



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583305
4. Served To Dick Wilfong, Maintenance Superintendent	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		

The 1240 feet long No.6 cable supplying power 575 volts to the No.10, T and T pump was not provided with proper short circuit protection. The circuit breaker was set at 300 amps and the available fault current is 246 amps for this length of cable.

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 75.518
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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

14. Initial Action A. Citation  B. Order  C. Safeguard  D. Written Notice  E. Citation/Order Number F. Dated Mo Da Yr

15. Area or Equipment

18. Termination Due A. Date Mo Da Yr 03/31/2006 B. Time (24 Hr. Clock) 1130

Section III—Termination Action

17. Action to Terminate The cable was cut off this pump.

18. Terminated A. Date Mo Da Yr 03/31/2006 B. Time (24 Hr. Clock) 1130

Section IV—Automated System Data

19. Type of Inspection (activity code) E16 20. Event Number 4134415 21. Primary or Mill

22. Signature [Signature] 23. AR Number 6

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583306
4. Served To Dick Wilfong, Maintenance Superintendent	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		

The cable supplying power to the No.2 Trickle Rock Duster located at the 39 cross cut of No.3 belt was laying on the mine floor. The entire 50 feet length of the cable was not hung on insulators.

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 75.516
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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"/>	D. Number of Persons Affected: 001
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>		
12. Type of Action 104(a)	13. Type of Issuance (check one)	Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Dated	Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The power cable was cut off the duster.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature <i>[Signature]</i>	23. AR Number <i>[Signature]</i>	

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data		3. Citation/Order Number	
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	7583307
	03/31/2006	1130	
4. Served To		5. Operator	
Dick Wilfong, Maintenance Superintendent		WOLF RUN MINING COMPANY	
6. Mine		7. Mine ID	
SAGO MINE		46-08791	
8. Condition or Practice		8a. Written Notice (103g)	

The No.2 Trickle Rock Duster 480 volt 1.7 horse power motor, located at the 39 cross cut of No.3 belt was not provided with short circuit protection. The circuit breaker was set at 300 amps and the allowable amount for this small motor is 15 amps.

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
			75.518

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

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)
	03/31/2006		1130

Section III—Termination Action

17. Action to Terminate The power cable was cut off the duster and removed from service.

18. Terminated	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)
	03/31/2006		1130

Section IV—Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill
22. Signature	6		23. AR Number	6

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583308
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8a. Written Notice (103g) <input type="checkbox"/>		

8. Condition or Practice

The No.4, 575 volt 200 horse power belt drive motor was not provided with proper overload protection. The overload was set at 264 amps and the maximum allowable for this motor is 225 amps.

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 75.518
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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"/>	D. Number of Persons Affected: 001
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>	12. Type of Action 104(a)	13. Type of issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Dated Mo Da Yr
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The overload was set to 220 amps.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill	23. AR Number 6
22. Signature 6			

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data		3. Citation/ Order Number	7583309
1. Date	Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock)	1130
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8a. Written Notice (103g) <input type="checkbox"/>			

8. Condition or Practice  
The 480 volt No.6 Stanco Pump being used in the return air course at 15 cross cut of No. 4 belt was not maintained permissible as approved. The approved Stanco controller was removed and replaced with a non permissible Flygt type controller.

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	75.507-1(a)
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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

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 03/31/2006	B. Time (24 Hr. Clock)	1130
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Section III—Termination Action

17. Action to Terminate The pump assembly was replaced with a permissible unit.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock)	1130
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Section IV—Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill	
22. Signature	6			23. AR Number	6

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I - Violation Data		3. Citation/Order Number	7583310
1. Date	Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock)	1130
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>	

The 480 volt No.6 Stanco Pump being used in the return air course at 15 cross cut of No.4 belt was not provided with proper overload protection. The overloads provided were set at 17 amps and the allowable setting is 9.2 amps.

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	75.518
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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"/>			D. Number of Persons Affected: 001
	C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>
12. Type of Action	104(a)	13. Type of Issuance (check one)		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/Order Number	F. Dated Mo Da Yr
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock)	1130
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Section III - Termination Action

17. Action to Terminate The entire pump assembly was replaced with a permissible unit.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock)	1130
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Section IV - Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill	
22. Signature	[Signature]			23. AR Number	6

MSHA Form 7000-3, Mar 85 (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.



Section I--Violation Data		3. Citation/Order Number	
1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	7583311	
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>	

The 1600 feet long 2/0 power cable supplying power from No. 9 cross cut to 25 cross cut of No.4 belt was not provided with proper short circuit protection. This circuit was supplying power to a distribution box feeding other electrical equipment. The circuit breaker was set at 1125 amps and the allowable amount for this length cable is 842 amps.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.518
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III--Termination Action

17. Action to Terminate The cable disconnecting device was moved to a circuit breaker that was set at 800 amps.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV--Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature L 6 I		23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 00 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583312
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

8. Condition or Practice  
The 480 volt 2/0 power cable supplying power from 9 cross cut No.4 belt to the No 1 distribution box at 12 cross cut contained a damaged area. The insulation was damaged on a splice, exposing the shielded power conductors. One crosscut inby this, the shielding was not continuous.

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 75.517
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The cable was repaired.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature [Signature]	23. AR Number 6	

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.





Section I--Violation Data		3. Citation/Order Number		7583313
1. Date	Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock)	1130	
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY		
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)	
8. Condition or Practice				

The circuit breaker and receptacle supplying power to the disconnecting device for the No.6 slurry pump located in the No.4 belt intake air course, was not properly identified. The circuit breaker and receptacle was identified as supplying power to the No.10 slurry pump.

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	75.904
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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		13. Type of Issuance (check one)		
104(a)		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action				F. Dated
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>				Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	1130
	03/31/2006			

Section III--Termination Action

17. Action to Terminate The circuit breaker and receptacle was properly identified as supplying power to the No.6 slurry pump.

18. Terminated	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	1130
	03/31/2006			

Section IV--Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill
22. Signature			6	23. AR Number
				6

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583314
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The 4000 + feet No.10/5 cable supplying 480 volts power from the 9 block of No.4 belt to the No 10 slurry pump at 45 block of No.4 belt was not provided with proper short circuit protection. The circuit breaker was set at 900 amps and the available fault current for this length of cable is 24 amps.

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 75.518
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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"/>			F. Dated Mo Da Yr
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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III--Termination Action

17. Action to Terminate The cable was cut off both ends and the ump removed from service.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV--Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 86 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583315
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The scoop battery charger located in the intake air course at 4 belt, 27 cross cut was neither housed in a noncombustible structure, or equipped with a fire suppression system.

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 75.340
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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"/>	D. Number of Persons Affected: 012
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>		
12. Type of Action 104(a)	13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Dated Mo Da Yr	

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The charger was mover from the intake air course.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number 6

MSHA Form 7000-3, Mar 85 (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.



Section I--Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583316
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The 575 volt ungrounded (unshielded) power conductors of the No.6 cable supplying power to the No.4 charger located on the surface were fed from underground, were not provided with lightning arrestors.

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 75.521
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III--Termination Action

17. Action to Terminate The cable was removed from the charger. The charger is being powered from the surface.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV--Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6	23. AR Number 6	

MSHA Form 7000-3, Mar 85 (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.



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583317
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The 575 volt ungrounded (unshielded) power conductors of the No.6 cable supplying power to the No.8 charger located on the surface were feed from under ground were not provided with lightning arrestors.

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 75.521
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The cable was removed from the mine. The charger is being powered from the surface.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature [Signature]		23. AR Number 6

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 408 3rd Street, SW MC 2120, Washington, DC 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.



Section I--Violation Data		
1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583318
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The 7200 volt high voltage cable at the 4C transformer of the 27 crosscut of No.4 belt was not properly installed. The cable was hung approximately 18 inches lower than the required 6.5 feet from the mine floor and was not guarded where miners are required to travel and work under it. This condition existed for about 15 feet in length.

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 75.807
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Section II--Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III--Termination Action

17. Action to Terminate The cable is properly guarded.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV--Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number 6

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 400 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583319
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The No.6 Fairchild battery powered scoop Serial Number 339-346, approval No. 2G-3599-2 located on the 1st. Left unit was not maintained in permissible condition as approved. The battery plugs were not properly assembled: The locking devices securing the sections of the plugs together were not tight, allowing the sections to unscrew.

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 75.503
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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"/>	D. Number of Persons Affected: 001
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)	13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Dated Mo Da Yr	
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The battery plugs were properly assembled.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583320
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The No.6 Fairchild battery powered scoop Serial Number 339-346, approval No. 2G-3599-2 located on the 1st. Left unit was not provided with a properly maintained fire suppression system. The fire suppression system had been discharged.

- (1) the chemical tank was empty,
- (2) the chemical expellant cartridge was discharged,
- (3) the disc that holds the chemicals into the tank was ruptured, and
- (4) the actuator in the operators deck was ruptured.

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 75.1107-16(b)
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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"/>
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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The chemical tank is full. The expellant, actuator cartridge, and ruptured disc were replaced.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature [Signature]		23. AR Number 6

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.





Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583321
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The No.3 Fairchild battery powered scoop Serial Number 339-328, approval No. 2G-3599-2 located on the 1st. Left unit was not maintained in permissible condition as approved.

(1) the battery plug on the operators side was not properly assembled. The locking screws were loose,  
 (2) the protective conduit on the operators side battery plug lead was busted and contained a hole in it,  
 (3) the conduit on the battery plug lead opposite the operator was damaged and missing for 14 inches in length,  
 (4) this same side was missing the conduit clamp,  
 (5) the battery plug on the same side was damaged and needs replaced, the inner insulation was broken,

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 75.503
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The machine was restored to permissible condition by replacing the battery receptacle, battery plug, conduit, conduit clamp, and properly assembling the plugs.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 85 (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.

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 type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 03/31/2006	3. Citation/Order Number 7583321
4. Served To Dick Wilfong, Maintenance Superintendent	5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice

(6) the battery end receptacle on the operators side was damaged, the inner insulation and threads area were busted.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415		
11. Signature 	AR Number [Signature]	12. Date Mo Da Yr 03/31/2006	13. Time (24 Hr. Clock) 1130

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583322
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The circuit breaker and receptacle supplying 575 volts to the No.4 disconnect and scoop charger located at 1st left 28 cross cut was not properly identified.

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 75.904
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The circuit breaker, receptacle and disconnecting device were properly identified.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583323
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The circuit breaker and receptacle supplying 575 volts to the No.16 disconnect and scoop charger located at 1st left 28 cross cut was not properly identified.

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 75.904
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The circuit breaker, receptacle and disconnecting device were properly identified.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number 6

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583324
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The No 6/5 cable supplying 575 volts to the No.16 scoop charger located at 1st left 28 cross cut was not provided with proper short circuit protection. The circuit breaker was set at 1000 amps and the maximum allowable setting is 300 amps.

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 75.518
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Section II—Inspector's Evaluation

10. Gravity:								
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>		
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>			
C. Significant and Substantial:			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001			
11. Negligence (check one)		A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>		
12. Type of Action 104(a)		13. Type of Issuance (check one)			Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The circuit breaker was set to 300 amps.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature T 6		23. AR Number 6

MSHA Form 7000-3, Mar 85 (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.



Section I--Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583325
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The 480 volt 3 phase 58 horse power flygt pump located in the 1st., left return air course was not maintained in permissible condition as approved.  
 (1) the system was powered by a 600 volt system,  
 (2) the permissible controller has been replaced with a non permissible shop built controller,  
 (3) the floats located with the pump were non intrinsically safe 120 volt type, and incorrect type wiring SO cable was supplying the control circuit, and  
 (4) the motor was not provided with proper short circuit protection. The circuit breaker was set at 750 amps and the allowable setting for this pump is 507 amps.

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 75.507-1(a)
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III--Termination Action

17. Action to Terminate The complete pump system was removed from the mine.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV--Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6 I		23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583326
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The No.6 cable supplying 575 volts to the No.3 T and T pump located at the 46 block of No.4 belt was not provided with proper short circuit protection. The circuit breaker was set at 700 amps and the maximum allowable is 300 amps. This condition is located at the No. 5 belt transformer.

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 75.518
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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"/>		
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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The correct circuit breaker was installed.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature I 6 I		23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583327
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

8. Condition or Practice

The 2nd left 200 horse power belt drive motor was not provided with proper short circuit protection. The circuit breaker was set at 3000 amps and the maximum allowable for this system is 1260.

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 75.518
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate This belt assembly was removed from the mine due to the destruction from the explosion.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature I 6	23. AR Number I 6 I	

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583328
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8a. Written Notice (103g) <input type="checkbox"/>		

8. Condition or Practice  
The No.6 cable supplying power to the No.6 T&T pump located at the track entry of 2nd left unit was not provided with proper short circuit protection. The circuit breaker was set at 480 amps and the maximum allowable for this cable is 300 amps.

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 75.518
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The cable was removed from the pump. This abatement was observed by [ 6 ] MSHA.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6	23. AR Number 6	

MSHA Form 7000-3, Mar 85 (revised) in accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 400 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583329
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

8. Condition or Practice

The No.6 cable supplying power to the 575 volt No.7 battery charger powered from 2nd left belt transformer was not provided with proper short circuit protection. The circuit breaker was set at 480 amps and the maximum allowable for this cable is 300 amps.

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 75.518
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate This charger was destroyed by the explosion and removed from the mine.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6	23. AR Number 6	

MSHA Form 7000-3, Mar 85 (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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583330
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

8a. Written Notice (103g)

The No.6 cable supplying power to the 575 volt No.7 trinkle duster powered from 2nd left belt transformer was not provided with proper short circuit protection. The circuit breaker was set at 500 amps and the maximum allowable for this cable is 300 amps.

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 75.518
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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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate This unit was destroyed by the explosion.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature [Signature]		23. AR Number 61

MSHA Form 7000-3, Mar 85 (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.



Section I—Violation Data		
1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583331
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The 575 volt trailing cable supplying power to the No.41 roof bolter located in the primary intake escapeway at 4 belt block 27 contained a permanent splice with the outer jacket and insulation damaged exposing the power conductors. The splice was not sealed so as to exclude moisture. This splice was very wet on the inside of the splice, and was laying in water.

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 75.604(b)
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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"/>
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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The splice was removed from the cable.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data		
19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number 6

MSHA Form 7000-3, Mar 85 (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.



Section I—Violation Data		3. Citation/Order Number	
1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	7583332	
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8a. Written Notice (103g) <input type="checkbox"/>			

8. Condition or Practice

The no.41 roof bolter approval 2G-3715A-0 located in the primary intake escapeway at 4 belt, block 27 was not maintained in permissible condition as approved.

(1) the no.4 trailing cable was in excess of 1206 feet in length, and the maximum length cable is 600 feet,

(2) the front center 120 volt incandescent light was not secured to the frame,

(3) the same light contained a damaged 90 degree packing gland assembly,

(4) the operators side center panic bar contained a damaged cable restraint clamp,

(5) the operators side boom end intinctive safe circuit junction box contained a broken entrance gland, and

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
			75.503

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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The excessive cable was removed, a new light assembly was installed, the restraint clamp, and junction boxes were repaired.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature <i>[Signature]</i>	23. AR Number 6	

MSHA Form 7000-3, Mar 85 (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.

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 type="checkbox"/> <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 03/31/2006	3. Citation/Order Number 7583332
4. Served To Dick Wilfong, Maintenance Superintendent	5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice  
(6) the intrinctive safe circuit junction box under the center covers was not mounted to the frame and contained a damaged entrance gland.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415	11. Signature [Signature]	AR Number [46]	12. Date Mo Da Yr 03/31/2006	13. Time (24 Hr. Clock) 1130
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Section I—Violation Data		
1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583333
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8a. Written Notice (103g) <input type="checkbox"/>		

8. Condition or Practice  
The 1206 + feet long No. 4 trailing cable supplying 575 volts power to the No.41 roof bolter located in the primary intake escapeway at No.4 belt block 27 was not provided with proper short circuit protection for this length cable. The circuit breaker was set at 700 amps and the maximum allowable is 379 amps.

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 75.601-1
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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 checked="" type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 012		
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>					
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>			
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/Order Number		F. Dated Mo Da Yr

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The circuit breaker was properly adjusted.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 85 (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.



Section I—Violation Data		3. Citation/Order Number		7583334
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)		
	03/31/2006	1130		
4. Served To		5. Operator		
Dick Wilfong, Maintenance Superintendent		WOLF RUN MINING COMPANY		
6. Mine		7. Mine ID		(Contractor)
SAGO MINE		46-08791		
8. Condition or Practice		8a. Written Notice (103g)		

The No.41 roof bolter located in the primary intake escapeway at No.4 belt block 27 was not maintained in safe operating condition. The hydraulic release, spring applied auto park brakes were not functional. The brake caliper pads were not coming in contact with the brake disc.

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	75.1725(a)
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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

14. Initial Action A. Citation  B. Order  C. Safeguard  D. Written Notice  E. Citation/Order Number F. Dated Mo Da Yr

15. Area or Equipment

18. Termination Due	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	1130
	03/31/2006			

Section III—Termination Action

17. Action to Terminate The brake calipers were properly adjusted.

18. Terminated	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	1130
	03/31/2006			

Section IV—Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill	
22. Signature	[Signature]			23. AR Number	6

MSHA Form 7000-3, Mar 85 (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.



Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583335
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The No.41 roof bolter located in the primary intake escapeway at No.4 belt block 27 contained accumulations of combustible material in the form of oil and oil saturated materials. The accumulations were on the electrical components, under all covers, on the brakes components and in the cable reel compartment. The accumulations measured 0 to 10 inches in depth.

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  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

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 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate The accumulations were removed from the machine.

18. Terminated	A. Date Mo Da Yr 03/31/2006	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number 6

MSHA Form 7000-3, 10/85 (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.

Mine Citation/Order

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



Section I - Violation Data			3. Citation/ Order Number	7583336
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)		
	03/31/2006	1130		
4. Served To			5. Operator	
Dick Wilfong, Maintenance Superintendent			WOLF RUN MINING COMPANY	
6. Mine			7. Mine ID	(Contractor)
SAGO MINE			46-08791	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>	

The No.16 battery powered scoop located at the No.3 belt 16 block was not maintained in safe condition.

(1) the 2 front head lights were broken off and not secured to the frame,  
 (2) the operators side rear light was broken off and not secured to the frame,  
 (3) the hydraulic release spring applied park brake was not functional, and  
 (4) both sides of the battery trays were grounded and signs of arcing to the frame was present.

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	75.512
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Section II - Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	
	03/31/2006	1130	

Section III - Termination Action

17. Action to Terminate The machine was removed from the mine and the mine property.

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)	
	03/31/2006	1130	

Section IV - Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill	
22. Signature	[Signature]			23. AR Number	6

MSHA Form 7000-3, Mar 85 (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.



Section I—Violation Data			3. Citation/Order Number	7583337
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)		
	03/31/2006	1130		
4. Served To			5. Operator	
Dick Wilfong, Maintenance Superintendent			WOLF RUN MINING COMPANY	
6. Mine			7. Mine ID	(Contractor)
SAGO MINE			46-08791	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>	

The No.1 belt hydraulic take up unit, 480 volt motor was not maintained in safe condition. The motor was being powered by a 575 volt system.

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	75.512
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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

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)	1130
		03/31/2006		

Section III—Termination Action

17. Action to Terminate A 575 volt motor was installed. This condition was observed corrected by [ 6 ] MSHA.

18. Terminated	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	1130
		03/31/2006		

Section IV—Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill	
22. Signature	[ 6 ]			23. AR Number	[ 6 ]

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