</u>
2. <u>2 Down</u>	<u>needs drill and</u>	<u>rep</u>
3. <u>1st</u>	<u>needs drill</u>	<u>rep</u>
4. <u>1</u>	<u>scrap cut</u>	<u>reflects</u>
5. <u>2</u>	<u>new vbs</u>	<u>rep</u>
6. <u>3</u>	<u>not bolted</u>	<u>reflects</u>
7. <u>4</u>	<u>new vbs</u>	<u>rep</u>
8. <u>2 Down</u>	<u>new vbs</u>	<u>rep</u>
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>WB</u>	<u>18.32</u>		

Remarks: 20% 20% 20% detected timber
charges OK
at time of exam p.c. and

Intake Place
Shelter Chamber

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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

33238
 Certificate No.

[Signature]
 Assistant Foreman

Countersigned [Signature]
 Mine Manager Mine Foreman

3900008

Assistant Foreman

Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-19-09 Shift Day Area or Section 14602

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1 Run</u>	<u>new UG</u>	<u>new</u>
2. <u>0</u>	<u>needs just into</u>	<u>developed</u>
3. <u>1st</u>	<u>needs just</u>	<u>develop</u>
4. <u>1</u>	<u>sharp</u>	<u>develop</u>
5. <u>2</u>	<u>new UG</u>	<u>new</u>
6. <u>3</u>	<u>hot bolts</u>	<u>Bo Heel</u>
7. <u>4</u>	<u>has UG</u>	<u>new</u>
8. <u>Run</u>	<u>new UG</u>	<u>new</u>
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed next 6:00

net #18 at 6:49 Am

[Signature] Assistant Mine Foreman 36525 Certificate No. [Signature] Mine Foreman-Mine Manager 35060-08 Certificate No. [Signature] Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-19 2009 Section or Area Examined H6 #22
 Time of Examination: from 100 a.m. or 200 a.m. or pm
 Was this report phoned to outside: no yes
 By whom Deane Jones Time 225 P.M.
 Report received by Branch Boy (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. # 1 Room OCH4!	None Observed	Reported
2. # 2 Room OCH4!	None Observed	Reported
3. # 3 Room OCH4!	Needs Cleaned + Dusted	Reported
4. # 0 Entry OCH4!	Needs Cleaned + Dusted	Reported
5. # 1 Entry OCH4!	Needs 1 Row Bolt	Reflectors
6. # 2 Entry OCH4!	Needs Cleaned + Dusted	Reported
7. # 3 Entry OCH4!	Needs Cleaned + Dusted	Reported
8. # 4 Entry OCH4!	Needs 1 Row spotted Rib	Reflectors
9.		
10. <u>OPPM c/o 20.802</u>		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>21,670</u>		
<u>OCH4!</u>			
<u>20.802</u>			
<u>OPPM c/o</u>			

Remarks: Power Center
Travelways
Chagers
Outby chamber
Intake phone
All OK at time of exam,

OCH4! 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 W. Va. Mining Laws and 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. 3652
 Assistant Foreman [Signature] Certificate No. 1122-A
 Countersigned _____ Mine Manager _____ Mine Foreman
 _____ Assistant Foreman
 _____ Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-19-9 Shift EVE Area or Section H6 #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#3 Room	Needs cleaned & dusted	Cleaned + Dusted
2.	#0 Entry	Needs cleaned + dusted	Cleaned + Dusted
3.	#1 Entry	Needs 1 Row	Spotted up 1 Row Bolts
4.	#2-3 Entry's	Needs cleaned + dusted	Cleaned + Dusted
5.	#4 Entry	Needs Bolt in Rib	Spotted 1 Bolt
6.			
7.	#1 Entry -	Cable bolted 2 Int.	
8.			
9.	Machine Dusted	Return - Intake Air courses + Section	
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	0-4	4-430pm	0 CH4%	11.			
2.				12.			
3.	0-4	6-630 pm	0 CH4%	13.			
4.				14.			
5.	0-4	8-830pm	0 CH4%	15.			
6.				16.			
7.	0-4	10-1100pm	0 CH4%	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	401pm	0 CH4%	6.			
2.	Return	803pm	0 CH4%	7.			
3.	Return	1000pm	0 CH4%	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 6
 Number of Bolts Torqued Above Range _____ Below Range _____
 If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine): Pg. 4 sect. 8 Rep at 347 pm.

Bruce Perry Assistant Mine Foreman 1122-A Certificate No. Charles Cook Mine Foreman-Mine Manager 3300000 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-19 20? Section or Area Examined H822
 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 _____ Time 1108 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.	1R ob off 4	None Observed	Reported
2.	2R	red gloves dented	Reflectors hung
3.	1	part B dented	Reflectors hung
4.	2	Scrap Gut	Reported
5.	3	None Observed	Reported
6.	4	None Observed	Reported
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
intake	20,200		

Remarks: Lower center
Hullways
charged
air base
intake phone } Clear at time of exam

Pits are flaking
ob off 4 208

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Branch Boas Certificate No. 1122-A Kyle Anderson Assistant Foreman Certificate No. 33038
 Countersigned Conrad Boas Mine Manager Mine Foreman Certificate No. 3906000
 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. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

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) _____

Assistant Mine Foreman

Certificate No.

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-20-09 20 Section or Area Examined H602
 Time of Examination: from 4:30 a.m. or p.m. to 5:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom _____ 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>CHY 9</u>	<u>new obs</u>	<u>rep</u>
2.	<u>Gen</u>	<u>" "</u>	<u>rep</u>
3.	<u>Gen</u>	<u>new obs</u>	<u>rep</u>
4.	<u>0</u>	<u>H2O In Face</u>	<u>rep</u>
5.	<u>1</u>	<u>Part Boltup</u>	<u>reflector</u>
6.	<u>2</u>	<u>Scraper</u>	<u>reflector</u>
7.	<u>10 ft</u>	<u>needs leaf</u>	<u>rep</u>
8.	<u>3</u>	<u>needs add leaf</u>	<u>rep</u>
9.	<u>4</u>	<u>new obs</u>	<u>rep</u>
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>19,210</u>		

Remarks: Oct 20 2010 20100 detected tunnels
2 tunnels at time of Exam p.c. and
charges ok (Ribs Flaking off)

Intake Phone → OK
Shelter Chamber → OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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] 1941A Certificate No. [Signature] 36528 Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman [Signature]
 Assistant Foreman _____ Superintendent or Assistant _____

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-20-09 Shift Day Area or Section H 622

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>Room</u>	<u>none</u>	<u>none</u>
2.	<u>Room</u>	<u>none</u>	<u>none</u>
3.	<u>Room</u>	<u>none</u>	<u>none</u>
4.	<u>30</u>	<u>Hand In Face</u>	<u>pumped</u>
5.	<u>1</u>	<u>part bolted</u>	<u>Bolted CO2</u>
6.	<u>2</u>	<u>scrap</u>	<u>Bolted CO2</u>
7.	<u>128</u>	<u>rocks chd</u>	<u>cleaned & Overhead</u>
8.	<u>3</u>	<u>rocks add clay</u>	<u>cleaned</u>
9.	<u>4</u>	<u>none</u>	<u>none</u>
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>7:00-7:30</u>	<u>0.0%</u>			
<u>1-4</u>	<u>9:00-9:30</u>	<u>0.0%</u>			
<u>1-4</u>	<u>11:00-11:30</u>	<u>0.0%</u>			
<u>1-4</u>	<u>1:00-1:30</u>	<u>0.0%</u>			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>128</u>	<u>6:59</u>	<u>0.0%</u>			
<u>128</u>	<u>10:59</u>	<u>0.0%</u>			

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) went over roof control plan with crew at 7:00 AM

Charles Cook
Assistant Mine Foreman

3900000
Certificate No.

Charles Cook
Mine Foreman-Mine Manager

3900000
Certificate No.

Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-20 20 09 Section or Area Examined H6 #22
 Time of Examination: from 100 a.m. or p.m. to 200 a.m. or p.m.
 Was this report phoned to outside: Yes No
 By whom Andy Coalson Time 240 P.M.
 Report received by Bruce Kroy (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Room OCH4?	None Observed	Reported
2. #2 Room OCH4?	None Observed	Reported
3. #3 Room OCH4?	Scrap cut	Reflectors
4. #1 Entry OCH4?	None Observed	Reported
5. #2 Entry OCH4?	None Observed	Reported
6. #2R cc OCH4?	Not potted	Reflectors
7. #3 Entry OCH4?	Needs cleaned + dusted	Reported
8. #4 Entry OCH4?	None Observed	Reported
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	21,102		
OCH4?			
20.802			
OPPM c/o			

Remarks: Power Center
Travelways
Chargers
Intake Phone
Outby shelter
 All ok at time of exam.
OCH4? 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 W. Va. Mining Laws and 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 Andy Coalson 3906008 Certificate No. Bruce Kroy Assistant Foreman 1122-A Certificate No.
 Countersigned Andy Coalson Mine Manager Mine Foreman 3906008
 Assistant Foreman
 Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date: 11-20-09 Shift: EVE Area or Section: H6#22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#3 Room	0CH4!	Bolted + Reflectors
2.	#2 R CC	0CH4!	Bolted + Reflectors
3.	#3	Needs Cleaned + Dusted	Cleaned + Dusted
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	0-4	4-430pm	0 CH4!	11.			
2.	0-4			12.			
3.	0-4	6-630pm	0 CH4!	13.			
4.				14.			
5.	0-4	8-830pm	0 CH4!	15.			
6.				16.			
7.	0-4	10-1100pm	0 CH4!	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	401pm	0 CH4!	6.			
2.				7.			
3.	Return	800pm	0 CH4!	8.			
4.				9.			
5.	Return	1002pm	0 CH4!	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. 4 sect 15 of RCP at 350pm,

Brand Perry Assistant Mine Foreman
1122A Certificate No.
[Signature] Mine Foreman-Mine Manager
[Signature] Certificate No.
 Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-20-09 20 Section or Area Examined H6#22
 Time of Examination: from 16 a.m. or p.m. to 11 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Time 1100 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

#	Location	Violation or Hazardous Condition	Action Taken
1.	2 Room OCH ₄	1 Row Bolts down	Reported
2.	#1 2003 rd Room OCH ₄	None observed	Reported
3.	1 OCH ₄	None observed	Reported
4.	2 2R OCH ₄	clean and dusted near	Reported
5.	3 OCH ₄	part Bolted	Reported
6.	4 OCH ₄	scrap	Reported
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
20,820			
0% CH ₄			
20.8 O ₂			

Remarks: Chargers OK Power center OK travelways OK
feeder OK All OK at time of exam
Soft ribs - Flaking 1-4 Entries

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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] 11224 Certificate No. [Signature] Assistant Foreman 14414 Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman 390000
 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 11-21-09 Shift 3rd Area or Section 18a Hcs #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. Room 1	None observed	Reported
2. Room 2	down 1 Row of Bolts	Reported
3. Room 3	None observed	Reported
4. 1 2 2 R	None observed	Reported
5. 3	needs clean up dusted	Reported
6. 4	not Bolted	Reported
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. Loc 20028			11.		
2.			12.		
3.			13.		
4. 0% CH4			14.		
5. 20.8 O2			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) Section needs additional cleaning

[Signature]
Assistant Mine Foreman

194A
Certificate No.

[Signature]
Mine Foreman-Mine Manager

35000
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-21-09 20 Section or Area Examined H622
 Time of Examination: from 4:00 a.m. or p.m. to 4:45 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Shawn Weather Time 5:22 A.M. P.M.
 Report received by Shawn Weather (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1 Row</u>	<u>none</u>	<u>none</u>
2. <u>2 Row</u>	<u>not to be kept (Row)</u>	<u>reflected</u>
3. <u>3 Row</u>	<u>none</u>	<u>ref</u>
4. <u>1</u>	<u>none</u>	<u>ref</u>
5. <u>2</u>	<u>none</u>	<u>ref</u>
6. <u>2nd</u>	<u>none</u>	<u>ref</u>
7. <u>3</u>	<u>needs to be cut</u>	<u>ref</u>
8. <u>4</u>	<u>not to be kept</u>	<u>reflected</u>
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>23,028</u>		

Remarks: OCB of 2080 OCS detected Turleys
2 Turleys OK at time of Exam p.c.
and Charges OK

Shelter chamber OK
Intake phone OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 Shawn Weather Certificate No. 1444
 Countersigned Shawn Weather Mine Foreman
Shawn Weather Assistant Foreman
Shawn Weather Superintendent or Assistant
 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 11-21-09 Shift day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. 1 Room	new o6s	new Bolter
2. 2 Room	not Bolter (new)	new Bolter
3. 3 Room	new o6s	new
4. 1	new o6s	new
5. 2	new o6s	new
6. 2st	new o6s	new
7. 3	needs steel nicks	Deepalpa & silver
8. 4	not Bolter	Bolter
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. ret	12:00	0	6.		
2.			7.		
3. ret	12:00	0	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) disassembled 707 rep #20 at 6:56 AM

[Signature] Assistant Mine Foreman Certificate No. 36225 [Signature] Mine Foreman-Mine Manager Certificate No. 39222 [Signature] Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-21 2009 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 Dean Jones Time 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. Rm's 1, 2, 3	0% CH ₄	Reported
2. 1, 2	0%	Reported
3. 2 RT	0%	Reported
4. 3	0%	Reported
5. 4	0% CH ₄	Tagged & Reported
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	18,698		
20.8 ⁰²			
0% CH ₄			
0% CO			

Remarks: powercenter, R-ways, Haulage, Chargers Clear at Time of Exam
Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. 30028 Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] Mine Manager Mine Foreman [Signature] Certificate No. 39000
Rick Hutchens Assistant Foreman 37569 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-21-09 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>ZRT</u>	<u>0% ch4</u>	<u>N/C/D</u>
2.	<u>4</u>	<u>0% ch4</u>	<u>Scrap Cut</u>
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>0-4</u>	<u>4:00-4:30</u>	<u>0% ch4</u>			
<u>0-4</u>	<u>6:00-6:30</u>	<u>0%</u>			
<u>0-4</u>	<u>8:00-8:30</u>	<u>0%</u>			
<u>0-4</u>	<u>10:00-10:30</u>	<u>0% ch4</u>			
<u>20.802</u>					
<u>0% ch4</u>					
<u>0% C°</u>					

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>4:33pm</u>	<u>0% ch4</u>			
<u>Return</u>	<u>7:58pm</u>	<u>0% ch4</u>			

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 6 17+18 3:55pm RCP
Section Safe & Clear at Time of Exam.

Richard Hutchins 37569 Richard Hutchins 37569
Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant