



MAR 29 2012

MEMORANDUM FOR PATRICIA SILVEY

Deputy Assistant Secretary for Operations  
Mine Safety and Health

(b) (6)

THROUGH:

KEVIN G. STRICKLIN  
Administrator for  
Coal Mine Safety and Health

FROM:

JAY MATTOS  
Director of Office of Assessments, Accountability,  
Special Enforcement and Investigations

(b) (6)

SUBJECT:

MSHA Office of Accountability Audit, Coal District 1 and the  
Frackville, Pennsylvania Field Office, (b) (6)

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### Introduction

This memorandum summarizes the Office of Accountability (OA) audit of the subject district office, field office, and mines. The audit included MSHA field activities; level of enforcement; conditions and practices at the mine; Field Activity Reviews (FARs); Accompanied Activities (AAs); MSHA supervisory and managerial oversight; and the district's technical division. The audit also included evaluations to determine if there were any deficiencies in areas commonly identified during Agency internal reviews of MSHA's actions following past mine disasters.

Positive findings, as well as issues requiring attention and corrective actions for those issues are included in this audit report.

## Overview

This audit was conducted during the week of (b) (6) by Accountability Specialists Arlie A. Webb and Jerry J. Kissell. The (b) (6) and a (b) (6) (b) (6) accompanied the accountability specialists during this audit.

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The audit team travelled with the inspection party to the mine on a regular (E01) inspection. Areas and activities examined included mine record books, mine map, underlay map, an examination for imminent dangers, 001-0 MMU, 005-0 MMU, 006-0 MMU, shop, water supply ponds, haulage and travel roads, berms, highwalls, dumping facilities, electrical installations, spoil banks, fuel storage facilities, Caterpillar 777D haulage truck, Hitachi 1700-3 haulage truck, Sandvik D1600 rock drills, Terex excavator, Caterpillar D10T bulldozer, and a Manitowoc 4600 dragline.

Observations of work activities at the mine included blast hole drilling, loading of explosives into drilled holes, blasting operations, loading of haulage trucks, haulage practices, pushing of spoil material by bulldozers, silt removal, and work on high voltage power lines.

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The audit team travelled with the inspection party to the mine on a regular (E01) inspection. Areas and activities examined included an examination for imminent dangers, observation of mine waste dump areas and dumping practices, loading and haulage from the Buck Vein Bench, and work practices during moving of the dragline. Equipment observed included Caterpillar 777D haul trucks, a H185 DeMag hydraulic excavator, a Reich C-700 bench drill, a Dresser 7450 dragline (being moved), and various service and support equipment. Other areas inspected included the truck shop, haul roads and berms.

Observations at the mine also included work practices, and the use of personal protective equipment.

## Audit Results

This audit revealed positive findings in several areas, including the following:

1. Enforcement personnel used appropriate enforcement tools during the mine site visits.
2. Inspectors at the Frackville Field Office were courteous and professional in their interactions with miners and mine operators.
3. Supervisors at the Frackville Field Office completed all of their required Field Activity Reviews (FARs) and Accompanied Activities (AAs).
4. Staff and safety meetings were well documented and consistently included updates and reviews of MSHA initiatives and policy memoranda.
5. All active underground mines in District 1 were visited by a manager or supervisor at least once during FY 2011.
6. The total onsite time for E01 inspections conducted at surface mines inspected by the Frackville Field Office increased by 2% from 2010 to 2011.

This audit revealed two issues that require corrective actions: (Supporting data for each issue can be found in the OA checklist and attachments)

1. Field office personnel did not always properly review 30 CFR, Part 50 data to determine if mine operators were reporting employment and man-hours as required.
2. Hazard complaint inspections were conducted as required by agency policy but inspection notes did not always document that a sanitized version of the 103(g) complaint was provided to the operator, or that a notice of negative findings was provided to the operator for allegations not found. Although one complaint contained two allegations, the inspection notes documented the investigation of only one allegation.

cc: Ted Smith

## Attachments

- A. Internal Review Summary
- B. Audit Checklist (with corrective actions)
- C. Statistics
- D. Citations/Orders Issued During Audit

**(b) (6)**

No citations were issued at this mine during the audit.

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- |            |            |
|------------|------------|
| 1. (b) (6) | 77.1605(a) |
| 2. (b) (6) | 77.208(d)  |
| 3. (b) (6) | 77.208(e)  |
| 4. (b) (6) | 77.400(a)  |
| 5. (b) (6) | 77.1102    |

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District Coal District 1 Field Office Frackville, PA Mine ID (b) (6) Date (b) (6)

**Attachment A – Internal Review Summary**

The table below lists the most common deficiencies identified in Agency internal reviews of MSHA’s actions following past mine disasters. The Frackville, Pennsylvania field office had 2 of the most commonly identified issues.

	Common Internal Review Findings	Examples of Deficiencies Identified During Internal Reviews:
	Failure to identify deviations in approved plans.	Not identifying operator departures from requirements in any plan that requires approval, such as training plans, roof control plans, ventilation plans, emergency response plans, etc.
	Incomplete or inadequate inspections.	Not following policy or procedures for conducting inspections. Failure to cite all violations. Not inspecting all areas and equipment.
	Failure to conduct 103(i) spot inspections according to policy.	Not conducting required spot inspections in a timely manner and at irregular intervals.
	Supervisors did not provide adequate oversight.	No review/lax review of inspection reports. Inadequate review of PKW/SAR forms. Failure to conduct required Field Activity Reviews and Accompanied Activities.
	Improper evaluations of gravity, negligence and type of enforcement action.	Inadequate documentation to support citation and evaluation. Failure to consider and document aggravating or mitigating circumstances.
	Inadequate Peer Reviews	Inadequate district level Peer Reviews. Failure to adopt and follow corrective action plans. Failure to follow up or monitor effectiveness of corrective action plans.
	Weakness in the ACR Program	Not following ACR handbook. Inadequate management oversight. Failure to follow the Mine Act, MINER Act, 30 CFR and MSHA policy.
X	MSHA data not used or reviewed.	Key Indicators, Mine Profile, Inspection completion reports not being used. Failure to keep MSIS data up to date and accurate.
	Lack of unwarrantable failure tracking system	No or inadequate unwarrantable failure sequence tracking system.
	Conflict of Interest	Inspecting prior employers, employment of relatives.
X	Failure to comply with Hazard Complaint Procedures.	Improper coding of inspections. Inadequate documentation of inspections/investigations.
	Investigations of multi-phase plans	Failure to conduct on-site evaluations of plans.
	Failure to observe retreat mining.	Inadequate periodic evaluations when retreat mining is conducted.

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Attachment B – Audit Checklist (with corrective actions)

1. Determine if complete and thorough E01 inspections are being conducted.

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

Field office personnel did not always properly review 30 CFR, Part 50 data to determine if mine operators were reporting employment and man-hours as required. Several mines were not in compliance with reporting requirements of 30 CFR, Part 50 regarding quarterly employment and coal production. For example, an active producing surface mine (b) (6) reported zero employment and zero man-hours from FY 2009 to FY 2011.

Chapter B, Section III of the General Coal Mine Inspection Procedures and Inspection Tracking System Handbook (PH-08-V-1) lists records that are to be reviewed as part of a regular (E01) inspection. These records include Quarterly Employment and Coal Production Reports (MSHA Form 7000-2).

Corrective Action Submitted by District:

An evaluation of operator compliance with reporting requirements under Part 50 shall be made at every regular inspection. The Part 50 evaluation should be made using the Inspector's Portable Application for Laptops (IPAL) Reports section reviewing the Employment & Incidence Rate Information database for the mine.

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Instruction and training of all District 1 enforcement personnel pertaining to the available resources available for them to perform the required Part 50 review will be provided. Additionally, Field Office Supervisors will monitor inspection reports and their related Inspection Tracking System (ITS) records.

The District will monitor the effectiveness of this action plan through Supervisory Field Activity Review / Accompanied Activities Documentation and 2nd Level Review Documentation.

The implementation of this action plan is July 2, 2012, with a proposed completion date of August 31, 2012.

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

Adequate

Corrective Action Needed

Comments Below

5. Upon arrival on the working section, accompany and evaluate inspector/specialist examination of all working faces for imminent dangers.

Adequate

Corrective Action Needed

Comments Below

6. Evaluate the inspector/specialist observation of the work cycle and conditions on the working section during the audit.

Adequate

Corrective Action Needed

Comments Below

7. Evaluate the inspector/specialist air quantity, quality, and gas checks during the audit.

Adequate

Corrective Action Needed

Comments Below

This audit involved inspections at surface mines.

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8. Evaluate inspector/specialist examination of equipment electrical cables during the audit.

Adequate  Corrective Action Needed  Comments Below

Equipment at the two surface mines visited during the audit was powered by internal combustion engines. However, the inspector diligently observed and evaluated work on electrical installations and high-voltage lines at the (b) (6)

9. Evaluate inspector/specialist examination for permissibility during the audit.

Adequate  Corrective Action Needed  Comments Below

This audit involved inspections at surface mines.

10. Determine if areas deemed too wet for rock dust surveys during previous inspections were re-visited and sampled.

Adequate  Corrective Action Needed  Comments Below

This audit involved inspections at surface mines.

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

Adequate  Corrective Action Needed  Comments Below

This audit involved inspections at surface mines.

12. During the audit, evaluate the inspection of at least one set of seals, including methods for obtaining samples from sealed area.

Adequate  Corrective Action Needed  Comments Below

This audit involved inspections at surface mines.

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

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

PKW forms were not reviewed during this audit.

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

Adequate  Corrective Action Needed  Comments Below

There are no 103(i) mines in this district.

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

Adequate  Corrective Action Needed  Comments Below

Twelve investigation reports resulting from complaints of hazardous conditions were randomly selected and reviewed during this audit. Of those, 3 were determined by the district to be 103(g) complaints and 9 were determined to be "other" complaints.

Notes do not always document that a sanitized version of the 103(g) complaint was provided to the operator.

Chapter I of the Hazard Complaint Procedures Handbook (PH02-I-8) states, "If the complaint constitutes a 103(g) complaint, upon arrival at the mine site an Authorized Representative shall provide the rewritten complaint to the mine operator and the representative of miners."

Notes do not always document that a notice of negative findings was provided to the operator for allegations not found during a 103(g) complaint inspection.

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Chapter I of the Hazard Complaint Procedures Handbook (PH02-I-8) states, "If no citations or orders are issued as a result of 103(g) inspection, the Authorized Representative will notify the mine operator and the representative of miners or miner in writing that no violations were found ("negative findings") at the completion of the MSHA inspection."

Although one complaint contained two allegations, only one allegation was documented as being investigated. Inspection notes did not justify why the allegation was not investigated.

Chapter H of the Hazard Complaint Procedures Handbook (PH02-I-8) states, "An Authorized Representative will evaluate the seriousness of all complaints so that an appropriate decision may be made regarding whether a special MSHA inspection should be conducted. That evaluation will include a review of the mine file (if possible) and every condition alleged by the complainant."

Corrective Action Submitted by District:

District 1 enforcement personnel will receive instruction and training on Hazardous Condition Complaint Inspections. The instruction will include review of established agency procedures and policies, and the Hazardous Condition Complaint Procedures Handbook.

The established guidelines for receiving, evaluating, responding to, and entering and processing safety and health hazardous condition complaints received from miners, representatives of miners, and others will be reviewed. Instruction on how to create allegation(s) will be provided.

Emphasis will be placed on how each hazard or violation asserted by the complainant shall be captured in a separate allegation. Created allegations may serve as the sanitized version of the complaint. The allegations must be written in a way that keeps the identity of individuals confidential.

The District will monitor the effectiveness of this action plan through Supervisory Field Activity Review / Accompanied Activities Documentation and 2nd Level Review Documentation.

Additionally, Field Office Supervisors will monitor inspection reports and the MSHA Standardized Information System (MSIS) to provide consistency and standardization of

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the hazardous conditions complaint process within the district.

The implementation of this action plan is July 2, 2012, with a proposed completion date of August 31, 2012.

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

Adequate  Corrective Action Needed  Comments Below

18. Are required Field Activity Reviews (FARs) and supervisory follow-ups being conducted and documented according to agency policy and procedures?

Adequate  Corrective Action Needed  Comments Below

19. Are Accompanied Activities (AAs) and supervisory follow-ups being conducted and documented according to agency policy and procedures?

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

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22. Are supervisors thoroughly reviewing Uniform Mine Files at least annually?

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

24. Are all sections where retreat mining is occurring (not to include longwall mining) being inspected at least monthly?

Adequate  Corrective Action Needed  Comments Below

This audit involved inspections at surface mines.

25. Review documentation of staff meetings/safety meetings to determine their effectiveness and relevance to current issues and the Agency's mission.

Adequate  Corrective Action Needed  Comments Below

26. After an in-mine visit, evaluate approved plans (ventilation, roof control, training, etc.) for compatibility with mining conditions and equipment.

Adequate  Corrective Action Needed  Comments Below

This audit involved inspections at surface mines.

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

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

29. Determine if Assistant District Manager is conducting the required second level reviews and holding supervisors accountable for oversight of Field Activity Reviews and Accompanied Activities.  
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30. Determine if district management personnel are reviewing work products and reports for accuracy and completeness.

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

The tracking system spreadsheet for supervisory mine visits shows that all active underground mines were visited during FY 2011.

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

Adequate  Corrective Action Needed  Comments Below

The Alternative Case Resolution program was not reviewed during this audit.

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34. Determine if District Manager is holding the Supervisory Special Investigator accountable for properly evaluating and initiating or denying potential cases.

Adequate  Corrective Action Needed  Comments Below

The Special Investigations program was not reviewed during this audit.

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

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

38. Evaluate the overall condition of the mine relative to the level of enforcement documented in previously completed inspections.

Adequate  Corrective Action Needed  Comments Below

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Attachment C - Statistics

S&S Rate Comparison

During FY 2010, the S&S rate for the Frackville Field Office was below both the district and the national averages. During FY 2011, the S&S rate for the Frackville Field Office was above both the district and national averages.

Fiscal Year	Frackville, PA Field Office	Coal District 1	National Average
2010	31%	34%	34%
2011	39%	30%	35%

Time and Activity Comparison

A comparison of FY 2010 and FY 2011 time distribution for regular (E01) inspections at surface facilities inspected by the Frackville Field Office shows time in the “Other” category has increased slightly and “On-Site” time is unchanged.

Time Distribution (%) – E01 Inspections at Surface Facilities							
FY	Area/Office	Travel	**Other	*Total On-Site	Citations Issued On-Site	Citations Issued Off-Site	Total Percent
2010	Frackville FO	22%	12%	67%	3%	<1%	100%
	Nat'l Avg	18%	15%	67%	5%	0%	100%
2011	Frackville FO	19%	13%	67%	3%	<1%	100%
	Nat'l Avg	17%	16%	67%	6%	0%	100%

\* Includes calibration of gas detectors, respirable dust pumps, preparation and mailing of gas and rock dust samples

\*\*Total On-Site time includes citations written on-site

A comparison of FY 2010 and FY 2011 time distribution for regular (E01) inspections at surface mines inspected by the Frackville Field Office shows time in the “Other” category and “On-Site” time have increased.

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Time Distribution (%) – E01 Inspections at Surface Mines							
FY	Area/Office	Travel	**Other	*Total On-Site	Citations Issued On-Site	Citations Issued Off-Site	Total Percent
2010	Frackville FO	21%	11%	67%	2%	<1%	100%
	Nat'l Avg	19%	13%	68%	5%	0%	100%
2011	Frackville FO	19%	12%	69%	2%	<1%	100%
	Nat'l Avg	19%	13%	68%	5%	0%	100%

\* Includes calibration of gas detectors, respirable dust pumps, preparation and mailing of gas and rock dust samples

\*\*Total On-Site time includes citations written on-site

A comparison of FY 2010 and FY 2011 time distribution for regular (E01) inspections at underground mines inspected by the Frackville Field Office shows time in the “Other” category has increased and “On-Site” time has decreased slightly.

Time Distribution (%) – E01 Inspections at Underground Mines							
FY	Area/Office	Travel	**Other	*Total On-Site	Citations Issued On-Site	Citations Issued Off-Site	Total Percent
2010	Frackville FO	21%	11%	68%	1%	<1%	100%
	Nat'l Avg	16%	15%	68%	6%	1%	100%
2011	Frackville FO	20%	13%	67%	1%	<1%	100%
	Nat'l Avg	16%	14%	69%	6%	1%	100%

\* Includes calibration of gas detectors, respirable dust pumps, preparation and mailing of gas and rock dust samples

\*\*Total On-Site time includes citations written on-site

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Attachment D – Citations Issued During Audit

Mine Citation/Order		U.S. Department of Labor Mine Safety and Health Administration		
Section I—Violation Data				
1. Date	Mo Da Yr <span style="color: red;">(b) (6)</span>	2. Time (24 Hr. Clock)	3. Citation/Order Number: <span style="color: red;">(b) (6)</span>	
4. Susued To	5. Operator			
<span style="color: red;">(b) (6)</span>	<span style="color: red;">(b) (6)</span>			
6. Mine	7. Mine ID			
<span style="color: red;">(b) (6)</span>	<span style="color: red;">(b) (6)</span>		(Contractor)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>	
<p>The glass panel located on the left hand side of the Reich Rock Drill, Co. No. 2619, S/N 700CBSH208625, was not in good condition. When examined, a crack approx. 29 in. long was allowed to exist in this glass panel. The cab of this drill is pressurized to prevent dust from entering.</p>				
See Continuation Form (MSHA Form 7000-3a) <input type="checkbox"/>				
9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	
			77.1605(a)	
Section II—Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input checked="" type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input checked="" type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action: 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number	
15. Area or Equipment			F. Dated Mo Da Yr	
16. Termination Due				
A. Date		B. Time (24 Hr. Clock)		
<span style="color: red;">(b) (6)</span>		<span style="color: red;">(b) (6)</span>		
Section III—Termination Action				
17. Action to Terminate				
18. Terminated				
A. Date		B. Time (24 Hr. Clock)		
Section IV—Automated System Data				
19. Type of Inspection (activity code)		20. Event Number		21. Primary or Mill
E01		<span style="color: red;">(b) (6)</span>		
22. Signature				23. AR Number
<span style="color: red;">(b) (6)</span>				<span style="color: red;">(b) (6)</span>

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-FAR (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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District Coal District 1 Field Office Frackville, PA Mine ID (b) (6) Date (b) (6)

Mine Citation/Order

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



Section I—Violation Data

1. Date	Mo Da Yr <span style="color: red;">(b) (6)</span>	2. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>	3. Citation/ Order Number: <span style="color: red;">(b) (6)</span>
4. Served To <span style="color: red;">(b) (6)</span>		5. Operator <span style="color: red;">(b) (6)</span>	
6. Mine <span style="color: red;">(b) (6)</span>		7. Mine ID <span style="color: red;">(b) (6)</span> <span style="float: right;">(Contractor)</span>	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

When examined, 17 compressed gas cylinders, located in the cylinder storage cage were not secured to prevent them from falling. A chain is available to secure these cylinders.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <p align="center">77.208(d)</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 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: <p align="center">001</p>
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 <p align="center">104(a)</p>		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 <span style="color: red;">(b) (6)</span>	B. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>
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Section III—Termination Action

17. Action to Terminate: The welder secured the compressed gas cylinders using the chain that was available.

18. Terminated	A. Date Mo Da Yr <span style="color: red;">(b) (6)</span>	B. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>
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Section IV—Automated System Data

19. Type of Inspection (activity code) <p align="center">E01</p>	20. Event Number <span style="color: red;">(b) (6)</span>	21. Primary or Mitl
22. Signature <span style="color: red;">(b) (6)</span>		23. AR Number <span style="color: red;">(b) (6)</span>

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 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.

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

District Coal District 1 Field Office Frackville, PA Mine ID (b) (6) Date (b) (6)

Mine Citation/Order

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



Section I—Violation Data

1. Date <span style="color: red;">(b) (6)</span>	2. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>	3. Citation/Order Number: <span style="color: red;">(b) (6)</span>
4. Served To <span style="color: red;">(b) (6)</span>		5. Operator <span style="color: red;">(b) (6)</span>
6. Mine <span style="color: red;">(b) (6)</span>		7. Mine ID <span style="color: red;">(b) (6)</span> (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

3 compressed gas cylinders, located in the cylinder storage cage were not provided with protective covers to protect the valves while the compressed gas cylinders were being stored.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input checked="" type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR <b>77.208(e)</b>
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Section II—Inspector's Evaluation

10. Gravity:			
A. Injury or illness (rias) (s): 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: <b>001</b>
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 <b>104(a)</b>		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
14. Initial Action F. Dated			Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr <span style="color: red;">(b) (6)</span>	B. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>
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Section III—Termination Action

17. Action to Terminate: The welder placed protective covers on the 3 compressed gas cylinders to protect the valves.

18. Terminated	A. Date Mo Da Yr <span style="color: red;">(b) (6)</span>	B. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>
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Section IV—Automated System Data

19. Type of Inspection (activity code) <b>E01</b>	20. Event Number <span style="color: red;">(b) (6)</span>	21. Primary or Mill
22. Signature <span style="color: red;">(b) (6)</span>		23. AR Number <span style="color: red;">(b) (6)</span>

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

District Coal District 1 Field Office Frackville, PA Mine ID (b) (6) Date (b) (6)

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
	(b) (6)	(b) (6)		(b) (6)
4. Served To			5. Operator	
(b) (6)			(b) (6)	
6. Mine			7. Mins ID	
PRIMROSE OPERATION			(b) (6)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>	

The Bosch 7 in. hand held grinder, located in the welding shop was not provided with a guard to prevent a person from contacting the rotating grinding wheel. The guard is also used to contain the grinding wheel in the event the grinding wheel would fly apart. Also, the absence of the guard would allow the grinder to "walk" should the grinder be placed on a stationary object before the grinding wheel stops spinning. This grinder was not in use, however it was available for use.

See Continuation Form (MSHA Form 7000-3a)

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

Section II—Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	
	(b) (6)	(b) (6)	

Section III—Termination Action

17. Action to Terminate The shop welder installed the Manufacturer supplied guard on the Bosch 7 in. hand held grinder.

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)	E01	20. Event Number		21. Primary or Mill
		(b) (6)		
22. Signature			23. AR Number	
(b) (6)			(b) (6)	

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District Coal District 1 Field Office Frackville, PA Mine ID (b) (6) Date (b) (6)

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr <span style="color: red;">(b) (6)</span>	2. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>	3. Citation/ Order Number <span style="color: red;">(b) (6)</span>
4. Served To <span style="color: red;">(b) (6)</span>	5. Operator <span style="color: red;">(b) (6)</span>	
6. Mine <span style="color: red;">(b) (6)</span>	7. Mine ID <span style="color: red;">(b) (6)</span> <span style="float: right;">(Contractor)</span>	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The area on the West end of the Repair/Welding shop where oil and combustible liquids are stored, is not posted with signs to warn against smoking or open flames where fire or explosion hazards exist.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR  77.1102
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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 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> Written Notice <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				E. Citation/Order Number
				F. Dated Mo Da Yr
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr <span style="color: red;">(b) (6)</span>	B. Time (24 Hr. Clock) <span style="color: red;">(b) (6)</span>
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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 <span style="color: red;">(b) (6)</span>	21. Primary or Mail
22. Signature <span style="color: red;">(b) (6)</span>		23. AR Number <span style="color: red;">(b) (6)</span>

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