

Date of Examination _____ Time From: _____ AM/PM To: _____ AM/PM

Section/Area: _____ Reported Outside? Yes ___ No ___ Time: _____ AM/PM

Reported By: _____ Received By: _____ (Initial)
(Authorized Person)**Preshift required within 3 hours prior to any 8 hour period**

Location	Hazardous Condition	Action Taken
No. 1 Entry Face Area	2.5% CH ₄ ; Energized roof bolter; loose, unsafe roof	Installed line curtain; Ventilated out CH ₄ ; Deenergized bolter; Dangered loose roof; Reported
No. 1 Entry (Outby)	Loose, unsafe roof	Dangered off outby and inby sides; Reported
No. 1 Rt – 1 Crosscut	Door open in stopping; short circuiting air	Closed door; Reported
No. 2 Entry Face Area	Energized miner	Deenergized miner; Reported
No. 2 Entry (Outby)	Two missing check curtains; Energized shuttle car	Installed curtains; Deenergized shuttle car
No. 2 Entry – (LOCC 2 – 3)	Smoldering shuttle car cable	Extinguished; Reported
No. 3 Face Area	1.0% CH ₄ ; Energized roof bolter	Installed line curtain; Ventilated out CH ₄ ; Deenergized roof bolter; Reported
No. 3 Entry (Outby)	Loose coal; Loose, unsafe roof	Dangered loose coal; Dangered loose roof outby and inby sides; Reported

Air Measurements

Location	CFM	Location	CFM
LOCC 1 – 2	30,523		

Velocities

Longwall Headgate: _____ Longwall Tailgate: _____

Remarks: _____

Signed by Preshift – Certified Examiner_____
Date_____
Certification Number_____
Countersigned by Mine Foreman_____
Date_____
Certification Number_____
Countersigned by Operator / Agent_____
Date_____
Certification Number

THIS RECORD TO BE MAINTAINED FOR ONE (1) YEAR

