

PRESHIFT - ONSHIFT and DAILY REPORT

Started 1-27-10

Company UBB, PERFORMANCE COAL

Mine UBB

SECTION HG-22

LOCATION Naomi RAL. WV
Post Office County State

Form 6-1489
(March 1970)

Budget Bureau No. 42-R1589

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

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FORM# MS-014

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-27 2010 Section or Area Examined H6-22
Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Brandon Bowling Time A.M. 2:40 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8 ⁰² .10	P/B	Tagged & Reported
2.	20.8 ⁰² .05	N/O	Reported
3.	20.8 ⁰² .05	Scrap	Tagged & Reported
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	20,200		
20.8 ⁰²			
0% CH ₄			
0% CO			

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

Air 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 Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Brandon Bowling Preshift-Mine Examiner Certificate No. 11021A
Rick Hutchens Assistant Foreman Certificate No. 37569
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 35759
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 1-27-10 Shift EVF Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>20.802</u>	<u>.05% ch4</u>	<u>P/B</u>
2.	<u>2R 20.802</u>	<u>.05% ch4</u>	<u>N/O</u>
3.	<u>3 20.802</u>	<u>.05% ch4</u>	<u>Scrap</u>
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>4:00-4:30</u>	<u>0% ch4</u>	11.			
2.	<u>1-3</u>	<u>6:15-6:45</u>	<u>0%</u>	12.			
3.	<u>1-3</u>	<u>8:17-8:36</u>	<u>0%</u>	13.			
4.	<u>1-3</u>	<u>10:30-11:00</u>	<u>0% ch4</u>	14.			
5.				15.			
6.	<u>20.802</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>3:59 pm</u>	<u>0% ch4</u>	6.			
2.	<u>Return</u>	<u>8:15 pm</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)

Section Safe & Clear at Time of Exam

Rich Hutchins
Assistant Mine

37569
Certificate No.

Tony M...
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Page 4 of 12 3:55 pm

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-27 10 Section or Area Examined HG 22

Time of Examination: from 10:15 a.m. or p.m. to 10:45 a.m. or p.m.

Was this report phoned to outside: Yes [checked] no

By whom [Signature] Time A.M. 11:19 P.M.

Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. 1 260H4	Part bolted	Refastened
2. 2 and 2R 260H4	none observed	
3. 3 260H4	Scrap Cut	Refastened
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Sub	19270		

Remarks: 260H4 power center & chargers intake phone fresh air base Chem at base of open 208

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

Signed By [Signature] 37569 Preshift Mine Examiner Certificate No.

Countersigned [Signature] Mine Manager - Mine Foreman

[Signature] Assistant Foreman Certificate No. 93238

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 1-27 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>objcty</u>	<u>Part bolted</u>	<u>Reflectors hung</u>
2.	<u>2nd 2R objcty</u>	<u>none observed</u>	
3.	<u>3 objcty</u>	<u>Scrap Cut</u>	<u>Reflectors hung</u>
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-3 144</u>	<u>225</u>	<u>objcty</u>	11.		
			12.		
<u>1-3 458</u>	<u>531</u>	<u>objcty</u>	13.		
			14.		
			15.		
			16.		
			17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>231</u>	<u>objcty</u>	6.		
			7.		
<u>Return</u>	<u>536</u>	<u>objcty</u>	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) _____

Ryle Anderson
Assistant Mine

33228
Certificate No.

Tony Moore
Mine Foreman-Mine Manager

33357
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-28 2010 Section or Area Examined Headgate #22

Time of Examination: from 4:58 a.m. or p.m. to 5:31 a.m. or p.m.

Was this report phoned to outside: Yes X no

By whom Kyle Anderson Time 540 A.M. P.M.

Report received by Branch Bowyer (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for #1 Entry, #2+2R, and #3 Entry.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for LOB with CFM 17,640.

Remarks: Power Center, Travelways, Chargers, Outby Shelter, Intake Phone. All areas 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 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, Branch Bowyer, etc.

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 1-28-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .15 CH ₄ % 20.802	Needs Cleaned	Cleaned + Dusted
2.		
3. #3 Entry .20 CH ₄ % 20.802	Scrap Cut	Dusted + Reflectors
4.		
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	7-730AM	.2 CH ₄ % 20.802	11.		
2.			12.		
3. 1-3	9-930AM	.15 CH ₄ % 20.802	13.		
4.			14.		
5. 1-3	11-1130AM	.15 CH ₄ % 20.802	15.		
6.			16.		
7. 1-3	1-150PM	.25 CH ₄ % 20.802	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	712AM	0 CH ₄ % 20.802	6.		
2.			7.		
3. Return	1110AM	0 CH ₄ % 20.802	8.		
4.			9.		
5.			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. 3 sect C RCP at

647AM

Brent Boy

Assistant Mine

1122-A

Certificate No.

Tony Moore

Mine Foreman-Mine Manager

33357

Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-28-20 Section or Area Examined 10 HG-22
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
By whom Brandon Bowling Time A.M. 2:40 P.M.
Report received by Rick Hutchins (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1-4 with conditions like 'N/C/D', 'N/O', 'Scrap', 'P/B' and actions like 'Reported', 'Traged Reported'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for 'LOB' with CFM '18,885' and oxygen percentage '20.8% O2'.

Remarks: powercenter, R-ways, Charges, 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 Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Brandon Bowling Preshift-Mine Examiner Certificate No. 1122A
Countersigned Tony Moore Mine Manager - Mine Foreman Certificate No. 33359
Rick Hutchins Assistant Foreman Certificate No. 37569
Superintendent or Assistant

Use Indelible
Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 1-28-10 Shift EVF Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	20.8 ^{oz}	.05 % CH ₄ N/C/D	Corrected
2.	2R ↓	.0 % CH ₄ Scrap	Corrected
3.	3 ↓	.0 % CH ₄ P/B	Corrected
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4:30-5:00	0 % CH ₄	11.		
2. 1-3	7:00-7:20	0 %	12.		
3. 1-3	9:00-9:18	0 %	13.		
4. 1-3	11:00-11:20	0 % CH ₄	14.		
5.			15.		
6. 20.8 ^{oz}			16.		
7. 0 % CH ₄			17.		
8. 0 % CO			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:17 pm	0 %	6.		
2. Return	8:00 pm	0 %	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 #29 3:55 pm RCP

Section Safe & Clear at Time of Exam

Rich Hartman 37569 Tony Moore 33352
Assistant 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 1-28 Section or Area Examined HG 22
Time of Examination from 10:00 a.m. or p.m. to 10:50 a.m. or p.m.
Was this report prepared in outside? Yes no
By whom Rich Hutelings Time 11:15 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>o 20 CH4</u>	<u>needs cleaned & dusted</u>	<u>Reported</u>
2.	<u>o 20 CH4</u>	<u>N/O band</u>	
3.	<u>2R o 20 CH4</u>	<u>Scrap Cut</u>	<u>Reflectors</u>
4.	<u>3 o 20 CH4</u>	<u>None observed</u>	
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>20B</u>	<u>19740</u>		

Remarks: o 20 CH4 power center & chargers in the phone
fresh air base Clean at time of exam
20.8

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

Signed By Rich Hutelings 37569 Preshift-Mine Examiner Certificate No.
Countersigned Trey Moore 33359 Mine Manager—Mine Foreman Certificate No. Kyle Anderson Assistant Foreman 33238
Assistant Foreman
Superintendent or Assistant

Use Indellible
Penell or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be
signed when made

Date 1-28 Shift 3rd Area or Section HG 2D

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>objct 1</u>	<u>needs cleaned & dusted</u>	<u>Reported</u>
2.	<u>objct 4</u>	<u>None observed</u>	
3.	<u>2R</u>	<u>Scrap Cut</u>	<u>Reflectors hung</u>
4.	<u>3</u>	<u>None observed</u>	
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-3 100</u>	<u>136</u>	<u>objct 4</u>			
<u>1-3 505</u>	<u>531</u>	<u>objct 4</u>			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>141</u>	<u>objct 4</u>			
<u>Return</u>	<u>535</u>	<u>objct 4</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 Assistant Mine 37238 Certificate No. Troy Moore Mine Foreman-Mine Manager 3359 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-29-10 Section or Area Examined H622
Time of Examination: from 5:05 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 5:31 A.M. P.M.
Report received by (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1-4 with violations like 'nac vgs' and actions like 'reflected'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for CO2 at 18.610.

Remarks: OCHy 20.802 OCO detected trailers 2 trailers OK at time of Etn P.C. and Chayer OK

Sketch Intake here OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned Tony Moore Mine Manager-Mine Foreman Certificate No. 33339
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 1-29-75 Shift PM Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>rule 065</u>	<u>none</u>
2. <u>2</u>	<u>rule 065</u>	<u>none</u>
3. <u>3rd</u>	<u>not BHP</u>	<u>BHP</u>
4. <u>3</u>	<u>rule 065</u>	<u>none</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u>	<u>05</u>	11. _____	_____	_____
2. _____	<u>7:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>05</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>05</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:00</u>	<u>05</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>net</u>	<u>8:00</u>	<u>1.10</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>net</u>	<u>11:00</u>	<u>1.10</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 4 of
dep #7 at 6:40 Am

[Signature] Assistant Mine Foreman
[Signature] Mine Foreman-Mine Manager
Certificate No. 33389
Superintendent or Assistant _____

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-29 2010 Section or Area Examined Headgate
Time of Examination: from 1200 a.m. or p.m. to 130 a.m. or p.m.
Was this report phoned to outside: Yes No
By whom Doug Jones Time 230 P.M.
Report received by Bruce Perry (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	#1 Entry .10 ^{CH₄} 20.802	None Observed	Reported
2.			
3.	#2 + 2RR Entries .10 CH ₄ 20.802	Need Clean + Vented	Reported
4.			
5.			
6.	#3 Entry .10 CH ₄ 20.802	Part Bolted	Reflectors
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
L0B	13,985		
0CH ₄ 20.802			
0PPM C/O			

Remarks: Power Centers
Chargers
Intake Shelter
Intake Phone
Outby Shelter
0CH₄ 20.802 0PPM C/O
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 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] 36525 Bruce Perry 11221A
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned [Signature] 33389
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 1-29-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	# 2 & R Entry CC ID	Need Cleaned + Dusted	Cleaned + Dusted
	20.802		
2.			
3.	# 3 Entry .05 CH ₄	Part Bolted	Bolted Reflectors
	20.802		
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4-430pm	.05 CH ₄	11.			
			20.802	12.			
2.				13.			
3.	1-3	6-630pm	.10 CH ₄	14.			
			20.802	15.			
4.				16.			
5.	1-3	9-830pm	.05 CH ₄	17.			
			20.802	18.			
6.				19.			
7.	1-3	10-1100pm	.05 CH ₄	20.			
			20.802				
8.							
9.							
10.							

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	410pm	.05 CH ₄	6.			
			20.802	7.			
2.				8.			
3.	Return	811pm	.05 CH ₄	9.			
			20.802	10.			
4.							
5.							

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) Ag. 3 sect. E of RCP

at 340pm
Bubing 1122A Tony M... 33307
Assistant Mine Certificate No. Mine Foreman-Mine Manager Certificate No. Superintendent of Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination: 1-29-10 Section or Area Examined: HG 22
Time of Examination: from 1:00 a.m. or p.m. to 1:00 a.m. or p.m.
Was this report phoned to outside: Yes [checked] no
By whom: Brandon Time: A.M. 117 P.M.
Report received by: Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
#1 entry 06 CH11	None Observed	
#2 entry 10	Needs cleaned	Reported
#3 Entry 05	Scrap cut	Reflectors hung

Air Measurements

Location	CFM	Location	CFM
Job	17448		

Remarks: 0.10% CH4 power center + chargers intake phone and fresh air base (check 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 Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By: [Signature] Preshift Mine Examiner
Countersigned: Terry Moore Mine Manager - Mine Foreman
Certificate No. 122-A
Assistant Foreman: Kyle Anderson
Certificate No. 33238
Superintendent or Assistant

Use Indefible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-29 Shift 3rd Area or Section HG-02

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>	needs cleaned <u>needs cleaned</u>	<u>Reported</u>
3. <u>3</u>	<u>Scrap</u>	<u>Reflected</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3140</u>	<u>215</u>	<u>0.6%</u>	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>505</u>	<u>5.30%</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>220</u>	<u>0.6%</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Return</u>	<u>536</u>	<u>0.6%</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
Assistant Mine

33238
Certificate No.

T. Miller
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-30-10 20. Section or Area Examined H622
 Time of Examination: from 5:00 a.m. or p.m. to 5:24 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kyle Anderson Time 5:48 A.M. P.M.
 Report received by Dee (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHP</u>	<u>nae ub) 20.8</u>	<u>mp</u>
2. <u>0</u>	<u>needs add log 20.8</u>	<u>er</u>
3. <u>0</u>	<u>part of heel 20.8</u>	<u>reflect</u>
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>17.780</u>		

Remarks: o of H4 20.802. 0.00 detected tunnels?
Hauling OK at time of Exam p.c. and Clerk
OK

Sketch
Phone Intake 7 OK

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

Signed By Kyle Anderson 33238 Preshift Mine Examiner Certificate No.
Dee 36028 Assistant Foreman Certificate No.
 Countersigned Troy Moore 33759 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 1-30-09 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>nee c6)</u>	<u>nap</u>
2. <u>2</u>	<u>needs aded Day</u>	<u>cluef</u>
3. <u>3</u>	<u>part bolt reef</u>	<u>at Hey</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u>	<u>.2</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>.2</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>.05</u>	15. _____	_____	_____
6. _____	<u>11:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>11:00</u>	<u>.2</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

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

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) discussed per # 9
of rep # 9 at 6:40 AM

Assistant Mine Foreman [Signature] Certificate No. 56520 Mine Foreman-Mine Manager [Signature] Certificate No. 37757 Superintendent or Assistant _____

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-30 2010 Section or Area Examined Headgate #22
Time of Examination: from 1200 a.m. or 1200 p.m. to 130 a.m. or 130 p.m.
Was this report phoned to outside: Yes X no
By whom Deano Jones Time A.M 235 P.M.
Report received by Branch (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Entry .05 CH4! 20.802	Needs Add Cleaning	Reporting
2. #2 Entry .10 CH4! 20.802	Scrap Cut	Reflectors
3. #3 Entry .10 CH4! 20.802	Need Add Cleaning	Reported
4. OPPM c/o		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	13,948		
OCH4! 20.802			
OPPM c/o			

Remarks: Power Center
Intake Phone
Intake Shelter
Chargers
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 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] 3025 Branch (Signature) Assistant Foreman Certificate No. 1122-A
Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 3357
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 1-30-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .05 CH ₄ ! 20.802	Needs Add Cleaning	Reported
2. _____	_____	_____
3. #2 Entry .10 CH ₄ ! 20.902	Scrap Cut	Boiled + Reflectors
4. _____	_____	_____
5. #3 Entry .10 CH ₄ ! 20.802	Needs Add Cleaning	Cleaned + Misted
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430pm	.05 CH ₄ ! 20.802	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. 1-3	6-630pm	.10 CH ₄ ! 20.802	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. 1-3	8-830pm	.10 CH ₄ ! 20.802	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. 1-3	10-1100pm	.10 CH ₄ ! 20.802	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:15pm	.05 CH ₄ ! 20.802	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. Return	8:13pm	.05 CH ₄ ! 20.802	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	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 10 Reurat
342 pm.

[Signature] Assistant Mine Certificate No. 1122A [Signature] Mine Foreman-Mine Manager Certificate No. 38599 [Signature] Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-30-70 Section or Area Examined H6 #22
 Time of Examination: from 1000 a.m. or p.m. to 1100 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Bolan Time 1144 A.M. P.M.
 Report received by Shirley (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	OS CH4 20.802	needs cleaned	reported
2.	110 CH4 20.802	part Bolted	reported
3.	110 CH4 20.802	None observed	reported
4.			
5.	Open CD		
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	1816		
20.802			
0% CO			

Remarks: Intake Phases power centers rescue chamber feeds 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 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 Bolan Preshift-Mine Examiner Certificate No. 1122-A
 Countersigned T. M. ... Mine Manager-Mine Foreman Certificate No. 3329
Shirley Assistant Foreman Certificate No. 1944-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 1-31-10 Shift 3rd Area or Section HA #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1	NEEDS cleaned	Reported
2.	2	part B/H	Parted
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

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

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

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

[Signature] Assistant Mine
30290 Certificate No.
[Signature] Mine Foreman-Mine Manager
33359 Certificate No.
 _____ Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 1-31-10 Section or Area Examined H622
Time of Examination: from 4:00 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes 1 no 0
By whom Kennedy Farmer 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>CH4 9</u>	<u>needs add chg 20.8</u>	<u>rep</u>
2. <u>OS</u>	<u>needs add chg 20.8</u>	<u>rep</u>
3. <u>OS</u>	<u>new cb) 20.8</u>	<u>rep</u>
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>16,200</u>		

Remarks: OS CH4 20.8 O2 20.0 detected trackleys ?
Trackleys OK at time of Exam p.c. and cheser
OK.

skel/te
intake phone OK

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

Signed By [Signature] Preshift-Mine Examiner Certificate No. 32294
 Countersigned [Signature] Mine Manager—Mine Foreman Certificate No. 33359
[Signature] Assistant Foreman Certificate No. 36020
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-31-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>Needs added dry mix</u>	<u>Level noted</u>
2. <u>2</u>	<u>Needs added dry mix</u>	<u>Level dusted</u>
3. <u>3</u>	<u>none obs</u>	<u>nil</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u> <u>7:30</u>	<u>.05</u>	11. _____	_____	_____
2. <u>1-3</u>	<u>8:40</u> <u>9:00</u>	<u>.05</u>	12. _____	_____	_____
3. <u>1-3</u>	<u>11:00</u> <u>11:50</u>	<u>.05</u>	13. _____	_____	_____
4. <u>1-3</u>	<u>1:00</u> <u>1:50</u>	<u>.05</u>	14. _____	_____	_____
5. <u>1-3</u>	<u>1:00</u> <u>1:50</u>	<u>.05</u>	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>ret</u>	<u>8:00</u>	<u>.05</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>ret</u>	<u>12:00</u>	<u>.05</u>	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 4 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 mtg # 7 of

Rep # 29 At 6:40 AM
Assistant Mine _____ Certificate No. _____
Mine Foreman-Mine Manager T. Moore Certificate No. 32257
Superintendent or Assistant _____

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-31 2010 Section or Area Examined # Headgate 22
Time of Examination: from 1200 a.m. or p.m. to 130 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Deano Jones Time A.M. 230 P.M.
Report received by (Signed) Brant Borg

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for #1 Entry, #2 Rcc, and #3 Entry.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for LOB with CFM 14,450 and O ppm c/o 0 cavl, 20,802.

Remarks: Power Center, Chargers, Outby Chamber, Intake Manue. 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 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. 3652
Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 33959
Assistant Foreman Certificate No. 1102-A
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-31-10 Shift EVE Area or Section H6 #22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Entries include #1 Entry .05CH4 Needs Cleaned, #2RCC .10CH4 Scrap Cut, #3 Entry .10CH4 None Observed.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Entries show methane readings at various times (4-4:30pm, 6-6:30pm, 8-8:30pm, 10-11:00pm) for location 1-3.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Entries show methane readings in return aircourses at 8:30pm and 8:15pm.

Number of Bolts Tested 7 Number of Bolts Torqued Above Range Below Range

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

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

Pg. 4 Sect 12 REV at 340

Assistant Mine signature

1172-A Certificate No.

Mine Foreman-Mine Manager signature

33357 Certificate No.

Superintendent or Assistant signature

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-31-10 Section or Area Examined HG 22
Time of Examination: from 1:00 a.m. or p.m. to 4:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Brandon Time A.M. 1116 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. Row 1: #1 entry, OS, None Observed. Row 2: #2 Entry, 10, Needs Cleaned, Reported. Row 3: #3 entry, 10, None Observed.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Row 1: Job, 16620.

Remarks: 10% H2 power center + charges, Haulways intake phone, fresh air base clean 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 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. 1122A
Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 33359
Assistant Foreman [Signature] Certificate No. 33238
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 1-31 Shift 3rd Area or Section H322

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 entry .05	N/O	
2.			
3.	#2 entry .10	needs cleaned	Reported
4.			
5.	#3 entry .10	N/O	
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3 136	210	0.2 CH ₄	11.			
2.				12.			
3.	1-3 430	535	0.2 CH ₄	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	215	0.2 CH ₄	6.			
2.				7.			
3.	Return	541	0.2 CH ₄	8.			
4.				9.			
5.				10.			

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

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

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

Ryle Anderson
Assistant Mine

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

3358
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-1-10 20 Section or Area Examined H622
Time of Examination: from 4:30 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:30 A.M. P.M.
Report received by (Signed)

Table with 4 columns: Location, Violations and other Hazardous Conditions Observed and Reported, Violation or Hazardous Condition, Action Taken. Contains 4 rows of handwritten entries.

Table with 4 columns: Location, CFM, Location, CFM. Under the heading 'Air Measurements'. Contains one handwritten entry: Location COB, CFM 17.520.

Remarks: OCH4 20.8 O2 00 detailed frackles; Hules OK at time of Exm p.c. and Chargers OK.

skelton -> OK
Intake phone

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

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 36521
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 2-1-12 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>needs cleaned</u>	<u>cleaned</u>
2. <u>2</u>	<u>needs add day in duty</u>	<u>cleaned & dusted</u>
3. <u>2nd</u>	<u>Scrap metal</u>	<u>cleaned up & 1 day</u>
4. <u>3</u>	<u>new obs</u>	<u>none</u>
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:50</u>	<u>.05</u>	11.		
2.	<u>9:00</u>		12.		
3. <u>1-3</u>	<u>9:00</u>	<u>.08</u>	13.		
4.	<u>11:00</u>		14.		
5. <u>1-3</u>	<u>11:00</u>	<u>.08</u>	15.		
6.	<u>1:00</u>		16.		
7. <u>1-3</u>	<u>1:00</u>	<u>.05</u>	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>ref.</u>	<u>8:00</u>	<u>.08</u>	6.		
2.			7.		
3. <u>ref.</u>	<u>12:00</u>	<u>.05</u>	8.		
4.			9.		
5.			10.		

Number of Bolts Tested 16
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 #4 of Rep #2 at 6:40 Am went over Dyst Control Plan

[Signature] Assistant Mine Foreman
[Signature] Mine Foreman-Mine Manager
Certificate No. 33287 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-1 20-10 Section or Area Examined HG-22
Time of Examination: from 2:00 a.m. or p.m. to 1:40 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Dean James Time A.M. 1:40 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 1-4 with violations like P/B, N/O, Scrap and actions like Tagged & Reported.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten data for LOB location with CFM 14,060 and gas measurements 20.8% O2, 0% CH4, 0% CO.

Remarks: powercenter, R-ways, Haulage, Chaugus 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 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] 3622 Certificate No.
Countersigned T. Moore Mine Manager - Mine Foreman Certificate No. 33389
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 2-1-10 Shift EVC Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	20.8° .05%CH ₄	P/B	Corrected
2.	2R .05%CH ₄	Scrap Cut	Corrected
3.	3 20.8° .0%CH ₄	P/B	Corrected
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-3	4:00-4:17	0 %CH ₄			
1-3	6:20-6:40	0 %			
1-3	8:50-9:15	0 %			
1-3	11:00-11:15	0 %CH ₄			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	3:58pm	0 %CH ₄			
Return	8:00pm	0 %CH ₄			

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 #29 3:55pm RCP
Section Safe & Clear at Time of Exam

Rich Hutchins Assistant Mine 37569 Certificate No. T. Moore Mine Foreman-Mine Manager 33359 Certificate No. Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-1 2010 Section or Area Examined HG-22
 Time of Examination: from 01.5 a.m. or p.m. to 10.45 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rich Hutchings Time 11/4 P.M.
 Report received by Ryle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 entry OS	needs cleaned/dusted	Reported
2. _____	_____	_____
3. #2L entry	Scrap Cut	Reflective being
4. 2 feet off chf	Needs Cleaned	Reported
5. #3 entry off chf	None Observed	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
POB	16,240	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: OS chf power center & chargers intake phone, fresh air base. Clear at time of repairs

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

Signed By _____ Preshift-Mine Examiner Certificate No. _____
 Countersigned T. Moore Mine Manager—Mine Foreman Certificate No. 33339
 _____ Assistant Foreman Certificate No. 33238
 _____ Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-1 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	# 1 OS	needs cleaned & dusted	Reported
2.			
3.	# 21 26 off	Scrap Cut	Reflectors hung
4.	2 26 off	needs cleaned	Reported
5.	# 3 26 off	None observed	Reported
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	1255	126	26 off	11.		
2.					12.		
3.	1-3	430	531	26 off	13.		
4.					14.		
5.					15.		
6.					16.		
7.					17.		
8.					18.		
9.					19.		
10.					20.		

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	131	26 off	6.			
2.				7.			
3.	Return	540	26 off	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

33238
Certificate No.

T. [Signature]
Mine Foreman-Mine Manager

33529
Certificate No.

Regulation 14.00001

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-2-10 20. Section or Area Examined H622
Time of Examination: from 4:10 a.m. or p.m. to 5:11 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 Dean (Signed)

Violations and other Hazardous Conditions Observed and Reported

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

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for location CB with CFM 17870.

Remarks: OS City 20.802 CO detected traces? Huleys ck at time of EA P.C. and chgs ck

Stelth -> CK
Phone Intake

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 Preshift-Mine Examiner Certificate No.
Counter-signed T. Moore 33352 Mine Manager-Mine Foreman 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 2-2-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for locations 1-3.

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

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 with 208 Rep # 3 (f). Dist control plan # 16

Assistant Mine

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 2-2 2010 Section or Area Examined HG-22
Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom DEAN JONES Time 2:35 P.M.
Report received by Rick Hutchens
(Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	<u>20.8^{oz}</u> <u>10% CH₄</u>	<u>Scrap Cut</u>	<u>Tracked Reported</u>
2.	<u>2L</u> <u>% CH₄</u>	<u>N/O</u>	<u>Reported</u>
3.	<u>2</u> <u>% CH₄</u>	<u>N/O</u>	<u>Reported</u>
4.	<u>3 20.8^{oz}</u> <u>% CH₄</u>	<u>N/O</u>	<u>Reported</u>
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>14,176</u>		
<u>20.8^{oz}</u>			
<u>0% CH₄</u>			
<u>0% C^o</u>			

Remarks: powercenter, R-way, 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 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 36521 Preshift-Mine Examiner Certificate No.
Countersigned T. Moore 33559 Mine Manager—Mine Foreman Assistant Foreman Certificate No.
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 2-2-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>20.8^{oz}</u>	<u>0% CH₄ Scrap Cut</u>	<u>Corrected</u>
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
<u>1-3</u>	<u>4:00-4:20</u>	<u>0 % CH₄</u>			
<u>1-3</u>	<u>6:00-6:20</u>	<u>0 %</u>			
<u>1-3</u>	<u>8:00-8:30</u>	<u>0 %</u>			
<u>1-3</u>	<u>10:00-10:30</u>	<u>0 % CH₄</u>			
5.					
6.					
7.					
8.					
9.					
10.					

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
<u>Return</u>	<u>3:55pm</u>	<u>0 % CH₄</u>			
<u>Return</u>	<u>7:58pm</u>	<u>0 % CH₄</u>			
4.					
5.					

Number of Bolts Tested 8 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 #22+23 3:45pm RCP

Section Safe & Clear at Time of Exam
Rick Hutchins 37569 T. Moore 3359
Assistant Mine 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 2-2 2010 Section or Area Examined HG 22
 Time of Examination: from 10:00 a.m. or p.m. to 1:50 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time 11:15 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.	#1 o/b cty	Scrap Cut	Reflectors hung
2.			
3.	#2 o/b cty	None observed	Reported
4.			
5.	#3 o/b cty	None observed	Reported
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
PAB	17,480		

Remarks: o/b cty power center & chargers intake phone fresh air base

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

Signed By Rick Hutchens 37569 Preshift-Mine Examiner Certificate No.
 Countersigned T. Mann Mine Manager—Mine Foreman 33357
Kyle Anderson Assistant Foreman Certificate No. 33238
 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 2-2 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	# 1 <u>26ctfy</u>	<u>Scrap Cart</u>	<u>Reflected</u>
2.			
3.	# 2 <u>26ctfy</u>	<u>N/O</u>	<u>Reported</u>
4.			
5.	# 3 <u>26ctfy</u>	<u>N/O</u>	<u>Reported</u>
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3 1255</u>	<u>129</u>	<u>26ctfy</u>	11.			
2.				12.			
3.	<u>1-3 430</u>	<u>521</u>	<u>26ctfy</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>135</u>	<u>26ctfy</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>934</u>	<u>26ctfy</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

33238
Certificate No.

T. M. ...
Mine Foreman-Mine Manager

35359
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-3-2010 20 Section or Area Examined H622
Time of Examination: from 4:30 a.m. or p.m. to 5:20 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:20 A.M. P.M.
Report received by (Signed)

Table with 4 columns: Location, Violations and other Hazardous Conditions Observed and Reported, Action Taken. Contains 4 rows of handwritten entries regarding scrap cut, nae obs, needs dusted, n one obs.

Table for Air Measurements with columns for Location and CFM. Contains one handwritten entry: Location C03, CFM 17,400.

Remarks: 5 chf 20.8 O2 sco detected Tronleys
Haulgays ok at time of Exam P.C.
and chargers ok
shelter ok
Intake phere

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 33359
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 2-3-2010 Shift any

Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>Scrap cut</u>	<u>Reflected</u>
2. <u>2</u>	<u>noe o6s</u>	<u>none</u>
3. <u>2st</u>	<u>needs Dystup</u>	<u>Reported: dust</u>
4. <u>3</u>	<u>noe o6s</u>	<u>none</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u> <u>7:00</u>	<u>0.0</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>0.0</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:00</u>	<u>0.0</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:00</u>	<u>0.0</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>8:00</u>	<u>0.0</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>het</u>	<u>12:00</u>	<u>0.0</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 with #29
of rep. Dyst control plan Face ventilation ABCOET

Kyle Anderson 33238
Assistant Mine Certificate No.

T. Miller
Mine Foreman-Mine Manager

33239
Certificate No.

Superintendent or Assistant

See 2-3-602

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-3 2010 Section or Area Examined HG-22
Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
Was this report phoned to outside: Yes / no
By whom Dean Jones Time A.M. 2 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action Taken
1.	20.8 ⁰² .05%CH ₄	N/C	Reported
2.	20.8 ⁰² .05%CH ₄	Scrap	Tagged & Reported
3.	20.8 ⁰² .05%CH ₄	P/B	Tagged & Reported
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
L0B	14,456		
20.8 ⁰²			
0%CH ₄			
0%CO			

Remarks powercenter, R-ways, Chargers, HAULAGE Clear at Time of EXAM

Intake phone OK
Air Chamber OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all-violations of the 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 Preshift-Mine Examiner Certificate No. 37569
Countersigned Rick Hutchens Mine Manager—Mine Foreman Certificate No. 36526
Rick Hutchens Assistant Foreman Certificate No. 37569
Superintendent or Assistant

Date 2-3-10 Shift Eve Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	20.8 ⁰² 0 %CH ₄	N/C	Corrected
2.	20.8 ⁰² 0 %CH ₄	Scrap Cut	Corrected
3.	20.8 ⁰² 0 %CH ₄	P/B	Corrected
4.			
5.			
6.	1-3 Entry's	Soft Ribs	put Rib Bolts in
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content	Location	Time	Methane Content
1.	1-3	4:00-4:20	0 %CH ₄			
2.	1-3	6:00-6:17	0 %CH ₄			
3.	1-3	8:00-8:22	0 %CH ₄			
4.	1-3	10:00-10:20	0 %CH ₄			
5.						
6.	20.8 ⁰²					
7.	0 %CH ₄					
8.	0 %C ^o					
9.						
10.						

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content	Location	Time	Methane Content
1.	Return	3:58pm	0 %CH ₄			
2.						
3.	Return	7:57pm	0 %CH ₄			
4.						
5.						

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, #27 3:50pm RCP

Section Safe + Clean at time of Exam
Rich Hutchens 37569 Assistant Mine Foreman
T. M. ... 33557 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 02-3-10 Section or Area Examined HG 22
 Time of Examination: from 10:15 a.m. or 10:15 p.m. to 10:45 a.m. or 10:45 p.m.
 Was this report phoned to outside: Yes no
 By whom [Signature] Time 11:00 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>x1</u> <u>CH4</u> <u>.05</u>	<u>NEEDS cap</u>	<u>Reported</u>
2. <u>2x2</u> <u>.05</u>	<u>SCRAP</u>	<u>Reported</u>
3. <u>3</u> <u>.05</u>	<u>NEEDS cleaned</u>	<u>Reported</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. <u>1-3 Entry's</u>	<u>Soft Ribs</u>	<u>Reported</u>
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOS</u>	<u>17240</u>	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: TRAILWAYS & HAULWAYS clear at time of exam
Power Center & charger - OK
Air chamber - OK
intake phone - OK CO - 02 O₂ - 20.8%

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

Signed By Rick Hutchins 37569 Preshift-Mine Examiner
 Countersigned [Signature] 33359 Mine Manager - Mine Foreman
[Signature] Assistant Foreman
[Signature] 33238 Certificate No.
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-3 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1</u>	<u>needs C/P</u>	<u>Reported</u>
2.			
3.	<u>2XC</u>	<u>Scrap</u>	
4.			
5.	<u>3</u>	<u>needs cleaned</u>	<u>Reported</u>
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3</u>	<u>104</u>	<u>0.6CH₄</u>	11.			
2.				12.			
3.	<u>1-3</u>	<u>504</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>140</u>	<u>0.2CH₄</u>	6.			
2.	<u>Return</u>	<u>538</u>	<u>0.6CH₄</u>	7.			
3.				8.			
4.				9.			
5.				10.			

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

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

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

Rylanderson
Assistant Mine

33238
Certificate No.

T. M. ...
Mine Foreman-Mine Manager

33381
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-4-10 Section or Area Examined Headgate #22
Time of Examination: from 5:04 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Kyle Anderson Time 5:40 A.M. P.M.
Report received by Bruce Perry (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains entries for #1 Entry, #2 Entry, #2R CC, and #3 Entry.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains entry for LOB OCHyl with CFM 17,380.

Remarks: Power Center, Travelways, Chargers, Air by Shelter, Intake Phone, OCHyl, 20.802 OPPM c/o. All ok at time of report.

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 Certificate No. Assistant Foreman Bruce Perry 1122-A Certificate No.
Countersigned T. Moore 33359 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 2-4-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 Entry .10CH ₄ ! 20.802	Needs Cleaned + Dusted	Cleaned + Dusted
2.	#2 Entry .20CH ₄ ! 20.802	Needs Cleaned	Cleaned + Dusted
3.	#2R CC .20CH ₄ ! 20.802	Not Bolted	Bolted + Reflectors
4.			
5.	#3 Entry .10CH ₄ ! 20.802	Needs Cleaned + Dusted	Cleaned + Dusted
6.			
7.			
8.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	7:13am	.05CH ₄ ! 20.802	6.			
2.				7.			
3.	Return	11:15am	.05CH ₄ ! 20.802	8.			
4.				9.			
5.				10.			

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

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

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

Rgot + Rio Talk

Pg. 4 sect 13 at 6:45am

Frank King
Assistant Mine

11227
Certificate No.

T. M. ...
Mine Foreman - Mine Manager

33354
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-4-2010 Section or Area Examined H6-22
Time of Examination: from 1:00 a.m. or p.m. to 2:00 a.m. or p.m.
Was this report phoned to outside: Yes [checked] no
By whom Brandon Bowling Time A.M. 2:35 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains 4 rows of handwritten entries regarding CH4 levels and actions like 'N/Add / Cleaning', 'Scrap', and 'P/B'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entries for 'LOB' with CFM 17,682 and gas measurements for 20.8% CH4 and 0% CO.

Remarks: Powercenter, R-ways, Chargers, Haulage Clear of Tare of EXAN.

Intake phone OK
Air Chambers OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By [Signature] Preshift-Mine Examiner Certificate No. 1122-A Rick Hutchens Assistant Foreman Certificate No. 37569
Countersigned [Signature] Mine Manager - Mine Foreman Assistant Foreman
Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-4 2010 Section or Area Examined HG 22

Time of Examination: from 12:15 a.m. or p.m. to 1:50 a.m. or p.m.

Was this report phoned to outside: Yes no

By whom Rick Hutchens Time 11:4 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. #1	None Observed	Reported
2.		
3. #2	none observed	
4. 2R	none observed	
5. #3	Scrap Cut	Reflectors hung
6.		
7. ^{Entries}		
8. 1-3 Soft Ribs	Soft Ribs	Reported
9.		
10.		

Air Measurements	
Location	CFM
YOB	16110

Remarks: city power center recharges intake phone and fresh 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 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 Kyle Anderson 33278
Mine Manager—Mine Foreman Assistant Foreman 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 2-4 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	# 1	N/O	
2.			
3.	2 and 2R	N/O	
4.			
5.	3	Scrap Cut	Reflected
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3 110	134	0.6 CH ₄	11.			
2.				12.			
3.	1-3 503	531	0.6 CH ₄	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	140	0.6 CH ₄	6.			
2.				7.			
3.	Return	535	0.10	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

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33358
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-5 2010 Section or Area Examined Headgate #22
Time of Examination: from 5:03 a.m. or p.m. to 5:31 a.m. or p.m.
Was this report phoned to outside: Yes X 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

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for #1 Entry, #2-2R, and #3 Entry.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for LOB with CFM 17,256.

Remarks: Power Center, Chargers, Travelways, Outby Shelter, Intake Phone, OCHyl, 20.802 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 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 Certificate No. [Signature] 1122-A Assistant Foreman
Countersigned [Signature] 33359 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 2-5-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#3 Entry, 10CH ¹ 20.802	Scrap Cut	Bolted & Reflectors
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	7:12AM	.05CH ¹ 20.802	6.			
2.				7.			
3.	Return	11:15AM	.05CH ¹ 20.802	8.			
4.				9.			
5.				10.			

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

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

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

Pg. 5 sect 17 RLP MEAV
Pg. 1 M.M.U. 29 Scrubber System - Curtin distance Minimum CFM

Burch Pugh
Assistant Mine

1122-A
Certificate No.

T. M. ...
Mine Foreman-Mine Manager

3357
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-5 2010 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 Brandon Bowling Time 2:39 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>20.8^{o2} .10% CH₄</u>	<u>N/O</u>	<u>Reported</u>
2. <u>↓ .10%</u>	<u>Need CLEAN</u>	<u>Reported</u>
3. <u>2L ↓ .10%</u>	<u>Scrap Cut</u>	<u>Tagged & Reported</u>
4. <u>3 ↓ .0% CH₄</u>	<u>N/O</u>	<u>Reported</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>17,120</u>		
<u>20.8^{o2}</u>			
<u>0% CH₄</u>			
<u>0% CO</u>			

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

Intake phone OK
Air Chambers OK

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

Signed By Brandon Bowling Preshift-Mine Examiner
Countersigned T. Mans Mine Manager - Mine Foreman
Rick Hutchens Assistant Foreman
Certificate No. 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 2-5-10 Shift Eve Area or Section H/G-22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for locations 1, 2, and 3 with violations like '0% CH4' and 'Need Clean'.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for locations 1-4 with times and '0% CH4' readings.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for 'Return' locations with times and '0% CH4' readings.

Number of Bolts Tested 10 Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 #2+3 3:55 pm RCP Section Safe + Clean at time of Exam

Signatures: Rich Hutchins (Assistant Mine), 37569 (Certificate No.), T. Blum (Mine Foreman-Mine Manager), 33359 (Certificate No.), Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-5 2010 Section or Area Examined HG 22
Time of Examination: from 10:15 a.m. or p.m. to 10:45 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Rick Hutchins Time A.M. 11:13 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. Contains handwritten entries for #1, #2, and #3.

Air Measurements

Table with 3 columns: Location, CFM, Location, CFM. Contains handwritten entry for 'Job' with CFM 17.230.

Remarks: 1.03 CH4 power center & changing intake phone, fresh air base 20.8 Clean 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 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 Freshshift-Mine Examiner Certificate No.
Countersigned T. Moore 33357 Mine Manager-Mine Foreman Assistant Foreman
Kyle Anderson 33238 Assistant Foreman Certificate No.
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-5 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1	reds cleaned & dusted	Reported
2. 2	N/O	
3. #2 L	Scrap Cut	Reflectors
4.		
5. #3	N/O	
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3 151	212	2.6% CH ₄	11.		
2.			12.		
3. 1-3 430	530	2.6% CH ₄	13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	218	2.6% CH ₄	6.		
2. Return	534	2.6% CH ₄	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) _____

Kyle Tidman
Assistant Mine

33230
Certificate No.

Troy Adams
Mine Foreman - Mine Manager

33309
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-6 2060 Section or Area Examined H622
Time of Examination: from 4:30 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom K. Anderson Time 5:37 P.M.
Report received by [Signature] 1334
(Signed)

	Location	Violations and other Hazardous Conditions Observed and Reported	Action Taken
1.	#1	CH ₄ .10 Needs Cleaned & Dusted	Reported
2.	#2 Left	.10 not Bolted	hung Reflectors
3.	2-	.10 none observed	none
4.	3	.10 none observed	none
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements			
Location	CFM	Location	CFM
LOB	16,744		

Remarks: CH₄ .10% CO₂ .0% 20.8% O₂ detected at time of Exam
Power centers, chargers, Refuges all 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 Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned Troy Munn Mine Manager—Mine Foreman Certificate No. 3739
Branch Bony Assistant Foreman Certificate No. 1122-A
Assistant Foreman
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-6-10 Shift Day Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .05 CH ₄ ! 20.802	Needs Cleaned + Bolted	Cleaned + Bolted
2. _____	_____	_____
3. #2L CC .10 CH ₄ ! 20.802	Not Bolted	Bolted + Reflectors
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	7-730AM	.10 CH ₄ ! 20.802	11. _____	_____	_____
2. _____	_____	_____	12. _____	_____	_____
3. 1-3	9-930	.10 CH ₄ ! 20.802	13. _____	_____	_____
4. _____	_____	_____	14. _____	_____	_____
5. 1-3	11-1130	.05 CH ₄ ! 20.802	15. _____	_____	_____
6. _____	_____	_____	16. _____	_____	_____
7. 1-3	1-200PM	.10 CH ₄ ! 20.802	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	7:15AM	0 CH ₄ !	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. Return	11:12AM	.05 CH ₄ !	8. _____	_____	_____
4. _____	_____	_____	9. _____	_____	_____
5. _____	_____	_____	10. _____	_____	_____

Number of Bolts Tested 7
Number of Bolts Torqued Above Range _____ Below Range _____

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 4 Sect 2 RCP
Pg. 2 Sect 1 MMU plan both at 646AM.

Bush Boy
Assistant Mine

Certificate No. _____
Tony Moore
Mine Foreman/Mine Manager

Certificate No. 33359
Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-6 2010 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 Time AM 2:30 P.M.

By whom Brandon Bowling Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>20.8⁰²</u> <u>10% CH₄</u>	<u>N/C</u>	<u>Reported</u>
2. <u>↓</u> <u>12% CH₄</u>	<u>P/B</u>	<u>Tagged & Reported</u>
3. <u>↓</u> <u>10.5% CH₄</u>	<u>Scrap</u>	<u>Tagged + Reported</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
<u>LOB</u>	<u>17,222</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 Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By Brandon Bowling Preshift-Mine Examiner Certificate No. 1122-A

Countersigned Rick Hutchens Mine Manager - Mine Foreman Certificate No. 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 2-6-10 Shift EVE Area or Section HG-22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	20.8oz 0%CH4	needs CLEAN	Corrected
2.	20.8oz 0%CH4	P/B	Corrected
3.	20.8oz 0%CH4	Scrap Cut	Corrected
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1-3	4:00-4:18	0%CH4			
1-3	6:00-6:20	0%			
1-3	8:00-8:45	0%			
1-3	Went Home Early	0%CH4			

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
Return	3:59pm	0%CH4			
Return	7:58pm	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 Section 3 3:50pm

Section Safe & Clear at Time of Exam
Rick Hutchins 37569 T. Moore 3889
 Assistant Mine 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 2-6 2010 Section or Area Examined H6-22
Time of Examination: from 8:00 a.m. or p.m. to 9:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Brought out Time A.M. P.M.
Report received by (Signed)

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, 2, and 3.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entries for LOB and 20.802.

Remarks: power center, 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 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 Freshshift-Mine Examiner Certificate No.
Assistant Foreman 32294 Certificate No.
Countersigned T. Moore Mine Manager - Mine Foreman Certificate No. 35357
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 2-7-10

Shift 3rd

Area or Section H.C. 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1	SCRAP	Let the Torque
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

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

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

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

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

[Signature]
Assistant Mine

32284
Certificate No.

[Signature]
Mine Foreman - Mine Manager

3308
Certificate No.

Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-7-10 20 Section or Area Examined H622
 Time of Examination: from 4:00 a.m. or p.m. to 5:39 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Kenneth Farmer Time 5:39 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>CH₂ / OS</u>	<u>scrap cut 20.8</u>	<u>reflected 000</u>
2. <u>OS</u>	<u>new 06) 20.8</u>	<u>ref</u>
3. <u>OS</u>	<u>new 06) 20.8</u>	<u>ref</u>
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location

CFM

Location

CFM

C03

16,200

Remarks: OS CH₂ 20.802 scattered toolleys ?
toolleys ok at time of Exam P.C. and
Ch₂ ok.

Sketch
Intake plane OK

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

Signed By [Signature] Preshift-Mine Examiner Certificate No. 3284
 Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 33359
[Signature] Assistant Foreman Certificate No. 36026
 Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-7-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for locations 1, 2, and 3.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for locations 1-3 at various times.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content. Contains handwritten entries for return aircourses.

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 Area # 4 OK Report 5 at 6:45 AM dust control plan OK

Assistant Mine 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 2-7 20 10 Section or Area Examined Headgate # 22
Time of Examination: from 1200 a.m. or (p.m.) to 200 a.m. or (p.m.)
Was this report phoned to outside: Yes X no
By whom Deano Jones Time A.M P.M.
Report received by (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains 10 entries such as '#1 Entry .05CH4', '#2 CCut 0CH4', '#2 Entry .10CH4', '#2 RCC .10CH4', '#3 Entry .10CH4', and 'OPPM c/o'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains one entry: 'LOB 0CH4 20.80z OPPM c/o' with CFM value '13,165'.

Remarks: Power Center
Travelways
Chargers
Intake Phone
Outby Shelter
0CH4, 20.80z 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 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. 36025
Countersigned [Signature] Mine Manager - Mine Foreman Certificate No. 33357
Assistant Foreman [Signature] Certificate No. 11227A
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-7-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#2 L CC 0CHK! 20.802	Needs Cleaned	Cleaned
2.			
3.	#2 Entry .15CHK! 20.802	Needs Cleaned + Dusted	Cleaned + Dusted
4.			
5.	#2R CC .10CHK! 20.802	Part Bolted	Bolted + Reflected
6.			
7.	#3 Entry .10CHK! 20.802	Scrap Cut	Bolted + Reflected
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4-430am	.10CHK! 20.802	11.			
2.				12.			
3.	1-3	6-630am	.10CHK! 20.802	13.			
4.				14.			
5.	1-3	8-830am	.05CHK! 20.802	15.			
6.				16.			
7.	1-3	10-11pm	.10CHK! 20.802	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	4:15pm	.05CHK! 20.802	6.			
2.				7.			
3.	Return	8:12pm	0CHK! 20.802	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 sect 4 RCP
Pg. 2 MMU section 3 346pm
Barb Doug 1122-A
 Assistant Mine _____ Certificate No. _____
 Mine Foreman-Mine Manager T. Mon... Certificate No. 33359 Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-7-2010 Section or Area Examined H6 22
Time of Examination: from 10:00 a.m. or p.m. to 11:00 a.m. or p.m.
Was this report phoned to outside? Yes no
By whom Brandon Time 11:18 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
#1 10	None Observed	
#2 15	Scrap Cut	Reflector hung
2R 10	Part Bolted	Reflector hung
#3 10	None Observed	
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Job	15550		

Remarks: 15 cfm power center a change in intake phone, fresh air base 208 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 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 By Preshift-Mine Examiner Certificate No. 1122-A
Countersigned T. P. Mine Manager - Mine Foreman Certificate No. 33359
Assistant Foreman Kyle Anderson Assistant Foreman Certificate No. 33233
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-7 Shift 3rd Area or Section #6 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1	N/O	
2.		
3. #2	Scrap Ctt	Reflectors hung
4. #2R	Part bolted	Reflectors hung
5. #3	N/O	
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3 140	226	0.6 ctt 1	11.		
2.			12.		
3. 1-3 430	521	0.6 ctt 1	13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	232	0.6 ctt 4	6.		
2.			7.		
3. Return	507	0.6 ctt 1	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 33038 Certificate No. T. J. Moore Mine Foreman-Mine Manager 33359 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-8-2010 Section or Area Examined H627

Time of Examination: from 11:30 a.m. or p.m. to 2:20 a.m. or p.m.

Was this report phoned to outside: Yes no

By whom Kyle Anderson Time 5:40 A.M. P.M.

Report received by [Signature] (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>CHP</u>	<u>none obs 20.8</u>	<u>rep</u>
2. <u>10</u>	<u>part Bolted 20.8</u>	<u>recheck</u>
3. <u>2nd</u>	<u>none obs 20.8</u>	<u>rep</u>
4. <u>3</u>	<u>me obs 20.8</u>	<u>me</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>COB</u>	<u>15,210</u>		

Remarks: 10 CHP 20.8 02.000 detected tunnels
7 Hubs ok at time of Exn all ad
Chp ok.

Shelton
Interke Photo

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

Signed By Kyle Anderson Certificate No. 33238 Assistant Foreman [Signature] Certificate No. 3620

Countersigned T. M. Moore Mine Manager—Mine Foreman Certificate No. 33357

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 2-20 Shift ney Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>none</u>	<u>none</u>
2. <u>2</u>	<u>part bolted</u>	<u>Bolted</u>
3. <u>2nd</u>	<u>see obs,</u>	<u>ney</u>
4. <u>3</u>	<u>see obs</u>	<u>ney</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u>	<u>.08</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>.08</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:50</u>	<u>.08</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>11:00</u>	<u>.08</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Let.</u>	<u>8:00</u>	<u>.05</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Let.</u>	<u>12:00</u>	<u>.08</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) discussed part 5 of RUP #17 at 6:40 AM Dust control plan 1, 2,

Dee J Assistant Mine 36125 Certificate No. T. Man Mine Foreman-Mine Manager 33357 Certificate No. _____ Superintendent or Assistant

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-8 20 10 Section or Area Examined Headgate #22
Time of Examination: from 1200 a.m. or p.m. to 130 a.m. or p.m.
Was this report phoned to outside: Yes X no
By whom Deano Jones Time A.M. P.M.
Report received by Branch Boy (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Entries include #1 Entry .05 CH4, Scrap Cut, Reflectors; #2 Entry .05 CH4, None Observed, Reported; #2L CC .05 CH4, Part Bolted, Reflectors; #3 Entry .05 CH4, None Observed, Reported; DPM c/o.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Entry: LOB, 0 CH4, 20.80%, DPM c/o, 14,830.

Remarks: Power Center
Travelways
Chargers
Intake Phone
Outby Chamber
0 CH4, 20.80% DPM c/o

All OK at time of report

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By [Signature] 36028 Certificate No.
Assistant Foreman [Signature] 1122-A Certificate No.
Countersigned [Signature] 33357
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 2-8-10 Shift EVE Area or Section Headgate #22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1 Entry .10CH ₄ ? 20.802	Scrap Cut	Bolted + Reflectors
2.		
3. #2L Partss Cut .10CH ₄ ? 20.802	Part Bolted	Bolted + Reflectors
4.		
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	4-430am	.10CH ₄ ? 20.802	11.		
2.			12.		
3. 1-3	6-630am	.10CH ₄ ? 20.802	13.		
4.			14.		
5. 1-3	8-830am	.10CH ₄ ? 20.802	15.		
6.			16.		
7. 1-3	10-1056am	.10CH ₄ ? 20.802	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	4:44pm	.05CH ₄ ? 20.802	6.		
2.			7.		
3. Return	8:11pm	.05CH ₄ ? 20.802	8.		
4.			9.		
5.			10.		

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

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) Pg. 3 Sect. 16 main plan
Pg. 4 Sect. 8 RLP at 350pm.

Bush Boy Assistant Mine 11227 Certificate No. T. Mann Mine Foreman-Mine Manager 3339 Certificate No. _____ Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-8 Section or Area Examined HE 22
Time of Examination: from 1000 a.m. or p.m. to 1050 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom _____ Time 11:18 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. #1	10CH Needs cleaned	Reported
2. #2	10CH Scrap Set	Reported
3. #3	10CH None observed	
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Job	15580		

Remarks: 10 CH power center charges intake phone Fresh 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 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. 1122-A
Countersigned [Signature] Mine Manager—Mine Foreman
[Signature] Assistant Foreman
Certificate No. 33357
[Signature] Assistant Foreman
Certificate No. 33038
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-8 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	<u>1 10⁰ctH</u>	<u>roads cleaned</u>	<u>Reported</u>
2.			
3.	<u>2L 10⁰ctH</u>	<u>Scrap</u>	<u>Reflectors</u>
4.			
5.	<u>3 10⁰ctH</u>	<u>NO</u>	
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	<u>1-3 112</u>	<u>1134</u>	<u>0/0</u>	11.			
2.				12.			
3.	<u>1-3 430</u>	<u>521</u>	<u>.05</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>140</u>	<u>.05 2ctH</u>	6.			
2.				7.			
3.	<u>Return</u>	<u>923</u>	<u>0.05 2ctH</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

32238
Certificate No.

[Signature]
Mine Foreman-Mine Manager

33259
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-9-10 20 Section or Area Examined H622
Time of Examination: from 4:30 a.m. or p.m. to 5:22 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:32 A.M. P.M.
Report received by (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 4 columns: Location, Violation or Hazardous Condition, Action Taken, and a numerical column. Contains 4 rows of handwritten entries regarding safety violations like 'needs deul', 'not bolted', and 'new ocs'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains one handwritten entry for location 'C013' with a CFM value of 15,408.

Remarks: 0 - 08 CHY 20.802 000 detected
unders & Hules ck at time of Exm
P.C. and Chy ck
shelter
Intake phm

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson Preshift-Mine Examiner Certificate No. 33238
Countersigned T. Moore Mine Manager-Mine Foreman Certificate No. 33309
Assistant Foreman Certificate No. 36022
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-9-10 Shift day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>needs chp</u>	<u>chp</u>
2. <u>2</u>	<u>no + B hel</u>	<u>Bo Hel</u>
3. <u>3</u>	<u>no 26</u>	<u>mp</u>
4. <u>3</u>	<u>no 093</u>	<u>mp</u>
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u> <u>7:10</u>	<u>.08</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u> <u>9:00</u>	<u>.08</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:50</u>	<u>.08</u>	15. _____	_____	_____
6. _____	<u>11:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>11:00</u>	<u>.08</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>red</u>	<u>8:00</u>	<u>.08</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>hel</u>	<u>12:00</u>	<u>.08</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) discussed with J or red # 10 at 6:45 AM Dist control plan Y.S.

Assistant Mine [Signature] Certificate No. 36325 Mine Foreman-Mine Manager [Signature] Certificate No. 33359 Superintendent or Assistant _____

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Use Indelible Pencil or Ink

Date of Examination 2-9-20 Section or Area Examined Headgate #22
Time of Examination: from 12:00 a.m. or 2:00 p.m. to 2:00 a.m. or 4:00 p.m.
Was this report phoned to outside: Yes [X] no
By whom Deane Jones Time A.M. 2:35 P.M.
Report received by Bush (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 Entry .05 CH ₄ l 20.80 ₂	None Observed	Reported
2. #2 Entry .10 CH ₄ l 20.80 ₂	Scrap Cut	Reflector
3. #3 Entry .10 CH ₄ l 20.80 ₂	Part Bolted	Reflectors
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
LOB	13,986		
0CH ₄ l, 20.80 ₂			
0PPM c/o			

Remarks: Power Centers
Travelways
Chargers
Outby Shelter
Intake Phone
0CH₄l, 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 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] 36525 Bush [Signature] 1122-A
Preshift Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned [Signature] 33359
Mine Manager—Mine Foreman
Assistant Foreman
Superintendent or Assistant

Date 2-9-10 Shift EVE Area or Section Headgate # 22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	# 2 Entry .10CH ₄ 20.802	Scrap Cut	Bolted + Reflectors
2.			
3.	# 3 Entry .10CH ₄ 20.802	Part Bolted	Bolted + Reflectors
4.			
5.	# 2 Entry	2 Bolts cut out	Spotted 2 Bolts
6.	# 2 Entry Int.	3 Rib bolts damaged	Spotted 3 Rib Bolts
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3	4-430pm	.10CH ₄ 20.802	11.			
2.				12.			
3.	1-3	6-630pm	.10CH ₄ 20.802	13.			
4.				14.			
5.	1-3	8-830pm	.10CH ₄ 20.802	15.			
6.				16.			
7.	1-3	10-11Am	.10CH ₄ 20.802	17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	410pm	.05CH ₄ 20.802	6.			
2.				7.			
3.	Return	815pm	.05CH ₄ 20.802	8.			
4.				9.			
5.				10.			

Number of Bolts Tested 1
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 14 MME Plan
Pg. 4 sect 10 RUP at 347 pm.

Assistant Mine

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 2-9-10 Section or Area Examined HC 22
Time of Examination: from 10:05 a.m. or p.m. to 1:00 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom B. Anderson Time A.M. 11:10 P.M.
Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1 110 CH4	Scrap Cut	Reflected hung
2. #2 110 CH4	Part Bolted	Reflected hung
3. #3 115 CH4	None Observed	
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Job	15,382		

Remarks: 115 CH4 power center, chargers intake phone Fresh air base
20.8 Clear at time of exam
Soft-Flaking ribs #1-3

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

Signed By B. Anderson Preshift-Mine Examiner
Countersigned T. Moore Mine Manager - Mine Foreman
Assistant Foreman
Certificate No. 1122-A
33359
Assistant Foreman Kyle Anderson
Certificate No. 33238
Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-9 Shift 3rd Area or Section HG22

Violations and other Hazardous Conditions Observed and Reported

	Location	Violation or Hazardous Condition	Action taken
1.	#1 10ctty	Scrap	Reflector
2.	#2 10ctty	Part bolted	Reflector
4.	#3 15ctty	N/O	
6.			
7.			
8.			

Examinations for Methane in Working Places

	Location	Time	Methane Content		Location	Time	Methane Content
1.	1-3 130	JOG	.05 2ctty	11.			
2.				12.			
3.	1-3 500	S3S	.10 7ctty	13.			
4.				14.			
5.				15.			
6.				16.			
7.				17.			
8.				18.			
9.				19.			
10.				20.			

Examinations for Methane in Return Aircourses

	Location	Time	Methane Content		Location	Time	Methane Content
1.	Return	214	.10 2ctty	6.			
2.				7.			
3.	Return	241	.10 2ctty	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

33238
Certificate No.

Troy Mann
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-10-10 20. Section or Area Examined H622
 Time of Examination: from 8:00 a.m. or p.m. to 8:35 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Erik Anderson Time 8:40 A.M. P.M.
 Report received by Dean (Signed)

Violations and other Hazardous Conditions Observed and Reported			Action Taken
Location	Violation or Hazardous Condition		
1. <u>1</u>	<u>CHY 0.8</u>	<u>nae 0.6 20.8</u>	<u>rep 0.0</u>
2. <u>2</u>	<u>.10</u>	<u>not Bolted 20.8</u>	<u>Rebatta 0</u>
3. <u>3</u>	<u>.10</u>	<u>nae 0.6 20.8</u>	<u>none 0</u>
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements			
Location	CFM	Location	CFM
<u>603</u>	<u>15,280</u>		

Remarks: 0-10 CHY 20.8 0.00 detected
Trucks? Trucks ok at time of
Exam p.c. and Chassis ok

Shelter
intake pipe

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

Signed By Erik Anderson Certificate No. 39238
 Preshift-Mine Examiner Assistant Foreman
 Countersigned Tim Moore Certificate No. 3600
 Mine Manager—Mine Foreman Superintendent or Assistant

Use Indefilble Pencil or Ink

DAILY AND ONSHIFT REPORT
MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-12-0 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>none obs.</u>	<u>none</u>
2. <u>2</u>	<u>not bolted</u>	<u>Bolted</u>
3. <u>3</u>	<u>none obs.</u>	<u>none</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

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

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Ret</u>	<u>8:00</u>	<u>.10</u>	6. _____	_____	_____
2. _____	_____	_____	7. _____	_____	_____
3. <u>Ret.</u>	<u>12:00</u>	<u>.10</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) discussed per # 5 of Rep
29 At 6:36 AM next centrd plan 6, 7

Deo Assistant Mine 3620 Certificate No. Tung Mine Foreman-Mine Manager 33305 Certificate No. _____ Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-10-10 Section or Area Examined H6-22
Time of Examination: from 12:00 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 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.	1RT 20.8 ^{o2} 20% CH4	N/O	Reported
2.	2RT 20% CH4	P/B	Tagged & Reported
3.	2 20% CH4	N/O	Reported
4.	3 V 20% CH4	N/C/D	Reported
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	12,172		
20.8 ^{o2}			
20% CH4			
0% CH4			

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

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report
Signed By [Signature] 30025 Richard Hutchens 37569
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
Countersigned [Signature] 33359
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 2-10-10 Shift EVC Area or Section H6-22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains handwritten entries for 1, 2, and 3 violations.

Examinations for Methane in Working Places

Table with 5 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for 1-4 and 6-7.

Examinations for Methane in Return Aircourses

Table with 5 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains handwritten entries for 1-3.

Number of Bolts Tested 10 Number of Bolts Torqued Above Range 30 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 of 15 3:55 pm RCP Section Safe + Clear at Time of Exam

Richard Hutchins 37569 Assistant Mine Certificate No. Tony Mann Mine Foreman-Mine Manager Certificate No. 33351 Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-10 20. Section or Area Examined HG 22
 Time of Examination: from 12:13 a.m. or p.m. to 1:50 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Brandon Time 11:15 A.M. P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1R	Scrap Cut	Reflecting key
2.		
3. #2	None Observed	Reported
4. 2R	None observed	~
5. #3	None observed	~
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
Job	15,310		

Remarks: 0.20 H₂ power center & chargers intake phone fresh air base
20.8 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 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 Preshift-Mine Examiner Certificate No.
 Countersigned Tony [Signature] 33339 Mine Manager—Mine Foreman
Kyle Anderson Assistant Foreman Certificate No. 33238
 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 2-10 Shift 3rd Area or Section HG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1R	Scrap	Reflectors
2.		
3. #2	N/O	
4. 2R	N/O	
5. #3	N/O	
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	180	126	6. Oct 4		
2.			7.		
3. 1-3	430	330	8. Oct 4		
4.			9.		
5.			10.		
6.			11.		
7.			12.		
8.			13.		
9.			14.		
10.			15.		
			16.		
			17.		
			18.		
			19.		
			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	134	Oct 4	6.		
2.			7.		
3. Return	535	Oct 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 Johnson
Assistant Mine

33238
Certificate No.

T. Moore
Mine Foreman-Mine Manager

33357
Certificate No.

Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-11-10 20 Section or Area Examined H622
Time of Examination: from 7:30 a.m. or p.m. to 5:30 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Kyle Anderson Time 5:35 A.M. P.M.
Report received by Deer (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>Uty 10</u>	<u>nae obs 20.8</u>	<u>nae 60</u>
2. <u>INT</u>	<u>not 50/feet 20.8</u>	<u>Reflector 0</u>
3. <u>2, ent</u>	<u>nae obs 20.8</u>	<u>nae 0</u>
4. <u>3</u>	<u>nae obs 20.8</u>	<u>nae 0</u>
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>10,180</u>		

Remarks: 0 cty 20.802 .000 detected Trukeys i Hules
OK at time of Exam p. card then OK

Stelker
Intake phase OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 Preshift-Mine Examiner Certificate No.
Countersigned Deer Assistant Foreman Certificate No. 3628
T. Moore Mine Manager—Mine Foreman Certificate No. 3335
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 2-11-10 Shift Day Area or Section H822

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>new 66)</u>	<u>nae</u>
2. <u>1st</u>	<u>not bolted</u>	<u>Bolted</u>
3. <u>2nd</u>	<u>new 66)</u>	<u>ml</u>
4. <u>3</u>	<u>new 66)</u>	<u>ml</u>
5.		
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:40</u>	<u>.08</u>	11.		
2.	<u>9:00</u>		12.		
3. <u>1-3</u>	<u>9:00</u>	<u>.08</u>	13.		
4.	<u>11:00</u>		14.		
5. <u>1-3</u>	<u>11:00</u>	<u>.08</u>	15.		
6.	<u>1:00</u>		16.		
7. <u>1-3</u>	<u>1:00</u>	<u>.08</u>	17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>Ret</u>	<u>8:00</u>	<u>.10</u>	6.		
2.			7.		
3. <u>Ret.</u>	<u>12:00</u>	<u>.10</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) discussed met # 3 of

Rep # (P) at 6:40 Am, Dust control plan 8.9.

[Signature] Assistant Mine Foreman
36528 Certificate No.
T. M... Mine Foreman-Mine Manager
33359 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 2-11 20 10 Section or Area Examined HG-22
Time of Examination: from 12:00 a.m. or p.m. to 2:19 a.m. or p.m.
Was this report phoned to outside: Yes no
By whom Dean Jones Time A.M 2:40 P.M.
Report received by Rick Hutchens (Signed)

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action Taken. Contains handwritten entries for locations 3, 2R, 2, 1R, 1 with various measurements and actions like 'N/B', 'N/C/D', 'P/B', 'N/O', 'Tagged + Reported', 'Reported'.

Air Measurements

Table with 4 columns: Location, CFM, Location, CFM. Contains handwritten entry for LOB with CFM 12,152 and measurements 20.8% O2, 0% CH4, 0% CO.

Remarks: powercenter, R-ways, Chargers, Haulage Clear at Time of Exam
Intake phone NOT WORKING
Shelter OK

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

Signed By [Signature] Preshift-Mine Examiner Certificate No. 36528
Rick Hutchens Assistant Foreman Certificate No. 37569
Countersigned [Signature] Mine Manager-Mine Foreman Certificate No. 33559

Superintendent or Assistant

Use Indelible Pencil or Ink

DAILY AND ONSHIFT REPORT MINE FOREMAN OR ASSISTANT

Report shall be signed when made

Date 2-11-10 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. Contains 4 rows of handwritten data.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains 10 rows of handwritten data.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains 5 rows of handwritten data.

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 9x10 3:50pm RCP

Section Safe & Clear at Time of Exam Rick Hutchins 37569 Assistant Mine Certificate No. T. Moore Mine Foreman-Mine Manager 33359 Certificate No. Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-11 Section or Area Examined HG 22
 Time of Examination: from 10:15 a.m. or p.m. to 10:50 a.m. or p.m.
 Was this report phoned to outside: Yes X no
 By whom Rick Hutchins Time 11:10 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.	#1 .01 CHY	Scrap Cut	Reflectors hung
2.			
3.	#2 .05 CHY	None Observed	
4.			
5.	#3 0.26 CHY	Part bolted	Reflectors hung
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
Tab	14,960		

Remarks: .01 CHY power center, charges ~~in~~ fresh air by se
 20.8 intake phone doesn't work all else is clean

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

Signed By Rick Hutchins 37569 Certificate No.
 Preshift-Mine Examiner
 Countersigned Kyle Anderson 33359 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 2-11 Shift 3rd Area or Section AG 22

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. #1	scrap	Reflected
2.		
3. #2	N/O	
4.		
5. #3	Part bolted	Reflected
6.		
7.		
8.		

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. 1-3	130	204	11.		
2.			12.		
3. 1-3	430	520	13.		
4.			14.		
5.			15.		
6.			16.		
7.			17.		
8.			18.		
9.			19.		
10.			20.		

Examinations for Methane in Return Aircourses

Location	Time	Methane Content	Location	Time	Methane Content
1. Return	210	0.6 H ₂	6.		
2.			7.		
3. Return	523	0.6 H ₂	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
 Assistant Mine 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 2-12-60 20. Section or Area Examined H622
Time of Examination: from 4:30 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 5:34 A.M. P.M.
Report received by Dean J (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>1</u>	<u>not bolted 20.82</u>	<u>reflected</u>
2. <u>2</u>	<u>nae 065 20.8</u>	<u>ref</u>
3. <u>3</u>	<u>part bolted 20.8</u>	<u>reflected</u>
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Air Measurements

Location	CFM	Location	CFM
<u>C03</u>	<u>14,886</u>		

Remarks: o.c.h. 20.802 O2 .000 detected tunnels
7 Hules OK at time of Etn. p.c. and
charges OK

Stelth
Intake pure 7 OK

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.
Signed By Kyle Anderson 33238 Preshift-Mine Examiner Certificate No.
Countersigned T. Moore 33337 Mine Manager—Mine Foreman 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 2-12-10 Shift Day Area or Section H622

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action taken
1. <u>1</u>	<u>not Bolter</u>	<u>Bolter</u>
2. <u>2</u>	<u>new o/s</u>	<u>new</u>
3. <u>3</u>	<u>part Bolter</u>	<u>Bolter</u>
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Examinations for Methane in Working Places

Location	Time	Methane Content	Location	Time	Methane Content
1. <u>1-3</u>	<u>7:00</u> <u>7:50</u>	<u>05</u>	11. _____	_____	_____
2. _____	<u>9:00</u>	_____	12. _____	_____	_____
3. <u>1-3</u>	<u>9:00</u>	<u>05</u>	13. _____	_____	_____
4. _____	<u>11:00</u>	_____	14. _____	_____	_____
5. <u>1-3</u>	<u>11:50</u>	<u>06</u>	15. _____	_____	_____
6. _____	<u>1:00</u>	_____	16. _____	_____	_____
7. <u>1-3</u>	<u>1:00</u>	<u>08</u>	17. _____	_____	_____
8. _____	_____	_____	18. _____	_____	_____
9. _____	_____	_____	19. _____	_____	_____
10. _____	_____	_____	20. _____	_____	_____

Examinations for Methane in Return Aircourses

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

Number of Bolts Tested 14
Number of Bolts Torqued Above Range 0 Below Range 0

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

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

[Signature]
Assistant Mine

38520
Certificate No.

[Signature]
Mine Foreman-Mine Manager

33359
Certificate No.

Superintendent or Assistant

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 2-12 2010 Section or Area Examined HG-22
Time of Examination: from 12:00 a.m. or p.m. to 1:30 a.m. or p.m.
Was this report phoned to outside: Yes / no
By whom DEAN JONES Time 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.	20.8 ⁰² .10 %CH ₄	P/B	Reported
2.	20.8 ⁰² .20 %CH ₄	Scrap Cut	Tagged & Reported
3.	20.8 ⁰² .20 %CH ₄	N/C/D	Reported
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Air Measurements

Location	CFM	Location	CFM
LOB	12,106		
20.8			
.10% CO			

Remarks: powercenter, R-ways, Chargers, 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 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 T. Jones Mine Manager - Mine Foreman Certificate No. 33357
Richard Hutchens Assistant Foreman Certificate No. 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 2-12-10 Shift EVE Area or Section H6-22

Violations and other Hazardous Conditions Observed and Reported

Table with 3 columns: Location, Violation or Hazardous Condition, Action taken. Contains 3 entries for CH4 violations at location 20.802, corrected with P/B, Scrap Cut, and N/C/D.

Examinations for Methane in Working Places

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains 4 entries for CH4 examinations at location 1-3, all showing 0% CH4.

Examinations for Methane in Return Aircourses

Table with 6 columns: Location, Time, Methane Content, Location, Time, Methane Content. Contains 2 entries for CH4 examinations in return aircourses, both showing 0% CH4.

Number of Bolts Tested 10 Number of Bolts Torqued Above Range 0 Below Range 0

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

Remarks (Statement as to General Conditions of Mine or Area of Mine) page 4 of 8 3:50pm

Section Safe & Clean at Time of Exam Rick Hutchins 37569 Assistant Mine Certificate No. T. Moore Mine Foreman-Mine Manager 3337 Certificate No. Superintendent or Assistant

Use Indelible
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be
signed when made

Date of Examination 2-12 2010 Section or Area Examined HG 22
 Time of Examination: from 10:35 a.m. or p.m. to 1:55 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom Rick Hutchens Time AM 1115 P.M.
 Report received by Kyle Anderson (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. #1R .02	Scrap Cart	Reflector hung
2. _____	_____	_____
3. #2 .02	None Observed	_____
4. 2R .02	none observed	_____
5. #3 .01	None Observed	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Air Measurements

Location	CFM	Location	CFM
Lab	14550		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: .02 off power center charges fresh air base
 20.8 clear at time of exam
 intake phone does not work

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

Signed By Rick Hutchens 37569 Certificate No.
 Countersigned T. Moore 33359 Certificate No. 33038
 Assistant Foreman
 Superintendent or Assistant