Nord Side Punys PRESHIFT - ONSHIFT and DAILY REPORT

Dig Ellis Suitel

Company	Performance COAL	
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Form 6-1489 (March 1970)

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

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This is to certify that: (a) This s	ection of the mine was ry conditions and prac	properly examined by tices observed by me	y me, (b) all violatio are listed in this repo	ns of the Federal C ort.	oal Mine Health and S	atety
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Preshift	Mine Examiner	Certificate No.		Assistant Forem	an Certifica	ste No.
Mine Manager	Mine Foreman		AR	mal Dooks	334	172
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Use Indelible

Assistant Mine

Certificate No.

DAILY AND ONSHIFT REPORT

Report shall be

Pencil or In	k		MINE FOREMA	N OR	ASSISTANT	7× 10	sign	ed when mad
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Mine Foreman-Mine Manager

Certificate No.

Use Indelible Pencil or Ink 11 - 22	PRESHIFT-MINE EXAMINER'S REPORT	Nast	Report shall be signed when made PUMPS
Date of Examination Time of Examination: from 5.3 a.m. or form Was this report phoned to outside: Yes By whom Misse Bajley	20 Section or Area Examined	1001/1 ₁	
Report received by	1947-A	F.W.	
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Act of 1969 and other unsatisfactory conditions	mine was properly examined by me, (b) all violations of the and practices observed by me are listed in this report.	e Federal Coal Mi	ne Health and Safety
Signed By Preshift-Mine Examiner	Certificate No.	ssistant Foreman	Certificate No.
Countersigned Mine Manager—Mine Foreman	Julius Star Light 370	373.	
Assistant Foreman			
	Superintendent or	Assistant	

Certificate No.

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

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

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

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ate of Examination 11 310 me of Examination: from 310 as this report phoned to outside	7	am or p.m	O. 1. Section or Area Examined $ \begin{array}{cccc} \hline \text{Time} & \overline{S} \cdot O_2 & \overline{M} \end{array} $		10
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eport received by	(Signed)				
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Track, Travel OF exam Mile	Iways, Po	we center	examined by me. (b) all violations	es, Ok A	+ TiMe
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This is to certify that: (a) The Act of 1969 and other unsatisfa	Iways, Po	we center	examined by me, (b) all violations wed by me are listed in this report	es, Ok A	+ TiMe Mine Health and Safet
This is to certify that: (a) The Act of 1969 and other unsatisfa	Iways, Po	we/center	examined by me, (b) all violations wed by me are listed in this report	of the Federal Coal	+ 71Me

Pencil o	r Ink	· M	INE FUREMAN	VUR ASSIS	TANT		sign	ied when made
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Time of Examination: from Was this report phoned to outside	2 a.m. or On. to	_3a.m. or (m)		erio di Santonio.	
By whom Kustel G. Joh	<u> </u>	Time	А.М _24	∑	
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This is to certify that: (a) The	nis section of the mi	ine was properly examined by me	e, (b) all violations of	f the Federal Coal M	ine Health and Safety
Act of 1969 and other unsatisf	Junus 2	nd practices observed by me are l	naved in this report.		
Signed By	shift-Mine Examiner	Certificate No.	a de la compania de l Compania de la compania de la compa	Assistant Foreman	Certificate No
Countersigned William	1	3200eleg-			

DAILY AND ONSHIFT REPORT

Pencil or	r Ink	MIN	E FOREMAN	OR ASSISTANT	sign	ed when made
Date	Shift		Area or Section	on	<u></u>	Color of the Land
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Kemarks	(Statement as to General Cond	utions of Mine o	r Area of Mine)			
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Pencil or Ink	PRESHIPT-MINE EXAMINER'S REPORT	keport snall be signed when made
Date of Examination 11-23	2009 Section or Area Examined	North Pumps
Time of Examination: from 22 a.m. or	pan. to resistant or pink	,
Was this report phoned to outside: Yes	A.M	25 FW.
hepore received by	(Signed)	en de la companya de La companya de la co
- Ch	ations and other Hazardous Conditions Observed and Reported Violation or Hazardous Condition	i Action Taken
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MB Glory Hole or	None observed	vone
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4. Long Wall or	n None observes	MONE NONE
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Track, Traverways, Pou	vercenters, Pumps, D-BoxesonA	+ TIME OF EXAM
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This is to certify that: (a) This section of	the mine was properly examined by me, (b) all violations of t tions and practices observed by me are listed in this report.	he Federal Coal Mine Health and Safety
Signed By Sylvy Cale Preshift-Mine Exam	V947-A miner Certificate No.	Assistant Foreman Certificate No.
Countersigned Mine Manager—Mine Fore	eman 310 am Altre Gleb 3	/*\ <u>\</u>
Assistant For	eman	

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e	. Shift		Area or Sec	tion	7/4	<u> </u>	<u> </u>	ter tall.	
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Loca	tion		Violation or F	lazardous	Condition		Action t	aken	
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Pencil or Ink	RESHIFT-MINE EXA		sig	Report shall be ned when made
Date of Examination		Section or Area Examined	Punes Nou	<u>th.</u>
Time of Examination: from 2:00 a.m. or p.m. to	o U.S. 2. a.m., or p.m.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		• •
Was this report phoned to outside: Yes no By whom)	_ TimeA.M	P.M.	
Report received by(Signer				
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Remarks: DO CHA 20.8% Tupoh Translungs	O Cl P-Baxas	PC'S OK		
Remarks: DSO CH1 20.870 Tuach Translumys	O CD P-Bakas	PC'S OK		
Remarks: DG CH4 20.8% Tuach Translumnys	O CD P-Boxas	PC'S OK		
Remarks: D/O CHA 20.870 Track Translinarys	O CO P-basso	PC'S OK		

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

Signed By ______ Assistant Foreman

Assistant Foreman Certificate N

Countersigned Line Mine Manager—Mine Foreman

Assistant Foreman

Johnny 1 Jeely

334/2

Superintendent or Assistant

Russell Dunnoe 1536-A

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	Location	Violations and	other Hazard ous Co Violation or Haz		1997		Action taken	
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	Assistant Mine	Certificate No.		Foreman-Mine M		ertificate No.	Superinte	ndent or Assistant

PRESI	HIFT-MINE EXAMINER'S	S REPORT		eport shall be ned when made
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(Signed)	<u> 142 </u>		* * *	
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the mine wa	s properly examined by me, (butices observed by me are lists	o) all violations of the Fe	deral Coal Mine H	ealth and Safety
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miner	Certificate No.	Assistar	it Foreman	Certificate No.
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Certificate No.

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

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11 (16) 4 20/10			// 				
ırks (Sta	tement as to Gener	ral Conditions of !	Mine or Area of Mine	·		- California	i – Singi Propostorova

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink Date of Examination 1-24-09 Time of Examination: from 2-22 a.m. or p.n. Was this report phoned to outside: Yes.

PRESHIFT-MINE EXAMINER'S REPORT

Date of	Examination \\-a	4-09	20	Section or Area Ex	zaminod zaminod	Puras	Nocth	
Time of	Examination: from \$ 202 as report phoned to outside:	.m. or (130)n. to U.	31_a.m. or 6.m.	Gettion of Area Ex	. A Wisheria	\	-a-yvs-11	
	n			_ TimeA	.M	P.M.		
Report 1	received by				•			+ 51, 15 1901 4
	Location	Violations and		nditions Observed an Hazardous Condition		A	ction Taken	
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4	Glory Hole	OK.	None	Observed	_		None	
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This is t	to certify that: (a) This sect 969 and other unsatisfactory	ion of the mine w	vas properly examine	ed by me, (b) all viol	ations of the	e Federal Coal	Mine Health and	Safety
Signed I	or It IL	Syste		me are haten in this				
-	signed Wine Manager M	ne Examiner line Foreman	Certificate No.		As	sistant Foreman	Certif	cate No.
		ant Foreman						

Certificate No.

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date	Shift	<u> </u>	Area or Section		<u> </u>	<u>.//</u>	a tabasa na ing
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•	Location		Violation or Haza	rdous Condition		Action taken	
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Remarks (Statem		ral Conditions of Mine	or Area of Mine)				n cyn, ffir an ffisgel D
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Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

se Indelible encil or Ink	7.9	APEASE OF COM	AMINER'S REPOR		Report shall be signed when made
te of Examination \\\-\\	5 -09	20	Section or Area Exam	mined Cona	North
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s this report phoned to outside: whom	Tes Hole-		TimeA.N	ГP.М	
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is to certify that: (a) This section of 1969 and other unsatisfactory	on of the mine wa	s properly examine	d by me, (b) all violation	ons of the Federal Cos	al Mine Health and Safety
91	conditions and pra	cuces observed by I	me are listed in this rep	ort.	
ed By Preshift-Min	e Examiner	Certificate No.		Assistant Foreman	Certificate No.
ntersigned	ne Foreman	330laug=			
Mine Manager—Mi					,
Mine Manager—Mi	nt Foreman		Dlm (Millman	1539-74

Report shall be signed when made

		Violations and	other Hazardous Co	nditions Observed	and Reported	1 m 2 m 2 m 2 m 1 m 1 m 1 m 1 m 1 m 1 m	
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nemarks	(Statement as to Gene	ar Conditions of all	ine or zatea of milie)				

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e of Examination: from LÆ———a.m. or €.	.m) to ≦ΩΩa.m. or (o.m.)		
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is to certify that: (a) This section of the	he mine was properly examined by me, (b) all vio	olations of the Federal Coal Min s report.	e Health and Safety
of 1909 and other unsatisfactory condition	1536-4	A TAM LINDER OF THE STANDARD	
ned By Russell Grunne			
ned By Russell Summer Preshite Mine Examin ntersigned Mine Manager—Mine Forem	I Tillean-	Assistant Foreman	Certificate No.
ned By Russell Sunne Preshift-Mine Examin	an Italian John	Assistant Foreman.	Certificate No.

Report shall be signed when made

Superintendent or Assistant

Certificate No.

Mine Foreman-Mine Manager

Certificate No.

Assistant Mine

Date	Shift		Area or Section _				
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Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

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	d) and other Hazardous Condi	tions Observed a	nd Reported	£.		
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miles a size of the size of the	mine was properly evenined	by me (b) all w	iolations of th	e Federal Coal M	ine Healt	and Safet
This is to certify that: (a) This section of the r Act of 1969 and other unsatisfactory conditions	and practices observed by n	ne are listed in th	is report.			
	15500	·				
Signed By Preshift-Mine Examiner	Certificate No.		A	ssistant Foreman		Certificate No

Certificate No.

DAILY AND ONSHIFT REPORT

Report shall be

iteShir	(t <u>. </u>	Area or Section _		· - - - -		
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Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

Pencil or Ink	PRESHIPT-MINE EXAMINER'S REPORT	Report shall be signed when ma
Into of Evomination	20 Section or Area Examined	Pumps
Time of Examination: from 300 m or p.m. Was this report phoned to outside: Yes	no	
Report received by Blought OUT	TimeA.M	P.M.
(3)	gned)	and the second of the second o
Location Violation	rs and other Hazardous Conditions Observed and Report Violation or Hazardous Condition	ed Action Taken
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gned By Kussell Dun	moe	<u> 15</u>	36-14			
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By whom		!	L	Time	A.M	Р.М.	98037 ()	
Report received by	<i>[2</i>	(Signed)	ciki					
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Signed By	Preshift-Mine	Examiner	Optimicate, No.			Assistant For	eman	Certificate No.
Countersigned	Mine Manager—Min		- 38060AH					
	Assistan	t Foreman					<u></u>	
					Superintende	nt or Assistant		

Date .	Shift		Area or Sec	tion	· .	· · · · · · · · · · · · · · · · · · ·	
	Location	Violations and	other Hazardous Violation or h		Observed and Reporte ondition	d Action tak	
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Rem	arks (Statement as to General	Conditions of Min	ne or Area of Mine		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		

se Indelible moil or Ink	PRESHIFT-MINE EXAMINER'S REPORT	Report signed who	
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as this report phoned to outside: Yes	htout TimeA.M	P.M.	
port received by	(Signed)		and the second
Location	ions and other Hazardous Conditions Observed and Reported Violation or Hazardous Condition	Action Taken	
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Cby Hole 03	none Observed	none	·
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This is to certify that: (a) This section of Act of 1969 and other unsatisfactory condi	f the mine was properly examined by me, (b) all violations of itions and practices observed by me are listed in this report.	the Federal Coal Mine Healt	h and Safet
Signed By Preshift-Mine Exa	153089	Assistant Foreman	Certificate No
Countersigned Preshift-Mine Exa	3911/200	Nool	7347
Mine Manager-Mine Fo		mg/lugy	2011

Russell Dunne 1536-A

Report shall be signed when made

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Certificate No.

Assistant Mine

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of Examination 11-27		20 09 Section or Area E	camined Yun	05	· // .
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en e		other Hazardous Conditions Observed a	· ·		
Location	CHY	Violation or Hazardous Condition	1.	Action Taken	
North Mains	0%	NOWE OBSERVED		NONE	
Glory Hole	0%	None Observed		Work	
Tille	0%	NONE NOSERVED		NONE	
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RACK, TRAVELWAYS,	0% Co , Pavlex Box	20.8% 02 ES, D. BOXES OK AT T	0E		
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RACK, TRAVELWAYS,	, PONEX BOX	es, D. Boxes ok ATT	iolations of the Fed	eral Coal Mine Health	and Saf
RACK, TRAVEL WAYS, is is to certify that: (a) This sees, of 1969 and other unsatisfactor	, PONEX BOX	was properly examined by me, (b) all voractices observed by me are listed in the	iolations of the Fed is report.	a salah da s	<u> </u>
is is to certify that: (a) This set of 1969 and other unsatisfactor med By Russell Freshire.	ection of the mine ry conditions and p	was properly examined by me, (b) all voractices observed by me are listed in the Certificate No.	iolations of the Fed is report.	a variable	
is is to certify that: (a) This se to of 1969 and other unsatisfactor and By Russell Preshirt-	ection of the mine ry conditions and p	was properly examined by me, (b) all voractices observed by me are listed in the	iolations of the Fed is report.	a salah da s	and Safe

Report shall be signed when made

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Use Indelible Pencil or Ink	PRESHIFT-MINE EXAMINER'S REPORT	Report shall be signed when made
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Time of Examination: from \$30.a.m. or	om) to 22 a.m. or om.)	
Was this report phoned to outside: Yes	J+AM	
Report received by		P,M.
	(Signed) tions and other Hazardous Conditions Observed and Reporte	
Location	Violation on Hazardone Condition	Action Taken
My North Works 03	None Observed	None
Mb Glory Hole 02		NONE
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Mine Manager-Mine Foren		
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DAILY AND ONSHIFT REPORT

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Use Indelible Pencil or Ink	PRE	SHIFT-MINE EXA		RT		Report shall be
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Use Indelible

DAILY AND ONSHIFT REPORT

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Use Indelible

DAILY AND ONSHIFT REPORT

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As	sistant Mine	Certificate No.	Mine	Foreman-Mine Manage	r Certificate	No. Superinter	dent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT Report shall be Use Indelible signed when made Pencil or Ink 11.38-69 _____ 20.__ Section or Area Examined _ Date of Examination ____ Time of Examination: from \$30_a.m. or om to 130_a.m. or om. Was this report phoned to outside: Yes____ no____ __ Time _____A.M ____P.M. Violations and other Hazardous Conditions Observed and Reported Violation or Hazardous Condition Action Taken Location None Obsaml North Mains or CAY None mb Clary Hole Ozchy vone 3. Elis Ozchy Air Measurements **CFM** Location CFMLocation Good diment Remarks: 03 C44, 0200, 20820C Track, Travel uses clar Mile Knily 27085 This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the reduction and rection and practices observed by me are listed in this report.

Signed By Preshift-Mine Examiner Certificate No.

Countersigned Countersigned Mine Manager—Mine Foreman

Assistant Foreman

Superintendent or Assistant

DAILY AND ONSHIFT REPORT

Report shall be

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Mine Foreman-Mine Manager Certificate No.

Superintendent or Assistant

Certificate No.

Assistant Mine

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Superintendent or Assistant

Report shall be signed when made

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Certificate No.

Assistant Mine

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Superintendent or Assistant

Mine Foreman-Mine Manager

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Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

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major	ity of bolts tested in a	any working place fa	lls outside approved torque rang	ge, state what action wa	s taken	电台联联电子图域电荷
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				Barrier (1986)		
	(Statement so to Can	eral Conditions of M	line or Area of Mine)			*************

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination	- 29-09	20-	Section or Ar	ea Examined	North	Pungis
Time of Examination: from 3:30	a.m. or on to 11:	32 a.m. or 63n	State of the State of	1. 4. 4. 1. 1867		
Was this report phoned to outside: By whom	· 7	 !	Time	A.M 10:6	5 P.M.	
Report received by	(Signed)					
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This is to certify that: (a) This Act of 1969 and other unsatisfact	section of the mine ory conditions and p	was properly exa practices observed	mined by me, (b) by me are listed	all violations of t in this report.	the Federal Coa	l Mine Health and Safety
Signed By		34,,4	-		Acrista-t V	
Countersigned A Countersigned	Mine Examiner	Gertificate 3906000	NO.		Assistant Foreman	Certificate No.
Mine Manage	Mine Foreman		_ Dry	Cole		1747-A
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Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be

Pencil or In	k	•]	MINE FOREMA	N OR ASSIS	STANT	sigr	ied when made
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		Ex	aminations for Met	hane in Return	Aircourses		
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If majority	of bolts tested in any	y working place fa	lls outside approved	torque range,	state what action w	as taken	
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Remarks (S	tatement as to Gener	al Conditions of M	ine or Area of Min	e)			
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e Indelible ncil or Ink		PRESHIFT-MINE EXA			signed	ort shall be when made
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oort received by		Signed)		Damontad		
		ons and other Hazardous C	onditions Observed and Hazardous Condition	Reported	Action Tak	en .
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temarks: QX-CH	2, 000 (2, 12)	61.26 do 18.04	at the at s	285		

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

Signed By State St

Russel Dunner 1536-A

DAILY AND ONSHIFT REPORT

Report shall be

rencii or ink		MAN OR ASSISTANT	signed when mad
Date Shift		or Section	
	and the second of the second o	dous Conditions Observed and Reporte	d
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If majority of bolts tested in any wo	rking place falls outside appi	roved torque range, state what action :	was taken
Remarks (Statement as to General C	onditions of Mine or Area of	Mine)	a diparentra - Cope er hito - Lar supprettable
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			ting of the state
Assistant Mine	Certificate No.	Mine Foreman-Mine Manager Ce	rtificate No. Superintendent or Assistant

Pencil or Ink	PRI	ESHIFT-MINE EXAMINER'S REPORT	Report shall be signed when made
Date of Examination		2029 Section or Area Examined	Pumps (North)
Time of Examination: from 12:102-m.		3.00 p.m.	and the state of t
Was this report phoned to outside: Yes. By whom Blought Out	no⊄	A.M	РМ
	(Signed)		
		nd other Hazardous Conditions Observed and Repor	ted.
Location		Violation or Hazardous Condition	Action Taken
North Mains	CHH	None Observed	
2 Glory Hole	0%	None Observed	None
. Ellis	0%	None Observed	
8. – <u>– – – – – – – – – – – – – – – – – –</u>	<i>\$\f0</i> -	LI-190 USSERVEN	
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Remarks: 0% Chy, 20.8% TRACK, TRAVELWAY, F	oz, l	Ippm CO detected at time entons, D-Bures Clean at t	of exam time of exam
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TRACK, TRAVELWAY, F	oon ee C	e was properly examined by me, (b) all violations of practices observed by me are listed in this report.	ine of exam
This is to certify that: (a) This section Act of 1969 and other unsatisfactory cor	of the min	e was properly examined by me, (b) all violations of practices observed by me are listed in this report.	the Federal Coal Mine Health and Safety
This is to certify that: (a) This section Act of 1969 and other unsatisfactory cor Signed By Russell Line. Preshift-Mine E	of the min	e was properly examined by me, (b) all violations of practices observed by me are listed in this report. 1536-4 Certificate No.	ine of exam
This is to certify that: (a) This section Act of 1969 and other unsatisfactory cor	of the minenditions and	e was properly examined by me, (b) all violations of practices observed by me are listed in this report.	the Federal Coal Mine Health and Safety
This is to certify that: (a) This section Act of 1969 and other unsatisfactory cor Signed By Russell Line Preshift-Mine E	of the minditions and	e was properly examined by me, (b) all violations of practices observed by me are listed in this report. 1536-4 Certificate No.	the Federal Coal Mine Health and Safety
This is to certify that: (a) This section Act of 1969 and other unsatisfactory cor Signed By Russell Line Preshift-Mine E Countersigned Assistant	of the minenditions and	e was properly examined by me, (b) all violations of practices observed by me are listed in this report. 1536-4 Certificate No.	the Federal Coal Mine Health and Safety Assistant Foreman Certificate No.

Report shall be signed when made

7		Violations and	other Hazardous Condition	is Observed and Reporte	ж.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· 21 - 1 - 1 - 1
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majority of	bolts tested in a	ny working place fa	lls outside approved torque	range, state what action	n was taken .		
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emarks (Sta	tement as to Gen	eral Conditions of M	line or Area of Mine)				

Assistant Mine

Use Indelible Pencil or Ink	PRESHI	FT-MINE EXAM	MINER'S REP	ORT		Report shall be signed when made
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Date of Examination	or 60m. to 11:3.	20 \ 2a.m. or \(\overline{\pi_n} \).	Section of Area 1	JABIII		
		and the second s		10.02	A	
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This is to certify that: (a) This sec Act of 1969 and other unsatisfactory	tion of the mine w conditions and pr	as properly examin actices observed by	ed by me, (b) all me are listed in	violations of the this report.	ne Federal Coal	Mine Health and Safet
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	ine Examiner	Certificate No.		A	ssistant Foreman	Certificate N
CountersignedMine Manager_	Mine Foreman	32000-	M100/	al.	7. ę. 3	1947-1
76 P	stant Foreman		- E - D			
Assis		· 		Superintendent of		

Assistant Mine

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Shift		Area or Section _	25 後にもでがた。未た。	<u> </u>		
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whomBloug_			Time 5:00		P.M.	
ort received by			rdous Conditions Observed	and Reported		
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Glory Hole	011044	None	observer	· · · · · · · · · · · · · · · · · · ·	None	
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असम्बद्धाः	(14년) 1945년 1947년 - 1947년 1월 1일					
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This is to certify that: (a) Act of 1969 and other unsati	This section of the	mine was prope	rly examined by me, (b) abserved by me are listed i	all violations of t n this report.	the Federal Coa	Mine Health and Safet
Act of 1969 and other unsati	e conditions		447-7		Assistant Foreman	
Tovintersioned	reshift-Mine Examiner	390	rtificate No.	efeh 390	M/	
Mine M	Assistant Foreman					
**************************************	Toolstany I Oreman			Superintendent	or Assistant	

DAILY AND ONSHIFT REPORT

Report shall be signed when made

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This is to certify that: (a) This section	n of the min	e was properly examined	by me, (b) all vi	iolations of t	the Federal Co	al Mine Health and Safety
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Preshift-Mine	Examiner	Certificate No.	Stor	Techelo	Assistant Foreman	Certificate No.
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Report shall be signed when made

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By whom			Time		.50 _{P.M.}	1196 .	
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This is to certify that: (a) This section Act of 1969 and other unsatisfactory c	on of the mine was p	roperly examin	ned by me, (b)	all violations o	f the Federal C	oal Mine Health	and Safety
Signed By Nia Coo	Examiner	1947-A Certificate No.			Assistant Forems		Certificate No.
Countersigned Mine Manager—Min	e Foreman	37060-03	<u> </u>	- Ar	74.0H	-	
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Mine Foreman-Mine Manager

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Certificate No.

John Buckford 2617 L. Russell Dunne 1536-A

-Mine Foreman

Signed By _

Report shall be signed when made

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This is to certify that: (a) This se Act of 1969 and other unsatisfactor	ction of the min	e was properly	examined by me, (b) all ved by me are listed in	l violations of th this report.	e Federal Coal Mine	Health and Safet
Signed By John Preshift.	fine Examiner	Certifica		Dunn	ssistant Foreman	Certificate N
Countersigned	//	39064	n- russell	. J. unsu		
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Superintendent or Assistant

Report shall be signed when made

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	rks (Statement as to	General Condition					

Use Indelible Pencil or Ink	PRESHIFT-MINE EXAMINER'S REPORT	Report shall be signed when made
Date of Examination 12-2-03	20 Section or Area Examined	Pungs North
Time of Examination: from 2.32.a.m. or	(h. to 18-19-a.m. or p(m).	
Was this report phoned to outside: Yes By whom	TimeA.M \\0.23	<u>o_</u> (<u>)</u>
Report received by		
	tions and other Hazardous Conditions Observed and Reported	
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This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Assistant Foreman

Superintendent or Assistant

Report shall be signed when made

	Shift		Area or S	Section		<u></u>	
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Assistant Mine

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Pencil	or I	nk

### PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 12-3-09	20	Section or Area Examined	Pumps North	
Fime of Examination: from 3:22 Am. or p.m. to	⊇.a(m), or p.m.	edicarial considerations and stability		
Was this report phoned to outside: Yes no		Time 5.55 A	P,M,	
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This is to certify that: (a) This section of the mine w	as properly examine	ed by me, (b) all violations of	the Federal Coal Mine F	Iealth and Safety
Act of 1969 and other unsatisfactory conditions and pr	actices observed by	me are listed in this report.	reconsist framital	
Signed By Preship Mine Examiner	Certificate No.		Assistant Foreman	Certificate No.
Countersigned Mine Manager—Mine Foreman		Dlan 1	<i></i>	15394
Assistant Foreman	क्षान्त्रम् भूष्ट्रेशस्य गर्गस्य स्त्राणे । भूष्ट्रेशस्य स्त्राणे स्वरूपार स्त्राणे स्वरूपार स्त्राणे स्वरूपार स्त्राणे स्वरूपार स्त्राणे स्वरूपार स्त्राण			
		Superintendent	or Assistant	7777,277777777777

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Report shall be signed when made

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

Mine Foreman-Mine Manager

Use Indelible Pencil or Ink	PRESHIFT-MINE EXAMINER'S REPORT	Report shall be signed when made
Date of Examination 12-3	Section or Area Examined Por	ps North
Time of Examination: from L.O.C. m. or	p.m. to 1.77a m or n m	
Was this report phoned to outside: Yes	Russell Gunne Time A.M P.1	
Report received by Rick Hutch	TimeA.MP.1	
	(Signed)	to Property and the second of
Viola Location	tions and other Hazardous Conditions Observed and Reported	
	Violation or Hazardous Condition	Action Taken
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This is to certify that: (a) This section of th	the mine was properly examined by me, (b) all violations of the Feder	
Act of 1969 and other unsatisfactory condition	as and practices observed by me are fisted in this report.	at Coal Mine Health and Safety
Signed By Preshift-Mine Examin	1536-A	
Countersigned Land God	Gertificate No. John A. Buckfor	organ Certificate No. 76

Assistant Mine

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

Report shall be signed when made

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### PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

e of Examination 12-3	-09		tion or Area Examined	Pumps	
e of Examination: from	AOO_a.m. or pain)	to U2C _a.m. or (p.m)	Carlo Carlo San Carlo Ca		#44
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s is to certify that: (a)	This section of the	mine was properly examined l and practices observed by me	by me, (b) all violations o	f the Federal Coal M	ine Health and Sai
$\sim$			are nated in this report.		
ned Byllon	dellamon	15394		Assistant Foreman	Certificate
<i></i>	Preshift-Mine Examiner	Certificate No.	Alex Coler	Jana Lotemen	
intersignedMine	Manager Mine Foreman		a		April 10 Sept. 10
	Assistant Foreman		- <del></del>	<u></u>	
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## DAILY AND ONSHIFT REPORT

Report shall be

Pencil or Ink	MI	NE FOREMAN	OR ASSIST	ANT		signe	d when made
Date Shift		Area or Secti	on	<u></u>	<u> </u>	<u></u>	en Parkins
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Remarks (Statement as to General	Conditions of Min	e or Area or Mille)					

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Use Indelible Pencil or Ink

# DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

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## PRESHIFT-MINE EXAMINER'S REPORT

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#### PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination	Section or Area Examined	Pimos
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ountersigned Preshift-Mine Examiner	Gertificate No. 3 DLACUS—	Assistant Foreman Certificate
Mine Manager—Mine Foreman	The State of the S	
Assistant Foreman		
	Superintendent	or Assistant

John Builford 21176

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#### Use Indelible Pencil or Ink

## PRESHIFT-MINE EXAMINER'S REPORT

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Signed By	Preshift-Mine Examiner	Certificate No.	Ass	istant Foreman	Certificate No.
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# PRESHIFT-MINE EXAMINER'S REPORT Report shall be Use Indelible signed when made Pencil or Ink Date of Examination 12-6-09 Time of Examination: from _______ a.m. or p.m. to ______ a.m. or p.m. Was this report phoned to outside: Yes____ no___ Report received by _____ (Signed) Violations and other Hazardous Conditions Observed and Reported Violation or Hazardous Condition Action Taken 10. Air Measurements Location CFMCFMLocation 0364, 0700, 2818802 nfile Baily 27085

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

Signed By Preshift-Mine Examiner Cartificate No.
Countersigned Carlo Gallery Countersigned Carlo Gallery Countersigned Carlo Gallery Countersigned Carlo Gallery Carlo Gal

ificate No.

Assistant Foreman

Certificate No.

Countersigned _ Countersigned _ Countersigned

Assistant Foreman

-Mine Foreman.

Superintendent or Assistant

Tohn A. Buckford 26176

Report shall be signed when made

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Mine Foreman-Mine Manager

Certificate No.

Assistant Mine

Certificate No.

Jse Indelible	PRESHI	FT-MINE EXAMINER'S REPORT	Report shall be signed when ma	e ide
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Report shall be signed when made

Superintendent or Assistant

Certificate No.

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Mine Foreman-Mine Manager

Certificate No.

Assistant Mine

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Russell Diamore 1536-9

Signed By ____ Countersigned

Superintendent or Assistant
Scott Holotod 37547

Certificate No.

Report shall be signed when made

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Assistant Mine

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

Signed By Scott Hoteld

Preshift-Mine Examiner

Certificate No.

Certificate No.

Assistant Mine

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

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Signed By Mes	columnation examiner	194 Certificat	74		Assistant Foreman	Certificate No.
Countersigned -	eshift-Mine Examiner  nager-Mine Foreman  Assistant Foreman	Trans		Am 310	Assistant Foreman	
				Superintendent		

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gred By Preshift-Mine Examiner	Certificate No.	Assistant Foreman Certificate No.
ountersigned Mine Manager—Mine Foreman		er e
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usell Dunnoe 1536-F.		4-1-0/-137567

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Encation  Good Air Moveme  emarks: C70 CH4  This is to certify that: (a) The ct of 1969 and other unsatisf	10.876 0 ²	Dpm CD Detected at  Approximate was properly examined by me, (b) all and practices observed by me are listed in  37547	EXAM!	Cime the Federal Coal	Mine Heal	th and Si
Emarks: OTo CHI 1 and the control of 1969 and other unsatisfigued By Scott Street Counterstand	(0.8% 0 ²	Dpm CD Detected at  Le Bailey 270 35  mine was properly examined by me, (b) all and practices observed by me are listed in 375 L.  Certificate No. Russel.	EXAM!	ime	Mine Heal	

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	and to outside	Yes no	0 2-22-a.m. or p.m.		e de la companya de
s this report pn whom			A.M	P.M.	
port received by		(Signe	ed)		was a second of the second
erente de la companya de la company Na		Violations	and other Hazardous Conditions Observed and Reporte	d Action	Taken
MBNOTTH	Location	Ch4	Violation or Hazardous Condition NOR 6 OBS CIVES	None	
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This is to certif Act of 1969 and	fy that: (a) This dother unsatisfa	s section of the ctory conditions	mine was properly examined by me, (b) all violations of and practices observed by me are listed in this report.	of the Federal Coal M	ine mealth and Safet
Signed By ユベ	Presi	nift-Mine Examiner		Assistant Foreman	Certificate No
Countersigned	Mine Mana	ger-Mine Foreman	<del></del>		परस्कृत्रकारण अवस्थारकारिको । 
		Assistant Foreman			
		ordin order i order Vila order Karaja daliyar di kara	이 회사 있는데 그는 그 그 그들은 이 사람들이 되었다. 그 이 그는 그는 그리고 있는데 그 중에는 경우를 가장하는데 그렇게 하고 있습니다.	nt or Assistant	
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