



**MEMORANDUM FOR PATRICIA W. SILVEY**  
Deputy Assistant Secretary for Operations  
Mine Safety and Health Administration

**THROUGH:** TIMOTHY R. WATKINS [REDACTED]  
Deputy Administrator for  
Coal Mine Safety and Health

**FROM:** THOMAS W. CHARBONEAU [REDACTED]  
Director, Office of Assessments

**SUBJECT:** Mine Safety and Health Administration (MSHA)  
Office of Accountability Review, Coal District 12, Logan,  
West Virginia Field Office and [REDACTED]  
[REDACTED]

Introduction

This memorandum summarizes the Office of Accountability's review of the subject District Office, Field Office, and mine. This review included MSHA field activities; level of enforcement; conditions and practices at the mine; and MSHA supervisory and managerial oversight. The accountability review also included evaluations to determine if there were any issues in areas commonly identified during Agency internal reviews of MSHA's actions following past mine disasters.

Purpose

The purpose of this accountability review is to determine whether MSHA enforcement policies, procedures and guidance are being followed consistently; and to assess whether mission critical enforcement activities are accomplished effectively. The accountability review also identifies areas for improvement and the subsequent implementation of effective corrective actions to address any identified issues.

## Overview

Office of Accountability (OA) Specialists Jerry Kissell and Mark Odum (Review Team) conducted a review of Coal's District 12 and the Logan, West Virginia Field Office in accordance with the annual accountability review plan schedule. The Review Team conducted the on-site portion of the review from [REDACTED]. The review focused on inspection and supervisory oversight activities conducted in FY 2017. The review concentrated on the Regular Safety and Health Inspection (E01), Event No. [REDACTED] of [REDACTED] conducted during the third quarter of FY 2017. The OA selected the mine for review because it is a large mine and utilizes retreat second mining as part of the mining process.

## Mine Visit

The Review Team accompanied the District Manager, Assistant District Manager for Enforcement, the Field Office Supervisor, and an inspector to the mine on [REDACTED] as part of a Regular Safety and Health Inspection (E01). During the visit, the Review Team evaluated general conditions and observed work practices at the mine. The team also assessed whether conditions corresponded with enforcement levels documented in the inspection reports reviewed.

The mine is located in [REDACTED] and employs approximately [REDACTED] miners working two, ten-hour production shifts and a maintenance night shift, five days per week. The mine consists of four mining sections with seven Mechanized Mining Units (MMUs) producing an average of [REDACTED] of raw coal annually. Coal is transported by conveyor belts to the surface and then by an overland belt to the off-site preparation plant.

The mine visit included inspections and observations of the following:

- mine examination records;
- escapeway map;
- communication and tracking system;
- check-in/check-out system;
- pre and post inspection discussions with the mine personnel;
- #3 section, MMU 006, and retreat mining;
- section air readings and checks of the section for imminent dangers;
- section power center;
- section SCSRs;
- section refuge alternative;
- 4A conveyor belt drive/take-up area;
- A Seals, numbers 1 through 7;
- primary escapeway from the section;
- lifelines and signage; and
- general conditions in all areas traveled – roof and rib conditions, ventilation, clean-up, and rock dusting.

During the mine visit, the inspector issued eight (8) enforcement actions. (See Attachment B)

### Review Results

The review revealed positive findings in the following areas:

- For the inspection event reviewed, inspectors documented safety talks with miners on all shifts.
- For the inspection event reviewed, inspectors used pre-printed notes sheets to assist in documenting information.
- This accountability review did not identify any issues that required a corrective action plan.

The Review Team identified and discussed inspection and procedural best practices as described in the Coal Mine Safety and Health General Inspection Procedures Handbook (GIPH) with District personnel. A general outline of discussion topics is included in Attachment C.

As a part of the review, enforcement levels of the mine were compared with the National and District averages. The [REDACTED] had the following statistics for the first half of FY 2017 an S&S rate of 19% which was slightly lower than the National average of 23% and the District average of 24% for the same period; an elevated negligence rate of 2.2% as compared to the National rate of 4.4% and the District rate of 2.9%; and had a violations per inspection hour rate of 0.14 compared to the National rate of 0.10 and a District rate of 0.13.

Based on the review of the E01 Event No. [REDACTED] and on observations made during the mine visit on [REDACTED] inspectors used proper enforcement levels at [REDACTED]

Attachments

A. Office of Accountability Checklist

B. Enforcement Actions Issued During the Mine Visit

- No. [REDACTED] 75.1403 (Safeguard)
- No. [REDACTED] 75.400
- No. [REDACTED] 75.202(a)
- No. [REDACTED] 75.606
- No. [REDACTED] 75.400
- No. [REDACTED] 75.1403 (Safeguard)
- No. [REDACTED] 75.400
- No. [REDACTED] 75.202(a)

C. Discussion Topics

United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability

District  Field Office  Mine ID  Date

Attachment A: Office of Accountability Checklist

1. Determine if complete and thorough E01 inspections are being conducted and/or if policy and procedures were properly followed.

Adequate  Corrective Action Needed  Comments Below

2. Determine if documentation for inspections is complete and thorough.

Adequate  Corrective Action Needed  Comments Below

3. Determine if citations and orders issued during previous inspections were properly evaluated for gravity, negligence, level of enforcement, number of persons affected, and supported by documentation.

Adequate  Corrective Action Needed  Comments Below

4. Evaluate inspector/specialist examination of required record books and postings for compliance with applicable standards.

Adequate  Corrective Action Needed  Comments Below

5. Evaluate inspector/specialist examination of the operator's maps (on-site) for accuracy, escapeway locations, etc.

Adequate  Corrective Action Needed  Comments Below

6. Evaluate, upon arrival to the active pit, inspector/specialist examination of all working areas and highwalls for imminent dangers.

Adequate  Corrective Action Needed  Comments Below

United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability

District

Coal District 12

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Mine ID

Date

7. Evaluate the inspector/specialist observation of the work cycle and conditions in the active mining area during the review.

Adequate

Corrective Action Needed

Comments Below

8. Evaluate the inspector/specialist air quantity, quality, and gas checks during the review.

Adequate

Corrective Action Needed

Comments Below

9. Evaluate inspector/specialist examination of equipment electrical cables during the review.

Adequate

Corrective Action Needed

Comments Below

10. Evaluate inspector/specialist examination for permissibility during the review.

Adequate

Corrective Action Needed

Comments Below

11. Determine if previous E01 inspections include examinations of the condition and maintenance of conveyor belts, belt entries, belt drives, fire detection and suppression systems, and separation of belt entries from other air courses.

Adequate

Corrective Action Needed

Comments Below

12. Evaluate, during the review, the inspection of at least one set of seals, including methods for obtaining samples from sealed area.

Adequate

Corrective Action Needed

Comments Below

United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability

District

Coal District 12

Field Office

Logan, WV

Mine ID

Date

13. Determine if adequate close-out conferences are being conducted at the end of each inspection.

Adequate  Corrective Action Needed  Comments Below

14. Determine if Possible Knowing/Willful (PKW) Forms are documented and processed according to agency policy and procedures.

Adequate  Corrective Action Needed  Comments Below

15. Evaluate 103(i) spot inspection (E02) reports for the office/district being reviewed for compliance with agency policies and procedures, including compliance with time frames and separating E02 inspections from other events.

Adequate  Corrective Action Needed  Comments Below

16. Determine if Hazard Complaint inspections/investigations are being conducted according to policy and procedures.

Adequate  Corrective Action Needed  Comments Below

17. Determine if supervisors are monitoring inspector time and activity to ensure proper use of time, including off-shift and weekend work, by all inspectors.

Adequate  Corrective Action Needed  Comments Below

18. Determine if required Accompanied Activities (AAs); Field Activity Reviews (FARs) and supervisory follow-ups are being conducted and documented according to agency policy and procedures

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Office of Accountability

District

Coal District 12

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Logan, WV

Mine ID

[REDACTED]

Date

[REDACTED]

19. Determine if a 104(d) tracking system is in place and being kept current at the office being reviewed.

Adequate  Corrective Action Needed  Comments Below

20. Determine if the Uniform Mine File books are being maintained and reviewed according to current agency policy and procedures.

Adequate  Corrective Action Needed  Comments Below

21. Determine if supervisors are thoroughly reviewing Uniform Mine Files at least annually.

Adequate  Corrective Action Needed  Comments Below

22. Determine if supervisors are visiting each active underground mine at least annually.

Adequate  Corrective Action Needed  Comments Below

23. Determine if all sections where retreat mining is occurring (not to include longwall mining) are being inspected at least monthly.

Adequate  Corrective Action Needed  Comments Below

24. Determine if documentation of staff meetings/safety meetings are effective and relevant to current issues and the Agency's mission.

Adequate  Corrective Action Needed  Comments Below

United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability

District

Coal District 12

Field Office

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Mine ID

[REDACTED]

Date

[REDACTED]

Determine, after an in-mine visit, if approved plans (Ventilation, Roof Control, Training, Emergency Response Plan (ERP), etc.) are compatible with mining conditions and equipment.

Adequate

Corrective Action Needed

Comments Below

26. Determine if approved plans are being revised or updated to reflect changes in conditions and/or equipment.

Adequate

Corrective Action Needed

Comments Below

27. Determine if plan reviews are in compliance with current agency policy and procedures (performed within required timeframes, tracked from the date of submission, properly documented, and contain input from all affected departments and field offices).

Adequate

Corrective Action Needed

Comments Below

28. Determine if Assistant District Manager is conducting the required second level reviews and holding supervisors accountable for oversight of Field Activity Reviews and Accompanied Activities.

[REDACTED]

29. Determine if district management personnel are reviewing work products and reports for accuracy and completeness.

Adequate

Corrective Action Needed

Comments Below

United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability

District

Coal District 12

Field Office

Logan, WV

Mine ID

[REDACTED]

Date

[REDACTED]

Determine if District Managers, Assistant District Managers, and  
30. supervisors are conducting required mine visits and properly completing  
the required spreadsheet.

Adequate

Corrective Action Needed

Comments Below

Determine if District Manager is using discretion in granting conferences  
and monitoring the Alternative Case Resolution (ACR) program to ensure  
31. that all decisions (including upholding, modifying or vacating citations) are  
properly documented and justified by the Conference and Litigation  
Representatives (CLRs).

Adequate

Corrective Action Needed

Comments Below

NA – not part of this review

32. Determine if managers and supervisors are using standardized reports to  
review critical data relevant to inspections and investigations.

Adequate

Corrective Action Needed

Comments Below

Determine if Districts are conducting reviews in compliance with agency  
33. policy and procedures including follow-up to determine the effectiveness of  
corrective actions.

Adequate

Corrective Action Needed

Comments Below

Determine if information (mine status, methane liberation, number of  
34. employees, etc.) is being entered into the MSHA Standardized Information  
System (MSIS) accurately and in a timely manner?

Adequate

Corrective Action Needed

Comments Below

United States Department of Labor  
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District

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35. Determine if District Managers are using the Report Center to identify overdue responses from operators and take appropriate actions.

36. Determine if a complete permissibility inspection of each longwall system is being conducted by electrical specialists or inspectors who hold a current MSHA electrical qualification card on at least an annual basis.

Adequate  Corrective Action Needed  Comments Below

37. Determine if a proper examination of the Atmospheric Monitoring System (AMS) and/or AMS systems that operate Carbon Monoxide (CO) sensors is being conducted. A complete inspection includes those items in the Coal General Inspection Procedures Handbook (GIPH) AMS checklist.

Adequate  Corrective Action Needed  Comments Below

38. Determine if SSIs are maintaining a memorandum detailing the reasons for not conducting a special investigation when the District Manager decides to take no further action, in accordance with the Special Investigations Procedures Handbook.

Adequate  Corrective Action Needed  Comments Below

Not reviewed as part of this review.

39. Determine if proper procedures for conducting, documenting, and reviewing MSHA respirable dust surveys are being followed. Proper documentation to include blue cards, 2000-86s, etc.

Adequate  Corrective Action Needed  Comments Below

United States Department of Labor  
Mine Safety and Health Administration  
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Date

- Determine if District Managers and Assistant District Managers are providing acting Field Office Supervisors with the level of oversight necessary to manage their work groups on a temporary basis including an online distance learning training course with a knowledge check for temporarily promoted supervisors. The guidance will be included in each District's Standard Operating Procedure (SOP) for training newly promoted Field Office Supervisors.
- 40.

The Roof Control Plan SOP should comply with the established Program Policy Manual requirements as identified by the OIG report to address deficiencies identified in the Internal Review report. The SOPs should account for:

- 41.
- checking that required information is submitted
  - checking for communication with other plan approval groups
  - assuring that designated MSHA personnel contact the operator for additional information
  - discussing results of on-site evaluations with the operator and identified miners' representatives.

Adequate

Corrective Action Needed

Comments Below

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District Coal District 12 Field Office Logan, WV Mine ID [REDACTED] Date [REDACTED]

**Attachment B: Enforcement Actions Issued During the Mine Visit**

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I--Violation Data				
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)		3. Citation/Order Number
4. Served To	5. Operator			
6. Mine	7. Mine ID		(Contractor)	
8. Condition or Practice			8a. Written Notice (103g)	
<p>Warning lights or reflective materials have not been installed along the track haulage road at locations of abrupt or sudden changes in overhead clearance from the Slope bottom to the #3 Section. Multiple areas were observed where water lines, cables, and abrupt changes in the mining height were not clearly marked to protect miners from coming in contact with the mine roof, water lines, or cables. This safeguard is issued requiring the mine operator to clearly mark sudden changes in overhead clearance with warning lights or reflective material from the slope bottom to #3 Section and on all other track haulage ways in this mine.</p>				
Standard 75.1403 was cited <span style="border: 1px solid black; padding: 2px;">[REDACTED]</span>				
<small>See Continuation Form (MSHA Form 7000-3a)</small>				
9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	
			75.1403	
Section II--Inspector's Evaluation				
10. Gravity				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected:
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 314(b)		13. Type of Issuance (check one) Citation <input type="checkbox"/> Order <input type="checkbox"/> Safeguard <input checked="" type="checkbox"/> Written Notice <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment				
16. Termination Due				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section III--Termination Action				
17. Action to Terminate				
18. Terminated				
A. Date Mo Da Yr		B. Time (24 Hr. Clock)		
Section IV--Automated System Data				
19. Type of Inspection (activity code) E01		20. Event Number	21. Primary or Mill	
22. AR Name			23. AR Number	

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Farmers Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20415. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District

Coal District 12

Field Office

Logan, WV

Mine ID

[REDACTED]

Date

[REDACTED]

Mine Citation/Order  
Continuation

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



Section I-Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr [REDACTED]	3. Citation/Order Number [REDACTED]
4. Served To [REDACTED]	5. Operator [REDACTED]	
6. Mine [REDACTED]	7. Mine ID [REDACTED] (Contractor)	

Section II-Justification for Action

Continuation of 8. Condition or Practice

[REDACTED]

See Continuation Form

Section III-Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV-Inspection Data

9. Type of Inspection	E01	10. Event Number	[REDACTED]
11. AR Name	[REDACTED]	AR Number	[REDACTED]
12. Date	Mo Da Yr	13. Time (24 Hr. Clock)	[REDACTED]

MSHA Form 7000-3a, Mar 85 (revised)

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District Coal District 12 Field Office Logan, WV Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order

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



Section I—Violation Data

1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator		
6. Mine	7. Mine ID		(Contractor)
8. Condition or Practice			8a. Written Notice (103g)

Combustible material in the form of plastic bottles, cardboard, wood, paper, and other debris in trash were allowed to accumulate in the right crosscut adjacent to SS# 7627. The trash was previously placed in a garbage bag that had been run over scattering the trash in the area. No ignition sources were present in this area.

Standard 75.400 was cited [REDACTED]

See Continuation Form (MSHA Form 7000-3a)

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

Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays  Lost Workdays Or Restricted Duty  Permanently disabling  Fatal

C. Significant and Substantial: Yes  No  D. Number of Persons Affected: 001

11. Negligence (check one) A. None  B. Low  C. Moderate  D. High  E. Reckless Disregard

12. Type of Action 104(a) ( 13. Type of Issuance (check one) Citation  Order  Safeguard  Written Notice

14. Initial Action A. Citation  B. Order  C. Safeguard  D. Written Notice  E. Citation/Order Number F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section III—Termination Action

17. Action to Terminate The accumulations have been removed from the area.

18. Terminated A. Date Mo Da Yr B. Time (24 Hr. Clock)

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 21. Primary or Mill

22. AR Name 23. AR Number

MSHA Form 7000-3, Apr 08 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street SW, MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District

Coal District 12

Field Office

Logan, WV

Mine ID

Date

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	
8. Condition or Practice		8a. Written Notice (103g)

The roof on the right inby corner of the intersection at SS# 7627 was not supported or otherwise controlled to protect persons from hazards related to falls of the roof. A brow was left unsupported on the corner in a triangular shape that measured 42 inches wide by 34 inches long by 5 inches thick. The brow was located on the corner of the Primary Escapeway entry and was cracked at the top allowing the brow to protrude downward approximately one eighth of an inch. The brow had supplies stacked beneath it in which miners would have remove at some point in the continued mining cycle. Miners travel this area several times per shift during shift change and to retrieve supplies. The area was 'dangered off' until the brow could be supported.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			75.202(a)

Section II--Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: (0)	
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				E. Citation/Order Number
15. Area or Equipment				F. Dated Mo Da Yr

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III--Termination Action

17. Action to Terminate The brow has now been supported using a wooden post with gluts on top.

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number	21. Primary or MR
22. AR Name		23. AR Number

MSHA Form 7000-3, Apr 06 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsmen annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District Coal District 12 Field Office Logan, WV Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order  
 Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input type="checkbox"/> <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr [REDACTED]	3. Citation/Order Number [REDACTED]
4. Served To [REDACTED]	5. Operator [REDACTED]	
6. Mine [REDACTED]	7. Mine ID [REDACTED] (Contractor)	

Section II—Justification for Action

Continuation of 8. Condition or Practice

Standard 75.202(a) was cited [REDACTED]  
 [REDACTED]

See Continuation Form

Section III—Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection	10. Event Number		
[REDACTED]	[REDACTED]		
11. AR Name	AR Number	12. Date Mo Da Yr	13. Time (24 Hr. Clock)
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

MSHA Form 7000-3a, Mar 89 (revised)

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District

Coal District 12

Field Office

Logan, WV

Mine ID

Date

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID	(Contractor)
8. Condition of Practice		8a. Written Notice (103g)

The No. 2 AWG trailing cable that supplies 575 Volts to the #10 D-Box on the #3 Section was not adequately protected to prevent damage by mobile equipment. The section power center had been pulled on top of the #10 D-Box cable causing it to become lodged between the section power center and the mine floor. The cable was examined and no damage was found at the time of inspection. The #10 D-Box was removed from service until the cable could be removed and examined for damage.

Standard 75.606 was cited

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.606

Section II—Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(a)		13. Type of issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number
			F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III—Termination Action

17. Action to Terminate The cable was removed from beneath the power center and examined. No damage was done to the cable at the time of inspection.

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV—Automated System Data

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

MSHA Form 7000-3, Apr 08 (rev'd) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 408 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District Coal District 12 Field Office Logan, WV Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order

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



Section I--Violation Data

1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator		
6. Mine	7. Mine ID		(Contractor)
8. Condition or Practice			8a. Written Notice (103g)

Combustible material in the form of coal fines, loose coal, and float coal dust were allowed to accumulate on the mine floor on the #3 Section. The accumulations extended from the feeder line to 2 crosscuts inby, from the #5 Entry to the #8 Entry. The accumulations were black in color and measured from approximately 2 to 10 inches in depth throughout the entire cited area. No ignition sources were present in the immediate area.

Standard 75.400 was cited [REDACTED]

See Continuation Form (MSHA Form 7000-3a)

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

Section II--Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action: 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number
			F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III--Termination Action

17. Action to Terminate		
18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)

Section IV--Automated System Data

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

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United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District Coal District 12 Field Office Logan, WV Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order U.S. Department of Labor  
 Mine Safety and Health Administration

Section I—Violation Data			
1. Date Mo Da Yr [REDACTED]	2. Time (24 Hr. Clock) [REDACTED]	3. Citation/ Order Number [REDACTED]	
4. Served To [REDACTED]		5. Operator [REDACTED]	
6. Mine [REDACTED]		7. Mine ID [REDACTED] (Contractor)	
8. Condition or Practice <span style="float: right;">Ba. Written Notice (103g) <input type="checkbox"/></span>			

The travel way for branch line leading from the lifeline to the #3 Section Refuge Alternative was not maintained in a safe condition to always assure passage of anyone, including disabled persons. A continuous miner had been parked beneath the branch line which blocked the travel way from the lifeline to the refuge alternative. This safeguard is being issued requiring the mine operator to maintain the travel way for the branch line leading from the lifeline to the #3 Section Refuge Alternative, and all other travel ways for branch lines leading from the lifeline to refuge alternatives at this mine in a safe condition to always assure passage of anyone, including disabled persons.

Standard 75.1403 was cited [REDACTED] See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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Section II—Inspector's Evaluation			
10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected:
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action <span style="border: 1px solid black; padding: 2px;">314(b)</span>		13. Type of issuance (check one) Citation <input type="checkbox"/> Order <input type="checkbox"/> Safeguard <input checked="" type="checkbox"/> Written Notice <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/ Order Number	F. Dated Mo Da Yr
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
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Section III—Termination Action

17. Action to Terminate The branch line was routed around the continuous miner and a safe travel way is now maintained for the branch line leading from the lifeline to the refuge alternative.

18. Terminated	A. Date Mo Da Yr [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
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Section IV—Automated System Data			
19. Type of Inspection (activity code) E01	20. Event Number [REDACTED]	21. Primary or Mill	
22. AR Name [REDACTED]			23. AR Number [REDACTED]

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United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District

Coal District 12

Field Office

Logan, WV

Mine ID



Date



Mine Citation/Order  
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input type="checkbox"/> <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr [Redacted]	3. Citation/Order Number [Redacted]
4. Served To [Redacted]	5. Operator [Redacted]	
6. Mine [Redacted]	7. Mine ID (Contractor) [Redacted]	

Section II—Justification for Action

Continuation of B. Condition or Practice



See Continuation Form

Section III—Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number [Redacted]		
11. AR Name [Redacted]	AR Number [Redacted]	12. Date Mo Da Yr [Redacted]	13. Time (24 Hr. Clock) [Redacted]

MSHA Form 7000-0a Mar 85 (revised)

United States Department of Labor  
 Mine Safety and Health Administration  
 Office of Accountability

District Coal District 12 Field Office Logan, WV Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order

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



Section I—Violation Data

1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
4. Served To	5. Operator		
6. Mine	7. Mine ID		(Contractor)
8. Condition or Practice			8a. Written Notice (103g)

Combustible material in the form of float coal dust has been allowed to accumulate on the #4 Belt take up structure and components. The accumulations were paper thin and extended from the air lock doors inby the take up to the outby side of the first overcast outby the take up. The accumulations were black in color and were dry in these locations. No ignition sources were present in the area.

Standard 75.400 was cited [REDACTED]

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR  75.400
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Section II—Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number
			F. Dated Mo Da Yr
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	
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Section III—Termination Action

17. Action to Terminate			
18. Terminated			
A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	

Section IV—Automated System Data

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

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**United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability**

District

Coal District 12

Field Office

Logan, WV

Mine ID

Date

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/ Order Number
4. Served To	5. Operator	
6. Mine	7. Mine ID (Contractor)	
8. Condition or Practice		Ba. Written Notice (103g)

The roof on the approach to the #6 Seal was not supported or otherwise controlled to protect persons from hazards related to falls of the roof. A brow was left unsupported on the approach into the seal that measured 4 inches thick by 2 feet high by 6 feet wide and was located 8 feet above the mine floor. This area is only traveled one time every 7 days by an examiner.

Standard 75.202(a) was cited

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			75.202(a)

Section II - Inspector's Evaluation

10. Gravity			
A. Injury or Illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section III - Termination Action

17. Action to Terminate		
18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)

Section IV - Automated System Data

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

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United States Department of Labor  
Mine Safety and Health Administration  
Office of Accountability

District  Field Office  Mine ID  Date

### Attachment C – Discussion Topics

Topics discussed with the District that do not require a corrective action plan:

Documentation:

- document airflow direction at measurement point locations for bleeders (See GIPH p. 3-64 for reference)
- document SCSR manufacturer and model information (See GIPH p. 3-14 for reference)
- document rock dust sample locations on a map (See GIPH p. 5-19 for reference)

Enforcement Actions:

- thorough documentation of reasons for gravity and negligence (See GIPH p. 2-20 for reference)

Uniform Mine File:

- include latest information regarding Clean-Up Program
- include tab for flagrant violations
- include unwarrantable failure tracking system established (See UMF Handbook, p. 2-8 and 3-2 for reference)