



September 26, 2008

MEMORANDUM FOR RICHARD E. STICKLER  
Acting Assistant Secretary for  
Mine Safety and Health Administration

FROM: CHARLES J. THOMAS *Charles J. Thomas*  
Director of Accountability for  
Mine Safety and Health Administration

SUBJECT: MSHA Office of Accountability Audit, Hazard, KY Field  
Office, and [REDACTED]

**Introduction**

This memorandum summarizes the Office of Accountability audit of the subject mine and field office. Audit subjects included the Uniform Mine File, MSHA field activities, level of enforcement, Field Activity Reviews (FARs), MSHA supervisory and managerial oversight, mine plans, and the conditions and practices at the mine. The audit was conducted during the week of [REDACTED] by Charles Thomas. Positive findings and issues requiring attention are included in this audit report.

**Overview**

The auditor traveled to the Hazard, KY field office and the [REDACTED] mine to observe and evaluate enforcement activities, supervisor oversight, management oversight, and current mining conditions. Accompanying the auditor was [REDACTED]. The two highwalls, spoil banks, roadways, berms, pits, signage, dump points, explosive magazines, were all adequately maintained. Equipment inspected included a highwall miner, two front end loaders, bulldozers, and rock trucks. Respirable dust survey was conducted on five (5) high risk occupations and the results are attached.

The audit revealed many positive findings related to MSHA field activities and mine conditions, including well organized pre-inspection conferences, and enforcement actions.

Other positive findings included good communication and professional relations with the operator. FARs and Accompanied Activities were detailed, and in-depth second level reviews were being conducted. Conditions at the mine site were reflective of the inspection reports and enforcement actions reviewed. The equipment maintenance has

improved from each inspection to the next inspections with a reduction in violations observed this audit.

The level of enforcement appears accurate and fair for the conditions observed at the mine. The district has conducted several "truck emphasis" inspections that have caused operators and independent contractors to maintain trucks in good condition as was observed this inspection.

Issue that required corrective action:

The supervisory CMI must conduct a thorough review of inspection reports, time reporting and violations concerning E02 spot inspections and scheduling of those inspections. One required E02 inspection was missed during the week of February 25th-March 12th, 2008. There was a communication failure between the [REDACTED] and CMIs.

*Corrective action already instituted: The E02 calendar has been modified and is posted in the office and given to all CMI's. The [REDACTED] also addressed this issue during a staff meeting, to make certain that E02 inspections are completed timely.*

Recommendation:

Reflective vests should be provided for all surface inspectors who inspect on off shifts and are required to be on foot around heavy mobile equipment.

*Corrective action already completed: Reflective vests have been delivered, and were on order prior to the audit. All surface inspectors have been issued reflective vests.*

### Audit Results

The attached checklist addresses the findings of this audit. Positive results as well as issues that need to be addressed are covered in the checklist.

### Attachments

- A. OOA Checklist with comments
- B. Respirable Dust Survey Results
- C. Citations Issued during audit

District

Field Office

Mine ID

1. Coal  , Metal/Nonmetal

Evaluate supervisory review of inspection reports and documentation for completeness.

Adequate  Inadequate  Not Applicable  Comments Below

One required E02 inspection was missed during the week of February 25<sup>th</sup>-March 12<sup>th</sup>, 2008 in the Field Office. A communication failure occurred between the acting [REDACTED] and CMI's.

*Corrective action: The E02 calendar has been modified and is posted in the office and given to all CMI's. The supervisor CMI also addressed this issue during a staff meeting, to make certain that E02 inspections are completed timely. Corrected.*

2. Coal  Metal/Nonmetal

Determine if supervisors address report deficiencies immediately

Adequate  Inadequate  Not Applicable  Comments Below

3. Coal  Metal/Nonmetal

Determine if supervisors are visiting each assigned mine at least annually

Adequate  Inadequate  Not Applicable  Comments Below

District

Field Office

Mine ID

4. Coal  Metal/Nonmetal   
Evaluate the quality of Field Activity Review reports (FARs)

Adequate  Inadequate  Not Applicable  Comments Below

All FAR's did not evaluate E02 inspections as part of the oversight process  
Authority: Mine Act, Section 103(i) See item No. 1 above.

5. Coal  Metal/Nonmetal   
Determine if supervisors/managers are identifying and addressing performance or behavior based issues during and after accompanied inspections are conducted

Adequate  Inadequate  Not Applicable  Comments Below

6. Coal  Metal/Nonmetal   
Evaluate the quality of Accompanied Inspections

Adequate  Inadequate  Not Applicable  Comments Below

7. Coal  Metal/Nonmetal   
Determine if supervisors are thoroughly reviewing mine files at least annually

Adequate  Inadequate  Not Applicable  Comments Below

Positive Comment: The UMF was orderly and up to date. All outdated material was removed by the inspector, supervisor, or field office administrative assistant.

District

Field Office

Mine ID

8. Coal <input checked="" type="checkbox"/> Metal/Nonmetal <input type="checkbox"/> Determine if Assistant District Manager is holding supervisor accountable for general mine visits, FARs, and accompanied activities
Adequate <input checked="" type="checkbox"/> Inadequate <input type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below
Adequate yes, except for one instance see item 4.
20. Coal <input checked="" type="checkbox"/> Metal/Nonmetal <input type="checkbox"/> Determine if supervisors are adequately evaluating the level of enforcement by visiting each producing mine
Adequate <input checked="" type="checkbox"/> Inadequate <input type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below
23. Coal <input checked="" type="checkbox"/> Metal/Nonmetal <input type="checkbox"/> Determine if second level reviews and Peer Reviews are used to assess supervisory review of enforcement actions
Adequate <input checked="" type="checkbox"/> Inadequate <input type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below
29. Coal <input checked="" type="checkbox"/> Metal/Nonmetal <input type="checkbox"/> Determine if complete and thorough inspections are being conducted and adequately documented
Adequate <input checked="" type="checkbox"/> Inadequate <input type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below
<i>Recommendation: All second level peer reviews should include review of E02's are being conducted in accordance with the Mine Act.</i>

District

Coal Dist 7

Field  
Office

Hazard, KY

Mine ID

[REDACTED]

30. Coal  Metal/Nonmetal   
Determine if inspection notes, air samples, rock dust samples, and tracking map/diagram support the inspector's assertion that the mine was inspected in its entirety

Adequate  Inadequate  Not Applicable  Comments Below

31. Coal  Metal/Nonmetal   
Determine that the inspector spent sufficient time on off-shifts and on weekends

Adequate  Inadequate  Not Applicable  Comments Below

34. Coal  Metal/Nonmetal   
Determine if all mine record books, postings, and other required materials are examined during the inspection

Adequate  Inadequate  Not Applicable  Comments Below

Records were current and well maintained.

District  Field Office  Mine ID

37. Coal  Metal/Nonmetal   
Evaluate each citation/order/safeguard for inspector's determination of gravity, negligence, number of persons affected, and the level of enforcement

Adequate  Inadequate  Not Applicable  Comments Below

38. Coal  Metal/Nonmetal   
Accompany and evaluate inspector's imminent danger run

Adequate  Inadequate  Not Applicable  Comments Below

39. Coal  Metal/Nonmetal   
Check adequacy of preshift/on shift examinations

Adequate  Inadequate  Not Applicable  Comments Below

Detailed, timely exams are being conducted.

41. Coal  Metal/Nonmetal   
Evaluate operator's workplace examinations

Adequate  Inadequate  Not Applicable  Comments Below

District

Coal Dist 7

Field  
Office

Hazard, KY

Mine ID

[Redacted Mine ID]

57. Coal

Metal/Nonmetal

Observe and evaluate fire detection methods

Adequate

Inadequate

Not  
Applicable

Comments Below

59. Coal

Metal/Nonmetal

Evaluate condition of conveyor belt drives, and fire suppression systems

Adequate

Inadequate

Not  
Applicable

Comments Below

Highwall miner belt conveyor was maintained in safe condition.

60. Coal

Metal/Nonmetal

Determine if all required record books are adequately completed and in compliance with applicable standards

Adequate

Inadequate

Not  
Applicable

Comments Below



District

Coal Dist 7

Field  
Office

Hazard, KY

Mine ID



62. Coal  Metal/Nonmetal   
Examine mine bulletin board and evaluate adequacy of all required postings

Adequate  Inadequate  Not Applicable  Comments Below

63. Coal  Metal/Nonmetal   
Interview responsible person(s) and evaluate knowledge of emergency response, evacuation procedures, and fire fighting processes

Adequate  Inadequate  Not Applicable  Comments Below

66. Coal  Metal/Nonmetal   
Determine if districts are conducting sufficient, in-depth Peer Reviews

Adequate  Inadequate  Not Applicable  Comments Below

*Recommendation: All second level peer reviews should include review of E02's are being conducted in accordance with the Mine Act.*

District  Field Office  Mine ID

67. Coal  Metal/Nonmetal   
Determine if MSHA headquarters is conducting sufficient, in-depth Peer Reviews

Adequate  Inadequate  Not Applicable  Comments Below

There were no headquarters Peer Review activities conducted in District 7 during 2007, and none have been conducted in 2008 as of the date of this audit due to accident investigations and internal review investigations. A Headquarters review is scheduled for November 2008 in District 7.

*Reference - Accountability Program Handbook (AH04-III-10), Headquarters Review Process - Review Schedules*

*Reference - Accountability Program Handbook (AH08-III-4), The Accountability Review Process - Review Frequency and Duration*

68. Coal  Metal/Nonmetal   
Determine if Peer Reviews identify root causes of deficiencies, corrective actions, set time lines for corrections, and identify a method for accurately measuring the success or failure of corrective actions.

Adequate  Inadequate  Not Applicable  Comments Below

District

Coal Dist 7

Field  
Office

Hazard, KY

Mine ID



77. Coal

Metal/Nonmetal

Evaluate the two most current completed E01 (regular) inspection reports  
(two quarters)

Adequate

Inadequate

Not  
Applicable

Comments Below

79. Coal

Metal/Nonmetal

Citations, orders, and safeguards issued during previous two quarters

Adequate

Inadequate

Not  
Applicable

Comments Below

114. Coal

Metal/Nonmetal

Determine if spreadsheets and/or databases provided for tracking of mine  
visits by supervisors and managers is kept up to date

Adequate

Inadequate

Not  
Applicable

Comments Below

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

District

Coal Dist 7

Field  
Office

Hazard, KY

Mine ID

[REDACTED]

115. X

Metal/Nonmetal

Evaluate the effectiveness of management's support of, and communication with, inspectors and specialists

Adequate

Inadequate

Not  
Applicable

Comments Below

[Empty comment box]

District **Coal Dist 8**

Field Office **Hazard, KY**

Mine ID [REDACTED]

Respirable Dust Survey Results for [REDACTED] Mine

NO. 1352 P. 1

\*\*0766-0006  
REPORT NO: MSD014

RESPIRABLE DUST SAMPLING INSPECTION RESULTS

MINING ID NUMBER [REDACTED]

MINING NAME - [REDACTED]

COMPANY NAME - [REDACTED]

ENTITY ID [REDACTED]

SAMPLING DATE [REDACTED]

PRODUCTION THIS SHIFT  
00

SHIFT: 06

\*\*\*\*\*  
\* AVG. PROD. (FOR LAST 30 PROD. SHIFTS) \_\_\_\_\_  
\* SURVEY CONDUCTED BY \_\_\_\_\_  
\*\*\*\*\*

TYPE OF SAMPLE	OCCUPATION CODE	CASSETTE	TIME	DRY CONC	INITIAL WEIGHT	FINAL WEIGHT	CF MGT	CF VOID	DUST STANDED	VOID CODE	SITUATION NO
B	369	57745294	480	0.110	482.657	482.740	0.006		2.00		
B	382	57745253	480	0.069	487.036	487.099	0.006		2.00		
B	384	57745391	480	0.106	481.735	481.815	0.006		2.00		
B	384	57745318	480	0.089	485.713	485.781	0.006		2.00		
B	386	57745342	480	0.123	485.712	485.804	0.006		2.00		

*Compliance*

[REDACTED]

OPTIONAL FORM NO. 7060  
MAY 1988 EDITION  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE

SEARCHED [REDACTED] INDEXED [REDACTED]  
SERIALIZED [REDACTED] FILED [REDACTED]

MAY 19 1990 FBI - HAZARD

GENERAL SERVICES ADMINISTRATION

[REDACTED]



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

Mine Citation/Order

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



1. Mine	2. Citation/Order Number	3. Citation/Order Number
<p>22G loader no. no. 34 being used to load refuse has one ROPS bolt missing on the right side under the operators compartment.</p>		

See Continuation Form (MSHA Form 7003-2a)

9. Violation	A. Health Safety or Loss of Life	B. Section of Act	C. Part/Section of Title 30 CFR	77.404(g)
Section II - Hazard Evaluation				
10. Severity:				
A. Injury or illness (check one): No Lost Workdays <input type="checkbox"/> Lost Workdays or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabled <input type="checkbox"/> Fatal <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 checked="" type="checkbox"/> Permanently Disabled <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input type="checkbox"/> D. Hospital Persons Affected: 0/11				
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 Negligent <input type="checkbox"/>				
12. Cause of Order: 1. Direct 2. Indirect 3. Other (Specify)				
14. Initial Action: A. Citation <input type="checkbox"/> B. Consent <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/> E. Citation Order Number: F. Date: No. Da. Yr.				

15. Termination Date:	A. Date: Mo Da Yr	B. Time (24 Hr. Clock)
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16. Terminated:	A. Date: Mo Da Yr	B. Time (24 Hr. Clock)
Section III - Inspection Status		
17. Access to Mine:		
18. Type of Inspection (activity code):	19. Mine Number:	20. Primary or MHA:
21. Signature:	22. AB Number:	

MSHA Form 7003-2a (Rev. 10-2000) 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 Checklist and the 15 Regional Fairness Offices to receive comments from small businesses about Federal agency rules and actions. The Checklist is available on the Internet at <http://www.sba.gov/regulatory> and also in hard copy upon request. If you wish to provide comments, please contact the nearest Regional Office or the Small Business and Agriculture Regulatory Checklist at 1-800-368-5848. Please note, however, that your right to file a comment with the Checklist is in addition to any other rights you may have, including rights to seek claims 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

Mine Citation/Order Continuation

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

Section 10 - Subsequent Action/Correction Date

1. Subsequent Action Taken/Correction Date	2. Dates (Original Issued)	3. Citation Order Number
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]

The ROPE bolt has been installed.

See Continuation Form

Section 10 - Subsequent Action Taken

Extended To	A. Date	No.	Ex.	Tr.	B. Time (24 Hr. Clock)	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
Start/In-Inspection Date	Type of Inspection	10. Evening Number						
11. Date	12. Date	13. Date	14. Date	15. Date	16. Date	17. Date	18. Date	19. Date

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 Mine Safety and Health Administration  
 Office of Accountability

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

Section II - Violation Data  
 1. Citation/Order Number

(Contractor)  
 2. Written Notice (1029)

The Caterpillar 777D rock truck co. no. 282 hauling refuse from the 001 pit has excessive up and down movement in the left inside tie rod ball stud.

See Continuation Form (MSHA Form 7000-04)

1. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Paragraph of Title 30 CFR	77.404(a)
Section II - Violation Data				
6. Severity				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Potentially Lethal <input checked="" type="checkbox"/> Highly Lethal <input type="checkbox"/> Documented <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Loss (Workdays) <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
D. Number of Persons Affected: (00)				
7. 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. Unexcused disregard <input type="checkbox"/>				
8. Type of Action (104)(ii)				
15. Type of Insurance (check one)				
Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Insignificant <input type="checkbox"/>				
9. 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. Dates Mo Da Yr				
10. Area of Equipment				
11. Termination Date				
A. Date				
B. Time (24 Hr. Clock)				
12. Action to Terminate				
13. Termination				
A. Date Mo Da Yr				
B. Time (24 Hr. Clock)				
14. Other Administrative System Data				
16. Type of Inspection (District code)				
17. Event Number				
18. Priority of MIE				
19. Signature				
20. AIR Number				

MSHA Form 7000-04, May 05 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1995, the Department of Labor has established a Regional Small Business and Regulatory Compliance Office and 19 Regional Fairness Boards to receive complaints from small businesses about Federal Agency rulemaking actions. The Office handles rulemaking activities and rules with agency's responsiveness to small business. For more information on the placement process of RSCBA, you may call 1-888-REG-FAIR (1-888-734-6247), or write the Office of Small Business Administration, Office of the National Compliance, 400 3rd St. SW, MC 3120, Washington, DC 20418. Please note, however, that your right to file a complaint with the Commission is in addition to any other rights, remedies, or procedures that you may have. You may also have the right to contest administrative 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

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 checked="" type="checkbox"/>	2. Dated (Original Issued)	3. Citation/Order Number
4. Sent To		(Contractor)

The left inside tie rod ball stud has been replaced.

See Continuation Form

Section III-Subsequent Action Taken

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

Type of Inspection	10. Event Number
1. [Redacted]	AR Number
12. Date Mo Da Yr	13. Time (24 Hr. Clock)
14. [Redacted]	15. [Redacted]

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

Mine Citation/Order

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



Section I--Violation Data

1. Date	3. Citation/Order Number
5. Operator	(Contractor)
6. Description of Violation	

The Caterpillar 777D rock truck co. no.288 hauling refuse from the 001 pit has the front horn inoperative.

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
			77.1605(d)

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 checked="" 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 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"/>		
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	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. Signature			23. AR Number

MSHA Form 7000-3 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

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 checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr	3. Citation/Order Number
4. Served To	5. Operator	
	(Contractor)	

Section II-Justification for Action

The front horn is now operative.

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 checked="" type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV-Inspection Data

9. Type of Inspection EOI	10. Event Number		
11. Sign	AR Number	12. Date Mo Da Yr	13. Time (24 Hr. Clock)

MSHA Form 7000-3a, Mar 83 (revised)

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

Mine Citation/Order

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



Section I--Violation Data

1. Date	3. Citation/Order Number
(Contractor)	8a. Written Notice (103g)

The Caterpillar 988F loader co. no. 153 loading coal in the highwall miner pit has an accumulation of oil and grease on the frame of the machine.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other	B. Section of Act	C. Part/Section of Title 30 CFR	77.1104
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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 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 checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input 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"/>
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. Signature			23. AR Number

MSHA Form 7000-3, March 90 (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

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 checked="" type="checkbox"/>	2. Dated (Original Issue)	3. Citation/ Order Number
[Redacted]	[Redacted]	[Redacted]
[Redacted]		(Contractor)

The accumulation was removed from the machine.

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 checked="" 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]
[Redacted]	[Redacted]	11. AR Number	[Redacted]
[Redacted]	[Redacted]	12. Date Mo Da Yr	[Redacted]
[Redacted]	[Redacted]	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

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 T	5. L
6. E	7. (Contractor)
8. Written Notice (103g)	

The permanent tag on the fire extinguisher located at the 12,000 gallon diesel fuel tank near the parking lot was not marked to show it had been examined at least once in the last six months. The tag on the fire extinguisher was last marked in 2007.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	77.1110
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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 checked="" 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 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		13. Type of Issuance (check one)		
[04(a)]		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action				F. Dated
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				Mo Da Yr
15. Area or Equipment				

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

17. Action to Terminate The fire extinguisher was examined and the date was marked on the permanent tag.

18. Terminated	A. Date	Time (24 Hr. Clock)
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Section IV - Automated System

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

MSHA Form 7000-3a is required 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.