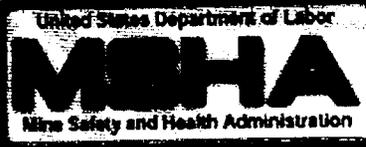


E01

Reg. Safety Health Insp.

11-2-2006 - 12-13-2006



The information contained herein is protected under the Privacy Act and should be handled accordingly.

Mine Information Form

Mine Location Type 1-14

Change/New	Change
1. MSHA Mine ID Number: 4201715	2. Operating Company Name: Genwal Resources Inc

3. Mine or Mill Name:
Crandall Canyon Mine

3a. Mine Emergency Phone Number: (435)-687-5420	4. Type Of Operation Coal	5. Portable Operation N	6. Primary Mine Type Underground
--	------------------------------	----------------------------	-------------------------------------

7. MSHA Office Code C0905 - Price UT Field Office	8a. Work Group 02	8b. Travel Area	9. Nearest Town, Landmark, or Post Office Huntington
--	----------------------	-----------------	--

10. County Name Where Mine is Located Emery	11. State Abbreviation UT	12. Cong. Dist. (Coal Only) 03	13. Mileage from Field Office 35
--	------------------------------	-----------------------------------	-------------------------------------

14. Directions to Operation from Field Inspection Office
1.5 miles West off State Highway 31, 15 miles NW of Huntington, Utah

Mine Description 15-20

15. Total Employees: 60	16. Schedule Of Operation:		
	a. Hours Per Production Shift 8	b. Production Shifts Per Day 3	
	c. Maint. Shifts Per Day 3	d. Work Days Per Week 7	

17. Longitude and Latitude (Coal Only)

a. Longitude:	Degrees 111	Minutes 10	Seconds 1
b. Latitude:	Degrees 39	Minutes 27	Seconds 39

18. Mine Status : Active

19. Status Date (mm/dd/yyyy) 11/22/1983

20. Types Of Mineral being Extracted or Processed:

a. Primary Commodity Coal (Bituminous)

b. Secondary Commodity

c. Other Commodities

Mine Characteristics

21. Mine Characteristics:

Mill/Prep Plant/Loading Dock

Other Mine Information

22. Other Mine Information: a. Applicable to all Mines

103(l) Status: Removed **Date Entered 103(l) Status** 10/01/1981
 Explosive Used
 Explosives Stored on Surface
 Treasury Permit/License
Methane Liberation 0 cubic ft./24 hrs.

b. Applicable to Coal Mines Only

No. Of Producing Pits		No. Of Non Producing Pits	0
No Of Drift Openings	3	No. Of Slope Openings	0
No. Of Shaft Openings	0	Avg. Daily Coal Prod. Tons	2200
Primary Coal Bed Name	Hiawatha		
Avg. Mine Height	72		

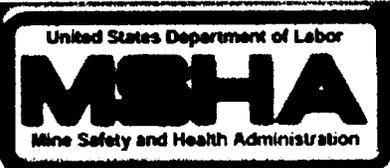
c. Applicable to Metal and Nonmetal Mines Only

Mine Gas Category		No. Of Impoundments	
No. Of Escapeways to Surface		No. Of Hoists	
No. Of Refuge Chambers			

Mailing Address

23. Quarterly Report Mailing Address

First Name	James	Middle Initial	A	Last Name	Poulson
Street Address			OR	P.O. Box	
				1077	
City	State	Zip Code	Zip Ext		
PRICE	UT	84501			
Country	Foreign State	Foreign Zip Code			
USA					
Phone Number			Fax Number		



The information contained herein is protected under the Privacy Act and should be handled accordingly.



Mine Information Form

Mine Location Type 1-14

Change/New	Change
1. MSHA Mine ID Number:	2. Operating Company Name:
4201715	Genwal Resources Inc

3. Mine or Mill Name:
Crandall Canyon Mine

3a. Mine Emergency Phone Number:	4. Type Of Operation	5. Portable Operation	6. Primary Mine Type
(435)-687-5420	Coal	N	Underground

7. MSHA Office Code	8a. Work Group	8b. Travel Area	9. Nearest Town, Landmark, or Post Office
C0905 - Price UT Field Office	02		Huntington

10. County Name Where Mine is Located	11. State Abbreviation	12. Cong. Dist. (Coal Only)	13. Mileage from Field Office
Emery	UT	03	35

14. Directions to Operation from Field Inspection Office
1.5 miles West off State Highway 31, 15 miles NW of Huntington, Utah

Mine Description 15-20

15. Total Employees:	16. Schedule Of Operation:		
60	a. Hours Per Production Shift 8	b. Production Shifts Per Day 3	
	c. Maint. Shifts Per Day 3	d. Work Days Per Week 7	

17. Longitude and Latitude (Coal Only)

a. Longitude:	Degrees 111	Minutes 10	Seconds 1
b. Latitude:	Degrees 39	Minutes 27	Seconds 39

18. Mine Status : Active

19. Status Date (mm/dd/yyyy) 11/22/1983

20. Types Of Mineral being Extracted or Processed:

a. Primary Commodity Coal (Bituminous)

b. Secondary Commodity

c. Other Commodities

Mine Characteristics

21. Mine Characteristics:

Mill/Prep Plant/Loading Dock

Other Mine Information

22. Other Mine Information: a. Applicable to all Mines

103(l) Status: Removed Date Entered 103(l) Status 10/01/1981
 Explosive Used
 Explosives Stored on Surface
 Treasury Permit/License
 Methane Liberation 0 cubic ft./24 hrs.

b. Applicable to Coal Mines Only

No. Of Producing Pits		No. Of Non Producing Pits	0
No Of Drift Openings	3	No. Of Slope Openings	0
No. Of Shaft Openings	0	Avg. Daily Coal Prod. Tons	2200
Primary Coal Bed Name	Hiawatha		
Avg. Mine Height	72		

c. Applicable to Metal and Nonmetal Mines Only

Mine Gas Category	No. Of Impoundments
No. Of Escapeways to Surface	No. Of Hoists
No. Of Refuge Chambers	

Mailing Address

23. Quarterly Report Mailing Address

First Name	James	Middle Initial	A	Last Name	Poulson
Street Address			OR	P.O. Box	1077
City	State	Zip Code	Zip Ext		
PRICE	UT	84501			
Country	Foreign State	Foreign Zip Code			
USA					
Phone Number	Fax Number				

Mine Activity Data



1. Action: a. New Entry b. Update 2. Activity Code: E01 3. Event Number: 4474244

4. Date Event Started: 11/2/2006 5. Date Event Finished: 12/13/2006 6. Mine ID: 42-01715

7a. Organization Code (Mine Assignment) 20905 b. Work Group Identifier 02 9. Company Name GENWAL RESOURCES INC

8a. Organization Code (AR Assignment) 20905 b. Work Group 02 10. Mine Name CRANDALL CANYON MINE

11. Report Type (check) a. First b. Interim c. Last d. Not Applicable 12. Area of Inspections a. Active Sections 1 b. Idle Sections 0

c. Outhy Areas d. Shafts/Slopes e. Surface Areas (UG) f. Surface Workings g. Company Records h. ATF i. Impoundments j. Refuse Piles

k. Major Construction (1) Shaft/Slope Sinking 0 (2) Impoundment Construction 0 (3) Buildings 0 (4) Dragline/Shovel: 0 (5) Other 0 l. Miscellaneous

m. MMU/Pit Number (1) 002

13. Number of Samples Collected a. Air Samples 1 b. Rock Dust Spot 0 c. Rock Dust Survey 0 d. Respirable Dust 6 e. Noise 0 f. Other 0

14. Impoundments/Refuse Piles: a. Number b. FHC c. Configuration

15. Prime Independent Contractor Codes (Major Construction)

16. Inspection Results

	Citations		Orders		Safeguards		Other	
	Coal Opr	Ind Con	Coal Opr	Ind Con	Coal Opr	Ind Con	Coal Opr	Ind Con
a. This Inspection								
(1) New Issuances		1						
(2) Terminations/Vacations		1						
(3) Modifications/Extensions								
(4) Left Pending								
b. Previously Issued								
(1) Modifications/Extensions								
(2) Terminations/Vacations								

18. Signature and Card Number of Authorized Representative/ Right of Entry Person(s) Responsible for Activity

Signature:  Card Number: 23355

19. Key Entered By _____ Date _____

17. Remarks:



1. MSHA Office 20905 PRICE, UT 2. Mine ID 42-01715
 3. Mine Name CRANDALL CANYON 4. Company Name UTAH AMERICAN ENERGY INC
 Roof Control

Adequate
 Deficiencies In Plan (Briefly Describe)

Ventilation
 Adequate
 Deficiencies In Plan (Briefly Describe)

Inspector Signature Signature Date 12-13-06 Supervisor Signature Signature Date 12-27-06

Report of Violations

Instructions

Please write firmly with a ball point pen when completing this form. ATF officers will prepare this form in triplicate. The original copy will be given to the proprietor or a responsible representative. The remaining copies will be submitted with the completed inspection report. Supervisors will detach one copy from the completed report for their files.

Name of Proprietor UTAH AMERICAN ENERGY INC.	Street Address PO BOX 1077	City H. PRICE, UT	State UTAH	ZIP Code 84501	County CARBON	Page <u>1</u> of <u>1</u> Pages
License/Permit/Registry Number (if any)		Expiration Date	Date(s) or Period of Inspection 12-17-06			

Inspection Results

An examination of your premises, records and operations has disclosed the following violations which have been explained to you:

Number	USC or CFR Citation	Nature of Violation	Corrective Action to be Taken <i>(If not corrected immediately)</i>	Date Corrections to be Made <i>(If not corrected immediately)</i>
		NO EXPLOSIVES IN MAGAZINES		

26

Rec. 12/15/2006

PAGE: 1

□&100

□&110

□(s4B

UNITED STATES DEPARTMENT OF LABOR
 MSHA LABORATORIES - MOUNT HOPE, WEST VIRGINIA
 ANALYSIS OF AIR SAMPLES

□(s0B

Mine: CRANDALL CANYON
 Company: UTAH AMERICAN ENERGY, INC.

Mine ID: -0-
 Inspector: DENNIS BOYACK

Date(s) Collected: 12/07/2006
 Office: 905

BOTTLE NUMBER	LOCATION IN MINE	CARBON				CUBIC FEET	CUBIC FEET
		DIOXIDE	OXYGEN	METHANE	ETHANE	AIR PER MINUTE	METHANE IN 24 HOURS
N6189	100FT INBY MAIN FAN	0.110	20.54	0.000	0.000	279675	0

Respirable Dust Sampling and Monitoring Data

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



1. Type of Inspection: Regular Technical Monitoring
 2. Date: 12-4-06
 3. Field Office Code: 20905-02
 4. Mine I. D.: 42-01715
 5. Mine Name: CRANDALL CANYON
 6. Company Name: UTAH AMERICAN ENERGY INC

7. MMU/DA/SA: 002-0
 8. Times Entry/Mine Cited for Excessive Dust Last 12 Months: _____

9. AR Signature: **Signature**
 AR Number: 23355
 Signature: (acting)

10. A. Longwall B. Continuous C. Conventional
 Cut Sequence: I. Tail-Head I. Ripper
 II. Double Drum II. Head-Tail II. Auger
 III. Plow III. Both III. Borer
 Other (specify): _____
 12. Mining Ht.: 84 in.
 Inches of Rock Mined: 0
 13. Remote Operation of Miner?: Yes No

14. Type of Mining: I. Development II. Retreating
 15. Physical Conditions:
 Face Area: Wet Damp Dry
 Roadways: Wet Damp Dry Compacted

16. Type of Haulage Equipment: Electric Battery Diesel Other (specify) _____

17. Roof Bolter Type: I. Twin Head II. Single Head III. Integral
 Number of Bolters: 1
 A. Ventilation: I. Operates on Separate Split of Air: Yes No
 II. Operates on Return-Side of DO: Yes No
 B. Is Roof Bolter DA Established? Yes No
 C. Type of Dust Control: I. Wet Head II. Dust Collector

18. Dust Control Parameters - Ventilation System:
 A. Method of Face Ventilation: I. Blowing II. Exhausting III. Both
 B. Face Ventilation Device: I. Curtain II. Tubing III. Both
 C. Line Curtain/Tubing Distance: 40 ft.
 D. Is Face Area Ventilated with Belt Air? Yes No
 E. If, Yes, Quantity in Belt Entry: _____ cfm

F. Air Quantity: Longwall (Between 50 and 100 feet of Headgate and Tailgate)

Location	Quantity (Q), cfm		Velocity (V), fpm	
	Plan	Observed	Plan	Observed
Headgate				
Tailgate				

NO

Continuous/Conventional/Handloading

	Plan	Observed		
Face (Q)	12000	20664		
MEAV (V)	60	68	6609	
Scrubber	2000			

19. Dust Control Parameters - Water Spray System:

Location	Number of Operating Sprays		Operating PSI	
	Plan	Observed	Plan	Observed
Body	40	40	75	115
SCRUBBER	1	1	40-60	50

Sprays Located per Plan

Yes No

Sprays Angled per Plan

Yes No

20. Auxiliary Controls:

Scrubber Frequency Screen Checked: EACH SHIFT
 Frequency Ductwork Checked: EACH SHIFT

Fan Spray Sprays Located per Plan Yes No Sprays Angled per Plan Yes No

Work Practices Describe: NA

Enclosures Describe: NA

Other (Wetting Agents; Wetting face, supports and roadways; ect.) Describe: NA

21. Are Approved Respirators Being Worn? Yes No If Yes, By Whom: _____
 Make: _____ Model: _____

22. Do Miners Work Downwind of the Longwall Shearer? Always Part of the Shift Never
NA

23. Was the Operator Cited for Violating the Dust Control Parameters of the Ventilation Plan? Yes No
 If Yes, specify: _____

24. Were Dust Control Parameters Changed During Sampling? Yes No If Yes, specify: _____

25. Production (tons): At Time of Sampling: 517 tons At Time of Monitoring: _____ tons During Last 30 Shifts: 570 tons

26. Bi-monthly Sampling Conducted By: Operator Contractor Contractor I.D.: _____

27. Sampling Equipment: Provided By Operator Contractor Calibrated and Maintained By Operator Contractor

28. Inspector Recommendations and Comments: Crew Works 12 hour shift
operator uses 30 day production to determine daily production
Small cars are given 11 tons per car
91% Production

USE SPACE BELOW FOR SKETCHES OR OTHER INFORMATION

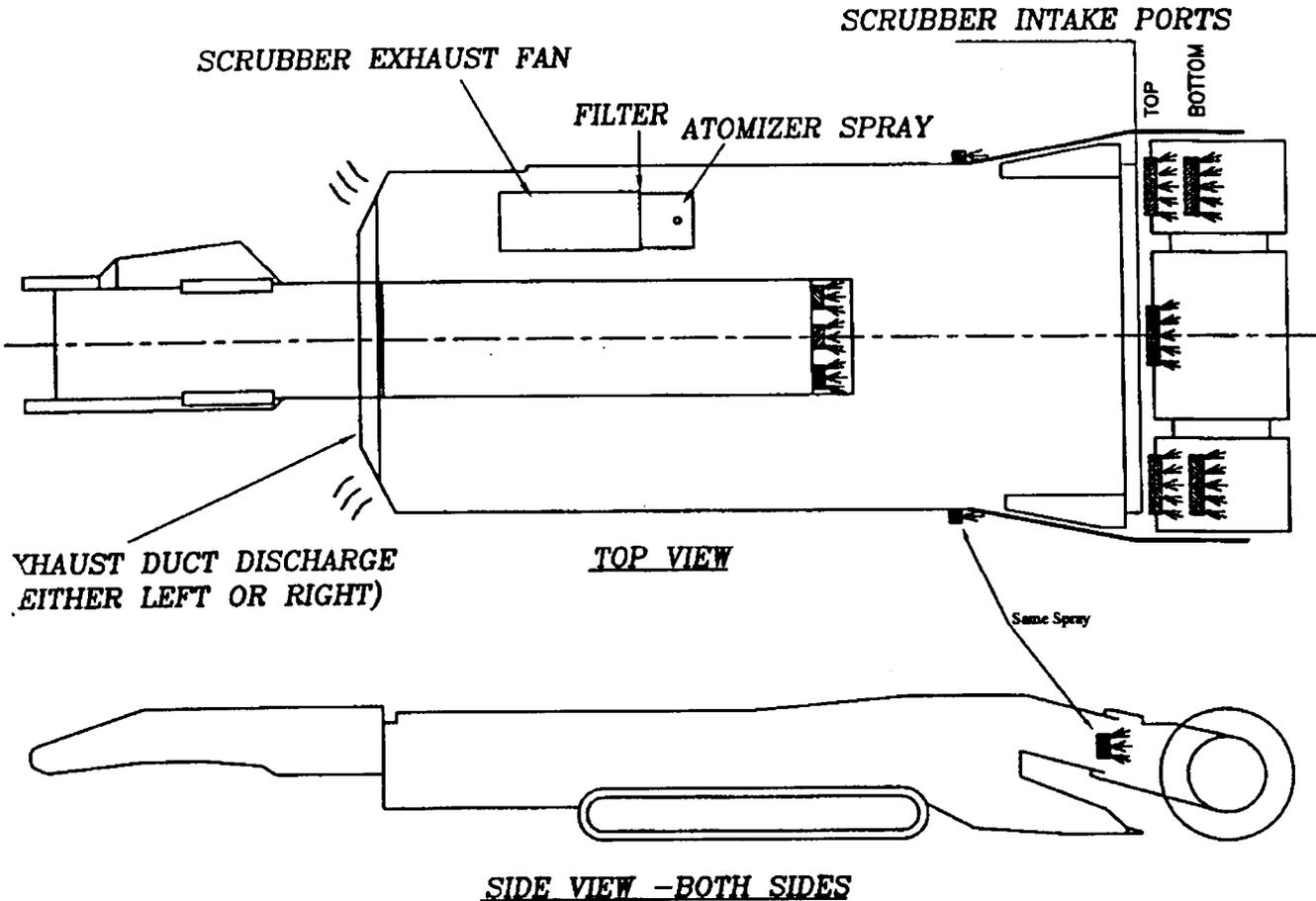
SEE ATTACHED ~~MAP~~ DIAGRAM

D

WATER SPRAY DIAGRAM

12 CM 12 (REMOTE CONTROL)

MMU # as assigned



NOTE: Fire suppression system on this miner can be operated remotely from a permanently supported location, and the actuation device can be operated by its own power source, independent of the continuous miner. (30 CFR 75.1107-4(c)).

40 CONTINUOUS SPRAYS

1 ATOMIZER SPRAY

FLOW - 8.5 GPM AT 40 - 60 PSI

SERIAL # 4978B

APPROVED

JUL 27 2006

CMSH

LEGEND

Continuous Spray ←

Respirable Dust Sampling and Monitoring Data

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



1. Type of Inspection: Regular Technical Monitoring
 2. Date: 12-4-06
 3. Field Office Code: 20905-06
 4. Mine I. D.: 42-01715
 5. Mine Name: CRANDHU CANYON
 6. Company Name: UTAH AMERICAN ENERGY INC
 7. MMU/DA/SA: 002-C
 8. Times Entry/Mine Cited for Excessive Dust Last 12 Months:

9. AR Signature: [Signature] AR Number: 23355
 10. [Signature] (acting)

A. Longwall B. Continuous C. Conventional
 I. Single Drum II. Double Drum III. Plow
 I. Tail-Head II. Head-Tail III. Both
 I. Ripper II. Auger III. Borer
 Other (specify):
 Inches of Rock Mined: _____ in.
 T3. Remote Operation of Miner?: Yes No

14. Type of Mining: I. Development II. Retreating
 15. Physical Conditions:
 Face Area: Wet Damp Dry
 Roadways: Wet Damp Dry Compacted

16. Type of Haulage Equipment:
 Electric Battery Diesel Other (specify): _____

17. Roof Bolter Type: I. Twin Head II. Single Head III. Integral
 Number of Bolters: 1
 A. Ventilation: I. Operates on Separate Split of Air: Yes No
 II. Operates on Return-Side of DO: Yes No
 B. Is Roof Bolter DA Established? Yes No
 C. Type of Dust Control: I. Wet Head II. Dust Collector

18. Dust Control Parameters - Ventilation System:
 A. Method of Face Ventilation: I. Blowing II. Exhausting III. Both
 B. Face Ventilation Device: I. Curtain II. Tubing III. Both
 C. Line Curtain/Tubing Distance: 40 ft.
 D. Is Face Area Ventilated with Belt Air? Yes No
 E. If, Yes, Quantity in Belt Entry: _____ cfm

F. Air Quantity: Longwall (Between 50 and 100 feet of Headgate and Tailgate)

Quantity (Q), cfm			Velocity (V), fpm		
Location	Plan	Observed	Location	Plan	Observed
Headgate			Headgate		
Tailgate			Tailgate		

NA

Continuous/Conventional/Handloading

	Plan	#3 #	#	Observed
Face (Q)	104,000	23400		
MEAV (V)	60	71		
Scrubber*	6,000	6609		

19. Dust Control Parameters - Water Spray System:

Location	Number of Operating Sprays		Operating PSI	
	Plan	Observed	Plan	Observed
Body	40	40	75	115
SCRUBBER	1	1	40-60	50

Sprays Located per Plan

Yes No

Sprays Angled per Plan

Yes No

20. Auxiliary Controls:

Scrubber Frequency Screen Checked: EACH SHIFT

Frequency Ductwork Checked: EACH SHIFT

Fan Spray Sprays Located per Plan Yes No

Sprays Angled per Plan Yes No

Work Practices Describe: NA

Enclosures Describe: NA

Other (Wetting Agents; Wetting face, supports and roadways; ect.) Describe: NA

21. Are Approved Respirators Being Worn?: Yes No

If Yes, By Whom: _____

Make: _____ Model: _____

22. Do Miners Work Downwind of the Longwall Shearer?: NA Always Part of the Shift Never

23. Was the Operator Cited for Violating the Dust Control Parameters of the Ventilation Plan?: Yes No

If Yes, specify: _____

24. Were Dust Control Parameters Changed During Sampling?: Yes No If Yes, specify: _____

25. Production (tons): At Time of Sampling: 517 tons At Time of Monitoring: _____ tons During Last 30 Shifts: 570 tons

26. Bi-monthly Sampling Conducted By: Operator Contractor Contractor I.D.: _____

27. Sampling Equipment: Provided By Operator Contractor Calibrated and Maintained By Operator Contractor

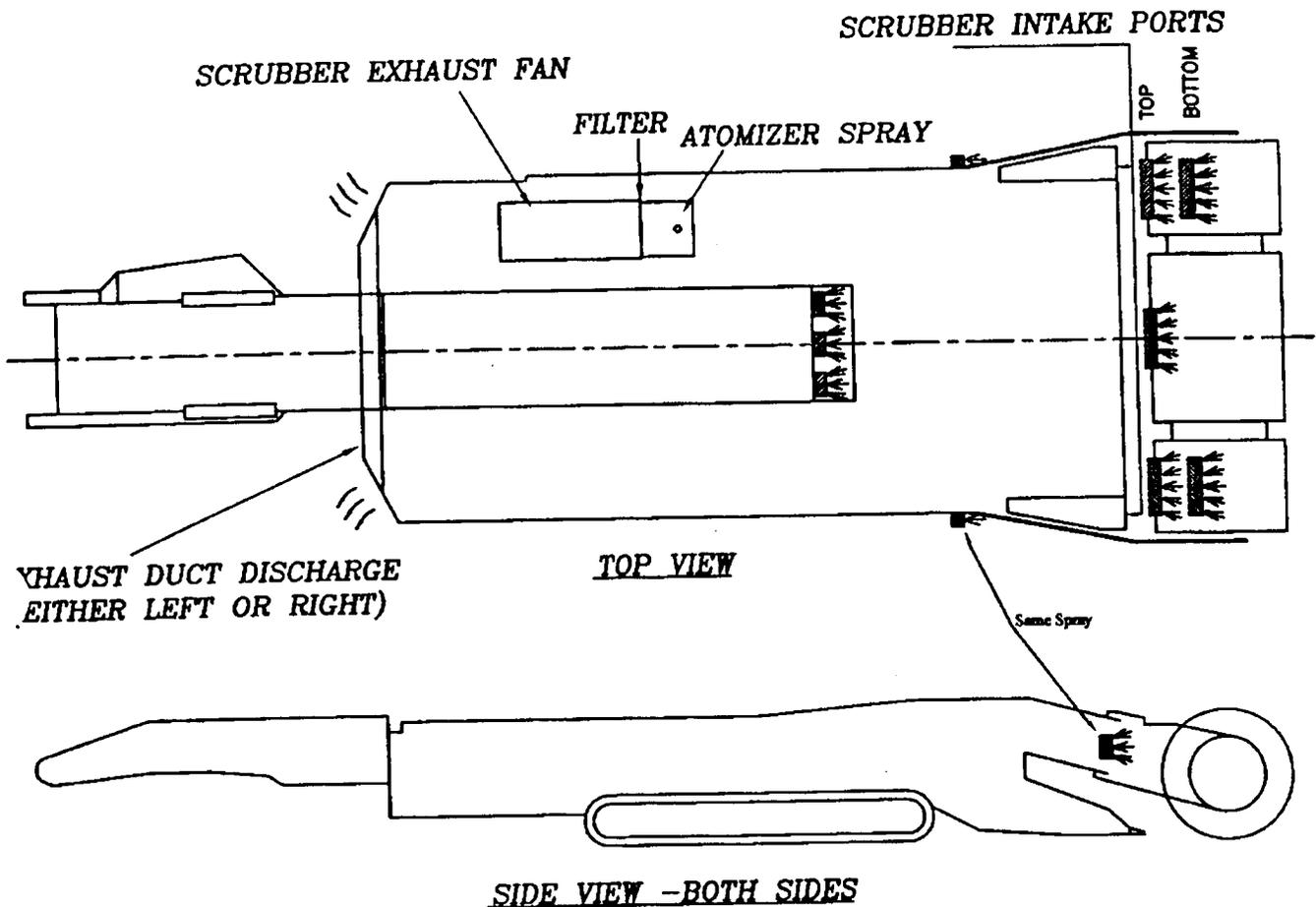
28. Inspector Recommendations and Comments: Crew works 12 hour shift. The op. takes production for last 30 days and averages to each day - Shuttle Cars average 11 tons per car

USE SPACE BELOW FOR SKETCHES OR OTHER INFORMATION

SEE ATTACHED DIAGRAM

WATER SPRAY DIAGRAM 12 CM 12 (REMOTE CONTROL)

MMU # as assigned



NOTE: Fire suppression system on this miner can be operated remotely from a permanently supported location, and the actuation device can be operated by its own power source, independent of the continuous miner. (30 CFR 75.1107-4(c)).

40 CONTINUOUS SPRAYS

1 ATOMIZER SPRAY

FLOW - 8.5 GPM AT 40 - 60 PSI

SERIAL # 4978B

APPROVED
JUL 27 2006
 CMSH

LEGEND

Continuous Spray ←

**0905-0002
REPORT NO: MSD014

RESPIRABLE DUST SAMPLING INSPECTION RESULTS

Price # 2 Report
Jaylon
Boysack

DECEMBER 6, 2006

MINE ID NUMBER

42-01715

MINE NAME - CRANDALL CANYON MINE

COMPANY NAME - GENWAL RESOURCES INC

McAuley
12/08/06

ENTITY ID 002-0

SAMPLING DATE 12-04-2006

PRODUCTION THIS SHIFT
517

SHIFT: 07

 *
 * AVG. PROD. (FOR LAST 10 PROD. SHIFTS) _____
 *
 * SURVEY CONDUCTED BY _____
 *

TYPE OF SAMPLE	OCCUPATION CODE	CASSETTE	TIME	DUST CONC	INITIAL WEIGHT	FINAL WEIGHT	CP NGT	CP VOID	DUST STANDRD	VOID CODE	CITATION NO
1	036	57641320	480	0.405	513.735	514.013	- 0.004		2.00		
2	012	57641323	480	0.651	512.746	513.195	- 0.004		2.00		_____
2	014	57641324	480	0.451	508.392	508.702	- 0.004		2.00		_____
2	050	57641322	480	0.349	510.258	510.497	- 0.004		2.00		_____
2	054	57641321	480	0.419	509.964	510.252	- 0.004		2.00		_____
7	000	57641326	480	0.271	512.828	513.013	- 0.004		1.00		_____

NO. 052 P.2

MSHA MCALESTER

DEC. 8.2006 12:10PM

Mine Citation/Order

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

TK 12/26/06

Section I--Violation Data

1. Date Mo Da Yr 12/03/2006	2. Time (24 Hr. Clock) 0750	3. Citation/ Order Number 7285992
4. Served To Bodee Allred- Safety	5. Operator GENWAL RESOURCES INC	
6. Mine CRANDALL CANYON MINE	7. Mine ID 42-01715	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Oil, loose Coal, and Coal dust were allowed to accumulate on the No. 3 Fletcher double roof bolter, being operated in the Main West active working section. The accumulations were deposited on, and in the compartments, hydraulic, and electric components. The accumulations were up to approximately 1/2 inch deep.

See Continuation Form (MSHA Form 7000-3a)

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

Section II--Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 006
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action {04(a)}		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number
15. Area or Equipment			
16. Termination Due A. Date Mo Da Yr 12/03/2006 B. Time (24 Hr. Clock) 1000			

Section III--Termination Action

17. Action to Terminate The accumulations were removed from the machine.			
18. Terminated A. Date Mo Da Yr 12/03/2006 B. Time (24 Hr. Clock) 0840			

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4474244	21. Primary or Mill
22. Signature Signature		23. AR Number 23355

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Date 12-3-06

0750 - 75400
 coal, loose coal &
 coal dust may
 allowed to accumulate
 on the #3 Fletch
 double boom belt
 that in the main
 West section. The
 accumulation was in
 on the all component
 on surfaces - some
 up to about 1/2"
 deep. S+S because
 of amount of coal.
 limit set at
 1000 - could not
 do home m/s. Rms'

Inspector's Initials B

Supervisor's Initials and Date

B 12-8-06Page No. 1

*U.S.G.P.O.: 2001 - 609-238

Date 12-3-06

of the condition, the
 condition should hold
 for a while.
 0940 - about
 accumulation removed

Inspector's Initials B

Supervisor's Initials and Date

B 12-8-06Page No. 2

*U.S.G.P.O.: 2001 709-135

Date: _____

12-4-06

0800 - checked pumps

Jay Miner
SNP-JM 4978-C

sprays OK
Water - 11.5 PSF

sprays located per
plan

1100 - checked pumps
Miner sprays OK
Water - 11.5 PSF

Inspector's Initials JB

Supervisor's Initials and Date 12-11-06 JV Page No. 3

Date: 12-4-06

RESPIRABLE DUST

Location: mining drift CO2

PUMP	CASSETTE	CODE	OCCUPATION	TIME ON	2nd	4th	TIME OFF	WT
D-1	641326	036	MINER OPR	0700	0800	1100	1500	
D-2	321	054	Scoop OPR					
D-3	322	059	SC OPR					
D-4	323	014	RB RB					
D-5	324	018	RB INT.					
D-6	INTAKE	7	326					
CONTROL	641	327						

Inspector's Initials JB

Supervisor's Initials and Date

12-11-06

JV

Page No.

2

12-4-06

4474244

Proc shifts

NONE

Prepped up pumps in office
Taped control filter

0700 - started pumps
checked flow - rate +
put on Miner

JB

12-11-06 JV

1

12-4-06
#3 force

3
8
24
975
23400

0
71
0810

last open x-cut

20
9
160
300
48000

0
0820

B
Dr 12-11-06 4

12-4-06
SCRUBBER - #4978-C

2-12
.75" MAG
6609

0
0825

#4 force

3
8
24
861
20,664

0
68
1120

B
Dr 12-11-06 5

12-21-06
SCRUBBER - #4978-C

2-12
.75"
6609

0
1130

last open x-cut

20
9
160
318
50880

0
1145

B
Dr 12-11-06 6

Date _____

12-4-06

14.30 - Packed up
pumps off crew

1500 - checked flow
rate of pumps on
surface - shut off
pumps.

aug tonnage - 12 hr
shift - 855

8-hr shift - 570

11 tons per con

80% - 456

This shift = 517 tons

Inspector's Initials _____

B

Supervisor's Initials and Date

Jr 12-11-06

Page No. 7

Dust Data Card

1. Cassette Number

57 641326

2. Mine ID Number

42 01715

(min)

3. Contractor Code

4. Mine Name

CRANDALL Canyon

5. Company Name

UNITED ASSOCIATED ENERGY INC

6. Date Sampled

1 04 06

Mo. Da. Yr.

7A. Sampling Start Time

07

(24 hr. clock)

7B. Sampling Time (min)

480

8. Tons This Shift

517

9. Type of Sample (select one)

- (1) designated occ (ug)
- (2) nondesignated occ (ug)
- (3) designated area (ug)
- (4) designated work position (sur)
- (5) part 90 miner

7

10. MMU DA/SA

0020



11. Occ Code

12. Part 90 Miner Sampled

SSN

13. Certified Person: NOTICE - Knowingly making any false statement, representation, or certification on this document is a violation of the federal criminal code which may be punished by a fine or by imprisonment or both.

SSN

(b) (6)

Signature

Laboratory Analysis

Final Weight

Initial Weight

Weighed By

OSP Checked By

Void Code

Date Processed

KEEP THIS FOR YOUR RECORDS

20905-02

Dr 12-11-06

Dust Data Card

1. Cassette Number

57 641323

2. Mine ID Number

42 01715

(min)

3. Contractor Code

4. Mine Name

CRANDALL Canyon

5. Company Name

UNITED ASSOCIATED ENERGY INC

6. Date Sampled

1 04 06

Mo. Da. Yr.

7A. Sampling Start Time

07

(24 hr. clock)

7B. Sampling Time (min)

480

8. Tons This Shift

517

9. Type of Sample (select one)

- (1) designated occ (ug)
- (2) nondesignated occ (ug)
- (3) designated area (ug)
- (4) designated work position (sur)
- (5) part 90 miner

7

10. MMU DA/SA

0020



11. Occ Code

012

12. Part 90 Miner Sampled

SSN

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Laboratory Analysis

Final Weight

Initial Weight

Weighed By

OSP Checked By

Void Code

Date Processed

KEEP THIS FOR YOUR RECORDS

20905-02

Dust Data Card

1. Cassette Number
57 641324

2. Mine ID Number
42 01715
(min)

3. Contractor Code
[] [] []

4. Mine Name
Crandall Canyon

5. Company Name
Utah American Energy

6. Date Sampled
12 24 06
Mo. Da. Yr.

7A. Sampling Start Time
07
(24 hr. clock)

7B. Sampling Time (min)
450

8. Tons This Shift
517

9. Type of Sample (select one)
(1) designated occ (ug)
(2) nondesignated occ (ug)
(3) designated area (ug)
(4) designated work position (sur)
(5) part 90 miner
2

10. MMU DA/SA
0000

11. Occ Code
014

12. Part 90 Miner Sampled
SSN [] [] [] [] [] [] [] [] [] []

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SSN (b) (6)
Signature

Final Weight

Initial Weight

Weighed By OSP Checked By Void Code
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Date Processed

KEEP THIS FOR YOUR RECORDS

20905-02

Dr 12-11-06

Dust Data Card

1. Cassette Number
57 641322

2. Mine ID Number
42 01715
(min)

3. Contractor Code
[] [] []

4. Mine Name
Crandall Canyon

5. Company Name
Utah American Energy

6. Date Sampled
12 24 06
Mo. Da. Yr.

7A. Sampling Start Time
07
(24 hr. clock)

7B. Sampling Time (min)
450

8. Tons This Shift
517

9. Type of Sample (select one)
(1) designated occ (ug)
(2) nondesignated occ (ug)
(3) designated area (ug)
(4) designated work position (sur)
(5) part 90 miner
2

10. MMU DA/SA
0000

11. Occ Code
050

12. Part 90 Miner Sampled
SSN [] [] [] [] [] [] [] [] [] []

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SSN (b) (6)
Signature

Final Weight

Initial Weight

Weighed By OSP Checked By Void Code
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Date Processed

KEEP THIS FOR YOUR RECORDS

20905-02

Dust Data Card

1. Cassette Number

57 641321

2. Mine ID Number

42 01715

(min)

3. Contractor Code

4. Mine Name

Grandall Canyon

5. Company Name

Utah American Energy

6. Date Sampled

10 04 06

Mo.

Da.

Yr.

7A. Sampling Start Time

07

(24 hr. clock)

7B. Sampling Time (min)

480

8. Tons This Shift

517

9. Type of Sample (select one)

- (1) designated occ (ug)
- (2) nondesignated occ (ug)
- (3) designated area (ug)
- (4) designated work position (sur)
- (5) part 90 miner

2

10. MMU DA/SA

0020

11. Occ Code

054

12. Part 90 Miner Sampled

SSN

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SSN

(b) (6)

Signature

Final Weight

Initial Weight

Weighed By

OSP Checked By

Void Code

Date Processed

KEEP THIS FOR YOUR RECORDS

50905 00

Dust Data Card

1. Cassette Number

57 641320

2. Mine ID Number

42 01715

(min)

3. Contractor Code

4. Mine Name

Grandall Canyon

5. Company Name

Utah American Energy

6. Date Sampled

10 04 06

Mo.

Da.

Yr.

7A. Sampling Start Time

07

(24 hr. clock)

7B. Sampling Time (min)

480

8. Tons This Shift

517

9. Type of Sample (select one)

- (1) designated occ (ug)
- (2) nondesignated occ (ug)
- (3) designated area (ug)
- (4) designated work position (sur)
- (5) part 90 miner

1

10. MMU DA/SA

0020

11. Occ Code

036

12. Part 90 Miner Sampled

SSN

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SSN

(b) (6)

Signature

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Final Weight

Initial Weight

Weighed By

OSP Checked By

Void Code

Date Processed

KEEP THIS FOR YOUR RECORDS

50905 00

Dr 12-11-06



Dust Data Card

1. Cassette Number

57 641327

2. Mine ID Number

42 01715

3. Contractor Code

(min)

4. Mine Name

5. Company Name

6. Date Sampled

12 04 06
Mo. Da. Yr.

7A. Sampling Start Time

(24 hr. clock)

7B. Sampling Time (min)

8. Tons This Shift

9. Type of Sample (select one)

- (1) designated occ (ug)
- (2) nondesignated occ (ug)
- (3) designated area (ug)
- (4) designated work position (sur)
- (5) part 90 miner

9

10. MMU DA/SA



11. Occ Code

12. Part 90 Miner Sampled

SSN

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SSN

(b) (6)

Signature

Final Weight

Initial Weight

Weighed By	OSP Checked By	Void Code

Date Processed

KEEP THIS FOR YOUR RECORDS

20105-02

12-11-06

Mine Safety and Health Administration
Coal Inspection Tracking Report



Mine ID: 42-01715
Company Name: GENWAL RESOURCES INC
Mine Name: CRANDALL CANYON MINE
Activity Code: E01
Event Number: 4474244

Mining Height (inches): 72
Number Employees: 60
Number Production Shifts: 3
Number Maintenance Shifts: 3

The undersigned certify by signature that they have completed the minimum requirements as defined by the inspection procedures listed within this tracking system and the Coal General Inspection Procedures Handbook. All AR's who participated in this inspection event must sign this cover sheet and initial each report page where their AR number indicates participation on this investigation or inspection activity.

AR Signature	AR #	Date
	23355	12/13/2006

The undersigned supervisor certifies that the documentation contained in this set of Inspection Tracking reports indicates that the minimum requirements for this event have been completed. Each report page must also be initialed to certify review.



ture

12/14/06
Date



MineID: 4201715 Event Number: 4474244 Activity Code: E01 Inspector(s) Initials: DPB Supervisor Initials: Dr

Coal Inspection Tracking System

General

Advised of Conference Procedures (Miner Rep)
Required= Yes

Upon issuing any enforcement action, the inspector advised the operator and miners' representative of procedures for requesting a safety and health conference under 30 CFR 100.6(b). The purpose of the safety and health conference is to submit any additional information relating to action taken by the inspector.

Date	AR #		Shift	Complete
11/13/06	23355	Bodie Allred	2	<input checked="" type="checkbox"/>

Advised of Conference Procedures (Operator)
Required= No

Upon issuing any enforcement action, the inspector advised the operator and miners' representative of procedures for requesting a safety and health conference under 30 CFR 100.6(b). The purpose of the safety and health conference is to submit any additional information relating to action taken by the inspector.

Check In And Out System
Required= Yes

The inspector determined the system being used at the mine complied with 30 CFR 75.1715.

Date	AR #		Shift	Complete
11/13/06	23355	check in check out system	2	<input checked="" type="checkbox"/>

First Day Arrival In Advance Of Starting Time
Required= Yes

The inspector arrived at the mine on the first day of the inspection in advance of starting time. Sufficient time was allowed for pre-inspection contacts, a preliminary review of record books, and an overview of the mine map to determine which area of the mine to begin the inspection. A physical inspection of the mine began immediately after the pre-inspection contacts were made. If a physical inspection of the mine did not begin on the first day of a regular inspection MSHA supervision or management was informed prior to the inspector leaving mine property.

Date	AR #		Shift	Complete
11/13/06	23355		2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

APB

Supervisor Initials:

DV

Coal Inspection Tracking System

General

Independent Contractors

Required= No

All independent contractors encountered were inspected for compliance with applicable standards, including: observations of work practices, comparing training records with information received from workers, and inspection of equipment. MSHA Form 2000-208 (inspection notes page) was completed and submitted as part of the inspection report.

Interim Conference

Required= No

When daily conferences were not possible, regularly scheduled interim conferences were conducted. These conferences provided an overview of the inspection activities and an opportunity for the operator and miners' representatives to express any concerns.

Mine Map Reviewed (First Day For Hazards)

Required= Yes

The inspector, prior to going underground on the first day of the inspection, studied the mine map for consistency with approved mining methods, mining in proximity to worked-out areas, oil and gas wells, fuel transmission lines, bodies of water that could present an underground flood hazard, mines located adjacent to, above and below active workings, and any danger that surface mining may present to underground miners.

Date	AR #	Shift	Complete
11/13/06	23355	2	<input checked="" type="checkbox"/>

Notification of Inspection (Miner Representative)

Required= Yes

On the first day of the inspection, the inspector notified the miner representative of the type of inspection to be conducted and scheduled a time for a pre-inspection conference. On subsequent days of the inspection, the inspector notified the representative of the continuing inspection and afforded them the opportunity to exercise their rights under 103(f) of the Mine Act.

Date	AR #	Miner Representative	Shift	Complete
11/13/06	23355	Bodie Allred	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

DFB

Supervisor Initials:

Dr

Coal Inspection Tracking System

General

Notification of Inspection (Operator)

Required= Yes

On the first day of the inspection, the inspector notified the operator of the type of inspection to be conducted and scheduled a time for a pre-inspection conference. On subsequent days of the inspection, the Inspector notified the representative of the continuing inspection and afforded them the opportunity to exercise their rights under 103(f) of the Mine Act.

Date	AR #		Shift	Complete
11/13/06	23355	Bodie Allred	2	<input checked="" type="checkbox"/>

Observed Man-trips In And Out Of Mine

Required= Yes

The inspector evaluated mantrip operating practices for safety by observing at least one mantrip in and out of the mine.

Date	AR #		Shift	Complete
12/11/06	23355		2	<input checked="" type="checkbox"/>

Post-Inspection Conference

Required= Yes

The inspector scheduled and held a post-inspection conference with the mine operator and miners representative (where applicable). The conference included a summary of all enforcement actions (including root causes) and any observations concerning conditions or practices. Accidents at the mine and any samples or surveys taken during the inspection were discussed.

Date	AR #		Shift	Complete
12/13/06	23355		2	<input checked="" type="checkbox"/>

Pre-Inspection Conference

Required= Yes

The inspector scheduled and held a pre-inspection conference with both the mine operator and miners representative (where applicable). The conference was conducted on or soon after the first day of inspection and covered enforcement actions, the accident history at the mine, a comparison to the national accident incident rates, and results of pertinent samples or surveys taken during previous inspections.

Date	AR #		Shift	Complete
11/13/06	23355		2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

DPB

Supervisor Initials:

Dr

Coal Inspection Tracking System

General

Travel with Mine Examiner - On-shift

Required= Yes

The inspector accompanied at least one mine examiner during a required on-shift examination of the mine to detect any unsafe practices and determine that adequate examinations were being conducted.

Date	AR #	Shift	Complete
12/11/06	23355	2	<input checked="" type="checkbox"/>

Travel With Mine Examiner - Preshift

Required= No

The inspector accompanied at least one mine examiner during a required pre-shift examination of the mine to detect any unsafe practices and determine that adequate examinations were being conducted.

Travel With Mine Examiner - Weekly

Required= No

The inspector accompanied at least one mine examiner during a required weekly examination of the mine to detect any unsafe practices and determine that adequate examinations were being conducted.

Uniform Mine File Reviewed

Required= Yes

The inspector reviewed the Uniform Mine File (UMF) just prior to conducting the inspection. The type of event and the area to be inspected dictated the extent of the review per Uniform Mine File Procedures Handbook.

Date	AR #	Shift	Complete
11/13/06	23355	2	<input checked="" type="checkbox"/>



MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

DPPB

Supervisor Initials:

D

Coal Inspection Tracking System

Records

All Required Noise Exposure Records (Reviewed)

Required= No

The inspector determined if the operator was maintaining applicable records required by 30 CFR Part 62.110(e), 62.130(a), 62.171(c), 62.180(b), and 62.190.

ATRS Certification (Available)

Required= No

The inspector determined if the operator had available a certification, by a registered engineer for each ATRS system at the mine, stating that the ATRS system meets the structural capacity as required by 30 CFR 75.209(e)(1) and 75.209(e)(2).

Canopies And Cabs; Self-Propelled Equipment

Required= No

The inspector evaluated compliance with 30 CFR 75.1710-1(e) by determining if the operator had evidence of certification by a registered engineer for each canopy or cab system at the mine, stating that it met the required structural capacity.

Certifications And Records Of Daily Hoist

Required= No

The operator's compliance with recording required examinations required by 30 CFR 75.1400-4 & 77.1404 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Clean Up Program

Required= No

The inspector reviewed the cleanup program required by 75.400-2 and determined if it was available in written form.

Daily And Monthly Examination Of Ventilation Fans

Required= Yes

The operator's compliance with recording required examinations required by 30 CFR 75.312 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Daily Examination Of Hoist Shaft Sinking

Required= No

The operator's compliance with recording required examinations required by 30 CFR 77.1906 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

DPB

Supervisor Initials:

D

Coal Inspection Tracking System

Records

Daily Inspection of Active Areas (Surface Mine)

Required= No

The operator's compliance with recording examinations required by 30 CFR 77.1713 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Diesel Exhaust Gas Records (Exceeding The TLV)

Required= No

The operator's compliance with recording Diesel Engine Performance examinations required by 30 CFR 75.1914(g(5)) was evaluated. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Diesel Training And Qualification List

Required= No

The inspector determined if the operator was maintaining records required by 30 CFR Part 75.1915(c).

Electrical Map (Reviewed)

Required= Yes

The inspector reviewed the map of the electrical system required by 30 CFR 75.508 and interviewed the person responsible for its maintenance to determine the location of each electrical unit. The map accuracy was evaluated by comparing the electrical unit locations recorded on the map to actual locations encountered during the inspection.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Emergency Medical Assistance Review

Required= Yes

The inspector reviewed and compared the emergency medical assistance agreement with the information posted at the mine, as required by 30 CFR 75.1713-1 and 77.1702.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Evaluate The Approved Mine Ventilation Plan

Required= Yes

The inspector reviewed the operators currently approved mine ventilation plan required by 75.370(a)(1) and determined if it was suitable to conditions observed in the mine during this inspection. This evaluation included information obtained from the miners and the mine operator. The results of this evaluation was recorded on MSHA Form 2000-204 and submitted with completed inspection report for this event.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: APB

Supervisor Initials: [Signature]

Coal Inspection Tracking System

Records

Evaluate The Approved Roof Control Plan

Required= Yes

The inspector reviewed the operators currently approved roof control plan required by 75.220(a)(1) and evaluated the plan by making on site observation of the effectiveness of controls being installed. This evaluation included information obtained from the miners and the mine operator. The results of this evaluation was recorded on MSHA Form 2000-204 and submitted with completed inspection report for this event.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Examinations Of Impoundments

Required= No

The operator's compliance with recording examinations required by 30 CFR 77.216-3 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Fire Doors

Required= No

The operator's compliance with recording examinations required by 30 CFR 75.1708 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations were recorded.

Fire Suppression Systems/Permanent Diesel Storage

Required= No

The operator's compliance with recording examinations required by 75.1911 and 75.1912 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations were recorded.

First-Aid Training Supervisory Employees

Required= Yes

The inspector reviewed MSHA 5000-23 forms at the mine sufficient to determine if training was provided in accordance with 30 CFR 75.1713-3. A representative number of supervisors were polled to determine the quality of the training.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DPB

Supervisor Initials: [Signature]

Coal Inspection Tracking System

Records

Hazardous Conditions Postings And Corrections

Required= Yes

The operator's compliance with recording required examinations was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

High Voltage Longwall Equipment

Required= No

The operator's compliance with recording of examinations required by 30 CFR 75.821 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Independent Contractor Register

Required= No

The inspector reviewed the production operator's independent contractor register required by 30 CFR 45.4(b). Any new data or updates to MSHA's Contractor Database were noted and submitted on MSHA Form 2000-205.

Inspection And Test Of Automatic Fire Sensors

Required= Yes

The operator's compliance with recording examinations required by 30 CFR 75.1103-8 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Maintenance Record Diesel Engine Performance

Required= No

The operator's compliance with recording required examinations was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

SFB

Supervisor Initials:

J

Coal Inspection Tracking System

Records

Methane Monitor Calibration Test

Required= Yes

The operator's compliance with recording tests required by 30 CFR 75.342(a)(4) was evaluated by reviewing prior records back to the ending date of the last regular safety and health inspection and by polling miners.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Mine Emergency Evacuation and FF Program

Required= No

The inspector reviewed mine evacuation drills records required by 30 CFR 75.1502(c)(2) to determine if all miners on all shifts have participated at intervals of not more than 90 days. The effectiveness of the program was evaluated by polling miners on their participation and familiarity with the program.

Mine Map (Reviewed)

Required= No

The inspector reviewed the up-to-date mine map required by 30 CFR 75.1200 relative to approved mining methods and gave special attention concerning ventilation controls, air-flow direction and required temporary notations to determine its accuracy.

Monthly Examination Of Surface Electrical Equip

Required= Yes

The operator's compliance with recording examinations required by 30 CFR 77.502 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Monthly Examination Of Surface HV Circuits

Required= Yes

The operator's compliance with recording examinations required by 30 CFR 77.800-2 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DTPB

Supervisor Initials: [Signature]

Coal Inspection Tracking System

Records

Monthly Examination Of Surface LMV Circuits

Required= Yes

The operator's compliance with recording examinations required by 30 CFR 77.900-2). was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Monthly Testing Of UG High Voltage CB

Required= Yes

The operator's compliance with recording examinations required by 30 CFR 75.800-4 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Monthly Testing Of UG Low And Medium Voltage CB

Required= Yes

The operator's compliance with examinations required by 30 CFR 75.900-4 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Movement of HV Power Centers and Transformers

Required= No

The operator's compliance with recording examinations required by 30 CFR 75.812 was evaluated by comparing information recorded in the record book with on site observations and information obtained during discussions with the miners and the mine operator.

Noise Program (Reviewed) (Surface)

Required= No

The inspector determined the operator was maintaining all records required by his current Hearing Conservation Program. Noise surveys were conducted in accordance with current health inspection procedures.

Noise Program (Reviewed) (Underground)

Required= No

The inspector determined the operator was maintaining all records required by his current Hearing Conservation Program.

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

DPB

Supervisor Initials:

[Signature]

Coal Inspection Tracking System

Records

Operator's Respirable Dust Program (Sur) Required= No

The inspector evaluated the current respirable dust control plan. An onsite evaluation was made of surface locations, miners were polled, and respirable dust samples collected pursuant to current Coal Mine Health Inspection Procedures Handbook.

Operator's Respirable Dust Program (UG) Required= Yes

The inspector reviewed records required by the respirable dust control portion of the mine ventilation plan and analysis reports of operator's respirable dust samples to determine if they were maintained and posted as required.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Part 47 Hazcom Records Required= No

The inspector reviewed the written HazCom program, material safety data sheets, and chemical inventory.

Part 48 Training Records (5000-23 Forms) Required= Yes

The inspector reviewed MSHA 5000-23 forms sufficient to determine if required training was provided and discussed the contents of the training with a representative number of workers to evaluate the quality of the training.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Part 49 Training Records (Mine Rescue Teams) Required= Yes

The inspector reviewed MSHA 5000-23 forms to determine if required training was provided and discussed the contents of the training with mine rescue team members to evaluate the quality of the training.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Part 50 Records (7000-1 and 7000-2 Forms) Required= Yes

The inspector reviewed MSHA 7000-1 forms at the mine and compared the information with that submitted to MSHA. The forms were compared to information obtained from miners polled to determine if events were properly reported. The inspector reviewed MSHA 7000-2 forms to determine if they were maintained at the mine office nearest the mine and submitted in a timely manner.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: *DPB*

Supervisor Initials: *[Signature]*

Coal Inspection Tracking System

Records

Petitions For Modifications Granted For Mine

Required= No

The inspector reviewed petitions for modifications to determine if circumstances under which they were granted were still valid, if they were posted on the mine bulletin board per 30 CFR 44.5(b), and if current petitions are posted per 30 CFR 44.9.

Preshift & On-Shift Examination

Required= Yes

The operator's compliance with recording examinations required by 30 CFR 75.360 & 75.362 were evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
11/13/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/14/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/15/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/16/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/26/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/27/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Preshift & On-Shift Examination (Slope & Shafts)

Required= No

The operator's compliance with recording examinations required by 30 CFR 77.1901 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Record Of AMS Alarm Activation

Required= No

The AMS signal device or alarm activation records were reviewed back to the ending date of the last regular safety and health inspection to evaluate compliance with 30 CFR 75.351(o).

Record Of Certified And Qualified Persons Surface

Required= No

The inspector reviewed and compared the qualification list required by 30 CFR 75.159 and 77.106 with copies of individual training records.

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DPB

Supervisor Initials: [Signature]

Coal Inspection Tracking System

Records

Record Of Certified And Qualified Persons UG

Required= Yes

The inspector reviewed and compared the qualification list with copies of individual training records.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Record Of Inspections For Thermal Dryers

Required= No

Thermal dryer control instrument records were reviewed to evaluate compliance with 30 CFR 77.314.

Recorded Measurements For Initial Rope Stretch

Required= No

The inspector reviewed the record book and determined if the results of all required measurements were recorded.

Required Hoist Rope Tests

Required= No

The operator's compliance with recording required examinations was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Respirable Dust Control Plan (Posted)

Required= Yes

The inspector reviewed records required by the current respirable dust control plan and analysis reports of operator's respirable dust samples to determine if they were maintained and posted as required by 30 CFR 71.210(b) and 71.301(d)..

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Roof Bolt Manufacturer's Certification (Available)

Required= No

The inspector determined if the operator has available a certification per 30 CFR 75.204(a) stating that the roof bolts used at the mine were manufactured in accordance with the specifications of ASTM F432-95.

Roof Bolt Torque Measurements Recorded

Required= No

The operator's compliance with recording required examinations was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

RTPB

Supervisor Initials:

J

Coal Inspection Tracking System

Records

Roof Control Plan (Available)

Required= Yes

The inspector determined if the current roof control plan per per 30 CFR 75.220(e) was available to the miners and representative of miners at the mine.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Self-Rescue Devices (Records)

Required= Yes

The inspector reviewed the records and determined if the results of all required tests were recorded per 30 CFR 75.1714-3(e). If possible, the inspector determined if the operator followed the manufacturer's test procedures.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Smokers Articles (Program)

Required= Yes

The inspector reviewed any records required by the Smoking Program approved under 30 CFR 75.1702 . The inspector compared the records with information obtained from polling the miners and observing the operator implementing the requirements of the Smoking Program.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input type="checkbox"/>
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Surface Bathhouse Waiver (Posted)

Required= No

The inspector determined if the operator posted the current surface bathhouse waiver per 30 CFR 71.403(c)..

Surface Safety Program Instruction (Posted)

Required= No

The inspector determined if the operator maintained a Safety Program of Instruction and posted it in conspicuous places throughout the mine pursuant to 30 CFR 77.1708.

Test Of Hoist Safety Catches

Required= No

The operator's compliance with recording examinations required by 30 CFR 75.1400-2 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: *DTPB*

Supervisor Initials: *N*

Coal Inspection Tracking System

Records

Tests Of Fire Hydrants And Fire Hose

Required= No

The operator's compliance with recording examinations required by 30 CFR 75.1103-11 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Trolley Overcurrent Protection Tests/Examinations

Required= No

The operator's compliance with recording examinations required by 30 CFR 75.1001-1 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Ventilation Plan (Posted)

Required= Yes

The inspector determined if proposed and current ventilation plans or revisions were posted on the mine bulletin board as required by 30 CFR 75.370(a)(3)(iii) and 75.370(f)(3).

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Weekly Examination For Methane And Hazards

Required= Yes

The operator's compliance with recording examinations required by 30 CFR 75.364 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
11/14/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/15/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/16/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>
11/27/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

DPB

Supervisor Initials:

[Signature]

Coal Inspection Tracking System

Records

Weekly Examination Record Of Diesel Equipment Required= Yes

The operator's compliance with recording examinations required by 30 CFR 75.1914(f)(2) was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Weekly Inspection Of Fire Suppression Devices Required= Yes

The operator's compliance with recording examinations required by 30 CFR 75.1107-16 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

Weekly Tests Of Underground Electrical Equipment Required= Yes

The operator's compliance with recording examinations required by 30 CFR 75.512 was evaluated by comparing information recorded in the record book with actual conditions in the area inspected. Prior recordings were reviewed back to the ending date of the last regular safety and health inspection to determine if the results of all required examinations, including corrective actions, were recorded.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>

X-Ray Plan Required= Yes

The inspector reviewed and compared the X-Ray Plan agreement with the information posted at the mine.

Date	AR #	Record For	Shift	Complete
12/11/06	23355	Entire Mine	2	<input checked="" type="checkbox"/>



MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: *D P B*

Supervisor Initials: *DR*

Coal Inspection Tracking System

Surface

Aerial Tramways

Required= No

An inspection was conducted of all aerial tramways for existing and potential hazards, including: structure condition, guarding, accumulations, lighting, electrical installation, and fire protection.

All Shifts (Surface)

Required= No

The inspector made an inspection during each shift. The inspector discussed matters concerning health and safety and work practices with miners encountered.

Auger Openings

Required= No

Auger openings were inspected for potential hazards.

Blasting Practices (Surface)

Required= No

An inspection was conducted of all areas where explosives were being used on mine property, including: an observation of work practices, the blasting cycle, storage security, combustible materials, fire protection, and record keeping. The inspector completed the appropriate ATF forms.

Coal Stock Pile

Required= Yes

Coal stockpiles were inspected for potential hazards such as fires or persons working in close proximity to active underground feeders.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Silo	2	<input checked="" type="checkbox"/>

Communications Installations

Required= Yes

An inspection was conducted of all communication installations for compliance with applicable standards, including attention to: grounding, insulation, lighting protection, proper operation, and safe access.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Buildings	2	<input checked="" type="checkbox"/>

MineID: 4201715 Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DTB

Supervisor Initials: [Signature]

Coal Inspection Tracking System

Surface

Draw-Off Tunnels

Required= Yes

An inspection was conducted of draw-off tunnels for existing and potential hazards, such as fire hazards, accumulations, and inadequate escapeways, air quality, guarding, and ventilation.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Reclaim draw off tunnel	2	<input checked="" type="checkbox"/>

Drilling Practices

Required= No

An inspection was conducted of all drill sites on mine property and the inspector observed a complete drilling cycle to evaluate work practices, examination of equipment, safe access, equipment condition, accumulation of combustible materials, fire protection, and noise and respirable dust controls.

Dumping Facilities

Required= Yes

An inspection was conducted of conditions and practices at all dumping facilities in accordance with guidance provided in the Dump Point Inspection Handbook, including the adequacy of stop blocks, berms, access road grades, warning signs, posted speed limits, and the presence of stress cracks.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Truck load out	2	<input checked="" type="checkbox"/>

Electrical Installation

Required= Yes

An inspection was conducted of all electrical installations for existing and potential hazards, such as: structure condition, guarding, accumulations, lighting, fire protection, safety devices, and safe access.

Date	AR #	Location	Shift	Complete
12/12/06	23355	sub station- M G buildings	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DFTB

Supervisor Initials: [Signature]

Coal Inspection Tracking System

Surface

Equipment

Required= Yes

An inspection was conducted of this piece of in-use or available-for-use equipment to determine if hazards or potential hazards existed. The inspection evaluated compliance with applicable standards, including: safe access, guards, equipment condition, fire detection systems, combustible materials, fire protection, condition of electrical cables, wiring, and circuit protection. If a serial number was not available, a description (company number, etc.) was entered in the comments section.

Date	AR #	Location				Shift	Complete
12/12/06	23355	Silo	Caterpillar	Bulldozer	s n 48w37034	2	<input checked="" type="checkbox"/>
12/12/06	23355	Silo	Komatsu	Load-Haul-Dump	s n 1174	2	<input checked="" type="checkbox"/>
12/12/06	23355	Upper material yard	JCB, Inc.	Forklift	S N slp-50840se1573748	2	<input checked="" type="checkbox"/>

Escapeways

Required= Yes

An inspection was conducted of all work areas to determine if escapeways were adequate. The inspection evaluated compliance with applicable standards for safe access, lighting, escapeway maintenance, and included discussions with miners working in each area.

Date	AR #	Location				Shift	Complete
12/12/06	23355	Reclaim draw off tunnel				2	<input checked="" type="checkbox"/>

Explosives Storage

Required= Yes

An inspection was conducted of all areas where explosives were stored on mine property, including: an observation of storage security, combustible materials, handling, fire protection, and record keeping. The inspector completed the appropriate ATF forms.

Date	AR #	Location				Shift	Complete
12/12/06	23355	Upper material yard				2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials:

SFB

Supervisor Initials:

[Signature]

Coal Inspection Tracking System

Surface

Fire Fighting Equipment Surface

Required= Yes

An inspection was conducted of all surface fire fighting equipment, including an evaluation of: equipment maintenance, placement for safe access if needed, and equipment identification.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Buildings	2	<input checked="" type="checkbox"/>

Fuel Storage

Required= Yes

An inspection was conducted of all areas where fuel was being stored for compliance with applicable standards including: safe access, combustible materials, handling, and fire protection.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Lower Yard	2	<input checked="" type="checkbox"/>

Ground Control

Required= No

The inspector evaluated compliance with the current ground control plan. The inspector also evaluated the adequacy of the plan for conditions and polled the operator and miners as to their knowledge of the plan.

Haulage Facilities (Including Belts)

Required= Yes

An inspection was conducted of this haulage facility to determine compliance with applicable standards, including: safe access, guards, equipment condition, fire hazards, combustible materials, fire protection, and electrical installations.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Truck load out belt	2	<input checked="" type="checkbox"/>
12/12/06	23355	Reclaim Belt	2	<input checked="" type="checkbox"/>
12/12/06	23355	Silo belt	2	<input checked="" type="checkbox"/>

High Walls And Spoil Banks

Required= No

An inspection was conducted of high walls and spoil banks in all active areas for existing and potential hazards, such: loose material, over hanging rock, or unstable spoil banks.

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DPB

Supervisor Initials: Dr

Coal Inspection Tracking System

Surface

Hoisting Equipment

Required= No

An inspection was conducted of all hoisting equipment to determine compliance with applicable standards, including: structure condition, guarding, accumulations, lighting, electrical installations, rope condition, fire protection, safety devices, and safe access.

Illumination Of Work Areas

Required= Yes

An inspection was conducted of all work areas to evaluate illumination adequacy. The evaluation included observation of lighting and information obtained from polling miners.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Surface	2	<input checked="" type="checkbox"/>

Methane Tests In Required Locations (Surface)

Required= Yes

The inspector conducted a test for methane in all structures and areas where there was a potential for a hazardous accumulations of methane.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Surface	2	<input checked="" type="checkbox"/>

Non-Major Construction Sites

Required= No

All independent contractors encountered at non-major construction sites were inspected for compliance with applicable standards, including: observations of work practices, comparing training records with information received from workers, and inspection of equipment. MSHA Form 2000-208 (inspection notes page) was completed and submitted as part of the inspection report.

Other Places Where Miners Work Or Travel

Required= Yes

Other work areas and travelways were inspected for compliance with applicable standards, including: observations of work practices, illumination, safe access, combustible material accumulations, workplace maintenance, and air quality.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Roadways and yards	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DPB

Supervisor Initials: Dr

Coal Inspection Tracking System

Surface

Potable Water (Surface)

Required= Yes

The inspector determined if potable water was made available. This evaluation included information obtained from the miners and the operator.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Surface	2	<input checked="" type="checkbox"/>

Preparation Plant

Required= Yes

An inspection was conducted of all preparation plants for compliance with applicable standards, including: structure condition, guarding, accumulations, lighting, electrical installation, air quality, fire protection, and safe access.

Date	AR #	Location	Shift	Complete
12/12/06	23355	transfer buildings	2	<input checked="" type="checkbox"/>

Refuse Pile And Impoundments

Required= No

The inspector made an inspection in accordance with the Coal Mine Impoundment Inspection Procedures Handbook to determine compliance with applicable standards, including: safe access, berms, proximity to underground mines, drainage, combustible materials around site, equipment condition, and fire protection. A comparison was made between the operator's examination records and the inspector's observations.

Safety Talks With Surface Crews

Required= Yes

The inspector held safety discussions with miners at the mine, including topics such as: recent accidents, accident history, mine-specific hazards, and occupation-specific health and safety concerns.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Surface	2	<input checked="" type="checkbox"/>

Sanitary Facilities (Bathhouse)

Required= Yes

An inspection was conducted of all sanitary facilities for compliance with applicable standards, including attention to: location, structure, cleanness, safe access, and compliance with a bathing facilities waiver.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Bathhouse	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: *DPB*

Supervisor Initials: *D*

Coal Inspection Tracking System

Surface

Shop

Required= Yes

An inspection was conducted of all shops to determine compliance with applicable standards, including attention to: structure condition, guarding, accumulations, lighting, electrical installation, air quality, fire protection, safety devices, and safe access.

Date	AR #	Location	Shift	Complete
12/12/06	23355	shop	2	<input checked="" type="checkbox"/>

Surface First Aid Kit

Required= Yes

An inspection was conducted of all surface first-aid kits.

Date	AR #	Location	Shift	Complete
12/12/06	23355	warehouse	2	<input checked="" type="checkbox"/>

Thermal Dryer

Required= No

An inspection was conducted of all thermal dryers for compliance with applicable standards, including attention to: structure condition, guarding, accumulations, lighting, electrical installation, air quality, fire protection, safety devices, and safe access.

Travelways And Active Roadways

Required= Yes

An inspection was conducted of all travelways and active roadways for compliance with applicable standards, including attention to: road grades and design, visibility, and traffic control.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Surface	2	<input checked="" type="checkbox"/>

Ventilation Facilities

Required= Yes

An inspection was conducted of all ventilation facilities for compliance with applicable standards, including attention to: airway heaters, safe access, guards, equipment condition, fire detection systems, combustible materials, fire protection, condition of electrical cables and wiring, and circuit capacity.

Date	AR #	Location	Shift	Complete
12/12/06	23355	Main Fan	2	<input checked="" type="checkbox"/>



MineID: 4201715

Event Number: 4474244

Inspector(s) Initials: DPB

Supervisor Initials: Dr

Coal Inspection Tracking System

Air Quality/Quantity

Measurements of air quantity, tests to determine air quality, and the collection of air samples were conducted in accordance with the requirements contained within the Coal General Inspection Procedures Handbook.

Date	Time	Shift	AR#	Measurement Location	Velocity	Quantity	O2	CH4	CO	NO2	TL Sample	Bottle #
11/14/06	7:30	2	23355	3rd North- 1st right seals			20.9	0.0	0.0	0.0	<input checked="" type="checkbox"/>	
11/14/06	7:50	2	23355	3rd North intake seals			20.9	0.0	0.0	0.0	<input checked="" type="checkbox"/>	
11/14/06	8:30	2	23355	3rd North- 2nd right			20.9	0.0	0.0	0.0	<input checked="" type="checkbox"/>	
11/14/06	9:15	2	23355	3rd North return seals			20.9	0.0	0.0	0.0	<input checked="" type="checkbox"/>	
11/26/06	9:30	2	23355				20.9	0.0	0.0	0.0	<input type="checkbox"/>	
12/4/06	8:10	2	23355	#3 face	975	23,400	20.9	0.0	0.0	0.0	<input type="checkbox"/>	
12/4/06	8:20	2	23355	Last open cross cut	300	48,000	20.9	0.0	0.0	0.0	<input type="checkbox"/>	
12/4/06	11:20	2	23355	#4 face	861	20,664	20.9	0.0	0.0	0.0	<input type="checkbox"/>	
12/4/06	11:45	2	23355	Last open cross cut	318	50,880	20.9	0.0	0.0	0.0	<input type="checkbox"/>	
12/7/06	9:15	2	23355	100 feet inby Main Fan	2475	279,675	20.9	0.0	0.0	0.0	<input checked="" type="checkbox"/>	n6189



MineID: 4201715 Event Number: 4474244 E01

Inspector(s) Initials: DPB

Supervisor Initials: Dr

Coal Inspection Tracking System

Compliance Assistance/Special Initiative

Date	Shift	AR#	Type	Description	# Miners Contacted
11/27/06	2	23355	Special Initiative	Winter Alert	21



MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials:

DTB

Supervisor Initials:

Jr

Coal Inspection Tracking System

Underground MMU

Inspection Progress - All MMU's for this Mine ID and Event

Air Measurements Taken

Required= Yes

The inspector measured air quantity at locations on this working section as required within the Coal General Inspection Procedure Handbook.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

All Shifts (Working Section)

Required= No

The inspector made an inspection during each shift. The inspector discussed matters concerning health and safety and work practices with miners encountered.

Blasting Practices (Working Section)

Required= No

An inspection was conducted of all areas where explosives were being used on this section, including: an observation of work practices, the blasting cycle, storage security, combustible materials, fire protection, and record keeping. The inspector completed the appropriate ATF forms.

Boreholes In Advance Of Mining

Required= No

The operator's compliance with plans approved under 30 CFR 75.388 and 75.389 shall be evaluated by the inspector. Discussions shall be conducted with affected miners and mine supervisors to evaluate their familiarity with plan requirements.

Communication Installations Checked

Required= Yes

An inspection was conducted of all communication installations on this working section for compliance with applicable standards, including attention to: grounding, insulation, lightning protection, proper operation, and safe access.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: DTB

Supervisor Initials: Dr

Coal Inspection Tracking System

Underground MMU *Inspection Progress - All MMU's for this Mine ID and Event*

Compliance Of Dust Control Parameters

Required= Yes

Dust controls used on this working section were inspected to determine compliance with the approved mine ventilation plan. Miners were polled to determine if conditions observed were representative of normal mining conditions. Respirable coal mine dust samples were collected pursuant to the Coal Health Inspection Procedures Handbook.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Compliance With Hearing Conservation Plans

Required= No

The inspector determined operator compliance on this section with the stipulations contained in the current hearing conservation program, including administrative controls such as hearing protection, exposure time limitations, and a discussion with enrolled miners to ascertain their knowledge of the program. Noise surveys were conducted in accordance with the Coal Health Inspection Procedures Handbook.

Dates, Times, and Initials

Required= Yes

The inspector examined all faces on this working section and determined if the mine examiner had certified with dates, times and initials that the required examinations were conducted.

Date	AR #	Location	Shift	Complete
11/26/06	23355	002-0	2	<input checked="" type="checkbox"/>

Escapeway Map

Required= Yes

The Inspector determined if an up-to-date escapeway map was maintained on this working section. Discussions were conducted with the miners to determine if they were familiar with the map location, the designated escape routes, and evacuation procedures.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Face Areas Inspected (For Imminent Dangers)

Required= Yes

All the working places on this active working section were inspected to determine if imminent dangers existed.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: DPB

Supervisor Initials: Dr

Coal Inspection Tracking System

Underground MMU

Inspection Progress - All MMU's for this Mine ID and Event

Fire Protection Checked

Required= Yes

All fire fighting equipment available for use on the section was inspected for compliance with applicable standards, including attention to: equipment maintenance, placement for safe access, inspection record, and adequate capacity.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

First-Aid Equipment Checked

Required= Yes

An inspection was conducted of the underground first-aid kit on this working section for compliance with applicable standards.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Gas Test Documented Or Statements Of Abnormalities

Required= Yes

The inspector tested air quality on this working section at locations required in the Coal General Inspection Procedure Handbook.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Location Of Last Open Crosscut

Required= Yes

The last open crosscut was identified on this working section on each inspection date by it's location in relation to a permanent marker that appears on the mine map; such as a survey spad number or crosscut number.

Date	AR #	Location	Shift	Complete
11/26/06	23355	002-0 lox #5 cross cut	2	<input checked="" type="checkbox"/>

Mining Cycle Observed And Method Listed

Required= Yes

The inspector observed the complete mining cycle on this working section; including the loading and detonation of explosives on conventional working sections or mines that blast from the solid.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: *D P B*

Supervisor Initials: *[Signature]*

Coal Inspection Tracking System

Underground MMU

Inspection Progress - All MMU's for this Mine ID and Event

Observed Haulage Practices

Required= Yes

The inspector observed haulage practices on this working section and determined compliance with applicable standards and evaluate work practices for health and safety.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Potable Water (Working Section)

Required= Yes

The inspector determined if potable water was available on this working section. This evaluation included information obtained from the miners and the operator concerning availability of potable water.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Required Ventilation Controls Adequate

Required= Yes

Temporary and permanent ventilation controls were inspected on this working section during normal mining cycles to determine effectiveness and compliance with applicable standards, including attention to information obtained from the miners installing the ventilation controls, equipment operators, and the mine operator.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Rock Dust Applications Checked

Required= Yes

The inspector examined this working section and determined if rock dust application was adequate. Spot samples were collected where compliance could not be clearly determined by visual observation.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

Rock Dust Survey Taken

Required= No

The inspector conducted a rock dust survey to within 50 feet of the section dumping point on this advancing active working section in the mine. Locations where samples were not previously collected due to wet conditions were tracked and re-inspected for a period of one year. Surveys were collected and submitted in accordance with the Sampling Procedures section of the Coal General Inspection Procedures Handbook.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: DPTB

Supervisor Initials: Dr

Coal Inspection Tracking System

Underground MMU

Inspection Progress - All MMU's for this Mine ID and Event

Roof & Ribs Evaluated

Required= Yes

The inspector observed roof and rib conditions on this active working section to determine compliance with applicable standards, including attention to: roof control failures, roof control plan requirements, supplies required by 30 CFR 75.214, and information obtained from the miners installing the roof supports and the mine operator.

Date	AR #	Location	Shift	Complete
11/26/06	23355	002-0	2	<input checked="" type="checkbox"/>

Safety Talks With Miners

Required= Yes

The inspector held safety discussions with miners on this working section, including topics such as: recent accidents, accident history, mine-specific hazards, and occupation-specific health and safety concerns.

Sanitary Facilities

Required= Yes

An inspection was conducted of sanitary facilities on this working section for compliance with applicable standards, including attention to location and cleanliness.

Date	AR #	Location	Shift	Complete
12/4/06	23355	002-0	2	<input checked="" type="checkbox"/>

MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: *DPB*

Supervisor Initials: *H*

Coal Inspection Tracking System

Underground MMU *Inspection Progress - All MMU's for this Mine ID and Event*

Section Equipment (Including Face Equipment) Required= Yes

An inspection was conducted of this piece of in-use or available for-use equipment to determine compliance with applicable standards, with attention to: permissibility, safe access, guards, equipment condition, fire suppression systems, combustible materials, fire protection, condition of trailing or other machine electrical cables, cable conduit, circuit breaker capacity and identification, methane monitors (where applicable), dust control, and safety devices. If a serial number was not available, a description (company number, etc.) was entered in the comments section.

Date	AR #	Location				Shift	Complete
12/3/06	23355	002-0	Other Type Not Listed	Battery Charger	97312	2	<input checked="" type="checkbox"/>
		D B T					
12/3/06	23355	002-0	Joy Machinery Co. (Joy, Joy Manufacturing Co.)	Continuous Mining Machine	JM-4978-c	2	<input checked="" type="checkbox"/>
12/3/06	23355	002-0	Other Type Not Listed	Power Center	42906-11/03	2	<input checked="" type="checkbox"/>
		Industrial Electronics					
12/3/06	23355	002-0	Fletcher	Roof Bolting Machine	ST-2642	2	<input checked="" type="checkbox"/>
12/3/06	23355	002-0	Long-Airdox	Scoop	2478	2	<input checked="" type="checkbox"/>
12/3/06	23355	002-0	Joy Machinery Co. (Joy, Joy Manufacturing Co.)	Shuttle Car	Co # 12-8	2	<input checked="" type="checkbox"/>
12/3/06	23355	002-0	Joy Machinery Co. (Joy, Joy Manufacturing Co.)	Shuttle Car	Co # 12-11	2	<input checked="" type="checkbox"/>
12/4/06	23355	002-0	Other Type Not Listed	Scoop	Co.# 5	2	<input checked="" type="checkbox"/>
		Skid loader					
12/6/06	23355	002-0	Stamler	Feeder	13269	2	<input checked="" type="checkbox"/>

Self-Rescue Devices (Working Section) Required= No

The operator's compliance with approved self-rescuer condition-of-use requirements on this working section was evaluated by inspecting a representative number of each type of device in use at the mine, but not less than ten percent each inspection quarter.



MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: *DTB*

Supervisor Initials: *lv*

Coal Inspection Tracking System

Haulage

AMS Alarm Systems (Including CO)

Required= Yes

The inspector examined the AMS records and system components and observed the operator making a required calibration of system sensors. To determine the accuracy of the system, the inspector compared the data and times obtained during the inspection with information recorded by the system on the surface.

Belts

Required= Yes

An inspection was conducted of this belt flight and all associated equipment to determine if a hazard or potential hazard existed, including safe access, improper guards, inoperative fire detection systems, combustible materials, fire protection, condition of electrical cables and wiring, power source capacity, and general operating condition. The inspector compared information from examination records with observations made during the inspection.

Date	AR #	Location	Travel Begin	Travel End	Shift	Complete
12/6/06	23355	#2 belt	#39 cross cut	#1 cross cut	2	<input checked="" type="checkbox"/>
12/6/06	23355	#3 belt	#69 cross cut	#39 cross cut	2	<input checked="" type="checkbox"/>
12/6/06	23355	#4 belt	#103 cross cut	#69 cross cut	2	<input checked="" type="checkbox"/>
12/6/06	23355	#5 belt	#110 cross cut	#103 cross cut	2	<input checked="" type="checkbox"/>
12/6/06	23355	#6 belt	#3 cross cut	Main west	2	<input checked="" type="checkbox"/>
12/6/06	23355	#7 belt	Main West section	#6 belt	2	<input checked="" type="checkbox"/>

Skip Shaft Facilities, Bunkers

Required= Yes

An inspection was conducted of this skip shaft or bunker and all associated equipment to determine if a hazard or potential hazard existed, including safe access, improper guards, inoperative fire detection systems, combustible materials, fire protection, condition of electrical cables and wiring, power source capacity, and general operating condition. The inspector compared information from examination records with observations made during the inspection.

Trackways

Required= Yes

The inspector made an inspection of this trackway and determined if hazards or potential hazards existed including clearance, switches, bonding, trolley guards, equipment, combustible materials, fire protection, and condition of electrical cables and wiring. The inspector compared information from examination records with observations made during the examination.



MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: *RFB*

Supervisor Initials: *J*

Coal Inspection Tracking System

UG Outby Areas

Bleeders Including Each Check Point

Required= Yes

At least one entry in this set of bleeder entries was inspected in its entirety or to evaluation points approved in the mine ventilation plan to determine compliance with applicable standards, including attention to: ventilation controls, mine roof conditions, rock dust application, postings of examination certification dates, times, and initials, and any equipment being operated in the bleeder entries. The inspector made tests and measurements of air quality and quantity at locations required in the Coal Inspection Procedures Handbook and compared information in the operator's examination records with actual conditions in the area inspected.

Date	AR #	Location	Travel Begin	Travel End	Shift	Complete
12/11/06	23355	1st south bleeder	Main West #1	Main West #3	2	<input checked="" type="checkbox"/>

Intake Air Courses

Required= Yes

At least one entry in this intake aircourse was inspected in its entirety to determine compliance with applicable standards, including attention to: ventilation controls, man door condition and placement, mine roof conditions, rock dust application, postings of examination certification dates, times, and initials, and any equipment being operated in the intake aircourses. The inspector made tests and measurements of air quality and quantity at locations required in the Coal Inspection Procedures Handbook and compared information in the operator's examination records with actual conditions in the area inspected.

Date	AR #	Location	Travel Begin	Travel End	Shift	Complete
12/7/06	23355	#1 belt	Belt portal	#35 cross cut	2	<input checked="" type="checkbox"/>

MineID: 4201715 Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: *CFB*

Supervisor Initials: *D*

Coal Inspection Tracking System

UG Outby Areas

Return Air Courses

Required= Yes

At least one entry in this return aircourse was inspected in its entirety to determine compliance with applicable standards, including attention to: ventilation controls, man door condition and placement, mine roof conditions, rock dust application, postings of examination certification dates, times, and initials, and any equipment being operated in the return aircourses. The inspector made tests and measurements of air quality and quantity at locations required in the Coal Inspection Procedures Handbook and compared information in the operator's examination records with actual conditions in the area inspected.

Date	AR #	Location	Travel Begin	Travel End	Shift	Complete
12/7/06	23355	Main North	# 35 cross cut	Main Fan	2	<input checked="" type="checkbox"/>
11/16/06	23355	Main West return	No.109 cross cut	No.1 Main West return	2	<input checked="" type="checkbox"/>

MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: *QTB*

Supervisor Initials: *NR*

Coal Inspection Tracking System

UG Outby Areas

Seals (List Each Set)

Required= Yes

All mine seals were inspected to determine compliance with applicable standards, including attention to: seal condition, water traps, test pipes, postings of examination certification dates, times, and initials, and seal ventilation. The inspector made tests and measurements of air quality and quantity at locations required in the Coal Inspection Procedures Handbook and compared information in the operator's examination records with actual conditions in the area inspected.

Date	AR #	Location	Travel Begin	Travel End	Shift	Complete
11/27/06	23355		! Seal	#2 seal	2	<input checked="" type="checkbox"/>
11/16/06	23355	1st North- 4seals	No.1 seal	no. 4 seal	2	<input checked="" type="checkbox"/>
11/14/06	23355	1st right - 3 seals	No. 1 seal	No. 3 seal	2	<input checked="" type="checkbox"/>
11/15/06	23355	1st right - 3 seals	# 1 seal	#3 seal	2	<input checked="" type="checkbox"/>
11/15/06	23355	1st right - 3 seals	#1 seal	#3 Seal	2	<input checked="" type="checkbox"/>
11/14/06	23355	2nd right - 2 seals	No.1 seal	No.3 seal	2	<input checked="" type="checkbox"/>
11/15/06	23355	3rd north- 1st right- 3 seals	#1 seal	#3 seal	2	<input checked="" type="checkbox"/>
11/16/06	23355	3rd North bleeder connection- 4seals	No. seal	No.4 seal	2	<input checked="" type="checkbox"/>
11/14/06	23355	3rd North intake seals -2 seals	No.1 seal	No.2 seal	2	<input checked="" type="checkbox"/>
11/14/06	23355	3rd North return seals -3 seals	No. 1 seal	No.3 seal	2	<input checked="" type="checkbox"/>
11/27/06	23355	Main North seals	#1 seal	#15 seal	2	<input checked="" type="checkbox"/>
11/27/06	23355	main- west	1 intake seal- #107 cross cut	#107 intake seal	2	<input checked="" type="checkbox"/>

MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: *DTB*

Supervisor Initials: *N*

Coal Inspection Tracking System

UG Outby Areas

11/15/06	23355	Main west - 1st right- 3 seals	#1 seal	# 3 seal	2	<input checked="" type="checkbox"/>
11/15/06	23355	Main West intake seals - 5 seals	# 1 seal	# 5- Seal	2	<input checked="" type="checkbox"/>
11/27/06	23355	Main West intake seals - 5 seals	intake seal-# 67 cross cut	Intake seal - #67 cross cut	2	<input checked="" type="checkbox"/>



MineID: 4201715 Event Number: 4474244 Activity Code: E01

Inspector(s) Initials: SPB

Supervisor Initials: Dr

Coal Inspection Tracking System

UG Outby Equipment

Outby Equipment Required= Yes

An inspection was conducted of this piece of in-use or available for-use equipment to determine if any hazards or potential hazardous condition existed, including safe access, improper guards, equipment condition, inoperative fire suppression systems, combustible materials, fire protection, condition of trailing or inter-machine electrical cables, cable conduit, safety devices, and diesel compliance. The serial number, if available, was recorded. If a serial number was not available, a company number or other positive identification was entered in the comments.

Date	AR #	Location	Manufacturer	Type Equipment	Serial #	Shift	Complete
11/14/06	23355	3rd North <i>Manufacturer- A L Lee</i>	Other Type Not Listed	Battery Charger	05f07-m-c 2-400	2	<input checked="" type="checkbox"/>
11/14/06	23355	3rd North <i>Manufacturer- Mine Power Systems</i>	Other Type Not Listed	Battery Charger	11970-3 Co.# 11	2	<input checked="" type="checkbox"/>
11/14/06	23355	3rd North <i>Manufacturer- Industrial Electronics</i>	Other Type Not Listed	Transformer	43420-12/03	2	<input checked="" type="checkbox"/>
11/14/06	23355	3rd North <i>Manufacturer- Industrial electronics</i>	Other Type Not Listed	Transformer	Co. # 16	2	<input checked="" type="checkbox"/>
11/27/06	23355	Main North <i>Industrial Electric</i>	Other Type Not Listed	Transformer	Co#2-#6 cross cut	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Balror pumps</i>	Other Type Not Listed	Pump	Co.#2	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Baldor Pumps</i>	O & K Trojan (wheel loaders)	Pump	Co.#1	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Baldor pumps</i>	Other Type Not Listed	Pump	Co.#3	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Intermountain Electronics</i>	Other Type Not Listed	Transformer	39-19011-196	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west	Other Type Not Listed	Transformer	C0 # 102	2	<input checked="" type="checkbox"/>

MineID: 4201715

Event Number: 4474244

Activity Code: E01

Inspector(s) Initials: *QPB*

Supervisor Initials: *Dr*

Coal Inspection Tracking System

UG Outby Equipment

11/27/06	23355	main west <i>Intermountain Electronics</i>	Other Type Not Listed	Transformer	Co. #19	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Intermountain Electronics</i>	Other Type Not Listed	Transformer	Co.#8- sn 15743-1094	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west	Other Type Not Listed	Transformer	Co#9-- # 44 cross cut	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Intermountain Electronics</i>	Other Type Not Listed	Transformer	Co#5-- #42 cross cut	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Intermountain Electronics</i>	Other Type Not Listed	Transformer	Co.#3-- #42 cross cut	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west <i>Intermountain Electronics</i>	Other Type Not Listed	Transformer	Co.#8-#29 cross cut	2	<input checked="" type="checkbox"/>
11/27/06	23355	main west	Other Type Not Listed	Transformer	Co.#4--#4 cross cut	2	<input checked="" type="checkbox"/>
12/6/06	23355	# 4 belt drive	Long-Airbox	Belt Conveyor Drive	Co.#4	2	<input checked="" type="checkbox"/>
12/6/06	23355	# 6 belt drive	Long-Airbox	Belt Conveyor Drive	Co. # 6	2	<input checked="" type="checkbox"/>
12/6/06	23355	#2 belt drive	Long-Airbox	Belt Conveyor Drive	Co.2	2	<input checked="" type="checkbox"/>
12/6/06	23355	#3 belt drive	Long-Airbox	Belt Conveyor Drive	Co.3	2	<input checked="" type="checkbox"/>
12/6/06	23355	#5 belt drive <i>DBT</i>	Other Type Not Listed	Belt Conveyor Drive	Co. #5	2	<input checked="" type="checkbox"/>
12/6/06	23355	#7 belt drive	Long-Airbox	Belt Conveyor Drive	Co.# 7	2	<input checked="" type="checkbox"/>
12/7/06	23355		Long-Airbox	Belt Conveyor Drive	Co.#1	2	<input checked="" type="checkbox"/>