

#1 Section

Finish

PRE-SHIFT - ONSHIFT

and

DAILY REPORT

Started 10-21-09

Company Performance Coal
Mine UBB
SECTION #1 Section Depth 22
LOCATION Naoma WV GAL
Post Office

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

Form 6-1489
(March 1970)

Budget Bureau No. 42-R1589
Approval expires 9-30-71

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

Handwritten text in the upper section, possibly a date or reference number.

Handwritten text on the right side of the upper section.

Main body of handwritten text in the upper half of the page.

Handwritten text in the middle section, possibly a signature or name.

Handwritten text on the right side of the middle section.

Handwritten text in the lower middle section, possibly a date.

Main body of handwritten text in the lower half of the page.

Handwritten text in the lower section, possibly a signature or name.

Handwritten text at the bottom of the page, possibly a date.

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-21 2009 Section or Area Examined #11
 Time of Examination: from 1:00 a.m. or p.m. to 1:40 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Branche Bowling Time 2:40 A.M. P.M.
 Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>0% CH₄</u>	<u>Water in Face</u>	<u>Reported</u>
2.	<u>↓</u>	<u>N/A</u>	<u>Reported</u>
3.	<u>↓</u>	<u>PAK Bolted</u>	<u>Tagged Reported</u>
4.	<u>↓</u>	<u>Scrap Cut</u>	<u>Tagged Reported</u>
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,800</u>		
<u>20.80%</u>			
<u>0% CH₄</u>			
<u>0% CO</u>			

Remarks: Powercenter R-ways, Haulage, Chargers Clean at Time of Exam

INTAKE phone OK
Air Chamber OK

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

Signed By Branche Bowling 1102-A Certificate No. Assistant Foreman
 Countersigned John Lamb Mine Foreman
Rick Hutchens 37569 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-21-09 Shift EVN Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>0% CH₄</u>	<u>Reported</u>
2.	<u>3</u>	<u>Water in Face</u>	<u>Corrected</u>
3.	<u>4</u>	<u>part Bolted</u>	<u>Corrected</u>
4.		<u>Scrap Cut</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>4:00-4:20</u>	<u>0 % CH₄</u>			
<u>1-4</u>	<u>6:00-6:23</u>	<u>0 %</u>			
<u>1-4</u>	<u>8:00-8:20</u>	<u>0 %</u>			
<u>1-4</u>	<u>10:00-10:30</u>	<u>0 % CH₄</u>			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>4:22pm</u>	<u>0 % CH₄</u>			
<u>Return</u>	<u>8:23pm</u>	<u>0 % CH₄</u>			

Number of Bolts Tested 6

Number of Bolts Torqued Above Range 0 Below Range 0

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

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

Rick Hutchens 375169 [Signature] 3901000
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-21 2009 Section or Area Examined #1
 Time of Examination: from 10100 a.m. or p.m. to 10130 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Reck Time 1100 A.M. P.M.
 Report received by Reck (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CH#2</u>	<u>Rock Rotted</u>	<u>Retreated</u>
2. <u>2X2</u>	<u>Rock Rotted</u>	<u>Retreated</u>
3. <u>3</u>	<u>Rock Rotted</u>	<u>Retreated</u>
4.		
5.		
6.		
7. <u>#1 & 2 FACE</u>	<u>Water in Face</u>	<u>Reported</u>
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20316</u>		

Remarks: Trackways & haulways clear at time of
Exam
Power Cords & changes - n/a
Rock Rotted - OK
Water in Face - OK
CO 0%
O2 20.8%

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

Signed By Reck Hitchins 375109 Certificate No. Kyle Anderson 33238 Assistant Foreman Certificate No.
 Countersigned Calvin 33238 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-21 Shift 3rd Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1-3</u>	<u>N/A</u>	<u>Reflector hung</u>
2. <u>3</u>	<u>Part of steel</u>	<u>Reflector hung</u>
3. <u>4</u>	<u>Scrap cut</u>	
4. <u>4</u>	<u>N/A</u>	
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-4</u>	<u>200 236</u>	<u>0.6 CH₄</u>	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. _____	_____	_____	13. _____	_____	_____
4. <u>1-4</u>	<u>445 536</u>	<u>0.6 CH₄</u>	14. _____	_____	_____
5. _____	_____	_____	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. _____	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>241</u>	<u>0.6 CH₄</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Return</u>	<u>544</u>	<u>0.6 CH₄</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Ryle Anderson
Assistant Mine Foreman

33038
Certificate No.

Charles Lamb
Mine Foreman-Mine Manager

350000
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-21-09 Section or Area Examined #1 section
Time of Examination: from 445 a.m. or p.m. to 536 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson Time 550 A.M. P.M.
Report received by Blake Bow (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Rows include #1 Entry, #2, #3 OCH4!, #4 20.802 OPRM c/o.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Includes handwritten entry: LDB OCH4! 20.802, 20,110.

Remarks:

Power Center
Travelways
Chargers
Outby Chamber
Intake Phone
All reported OK at time of exam.
OCH4! 20.802 OPRM c/o
Water in #3 1+2 Faces

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

Signed By [Signature] Preshift-Mine Examiner
Certificate No. 1479-A
Countersigned [Signature] Mine Manager Mine Foreman
Assistant Foreman
Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-22-09 Shift Day Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	Face <u>och4 208602</u>	<u>none observed</u>	<u>Reported</u>
2.	Face	<u>Needs cleaned - dusted</u>	<u>cleaned dusted</u>
3.	Face	<u>Not Bolted</u>	<u>Bolted made safe</u>
4.	Face	<u>None observed</u>	<u>Reported</u>
5.			
6.			
7.	<u>1-2 Face</u>	<u>water in face</u>	<u>load water out Some out with left C/m</u>
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-4</u>	<u>7-720Am</u>	<u>0 CH4</u>	11.			
2.				12.			
3.	<u>1-4</u>	<u>9-930Am</u>	<u>0</u>	13.			
4.				14.			
5.	<u>1-4</u>	<u>11-1123Am</u>	<u>0</u>	15.			
6.				16.			
7.	<u>1-4</u>	<u>1-150Am</u>	<u>0</u>	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>704Am</u>	<u>0 CH4</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>1102Am</u>	<u>0</u>	8.			
4.				9.			
5.	<u>Return</u>	<u>105pm</u>	<u>0</u>	10.			

Number of Bolts Tested 11

Number of Bolts Torqued Above Range _____

Below Range _____

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

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

SCRES OK.

Pg. 4 Sect 6-7 RCP at 655 Am.

[Signature]
Assistant Mine Foreman

1479-A
Certificate No.

[Signature]
Mine Foreman-Mine Manager

35000
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 10-22 2009 Section or Area Examined #1
 Time of Examination: from 1:00 a.m. or p.m. to 1:50 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Granda Bowling Thomas Time A.M. 2:40 P.M.
 Report received by Rick Hutchins
(Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u> <u>0% CH4</u>	<u>Water in Face</u>	<u>Reported</u>
2. <u>2</u> <u>0%</u>	<u>Water in Face</u>	<u>Reported</u>
3. <u>2 RT</u> <u>0%</u>	<u>P/B</u>	<u>Taged + Reported</u>
4. <u>3</u> <u>0%</u>	<u>N/O</u>	<u>Reported</u>
5. <u>4</u> <u>0% CH4</u>	<u>Scrap Cut</u>	<u>Taged + Reported</u>
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>18,920</u>		
<u>20.802</u>			
<u>0% CH4</u>			
<u>0% CO</u>			

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

Intake phone OK
Air Chamber OK

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

Signed By [Signature] Certificate No. 14179-A
 Preshift-Mine Examiner Assistant Foreman Certificate No.
 Countersigned [Signature] Certificate No. 3500000
 Mine Manager Mine Foreman
Rick Hutchins 37569
 Assistant Foreman Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 10-22-09 Shift Eve Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Includes handwritten entries like '0% ch4', 'Water in FACE', and '(Set pump) Corrected'.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Includes handwritten entries for locations 1-4 and methane content of 0%.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Includes handwritten entries for 'Returns' and '8:10pm'.

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 5 #4 + 5 3:55pm RCP Section Safe & Clear at Time of EXAM

Signature: Rick Hutchins 37569 Assistant Mine Foreman; Signature: 5924 Mine Foreman-Mine Manager; Signature: Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10 22 20 7 Section or Area Examined 1 section
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time A.M. P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>Water on floor</u>	<u>Pump being Reported</u>
2. <u>2</u>	<u>Water on floor</u>	<u>Reported</u>
3. <u>2R</u>	<u>needs cleaned or dusted</u>	<u>Reported</u>
4. <u>3</u>	<u>Scrap Cut</u>	<u>Reflectors hung</u>
5. <u>4</u>	<u>None observed</u>	
6. <u> </u>		
7. <u> </u>		
8. <u> </u>		
9. <u> </u>		
10. <u> </u>		

Air Measurements

Location	CFM	Location	CFM
<u>POB</u>	<u>19740</u>		

Remarks: 2 to #14
power center, changers #14 ways air base intake phone
508 Clean on turn of exam

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

Signed By Rick Hutchens 37569 Certificate No.
 Preshift-Mine Examiner
 Countersigned Kyle Anderson 33238 Certificate No.
 Mine Manager Mine Foreman Assistant Foreman
 Assistant Foreman Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-23-09 Shift Day Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. 1 Face	Water in face	Pump going
2. 2 Face	Water in face	Reported
3. 3 Reflector	needs cleaned & dusted	11/11
4. 3 Face	Scrap Cut	Reflectors hung
5.	none observed	
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-4	208	240	26 CH ₄	11.	
2.				12.	
3. 1-4	508	536	86 CH ₄	13.	
4.				14.	
5.				15.	
6. SCRUBBER READINGS				16.	
7. Lt MIRA	7,642	CFM		17.	
8. Lt MIRA	7,164	CFM		18.	
9.				19.	
10.				20.	

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	246	06 CH ₄	6.		
2.			7.		
3. Return	591	06 CH ₄	8.		
4.			9.		
5.			10.		

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson
Assistant Mine Foreman

53238
Certificate No.

[Signature]
Mine Foreman-Mine Manager

390622
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-23-09 2009 Section or Area Examined #1 section
 Time of Examination: from 5:08 A.M. or p.m. to 5:38 A.M. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 3:50 A.M. P.M.
 Report received by Jason Thomas (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1 Face <u>DCH4 20.8% O2</u>	<u>water in face</u>	<u>Reported</u>
2.	2 Face	<u>water in face</u>	<u>Reported</u>
3.	3 Face	<u>Part Bolted</u>	<u>Reported</u>
4.	4 Face	<u>Needs spot cleaning</u>	<u>Reported</u>
5.	2 Right		
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>L.O.B</u>	<u>20,530</u>		

Remarks: P-center, charger's Life Shelter travel ways

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

Signed By Kyle Anderson 33238 Certificate No.
 Preshift-Mine Examiner
 Countersigned Jason Thomas 35111 Assistant Foreman
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Certificate No. 1479-A

Use Indelible
Pencil or Ink

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

Report shall be
signed when made

Date 10-23-09 Shift Day Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1 Face 0 ch 4 20.8' 002	water in face	pumped out
2.	1 Face 11 11	water in face	pumping on water
3.	3 Face 11 11	part bolted	bolted made safe
4.	4 Face 11 11	Needs Spot cleaning	Cleaned Redusted
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-4	7:20-7:35 AM	0.0%	11.		
2. 1-4	9:20-9:35	0.0%	12.		
3. 1-4	11:20-11:35 AM	0.0%	13.		
4. 1-4	1-1:15 PM	0.0%	14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	7:08 AM	0.0%	6.		
2. Return	11:06 AM	0.0%	7.		
3. Return	1:45 PM	0.0%	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 12

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Read page 4 para 8-9
to crew at 7:05 AM SCSR'S OK!

[Signature] Assistant Mine Foreman Certificate No. [Signature] Mine Foreman-Mine Manager Certificate No. 350609 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-23 2009 Section or Area Examined # 1 section
 Time of Examination: from 100 a.m. or 130 p.m.
 Was this report phoned to outside: Yes X no
 By whom Jason Thomas Time 220 P.M.
 Report received by Bruce Bowry (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	# 1 Entry	Scrap Cut	Reflectors Reported
2.	# 2	Water in face	Reported
3.	# 3 OCH4!	None Observed	Reported
4.	# 3R 20.802	Part Bolted	Reflectors
5.	# 4 OPPM C/O	None Observed	Reported
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
L.O.B.	24,480		
OCH4!			
20.802			
OPPM C/O			

Remarks: Power Center
Trave/ways
Chargers
Intake Phone - Outby shelter
OCH4! 20.8 O2 OPPM C/O
 All ok at time of exam.

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

Signed By [Signature] Certificate No. 1479-A Assistant Foreman [Signature] Certificate No. 1122-A
 Countersigned [Signature] Mine Manager Mine Foreman [Signature]
 Assistant Foreman _____ Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-23-9 Shift EVE Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 Entry	Scrap cut	Bolted + Reflectors
2.	#2	Water in Face	Loaded water out / cm
3.	#3R 00 CH ₄ l.	Part Bolted	Bolted + Reflectors
4.	20.802		
5.	OPM C/O		
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-4	4-430pm	0 CH ₄ l.	11.			
2.				12.			
3.	1-4	6-630pm	0	13.			
4.				14.			
5.	1-4	8-830pm	0	15.			
6.				16.			
7.	1-4	10-1050pm	0	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	404pm	0 CH ₄ l.	6.			
2.				7.			
3.	Return	801pm	0	8.			
4.				9.			
5.	Return	1006pm	0	10.			

Number of Bolts Tested 8

Number of Bolts Torqued Above Range Below Range

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 5 sect 27 of RCP at 350pm.

Branch Boon Assistant Mine Foreman 1122-A Certificate No. Mine Foreman-Mine Manager 350pm Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-23 20 Section or Area Examined #1
 Time of Examination: from 10:00 a.m. to 10:50 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Branley Time 11:22 P.M.
 Report received by Ray (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHS</u>	<u>OK</u>	<u>—</u>
2. <u>2XC</u>	<u>OK</u>	<u>—</u>
3. <u>3</u>	<u>scrap</u>	<u>Re Hiding</u>
4. <u>34a</u>	<u>missing c/p</u>	<u>Reporting</u>
5. <u>4</u>	<u>missing c/p</u>	<u>Reporting</u>
6.	<u>OK</u>	<u>—</u>
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,270</u>		

Remarks:

Highways of haulways clean at
area of exam
Panel C of changes
Any changes - OK
return plan - OK

CO 0.9
O2 20.8%

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

Signed By Branley
 Preshift Mine Examiner

1122-A
 Certificate No.

Ray
 Assistant Foreman

32234
 Certificate No.

Countersigned John
 Mine Manager Mine Foreman

Assistant Foreman

Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-23 Shift 3rd Area or Section 1 sector

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>N/A</u>	
2.	<u>2</u>	<u>N/A</u>	
3.	<u>2A</u>	<u>Scrap</u>	<u>Reflecting</u>
4.	<u>3</u>	<u>welds S&D</u>	<u>Reported</u>
5.	<u>3R</u>	<u>N/A</u>	<u>11 11 11</u>
6.	<u>4</u>	<u>N/A</u>	
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-4 205</u>	<u>238</u>	<u>0.2 CH₄</u>	11.			
2.				12.			
3.	<u>1-4 510</u>	<u>590</u>	<u>0.6 CH₄</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>244</u>	<u>0.6 CH₄</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>545</u>	<u>0.6 CH₄</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Ryle Anderson Assistant Mine Foreman 33238 Certificate No. Anderson Mine Foreman-Mine Manager Benson Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-24-09 2009 Section or Area Examined # 1 Section
 Time of Examination: from 5:00 am or p.m. to 5:35 am or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:40 (A.M.) P.M.
 Report received by Jason Thomas
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1 Face</u>	<u>needs cleaned - dusted</u>	<u>Reported</u>
2. <u>2 Left</u>	<u>needs cleaned - dusted</u>	<u>Reported</u>
3. <u>2 Right</u>	<u>needs spot cleaning</u>	<u>Reported</u>
4. <u>3 Right</u>	<u>needs cleaned dusted</u>	<u>Reported</u>
5. <u>4 Face</u>	<u>none observed</u>	<u>Reported</u>
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>L.O.B</u>	<u>20,488</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: P. center Life Shelter, travel ways, chargers clear at time of exam.

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

Signed By Kyle Anderson Certificate No. 33038
 Preshift Mine Examiner
 Countersigned Jason Thomas Certificate No. 391122
 Mine Manager Mine Foreman
 Assistant Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-24-09 Shift Day Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	1 Face OCH 4 20.8% O ₂		
2.	2 Left " "		
3.	2 Right " "		
4.	3 Right " "		
5.	4 Face " "		
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-4	7:05-7:20 AM	0.0%	11.			
2.	1-4	9:05-9:20 AM	0.0%	12.			
3.	1-4	11:05-11:20 AM	0.0%	13.			
4.	1-4	1 PM-1:15 PM	0.0%	14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	7:00 AM	0.0%	6.			
2.	Return	11:00 AM	0.0%	7.			
3.	Return	12:55 AM	0.0%	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 10

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Read page 4 para 9, 10
To crew at start of shift. S.C.S.R'S OK!

[Signature] Assistant Mine Foreman 1479A Certificate No. [Signature] Mine Foreman-Mine Manager 3222 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-24 2009 Section or Area Examined #1 Section
 Time of Examination: from 100 a.m. or p.m. to: 130 a.m. or p.m.
 Was this report phoned to outside: Yes X no
 By whom Jason Thomas Time 233 A.M. P.M.
 Report received by Brush Boyz (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
<u>#1 Entry</u>	<u>Scrap cut</u>	<u>Reflectors</u>
<u>#2-3</u>	<u>None Observed</u>	<u>Reported</u>
<u>#4 Entry</u>	<u>Part Bolted</u>	<u>Reflectors</u>
<u>OCH4!</u>		
<u>20.802</u>		
<u>OPPM c/o</u>		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>23,488</u>		
<u>OCH4!</u>			
<u>20.802</u>			
<u>OPPM c/o</u>			

Remarks: Power Center
Travelways
Chargers
Intake Phone
Outby Shelter

}

All ok at time of exam.

OCH4! 20.802 oppm c/o

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

Signed By [Signature] Preshift-Mine Examiner Certificate No. 1479-A
 Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 3500000
[Signature] Assistant Foreman Certificate No. 1122-A
 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-24 Section or Area Examined #1
 Time of Examination: from 10:00 a.m. or p.m. to 10:40 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Time 11:20 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHD</u>	<u>N/A</u>	<u>Reported</u>
2. <u>2</u>	<u>NOT IN LHD</u>	<u>Reported</u>
3. <u>3</u>	<u>SCRAP</u>	<u>Reported</u>
4. <u>4</u>	<u>N/A</u>	<u>Reported</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,920</u>		

Remarks: Haulways of Trussways clean at time
of exam
Being Guarded if changes - N/A
Antenna of phone - OK
ACR antenna - OK
CO 0%
O2 20.8%

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

Signed By Brandon Perry Certificate No. 1122A
 Countersigned [Signature] Mine Manager Mine Foreman 372211
[Signature] Assistant Foreman 37284 Certificate No.
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date _____ Shift _____ Area or Section _____

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

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

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-25 2009 Section or Area Examined #1
 Time of Examination: from 3:00 a.m. or p.m. to 4:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Bryant 007 Time _____ A.M. _____ P.M.
 Report received by _____
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>Chel</u>	<u>some water</u>	<u>Reported</u>
2. <u>3</u>	<u>NOT Bolted</u>	<u>La P/Ke found</u>
3. <u>4</u>	<u>scrap</u>	<u>"</u>
4.	<u>n/a</u>	<u>—</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LUB</u>	<u>20840</u>		

Remarks: haulways of haulways clean at bank
of EXAM
Power Capstan of cylinders - OK
ARM of Hammer - OK
intake P/line - OK
CO 0.69
O₂ 20.8%

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

Signed By: [Signature] 32284 Certificate No. Assistant Foreman
 Countersigned: [Signature] 33000 Certificate No. 1477-A
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 10-25 Shift Day Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for water in face, not bolted, scrap cut, and none observed.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for locations 1-4 and times ranging from 7:38 AM to 12:00 PM.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for 'Return' locations and times from 7:35 AM to 1:00 PM, all with 0.00% methane content.

Number of Bolts Tested 11. Number of Bolts Torqued Above Range 0 Below Range 0. If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) Read page 4 para 9,10 to crew at 7:15 AM SCSR'S OK!

Assistant Mine Foreman, Certificate No. 11479-A, Mine Foreman-Mine Manager, Certificate No., Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-25 2009 Section or Area Examined #1
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom JASON THOMAS Time A.M. 2:45 P.M.
 Report received by Rick Hutchens
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>0% CH4</u>	<u>Water in Face</u>	<u>Reported</u>
2.	<u>↓</u>	<u>Scrap Cut - 15 FT</u>	<u>Taged & Reported</u>
3.	<u>3, 4</u>	<u>N/D</u>	<u>Reported</u>
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOF</u>	<u>24,200</u>		
<u>20.8° 2</u>			
<u>0% CH4</u>			
<u>0% CO</u>			

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

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

Signed By [Signature] Certificate No. 1479-A
 Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] Mine Manager Mine Foreman [Signature] Certificate No. 39000
 Assistant Foreman Rick Hutchens Certificate No. 37569
 Superintendent of Assistant _____

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Date 10-25-09 Shift Evc Area or Section

Violations and other Hazardous Conditions Observed and Reported

Table with 4 columns: Location, Violation or Hazardous Condition, Action Taken. Includes handwritten entries like '0% CH4', 'Water in Face', 'Scrap Cut', 'Reported', 'Corrected', 'Got To Section Late Due To', 'NO WATER'.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Includes handwritten entries for locations 1-4, times 8:00-8:30 and 10:00-10:30, and methane content 0% CH4.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Includes handwritten entries for 'Returns' at 8:00pm and 10:00pm with 0% CH4.

Number of Bolts Tested 2

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 5 # 6 7:50pm RCP

Section Safe & Clear at Time of EXAM

Signature lines for Rick Hutchins (Assistant Mine Foreman), Certificate No. 37569, Mine Foreman-Mine Manager, Certificate No. 38111, and Superintendent or Assistant.

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10 25 1930 20 7 Section or Area Examined 1 sector
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Reck Hatcher Time 1107 A.M. P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>slc c/H</u>	<u>water in face</u>	<u>Reported</u>
2.	<u>/</u>	<u>Scrap Coal</u>	<u>Reflector hung</u>
3.	<u>/</u>	<u>none observed</u>	
4.	<u>/</u>	<u>none observed</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>Pob</u>	<u>20340</u>		

Remarks: slc c/H
power centers chargers hallways air base intake phone
Clear at time of exam
20.8

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

Signed By Richard Hatcher 37569 Certificate No. Kyle Anderson 33238 Assistant Foreman
 Countersigned [Signature] 39000 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-25 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	62 CHY	water in face	Reported
2.		Scrap Cut	Reflector hung
3.		none observed	
4.		none observed	
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-4	210	240	06 CHY		
1-4	458	531	06 CHY		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	245	06 CHY			
Return	339	06 CHY			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson Assistant Mine Foreman 33038 Certificate No. Carl Mine Foreman-Mine Manager 33060 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-26-09 20 Section or Area Examined #1
 Time of Examination: from 4:50 a.m. or p.m. to 5:31 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:35 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
<u>CHY 3</u>	<u>near 06)</u>	<u>none</u>
<u>2</u>	<u>part Bolter</u>	<u>reflect</u>
<u>3</u>	<u>near 06)</u>	<u>ref</u>
<u>4</u>	<u>Scrap at</u>	<u>reflect</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>29,400</u>	<u>2</u>	<u>28,200</u>

Remarks: only 20.802.000 detected Truless
7 Truless OK at time of exam P.C. say
chym OK.
see part needs add charts

Intake Phone -> OK
Stelte Chamber -> OK

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

Signed By [Signature] 33238 [Signature] 56020
 Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned [Signature] 39000
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-26-09 Shift ney Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>new OGS</u>	<u>ney</u>
2. <u>2</u>	<u>part bolted</u>	<u>Bokey</u>
3. <u>3</u>	<u>new OGS</u>	<u>ney</u>
4. <u>3p</u>	<u>scraped</u>	<u>clean - Bokey</u>
5.		
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>ret</u>	<u>7:00</u>	<u>0</u>	6.		
2.			7.		
3. <u>bet</u>	<u>11:00</u>	<u>0</u>	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 140
Number of Bolts Torqued Above Range _____ Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed and # 6 of
ALP # 19 AT 0:53 AM

[Signature] Assistant Mine Foreman Certificate No. 36528 [Signature] Mine Foreman-Mine Manager Certificate No. 33060 [Signature] Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-26 2009 Section or Area Examined #1
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Denn Jones Time 2:45 P.M.
 Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>0% CH₄</u>	<u>Reported</u>
2.	<u>2R</u>	<u>Scrap. Cut -</u>	<u>Tagged + Reported</u>
3.	<u>3</u>	<u>N/O</u>	<u>Reported</u>
4.	<u>4</u>	<u>N/O</u>	<u>Reported</u>
5.			
6.			
7.			
8.			
9.	<u>Soft Ribs</u>	<u>1-4</u>	<u>Reported</u>
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>22,640</u>		
<u>20.802</u>			
<u>0% CH₄</u>			
<u>0% CO</u>			

Remarks: powercenter, R-ways, Chargers, HAULAGE Clear
at time of EXAM
Intake phone OK
Air Chamber OK

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

Signed By Denn Jones 36025 Certificate No. Assistant Foreman Certificate No.
 Countersigned [Signature] 3701000 Mine Manager Mine Foreman
Rick Hutchens 37569 Assistant Foreman Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-26-69 Shift Eve Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>0% ch4</u>	<u>N/C/D</u>
2.	<u>2R</u>	<u>Scrap Cut</u>	<u>Corrected</u>
3.	<u>3, 4</u>	<u>N/O</u>	<u>Corrected</u>
4.			<u>Reported</u>
5.			
6.			
7.			
8.			
9.	<u>Soft Ribs</u>	<u>1-4</u>	<u>Reported</u>
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>4:00-4:20</u>	<u>0% ch4</u>			
<u>1-4</u>	<u>6:00-6:23</u>	<u>0%</u>			
<u>1-4</u>	<u>8:00-8:30</u>	<u>0%</u>			
<u>1-4</u>	<u>10:00-10:30</u>	<u>0% ch4</u>			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Returns</u>	<u>3:58pm</u>	<u>0% ch4</u>			
<u>Returns</u>	<u>7:59pm</u>	<u>0% ch4</u>			

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 8 #33 3:50pm RCP
Section Safe & Clear at Time of Exam Check SCER'S OK

Ruib Hutchins 37569 [Signature] [Signature]
Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-26 208 Section or Area Examined 1 section
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time 1100 A.M. P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>obd H-1</u>	<u>none observed</u>	
2.	<u>2R</u>	<u>Scrap Cent</u>	<u>Reflected away</u>
3.	<u>3</u>	<u>none observed</u>	
4.	<u>4</u>	<u>none observed</u>	
5.			
6.			
7.			
8.	<u>Soft Ribs</u>	<u>1-4</u>	<u>Reported</u>
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>Job</u>	<u>19870</u>		

Remarks: obd H-1
power center & chargers hallways air in intake phone (Clean)
at time of exam
20.8

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

Signed By Rick Hutchens Certificate No. 37569
 Preshift-Mine Examiner
 Countersigned Kyle Anderson Certificate No. 33238
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-26 Shift 3rd Area or Section 1st

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-4 215 291</u>		<u>2.0%</u>	11. _____		_____
2. _____		_____	12. _____		_____
3. <u>1-4 458</u>	<u>530</u>	<u>2.6%</u>	13. _____		_____
4. _____		_____	14. _____		_____
5. _____		_____	15. _____		_____
6. _____		_____	16. _____		_____
7. _____		_____	17. _____		_____
8. _____		_____	18. _____		_____
9. _____		_____	19. _____		_____
10. _____		_____	20. _____		_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>2.50</u>	<u>2.6%</u>	6. _____		_____
2. _____		_____	7. _____		_____
3. <u>Return</u>	<u>535</u>	<u>2.6%</u>	8. _____		_____
4. _____		_____	9. _____		_____
5. _____		_____	10. _____		_____

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson 33238 _____ 33012
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination: 10-27-09 20 Section or Area Examined: #1
 Time of Examination: from 4:58 a.m. or p.m. to 5:37 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom: Kyle Anderson Time: 5:37 A.M. P.M.
 Report received by: [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHY P</u>	<u>needs steel plates</u>	<u>rep</u>
2. <u>D</u>	<u>H2O In Face</u>	<u>rep</u>
3. <u>sub</u>	<u>no + Bolter</u>	<u>reflected</u>
4. <u>3</u>	<u>new 065</u>	<u>rep</u>
5. <u>4</u>	<u>new 061</u>	<u>nil</u>
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>CUB</u>	<u>19.540</u>		

Remarks: CHY 20.80% O2 detected truckley
2 trucks ok at time of exam per
and chpy ok.

Shelter Chamber OK
Intake phone OK

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

Signed By: Kyle Anderson Certificate No. 33238 Assistant Foreman: [Signature] Certificate No. 36022
 Countersigned: [Signature] Mine Manager Mine Foreman: [Signature] Certificate No. 3506000
 Assistant Foreman: _____ Superintendent or Assistant: _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-27-09 Shift ny Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>needs steel wire</u>	<u>steel wire</u>
2. <u>2</u>	<u>too far out</u>	<u>removed</u>
3. <u>2nd</u>	<u>not bolts</u>	<u>filled</u>
4. <u>3</u>	<u>one 065</u>	<u>up</u>
5. <u>4</u>	<u>on 061</u>	<u>ny</u>
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1st</u>	<u>7:00</u>	<u>0</u>	6.		
2. <u>1st</u>	<u>11:00</u>	<u>0</u>	7.		
3.			8.		
4.			9.		
5.			10.		

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed with # 7 OK
Rep # 31 9th @ 5:30 hr

[Signature] Assistant Mine Foreman Certificate No. 36528
[Signature] Mine Foreman-Mine Manager Certificate No. 33000
[Signature] Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-27 2009 Section or Area Examined #1
 Time of Examination: from 1:00 a.m. or p.m. to 1:40 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Denn Jones Time 2:39 P.M.
 Report received by Rick Hutchens

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>0% CH₄</u>	<u>Reported</u>
2.	<u>2, 2R, 3</u>	<u>N/A</u>	<u>Reported</u>
3.	<u>4</u>	<u>N/A</u>	<u>Reported</u>
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>24,870 CFM</u>		
<u>20.80%</u>			
<u>0% CH₄</u>			
<u>0% CO</u>			

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

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

Signed By [Signature] Preshift-Mine Examiner Certificate No. 76528
 Countersigned [Signature] Mine Manager Mine Foreman Certificate No. 390600
Rick Hutchens Assistant Foreman Certificate No. 3569
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-27-09 Shift Eve Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>4:00-4:23</u>	<u>0 % CH4</u>			
<u>1-4</u>	<u>6:00-6:20</u>	<u>0 %</u>			
<u>1-4</u>	<u>8:00-8:30</u>	<u>0 %</u>			
<u>1-4</u>	<u>10:00-10:30</u>	<u>0 % CH4</u>			

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 6 #17 3:50pm RCP

Section Safe & Clean at time of EXAM

Rick Hutchins

Assistant Mine Foreman

37569

Certificate No.

Calvin

Mine Foreman-Mine Manager

39400

Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-27 20 09 Section or Area Examined 1 section
Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Time 1110 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. 1st level 20CHY	None observed	
2. 2	None observed	
3. 3R	Scrap Cut	Reflectors hung
4. 4	None observed	
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Prob	20,480		

Remarks: 20CHY power center & chargers hallways air base and intake phone Clean at time of exam 20.8

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

Signed By Rick Hutchins 37569 Certificate No. Kyle Anderson 33278 Certificate No.
Countersigned [Signature] 39000 Certificate No.
Assistant Foreman
Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-28 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>26 off</u>	<u>N/A</u>	
2.	<u>3R</u>	<u>N/A</u>	
3.	<u>4</u>	<u>Scrap hat</u>	
4.		<u>N/A</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

1.	Location	Time	Methane Content	11.	Location	Time	Methane Content
	<u>1-4</u>	<u>210</u>	<u>236</u>				
	<u>1-4</u>	<u>505</u>	<u>545</u>				
2.				12.			
3.				13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

1.	Location	Time	Methane Content	6.	Location	Time	Methane Content
	<u>Return</u>	<u>291</u>	<u>26 off</u>				
	<u>Return</u>	<u>553</u>	<u>26 off</u>				
2.				7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

[Signature]
Assistant Mine Foreman

33038
Certificate No.

[Signature]
Mine Foreman-Mine Manager

[Signature]
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-28 2009 Section or Area Examined #1 Section
 Time of Examination: from 508 a.m. or p.m. to 545 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 650 A.M. P.M.
 Report received by Brush Berg (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1, 2</u>	<u>water in face</u>	<u>Reported</u>
2. <u>3 R</u>	<u>Scrap cut</u>	<u>Rep. Tagged</u>
3. <u>4</u>	<u>none obs</u>	<u>None</u>
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>L0B</u>	<u>20,680</u>		

Remarks: Power Center
Travelways
Chargers
Intake Phone -
Outby Shelter) clear at time of exam 20.08.02 0.00 chg

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

Signed By Kyle Anderson Certificate No. 33238 Assistant Foreman Brush Berg Certificate No. _____
 Countersigned Rob [unclear] Mine Manager Mine Foreman [unclear]
 Assistant Foreman _____
 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-28-9 Shift Day Area or Section # 1 section

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1-2 Entries	water in face	loaded water out
2. #3 R.C.C.	Scrap cut	w/CM's Bo Hcd + Reflectors
3. OCH4		
4. 20.802		
5. O.P.P.M. C/O		
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-4	7-730 Am	0 CH4!	11.		
2.			12.		
3. 1-4	9-940 Am	0	13.		
4.			14. J.P.P.I		
5. 1-4	11-1130 Am	0	15.		
6.			16.		
7. 1-4	1-150 Pm	0	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	704 Am	0 CH4!	6.		
2.			7.		
3. Return	1102 Am	0	8.		
4.			9.		
5. Return	110 Pm	0	10.		

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 Sect. 2 RCP at 655 Am.

[Signature] Assistant Mine Foreman 1122-A Certificate No. [Signature] Mine Foreman-Mine Manager 55012 Certificate No. [Signature] Superintendent of Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-28 2009 Section or Area Examined #1
 Time of Examination: from 1:00 a.m. or p.m. to 1:50 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom BRANDA Bowling Time 2:30 P.M.
 Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1 <u>0% ch4</u>	<u>N/O</u>	<u>Reported</u>
2 <u>2</u>	<u>N/O</u>	<u>Reported</u>
3 <u>3R</u>	<u>Scrap</u>	<u>Tagged & Reported</u>
4 <u>2L, 2R</u>	<u>N/Add Cleaning</u>	<u>Reported</u>
5 <u>4</u>	<u>N/O</u>	<u>Reported</u>
6		
7		
8		
9		
10		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>19,960</u>		
<u>20.8% CH4</u>			
<u>0% CH4</u>			
<u>0% CO</u>			

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

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

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

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

Date 10-28-09 Shift EVC Area or Section # 1

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>4:00-4:23</u>	<u>0 % CH4</u>			
<u>1-4</u>	<u>6:00-6:20</u>	<u>0 %</u>			
<u>1-4</u>	<u>8:00-8:30</u>	<u>0 %</u>			
<u>1-4</u>	<u>10:00-10:30</u>	<u>0 % CH4</u>			

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 10
 Number of Bolts Torqued Above Range 0 Below Range 0
 If majority of bolts tested in any working place falls outside approved torque range, state what action was taken _____

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 8 part A 3:50pm R.C.P.
Section SAFE & Clear at Time of Exam

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

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 10-28 2009 Section or Area Examined #1
 Time of Examination: from 10:00 a.m. or p.m. to 10:30 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time 11:10 A.M. PM
 Report received by _____
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1, 2, 2L, 4</u>	<u>0% CH4</u>	<u>Reported</u>
2. <u>3RT</u>	<u>0% CH4</u>	<u>Tagged & Reported</u>
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,680</u>	_____	_____
<u>20.80%</u>	_____	_____	_____
<u>0% CH4</u>	_____	_____	_____
<u>0% CO</u>	_____	_____	_____

Remarks: powercenter, Chargers, R-ways, HAULAGE Clear at
Time of EXAM
INTAKE phone OK
AIR CHAMBER OK

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

Signed By Rick Hutchens 37569
 Preshift-Mine Examiner Certificate No.
 Countersigned [Signature] 35000
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-28 Shift 3rd Area or Section 1201

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1 2 2L 4</u>	<u>N/A</u>	
2. <u>3R</u>	<u>Not bolted</u>	<u>Reflectors hung</u>
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-4 212</u>	<u>236</u>	<u>0.6 CH₄</u>	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. <u>1-4 502</u>	<u>545</u>	<u>0.6 CH₄</u>	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. _____	_____	_____	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. _____	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>240</u>	<u>0.5 CH₄</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Return</u>	<u>5:48</u>	<u>0.6 CH₄</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

[Signature] Assistant Mine Foreman
 3228 Certificate No.
 [Signature] Mine Foreman-Mine Manager
 3228 Certificate No.
 _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-29 2009 Section or Area Examined #1 section
 Time of Examination: from 502 a.m. or p.m. to 543 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 547 A.M. P.M.
 Report received by Bush Bow (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Location	CFM	Location	CFM
LDB	24,060		
OCHY!			
20.802			

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

OCHY! 20.802 OPPM c/o

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

Signed By Kyle Anderson 33238 Certificate No. Bush Bow 1122-A Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman [Signature] Assistant Foreman
 Assistant Foreman Superintendent or Assistant

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Date 10-29-09 Shift Day Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Includes handwritten entries like '#1 Entry', 'Water in face', 'Not Bolted', and 'Loaded some out w/cm Bolted Reflectors'.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for locations '1-4' and times like '7-730am', '9-935am', '11-1129am', '1-1400pm'.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for 'Return' locations and times like '7:10am', '11:04am', '1:09pm'.

Number of Bolts Tested 9. Number of Bolts Torqued Above Range. Below Range.

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 3 sect. C RCP at 651AM.

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

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-29 2009 Section or Area Examined # 1
 Time of Examination: from 1:00 a.m. or p.m. to 1:40 a.m. or p.m.
 Was this report phoned to outside: Yes No
 By whom Brandi Bowling Time A.M. 2:40 P.M.
 Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u> <u>0%CH4</u>	<u>Water in Face</u>	<u>Reported</u>
2. <u>2L</u>	<u>N/C/D</u>	<u>Reported</u>
3. <u>2</u>	<u>N/O</u>	<u>Reported</u>
4. <u>3</u>	<u>N/O</u>	<u>Reported</u>
5. <u>3R</u>	<u>N/C/D</u>	
6. <u>4</u>	<u>Scrap</u>	<u>Taged & Reported</u>
7. <u>4R Lower</u>	<u>Scrap</u>	<u>Taged & Reported</u>
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>20,200</u>		
<u>20.8</u>			
<u>0%CH4</u>			
<u>0%CO</u>			

Remarks: powercenter, R-ways, HAULAGE, CHARGERS Clear at Time of Exam

Intake phone OK
Air Chamber OK

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

Signed By Brandi Bowling 1122-A Certificate No.
 Preshift-Mine Examiner
 Countersigned Calvin Calver 3900000 Assistant Foreman Certificate No.
 Mine Manager Mine Foreman
Rick Hutchens 37569 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 10-29-09 Shift Even Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>0%CH4</u>	<u>Water in Face</u>	<u>Reported</u>
2.	<u>2L</u>	<u>N/C/D</u>	<u>Corrected</u>
3.	<u>3R</u>	<u>N/C/D</u>	<u>Corrected</u>
4.	<u>4</u>	<u>Scrap Cut</u>	<u>Corrected</u>
5.	<u>Lower 4 R</u>	<u>Scrap Cut</u>	<u>Corrected</u>
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>4:00-4:23</u>		11.		
<u>1-4</u>	<u>6:00-6:30</u>		12.		
<u>1-4</u>	<u>8:00-8:27</u>		13.		
<u>1-4</u>	<u>10:00-10:30</u>		14.		
			15.		
<u>20.802</u>			16.		
<u>0%CH4</u>			17.		
<u>0%CO</u>			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>3:59pm</u>	<u>0%CH4</u>	6.		
<u>Return</u>	<u>7:58pm</u>	<u>0%CH4</u>	7.		
			8.		
			9.		
			10.		

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Page 5 #7 3:50pm R.C. PLAN
Section Safe & Clear at Time of EXAM

Rick Hutchens 37569 [Signature] 390100
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-29 209 Section or Area Examined 1 section
 Time of Examination: from 1015 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time 1115 A.M. P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>26 ctt-1</u>	<u>None observed</u>	<u>Reflector</u>
2. <u>3L</u>	<u>Needs cleaned</u>	<u>Reported</u>
3. <u>4</u>	<u>needs sand dusted</u>	<u>" " " "</u>
4. <u>4R</u>	<u>None observed</u>	
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>Job</u>	<u>20110</u>		

Remarks: 26 ctt-1
power center a charges hallways air base intake phone
Clear at time of exam but phone is
crackling.
2080

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

Signed By Rick Hutchens 37569 Certificate No. Kyle Anderson 33038 Assistant Foreman
 Countersigned [Signature] 33038 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-29 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>26ctH</u>	<u>N/O</u>	
2.	<u>3L</u>	<u>not bolted</u>	<u>Reflecting being Reported</u>
3.	<u>4</u>	<u>needs cleaned</u>	
4.	<u>4R</u>	<u>needs cleaned & dusted</u>	<u>Reported</u>
5.		<u>N/O</u>	
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>212</u>	<u>296</u>	<u>26ctH</u>		
<u>1-4</u>	<u>505</u>	<u>545</u>	<u>26ctH</u>		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-4</u>	<u>240</u>	<u>26ctH</u>			
<u>1-4</u>	<u>531</u>	<u>26ctH</u>			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson 33238 Anderson 350000
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 10-30 2009 Section or Area Examined #1 Section
 Time of Examination: from 5:05 a.m. or p.m. to 5:41 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:45 A.M. P.M.
 Report received by Brian Bony (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Entry	None Observed	Reported
2. #2	Not Bolted	Reflectors
3. #2R OCHyl	Needs Cleaned	Reported
4. #3 20.8oz	None Observed	Reported
5. #4	Needs Cleaned & Listed	Reported
6. #1R OPPM/CO	None Observed	Reported
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	20,210		
OCHyl			
20.8 oz			
OPPM/CO			

Remarks: Power Center
 Chargers
 Travelways
 Outby Chamber - Intake Phone intake phone is crackling
 OCHyl 20.8 oz OPPM/CO

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

Signed By Kyle Anderson 33238 Certificate No. Brian Bony 1122-4 Assistant Foreman Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-30-09 Shift Day Area or Section # 1 Section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	# 2 Entry	Not Bolted	Bolted + Reflectors
2.	# 2R CC	Needs cleaned	Cleaned + Dusted
3.	# 4	Needs cleaned + Dusted	Clean + Dusted.
4.			
5.	# 4R Punch Thru	Cable Bolted Intersection	
6.			
7.	0 CH ₄ !		
8.	20.802		
9.			
10.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-4	7-730Am	0 CH ₄ !	11.		
2.			12.		
3. 1-4	9-930Am	0	13.		
4.			14.		
5. 1-4	11-1130Am	0	15.		
6.			16.		
7. 1-4	1-1445pm	0	17.		
8.			18.		
9.	Scrubber Readings		19.		
10.	Rt CM	7.704	20.		
	Lt CM	7.164			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	705Am	0 CH ₄ !	6.		
2.			7.		
3. Return	1103Am	0	8.		
4.			9.		
5. Return	106Pm	0	10.		

Number of Bolts Tested 8

Number of Bolts Torqued Above Range _____ Below Range _____

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 Sect. 7 RCP at 645 am.

Branch Bay Assistant Mine Foreman 1122-A Certificate No. [Signature] Mine Foreman-Mine Manager 3500000 Certificate No. [Signature] Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-30 2009 Section or Area Examined #1
 Time of Examination: from 1:00 a.m. or p.m. to 1:45 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom BRANDA Bowling Time 2:40 A.M. P.M.
 Report received by Rick Hutch (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u> <u>0% ch4</u>	<u>n/o</u>	<u>Reported</u>
2. <u>2</u>	<u>N/CLEAN</u>	<u>Reported</u>
3. <u>2L</u>	<u>NOT Bolted</u>	<u>Tagged & Reported</u>
4. <u>3</u>	<u>N/O</u>	<u>Reported</u>
5. <u>3R</u>	<u>Ribs nd spotted</u> <u>Bolted</u>	<u>Tagged & Reported</u>
6. <u>4R</u>	<u>Scrap</u>	<u>Tagged & Reported</u>
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LQB</u>	<u>20,120</u>		
<u>20.80%</u>			
<u>0% ch4</u>			
<u>0% CO</u>			

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

Intake phone NOT WORKING
Air Chamber OK

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

Signed By Brandi Barry 1122-A Assistant Foreman Certificate No. _____
 Countersigned Cade Cook 350444 Mine Manager Mine Foreman Certificate No. _____
Rick Hutchins 37569 Assistant Foreman Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 10-30-09 Shift EVE Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>2</u>	<u>0 % CH4</u>	<u>Reported</u>
2. <u>2L</u>	<u>N/CLEAN</u>	<u>Reported</u>
3. <u>3R</u>	<u>NOT Bolted</u>	<u>Tagged Reported</u>
4. <u>Upper 4R</u>	<u>Rib needs spot Bolted</u>	<u>Reported</u>
	<u>Scrap Cut</u>	<u>Tagged Reported</u>
5.		
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-4</u>	<u>4:00-4:30</u>	<u>0 % CH4</u>	11.		
2. <u>1-4</u>	<u>6:00-6:30</u>	<u>0 %</u>	12.		
3. <u>1-4</u>	<u>8:00-8:30</u>	<u>0 %</u>	13.		
4. <u>1-4</u>	<u>10:00-10:30</u>	<u>0 % CH4</u>	14.		
5.			15.		
6. <u>20.80%</u>			16.		
7. <u>0% CH4</u>			17.		
8. <u>0% CO</u>			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>3:59pm</u>	<u>0 % CH4</u>	6.		
2. <u>Return</u>	<u>7:58pm</u>	<u>0 % CH4</u>	7.		
3.			8.		
4.			9.		
5.			10.		

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 6 #17 3:50pm RCP
Section Safe & Clean at Time of Exam

Rick Hutchins 37569 [Signature] 350000
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 10-30 20 9 Section or Area Examined 1 section
Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Hutchins Time A.M. 415 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Includes handwritten entries like '2L', '3-4', '4R' and 'Reflector hanging'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Includes handwritten entry '20980'.

Remarks: 20.8 power center & charges hallways air base clear at time of exam

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

Signed By Rick Hutchins 37569 Certificate No. Kyle Anderson 33238 Certificate No.
Countersigned [Signature] 3906000 Mine Foreman
Assistant Foreman Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-30 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-4 210</u>	<u>238</u>	<u>0.6CH4</u>	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. <u>1-4 505</u>	<u>545</u>	<u>0.6CH4</u>	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. _____	_____	_____	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. _____	_____	_____	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Return</u>	<u>241</u>	<u>0.6CH4</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Return</u>	<u>551</u>	<u>0.6CH4</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kele... Assistant Mine Foreman 33038 Certificate No. ... Mine Foreman-Mine Manager 390... Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-31-09 20 Section or Area Examined #1
 Time of Examination: from 5:03 a.m. or p.m. to 5:45 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:03 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHY 90</u>	<u>new vgs</u>	<u>new</u>
2. <u>2st</u>	<u>not B/Hed</u>	<u>reflect</u>
3. <u>2st</u>	<u>needs deep</u>	<u>ref</u>
4. <u>3</u>	<u>new vgs</u>	<u>new</u>
5. <u>4</u>	<u>new vgs</u>	<u>new</u>
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>COB</u>	<u>20,800</u>	<u>COB</u>	<u>12</u>

Remarks: CHY 20.802 OCO detectors under
2 belts OK at time OK PIC and
Chy OK

Stelker Phone -> OK
Zatka Phone -> not working

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

Signed By Kyle Anderson Certificate No. 33238 [Signature] Assistant Foreman Certificate No. 90026
 Countersigned [Signature] Mine Manager Mine Foreman Certificate No. 39000
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 10-31-09 Shift Day Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 8, Number of Bolts Torqued Above Range 2, Below Range 2. If majority of bolts tested in any working place falls outside approved torque range, state what action was taken

Remarks (Statement as to General Conditions of Mine or Area of Mine) disengaged path #7 of rep #31 at 6:52 AM

Assistant Mine Foreman, Certificate No. 36520, Mine Foreman-Mine Manager, Certificate No. 3506222, Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-31 2009 Section or Area Examined #1 Section
 Time of Examination: from 100 a.m. or p.m. to 200 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Deano Jones Time 220 P.M.
 Report received by Blanch Bouy (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. # 1 Entry	None Observed	Reported
2. # 2L CC	Part Bolted	Reflectors
3. # 2-3-4 OCHM!	None observed	Reported
4. # 4R CC 20.802 O PPM C/D	Part Bolted	Reflectors
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
LOB	22,885		
OCHM!			
20.802			
O PPM C/D			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: Power Center
Travelways
Chargers
Outby Chamber - Intake Phone
OCHM!, 20.802 O PPM C/D

All ok at time of exam.

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

Signed By [Signature] Certificate No. 36525
 Preshift-Mine Examiner Assistant Foreman
 Countersigned [Signature] Certificate No. 1102-A
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 10-31-09 Shift EVE Area or Section #1 section

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Includes entries for #2LCC, #4RCC, and cracked ribs.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Includes entries for 1-4 at various times (4:43, 6:30, 8:30, 10:50) with 0 CH4.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Includes entries for Return at 4:04, 8:09, and 10:22 AM with 0 CH4.

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 Sect 5 of RCP at 3:49 PM.

Assistant Mine Foreman, Certificate No. 1122-A, Mine Foreman-Mine Manager, Certificate No. 3801, Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 10-31 209 Section or Area Examined 1 sector
 Time of Examination: from 6:00 a.m. or p.m. to 10:50 a.m. or p.m.
 Was this report phoned to outside: Yes No
 By whom Brandon Time 11:08 P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 22 ct4	None observed	
2.	2L	Not bolted	Reflectors hung
3.	3	None observed	
4.	4R	Part bolted	Reflectors hung
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
208	21640		

Remarks: 22 ct4
power center & charging hallways air base and intake phone
clean at time of exam
208

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

Signed By Brandon Boy 1122-A Certificate No. Kyle Anderson Assistant Foreman 33238 Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman [Signature] 35111111
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 10-31 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u> <u>o/c H+Y</u>	<u>N/O</u>	
2.	<u>2L</u>	<u>Not Bolted</u>	<u>Reflectors hung</u>
3.	<u>3</u>	<u>N/O</u>	
4.	<u>4R</u> <u>✓</u>	<u>Part bolted</u>	<u>Reflectors hung</u>
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-4</u>	<u>2205</u>	<u>248</u>				
2.							
3.	<u>1-4</u>	<u>502</u>	<u>541</u>				
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>253</u>	<u>o/c H+Y</u>				
2.							
3.	<u>Return</u>	<u>545</u>	<u>o/c H+Y</u>				
4.							
5.							
6.							
7.							
8.							
9.							
10.							

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson
Assistant Mine Foreman

33238
Certificate No. Mine Foreman-Mine Manager

350
Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-1 2009 Section or Area Examined 1 Section
 Time of Examination: from 5:02 (a.m) or p.m. to 5:41 (a.m) or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:55 (A.M) P.M.
 Report received by George Curry (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>#1</u>	<u>npt halted</u>	<u>reflected</u>
2.	<u>#2</u>	<u>water in face</u>	<u>Reported</u>
3.	<u>#3</u>	<u>needs cleaned</u>	<u>"</u>
4.	<u>3R</u>	<u>water in face</u>	<u>"</u>
5.	<u>4R</u>	<u>SCRAP</u>	<u>reflected</u>
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>Intake</u>	<u>20864</u>		

Remarks: 0% CH₄ - 0% CO - 20.8% O₂ track, travelways, psi, chargers
clean at time of exam
good air chamber / intake phone - ok at time of exam

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

Signed By Kyle Anderson Certificate No. 33238 Assistant Foreman [Signature] Certificate No. 36028
 Countersigned [Signature] Mine Manager / Mine Foreman Certificate No. 380000
 Assistant Foreman _____ Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-1-09 Shift PM Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>not bolted</u>	<u>to be</u>
2. <u>2</u>	<u>HRD In Face</u>	<u>Inspected out</u>
3. <u>3</u>	<u>needs steel</u>	<u>steel</u>
4. <u>3rd</u>	<u>needs steel</u>	<u>steel</u>
5. <u>4th</u>	<u>HRD In Face</u>	<u>net</u>
6.	<u>SLAP</u>	<u>Develop Bullets</u>
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

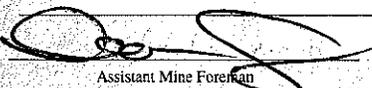
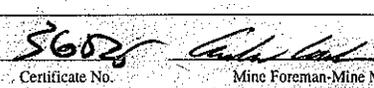
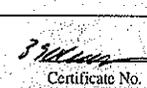
Number of Bolts Tested 10

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed net # 5

at net # 8 at 6:51 AM

 Assistant Mine Foreman
 Certificate No. 36025 Mine Foreman-Mine Manager
 Certificate No. 37000 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-1 20 09 Section or Area Examined 1# Section
 Time of Examination: from 100 a.m. or p.m. to 200 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Dean Jones Time 225 A.M. P.M.
 Report received by Baughman (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
# 1 Entry	None Observed	Reported
# 2	Scrap cut	Reflectors
# 3-4	None Observed	Reported
# 4R CC	Part Bolted	Reflectors
5.		
6.		
7.		
8.		
9.		
10.		

OCHyl
20.802
0PPM c/o

Air Measurements

Location	CFM	Location	CFM
LOB	21,650		
OCHyl			
20.802			
0PPM c/o			

Remarks: Power Center
 Travelways
 Chargers
 Outby Chamber intake Phone
 OCHyl, 20.802 0PPM c/o

All ok at time of exam.

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

Signed By [Signature] Certificate No. 30526
 Countersigned [Signature] Mine Manager Mine Foreman
[Signature] Assistant Foreman
[Signature] Assistant Foreman
[Signature] Superintendent or Assistant

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-1-09 Shift EVE Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #2 Entry	Scrap cut	Bolted + Reflectors
2. #4 RCC	Part Bolted	Bolted + Reflectors
3.		
4. #3 L-Inby Rib	Cracked loose Rib	Spotted 2 Bolts (Rib) 2 Cable in #3
5.		
6.		
7. Machine dusted Return - section - Intake		
8. air-courses.		
9.		
10.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-4R	7-427pm	0 CH ₄ %	11.		
2. 1-4R	6-30pm	0	12.		
3. 1-4R	8-8.33pm	0	13.		
4. 1-4R	10-10.50pm	0	14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	407pm	0 CH ₄ %	6.		
2. Return	802pm	0	7.		
3. Return	1001pm	0	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 10

Number of Bolts Torqued Above Range Below Range

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 section # 8 of RCP
at 350 PM, SCRS OK.

Brad Perry Assistant Mine Foreman 1122-A Certificate No. [Signature] Mine Foreman-Mine Manager 390000 Certificate No. Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 11-1-69 20 7 Section or Area Examined 7 Section
 Time of Examination: from 10:00 a.m. or PM to 10:50 a.m. or PM
 Was this report phoned to outside: Yes no
 By whom Granda Sankey Time 11:15 PM
 Report received by St. John 19042
(Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	CFM	Violation or Hazardous Condition	Action Taken
1. <u>#1</u>	<u>OK</u>	<u>None observed</u>	<u>None</u>
2. <u>#2</u>	<u>OK</u>	<u>Scrap cut</u>	<u>Reflected</u>
3. <u>#3</u>	<u>OK</u>	<u>None observed</u>	<u>None</u>
4. <u>#4</u>	<u>OK</u>	<u>" "</u>	<u>" "</u>
5. <u>#4 Right</u>	<u>OK</u>	<u>" "</u>	<u>" "</u>
6. _____	_____	_____	_____
7. _____	_____	_____	_____
8. _____	_____	_____	_____
9. _____	_____	_____	_____
10. _____	_____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>L.O.3</u>	<u>20,442</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: OXCH₄ open c₂ 20.25% detected at time of exam
Tracks, Travelways, passageways, 0-2000's, Travelways, haulageways, choppers, etc at time of exam
"Intake phase" refuge chamber OK at time of exam

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

Signed By Brash Perry Preshift-Mine Examiner Certificate No. 1122-A
 Countersigned [Signature] Mine Manager Mine Foreman Certificate No. 390000
 _____ Assistant Foreman
 _____ Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date _____ Shift _____ Area or Section _____

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Assistant Mine Foreman

Certificate No.

Mine Foreman-Mine Manager

Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-2-09 20 #1 Section or Area Examined
 Time of Examination: from 3:55 a.m. or p.m. to 4:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom _____ Time _____ A.M. _____ P.M.
 Report received by _____
 (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1 <u>CH₄%</u>	<u>Scrap cut</u>	<u>Needs</u>
2 <u>0</u>	<u>needs steel 'retard</u>	<u>Rep</u>
3 <u>0</u>	<u>new o/s</u>	
4 <u>0</u>	<u>new o/s</u>	
5 <u>1 Room</u>	<u>new o/s</u>	
6 <u>2 Rooms</u>	<u>new o/s</u>	
7		
8		
9		
10		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>16,106</u>		

Remarks: 0 CH₄ 20-802 000 detected inlays
> 1 inlays ok at time of Exam plus
and chasses ok.

Skelter
Intake phone ok

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

Signed By Mike Binley 27085 Certificate No. [Signature] Assistant Foreman 36026 Certificate No.
 Countersigned [Signature] Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indefible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-2-09 Shift Reg Area or Section #1

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>Scrap metal</u>	<u>deducted Belter</u>
2.	<u>2</u>	<u>needs Jewel: Arkes</u>	<u>deducted</u>
3.	<u>3</u>	<u>ne (6)</u>	<u>ne</u>
4.	<u>4</u>	<u>ne (6)</u>	<u>ne</u>
5.	<u>7 Room</u>	<u>ne (6)</u>	<u>ne</u>
6.	<u>2 name</u>	<u>ne (6)</u>	<u>ne</u>
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 120

Number of Bolts Torqued Above Range 0

Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed re # 8 of Rep # 33 at 7:00 PM

[Signature] Assistant Mine Foreman 3600 Certificate No. [Signature] Mine Foreman-Mine Manager 3900000 Certificate No. [Signature] Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-2 2009 Section or Area Examined #1 Section
 Time of Examination: from 100 a.m. or p.m. to 200 a.m. or p.m.
 Was this report phoned to outside: Yes X no no
 By whom Deano Jones Time 230 P.M.
 Report received by Banks Perry (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Entry	Part Bolted	Reflectors
2. #2 LCC	Scrap Cut	Reflectors
3. #2	Needs Cleaned + Dusted	Reported
4. #3-4	None Observed	Reported
5.		
6. <u>DCH4 20.80z</u>		
7. <u>OPPM c/o</u>		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>19,878</u>		
<u>DCH4</u>			
<u>20.80z</u>			
<u>OPPM c/o</u>			

Remarks: Power Center
Chargers
Travelways
Outby Shelter } All ok at time of exam
Intake phone not working
DCH4 20.80z OPPM c/o

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

Signed By [Signature] Preshift-Mine Examiner Certificate No. 30525
 Countersigned [Signature] Mine Manager Mine Foreman Assistant Foreman
[Signature] Assistant Foreman
[Signature] Superintendent or Assistant Certificate No. 1122-A

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-2-9 Shift EVE Area or Section #1 Section

Violations and other Hazardous Conditions Observed and Reported.

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 Entry	Part Bolted	Bolts + Reflectors
2.	#2 LCC	Scrap Cut	Bolted + Reflectors
3.	#2	Needs cleaned + dusted	cleaned + dusted
4.			
5.			
6.			
7.			
8.			
9.			
10.			

OCH₄ %
20.802
0ppm C/O

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-4R	4-432pm	0 CH ₄ %	11.			
2.				12.			
3.	1-4R	6-30pm	0	13.			
4.				14.			
5.	1-4R	8-27pm	0	15.			
6.				16.			
7.	1-4R	10-1040pm	0	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	402pm	0 CH ₄ %	6.			
2.				7.			
3.	Return	805pm	0	8.			
4.				9.			
5.	Return	1000pm	0	10.			

Number of Bolts Tested 9
Number of Bolts Torqued Above Range _____ Below Range _____

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 sect 16 RCP at 349pm.
Roof + Rib review.

Bruck Bay Assistant Mine Foreman 1122-A Certificate No. Carlo Cook Mine Foreman-Mine Manager 3506000 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-2 Section or Area Examined Adgoda 22
 Time of Examination: from 10:00 a.m. or 10:00 p.m. a.m. or 10:00 p.m.
 Was this report phoned to outside: Yes no
 By whom Beason Time 11:15 A.M. P.M.
 Report received by Henry (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>Exc</u>	<u>Part Bolted</u>	<u>Rechecked</u>
2. <u>2XC</u>	<u>Scrap</u>	<u>"</u>
3. <u>2</u>	<u>np</u>	<u>"</u>
4. <u>3</u>	<u>np</u>	<u>"</u>
5. <u>4</u>	<u>np</u>	<u>"</u>
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOS</u>	<u>29,170</u>		

Remarks: haulways of haulways clear at time
of exam
Pen City of clygan - np
Dr. graham - od
rescue plant - NOT working

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

Signed By Beason Certificate No. 1122-A
 Countersigned Henry Mine Manager Mine Foreman Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-3-09 Shift 3rd Area or Section Hogback 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>bxu</u>	<u>Paint Bolted</u>	<u>Bo H/O</u>
2. <u>bxu</u>	<u>scrap</u>	<u>Bo H/O</u>
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

[Signature] Assistant Mine Foreman 32284 Certificate No. [Signature] Mine Foreman-Mine Manager 3900000 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-3-09 20 H622 Section or Area Examined
 Time of Examination: from 4:45 a.m. or p.m. to 5:25 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom R. Farmer Time A.M. P.M.
 Report received by A. Carlson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHY 10</u>	<u>water in Face & need cap</u>	<u>Rep.</u>
2. <u> </u>	<u>None obs</u>	<u>None</u>
3. <u>2L</u>	<u>need cap</u>	<u>Rep.</u>
4. <u>3,4</u>	<u>None obs</u>	<u>None</u>
5. <u> </u>	<u> </u>	<u> </u>
6. <u> </u>	<u> </u>	<u> </u>
7. <u> </u>	<u> </u>	<u> </u>
8. <u> </u>	<u> </u>	<u> </u>
9. <u> </u>	<u> </u>	<u> </u>
10. <u> </u>	<u> </u>	<u> </u>

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>21,360</u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>

Remarks: PL, Haulways, Roadways, Air chamber, chargers clear at time of exam 20.88 O2 and CH4

CO 0.8
O2 20.8%

Intake phone
Shelter chamber OK

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

Signed By [Signature] Certificate No. 32294 Assistant Foreman [Signature] Certificate No. 36025
 Countersigned [Signature] Mine Manager / Mine Foreman [Signature]
 Assistant Foreman Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-3-09 Shift ny Area or Section H6 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>A20 In Face needs deal nitro</u>	<u>deal nitro</u>
2. <u>2</u>	<u>needs deal nitro</u>	<u>deal nitro</u>
3. <u>3</u>	<u>needs deal nitro</u>	<u>deal nitro</u>
4. <u>3</u>	<u>needs deal nitro</u>	<u>deal nitro</u>
5. <u>4</u>	<u>needs deal nitro</u>	<u>deal nitro</u>
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>het.</u>	<u>7:00</u>	<u>0</u>	6.		
2.			7.		
3. <u>het.</u>	<u>11:00</u>	<u>0</u>	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed to # 7 of RCP # 29 at 6:58 Am

Dec 36525 Assistant Mine Foreman Certificate No. 36525 Mine Foreman-Mine Manager Certificate No. 36525 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-3 2009 Section or Area Examined #22 Headgate
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Dean Jove Time A.M. 2:25 P.M.
 Report received by Rick Hutchins (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken	
1.	1 LT Lower	0%CH ₄	Scrap Cut	Tagged Reported
2.	1	N/O		Reported
3.	2	N/O		Reported
4.	3	N/O		Reported
5.	4	needs Clean		Reported
6.				
7.				
8.				
9.	End of TRACK Root	DANGER OFF		Tagged & DANGER OFF
10.	1 BK out-by	Flaking off		

Air Measurements

Location	CFM	Location	CFM
L013	17845		
20.8°			
0%CH ₄			
0%CO			

Remarks: Charger's, powercenter, Roadways, HAULAGE Clear at Time of EXAM

INTAKE phone NOT WORKING
AIR CHAMBER OK

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

Signed By [Signature] 36026 Certificate No. _____ Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] 356000 Mine Manager Mine Foreman _____
Rick Hutchins 37569 Assistant Foreman _____ Superintendent or Assistant _____

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

Date 11-3-09 Shift EVE Area or Section # 22 Headgate

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken	
1.	1 LT Lower Rm.	0 % CH ₄	Scrap Cut	Corrected
2.	4	0 % CH ₄	Needs Cleaned	Corrected
3.				
4.				
5.				
6.				
7.				
8.				
9.	Bad Top End of Track	DANGER OFF	Boilt About 15 cribs	
10.	1 BK out-by		Corrected	

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1LT-4	4:00-4:23	0 % CH ₄	11.			
2.	1LT-4	6:00-6:25	0 %	12.			
3.	1LT-4	8:00-8:25	0 %	13.			
4.	1LT-4	10:00-10:30	0 % CH ₄	14.			
5.				15.			
6.	0 % CH ₄			16.			
7.	20.802			17.			
8.	0 % C ^o			18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 5 #10+11 3:50pm RCP
Section safe & clear at time of exam

Rich Hutchins 37569 Assistant Mine Foreman 37569 Assistant Mine Foreman 37569 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-3 209 Section or Area Examined 1 section
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside no
 By whom Rick Hutchins Time 1112 P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>None observed</u>	
2.	<u>1C</u>	<u>Scrap cut</u>	<u>Reflector hung</u>
3.	<u>2R</u>	<u>None observed</u>	
4.	<u>3</u>	<u>None observed</u>	
5.	<u>4</u>	<u>None observed</u>	
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>intake</u>	<u>20370</u>		

Remarks: 5 locs 4
power center & chargers hallways intake phone air base
Clear of lines of view
208

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

Signed By Richard Hutchins 37564 Certificate No.
 Prestift Mine Examiner
 Countersigned Kyle Anderson 33238 Certificate No.
 Assistant Foreman
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-3 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1</u>	<u>N/A</u>	
2.	<u>1L</u>	<u>Scrap Cut</u>	<u>Reflectors hung</u>
3.	<u>2R</u>	<u>N/A</u>	
4.	<u>3</u>	<u>N/A</u>	
5.	<u>4</u>	<u>N/A</u>	
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-4</u>	<u>208</u>	<u>0.6 CH₄</u>	11.			
2.				12.			
3.	<u>1-4</u>	<u>458</u>	<u>0.6 CH₄</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>241</u>	<u>0.6 CH₄</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>536</u>	<u>0.6 CH₄</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson
Assistant Mine Foreman

33238
Certificate No.

Charles Cook
Mine Foreman-Mine Manager

3500000
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-4-09 20 Section or Area Examined # H022
 Time of Examination: from 4:58 a.m. or p.m. to 5:31 a.m. or p.m.
 Was this report placed to outside: Yes no
 By whom Kyle Anderson Time _____ A.M. _____ P.M.
 Report received by _____ (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>Cty 10</u>	<u>not Bolted</u>	<u>reflected</u>
2.	<u>D</u>	<u>W2 in Fall</u>	<u>rep</u>
3.	<u>D</u>	<u>W2 in Fall</u>	<u>rep</u>
4.	<u>D</u>	<u>mine obs</u>	<u>rep</u>
5.	<u>D</u>	<u>" "</u>	<u>rep</u>
6.	<u>D</u>	<u>mine obs</u>	<u>rep</u>
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>29 618</u>		

Remarks: 0 Cty 20.802.000 detailed
valleys - Huelys OK at time of
Exam pile and clay OK,
sketch under OK
Indite pile OK

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

Signed By Kyle Anderson 33238 Certificate No. Dea Assistant Foreman 36025 Certificate No.
 Countersigned Kyle Anderson 3906000
 _____ Mine Manager - Mine Foreman
 _____ Assistant Foreman
 _____ Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-4-09 Shift Runy Area or Section 14622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>122</u>	<u>not 5 ft</u>	<u>Boiler</u>
2. <u>1</u>	<u>How In face</u>	<u>Rep</u>
3. <u>2</u>	<u>How In face</u>	<u>Rep</u>
4. <u>2nd</u>	<u>new CG</u>	<u>Rep</u>
5. <u>3</u>	<u>" "</u>	<u>Rep</u>
6. <u>4</u>	<u>new CG</u>	<u>Rep</u>
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Ref</u>	<u>7:00</u>	<u>0</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Ref.</u>	<u>11:00</u>	<u>0</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 11

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed with # 2 on
Rep # 2) F 9:07 AM

[Signature] Assistant Mine Foreman 36025 Certificate No. [Signature] Mine Foreman-Mine Manager 36025 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-4 2009 Section or Area Examined # H G 22
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Dean Jones Time 2:30 P.M.
 Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1LT</u>	<u>0% CH₄</u>	<u>Tagged & Reported</u>
2. <u>1, 2</u>	<u>P/B</u>	<u>Reported</u>
3. <u>2R</u>	<u>N/O</u>	<u>Tagged & Reported</u>
4. <u>3</u>	<u>Scrap Cut</u>	<u>Reported</u>
5. <u>4</u>	<u>N/O</u>	<u>Reported</u>
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>18,746</u>		
<u>20.8⁰²</u>			
<u>0% CH₄</u>			
<u>0% CO</u>			

Remarks: power centers, R-ways, Chargers, Haulage Clear at
Turne of Exam

Intake phone OK
Air Chamber OK

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

Signed By [Signature] Certificate No. 36526 Assistant Foreman _____ Certificate No. _____
 Countersigned [Signature] Mine Manager Mine Foreman _____
Rick Hutchens Assistant Foreman Certificate No. 37569 Superintendent or Assistant _____

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-4-09 Shift EVE Area or Section HG22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1LT</u>	<u>0% CH₄</u>	<u>P/13</u>
2.	<u>2 RT</u>	<u>0% CH₄</u>	<u>Scrap Cut</u>
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1LT-4</u>	<u>4:00-4:30</u>	<u>0 % CH₄</u>	11.			
2.	<u>1LT-4</u>	<u>6:00-6:30</u>	<u>0 %</u>	12.			
3.	<u>1LT-4</u>	<u>8:00-8:30</u>	<u>0 %</u>	13.			
4.	<u>1LT-4</u>	<u>10:00-10:30</u>	<u>0 % CH₄</u>	14.			
5.				15.			
6.				16.			
7.	<u>20.8°</u>			17.			
8.	<u>0% CH₄</u>			18.			
9.	<u>0% CO</u>			19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>3:58pm</u>	<u>0 % CH₄</u>	6.			
2.	<u>Return</u>	<u>7:59pm</u>	<u>0 % CH₄</u>	7.			
3.				8.			
4.				9.			
5.				10.			

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

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

Richard Hutchins 37569 Certified 39 NOV 09
Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-4 209 Section or Area Examined 1 center
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Richard Hutchins Time 1113 P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1K</u>	<u>Scrap Cut</u>	<u>Reflector hung</u>
2.	<u>1-2-2R</u>	<u>None observed</u>	
3.	<u>3</u>	<u>Part bolted</u>	<u>Reflector hung</u>
4.	<u>4</u>	<u>None observed</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>intake</u>	<u>18640</u>		

Remarks: ob dH
power center a changers haulways air base intake phone
All clear at time of exam
20-8

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

Signed By Richard Hutchins 37569 Kyle Anderson 33238
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned [Signature] 350122
Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-4 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>1c</u>	<u>Scrap cut</u>	<u>Reflectors hung</u>
2.	<u>1-2-2R</u>	<u>N/A</u>	
3.	<u>3</u>	<u>Part bolted</u>	<u>Reflectors hung</u>
4.	<u>4</u>	<u>N/A</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-4</u>	<u>210</u>	<u>0.6 cthy</u>	11.			
2.				12.			
3.	<u>1-7</u>	<u>505</u>	<u>0.6 cthy</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>Return</u>	<u>250</u>	<u>0.6 cthy</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>544</u>	<u>0.6 cthy</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Kyle Anderson Assistant Mine Foreman 33238 Certificate No. Carlton Cook Mine Foreman-Mine Manager 3506000 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-5-09 20 Section or Area Examined H 622
 Time of Examination: from 5:08 a.m. or p.m. to 5:32 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Ryle Anderson Time 5:40 A.M. P.M.
 Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>CH4</u>	<u>not bolted</u>	<u>reflecter</u>
2.	<u>1</u>	<u>H2O In face</u>	<u>rep</u>
3.	<u>2</u>	<u>H2O In face</u>	<u>rep</u>
4.	<u>3</u>	<u>part bolted</u>	<u>reflecter</u>
5.	<u>4</u>	<u>none OK</u>	<u>nil</u>
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>19,660</u>		

Remarks: CH4 20.80% oco detected traces
of gases OK & fine of EPA p.c. are
OK.

shelter chamber OK
interlock phone OK

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

Signed By [Signature] Certificate No. 32254
 Countersigned [Signature] Mine Manager Mine Foreman Certificate No. 3506000
[Signature] Assistant Foreman Certificate No. 3603
[Signature] Superintendent or Assistant

Ryle Anderson 33238

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Date 11-8-09 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1st</u>	<u>not bolted</u>	<u>Bolted</u>
2. <u>5</u>	<u>H2O In RCP</u>	<u>AW</u>
3. <u>5</u>	<u>H2O In RCP</u>	<u>AW</u>
4. <u>3</u>	<u>part bolted</u>	<u>is it up</u>
5. <u>4</u>	<u>None obs</u>	<u>my</u>
6.		
7.		
8.		
9.		
10.		

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 12

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) disassembled part 5 of RCP #29 At 7:50 AM

[Signature] 36022 [Signature] 35022

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-5 2009 Section or Area Examined HG-22
 Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Dean Jones Time 2:40 P.M.
 Report received by Rick Hutchens
(Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	ILT	part Bolt	Taged & Reported
2.	1	n/o	Reported
3.	2	scrap	Taged & Reported
4.	3	Needs Clean	Reported
5.	4	needs Dust	Reported
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	16,746		
20.8 ⁰²			
0% ch ₄			
0% CO			

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

Intake phone OK
Air Chamber OK

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

Signed By Dean Jones 36526
Preshift Mine Examiner Certificate No.
 Countersigned Andy Cook 390000
Mine Manager Mine Foreman
Rick Hutchens 37569
Assistant Foreman Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 11-5-09 Shift Eve Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Includes handwritten entries like '1LT', 'PART Bolted', 'Scrap Cut', 'Needs Clean', 'Needs Dust', and 'Corrected'.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Includes handwritten entries for locations like '1LT-4' and times like '4:00-4:30', with methane content recorded as '0 % CH4'.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Includes handwritten entries for 'Return' locations and times like '3:58pm' and '7:55pm', with methane content recorded as '0 % CH4'.

Number of Bolts Tested 8

Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 # 15 3:50pm RCP Section Safe + Clean at Time of EXAMS

Signature: Rick Hutchins, Assistant Mine Foreman; Certificate No. 37569; Mine Foreman-Mine Manager; Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 11-5 201 Section or Area Examined 1 sector
 Time of Examination: from 1000 a.m. or p.m. to 1030 a.m. or p.m.
 Was this report phoned to outside: Yes No
 By whom Rick Hutchins Time 1100 A.M. P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1L</u>	<u>Scrap cut</u>	<u>Reflates hung</u>
2. <u>1</u>	<u>None observed</u>	
3. <u>2-2R</u>	<u>None observed</u>	
4. <u>3</u>	<u>None observed</u>	
5. <u>4</u>	<u>None observed</u>	
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>intake</u>	<u>18,130</u>		

Remarks: check
power center & chargers hallways air base intake phone
Clear at time of exam
208

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

Signed By Rick Hutchins 37569 Certificate No. Kyle Anderson 33238 Certificate No.
 Countersigned Chris Cook 3506000
 Mine Manager Mine Foreman
 Assistant Foreman
 Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 11-5 Shift 3rd Area or Section 1 section

Violations and other Hazardous Conditions Observed and Reported

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

Examinations for Methane in Working Places

1.	Location	Time	Methane Content	11.	Location	Time	Methane Content
	<u>1-4</u>	<u>210</u>	<u>0.6 off 1</u>				
2.				12.			
3.	<u>1-4</u>	<u>506</u>	<u>0.6 off 1</u>	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

1.	Location	Time	Methane Content	6.	Location	Time	Methane Content
	<u>Return</u>	<u>294</u>	<u>0.6 off 1</u>				
2.				7.			
3.	<u>Return</u>	<u>543</u>	<u>0.6 off 1</u>	8.			
4.				9.			
5.				10.			

Number of Bolts Tested _____

Number of Bolts Torqued Above Range _____ Below Range _____

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

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

Ryle Anderson 33238 Charles Cook 3706000
 Assistant Mine Foreman Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent or Assistant

~~Handwritten text, possibly a title or subject line, crossed out with a horizontal line.~~

Handwritten text, possibly a date or reference number.

Handwritten text, possibly a list or notes.

Handwritten text, possibly a date or reference number.

Handwritten text, possibly a list or notes.

Handwritten text, possibly a date or reference number.

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Handwritten text, possibly a list or notes.