

1. Action: a. New Entry . b. Update	2. A Code	ctivity e: E02		3. E	vent Nun	nber: 62	2886	56			
4. Date Event Started:		ate Event shed:	10/19/2009	9 6. M	ine ID:	46-08	3436				
7a. Organization Code (Mine Assignment) 20401	b. Wo Identi	rk Group fier 02	9. Compa	ny Name	PE	RFORM	ANCE (COAL CO	MPAN	Y	
8a. Organization Code (AR Assignment) 20401	b. Wo Group	02	10. Mine	Name	UP	PER BIO	BRAN	ICH MINE	-SOUT	TH	
11. Report Type (check a. First	b. Interim	. Last d. Not	Applicable [2. Area o		. Activ			Idle ections	
c. Outby d. Shafts/ Slopes	e. Surface Areas (UG)	f. Surface Workings	g. Compai Records	ny 🔽	h, ATF	i	. Impou	indments		j. Refu Piles	se 🗌 .
k. Major (1) Shaft/ Construction Slope Sinking	(2) Impoundment Construction	(3) Buildings		Dragline/ ovel:		(5) Oth	er	l. Mi	scellane	eous 🗌	
m. MMU/Pit Number							•				
(1) 0500											
13. Number of Samples Collected a. Air Samples	b. Rock Dust Spot	c. Rock Dus Survey	st	d. Respir	rable	ı	e. Noise	e	f, C	Other	
14. Impoundments/Refuse Piles:		15. Prime Independent									
a. Number b. FHC	c. Configuration	Codes (Major Cons	truction)								
	•	16. Inspection Results		Citation	ıs	Orders	ı	Safegua	ards	Oth	er
		a. This Inspection		Coal Opr	Ind Con	Coal Opr	Ind Con	Coal Opr	Ind Con	Coal Opr	Ind Con
	((1) New Issuance	- S	1/0	Con	1/0	Con		Con	Орг	Con
			Magatiana			1/0					
		(2) Terminations	Vacations	0/0		1/0					
		(2) Terminations. (3) Modifications		0/0 0/0		0/0				•	
										•	
		(3) Modifications (4) Left Pending b. Previously Issued	s/Extensions d	0/0		0/0 0					
		(3) Modifications (4) Left Pending b. Previously Issued (1) Modifications	s/Extensions d s/Extensions	0/0 1 0/0		0/0 0 0/0					
		(3) Modifications (4) Left Pending b. Previously Issued	s/Extensions d s/Extensions	0/0		0/0 0					
18. Signature and Card Number of Right of Entry Person(s) Respo		(3) Modifications (4) Left Pending b. Previously Issue (1) Modifications (2) Terminations	s/Extensions d s/Extensions	0/0 1 0/0		0/0 0 0/0					
		(3) Modifications (4) Left Pending b. Previously Issue (1) Modifications (2) Terminations	s/Extensions d s/Extensions /Vacations	0/0 1 0/0		0/0 0 0/0					
Right of Entry Person(s) Respo		(3) Modifications (4) Left Pending b. Previously Issued (1) Modifications (2) Terminations, tive/	s/Extensions d s/Extensions /Vacations	0/0 1 0/0		0/0 0 0/0					
Right of Entry Person(s) Respo		(3) Modifications (4) Left Pending b. Previously Issued (1) Modifications (2) Terminations, tive/	s/Extensions d s/Extensions /Vacations	0/0 1 0/0		0/0 0 0/0					
Right of Entry Person(s) Respo		(3) Modifications (4) Left Pending b. Previously Issued (1) Modifications (2) Terminations, tive/	s/Extensions d s/Extensions /Vacations	0/0 1 0/0		0/0 0 0/0					
a. b. c.		(3) Modifications (4) Left Pending b. Previously Issued (1) Modifications (2) Terminations, tive/ 17. Re	s/Extensions d s/Extensions /Vacations	0/0 1 0/0		0/0 0 0/0					

Activity Calendar Event Number: 6288656

Mine ID: 4608436

Mon Tue Wed Thur Fri Sun Sat Shift 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 1 2 3 Week 1 10/18/2009

22, Signature

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Mine Citation/Order					U.S. Department of Labor Mine Safety and Health Administration								
Section IViola	tion Data	OCCUPATION AND DESCRIPTION OF THE PERSON OF			nder Manufacilina kala gira kepika di Agingian ya sa kerika mangan dangan mangan mangan	· ·						AND DESCRIPTION OF THE PARTY OF	Decourage in the second
1. Date	Mo Da 10/19/2		2. Time (24 Hr. C		,				3. Citation Order N		8009	1
4. Served To			rdinator		***************************************	. , ,,	5. Operator PERFOR		CE CO.	AL COM	PANY		and the price which do not the Market and The State Com-
6. Mine	W. S. C.	····		*************			7. Mine ID	16	-0843	6	**************************************	Managamanananana	
UPPER BI	G BRAY	NCH M	INE-SOU	JTH				40-	.0043	U			(Contractor)
8. Condition of	or Practice		****							***	8a. W	/ritten N	otice (103g)
	i to t	he s	urface	. Th	aintain tw e Longwall hone.		~~						
TP-C-VISION COVERNO CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CO	.			v				 		See Co	ontinuation Form	(MSHA F	Form 7000-3a)
9. Violation	A. Health Safet Othe	y 🔽 📗	B. Section of Act		316(b)		art/Section of itle 30 CFR)f			•		
Section IIInsp	ector's Evalu	ation											
10. Gravity: A. Injury o	r Illness (h	as) (is):	No Likelih	ood 🗌	Unlikely 🗸		Reasonably	/ Likely		Highly Llke	ly 🗌 (Occurred	d [
B. Injury o sonably	r illness co be expect		No Los	t Worke	lays 🗌 Lost W	/orkd	ays Or Restr	icted Du	ty 🗸	Permane	ntly Disabling		Fatal 🗌
C. Signific	ant and Su	ıbstantia	: Ye	s 🗌	No 🗸					D. Number	of Persons Aff	ected:	006
11. Negligend	ce (check o	one)	A. None		B. Low	C. Mo	derate 🗸	C	D. High		E. Reckless D	isregard	I 🗍
12. Type of A	ction 1	04(a)			13. Type of Issu	ance	(check one)	Cita	tion 🗸	Order 🗌	Safeguard	□ V	Written Notice
14. Initial Act A. Citation		rder 🗌	C. Safegua	ard 🗌	D. Written Notice		E. Citation/ Order Nu				F. Dat	ed	Mo Da Yr
15. Area or E	quipment												
16. Terminati	on Due	A. Date	Mo Da 10/19/2		B. Time (24 Hr. Clo	ck)	1600)			* · · · · · · · · · · · · · · · · · · ·		
Section IIITen	nination Act	ion							1				
17. Action to	Terminate										.1		
18. Terminate	A. Date	Мо	Da Yr	B. Time	e (24 Hr. Clock						···	N. T. C.	
Section IVAut	omated Syst	iem Data	7	Array Mariana				the second second second second			the second se		
19. Type of Ir		E02	20/ Even	t Numbe	f 628865	6	21. P	rimary o	or Mill				To the difference of the second secon

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.

23. AR Number

Mine Citation/Order Continuation

U.S. Department of LaborMine Safety and Health Administration

7,0

Section ISubsequent Action/Continuation Data			and the state of t				
1. Subsequent Action 1a. Continuation	2. Dated (Original Issue)	Mo 10/19	Da 9/2009	1	Citation/ Order Number	8080091 - 01	
4 Sarved To			5.	Operate	ог		
Longwall Coordinator			P	ERFO	RMANCE CO	AL COMPANY	
6. Mine			7.	Mine IE		<i>-</i>	(Contractor)
UPPER BIG BRANCH MINE-SOL	JTH				46-0843	6	
Section IIJustification for Action							Name and the second

The Longwall section intake phone is not making contact with the surface phone.

						See Continuation Form
8. Extended To Mo Da	Yr I	uranian managan	antelescher ausgeson er an andere an an			
A. Date	B. Time (2	24 Hr. Clock)		C. Vacated	D. Terminated	E. Modified
Section IVInspection Data	on the second se					
9. Type of Inspection E01	10. Event Numb	er 6288652	I		CONTROL CONTRO	
11. Signature		AR Number	12. Date	Mo Da Yr	13. Time (24 Hr. Cl	lock)
here propied ments are consistent and white the way of		,400mm		10/20/2009	1110	

MSHA Form 7000-3a, Iviar 85 (reviseo)

Mine Citation/Order Continuation

Typing error

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



	1				u. u. j		
Section ISubsequent	Action/Continuation Data						
1. Subsequent Actio	on 1a. Continuation	2. Dated (Original Issue)	Mo Da 10/19/20	Yr 09	3. Citation/ Order Number 8080	0091 - 02	
4. Served To				5. Opera	tor	,	
Lon	gwall Coordinator			PERFO	DRMANCE COAL CO	OMPANY	
6. Mine UPPER BIG BRANCH MINE-SOUTH					^D 46-08436		(Contractor)
Section IIJustification	for Action						
Change	Fre	om			То		
17. Action To Termi	inate						
Reason Typing	error: I typed the wo	ord not after the wo	rd is and bef	ore maki	ng and it should read(is	now making).	

See Continuation Form Section III--Subsequent Action Taken 8. Extended To B. Time (24 Hr. Clock) C. Vacated D. Terminated ✓ E. Modified Section IV--Inspection Data 9. Type of Inspection E01 10. Event Number 6288652 13. Time (24 Hr. Clock) 11. Signatur AR Number 12. Date Mo Da Yr 10/21/2009 0605

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					U.S. Department of Labor Mine Safety and Health Administration					
Section IViolat	ion Data		······································							
1. Date	Mo Da Yr 10/19/2009	2. Time (24 Hr. Clo	•			3, Citation/ Order Number	808009)2		
4. Served To	Longwall Coc			5. Operator PERFORM	MANCE CO	OAL COMPAN	Y			
6. Mine	G BRANCH M	V	eki yanga menengan menengan permenangan menengan menengan menengan menengan menengan menengan menengan menengan	7. Mine ID	46-0843			(Contractor)		
8. Condition of		III III III III III III III III III II	· · · · · · · · · · · · · · · · · · ·				8a. Written I	Notice (103g)		
maintai thick f	ned 6 fee	capeway for t wide. A r en the rib wide.	rib roll o	f 8.5 feet	long X	3.5 feet	height			
9. Violation	A. Health	B. Section		C. Part/Section of			on Form (MSHA	Form 7000-3a)		
	Safety ✓ Other	of Act		Title 30 CFR		75.380(d)	(4)			
	ector's Evaluation						LOLDON TO THE CONTRACTOR OF TH			
10. Gravity: A. Injury of	Illness (has) (is):	No Likelihood	Unlikely 🗸	Reasonably I	_ikely [Highly Likely	Occurre	ed 🗌		
	illness could rea- be expected to be	No Lost Workda	ys 🗌 Lost W	Vorkdays Or Restric	ted Duty	Permanently Dis	sabling 🗸 -	Fatal []		
C. Signific	ant and Substantia	l: Yes 🗌	No 🗸	CONTRACTOR		D. Number of Pers	sons Affected:	004		
11. Negligeno	e (check one)	A. None	B. Low	C. Moderate	D. High	✓ E. Red	kless Disrega	rd [
12. Type of A	ction 104(d)(2	2)	13. Type of Issu	ıance (check one)	Citation	Order 🗹 Sa	feguard 🗌	Written Notice		
 Initial Acti A. Citation 		C. Safeguard	D. Written Notice	E. Citation/ Order Num	nber 8	3082692	F. Dated	Mo Da Yr 03/17/2009		
15. Area or E	quipment Th	e Longwall								
16. Terminati	on Due A. Date	Mo Da Yr	B. Time (24 Hr. Clo	ock)		The second secon		5-2500 H2000 H		
Section IIITerr	nination Action	<u> </u>								
17. Action to	Terminate Th	e rib roll	was clean	ed up.						
18. Terminate		Da Yr 19/2009 B. Time	(24 Hr. Clock	1125	11. 11. 11. 11. 11. 11. 11. 11. 11. 11.		(4)	**************************************		
Section IVAuto	omated System Data							g inabazaanan ananan arraka		

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.

6288656

21. Primary or Mill

23. AR Number

19. Type of Inspection

(activity code)

22. Signature

20. Event Number

E02

Mine Citation/Order Continuation

citation.

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



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Section ISu	ubsequent Action/Continuation Data						
1. Subseq ✓	uent Action 1a. Continuation	Dated (Original Issue)	Mo Da 10/19/20	Yr 09	3. Citation/ Order Number 8	080092 - 01	
4. Served	<u>To</u>			Operat	tor		
	Longwall Coordinator		-	PERFC	RMANCE COAI	_ COMPANY	
6. Mine				7. Mine II	16.00426		(Contractor)
UPPER :	BIG BRANCH MINE-SOU	JTH			46-08436		IIIAIZ III JUNIO SALAINI III III III III III III III III III
Section IIJ	ustification for Action						
Change	Fro	m			To		
8. Conditio	n Or Practice						
Reason	To read (This violation is ar	unwarrantable fai	lure to comp	ly with a	mandatory standar	d.)	
	Need to add a s	sentence af	ter the	last	sentence :	in the body	y of the

See Continuation Form Section III-Subsequent Action Taken 8. Extended To B. Time (24 Hr. Clock) ✓ E. Modified A. Date C. Vacated D. Terminated Section IV--Inspection Data 9. Type of Inspection E01 10. Event Number 6288652 13. Time (24 Hr. Clock) 11. Signature 12. Date Mo Da Υr AR Number

10/26/2009

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