



**AUG - 2 2017**

**MEMORANDUM FOR PATRICIA W. SILVEY**  
Deputy Assistant Secretary for  
Mine Safety and Health

**THROUGH:** **TIMOTHY R. WATKINS** [REDACTED]  
Acting Administrator for [REDACTED]  
Coal Mine Safety and Health

**FROM:** [REDACTED]  
**THOMAS W. CHARBONEAU**  
Director, Office of Assessments

**SUBJECT:** Mine Safety and Health Administration (MSHA)  
Office of Accountability Review, Coal District 4, Mt. Carbon,  
West Virginia, Field Office and [REDACTED]  
[REDACTED], ID No. [REDACTED]

### Introduction

This memorandum summarizes the Office of Accountability's (OA) review of the subject District, Field Office, and mine. This review included MSHA field activities; level of enforcement; conditions and practices at the mine; Field Activity Reviews (FARs), Accompanied Activity (AA) reviews, and MSHA supervisory and managerial oversight activities. This accountability review also included evaluations to determine if there were any issues in areas commonly identified during Agency internal reviews of MSHA's actions following past mining disasters.

### Purpose

The purpose of this accountability review is to determine whether Agency enforcement policies, procedures, and guidance are followed consistently; assess whether mission critical enforcement activities are accomplished effectively; and to critically evaluate and improve the overall performance of MSHA's enforcement program. The major outcomes expected from the OA's review program are to identify potential or actual areas for improvement and to document the subsequent implementation of effective corrective actions to address any identified issues.

## Overview

OA Specialists Mark Odum and Jim Poynter (Review Team) conducted this review of Coal District 4 and the Mt. Carbon, WV Field Office (FO) from [REDACTED]. This review was conducted by the OA in accordance with the FY 2016 annual accountability review plan schedule, and focused on inspection activities during the first three quarters of FY 2016. The review concentrated on documentation of the Regular Safety and Health Inspection (E01), Event No. [REDACTED], conducted by the FO from January through March 2016 of the [REDACTED] (ID No. [REDACTED]) an underground coal mine. The [REDACTED] was selected for review because the mine is a [REDACTED].

As a part of the review, the Review Team conducted a mine visit focusing on general mine conditions; whether conditions at the mine correspond with enforcement levels documented in the reviewed inspection reports; and to observe current work practices at the mine site.

## Mine Visit

OA Specialist Mark Odum accompanied the Assistant District Manager – Enforcement, the Field Office Supervisor (FOS) and an Inspector to the [REDACTED] coal mine on [REDACTED], as part of an on-going Regular Safety and Health Inspection (E01).

The mine is located in [REDACTED]. The mine employs approximately [REDACTED] miners working two nine-hour production shifts and one maintenance shift per day, six days per week. The mine has one active longwall section and three active development sections. Two of the development sections use split ventilation with a mechanized mining unit (MMU) on each side of the section. The mine produces an average of [REDACTED] of raw coal daily, liberates more than four million cubic feet of methane per 24 hours, and is designated as a five-day, Section 103(i) spot mine. Coal is transported from the working section faces by shuttle car haulage and conveyor belts to the surface through a belt conveyor slope near [REDACTED] and is then transported by overland belt to a processing plant where it is prepared for distribution.

The inspection group entered the mine through the [REDACTED] and traveled to the [REDACTED] active development working section, MMUs 015-0 and 016-0. The mine visit included observations of the following on the working section:

- examinations of the working section and faces (Entry Nos. 1-8) for imminent dangers;
- methane tests;
- air readings;
- ventilation;

- rock dusting and cleanup practices;
- roof and rib conditions;
- communication and tracking system;
- section belt tailpiece; and
- the power center area

The group also observed the following:

- the alternate escapeway from the shaft to the section;
- escapeway signage;
- lifelines;
- dates, times, and initials of required examinations;
- section belt transfer and drive area, including associated fire protection;
- the check-in/check-out system; and
- the escapeway map

During the mine visit, the Inspector issued eight enforcement actions on or near the [REDACTED] section. (Attachment D)

#### Review Results

The accountability review revealed positive findings in several areas, including the following:

- For the E01 inspection reviewed, most inspection notes were detailed, clear, and concise.
- For the E01 inspection reviewed, inspectors documented thorough and detailed health and safety discussions with miners.
- During the mine visit inspection, the inspector was professional and conducted safety discussions with management and miners.

This accountability review identified two issues that required a corrective action plan. (See Attachment B for Issues requiring a Corrective Action Plan and Attachment C for Office of Accountability Checklist Items)

**Issue 1: The documentation reviewed for the Regular Safety and Health Inspection (E01), Event No. [REDACTED] was not complete. (Office of Accountability Checklist Item #2).**

- Copies of the related approval letters and pertinent pages of the approved plans were not included with inspectors' notes for 11 of 15 enforcement actions issued for failure to comply with approved plans.

**Issue 2: Possible Knowing/Willful (PKW) Forms were not processed according to agency policy and procedures. (Office of Accountability Checklist item #14).**

- [REDACTED]

The District Manager and the Review Team analyzed the findings identified during this review to determine the root causes of the issues:

- Issue 1 was the result of insufficient supervisory oversight of inspectors for the requirement to include pertinent pages of the approved plans when issuing enforcement actions for violations of those plans.
- Issue 2 was the result of improper training on procedures for processing the necessary forms to ensure the District Manager received the forms in sufficient time to decide whether to initiate or decline investigations within the required 30 day timeframe.

A corrective action plan from the District Manager addressing the identified issues is attached to this report. (Attachment A)

The Review Team discussed with District personnel best practices as described in the Coal General Inspection Procedures Handbook. Topics discussed included the Tracking Map and inspection of air courses; rock dust samples; and 103(i) Spot Inspection calendars. Discussions also included the status and enforcement levels at the [REDACTED]. A general outline of discussion topics is included in an attachment to this memorandum. (Attachment E)

As a part of this review, the OA compared enforcement levels of the mine with the FO, District, and national averages. For the first half of FY 2016, the mine received [REDACTED] enforcement issuances including [REDACTED] 104(d) actions. The [REDACTED] had the following enforcement level statistics:

- a Significant and Substantial violation (S&S) issuance rate of 23% during the first half of FY 2016 compared to an S&S rate of 21% for FY 2015;
- an elevated enforcement rate of 9.5% for first half of FY 2016 compared to 4.3% for FY 2015; and
- a Violation Per Inspection Hour (VPIH) rate of 0.13 for first half of FY 2016 compared to 0.12 for FY 2015.

The enforcement levels of the FO were compared with the district and national averages for the first half of FY 2016:

- an S&S issuance rate of 20% compared to the District's rate of 18% and the national average rate of 22%;

- an elevated enforcement rate of 5.5% compared to the District's rate of 3.9% and the national average rate of 4.7%; and
- a VPIH rate of 0.11 compared to the District's rate of 0.11 and the national rate of 0.09.

The operator for the [REDACTED] changed during the first quarter of FY 2016. [REDACTED] began operations of the mine on [REDACTED]. The S&S issuance rate and elevated enforcement rate were higher for the first half of FY 2016 than FY 2015. Based on discussions with FO personnel, the mine's increased enforcement level statistics appear to be the result of the change in mine operator and changes in mine management. During the mine visit on [REDACTED], the Inspector issued eight 104(a) enforcement actions. Based on observations made during the mine visit, the inspector's enforcement levels were appropriate. The OA recommends the District and FO continue to monitor mining conditions and enforcement levels at the mine.

Attachments

- A. Corrective Action Plan
- B. Issues requiring a Corrective Action Plan
- C. Office of Accountability Checklist
- D. Citations issued during this review

- No. [REDACTED] 75.402
- No. [REDACTED] 75.380(d)(1)
- No. [REDACTED] 75.370(a)(1)
- No. [REDACTED] 75.220(a)(1)
- No. [REDACTED] 75.202(a)
- No. [REDACTED] 75.400
- No. [REDACTED] 75.402
- No. [REDACTED] 75.202(a)

- E. Discussion Topics

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

District

Coal District 4

Field Office

Mt. Carbon,  
WV Field Office

Mine ID

[REDACTED]

Date

[REDACTED]

**Attachment A – Corrective Action Plan**

U.S. Department of Labor

Mine Safety and Health Administration  
100 Bluestone Road  
Mount Hope, WV 25860-1000



NOV 22 2016

MEMORANDUM FOR: Alfred Clayborne  
Deputy Director for  
Office of Assessments, Accountability,  
Special Enforcement and Investigations

THROUGH: Ted Smith [REDACTED]  
Supervisor, Office of Accountability

Jim Watkins [REDACTED]  
Acting Administrator for  
Coal Mine Safety and Health

Kevin Ferns [REDACTED]  
Acting Deputy Administrator for  
Coal Mine Safety and Health

Marcus Smith [REDACTED]  
Chief, Accident Investigations, Special Investigations  
and ACR

FROM: David Scott Mandeville  
District Manager  
Coal District 4

SUBJECT: Proposed Corrective Actions

This is a response to the review conducted by the Office of Accountability from [REDACTED] at the District 4 Mount Carbon Field Office and [REDACTED]. The results of your review identified five deficiencies, which are required to be addressed by the Mine.

Issue 1: The documentation reviewed for the Regular Safety and Health Inspection (RSI), event No. [REDACTED] was not complete. (Office of Accountability Checklist Item #2)

- Copies of the related approval letters and pertinent pages of the approved plans were not included with inspectors' notes for 11 of 15 enforcement actions and for failure to comply with approved plans

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

District

Coal District 4

Field Office

Mt. Carbon,  
WV Field Office

Mine ID



Date



- ROOT CAUSE

Issue 1 was the result of the mine inspector not following procedures in place for properly documenting citations being issued. The deficiency was contributed to by insufficient supervisory oversight/feedback to inspectors concerning the requirements to include the pertinent page(s) of the approved plan and the approved cover page when issuing enforcement actions for violations of an approved plan.

- PROPOSED CORRECTIVE ACTIONS

Training will be conducted at the next staff meeting. An email from Scott Mandeville (DM) has been sent to all supervisors detailing the additional training and communications needed. The General Inspection Handbook page 2-22 states "if an enforcement action results from failure to comply with an approved plan, permit or petition, a copy of the related approval letter and pertinent page(s) shall be included in with the inspectors' notes." This is currently not being done in all cases. Supervisors need to assure whenever a plan, permit or petition is violated that the pertinent pages are included in the notes. Discuss this with your inspectors and also go over this at your next staff meeting and document. If you have any questions please call Lincoln Selfe (Enforcement ADM).

Issue 2: Possible Knowing/Willful (PKW) Forms were not processed according to agency policy and procedures. (Office of Accountability Checklist item #14)

- 

ROOT CAUSE

The policies and procedures were not up-to-date on the correct or current number of days that the PKW forms had to be processed within; therefore they did not reach the DM for a signature within the timeframe.

PROPOSED CORRECTIVE ACTION

- District Management have identified the area that needs improvement.
- District Management will provide training to all personnel involved in the PKW process and update policies and procedures to properly reflect current timeframe.
- The SI secretary will monitor the PKW database and send out reminders to persons in the PKW approval chain (including the DM) that are behind in the approval process, based on the chart below:

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

District Coal District 4 Field Office Mt. Carbon,  
WV Field Office Mine ID  Date

	Inspector	Supervisor	ADM	SSI	DM
Approved By Day Number	5	10	15	20	25

- OFFICE OR POSITION RESPONSIBLE FOR IMPLEMENTING THE CORRECTIVE ACTIONS  
 Assistant District Manager for Enforcement
  
- TIMEFRAME FOR COMPLETION OF EACH CORRECTIVE ACTION  
 Training for all supervisors and inspectors was conducted at each field office during the first three weeks of October 2016. Follow-up training will be conducted, if necessary, for those not in attendance.
  
- METHOD FOR DETERMINING SUCCESS  
 Review of corrective actions will be conducted during the quarterly supervisor's review of E01s that are completed. At the end of the first quarter of FY-2017, a FAR will be conducted on a complete E01 inspection from a mine located in the Mount Carbon Field Office.

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

District

Coal District 4

Field Office

Mt. Carbon,  
WV Field Office

Mine ID

[REDACTED]

Date

[REDACTED]

**Attachment B – Issues requiring a Corrective Action Plan**

**Issue 1: The documentation reviewed for the Regular Health and Safety Inspection (E01), Event No. [REDACTED] was not complete. (Office of Accountability Checklist Item #2)**

- Copies of the related approval letters and pertinent pages of the approved plans were not included with inspectors' notes for 11 of 15 enforcement actions issued for failure to comply with approved plans.

Requirement: GIPH, page 2-21: If an enforcement action results from failure to comply with an approved plan, permit, or petition, a copy of the related approval letter and pertinent page(s) shall be included with the inspector's notes.

**Issue 2: Possible Knowing/Willful (PKW) Forms were not processed according to agency policy and procedures. (Office of Accountability Checklist item #14)**

- [REDACTED]

Requirements: Special Investigations Procedures Handbook, PH05-I-4, August 2005, page 4-3: Within **30 calendar days** of the date of issuance, of the citation/order a determination must be made by the DM (with the assistance of the SSI), whether to initiate an investigation or take no further action.

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

District  Field Office  Mine ID  Date

**Attachment C - Office of Accountability Checklist**

1. Determine if complete and thorough E01 inspections are being conducted and/or if policy and procedures were properly followed.

Adequate  Corrective Action Needed  Comments Below

2. Determine if documentation for inspections is complete and thorough.

Adequate  Corrective Action Needed  Comments Below

Copies of the related approval letters and pertinent pages of the approved plans (ventilation and roof control) were not included with inspection notes for 11 of 15 issuances.

**See Attachment B**

Determine if citations and orders issued during previous inspections were

3. properly evaluated for gravity, negligence, level of enforcement, number of persons affected, and supported by documentation.

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

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

District  Field Office  Mine ID  Date

6. Evaluate, upon arrival on the working section, inspector/specialist examination of all working faces for imminent dangers.

Adequate  Corrective Action Needed  Comments Below

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

Adequate  Corrective Action Needed  Comments Below

8. Evaluate the inspector/specialist air quantity, quality, and gas checks during the review.

Adequate  Corrective Action Needed  Comments Below

9. Evaluate inspector/specialist examination of equipment electrical cables during the review.

Adequate  Corrective Action Needed  Comments Below

10. Evaluate inspector/specialist examination for permissibility during the review.

Adequate  Corrective Action Needed  Comments Below

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

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

District

Coal District 4

Field Office

Mt. Carbon,  
WV Field Office

Mine ID

[REDACTED]

Date

[REDACTED]

12. Evaluate, during the review, the inspection of at least one set of seals, including methods for obtaining samples from sealed area.

Adequate

Corrective Action Needed

Comments Below

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

[REDACTED]

15. Evaluate 103(i) spot inspection (E02) reports for the office/district being reviewed 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

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

Adequate

Corrective Action Needed

Comments Below

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

District

Coal District 4

Field Office

Mt. Carbon,  
WV Field Office

Mine ID

[REDACTED]

Date

[REDACTED]

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

Adequate

Corrective Action Needed

Comments Below

Determine if required Accompanied Activities (AAs); Field Activity Reviews  
18. (FARs) and supervisory follow-ups are being conducted and documented  
according to agency policy and procedures?

[REDACTED]

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

Adequate

Corrective Action Needed

Comments Below

20. Determine if the Uniform Mine File (UMF) books are being maintained and  
reviewed according to current agency policy and procedures.

Adequate

Corrective Action Needed

Comments Below

21. Determine if supervisors are thoroughly reviewing Uniform Mine Files at  
least annually?

Adequate

Corrective Action Needed

Comments Below

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

District

Coal District 4

Field Office

Mt. Carbon,  
WV Field Office

Mine ID

[REDACTED]

Date

[REDACTED]

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

Adequate

Corrective Action Needed

Comments Below

23. Determine if all sections where retreat mining is occurring (not to include longwall mining) are being inspected at least monthly?

Adequate

Corrective Action Needed

Comments Below

24. Determine if documentation of staff meetings/safety meetings are effective and relevant to current issues and the Agency's mission.

Adequate

Corrective Action Needed

Comments Below

25. Determine, after an in-mine visit, if approved plans (Ventilation, Roof Control, Training, Emergency Response Plan (ERP), etc.) are compatible with mining conditions and equipment.

Adequate

Corrective Action Needed

Comments Below

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

Adequate

Corrective Action Needed

Comments Below

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

District  Field Office  Mine ID  Date

27. 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

28. Determine if Assistant District Managers (ADM) are conducting the required second level reviews and holding supervisors accountable for oversight of Field Activity Reviews and Accompanied Activities.

29. Determine if district management personnel are reviewing work products and reports for accuracy and completeness.

Adequate  Corrective Action Needed  Comments Below

30. 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

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

Adequate  Corrective Action Needed  Comments Below

NA – Not part of this review.

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Mt. Carbon,  
WV Field Office

Mine ID

[REDACTED]

Date

[REDACTED]

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

Adequate

Corrective Action Needed

Comments Below

33. Determine if Districts are conducting accountability reviews in compliance with agency policy and procedures including follow-up to determine the effectiveness of corrective actions.

Adequate

Corrective Action Needed

Comments Below

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

Adequate

Corrective Action Needed

Comments Below

35. Determine if District Managers are using the Report Center to identify overdue responses from operators and take appropriate actions.

[REDACTED]

36. Determine if a complete permissibility inspection of each longwall system is being conducted by electrical specialists or inspectors who hold a current MSHA electrical qualification card on at least an annual basis.

Adequate

Corrective Action Needed

Comments Below

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

District

Coal District 4

Field Office

Mt. Carbon,  
WV Field Office

Mine ID

[REDACTED]

Date

[REDACTED]

37.

Determine if a proper examination of the Atmospheric Monitoring System (AMS) and/or AMS systems that operate Carbon Monoxide (CO) sensors is being conducted. A complete inspection includes those items in the Coal General Inspection Procedures Handbook (GIPH) AMS checklist.

Adequate

Corrective Action Needed

Comments Below

38.

Determine if SSIs are maintaining a memorandum detailing the reasons for not conducting a special investigation when the district manager decides to take no further action, in accordance with the Special Investigations Procedures Handbook.

[REDACTED]

39.

Determine if proper procedures for conducting, documenting, and reviewing MSHA respirable dust surveys are being followed. Proper documentation to include blue cards, 2000-86s, etc.

Adequate

Corrective Action Needed

Comments Below

40.

Determine if District Managers and Assistant District Managers are providing acting field office supervisors with the level of oversight necessary to manage their work groups on a temporary basis including an online distance learning training course with a knowledge check for temporarily promoted supervisors. The guidance will be included in each District's Standard Operating Procedure (SOP) for training newly promoted field office supervisors.

[REDACTED]

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

District

Coal District 4

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Mt. Carbon,  
WV Field Office

Mine ID

Date

The Roof Control Plan SOP should comply with the established Program Policy Manual requirements as identified by the OIG report to address deficiencies identified in the Internal Review report. The SOPs should account for:

- 41.
- to check that required information is submitted
  - check for communication with other plan approval groups
  - assure that designated MSHA personnel contact the operator for additional information
  - discuss results of on-site evaluations with the operator and identified miners' representatives.

Adequate

Corrective Action Needed

Comments Below

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

District Coal District 4 Field Office Mt. Carbon, WV Field Office Mine ID [REDACTED] Date [REDACTED]

**Attachment D – Citations/Orders Issued During This Review**

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

The track entry/power entry from cross-cut 15 to 19 on [REDACTED] was not rock dusted in multiple locations.

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 75.402
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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: 012

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

12. Type of Action 104(a)  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 Mo Da Yr [REDACTED]

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr [REDACTED] B. Time (24 Hr. Clock) [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	23. AR Number [REDACTED]
22. AR Name [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 **Coal District 4** Field Office **Mt. Carbon, WV Field Office** Mine ID [REDACTED] Date

Mine Citation/Order

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



**Section I--Violation Data**

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

The secondary escapeway along the [REDACTED], inby cross-cut 18, was not being maintained in a safe condition to always assure passage of anyone, including disabled persons. Water was allowed to accumulate from two to 10 inches deep rib to rib for a distance of approximately 30 feet. This condition creates a slip, trip, or fall hazard.

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 75.380(d)(1)
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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: (0)	
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 [04(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				

16. Termination Due	A. Date Mo Da Yr <span style="background-color: black; color: black;">[REDACTED]</span>	B. Time (24 Hr. Clock) <span style="background-color: black; color: black;">[REDACTED]</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)	

**Section IV--Automated System Data**

19. Type of Inspection (activity code) E01	20. Event Number <span style="background-color: black; color: black;">[REDACTED]</span>	21. Primary or Mill
22. AR Name <span style="background-color: black; color: black;">[REDACTED]</span>		23. AR Number <span style="background-color: black; color: black;">[REDACTED]</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 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 **Coal District 4** Field Office **Mt. Carbon, WV Field Office** Mine ID **[REDACTED]** Date **[REDACTED]**

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]	
6. Mine [REDACTED]	7. Mine ID [REDACTED]	(Contractor)
8. Condition or Practice		Ba. Written Notice (103g)

The company's approved Ventilation Plan was not being complied with on the [REDACTED] MMU 015-0 active section. The Joy Continuous Miner was observed cutting in an extended cut of 35 feet in the #3 face. The amount of air reaching the inby end of the line curtain was 2,576 cfm by my readings and the operator had a reading of 4,060 cfm. [REDACTED]

[REDACTED] This condition exposes miners to lung diseases from respirable dust exposer.

The operator is also reminded that according to [REDACTED]

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 75.370(a)(1)
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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 104(a) 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 [REDACTED]

22. AR Name [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 Coal District 4 Field Office Mt. Carbon, WV Field Office Mine ID [REDACTED] Date [REDACTED]

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. Served To [REDACTED]		5. Operator [REDACTED]	
6. Mine [REDACTED]		7. Mine ID (Contractor) [REDACTED]	

Section II—Justification for Action

The operator made adjustments to the ventilation and now has 9,156 cfm behind the line curtain in the #3 entry.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection EOI	10. Event Number [REDACTED]		
11. AR Name [REDACTED]	AR Number [REDACTED]	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 **Coal District 4** Field Office **Mt. Carbon, WV Field Office** Mine ID **[REDACTED]** Date **[REDACTED]**

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

The approved roof control plan was not being complied with on the [REDACTED] MMU 015-0 section. The continuous miner was cutting in a 35 feet extended cut in the #3 entry that had fallen 50 feet outby the last row of permanent roof support in previously mined cuts, [REDACTED]. This condition exposes miners to injuries from fall of roof.

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 75.220(a)(1)
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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 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				

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 (activity code) E01	20. Event Number [REDACTED]	21. Primary or Mill
22. AR Name [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 Coal District 4 Field Office Mt. Carbon,  
WV Field Office Mine ID [REDACTED] Date [REDACTED]

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

The operator failed to protect miners from fall of roof, face, and ribs. In the cross-cut between #6 and #7 entries lose rock 1 to 6 inches thick 2 feet wide by 4 feet long was between the outside row of bolts and the rib. This condition exposes miners to fall of roof.

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 75.202(a)
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**Section II--Inspector's Evaluation**

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/> 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 The loose rock was scaled down.

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
22. AR Name [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 Coal District 4 Field Office Mt. Carbon, WV Field Office Mine ID [REDACTED] Date [REDACTED]

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	[REDACTED]
4. Served To	5. Operator		[REDACTED]	
6. Mine	7. Mine ID		[REDACTED] (Contractor)	
8. Condition or Practice			8a. Written Notice (103g)	

Accumulations of loose coal was observed on the mine floor on the [REDACTED] section from the section loading point to the face in the number 1, 3, and 8 entries in various locations.

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	75.400
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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 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	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]

Section IV—Automated System Data

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

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

District **Coal District 4** Field Office **Mt. Carbon, WV Field Office** Mine ID **[REDACTED]** Date **[REDACTED]**

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

Multiple locations from the loading point inby on the [REDACTED] section did not have rock dust applied to the roof.

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 75.402
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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 [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) E01	20. Event Number [REDACTED]	21. Primary or Mill
22. AR Name [REDACTED]		23. AR Number [REDACTED]

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

District **Coal District 4** Field Office **Mt. Carbon, WV Field Office** Mine ID **[REDACTED]** Date **[REDACTED]**

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

Two roof bolts in the last open intersection in the number 8 entry had been cut out and not replaced. This condition was in 1 row of bolts making the distance between bolts 9.3 feet (112 inches), and the maximum spacing is 4 feet.

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 75.202(a)
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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:			D. Number of Persons Affected:			
Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			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		13. Type of Issuance (check one)				
104(a)		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		F. Dated Mo Da Yr	
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>						
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	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
22. AR Name [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  Field Office  Mine ID  Date

**Attachment E – Discussion Topics**

**Topics discussed with the District not requiring a corrective action plan:**

- Tracking Map – An intake air course, five crosscuts in length, was not documented as inspected on the Tracking Map. See GIPH, page 3-38 through 3-39 for reference.
- Rock Dust Tracking – Rock dust samples were not taken in the bleeder entries or on 16 HG section belts A or B. See GIPH, page 5-12 through 5-23 for reference.
- 103(i) Spot Calendars – Spot calendars did not provide all information for the spot inspections conducted such as event number, location, and shift. See Coal Mine Safety and Health Supervisor's Handbook, AH14-III-4, page 1-8 for reference.
- Status and enforcement levels of the , ID No. .