<table>
<thead>
<tr>
<th>Date</th>
<th>Shift</th>
<th>AR#</th>
<th>Type</th>
<th>Description</th>
<th># Miners Contacted</th>
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</thead>
<tbody>
<tr>
<td>10/11/2005</td>
<td>2</td>
<td>23855</td>
<td>23855</td>
<td>WINTER ALERT TALKS</td>
<td>56</td>
</tr>
</tbody>
</table>

Coal Inspection Tracking System
Compliance Assistance/Special Initiative

Friday, December 30, 2005
DAILY COVER SHEET
Date: 10/21/93
Event No.: 411006
Arrived at the Mine:
Departed from the Mine:
MINE No. 1665
Location:
Mine Representative: 

AREAS OF INSPECTION ACTIVITY:

If Accident Occurred, How severe would it be:
No Lost Days
Lost Days
Penalty

Inspector's Initials:
Supervisor's Initials:

MSHA Form 7000-101, June 93 (Revised)
<table>
<thead>
<tr>
<th>CITA/ORDER No.</th>
<th>DATE: 10/27/96</th>
<th>INFORMAL ORDER</th>
<th>41165497</th>
</tr>
</thead>
<tbody>
<tr>
<td>VIOLATION:</td>
<td>Date: 10/27/96</td>
<td>Event No: 41165497</td>
<td></td>
</tr>
<tr>
<td>TIME OF VIOLATION:</td>
<td>13:00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LOCATION OF VIOLATION:</td>
<td>IN THIS AREA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>WHO KNEW VIOLATION:</td>
<td>C1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LENGTH OF TIME VIOLATION HAD EXISTED:</td>
<td>1/2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NUMBER OF PERSONS EXPOSED:</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>LIKELIHOOD OF ACCIDENT:</td>
<td>LIKELY</td>
<td></td>
<td></td>
</tr>
<tr>
<td>IF ACCIDENT OCCURRED, HOW SERIOUS WOULD IT BE:</td>
<td>NOT SEVERE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**AREAS OF INSPECTION ACTIVITY:**

<table>
<thead>
<tr>
<th>Date: 10/27/96</th>
<th>Inspector's Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisor's Initial:</td>
<td>Page No. 1</td>
</tr>
</tbody>
</table>

---

**MSHA Form 7000-10J, June 93 (revised)**

**DAILY COVER SHEET**

<table>
<thead>
<tr>
<th>Date: 10/27/96</th>
<th>Event No: 41165497</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrived at the Mine:</td>
<td>13:00</td>
</tr>
<tr>
<td>Departed from the Mine:</td>
<td>13:00</td>
</tr>
<tr>
<td>Inspector's Initial:</td>
<td></td>
</tr>
<tr>
<td>Supervisor's Initial:</td>
<td></td>
</tr>
</tbody>
</table>

**Paragraphs:**

1. **CITATION AND ORDERS:**
   - [Text]

2. **TIME OF VIOLATION:**
   - [Text]

3. **LOCATION OF VIOLATION:**
   - [Text]

4. **WHO KNEW VIOLATION:**
   - [Text]

5. **LENGTH OF TIME VIOLATION HAD EXISTED:**
   - [Text]

6. **NUMBER OF PERSONS EXPOSED:**
   - [Text]

7. **LIKELIHOOD OF ACCIDENT:**
   - [Text]

8. **IF ACCIDENT OCCURRED, HOW SERIOUS WOULD IT BE:**
   - [Text]
Terminated at 1720; all 10 mil wire installed.
DAILY COVER SHEET

Date: 11/10/89

Arrived at the Mine: 11/10/89
Departed from the Mine: 11/10/89

List Records Books Checked:

Accompanied By: Company Representative
Miners Representative

AREAS OF INSPECTION ACTIVITY:

Respirable Dust
on Dupin 066
Agreed Upon
Prepared 11/5
1/1/89

Inspector's Initials:
Supervisor's Initials and Date:
Page No. 1
DAILY COVER SHEET

Date: 10/24/05  Event No. 11026 (400)
Arrived at the Mine: 9:15 AM
Departed from the Mine: 4:15 PM
List Equipment Books Checked: Freeway, H20
Accompanied By: Company Representative Well, Sept.
Mine Representative: N/A

AREAS OF INSPECTION ACTIVITY:

- HG 20 Crib Block
  - Started in the HG 20 east portal, no support in place (constructed)
  - Clay hole transfer developed from the Castle Mine to UBB

Inspector: John F. Reed
(Hand Written) &

Notes:
- Not sure the place called for a plug, etc. (sold for cement)
- Have been told there is a drain of any kind, and no report
- Would not plug because it is a known location, but no unusual conditions

Supervisor's Initials and Date: 11/21/05
Page No. 1


Date: 10/24/05  Inspector's Initials: [Redacted]
Supervisor's Initials: AR10-3-0.5  Page No. 2


Date: 10/24/05  Inspector's Initials: [Redacted]
Supervisor's Initials: AR10-3-0.5  Page No. 3


Date: 10/24/05  Inspector's Initials: [Redacted]
Supervisor's Initials: AR10-3-0.5  Page No. 4


Date: 10/24/05  Inspector's Initials: [Redacted]
Supervisor's Initials: AR10-3-0.5  Page No. 5


Date: 10/24/05  Inspector's Initials: [Redacted]
Supervisor's Initials: AR10-3-0.5  Page No. 6

**DAILY COVER SHEET**

**Date:** 10/31/1985  
**Supervisor's D#:** 8R-0-4-C-0-5  
**Page No.:** 4

<table>
<thead>
<tr>
<th>Inspector's Initials</th>
<th>Supervisor's Initials</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Arrived at the Mine:** 

- H20 Caribbed
- Worked between H20, H60 entry, pullout face (constructed)
- Along hole transfer between the Castle Mine to USB
- Worked at Full Bow

**Departed from the Mine:**

- Inspector's Initials: [Redacted]

**Areas of Inspection Activity:**


---

**AREAS OF INSPECTION ACTIVITY:**

- H20 Caribbed
- Worked between H20, H60 entry, pullout face (constructed)
- Along hole transfer between the Castle Mine to USB
- Worked at Full Bow

**Reason for Inspection:**

- Check with the previous Inspector's report
- H20 by [Redacted]
- From bow, 20/16
- Worked from the Full Bow, Vest

**Checklist Items:**


---

**Page No.:** 4

**Inspector's Initials:** [Redacted]

---

**Page No.:** 4

**Supervisor's Initials:** [Redacted]

---

**Page No.:** 4

**Inspector's Initials:** [Redacted]

---

**Page No.:** 4

**Supervisor's Initials:** [Redacted]

---

**Page No.:** 4

**Inspector's Initials:** [Redacted]
DAILY COVER SHEET

Date: 12/13/05

Arrived at the Mine: [ ]
Departed from the Mine: [ ]

List Records Book/Chart: [ ]

Supervisor's Items: [ ]

Accompanied By: Company Representative: [ ]
Miners Representative: [ ]

AREAS OF INSPECTION ACTIVITY:

Surface High Voltage
Surface Breaker
Monthly Exam Surface Equipment
Surface Low Voltage
Cable Breaker Part 48
Pass 50
2000-1
7000-2
5000-23
circuit breaker low and medium voltage
Underground High Voltage Test
Underground Test of Equipment

High Voltage Longwall Equipment

Inspector's Initials: [ ]
Supervisor's Initials: [ ]
Page No.: 1

DAILY COVER SHEET
Date 12/22/05 Event No. 8110
Arrived at the Mine Departed from the Mine
List Records Books Checked

Supervisor's Initials

Inspector's Initials

Areas of Inspection Activity:

Supervisor's Initials and Form 7000-101, June 93 (revised)

DAILY COVER SHEET

Date: 12/7/05

Inspector's Initial: [Redacted]

Supervisor's Initial: [Redacted]


Supervisor's D/1: [Redacted]

Page No: 2

MSHA Form 7000-102, June 93 (revised)

Primary Injury: 1 Person Sustained 1 Cut - 2150 ft.

Arrived at the Mine: 12/7/05

Departed from the Mine: 12/7/05

Missed Shifts: 0

Accompanied By:

Miners Representative: [Redacted]

Areas of Inspection Activity:

#7 & 8 Mains
HS 28 Bell
W/W 1 x 2 Bell
HS 28 Mains
<table>
<thead>
<tr>
<th>Violation</th>
<th>30 C.F.R.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Light incline of the dead man's basket is under 12 &amp; not reach.</td>
</tr>
<tr>
<td>2.</td>
<td>Time of Violation: 11/16</td>
</tr>
<tr>
<td>3.</td>
<td>Location of Violation:</td>
</tr>
<tr>
<td>4.</td>
<td>Who knew of Violation?</td>
</tr>
<tr>
<td>5.</td>
<td>Length of Time Violation Existed:</td>
</tr>
<tr>
<td>6.</td>
<td>No. of Persons Exposed:</td>
</tr>
<tr>
<td>7.</td>
<td>Likelihood of Accident:</td>
</tr>
<tr>
<td>8.</td>
<td>If accident occurred, how serious would it be?</td>
</tr>
</tbody>
</table>

Date 11/16/05 Inspector's Initial

Supervisor's Initial


DAILY COVER SHEET

Date 11/20/05 Event No. 4110069

Arrived at the Mine: Decided to go from the Mine: One Photographs taken: 10:41 P.M. Accompanied by: Composer Characteristics: News Representative: Jimmy

AREAS OF INSPECTION ACTIVITY:

- 120: 1970 Hoist
  - 400: 1990 Hoist
  - 600: 1970 Hoist

Inspector's Initials: 11/22/05

Supervisor's Initials and Date: 11/22/05

MSHA Form 7000-10J, June 93 (revised)

CITA ORDER No. 116-22

1. Violation: 29 CFR 57.106
d)

2. Time of Violation:

3. Location of Violation:

4. Who Knew of Violation?

5. Length of Time Violation Existed:

6. No. of Terms Exposed:

7. Likelihood of Accident:

8. If accident occurred, how serious would it be?

Page No. 4

Inspector's Initial

Date

11/30/86

MSHA Form 7000-10J, June 93 (revised)

Inspector's Initial

Date

11/30/86

Supervisor's Initial

Page No. 4

<table>
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<td>ALL CABLE COMING TO MINING AREA HAD A DEFECTIVE/BAD LATCH</td>
</tr>
<tr>
<td>2. TIME OF VIOLATION:</td>
<td>12:10 AM</td>
</tr>
<tr>
<td>3. LOCATION OF VIOLATION:</td>
<td>MINING AREA</td>
</tr>
<tr>
<td>4. WHO KNEW OF VIOLATION:</td>
<td>N/C</td>
</tr>
<tr>
<td>5. LENGTH OF TIME VIOLATION HAD EXISTED:</td>
<td>1 DAY</td>
</tr>
<tr>
<td>6. NUMBER OF PERSONS EXPOSED:</td>
<td>1</td>
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<tr>
<td>7. LIKELIHOOD OF ACCIDENT:</td>
<td>Highly Likely</td>
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<td>8. IF ACCIDENT OCCURRED, HOW SERIOUS WOULD IT BE?</td>
<td>Not Likely</td>
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<tr>
<td>8. IF ACCIDENT OCCURRED, HOW SERIOUS WOULD IT BE?</td>
<td>Not Likely</td>
</tr>
<tr>
<td>Column 1</td>
<td>Column 2</td>
</tr>
<tr>
<td>---------</td>
<td>---------</td>
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<tr>
<td>Item 1</td>
<td>Item 2</td>
</tr>
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<td>Item 3</td>
<td>Item 4</td>
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<td>Item 5</td>
<td>Item 6</td>
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<td>Item 7</td>
<td>Item 8</td>
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<tr>
<td>Item 9</td>
<td>Item 10</td>
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**Notes:**
- The form is filled out with handwritten text.
- The table contains various items listed in different columns.
- The document seems to be a report or form for recording specific data or observations.
<table>
<thead>
<tr>
<th>Date</th>
<th>Inspector's Initial</th>
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<tbody>
<tr>
<td>11/9/00</td>
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</tr>
</tbody>
</table>

**MSHA Form 7003-102, June 93 (revised)**

**CITE/ORDER NO:**

1. **VIOLATION:**
   - [Handwritten text]

2. **TIME OF VIOLATION:**
   - [Handwritten text]

3. **LOCATION OF VIOLATION:**
   - [Handwritten text]

4. **WHO KNOWLEDGABLE:**
   - [Handwritten text]

5. **LENGTH OF TIME VIOLATION HAD EXISTED:**
   - [Handwritten text]

6. **NUMBER OF PERSONS EXPOSED:**
   - [Handwritten text]

7. **LIKELIHOOD OF ACCIDENT:**
   - [Handwritten text]

8. **IF ACCIDENT OCCURRED, HOW SERIOUS WOULD IT BE?**
   - [Handwritten text]

**Plan:**

- [Diagram]

**Net:**

- [Diagram]

**Total:**

- [Diagram]