

November 22, 2009

MEMORANDUM FOR: MICHAEL A. DAVIS  
Deputy Assistant Secretary for Operations  
Mine Safety and Health Administration

FROM: PETER J. MONTALI  
Acting Director, Office of Accountability for  
Mine Safety and Health Administration

SUBJECT: MSHA Office of Accountability Audit [REDACTED]  
Field Office [REDACTED]  
[REDACTED]

### Introduction

This memorandum summarizes the Office of Accountability audit of the subject mines and field office. Audit subjects included MSHA supervisory and managerial oversight, MSHA field activities, level of enforcement, Field Activity Reviews (FARs), Accompanied Activities, mine plans, and the conditions and practices at the mine. The audit was conducted during the week of [REDACTED] by Arlie A. Webb, Jerry Kissell, and Billy Randolph. Positive findings and issues requiring attention are included in this audit report.

### Overview

The accountability specialists traveled to the Peru, Illinois Field Office and to the [REDACTED] and [REDACTED] to observe and evaluate enforcement activities, supervisory oversight, and mine conditions. Areas of the mine examined during this audit included mine office, record books, required postings, pits, highwalls, highwall drill, front end loaders, excavators, haul trucks, haul roads, company pick-up trucks, berms, explosive storage magazines, substations and electrical installations, fuel storage, and the shop/supply area. Inspection activities also covered the plants, including breakers, sizing screens, crushers, surface conveyor belts and elevated conveyor belts.

### S&S Rate Comparison

Overall, the S&S rate for the Peru field office and the North Central District as a whole were considerably lower than the national average.

Fiscal Year	Field Office	North Central District	National Avg.
2008	12.8%	17.1%	22.0%
2009	17.5%	17.3%	23.0%

However, enforcement actions taken at the subject mines during this audit appeared consistent with national policy and were appropriate for the nature of the violations observed.

**Time and Activity Comparison**

Time distribution is generally good, although time in the "Other" category needs to be reduced. Consideration should be given to issuing citations and orders while on-site (as discussed later in this report) to increase inspector on-site time and provide a greater degree of protection to the miners.

Surface Facilities - E01 Inspections						
	Travel Time	Other Time	Total On-Site	Citations Written On-Site	Citations Written Off-Site	Total Percent
% in FY 2008	15.48	16.31	64.22	2.94	3.99	100.00
% in FY 2009	15.15	22.77	56.76	1.31	5.33	100.00

Surface Mines - E01 Inspections						
	Travel Time	Other Time	Total On-Site	Citations Written On-Site	Citations Written Off-Site	Total Percent
% in FY 2008	23.66	18.19	53.79	1.99	4.36	100.00
% in FY 2009	23.32	20.08	51.40	1.45	5.20	100.00

Underground Mines - E01 Inspections						
	Travel Time	Other Time	Total On-Site	Citations Written On-Site	Citations Written Off-Site	Total Percent
% in FY 2008	16.98	18.52	63.59	0.59	0.91	100.00
% in FY 2009	21.01	13.99	62.28	1.07	2.72	100.00

**Audit Results**

The audit revealed positive findings in several categories, including the following:

1. Inspectors conducted inspection activities during the audits in a professional manner at all times.
2. Inspection work during the audits was highly commendable regarding on-site activities and determination of gravity, S&S, number of persons affected, and the proper use of enforcement tools.
3. Field Office Supervisor is conducting mine visits.
4. FAR/AA and Second Level Review documentation well documented.

The audit also revealed issues in several categories that require corrective actions, including the following:

1. Conditions observed and citations issued during this audit indicate that previous inspections were neither complete or thorough at the three mines audited. (FO/District) *See Attachments B & D*
2. Evaluations of S&S, gravity, negligence, and number of persons affected during past inspections did not appear commensurate with the type of violations cited. (FO)(District) [*See attachment C*]
3. There was insufficient enforcement focus during past inspections regarding guarding. (FO) [*20 Citations issued at the three operations for guarding hazards - See Attachment B*]
4. (b) (6) There was insufficient enforcement focus during past inspections. (District, FO) [Redacted] - Previous E01 inspection issuances = 7 citations & 0 S&S citations - Issuances during audit = 34 citations @ 41% S&S [Redacted] - Previous E01 (b) (6) inspection = 0 Cit/orders - Audit issuances 20 citations @ 50% S&S, [Redacted] Previous E01 inspection issuances = 17 citations & 2 S&S - Audit issuances = 22 citations - @ 22% S&S [Redacted] - owner- stated that never had an inspection like this with so many violations issued and equipment had been in this condition during other inspections in the past. He stated that the quarry had been operating since the 1940's when his grandfather started it.)
5. Peer Reviews did not contain means for follow-up and evaluation of the effectiveness of corrective actions. (HQ)(District)
6. Inspection site time: On-site observations, coupled with analysis of inspection data, also indicate a chronic problem with inspections and enforcement. With the exception of the E01 inspections conducted during this accountability audit (Event [Redacted], (Event [Redacted]), and the E01 inspection conducted during the second half of FY 2008 (Event 1001512), the number of hours spent on-site does not appear sufficient to conduct a complete inspection. A total of 31.5 inspection hours was charged at the [Redacted] during the Accountability Audit with only 3 inspection hours in FY 2007 and 21 inspection hours in FY 2008. [*Attachment E*]
7. Citations issued in error have been deleted from the system rather than issuing subsequent actions [vacates]. [Citation and Order Writing Handbooks states "When using the IPAL system, a citation or order that is issued in error must be vacated or

*modified by using Form 7000-3a."*] [Since 2006, the NC District has 209 issuances that have been deleted] the deletions were completed at the district office. Interview with the district manager verified that there were citations deleted at the district level.

The attached checklist addresses the findings of the audit. Positive issues as well as issues requiring action are covered in detail in the checklist.

Attachments:

- A. Audit Checklist
- B. Citations issued during the audit
- C. Citations with questionable evaluations
- D. Selected pictures of citations issued
- E. Regular inspections with inspection hrs & VPIH

1.	(b) (6)	56.9300a
2.	(b) (6)	56.14103c1
3.	(b) (6)	56.20011
4.	(b) (6)	56.14101a2
5.	(b) (6)	56.9300b
6.	(b) (6)	56.20013
7.	(b) (6)	46.11b4
8.	(b) (6)	46.11b4
9.	(b) (6)	56.4101
10.	(b) (6)	56.11012
11.	(b) (6)	56.20003a
12.	(b) (6)	56.14132a
13.	(b) (6)	56.9300b
14.	(b) (6)	56.20011
15.	(b) (6)	56.9300b
16.	(b) (6)	56.12004
17.	(b) (6)	56.14110
18.	(b) (6)	56.14107a
19.	(b) (6)	56.14107a
20.	(b) (6)	56.1802a
21.	(b) (6)	56.4601
22.	(b) (6)	47.44b
23.	(b) (6)	56.14115b
24.	(b) (6)	56.4101
25.	(b) (6)	56.12019

26.		56.12018
27.		56.12032
28.		56.12021
29.		56.12004
30.		56.12004
31.		56.12034
32.		56.11012
33.		56.14205
34.		56.14112b
35.		56.14107a
36.		56.12030
37.		56.14107a
38.		47.44b
39.		56.12018
40.		56.14207
41.		56.12004
42.		56.12004
43.		56.12018
44.		56.14205
45.		56.14100b
46.		56.12004
47.		56.14206b
48.		47.41a
49.		56.11012
50.		56.14112b
51.		56.14107a
52.		56.14205
53.		56.14107a
54.		56.14108
55.		56.14205
56.		56.12028
57.		56.12004
58.		56.14207
59.		56.14107a
60.		56.14100c
61.		56.12032
62.		56.12032
63.		56.14107a
64.		56.12030
65.		56.12004
66.		56.12004
67.		56.12018
68.		56.14112b
69.		56.14112b

70 [REDACTED] 56.14112b  
71 [REDACTED] 56.14112b  
72 [REDACTED] 56.14112b  
73 [REDACTED] 56.14112b

- F. Selected citations with apparently inconsistent evaluations
- G. Selected Photos taken during this audit

1. Evaluate supervisory review of inspection reports and documentation for completeness.
Adequate <input type="checkbox"/> Inadequate <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> Comments Below

District  Field Office  Mine ID  Date  2009

*A thorough review of the inspection reports is questionable regarding the evaluation of gravity and negligence. (Attachment C)*

2. Determine if supervisors address report deficiencies immediately

Adequate  Inadequate  Not Applicable  Comments Below

*When identified, report deficiencies appeared to be promptly corrected.*

3. Determine if supervisors are visiting each assigned mine at least annually

Adequate  Inadequate  Not Applicable  Comments Below

*Supervisor does visit operations within his field office but not all mines. Peru field office has 431 mining operations under its jurisdiction and would be impossible to visit each mine.*

4. Evaluate the quality of Field Activity Review reports (FARs)

Adequate  Inadequate  Not Applicable  Comments Below

*FAR's were completed during the last fiscal year.*

5. 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

Supervisors documented area's of deficiencies in FAR's and AA's, as well as providing positive feedback to inspectors. A concern exists that the supervisor's had not reviewed individual performance factors for enforcement levels prior to the accompanied activity. This would be evidenced by the enforcement levels of the field office as compared to conditions observed during the audits. There were no post-accompanied activity evaluation follow-up to determine if individuals had made the anticipated corrections identified in FARS, AA's and 2<sup>nd</sup> level reviews.

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*Reference: AH-07-III-7 Metal/Nonmetal Mine Safety and Health Supervisors Handbook, Chapter One, Section VI, part A-5, AH-09-III-1(1) Metal/Nonmetal Mine Safety and Health Supervisors Handbook, Chapter two, Part E, Bullet 5*

*Recommend Field office Supervisors conduct a follow up Accompanied Activity inspection, when deficiencies are noted to ensure deficiencies are corrected and to observe inspector performance have been implemented..*

7. Determine if supervisors are thoroughly reviewing mine files at least annually

Adequate  Inadequate  Not Applicable  Comments Below

8. Determine if Assistant District Manager is holding supervisor accountable for general mine visits, FARs, and accompanied activities

Adequate  Inadequate  Not Applicable  Comments Below

All FARs and AA's were completed during the last complete fiscal year.

11. Determine if ADMs and DMs are visiting mines with poor compliance at least monthly

Adequate  Inadequate  Not Applicable  Comments Below

*No visits were conducted in the Peru Field Office during this FY. Supervisor stated that the DM and ADM only visited the field office during job fairs.*

17. Determine if supervisors are monitoring inspector time and activity documentation to ensure proper use of time by inspector

Adequate  Inadequate  Not Applicable  Comments Below

Supervisory oversight of inspection times is generally good, with the exception of time spent in the "Other" category, which is higher than the national average.

*Recommendation - Metal Non Metal districts should consider having inspection personnel issue citations while on-site ("reasonable promptness"). This would reduce "other" time and increase inspector presence on-site. Issuing citations while on-site would also provide the operator with*

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*written notification of the nature and seriousness of violations observed by the inspector as well as the termination due date.*

*Reference - Federal Mine Safety and Health Act of 1977, Section 104(a)*

20. Determine if supervisors are adequately evaluating the level of enforcement by visiting each producing mine

Adequate  Inadequate  Not Applicable  Comments Below

*This field office has 431 mining operation and would be impossible to visit each producing mine.*

25. Evaluate inspector/specialist knowledge of documentation required and process for completing PKW Forms.

Adequate  Inadequate  Not Applicable  Comments Below

26. Evaluate the district's process for performing Possible Knowing/Willful (PKW) reviews and initiating or denying special investigations

Adequate  Inadequate  Not Applicable  Comments Below

29. Determine if complete and thorough inspections are being conducted and adequately documented

Adequate  Inadequate  Not Applicable  Comments Below

Observations made during the audits indicated that complete and thorough inspections had not been made in the past. During this audit, violations were observed that appeared to have existed for extended periods of time at each operation. (See photos in Appendix D)

(b) [Redacted]

With the exception of the E01

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inspections conducted during this accountability audit (Event ) , (Event  and the E01 inspection conducted during the second half of FY 2008 (Event  a  
A total  inspection hours was charged at the  during the Accountability Audit with  hours in FY 2007 and 21 inspection hours in FY 2008.

In addition, a total of 23 citations have been issued during E01 inspections [ from FY 2007 to FY 2009. Of that number, 20 were issued during this audit at the  A total of 47 Citations were issued at the  during FY 2007 - 2009 with 34 issued during the Accountability audit.

Some areas traveled during the mine site inspection a  were not documented in the previous inspection notes. Citations (  and  (See attachment C) are examples of citations issued during the audit for conditions that appeared to have existed in previous inspections. The top of the #19 and #20 bins was not documented as an area traveled in the previous inspection when operational conditions were the same as during the audit at this mine site. These issues support that not all areas where persons work or travel are being adequately inspected on previous inspections.

*Reference MSHA handbook PH09-IV-1, Chapter 5, regular inspection procedures, section I, page 25.*

*Recommendation: Supervisors periodically perform follow-up inspections for mines with zero issuances to ensure enforcement levels are inline with policy and the overall safety of the miners is addressed.*

*Action Required - Management must ensure Inspections must be thorough and complete. All violations must be cited.*

*Reference - MSHA Handbook, PH09-IV-1, Chapter 5, Regular Inspection Procedures, Section I, Page 25.*

*Reference - Federal Mine Safety and Health Act of 1977, Section 104(a).*

31. Determine that the inspector spent sufficient time on off-shifts and on weekends

Adequate  Inadequate  Not Applicable  Comments Below

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According to information gathered from MSHA's database and verified by the mine operator,  &  works on one shift per day, five days per week.

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

Adequate  Inadequate  Not Applicable  Comments Below

36. Determine if the amount of time expended on each inspection activity and area of the mine is sufficient to accomplish inspection goals

Adequate  Inadequate  Not Applicable  Comments Below

On-site observations of conditions and practices at this mine, combined with an analysis of data from previous inspections, indicate a long-term problem with inspections and enforcement. Other than the E01 inspection conducted during this audit (Event  and an E01 inspection conducted during the second half of FY 2008 (Event , the number of hours

*Action Required - Supervisors and managers must monitor inspection time distribution to assist in determining if sufficient time is being spent on-site during inspection work.*

*Reference -*

37. 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

A review of citations issued during the two most recent E01 inspections at the subject mine did not present sufficient information to make a determination regarding this item. Data from E01 inspections conducted during all of FY 2007 to present revealed

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only 3 enforcement actions.  Data from E01 inspections conducted during all of FY 2007 to present revealed only 13 enforcement actions   
  
(See Attachment C)

38. Accompany and evaluate inspector's imminent danger run  
Adequate  Inadequate  Not Applicable  Comments Below

39. Check adequacy of preshift/onshift examinations  
Adequate  Inadequate  Not Applicable  Comments Below

41. Evaluate operator's workplace examinations  
Adequate  Inadequate  Not Applicable  Comments Below

The number of citations issued at  and  indicate that adequate work place examinations are not being conducted. [34 citations @  20 citations @  19 Citations @  was cited under 56.18002(a) once each during the accountability audit in July and never previously.  was cited last in 2006 but was also cited 9 times previously since 1997]

60. Determine if all required record books are adequately completed and in compliance with applicable standards  
Adequate  Inadequate  Not Applicable  Comments Below

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62. Examine mine bulletin board and evaluate adequacy of all required postings

Adequate  Inadequate  Not Applicable  Comments Below

64. Determine if approved plans address and are compatible with mining conditions and equipment

Adequate  Inadequate  Not Applicable  Comments Below

68. 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-level reviews do not adequately address follow-up and evaluation of the success or failure of corrective actions.

*Recommendation – Follow-up, evaluation, and measurement of corrective actions is an important part of the review process, and should always be a part of the review report.*

*Reference – Accountability Program Handbook (AH08-III-4), Page 8*

72. Determine if approved plans and the Uniform Mine File books are addressed during each Peer Review

Adequate  Inadequate  Not Applicable  Comments Below

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75. Evaluate approved training plan after discussion with miners  
Adequate  Inadequate  Not Applicable  Comments Below

77. Evaluate the two most current completed E01 (regular) inspection reports (two quarters)  
Adequate  Inadequate  Not Applicable  Comments Below

Inspections did not appear to be thorough or complete, and did not reflect a level of enforcement commensurate with the type and nature of violations cited. (See narrative and references in Items 5, 29, and 37 above.)

80. Determine if 104(d) tracking system is in place at the office being audited, and is being kept up to date  
Adequate  Inadequate  Not Applicable  Comments Below

114. 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

This issue appears to be common to all Metal/Nonmetal districts and should be addressed at the headquarters level.

Metal/Nonmetal does not have a uniform process for accurately tracking supervisory/managerial mine visits. Each district has its own method for tracking these visits, and some districts track more information than others.

*Recommendation - Metal/Nonmetal should adopt the same type of spreadsheet used by coal to adequately document supervisory and managerial mine visits.*

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117. Are MSHA Forms 7000-1 accurately reviewed for proper information and potential violations, unsafe practices, or conditions?

Adequate  Inadequate  Not Applicable  Comments Below

118. Determine if inspectors have sufficient equipment and supplies to conduct thorough inspections.

Adequate  Inadequate  Not Applicable  Comments Below

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

Adequate  Inadequate  Not Applicable  Comments Below

120. Determine if E01 inspections at surface mines includes an observation/evaluation of blast hole drilling, loading, and blasting operations.

Adequate  Inadequate  Not Applicable  Comments Below

Operations visited did not conduct blasting during the audit

121. Determine if manpower at the field office is sufficient to ensure adequate, complete inspections, investigations, and other activities.

Adequate  Inadequate  Not Applicable  Comments Below

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District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order U.S. Department of Labor  
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Section I--Violation Data	
1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>
4. Served To <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
	5. Operator <u>[REDACTED]</u>
	7. Mine ID <u>[REDACTED]</u>
(Contractor)	
8. Condition or Practice	8a. Written Notice (103g)

There is no berm being provided for a distance of approximately 20 ft with a drop off of approximately 2 ft on the elevated stripper ramp.

A person is exposed to the hazard of a vehicle overturning or endangering persons in equipment.

Loaders, haul, trucks, and small vehicles use this elevated stripper ramp of a morning to travel down to the plant.

See Continuation Form (MSHA Form 7000-3a)			
9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <u>56.9300a</u>

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: <u>001</u>	
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 <u>104a</u>		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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section III--Termination Action	
17. Action to Terminate <u>A berm has been provided for the elevated stripper ramp.</u>	

18. Terminated	A. Date <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section IV--Automated System Data		
19. Type of Inspection <u>E01</u>	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill <u>P</u>
22. <u>[REDACTED]</u>	23. AR Number <u>[REDACTED]</u>	

MSHA... 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.

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Mine Citation/Order

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Section I--Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
7. Mine ID		(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The operators compartment of the S1900 International drill truck unit #28221 has loose materials on the floor. There is plastic a soda bottle, and two other round containers.

A person is exposed to a hazard of the loose materials on the floor impairing the safe operation of the equipment.

It is apparent by the amount and type of material, that this truck has been used in this condition.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.14103c1
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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 type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" 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 104g		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	B. Time (24 Hr. Clock)

Section III--Termination Action

17. Action to Terminate The loose material has been removed from the operators compartment of the S1900 International drill truck unit # 28221.

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

Section IV--Automated System Data

19. Type of Inspection	E01	20. Event Number	21. Primary or Mill P	23. AR Number

MSHA 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.

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Mine Citation/Order U.S. Department of Labor  
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<b>Section I - Violation Data</b>			
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
	07/07/2009	0900	[REDACTED]
4. Served To		5. Quantity	
[REDACTED]		[REDACTED]	
8. Condition or Practice			8a. Written Notice (103g)

The barricade with warning sign provided for the top of the open dig face next to the stripper ramp is not positioned to warn persons from all approaches. The barricade with warning sign is above the entrance that is above a drop off of approximately 46 ft.

A person is exposed to the hazard of not recognizing this condition.

Only persons aware of this condition are required to be in this area.

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			56.20011

<small>See Continuation Form (MSHA Form 7000-3a)</small>			
<b>Section II - Inspector's Evaluation</b>			
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 checked="" type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104a		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		E. Citation/Order Number	
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		F. Dated Mo Da Yr	
15. Area or Equipment			

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

**Section III - Termination Action**

17. Action to Terminate The barricade with warning sign located next to the stripper ramp has been positioned so that can be seen from all approaches.

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

<b>Section IV - Automated System Data</b>			
19. Type of Inspection	20. Event Number	21. Primary or Mill	
[REDACTED]	[REDACTED]	P	
			23. AR Number [REDACTED]

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  
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 Office of Accountability

District  Field Office  Mine ID  Date  2009

Mine Citation/Order

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



Section I--Violation Data

1. Date	<input type="text" value="[REDACTED]"/>	3. Citation/Order Number	<input type="text" value="(6)"/>
5. Operator	<input type="text" value="[REDACTED]"/>		
7. Mine ID	<input type="text" value="[REDACTED]"/>		

8. Condition or Practice 8a. Written Notice (103g)

The parking brake provided for the WA600 Kamatsa'u front end loader was not capable of holding on the maximum grade it travels when tested.

A person is exposed to the hazard of being traveled over.

This front end loader was being used at the time of this inspection.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14101a2
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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  104a  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  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 (see instructions)  20. Event Number  21. Primary or Mill

22. S  23. AR Number

MSHA Form 7000-3a (Rev. 10-2008) 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.

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Office of Accountability

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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Section I--Violation Data  
1. Date [REDACTED] 2. Time (24 Hr. Clock) [REDACTED] 3. Citation/Order Number [REDACTED]

4. [REDACTED] 5. [REDACTED] 6. [REDACTED] 7. Mine ID [REDACTED] (Contractor)

8. Condition or Practice 8a. Written Notice (103g)

There is no berm being provided for the elevated roadway located at the south property line over the electrical cables for approximately 29 ft with a drop off to grade below of approximately 3ft.

A person is exposed to the hazard of a vehicle overtuning or endangering persons in equipment.

Loaders, haul trucks, and small vehicles travel this elevated roadway to travel stockpiles and to the plant.

See Continuation Form (MSHA Form 7000-3a)

9. Violation  A. Health Safety Other  B. Section of Act  C. Part/Section of Title 30 CFR 56.9300b

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 104a 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 [REDACTED] Yr [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section III--Termination Action

17. Action to Terminate A berm has been provided for the elevated roadway located at the south properly line over the electrical lines.

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

Section IV--Automated System Data

19. Type of Inspection E01 20. Event Number [REDACTED] 21. Primary or Mill P 22. [REDACTED] 23. AR Number [REDACTED]

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District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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**Section I--Violation Data**

1. Date	Mo Da Yr	12 Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID			(Contractor)
[REDACTED]			[REDACTED]

**8. Condition or Practice** **8a. Written Notice (103g)**

There is waste food in a plastic bag located in the break trailer not in a receptacle with cover as required.

A person is exposed to the hazard of un-sanitary conditions.

A small amount of food was in the plastic bag, and had been placed there only that morning.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			56.20013

**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: Ycs  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 104a 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)

[REDACTED] [REDACTED]

**Section III--Termination Action**

17. Action to Terminate The plastic bag was put in a receptacle with a cover.

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

[REDACTED] [REDACTED]

**Section IV--Automated System Data**

19. Type of Inspection (activity code)	E01	20. Event Number	21. Primary or Mill
22. Sign	[REDACTED]	[REDACTED]	P
23. AR Number			[REDACTED]

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.

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Section I--Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
7. Mine ID		(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

The over-the-road truck drivers were not being provided with site-specific hazard training. The mine operator was not aware of the training requirements. The mine operator must withdraw the over-the-road truck drivers from the mine until they have received the required training.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			46.11b4

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  104g  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 Over-the-road truck drivers.

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

Section III--Termination Action

17. Action to Terminate The over-the-road truck drivers have received the required site-specific hazard awareness training.

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

Section IV--Automated System Data

19. Type of Inspection	20. Event Number	21. Primary or Mill	22. S	23. AR Number
E01		P		

MSHA, 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 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.

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District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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Section I--Violation Data

1. Date [REDACTED]	2. Time (24 Hr. Clock) [REDACTED]	3. Citation/ Order Number [REDACTED]
7. Mine ID [REDACTED]		(Contractor) <input type="checkbox"/>

The over-the-road truck drivers were not being provided with site-specific hazard awareness training. The mine operator was aware of the training requirements. Superintendent Ron Linder stated that he received signage the day before but did not put them up. Superintendent Linder engaged in aggravated conduct constituting more than ordinary negligence in that he was aware of the signs had arrived the day before but let the over-the-road truck drivers in the mine without Site Specific Hazard awareness training. This violation is an unwarrantable failure to comply with a mandatory standard.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	46.11b4
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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 104d 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

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

Section IV--Automated System Data

19. Type of Inspection E01 20. Event Number [REDACTED] 21. Primary or Mill P

23. AR Number [REDACTED]

MSHA, pursuant to 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 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.

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District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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Section I--Violation Data	
1. Date <u>[REDACTED]</u> 12 Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
6. <u>[REDACTED]</u>	7. Mine ID <u>[REDACTED]</u> (Contractor) <input type="checkbox"/>
8. Condition or Practice <u>[REDACTED]</u> 8a. Written Notice (103g) <input type="checkbox"/>	

There is no sign being provided prohibiting smoking and open flames for the oxygen and acetylene tanks in a cabinet located at the primary crusher.

A person is exposed to the hazard of a fire or it's affects.

Persons are required to work in this area and are allowed to smoke in this area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.4101

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 type="checkbox"/> Fatal <input checked="" 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 104g <input type="checkbox"/>		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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section III--Termination Action

17. Action to Terminate A sign has been provided for the oxygen and acetylene tanks in a cabinet located at the primary crusher.

18. Terminated	A. Date <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section IV--Automated System Data

19. Type of Inspection (act) <u>[REDACTED]</u>	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill P
22. Sign <u>[REDACTED]</u>	23. AR Number <u>[REDACTED]</u>	

MSHA Form [REDACTED] is 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 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  
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District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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Section I--Violation Data		
1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>

4. Signed To <u>[REDACTED]</u>	<u>[REDACTED]</u>	(Contractor) <input type="checkbox"/>
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8. Condition or Practice	8a. Written Notice (103g) <input type="checkbox"/>
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There is a opening at the primary crusher fine chute at the top of the stairs.  
 A person is exposed to the hazard of falling into the opening.  
 Persons are not required to be in this area during normal mining cycle.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.11012
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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 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"/>
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12. Type of Action	104a	13. Type of Issuance (check one)	Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>	Written Notice <input type="checkbox"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section III--Termination Action

17. Action to Terminate The opening located at the primary crusher fine chute at the top of the stairs has been closed.

18. Terminated	A. Date <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section IV--Automated System Data

19. Type of Inspection (a)	E01	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill P
22. Sign <u>[REDACTED]</u>	23. AR Number <u>[REDACTED]</u>		

MSHA Form 7000-3a (Rev. 05/2008) 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.

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Mine Citation/Order U.S. Department of Labor  
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Section I--Violation Data

1. Date	2. Time	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID		(Contractor)
or Practice		8a. Written Notice (103g)

There is a build up of material on the elevated walkway located at the primary crusher. The material is above the toe boards.

A person is exposed to the hazard of falling through the walkway.

Persons are not required to be in this area during normal mining cycle.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.20003a
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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 104g 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)
	[REDACTED]	[REDACTED]

Section III--Termination Action

17. Action to Terminate The material has been removed from the walkway at the primary crusher.

18. Terminated	A. Date	B. Time (24 Hr. Clock)
	[REDACTED]	[REDACTED]

Section IV--Automated System

19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill
E01	[REDACTED]	P
22. Signal	23. AR Number	
[REDACTED]	[REDACTED]	

MSHA Form 7000-3a 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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009  
(b)

Mine Citation/Order

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



Section I--Violation Data	
1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>
3. Citation/Order Number <u>[REDACTED]</u>	
7. Mine ID <u>[REDACTED]</u>	
(Contractor)	

8. Condition or Practice 8a. Written Notice (103g)

The horn provided for the Case 580L back hoe unit # 28541 is not being maintained in a functional condition.

A person is exposed to the hazard of being traveled over by unexpected start up and movement of the back hoe.

The Case back hoe was not being used at the time of inspection.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.14132a
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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 104g 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 [REDACTED] F. Dated [REDACTED] Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

19. Type of Inspection (activity code) <u>E01</u>	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill <u>P</u>
22. <u>[REDACTED]</u>		23. AR Number <u>[REDACTED]</u>

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  Field Office  Mine ID  Date  2009

Mine Citation/Order

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



Section I - Violation Data	
1. Date <input type="text" value=""/>	3. Citation/Order Number <input type="text" value=""/>
4. Severity <input type="text" value=""/>	6. <input type="text" value=""/>
7. Mine ID <input type="text" value=""/>	(Contractor) <input type="checkbox"/>

8. Condition or Practice  8a. Written Notice (103g)

The rails provided for the truck scale are not at least mid axel height of the largest self-propelled mobile equipment using this elevated roadway.

A person is exposed to the hazard of a vehicle overturning or endangering persons in equipment.

Over-the-road trucks use this scale daily during normal mining operations at slow speeds which is posted at the scale.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.9300b
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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  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  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)  20. Event Number  21. Primary or Mill

22. Sign  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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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Section I--Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID		(Contractor)
Description of Practice		Ca. Written Notice (100g)

There is no barricade or warning sign provided at the top of an open dig face, located at North Top Bench.

A person is exposed to the hazard of not recognizing this condition.

Only persons aware of this condition are required to be in this area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.20011
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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 104g		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	B. Time (24 Hr. Clock)
	[REDACTED]	[REDACTED]

Section III--Termination Action

17. Action to Terminate A berm has been provided across the entrance at the top of the open dig face located at North Top Bench.

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

Section IV--Automated System Data

19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill	23. AR Number
E01	[REDACTED]	P	[REDACTED]

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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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Section I--Violation Data

1. Date Mo. Da. Yr. [REDACTED]	2. Time (24 Hr. Clock) [REDACTED]	3. Citation/ Order Number [REDACTED]
7. Mine ID [REDACTED]		(Contractor)

8. Condition or Practice

8a. Written Notice (102g)

The berm provided for the elevated roadway located by the South Water Hole is not at least mid-axle of the largest self-propelled mobile equipment which usually travels the roadway for a distance of approximately 28 ft and a drop off to grade below of approximately 3 ft.

A person is exposed to the hazard of a vehicle overturning or endangering persons in equipment.

Loaders, haul trucks, and small vehicles use this elevated roadway during normal mining cycle. The roadway is wide at this area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.9300b
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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: (0)

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

12. Type of Action 1 (4g)

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 [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
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Section III--Termination Action

17. Action to Terminate The berm has been raised to at least mid-axle height of the largest self-propelled mobile equipment which usually travels the roadway.

18. Terminated	A. Date [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
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Section IV--Automated System Data

19. Type of Inspection (activity)	E01	20. Event Number [REDACTED]	21. Primary or Mill P
22. Sign [REDACTED]	23. AR Number [REDACTED]		

MSHA Form 7000-3a (Rev. 10/2008) is required under 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 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 North Central District Field Office Peru, Illinois Mine ID( [REDACTED] ) Date [REDACTED] 2009

Mine Citation/Order

U.S. Department of Labor  
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Section I - Violation Data

1. Date	[REDACTED]	3. Citation/Order Number	[REDACTED]
7. Mine ID		(Contractor)	

8. Condition or Practice 9a. Written Notice (153g)

The energized 480 volt electrical cable provided for the C34 Belt conveyor located at the wash plant has exposed inner conductors. The exposed inner conductors are approximately 5 ft 8 in above grade.

A person is exposed to the hazard of contacting energized inner conductors.

There is access to this area and the ground conditions are wet.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.12004
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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 104a 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 [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section III - Termination Action

17. Action to Terminate The 480 volt electrical cable provided for the C34 belt conveyor located at the wash plant has been repaired.

18. Terminated A. Date [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section IV - Automated System Data

19. Type of Inspection (a) E01 20. Event Number [REDACTED] 21. Primary or Mill P

22. S [REDACTED] 23. AR Number [REDACTED]

MSHA... 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009  
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Mine Citation/Order U.S. Department of Labor  
 Mine Safety and Health Administration 

Section I--Violation Data	
1. Date <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
4. Served To <u>[REDACTED]</u>	
7. Mine <u>[REDACTED]</u> (Contractor)	
8. Condition or Practice	
8a. Written Notice (103g)	

There is nothing being provided to protect the miner from falling material that has build up on the cross braces of the C10 belt conveyor. This belt conveyor is approximately 20 ft above grade.

A person is exposed to the hazard of falling material.

Footprints were observed in the area at the time of the inspection.

See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>			
9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR <u>56.14110</u>

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 type="checkbox"/> Fatal <input checked="" type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: <u>001</u>	
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 <u>104a</u>		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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>

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) <u>E01</u>	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill <u>P</u>
22. Sign <u>[REDACTED]</u>		23. AR Number <u>[REDACTED]</u>

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United States Department of Labor  
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Office of Accountability

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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Section I--Violation Data		
1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
4. Location <u>[REDACTED]</u>		7. Mine <u>[REDACTED]</u>
6. Condition of Practice <u>[REDACTED]</u>		8a. Written Notice (153g) <u>[REDACTED]</u>

There is no guard provided for the spring base and the pinch point next to the spring base located on the elevated walkway of the Deister screen on both sides.

A person is exposed to the hazard of contacting moving machine parts.

Persons are not required to be in this area when plant is operating.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14107a
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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 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 checked="" type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104g		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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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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 E01	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill P
22. <u>[REDACTED]</u>	23. AR Number <u>[REDACTED]</u>	

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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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. Inspected To	5. Operator		6. Mine ID
			(Contractor)
7a. Written Notice (103g)			

There is no guard provided for the pinch point next to the spring base on the elevated walkway of the wash plant.

A person is exposed to the hazard of contacting moving machine parts.

Persons are not required to be on the elevated walkway when the plant is operating.

9. Violation				A. Health Safety Other		B. Section of Act		C. Part/Section of Title 30 CFR		56.14107a	
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 checked="" type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>											
12. Type of Action 104a				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)											
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 P			
22. Sign								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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

Section I - Violation Data				
1. Date	2. Time		3. Citation/ Order Number	
4. Subject To			5. Operator	
			(Contractor)	
8. Condition or Practice			8a. Written Notice (103g)	

A competent person designated by the mine operator was not doing a proper workplace exam for conditions which could adversely affect safety or health. This is evidenced by the citations issued this inspection.

See Continuation Form (MSHA Form 7000-3a)			
9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			56.18002a

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: 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 104a			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)

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)	20. Event Number	21. Primary or Mill	
E01		P	
22. Sign			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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date <u>[REDACTED]</u>	Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/ Order Number <u>[REDACTED]</u>
7. Mine ID <u>[REDACTED]</u>		(Contractor) <input type="checkbox"/>
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The guards for the self cleaning tail pulley on the 24x70 Cedar rapids conveyor were not securely in place to prevent contact. The rubber belting type guards on both sides of the tail pulley were attached at the top but not at the bottom. The both guard were 8 inches wide 24 inches long and 24 inches from ground. This condition exposes miner lost work day/restricted duty type hazards. The conveyor was not in operation at the time of the inspection, it was acknowledged they were like this the last time the conveyor ran.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.14112b
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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 checked="" 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 104a		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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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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 <u>[REDACTED]</u>	21. Primary or Mill P
22. S <u>[REDACTED]</u>		23. AR Number <u>[REDACTED]</u>

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  Field Office  Mine ID  Date  009

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

Section I--Violation Data		3. Citation/Order Number	
Date	Mo Da Yr		
4. Sent To		7. Mine ID	
		(Contractor)	

8. Condition or Practice 8a. Written Notice (103g)

There were 2 one gallon plastic containers found without labeling containing the appropriate information on it. The containers were located in the storage compartment of the utility bed on the Dodge 3500 Service Truck IL. LIC. 80798b and contained an oil-like substance And Diesel like substance. One container was full and one was 1/2 full of liquid. The purpose of the label is to reduce the possibility of injury or illness by ensuring that each miner is provided correct information about the chemical hazard and appropriate protective measures to be taken. This condition exposes miners to loss work day and/or restricted duty type hazards.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			47.41a

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  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	B. Time (24 Hr. Clock)

Section III--Termination Action

17. Action to Terminate The 2 one gallon plastic containers located in the storage compartment of the utility bed on the Dodge 3500 Service Truck IL. LIC. 80798b are now labeled with the common name of contents.

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

Section IV--Automated System

19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill
E01		P
22. Sk	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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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. Sent To [REDACTED]		5. [REDACTED]
		7. Mine ID [REDACTED] (Contractor)

**8. Condition or Practice** **8a. Written Notice (103g)**

The splice found in an energized 460 volt power cable for the drive motor on the oversize conveyor was not properly made. The splice was not insulated to a degree at least equal to that of the original, was not sealed to exclude moisture, not provided with damage protection as near as possible or equal to that of the original, including good bonding to the outer jacket, and the inner conductors were not mechanically strong with electrical conductivity. This condition exposing miners working or traveling in the area to fatal electrocution hazard associated with 460 volt systems. The cable was lying on the ground inside the main frame of the conveyor.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.12013
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**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 104g

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

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 [REDACTED]	21. Primary or Mill P	22. [REDACTED]
			23. AR Number [REDACTED]

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 2126, 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  Field Office  Mine ID  Date  2009

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

Section I--Violation Data	
1. Date <input type="text" value=""/>	3. Citation/Order Number <input type="text" value=""/>
2. Time (24 Hr. Clock) <input type="text" value=""/>	7. Mine ID <input type="text" value=""/>
(Contractor) <input type="checkbox"/>	

8. Condition or Practice 8a. Written Notice (103g)

Four Haul trucks (two semi-trailer and two dump trucks) were found parked on a grade unattended with out wheels chocks or turn into a bank. The trucks were parked on the ready line south of the maintenance shop at the time of the inspection. The parking and service brakes were tested and were working properly. Should the truck suddenly move and strike a miner working or traveling in its path it could result in fatal bone crushing injuries. There were miners working and doing equipment check in the area and other mobile equipment was observed in the area at the time of the inspection. The mine operator acknowledge knowing of the requirements of the standard and knew of the condition cited.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <p style="text-align: center;">56.14207</p>
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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  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  B. Time (24 Hr. Clock)

Section III--Termination Action

17. Action to Terminate Wheel chocks were provided on all four of the trucks parked south of the shop.

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

Section IV--Automated System Data

19. Type of Inspection (activity code) <input type="text" value="E01"/>	20. Event Number <input type="text" value=""/>	21. Primary or Mill <input type="text" value="P"/>	23. AR Number <input type="text" value=""/>
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MSHA Form 7000-3, Apr 08 (revise) 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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date	[REDACTED]	12. Time (24 Hr. Clock)	[REDACTED]	3. Citation/Order Number	[REDACTED]
(Contractor)					

8. Condition or Practice

8a. Written Notice (103g)

The energized 110 volt power cable being used to power the battery charger had a place in the cable where the inner insulated conductors were exposed to mechanical damage and contact. This condition exposes miners working or traveling in the area to shock and/or burn hazards associated with 110 volt systems. The cut in the cable was approximately eighteen inches from the female plug of the cable and was put into use with out a check of the cable for defects.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.12004
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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 type="checkbox"/> D. High <input checked="" type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>					
12. Type of Action 104g			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 [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
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Section III--Termination Action

17. Action to Terminate The cable was taken out of service and replace another 110 volt power cable in good condition.

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	P
22. [REDACTED]	23. AR Number [REDACTED]				

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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date <u>[REDACTED]</u> Mo Da Yr	2. Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
4. Served to <u>[REDACTED]</u>	5. Operator <u>[REDACTED]</u>	
(Contractor)		

8. Condition or Practice [REDACTED] 8a. Written Notice (103g)

The 230 volt power cable for the sump pump had a place in the cable where the inner conductor were exposed to contact and mechanical damage. The place in the cable was five inches long and was twenty-four inches from ground, and twenty-seven inches from a walkway on both side of the cable. This condition exposes miners working or traveling in the area to fatal electrocution hazards associated with 230 volt systems. The cable is located next to the ready line where miners are daily for use and checking the mine mobile equipment. Mine management acknowledge knowing of the condition and the standard cited.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.12004

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 104a

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 [REDACTED] Mo Da Yr

B. Time (24 Hr. Clock) [REDACTED]

Section III--Termination Action

17. Action to Terminate

18. Terminated

A. Date [REDACTED] Mo Da Yr

B. Time (24 Hr. Clock) [REDACTED]

Section IV--Automated System Data

19. Type of Inspection (activity code) E01

20. Event Number [REDACTED]

21. Primary or Mill P

23. AR Number [REDACTED]

MSHA Form 7000-3a (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 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  Field Office  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 checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr [REDACTED]	3. Citation/Order Number [REDACTED]
4. Operator [REDACTED]		(Contractor)
Justification for Action 6		

The sump pumps 230 volt system was locked and tagged out of service until repairs could be made.

See Continuation Form

Section III--Subsequent Action Taken					
B. Extended To	A. Date [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
Section IV--Inspection Data					
9. Type of Inspection	E01	10. Event Number	[REDACTED]	11. AR Number	[REDACTED]
		12. Date	[REDACTED]	Yr	[REDACTED]
		13. Time (24 Hr. Clock)	[REDACTED]		[REDACTED]

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

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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

Section I—Violation Data

1. Date	Yr	Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID			(Contractor)
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

A control box with ten 110 volt breakers, and three 230 volt control box were not labeled to indicate what unit they control. The control boxes were located at the power center located at the ready line south of the shop. Identification could not be determined by location. During maintenance procedures or an emergency, the proper switch may not be turned off and locked out to prevent shock and/or untimely movement of the controlled device. Miners are in this area daily to the check and operate the mobile equipment of the mine.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.12018
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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 104a 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

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. Sign	[REDACTED]	23. AR Number	[REDACTED]

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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

Section I—Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]

(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

The blue 110 volt power cable located at the power center at the mobile equipment ready line had a melted prong in the female plug. The metal prong extended out past the insulation of the plug. The cable (14/3) had been used to supply power for the block heaters (15 amp rated.) for the mobile equipment parked at the ready line. This condition exposes miners working or traveling in the area to shock and or burn hazards associated with 110 volt systems. The cable was hanging approximately five feet from an energized outlet. The cable was not marked defective or disabled to prevent usage. Miners are in the area of the ready line daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <p style="text-align: center;">56.14205</p>
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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 104a 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)

A. Date [REDACTED] B. Time [REDACTED]

Section III—Termination Action

17. Action to Terminate The blue 110 volt power cable was taken out of service dismantled and destroyed.

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

A. Date [REDACTED] B. Time [REDACTED]

Section IV—Automated System Data

19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill	23. AR Number
E01	[REDACTED]	P	[REDACTED]

MSHA Form 7000-3a (Rev. 10-2008) is required by 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I—Violation Data

1. Date <u>Mo Da Yr</u>	2. Time <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
4. Served To <u>Tom Lee, Foreman</u>		5. Operator <u>[REDACTED]</u>
6. Mine ID <u>[REDACTED]</u>		7. Mine ID <u>[REDACTED]</u>

(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

The John Deere 824J front end loader when tested was found to be able to start in gear. The machine was tested and would start in forward or reverse. The all the other start-up safety feature were tested and found to be in working condition at the time of the inspection. Should one of the interlocking safety feature fail during start-up and a miner in the area is struck could result in fatal bone crushing injuries. The machine was parked on the ready line at the time of the inspection and is a spare machine used when needed in various areas of the mine.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <u>56.14100b</u>
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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 104a 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) [REDACTED]

Section III—Termination Action

17. Action to Terminate b

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

Section IV—Automated System Data

19. Type of Inspection (activity code) <u>E01</u>	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill <u>P</u>
22. Sig <u>[REDACTED]</u>	23. AR Number <u>[REDACTED]</u>	

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  Field Office  Mine ID  Date  2009

Mine Citation/Order

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



Section I--Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
7. Mine ID		(Contractor)

8. Condition or Practice

8a. Written Notice (103g)

The Over head Type Aluminum Conductors (Triplex Cable) that crosses the mine mobile equipment ready line was not protected from mechanical. The 230 energized cable was one inch below the cab, 12 inches below the exhaust pipe of the muffler and 48 inches from the frame of the motor compartment of the Komatsu WA500 loader parked under the cable. This condition exposes miner to fatal electrocution type hazards associated with 230 volt systems. The mobile equipment operators do pre-operational check and enter and exit the cab, and take the equipment from the area and re-park when they finish using the equipment daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.12004
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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 type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" 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 104a		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

18. 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	P	23. AR Number	
22.							

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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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) Mo Da Yr [REDACTED]	3. Citation/Order Number [REDACTED]
4. Extended To [REDACTED]		
5. Mine ID [REDACTED]		(Contractor)
6. Action [REDACTED]		

The mobile equipment was removed from the area and the area coned off to allow time for the condition to be corrected.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]	<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. IAD Number [REDACTED]	12. Date [REDACTED] Yr [REDACTED]	13. Time [REDACTED]
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MSHA Form 7000-3a, Mar 85 (revised)

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

District North Central District Field Office Peru, Illinois Mine ID/ [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
7. Mine ID <u>[REDACTED]</u>		(Contractor) <input type="checkbox"/>
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Case 300 Tractor located south east of the mobile equipment fueling area was parked unattended with the fail motor attachment in the raised position. The attachment was 14 inches from ground with out any support. The attachment is 75 inches long. This condition exposes miner working or traveling in the area to lost work day/restricted duty type hazards. The tractor was parked in an area that was accessible to miner's and where the paving equipment is located, mine personal are not normally in the area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14206b
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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 checked="" 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 104a		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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section III--Termination Action

17. Action to Terminate The fail motor attachment on the Case 300 tractor was support in the raised position with stand jacks on both side.

18. Terminated	A. Date Mo Da Yr <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill P
22. Signer <u>[REDACTED]</u>		23. AR Number <u>[REDACTED]</u>

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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
4. Served To <u>[REDACTED]</u>		7. Mine ID <u>[REDACTED]</u>
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

There were 2 two gallon and one three gallon plastic containers found without labeling containing the appropriate information on it. The containers were located in the Red box van south east of the mobile equipment fueling area and contained with what appeared to be a diesel fuel type substance. Each container was 1/2 full or less with liquid. The purpose of the label is to reduce the possibility of injury or illness by ensuring that each miner is provided correct information about the chemical hazard and appropriate protective measures to be taken. This condition exposes miners to loss work day and/or restricted duty type hazards. The red box van had the overhead door closed and located in an area not normally access by miners.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	47.41a
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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 checked="" 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 104a		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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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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 <u>[REDACTED]</u>	21. Primary or Mill P
22. S <u>[REDACTED]</u>	23. AR Number <u>[REDACTED]</u>	

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  Field Office  Mine ID  Date  2009

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

Section I—Violation Data		
1. Date <input type="text" value=""/>	2. Time (24 Hr. Clock) <input type="text" value=""/>	3. Citation/Order Number <input type="text" value=""/>
7. Mine ID <input type="text" value=""/>		(Contractor) <input type="checkbox"/>
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The elevated area next to the surge bin was not provided with barriers, railing or guarding to prevent a person from falling through the opening to the ground below. The unguarded area was 36 inches wide on the left side 54 inches on the right side with fall to ground of 37 inches. Should a miner fall from this area it could result in broken bones, bruises, cuts or sprains and/or strains injuries.  
 The elevated area is accessible from both side, miners and equipment operators and truck drivers have continued access to the area daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <p style="text-align: center;">56.11012</p>
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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 104a			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					

16. Termination Due	A. Date <input type="text" value=""/> Mo <input type="text" value=""/> Da <input type="text" value=""/> Yr	B. Time (24 Hr. Clock) <input type="text" value=""/>
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Section III—Termination Action

17. Action to Terminate	
18. Terminated	A. Date <input type="text" value=""/> Mo <input type="text" value=""/> Da <input type="text" value=""/> Yr
	B. Time (24 Hr. Clock) <input type="text" value=""/>

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number <input type="text" value=""/>	21. Primary or Mill P	23. AR Number <input type="text" value=""/>
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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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
4. Sent To		7. Mine ID
[REDACTED]		[REDACTED] (Contractor)

8. Condition or Practice 8a. Written Notice (103g)

The guard for the rotating shaft and drive pulley and belts on the jaw crusher was not securely in place to prevent contact. The guard was hanging from the crusher frame. This allowed access to the rotating machinery parts. The guard was 50 inches high 47 inches wide and 56 inches from ground. There was grease fitting less than 1 1/2 feet from the rotating shaft. This condition exposes miner lost work day/restricted duty type hazards. Miners, mine management and truck drivers have contained access to this area daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14112b

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 104a 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)

[REDACTED] [REDACTED]

Section III--Termination Action

17. Action to Terminate (6)

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

[REDACTED] [REDACTED]

Section IV--Automated System Data

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

22. Sk [REDACTED] 23. AR Number [REDACTED]

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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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 [REDACTED]	3. Citation/Order Number [REDACTED]
4. Extended To [REDACTED]	5. Description [REDACTED]	7. Mine ID [REDACTED] (Contractor)

Change From To

8. Condition Or Practice

Reason The citation narrative should have read: The guard for the rotating shaft and drive pulley and belts on the jaw crusher was not securely in place to prevent contact. The guard was hanging from the crusher frame. This allowed access to the rotating machinery parts. The guard was 50 inches high 47 inches wide and 56 inches from ground. There was grease fitting less than 1 1/2 feet from the rotating shaft. This condition exposes miner lost work day/restricted duty type hazards. Miners, mine management and truck drivers have access to this area daily when the plant is in operation. The crusher was not in operation today, but acknowledge the existed when the last time the plant ran.

Typographical error

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 checked="" type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number [REDACTED]
[REDACTED]	11. Date [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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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 Is) Mo Da Yr [REDACTED]	3. Citation/Order Number [REDACTED]
To [REDACTED]		7. Mine ID [REDACTED] (Contractor)

Section II-Justification for Action

The jaw crusher was locked and tagged out and the battery cables were removed to prevent use of the jaw crusher until repair have been made.

See Continuation Form

Section III-Subsequent Action Taken

8. Extended To A. Date Mo Da Yr [REDACTED]	3. Time (24 Hr. Clock) [REDACTED]	<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]		
[REDACTED]	iber	12. Date Mo Da Yr [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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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. Operator [REDACTED]		5. Mine ID [REDACTED]
6. Conclusion or Practice [REDACTED]		7. Mine ID [REDACTED] (Contractor)
8a. Written Notice (103g)		<input type="checkbox"/>

The self cleaning tail pulley on the crusher discharge conveyor was not guarded to prevent contact. The unguarded area measured 34 inches wide 29 inches high and 24 inches from ground. This condition exposes miners to lost work day/restricted duty type hazards. Miners, mine management and truck drivers have access to this area daily when the plant is in operation. The Plant was not in operation today but it was acknowledge the condition existed when the plant last ran. Mine management indicated having knowledge of the standard and condition cited.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.14107a
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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 type="checkbox"/> D. High <input checked="" type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104a		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 [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
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Section III—Termination Action

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

Section IV—Automated System Data

19. Type of Inspection (e) [REDACTED]	20. Event Number E01	21. Primary or Mill P	23. AR Number [REDACTED]
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MSHA, 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 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  Field Office  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 (a. Continuation) <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issuance) <input type="text" value=""/>	3. Citation/Order Number <input type="text" value=""/>
4. Description of Action <input type="text" value=""/>		5. Operator <input type="text" value=""/>
6. Mine ID <input type="text" value=""/>		7. Mine ID <input type="text" value=""/> (Contractor)

The jaw crusher/ discharge conveyor was locked and tagged out of service and the battery cable removed from the battery until repairs could be made.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date <input type="text" value=""/>	Time (24 Hr. Clock) <input type="text" value=""/>	<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 <input type="text" value="E01"/>	10. Event Number <input type="text" value=""/>	
11. Date <input type="text" value=""/>	12. Date <input type="text" value=""/> Yr <input type="text" value=""/>	13. Time (24 Hr. Clock) <input type="text" value=""/>

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

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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 009

Mine Citation/Order

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



Section I—Violation Data

1. Date <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
4. Served To <u>[REDACTED]</u>	5. Operator <u>[REDACTED]</u>
6. Miner <u>[REDACTED]</u>	7. Written <u>[REDACTED]</u>
(Contractor) <input type="checkbox"/>	

8. Condition or Practice 8a. Written Notice (103g)

The sixteen pound sledge hammer located on the work platform at the top of the jaw crusher had been used beyond the design of the manufacture. The handle had been removed and replace with a flex hose attached to a metal pipe. This condition exposes miners to lost work day/restricted duty type hazards. The hammer is used to dislodge large rock in the jaw crusher. The crusher was not in operation at the time of the inspection, but it was evident from the wear of the hammer and handle the condition existed for a long period of time. Mine management acknowledged modifying the hammer to it present condition.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <b>56.14205</b>
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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 **104a** 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 [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section III—Termination Action

17. Action to Terminate The sixteen pound sledge hammer was remove from service and disposed of.

18. Terminated A. Date [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section IV—Automated System Data

19. Type of Inspection (a) [REDACTED] (6) 20. Event Number [REDACTED] (6) 21. Primary or Mill P

22. Site [REDACTED] (6) 23. AR [REDACTED]

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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data			
1. Date	Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
7. Min			(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

The drive belts and pulley on the fly wheel of the jaw crusher were not guarded to prevent contact. The unguarded area measured 5 inches wide 21 inches high and 13 inches to the rotating parts. This condition exposes miners to lost work day/restricted duty type hazards. Miners, mine management and truck drivers have access to this area daily when the plant is in operation. The Plant was not in operation today but it was acknowledge the condition existed when the plant last ran.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14107a

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 104a 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 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 P 23. AR Number

MSHA, 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  Field Office  Mine ID  Date  2009

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) [REDACTED]	Yr [REDACTED]	3. Citation Order Number [REDACTED]
Tn [REDACTED]		[REDACTED]	
		(Contractor)	

Section II--Justification for Action

The jaw crusher was locked and tagged out of service and the battery cable removed. The citation is extended to allow the operator time to complete the repairs.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date M [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]	<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. Inspector [REDACTED]	12. Date [REDACTED]	13. Time [REDACTED]
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MHA Form 7000-02, Rev 85 (revised)

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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 009

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]	7. Mine ID [REDACTED] (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The overhead drive belt on the drive motor for the jaw discharge conveyor was not guarded to contain the whipping action of the belts, should it break or come off the sheave. The belt measured approximately 160 inches long in total length and was 103 inches from ground. This condition exposes miners to lost work day/restricted duty type hazards. The over head belt was partly guard on the drive end for approximately half of the length of the belt. The plant was not in operation at the time of inspection, but it was acknowledge by mine management the condition existed when the plant last operated.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.14108
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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 checked="" 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 104a		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 [REDACTED]	B. Time (24 Hr. Clock) [REDACTED]
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) [REDACTED] E01	20. Event Number [REDACTED]	21. Primary or Mill P	23. AR Number [REDACTED]
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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  Field Office  Mine ID  Date  2009

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)		3. Citation/Order Number
4. Service		5. Operator		
		7. Mine ID		
				(Contractor)
				8a. Written Notice (103g) <input type="checkbox"/>

There was a yellow angle iron structure located south of the shop that was not ANSI approved, that was structured to be a man basket used for working at elevated height. The structure was provided a gate or proper tie off's. This condition exposes miner to lost work day/restricted duty type hazards. The structure was not tagged not to be used or located in a area designated not to be used.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14205
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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 checked="" 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 104a		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 P	
22. Sig		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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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		7. Mine ID		
Practice		8a. Written Notice (103g)		

Several 110/ and 230 volt systems at the mine site did not have current continuity and resistance testing. The two 110 volt power cable, air compressor stand lights, welder, bench grinder, drill press, battery charger, garage door opener, fans were last tested 4/08. Some of the equipment was in use during the inspection and all of the systems appeared in good condition. This condition exposes miners to shock and/or burn hazard associated with 110 volt systems.

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.12028
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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 checked="" 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 104a		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				

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)
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Section IV—Automated System Data			
19. Type of Inspection (activity code)	E01	20. Event Number	21. Primary or Mill
22. Sign		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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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 ID
			(Contractor)
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The 110 volt power cable for the block heater on the Case 580B back hoe had inner conductors exposed to contact and mechanical damage. This condition exposes miner to shock and/or burn hazards associated with 100 volt systems. The back hoe was parked in the back part of the shed next to the maintenance shop at the time of the inspection. The back hoe or the block heater was not in used at the time of the inspection. It was acknowledge the condition had existed for some time indicated by the condition of the cable.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.12004

**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 104a

13. Type of issuance (check one) Citation  Order  Safeguard  Written Notice

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
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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)
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**Section IV--Automated System Data**

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

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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I - Violation Date

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID		(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The Case 580B back hoe was found unattended without the provided parking brake set. The back hoe was park at the north end of the shed at the time of the inspection. The area where the equipment was parked has relatively flat terrain. Should the service back hoe suddenly move and strike a miner working of traveling in its path it could result in contusions, broken bones injuries. Foot traffic was in the area, no other mobile equipment was in use in the area. The parking brake could not be tested due to motor problems of the machine

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14207

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 checked="" 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 104a		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)
	[REDACTED]	[REDACTED]

Section III - Termination Action

17. Action to Terminate The parking brake on the case 580 back hoe was set and the wheel block with a block of wood.

18. Terminated	A. Date	B. Time (24 Hr. Clock)
	[REDACTED]	[REDACTED]

Section IV - Automated System

19. Type of Inspection (code)	20. Event Number	21. Primary or Mill	23. AR Number
E01	(0)	P	[REDACTED]

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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 009

Mine Citation/Order

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



Section I--Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID		(Contractor)
[REDACTED]		[REDACTED]

8. Condition or Practice 8a. Written Notice (103g)

The alternator drive belt and pulley and the drive chain on the sweeper attachment on the International 140 tractor Co. 182 was not guarded to prevent contact. The unguarded area of the alternator was 3 inches wide 12 inches high and 42 inches from ground, the unguarded area on the drive chain was 3 inches wide 11 inches long. This condition exposes miners to entanglement type injuries. The tractor was parked at the north end of the shed next to the maintenance shop and not in use at the time of the inspection.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14107a

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 104a 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)

[REDACTED]

Section III--Termination Action

17. Action to Terminate

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

[REDACTED]

Section IV--Automated System Data

19. Type of inspection (activity code)	20. Event Number	21. Primary or Mill	23. AR Number
E01	[REDACTED]	P	[REDACTED]

MSHA, in accordance with 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  Field Office  Mine ID  Date  009

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
7. Mine ID		(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The Case 580B Back Hoe and the International 140 Tractor Co#182 were found parked in the north end of the Shed next to the Maintenance shop tagged "out of service". The tag did not list the reason it was out of service or the safety defects on the machines. This condition exposes miners to lost work day/restricted duty type hazards. Neither machine had been disabled to prevent start-up and use. With out a tag or pre-operational check list or some document listing the defects all the repairs, they may not be corrected be for the machine is put back into service.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14100c

**Section II--Inspector's Evaluation**

10. Gravity:

A. Injury or illness (hea) (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  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

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

**Section IV--Automated System Data**

19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill
E01		P
22.		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 on 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  Field Office  Mine ID  Date  2009

Mine Citation/Order

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



Section I—Violation Data

1. Date	3. Citation/Order Number
4. Served To	7. M (Contractor)
8a. Written Notice (103g)	

The junction box for the 110 volt lighting circuit located on top of east wall of the shop had the cover plate missing, exposing energized 110 volt conductors. The junction box is located 10 feet about the floor facing the wall. Miners were exposed to possible shock and/or burn hazards associated with 110 volt systems while traveling and working in that area of the mine. This area is access on very limited basis, there were no conductors exposed out of the junction box.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.12032
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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 checked="" 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	104a		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 Terminates		
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	P
22. Site	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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

Section I--Violation Data

1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>	
7. Mine ID <u>[REDACTED]</u>		(Contractor)	

8. Condition or Practice 8a. Written Notice (103g)

The 230 volt control box for the shops air compressor located on the north wall of the shop had opening in the cover plated exposing energized termination points. The exposed area measured 1 1/2 inches wide 3 inches high 1 1/2 inches wide 8 inches long, and was 1 inches from the energized termination points. This condition exposes miners to shock and/or burns hazards associated with 230 volt systems. The outer panel door was shut at the time of the inspection. With in less then two feet of the box were shut of values, power switch, and machine lubricant.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <p style="text-align: right;">56.12032</p>
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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 104a 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 <u>[REDACTED]</u>	B. Time (24 Hr. Clock) <u>[REDACTED]</u>
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Section III--Termination Action

17. Action to Terminate

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) <u>E01</u>	20. Event Number <u>[REDACTED]</u>	21. Primary or Mill <u>P</u>	
22. Sign <u>[REDACTED]</u>		23. AR Number <u>[REDACTED]</u>	

MSHA Form 7000-3, Apr 05 (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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 009

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

Section I—Violation Data	
1. Date <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
5. Operator <u>[REDACTED]</u>	7. Mine ID <u>[REDACTED]</u>
(Contractor)	

8. Condition or Practice 8a. Written Notice (103g)

The drive belts and pulley for the shop's air compressor located on at the north wall were not adequately guarded on the back side to prevent miners from coming in contact with them. The unguarded area was 15 inches wide and 37 inches long. Should a miner come in contact with the rotating belts and pulley possible severe lacerations, contusion, broken bones injuries to the fingers or hand could occur. A shut off valve, tank pressure gauge, machine lubricant, power switch are located back of the exposed area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14107a
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (ts): 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 104a 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

18. Termination Due A. Date [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

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 [REDACTED] 21. Primary or Mill P 23. AR Number [REDACTED]

MSHA Form 7000-3a (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, 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  Field Office  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 <input checked="" type="checkbox"/> Continuation <input type="checkbox"/>	2. Dated (Original Issue)	Yr	3. Citation/ Order Number
4. Sent To		7. Mine ID	(Contractor)

Section II--Justification for Action

The air compressor was de-energized and lock and tagged out of service and the defect list. Citation termination date is extended to allow time for repairs.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date	Mo	Da	Yr	3. 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	
11. [REDACTED]	12. Date	Yr	13. Time (24 Hr. Clock)

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

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

District  Field Office  Mine ID  Date

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

Section I--Violation Data		
1. Date <input type="text" value="[REDACTED]"/>	2. Time (24 Hr. Clock) <input type="text" value="[REDACTED]"/>	3. Citation/Order Number <input type="text" value="[REDACTED]"/>
4. Section <input type="text" value="[REDACTED]"/>		5. <input type="text" value="[REDACTED]"/>
6. <input type="text" value="[REDACTED]"/>		7. Mine ID <input type="text" value="[REDACTED]"/> (Contractor) <input type="checkbox"/>

8. Condition or Practice 8a. Written Notice (103g)

The stinger on the miller welder 225G located in the shop had the insulation broken on the end exposing energized component when the welder is in use. The exposed area was 1/2 wide 1 1/2 long located where the welding rods are attached for use. This condition exposes miner to shock and/or burn hazards associated with 80volt 225 amp systems.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <p style="text-align: center;">56.12030</p>
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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  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  B. Time (24 Hr. Clock)

Section III--Termination Action

17. Action to Terminate The defective stinger on the miller 225g was replace with a new one.

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

Section IV--Automated System Data

19. Type of Inspection (activity code) <input type="text" value="E01"/>	20. Event Number <input type="text" value="[REDACTED]"/>	21. Primary or Mill <input type="text" value="P"/>	22. <input type="text" value="[REDACTED]"/>
			23. AR Number <input type="text" value="[REDACTED]"/>

MSHA's 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date [REDACTED]	2. Time (24 Hr. Clock) [REDACTED]	3. Citation/ Order Number [REDACTED]
7. Mine ID [REDACTED]		(Contractor)

8. Condition or Practice

8a. Written Notice (103g)

The 110 volt power cable on a Milwaukee 1/2 inch electric drill located in the shop had a place in the cable where the inner conductors were exposed to mechanical damage. This condition exposes miners to shock and/or burn hazards associated to 110 volt systems. The drill was not energized at the time of the inspection and no bare wires were exposed.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.12004
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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 104a

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 [REDACTED] Yr

B. Time (24 Hr. Clock) [REDACTED]

Section III--Termination Action

17. Action to Terminate The power cable was cut off the Milwaukee Drill and replace with a new one.

18. Terminated

A. Date [REDACTED] Mo Da Yr

B. Time (24 Hr. Clock) [REDACTED]

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number [REDACTED]	21. Primary or Mill P
22. S [REDACTED]	23. AR Number [REDACTED]	

MSHA Form 7000-3, APR 03 (REVISED) 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

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Section I--Violation Data

1. Date [REDACTED] 2. Time (24 Hr. Clock) [REDACTED] 3. Citation/Order Number [REDACTED]

4. Section [REDACTED]

5. [REDACTED] (Contractor)

6. [REDACTED] Practice 8a. Written Notice (103g)

The Linde VI 400 power Welder located in the maintenance shop terminal point were not insulation or protected from contact. The 36 volt/400 amp output rated machine terminal point were exposed to contact when the welder is in use. This condition exposes miner to burn and/or shock hazards. The machine was not in use at the time of the inspection.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.12004
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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 104a 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 [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section III--Termination Action

17. Action to Terminate The welding leads and the power cable were removed from the machine and the machine tagged out of service not for use.

18. Terminated A. Date [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section IV--Automated System Data

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

22. [REDACTED] 23. AR Number [REDACTED]

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 2126, 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

Section I--Violation Data	
1. Date <u>[REDACTED]</u> Mo Da Yr	2. Time (24 Hr. Clock) <u>[REDACTED]</u>
3. Citation/Order Number <u>[REDACTED]</u>	
4. From (a) <u>[REDACTED]</u> To (b) <u>[REDACTED]</u>	
5. Mine ID <u>[REDACTED]</u>	
(Contractor) <input type="checkbox"/>	

8. Condition or Practice 8a. Written Notice (103g)

The control box with fourteen 110/220 volt breakers were not labeled to indicate what unit they control. The control boxes were located on the south of the shop. Identification could not be determined by location. During maintenance procedures or an emergency, the proper switch may not be turned off and locked out to prevent shock and/or untimely movement of the controlled device. Miners work in the shop daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.12018

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 104a  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 [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section III--Termination Action

17. Action to Terminate (b)

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

Section IV--Automated System Data

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

22. Signat [REDACTED] 23. AR Number [REDACTED]

MSHA Form [REDACTED] provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established 8 Regional Ombudsmen 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 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  Field Office  Mine ID  Date  2009

Mine Citation/Order

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



Section I-Violation Data

1. Date	<input type="text" value=""/>	3. Citation/Order Number	<input type="text" value=""/>
To	<input type="text" value=""/>	7. Mine ID	<input type="text" value=""/>
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>	

The guards for the self cleaning tail pulley on the screen discharge conveyor were not securely in place to prevent contact. The guards on both sides and the rear of the tail pulley were attached at the top but not at the bottom. The rear guard was 48 inches wide 14 inches high and 12 inches from ground and had loose material pushing the guard out exposing the tail pulley. The side guards were 32 inches long 14 inches high. This condition exposes miner lost work day/restricted duty type hazards. Miners, mine management and truck drivers have access to this area daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14112b
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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 104a		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				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 <input type="text" value=""/>	B. Time (24 Hr. Clock) <input type="text" value=""/>
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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 <input type="text" value=""/>	21. Primary or Mill P
22. <input type="text" value=""/>	23. AR Number <input type="text" value=""/>	

MSHA Form 7000-3a, April 1999. 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 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  Field Office  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 checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue)	Mo	Da	Yr
3. Citation/Order Number				
4. Sent To				
5. MSHA District Office				
6. Mine		(Contractor)		
Justification for Action				

The Gen set that supplies power to the conveyor was lock and tagged out and labeled why. The citation's termination date and time is extended to allow time for the repairs to be made.

Section III--Subsequent Action Taken					See Continuation Form <input type="checkbox"/>
8. Extended To	A. Date	B. Time (24 Hr. Clock)	<input type="checkbox"/> C. Vacated <input type="checkbox"/> D. Terminated <input type="checkbox"/> E. Modified		
Section IV--Inspection Data					
9. Type of Inspection	E01		10. Event Number		
11.	12. Date	Mo	Da	Yr	13. Time (24 Hr. Clock)

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

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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED]

Mine Citation/Order

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



Section I--Violation Data

1. Date <u>[REDACTED]</u>	2. Time (24 Hr. Clock) <u>[REDACTED]</u>	3. Citation/Order Number <u>[REDACTED]</u>
4. Reported To <u>[REDACTED]</u>	5. Operator <u>[REDACTED]</u>	
	7. Mine ID <u>[REDACTED]</u>	(Contractor)
	8a. Written Notice (103g) <input type="checkbox"/>	

The drive belts and pulley on the discharge conveyor were not guarded to prevent contact. The unguarded area was 8 inches wide 8 inches high and 48 inches from ground. This condition exposes miners to lost work day restricted duty hazards. The conveyor was not in operation during the inspection but it was acknowledged the conveyor was like this the last time it was operated. Miners would not normally be in this fro clean up and maintenance when the conveyor is shut down.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14112b
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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 checked="" 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 104a		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 <u>[REDACTED]</u> B. Time (24 Hr. Clock) <u>[REDACTED]</u>				

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 <u>[REDACTED]</u>	21. Primary or Mill P
22. <u>[REDACTED]</u>		23. AR Number <u>[REDACTED]</u>

MSHA Form 7000-3e (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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date	Mo Da Yr	12. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID			(Contractor)
8. Condition of Practice			8a. Written Notice (103g)

The guards for the self cleaning tail pulley on the 30x60 Masada conveyor were not securely in place to prevent contact. The rubber belting type guards on both sides of the tail pulley were attached at the top but not at the bottom. The both guard were 8 inches wide 38 inches long and 28 inches from ground. This condition exposes miner lost work day/restricted duty type hazards. The conveyor was not in operation at the time of the inspection, it was acknowledged they were like this the last time the conveyor ran.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14112b

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 checked="" 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 104a		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			

16. Termination Due	A. Date	B. Time (24 Hr. Clock)
	[REDACTED]	[REDACTED]

Section III--Termination Action

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

Section IV--Automated System Data

19. Type of inspection (activity code)	E01	20. Event Number	[REDACTED]	21. Primary or Mill	P
22. S	[REDACTED]	23. AR Number	[REDACTED]		

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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date [REDACTED]	3. Citation/ Order Number [REDACTED]
(Contractor)	

8. Condition or Practice

8a. Written Notice (103g)

The guards for the self cleaning tail pulley on the 30x70 Criscfab conveyor were not securely in place to prevent contact. The rubber belting type guards on both sides of the tail pulley were attached at the top but not at the bottom. The both guard were 8 inches wide 30 inches long and 24 inches from ground. This condition exposes miner lost work day/restricted duty type hazards. The conveyor was not in operation at the time of the inspection, it was acknowledged they were like this the last time the conveyor ran.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14112b
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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 104g  13. Type of Issuance (check one) Citation  Order  Safeguard  Written Notice

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
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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

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 P
22. S [REDACTED]	23. AR Number [REDACTED]		

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 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

Mine Citation/Order

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



Section I--Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
7. Mine ID		(Contractor)
[REDACTED]		[REDACTED]

8. Condition or Practice

8a. Written Notice (103g)

The guards for the self cleaning tail pulley on the 30x80 Masaba conveyor were not securely in place to prevent contact. The rubber belting type guards on both sides of the tail pulley were attached at the top but not at the bottom. The both guard were 6 inches wide 38 inches long and 24 inches from ground. This condition exposes miner lost work day/restricted duty type hazards. The conveyor was not in operation at the time of the inspection, it was acknowledged they were like this the last time the conveyor ran.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14112b
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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 checked="" 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 104a		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				

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

Section III--Termination Action

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

Section IV--Automated System Data

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

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, 400 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

07/13/2009 11:49 8152236501 MSHA PERU FO PAGE 02

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

Section I--Violation Date  
1. Date [REDACTED] 2. Time (24 Hr. Clock) [REDACTED] 3. Citation/Order Number [REDACTED]

4. Description of Violation [REDACTED]  
7. Mine ID [REDACTED] (Contractor) [REDACTED]

8. Condition of Practice  
8a. Written Notice (103g)   
An oxygen cylinder was being stored in the shop storage area where a 30 gallon barrel of grease is stored and used. The cylinder was 13 feet from the grease barrel and 9 feet away from a large open door. A lid for the barrel was laying on the floor next to the barrel and had grease exposed on the top side of the lid. The cylinder had been stored in the area for a week after it was used. Miners travel through this area daily to gain access to the shop and break room. This hazard exposed miners to injuries from a fire and/or projectile injuries in the event the gas cylinder were to explode. No ignition source was in the area making an accident unlikely.

9. Violation A. Health  Safety  Other  B. Section of Act [REDACTED] C. Part/Section of Title 30 CFR 56.4601

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 104a 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 [REDACTED] F. Dated [REDACTED] Mo Da Yr

15. Area or Equipment [REDACTED]

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

Section III--Termination Action  
17. Action to Terminate The cylinder was removed from the area.

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

Section IV--Automated System Data  
19. Type of Inspection (sciv) E01 20. Event Number [REDACTED] 21. Primary or Mill M  
22. Signature [REDACTED] 23. AR Number [REDACTED]

MSHA Form 7000-104a, revised 10/2008. In 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 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.

Attachment B

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

District  Field Office  Mine ID   Date

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

District North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 2009

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Line Citation/Order

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

Section I—Violation Data

1. Date (b) (6)	2. Time (24 Hr. Clock) (b) (6)	3. Citation/Order Number (b) (6)	7. Mine ID (b) (6)
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B. Condition or Practices

8a. Written Notice (103g)

There was a one gallon plastic container containing some type of green liquid, found lying next to the electrical storage area, without a label indicating its contents. The container had been left there for several shifts and was approximately a half of the way full. Miners are in the area daily and were not sure what was in the container. The purpose of the label is to reduce the possibility of injury or illness by ensuring that each miner is provided correct information about the hazardous chemical in which the container contains. Should a miner be exposed to an unknown chemical it might result in skin or eye irritation and/or chemical burns.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 47.44b
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Section B—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 104a

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 container was labeled with the contents name.

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 MUI M

22. Sign

23. AR Number (b) (6)

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 Ombudsmen annually evaluate 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 20410. 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.

Attachment B

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

District  Field Office  Mine ID(  ) Date  2009



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

District North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 2009

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Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration (b) (6)

Section I-Violation		3. Citation/Order Number	
1. Date (b) (6)	2. Time (b) (6)	(b) (6)	
7. Mine ID (b) (6)		(Contractor)	
8. Condition or Practice		8a. Written Notice (103g)	

There were no warning signs posted around the parts cleaner tank located in the shop as to prohibiting smoking and open flames. The flash point for the cleaning solvent was 148 degrees Fahrenheit. Welding and the use of a cutting torch are done 30 feet away from the area in the shop. Miners are in the shop area daily to do repairs or to travel to the break room. Employees working in and around this area were exposed to the possibility of injury, from fire and/or explosion.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.4101
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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 104a

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 (b) (6) B. Time (24 Hr. Clock) (b) (6)

Section III-Termination Action

17. Action to Terminate The parts cleaner tank was moved to a different area in the building and a warning sign is posted in the area.

18. Terminated A. Date (b) (6) B. Time (24 Hr. Clock) (b) (6)

Section IV-Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number (b) (6) 21. Primary or MR M 22. Sign (b) (6) 23. AR Number (b) (6)

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 North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 2009

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Mine Citation/Order

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



Section I--Violation Data

1. Date (b) (6)	2. Time (24 Hr) (b) (6)	3. Citation/ Order Number (b) (6)
7. Mine (b) (6)		(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

There was not suitable access to the LP 110 VAC breaker box. A large metal cabinet had been placed on the East wall in the Hydrate building next to the breaker box. The door panel for the box was only able to be opened 3 inches because the door would hit the metal cabinet. Miners are in this area to bag material. This hazard exposed miners to injuries from shocks, burns, or fires if they were unable to shut the breakers off in the event of an emergency.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.12019
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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 checked="" 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 104a		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	B. Time (24 Hr. Clock)
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Section III--Termination Action

17. Action to Terminate The large metal cabinet was removed from the area and miners now have access to the breaker box.

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

19. Type of Inspection (activity code)	20. Event Number	21. Primary or MII M	23. AR Number (b) (6)
22. Signature			

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, 406 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 North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 2009

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Mine Citation/Order

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

Section I--Violation Data		3. Citation/Order Number	
1. Date	2. Time (24 Hr.)	(b) (6)	
(b) (6)	(b) (6)	(b) (6)	
7. Mine ID		(Contractor)	
(b) (6)		8a. Written Notice (103g)	

There was a screw type fuse located in the LP 110VAC light panel breaker box that was not labeled to indicate what it controlled. The breaker box was located on the East wall in the hydrate building. The fuse controlled a 110 volt outlet on the bottom of the box. Miners are only in the box to shut off or reset breakers and only the electrician does repairs in the box. During maintenance procedures or an emergency, miners would not what the device controlled and exposed miners to shocks, burns or movement of the controlled device.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other	B. Section of Act	C. Part/Section of Title 30 CFR	56.12018
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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 104a

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 fuse was labeled and now show what the fuse controls.

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

Section IV--Automated System Data

19. Type of Action (act) 20. Event Number 21. Primary or Mill M 22. Sign (b) 23. AR Number (b) (6)

MSHA Form established enforcement actions. The Enforcement Agency... ons of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has... and 10 Regional Fairness Boards to receive comments from small businesses about federal agency 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, 468 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 North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 2009

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Mine Citation/Order

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

Section I—Violation Data		
1. Date (b) (6)	2. Time (24 Hr. Clock) (b) (6)	3. Citation/Order Number (b) (6)
7. mine (b) (6)		(Contractor)

8. Condition or Practice

8a. Written Notice (103g)

The was an opening on the side of the Raldler chain screw disconnect box where a knock-out would be exposing energized 480 volt power cables. The opening measured 1 1/4 inch by 1 1/4 inch and was 48 inches from the ground. The equipment that the disconnect supplies power to is out of service and has not run for several months. Miners are only around this area to enter a near by motor control room. This hazard exposed miners to electrocution type injuries from the energized 480 volt conductors.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 56.12032
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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 104a

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 A cover was installed over the opening.

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

Section IV—Automated System Data

19. Type of violation (activity) 001

20. Event Number

21. Primary or Mill M

22. Sign

23. AR Number (b) (6)

MSHA Form 7000-3a

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, 400 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration	
Section I--Violation Data			
1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number	
[REDACTED]	[REDACTED]	[REDACTED]	
7. Mine			(Contractor)
8. Condition or Practice			8a. Written Notice (103g)

There were no danger signs posted at the PP2 motor control center (MCC) to warn employees of electrical hazards. The MCC is a new installation and has only been in service for 2 weeks. Miners are in the area to bag material approximately 50 feet away from the MCC. Employees at the mine site were exposed to the possibility of injury, through the lack of warning signs to alert personal about the electrical installations.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.12021
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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 104g		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				

16. Termination Due	
A. Date	B. Time (24 Hr. Clock)
[REDACTED]	[REDACTED]

Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (active)		20. Event Number	21. Primary or Mill
E01		[REDACTED]	M
22. Signs			23. AR Number
[REDACTED]			[REDACTED]

MSHA Form 7000-3, Act 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 **North Central District** Field Office **Peru, Illinois** Mine ID (b) (6) **[REDACTED]** Date **(b) (6)** **2009**

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

Section I - Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation	2. Dated (Original Issue)	Mo	Da	Yr	3. Citation/ (Number)
(b) (6)	(b) (6)				(b) (6)

(Contractor)

Section II - Justification for Action

suitable warning sign was posted on the entry door to the MCC to warn of electrical hazards.

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	12. Date	13. Time (24 Hr. Clock)
E01	(b) (6)	(b) (6)	(b) (6)

MSHA Form 7000-3a, Mar 86 (revised)

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

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

Section I—Violation Data

1. Date	2. Time (24 Hr. Clock)	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]

(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

A cover plate was missing on a pull thru next to the #16 conveyor exposing the wires inside to mechanical damage. The 480 volt conductors were energized. The exposed area measured 3 3/4 inches long and 3/4 inches wide. There were no connection points and the conductors had the proper insulation on the wires. Miners are approximately 25 feet away from the exposed hazard while bagging material. This hazard exposed miners to injuries associated with 480 volt.

9. Violation A. Health Safety Other B. Section of Act C. Part/Section of Title 30 CFR 56.12004

Section II—Inspector's Evaluation

10. Gravity: A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occured 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 104a 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 B. Time (24 Hr. Clock)

Section III—Termination Action

17. Action to Terminate A cover plate was installed over the opening.

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

Section IV—Automated System Data

19. Type of Inspection (activity) 01 20. Event Number 21. Primary or MIB M 22. Signature 23. AR Number

MSHA Form 7000-3, Apr 05 (rev5/05) 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 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 North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 2009

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Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration (b) (6)

Section I - Violation Data		
1. Date (Mo Da Yr) (b) (6)	2. Time (24 Hr. Clock) (b) (6)	3. Citation/Order Number (b) (6)
		(Contractor)
		8a. Written Notice (103g) <input type="checkbox"/>

A section of seal tight conduit was broke open exposing the insulated color coded, 110 volt conductors inside to mechanical damage. The conductors supplied power to an air solenoid for the number 2 tank The exposed area measured 1 inch in length and was 6 feet from the floor. The conductors are only powered when the bin gate opens and closes. Miners are only in the area when performing maintenance type duties. This condition exposed miners to shock or burn type injuries associated with 110 volts.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.12004
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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 checked="" 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 type="checkbox"/> D. High <input checked="" type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104a		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) (6)	B. Time (24 Hr. Clock) (b) (6)
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Section III - Termination Action

17. Action to Terminate		
18. Terminated	A. Date (Mo Da Yr) (b) (6)	B. Time (24 Hr. Clock) (b) (6)

Section IV - Automated System Data		
19. Type of Inspection (activity code) E01	20. Event Number (b) (6)	21. Primary or Mill M
22. Signer (b) (6)	23. AR Number (b) (6)	

MSHA Form established a resource with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a 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.

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Office of Accountability

District North Central District Field Office Peru, Illinois Mine ID (b)(6) Date (b)(6) 2009

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

Section I - Violation Data

1. Date (b)(6) 2. Time (b)(6) 3. Citation/Order Number (b)(6)

4. Issued To (b)(6)

(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

A energized 110 volt incandescent type light was not guarded on the south side of the hydrator. The light was adjacent to a walkway and measured 3 feet from the floor surface. Miners travel the walkway once a month to grease the bearings on the hydrator. The hazard exposed miners to shock and burn type injuries associated with the unguarded light.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.12034
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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 104a 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 (b)(6) B. Time (24 Hr. Clock) (b)(6)

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 (act) (b)(6) E01 20. Event Number (b)(6) 21. Primary or Mill M 23. AR Number (b)(6)

MSHA Form 7000-3a, 7/13/09. 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 2nd 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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

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Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation [REDACTED]	2. Dated (Original Issue) [REDACTED]	Yr [REDACTED]	3. Citation/Order Number [REDACTED]
4. Operator [REDACTED]		7. Mine ID [REDACTED] (Contractor)	

Section II--JUSTIFICATION FOR FAILURE

A guard was placed over the exposed 110 volt light bulb.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Os 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]
11. Sign [REDACTED]	

MSHA Form 7000-36, Mar 83 (revised)

United States Department of Labor  
Mine Safety and Health Administration  
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District North Central District Field Office Peru, Illinois Mine [REDACTED] D. [REDACTED] 2009

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Mine Citation/Order

U.S. Department of Labor  
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Section I--Violation Data	
1. Date	3. Citation/Order Number
[REDACTED]	[REDACTED]

2. Location or Practice (Contractor) [REDACTED]  
 5a. Written Notice (103g)

The were no rails or barriers located at the top opening around the ladder going up to the dust collectors upper floor. The ladder is used to gain access to the top of the bags for the dust collector. At the top of the ladder was frame work and a fan close to the opening and the area where they would work to remove the bag was approximately 6 feet away. Miners have had to change bags in the past and will need to as the need arises. This hazard exposed miner to injuries associated with a fall.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.11012

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  Fetal

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 104a 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 [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

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 (act) E01 20. Event Number [REDACTED] 21. Primary or MR M

22. Sign [REDACTED] 23. AR Number [REDACTED]

MSHA Form [REDACTED] with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a resource center, 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, 400 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 009

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Mine Citation/Order  
Continuation

U.S. Department of Labor  
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Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation  2. Dated (Original Issue) [REDACTED] 3. Citation/Order Number [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

(Contractor)

Section II--Justification for Action

A chain was installed at the top of the ladder and now covers the opening.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To A. Date Mo Da Yr B. Time (24 Hr. Clock)  C. Vacated  D. Terminated  E. Modified

Section IV--Inspection Data

9. Type of Inspection ENI 10. Event Number [REDACTED]

11. Sig [REDACTED] 12. Date [REDACTED] 13. Time [REDACTED]

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

United States Department of Labor  
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District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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Mine Citation/Order

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Mine Safety and Health Administration



Section I—Violation Data

1 Date [REDACTED]	2 Time (24 Hr. Clock) [REDACTED]	3 Citation/ Order Number [REDACTED]
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8. Condition or Practice

8a. Written Notice (103g)

A 1 1/2 ton chain come-a-long was being used beyond its design capacity. The hook on the ratchet end was spread open to the point where they safety latch was 1 1/2 inches away from where it should hit. The come-a-long was being used to open and close a bin gate for the #20 bin. The hook was attached to a piece of angle iron and only the very tip of the hook was touching the flat upright side of the steel. Miners use the equipment to pull the gate open and closed horizontally once a week. This hazard exposed the miners to injuries from a sudden release of energy in the event the stretched hook were to brake while under a load.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14205
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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 104a 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 [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section III—Termination Action

17. Action to Terminate The come-a-long was removed and taken out of service.

18. Terminated A. Date [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

Section IV—Automated System Data

19. Type of Inspection (activity) R1 20. Event Number [REDACTED] 21. Primary of Mit M 22. Signature [REDACTED] 23. AR Number [REDACTED]

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 of Small Business Administration, Office of the National Ombudsman, 409 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.

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Mine Safety and Health Administration  
Office of Accountability

District North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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Mine Citation/Order

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Mine Safety and Health Administration



Section I - Violation Date

1. Date	2. Mine Name	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
		(Contractor)

7

Ba. Written Notice (103g)

The supplied guard on the back side on the chain drive for the cyclone feeder was not in place while the machine was in operation. The cyclone feeder is located above the #20 feed screw. The guard had fallen off and was lying on the shaft of the motor exposing the chain and chain gear to be exposed. The exposed area measured 3 inches wide by 3 1/2 inches long and was 45 inches from the floor. Miners are in this area once a week to open and close the bin gate for the # 20 bin which is 7 feet away from the opening. There are no grease points near the opening so miners are not close to the pinch point making an accident unlikely. This hazard exposed miners to injuries associated with the pinch point of the moving gear sprocket and chain.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.14112b

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 104a

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 [REDACTED] B. Time (24 Hr. Clock) [REDACTED]

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 (see [REDACTED]) 20. Event Number [REDACTED] 21. Primary of Mill M 22. Signature [REDACTED] 23. AR Number [REDACTED]

MSHA Form [REDACTED] 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, 400 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.

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Mine Safety and Health Administration  
Office of Accountability

District North Central District Field Office Peru, Illinois Mine IC( [REDACTED] ) Date [REDACTED] 2009

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Mine Citation/Order

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

Section I - Violation Data		
1. Date	2. Time	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]
a. Location or Practice		b. Written Notice (103g)

The shaft on the #20 bin feed screw was not guarded to prevent contact with the moving shaft. The shaft had a bearing in the middle of the shaft and the grease zirt was 2 inches away from the shaft. The exposed area measured 8 inches long by 7 inches tall and there were 2 cans of lubricating spray 6 inches away from the shaft. Miners grease the bearing once a month and open or close the bin gate that is 12 inches away once a week. This hazard exposed miners to entanglement type injuries associated with a rotating shaft.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14107a
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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 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: 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 104a		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 [REDACTED] Yr	B. Time (24 Hr. Clock) [REDACTED]
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Section III - Termination Action

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

Section IV - Automated System Data

19. Type of Violation (ac)	20. Event Number	21. Primary or MBI	22. Sign	23. AR Number
[REDACTED]	[REDACTED]	M	[REDACTED]	[REDACTED]

MSHA has 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 North Central District Field Office Peru, Illinois Mine ID [REDACTED] Date [REDACTED] 2009

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Mine Citation/Order

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

Section I--Violation Data

1. Date	2. Location	3. Citation/Order Number
[REDACTED]	[REDACTED]	[REDACTED]

Section II--Description of Practices

There were two 110 volt incandescent lights that had the bulbs broken exposing the inner elements. The lights were on a timer switch to allow the light to come on at a specified time. The timer circuit was energized and would allow the light to come on at night. The lights were located at the top of the #19 and #20 bins and were 7 feet 8 inches from the metal floor. There metal floor was wet and water had pooled up in the indentations of the floor. Miners are in the area once a week to open a bin gate and to check bin levels. This hazard exposed miners to electrocution type injuries from bare conductors and wet floor conditions.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			56.12030

Section III--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 104a

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

15. Termination Due A. Date 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 Violation (acc)  20. Event Number 21. Primary or MIB M 23. AR Number

MSHA Form 7000-3a (Rev. 10-2008) Under the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a Small Business 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 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.

Attachment B

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

District  Field Office  Mine ID   Date

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

District North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 2009

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Mine Citation/Order

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Section I - Violation Data

1. Date <u>(b) (6)</u>	3. Citation/ Order Number <u>(b) (6)</u>
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8. Condition or Practice

9a. Written Notice (103g)

(Contractor)  
There was no guard on the keyed shaft or fly wheel for the feeder for the grinding mill located next to a walkway. The fly wheel and shaft turn while the feeder is running. The fly wheel measured 12 inches in diameter and had 2 bolts on the walkway side that tighten against the keyed shaft. The shaft measured 2 1/2 inches long and was approximately 1 3/4 inches in diameter. The exposed area was 3 feet from the floor. Miners are in this area daily while the machine is running and the operators control booth is 9 feet away. This hazard exposed miners to entanglement type injuries from the rotating shaft and fly wheel.

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.14107a
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See Continuation Form (MSHA Form 7000-3a)

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 104a

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. (b) (6) B. Time (24 Hr. Clock) (b) (6)

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 (b) (6) 21. Primary or Mill M 22. Signat (b) (6) 23. AR Number (b) (6)

MSHA Form 7000-3, Page 10 of 10. 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 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.

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Office of Accountability

District North Central District Field Office Peru, Illinois Mine ID (b) (6) Date (b) (6) 009

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Mine Citation/Order U.S. Department of Labor  
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Section I--Violation Date  
1. Date (b) (6) 3. Citation/Order Number (b) (6)

8. Condition of Practice 8a. Written Notice (103g)

There were three 1 gallon plastic containers found on the grinding mill floor that did not have labels on them to indicate what the containers contained. The containers were 1/4 of the way full and contained an oil based substance. The containers had been left there over multiple shifts and no one knew what type of oil it was. Miners are in the area daily to run the grinding mill. The purpose of the label is to reduce the possibility of injury or illness by ensuring that each miner is provided correct information about the chemical hazard and appropriate protective measures to be taken. Should a miner be exposed to an unknown chemical it might result in skin or eye irritation and/or chemical burns.

9. Violation A. Health Safety Other  B. Section of Act C. Part/Section of Title 30 CFR 47.44b

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 104a 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 (b) (6) B. Time (24 Hr. Clock) (b) (6)

Section III--Termination Action  
17. Action to Terminate The containers were removed from the area and the contents were disposed of.

18. Terminated A. Date (b) (6) B. Time (24 Hr. Clock) (b) (6)

Section IV--Automated System Data  
19. Type of Inspection (activity) E01 20. Event Number (b) (6) 21. Primary or Mill M 22. Signature (b) (6) 23. AR Number (b) (6)

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.

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Mine Citation/Order

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Section I--Violation Data		(b) (6)	
1. Date (Mo Da Yr)	2. Time (24 Hr. Clock)	3. Citation/Order Number	(b) (6)
(b) (6)	(b) (6)	(b) (6)	(b) (6)
			(Contractor)

8. Condition or Practice 8a. Written Notice (103g)

There were three 110 volt breakers in the breaker box located behind the Blend tank at the #19 load-out that were not labeled to indicate what they controlled. The box contained 7 breakers that were all in the on position, in which 4 of the breakers were labeled. Miners are in this area daily to load customer trucks. During maintenance procedures or emergency situations, miners would not what device the breakers controlled and would expose miners to shocks, burns or movement of the controled device.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	56.12018
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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 104a 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	3. Time (24 Hr. Clock)
	(b) (6)	(b) (6)

Section III--Termination Action

17. Action to Terminate

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
	(b) (6)	(b) (6)

Section IV--Automated System Data

19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill	23. AR Number
E01	(b) (6)	M	(b) (6)

MSHA Form 7000-3a (Rev. 10/2008) 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.

Attachment B

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District  Field Office  Mine ID  Date

Attachment B

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District  Field Office  Mine ID   Date

Attachment B

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Selected Citations from Two Previous E01 Inspections  
 (Refer to Checklist Item No. 37)

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
<input type="text" value=""/>	<input type="text" value=""/>	104(a)	6.20003( a)	N	Unlikely	Lost Days 1		Low	<input type="text" value=""/>	<input type="text" value=""/>
<p>The Electrical Parts Storage trailer was not being maintained in a orderly condition. The trailer was full of electrical supplies on the walking surface. Cable spools, a barrel, electrical boxes, electrical cables and a pipe bender were placed along the walking path. These items create a trip hazard in the limited space of the trailer. The trailer is not access on a regular basis by miners making an accident unlikely. Should a miner fall it may result in lacerations, contusions and/or broken bone injuries.</p>										

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
<input type="text" value=""/>	<input type="text" value=""/>	104(a)	6.4201(a )(3)	N	Unlikely	Lost Days	1 Lo	w	<input type="text" value=""/>	<input type="text" value=""/>
<p>Hydrostatic testing was not provided within the previous 12 years for the 5 pound ABC type fire extinguisher mounted on the GMC company #2801 service truck parked in the maintenance shop (manufactures date on label indicating 1993). The lack of verifying fire extinguisher cylinder integrity through hydrostatic testing can present user to laceration type injuries upon cylinder failure. The fire extinguisher visually appeared to be in good condition with no signs of rust on cylinder. A monthly visual exam and an annual exam on March of 2007 had been done and documented.</p>										

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
<input type="text" value=""/>	<input type="text" value=""/>	104(a)	6.14207	N	Unlikely	Lost Days	1 Moderate		<input type="text" value=""/>	<input type="text" value=""/>
<p>The unattended Ford F150 pick-up truck (license plate # ET9728) was parked on a grade outside of the quality control lab, the parking brake was set, and the wheels were not chocked or turned into a bank or rib. Should the truck move unexpected and hit a miner it may result in sprains, strains, contusions, lacerations and/or bone crushing injuries. The truck was equipped with an automatic transmission that was in the park position and the tested and functioning park brake was set.</p>										

\* The 3 citations listed above represent the total number of citations issued during E01 inspections conducted from FY 2007 until the time of this audit.

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(b) (7)(C)  
 [REDACTED]

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
(b) (7)(C) [REDACTED]	[REDACTED]	104(a)	56.12004	N	Unlikely	Fatal	1	Moderate	[REDACTED]	[REDACTED]
<p>The outer jacket on the 480 volt power cable, that feeds power to the Hewitt Robins Screen, was cut exposing the color coded insulated conductors to mechanical damage. The green color coded conductor had bare wire showing. The exposed area was located on the discharge conveyor under the screen and measured 1 1/4 inches long, and was 46 inches from the ground. Miners are only in the area to clean up and to do repairs to the belt. Miners working or traveling in this area were exposed to possible shock, burn, and electrocution hazard. The exposed area was not easily seen and the plant has only ran two days this year.</p>										

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
(b) (7)(C) [REDACTED]	[REDACTED]	104(a)	56.14100( b)	N	Unlikely	Fatal	1	Moderate	[REDACTED]	[REDACTED]
<p>The low pressure side on the gage for the acetylene regulator was missing the cover and the metal disk was bent which resulted in not letting the needle to move to its actual pressure. The miner using the torches would not know what the pressure was set at resulting in a explosion hazard. The torch set is used on a minimal basis. Miners using the torches with the incorrect setting could be fatal injured from an explosion. The condition was not reported.</p>										

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
(b) (7)(C) [REDACTED]	[REDACTED]	104(a)	56.14101( a)(2)	N	Unlikely	Lost Days 1		Low	[REDACTED]	[REDACTED]
<p>The foot activated parking brake on the Dodge service truck, company number 32, was missing several components because the truck had its rear end replaced with a different mode and was not functional. The operator installed with a micro switch braking system which operates off the service brake system. The parking brake is necessary to ensure that the mobile equipment does not move while its parked. The employees were exposed to the hazard of the parked vehicle moving when its unmanned, and running into or over them. The vehicle is typically parked on level ground. The service brakes were functioning when tested. Mine management thought the micro switch braking system was acceptable.</p>										

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(b) (6)

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
[REDACTED]	[REDACTED]	104(a) Citation	56.12004	N	Unlikely	Fatal	1	Moderate	[REDACTED]	[REDACTED]

The outer jacket on the 480 volt power cable, that feeds power to the Hewitt Robins Screen, was cut exposing the color coded insulated conductors to mechanical damage. The green color coded conductor had bare wire showing. The exposed area was located on the discharge conveyor under the screen and measured 1 1/4 inches long, and was 46 inches from the ground. Miners are only in the area to clean up and to do repairs to the belt. Miners working or traveling in this area were exposed to possible shock, burn, and electrocution hazard. The exposed area was not easily seen and the plant has only ran two days this year.

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
[REDACTED]	[REDACTED]	104(a) Citation	56.14100( b)	N	Unlikely	Fatal	1	Moderate	[REDACTED]	[REDACTED]

The low pressure side on the gage for the acetylene regulator was missing the cover and the metal disk was bent which resulted in not letting the needle to move to its actual pressure. The miner using the torches would not know what the pressure was set at resulting in a explosion hazard. The torch set is used on a minimal basis. Miners using the torches with the incorrect setting could be fatal injured from an explosion. The condition was not reported.

Violation Number	Date Issued	Type Action	30 CFR	S&S	Likelihood	Injury Illness	Persons Affected	Negligence	Due Date	Date Term
[REDACTED]	[REDACTED]	104(a) Citation	56.14101( a)(2)	N	Unlikely	Lost Days 1		Low	[REDACTED]	[REDACTED]

The foot activated parking brake on the Dodge service truck, company number 32, was missing several components because the truck had its rear end replaced with a different mode and was not functional. The operator installed with a micro switch braking system which operates off the service brake system. The parking brake is necessary to ensure that the mobile equipment does not move while its parked. The employees were exposed to the hazard of the parked vehicle moving when its unmanned, and running into or over them. The vehicle is typically parked on level ground. The service brakes were functioning when tested. Mine management thought the micro switch braking system was acceptable.

Attachment C

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(6)

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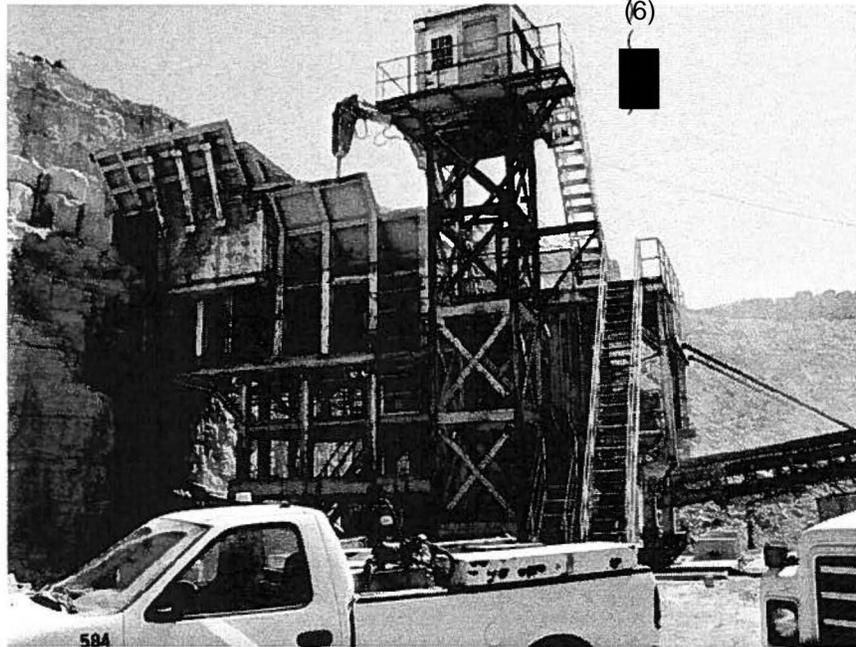


Photo No. 1 - Primary Crusher

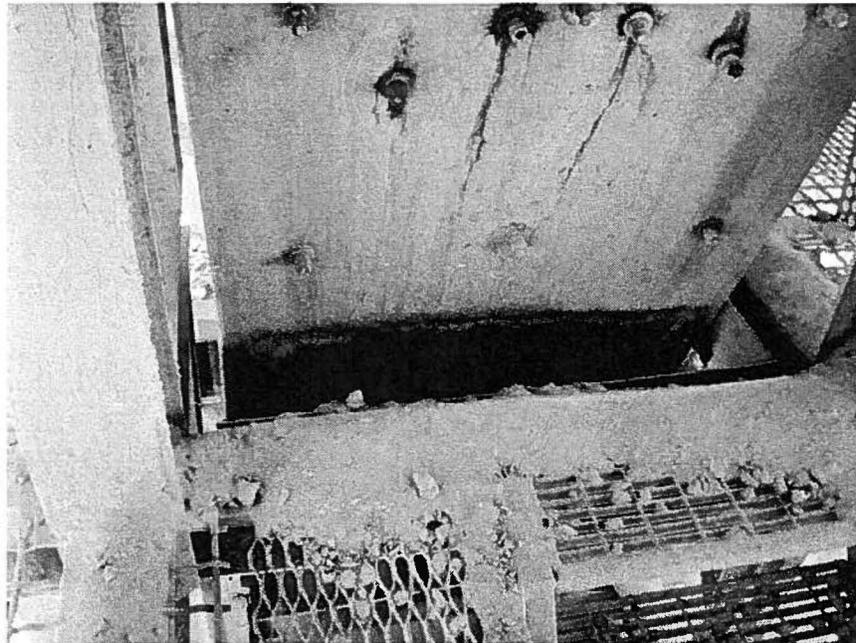


Photo No. 2 - Lack of Guard at end of stairs to first level of crusher

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Photo No. 3 - Inadequate guard for elevated scales



Photo No. 4 - Adequate guard on adjacent elevated scales

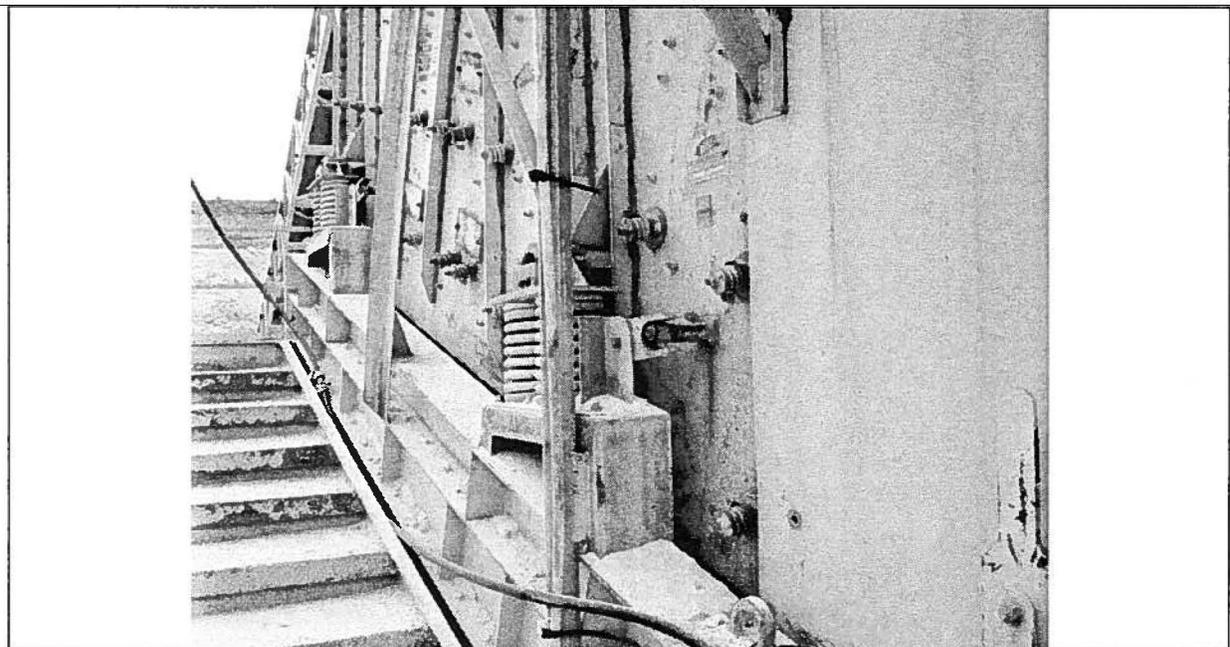


Photo No. 5 - Walkway side of sizing screen

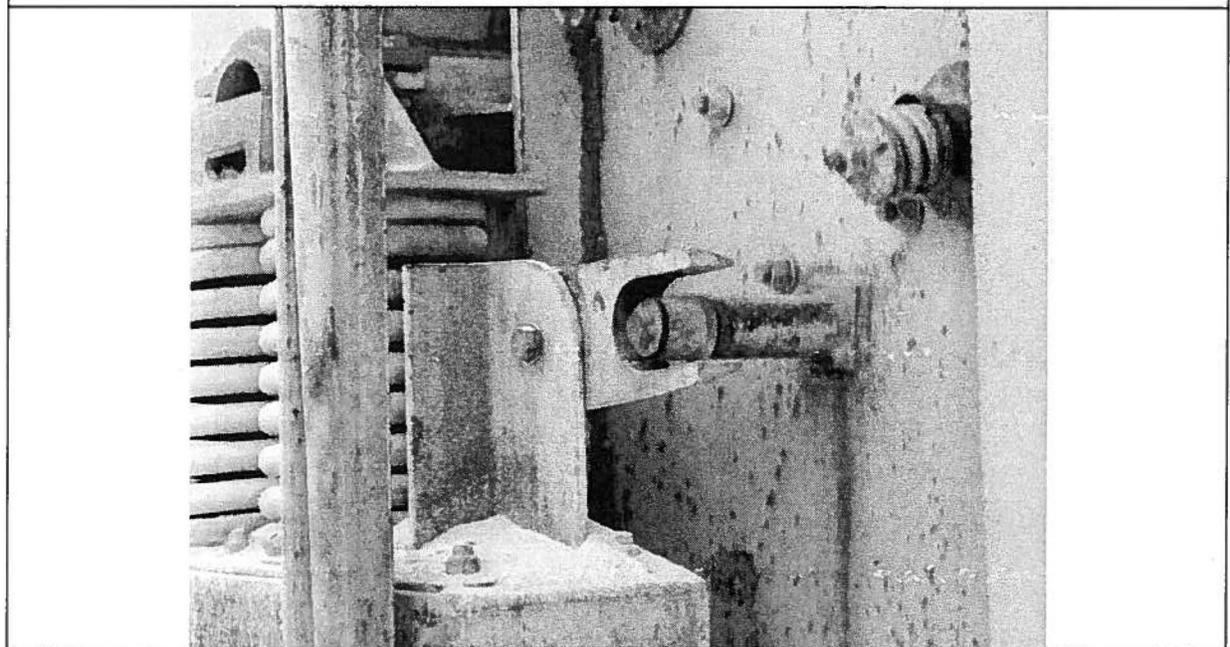


Photo No. 6 - Lack of guarding on sizing screen

District  Field Office  Mine ID  Date

Power lines above the mobile equipment not protected permitted to exist for over 10 years.



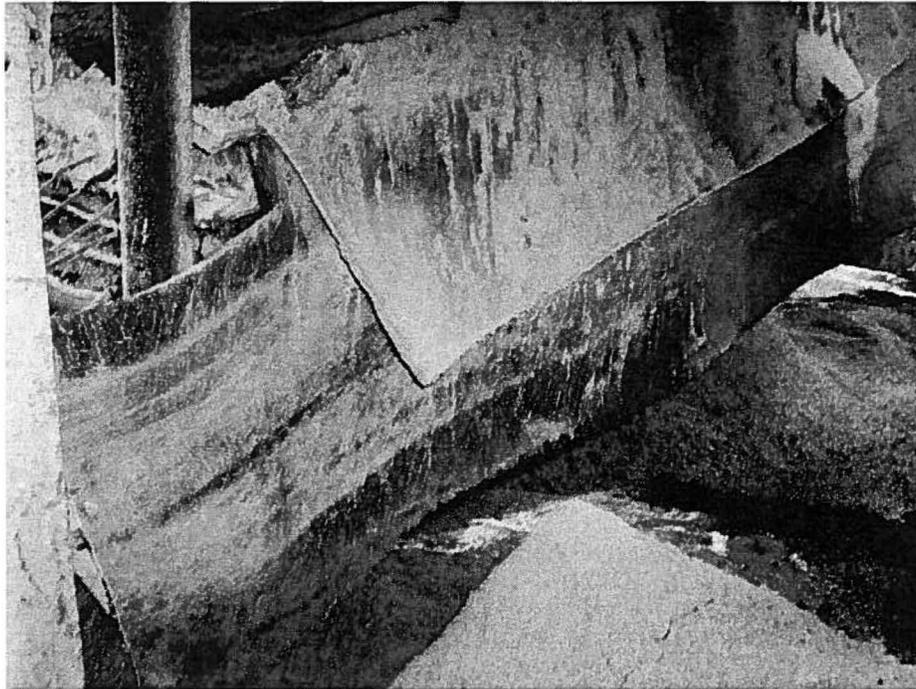
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Inadequate Guarding at tail roller



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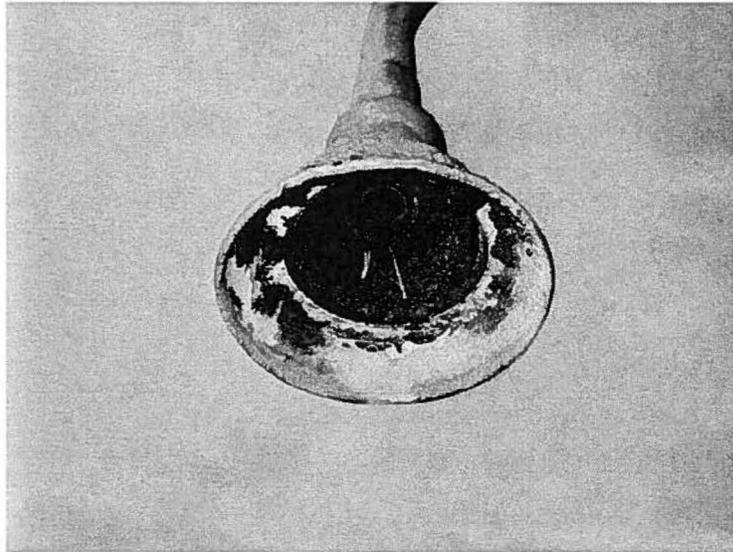
Mine ID

Date  2009



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Violation that appears to have been permitted to exist for long period of time



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Regular Inspections Conducted by Fiscal Year {2007}											
*Mine ID	Mine Name	Mine Type	Mine Status Desc	Fiscal Year	Event No.	Insp Acty	Beginning Date	Ending Date	Inspect Hrs	C/O/S Issued	Vio per 100 Insp Hrs.
(b) (6)		Surface	Intermittent	2007	0939648	Regular Safety and Health Inspection	10/25/06	10/25/06	3	-	.00
End of Report											

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Regular Inspections Conducted by Fiscal Year {2008}											
Mine ID	Mine Name	Mine Type	Mine Status Desc	Fiscal Year	Event No.	Insp Acty	Beginning Date	Ending Date	Inspect Hrs	C/O/S Issued	Vio per 100 Insp Hrs.
(b) (6)		Surface	Intermittent	2008	1001026	Regular Safety and Health Inspection	10/23/07	10/25/07	21	7	33.33
End of Report											

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Regular Inspections Conducted by Fiscal Year {2007}											
Mine ID	Mine Name	Mine Type	Mine Status Desc	Fiscal Year	Event No.	Insp Acty	Beginning Date	Ending Date	Inspect Hrs	C/C/S Issued	Vio per 100 Insp Hrs.
(b) (6)		Surface	Active	2007	1000139	Regular safety and Health Inspection	10/25/06	10/26/06	15	-	.00
		Surface	Active	2007	1000008	Regular Safety and Health Inspection	06/19/07	06/21/07	15	1	6.67
End of Report											

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**Regular Inspections Conducted by Fiscal Year {2008}**

*Mine ID	Mine Name	Mine Type	Mine Status Desc	Fiscal Year*Event No.	Insp Acty	Beginning Date	Ending Date	Insp Hrs	CROIS Issued	Vio per 100 Insp Hrs.
(b) (6)		surface	Active	2008 1001144	Regular Safety and Health Inspection	01/09/08	01/09/08	6	-	.00
		surface	Active	2008 1001512	Regular Safety and Health Inspection	02/18/08	02/20/08	30	2	6.61

End of Report

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**Regular Inspections Conducted by Fiscal Year {2009}**

*Mine ID	Mine Name	Mine Type	Mine Status Desc	Fiscal Year	Event No.	Insp Acty	Beginning Date	Ending Date	Inspect Hrs	C/O/S Issued	Vio per 100 Insp Hrs.
(b) (6)		Surface	Active	2009	6511631	Regular Safety and Health Inspection	03/04/09	03/05/09	3	-	.00
		Surface	Active	2009	1011545	Regular Safety and Health Inspection	07/07/09	07/09/09	22	20	33.02

End of Report

Attachment E

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Attachment E

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