

104(a) Citations

Fiscal Year 2006

Mine Citation/Order

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

17 OCT 2005



Section I--Violation Data

1. Date Mo Da Yr 10/03/2005	2. Time (24 Hr. Clock) 1105	3. Citation/ Order Number 7149383
4. Served To AL SCHOONOVER		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

60 feet a minute of air was not being maintained over the miner cutting in the number 3 entry of the 2 left working section. When checked only 31 fpm was being maintained.

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 75.326
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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 10/03/2005	B. Time (24 Hr. Clock) 1150
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Section III--Termination Action

17. Action to Terminate Check curtains were adjusted to make more than 60 fpm of air over the miner.

18. Terminated	A. Date Mo Da Yr 10/03/2005	B. Time (24 Hr. Clock) 1150
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Section IV--Automated System Data

19. Type of Inspection (activity code) E20	20. Event Number 4077391	21. Primary or Mill
22. Signature		23. AR Number [6]

MSHA Form 7000-3, March 89 (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.

10-6-05

Mine Citation/Order

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

18 OCT 2005



Section I-Violation Data

1. Date Mo Da Yr 10/04/2005	2. Time (24 Hr. Clock) 0820	3. Citation/ Order Number 7098349
4. Served To Jeff Toler	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

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

The Fairchild 35C-WH battery powered scoop being operated on the 003-0 mmu is not maintained in permissible condition as follows: (1) The battery covers are not provided with any device to lock/secure them in place. (2) The batteries them selves are dirty with up to 1" of dirt and dust wind rowed under the hinges of the lids from front to back on the batteries..

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 10/04/2005	B. Time (24 Hr. Clock) 1050
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Section III-Termination Action

17. Action to Terminate The batteries were cleaned and the lid's were properly secured.

18. Terminated	A. Date Mo Da Yr 10/04/2005	B. Time (24 Hr. Clock) 1050
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Section IV-Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature <i>[Signature]</i>		23. AR Number L6J

MSHA Form 7000-7, 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.

cc: mc, mc, JT, JR

[Handwritten signature]
10/06

Mine Citation/Order

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

11 OCT 2005



Section I—Violation Data

1. Date Mo Da Yr 10/04/2005	2. Time (24 Hr. Clock) 0945	3. Citation/ Order Number 7098350
4. Served To Jeff Toler	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The required 240 lbs. of rock dust is not provided for the #14 Stanco pump located 50 feet inby spad station #4128 on the 003-0 mmu section.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1100-2(e)(2)
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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 10/04/2005	B. Time (24 Hr. Clock) 1050
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Section III—Termination Action

17. Action to Terminate The required 240 lbs. of rock dust was provided.

18. Terminated	A. Date Mo Da Yr 10/04/2005	B. Time (24 Hr. Clock) 1050
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mit
22. Signature		23. AR Number [6]

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

cc: MCA
MC
JT
JR

upl
10/10/06

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 10/04/2005	2. Time (24 Hr. Clock) 0950	3. Citation/ Order Number 7098351
4. Served To Jeff Toler		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The power cable for the #14 Stanco pump located 50 feet inby spad # 4128 on the 003-0 mmu section is not substantially bushed entering the disconnect control box with insulated bushings. The bushing has worked away from the junction box exposing the electrical leads.

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 75.515
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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 10/04/2005	B. Time (24 Hr. Clock) 1045
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Section III--Termination Action

17. Action to Terminate The power lead was properly bushed going into the control box to provide adequate protection.

18. Terminated	A. Date Mo Da Yr 10/04/2005	B. Time (24 Hr. Clock) 1045
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature 		23. AR Number L6J

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.

CC: ml
ml
JT
JR

upl
10/06

Mine Citation/Order

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

19 OCT 2005



Section I—Violation Data

1. Date Mo Da Yr 10/05/2005	2. Time (24 Hr. Clock) 1030	3. Citation/ Order Number 7098352
4. Served To Jeff Toler	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The personnel doors along the escapeway are not clearly marked on either side for easy identification from the 1 left section tailpiece 006-0 mmu to the 1 left section mantrip station for a distance of approximately 2000'.

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 75.333(c)(2)
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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 10/06/2005	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature <i>[Signature]</i>	23. AR Number 6	

MSHA Form 7000-1, 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.

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Mine Citation/Order
Continuation

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

10 OCT 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 10/05/2005	3. Citation/Order Number 7098352 - 01
4. Served To Marty Conrad	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

The personnel doors have been properly identified from each escapeway

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434	
11. Signat [6]	12. Date Mo Da Yr 10/06/2005	13. Time (24 Hr. Clock) 0635

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Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 10/05/2005	2. Time (24 Hr. Clock) 1045	3. Citation/ Order Number 7098353
4. Served To Jeff Toler	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Combustible material in the form of a light coat of float coal dust is allowed to accumulate on previously rock dusted surfaces (ribs) in the following locations; 1.) #5 Entry starting at spad #3751 extending inby approximately 210' 2.) #6 Entry starting at spad #3752 extending to spad #3788.

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: 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 10/05/2005	B. Time (24 Hr. Clock) 2000
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Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

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Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 10/05/2005	3. Citation/Order Number 7098353 - 01
4. Served To Marty Conrad	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

The cited areas were well rock dusted.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature J. L. G.	AR Number	12. Date Mo Da Yr 10/06/2005	13. Time (24 Hr. Clock) 0645

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Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 10/05/2005	2. Time (24 Hr. Clock) 1140	3. Citation/ Order Number 7098354
4. Served To Jeff Toler	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g)

The methane monitor for the Joy 14 CM15-11 remote control continuous mining machine, serial # JM5581, approval #2G-4159A-00, being operated on the 006-0 mmu is not properly maintained. 1) when tested with a known methane/air mixture of 2.5% methane, the methane monitor read out indicated 2.2 % methane before the machine would de-energize. Records indicate calibration on the monitor was 10/2/2005.

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 75.342(a)(4)
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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 10/05/2005	B. Time (24 Hr. Clock) 1155
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Section III—Termination Action

17. Action to Terminate The methane monitor was calibrated to de-energize at 2.0% methane.

18. Terminated	A. Date Mo Da Yr 10/05/2005	B. Time (24 Hr. Clock) 1155
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature <i>[Signature]</i>		23. AR Number [6]

MSHA Form 7000-3, Mar 83 (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.

wpl 10/07

Mine Citation/Order

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

10/05/2005



111

Section I--Violation Data

1. Date Mo Da Yr 10/05/2005	2. Time (24 Hr. Clock) 0825	3. Citation/ Order Number 7098355
4. Served To Winston McHenry	5. Operator HWM TRUCK LINES, INC.	
6. Mine SAGO MINE	7. Mine ID 46-08791 E467	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The audible warning device (backup alarm) on the Caterpillar front end loader 980F operating at the stockpile is not being maintained above the surrounding noise levels of other equipment being operated in the area. While standing approximately 15' away the alarm can not be heard.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 77.410(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	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 10/05/2005	B. Time (24 Hr. Clock) 1245
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Section III--Termination Action

17. Action to Terminate The backup audible alarm was repaired.

18. Terminated	A. Date Mo Da Yr 10/05/2005	B. Time (24 Hr. Clock) 1245
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature 		23. AR Number [6]

MSHA Form 7000-3, Mar 03 (rev 03/03) 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.

up 10/07

Mine Citation/Order

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

2005

TCA



Section I - Violation Data

1. Date Mo Da Yr 10/05/2005	2. Time (24 Hr. Clock) 0930	3. Citation/ Order Number 7149290
4. Served To JEFF TOLER, SUPT.	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The Primary escapeway is not marked to show route and direction for a distance of 500 feet, Also, the secondary escapeway was not marked to show route and direction for a distance of approximately 2,000 feet.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.380(d)(2)
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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 10/05/2005	B. Time (24 Hr. Clock) 1300
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Section III - Termination Action

17. Action to Terminate Terminated due to reflectors being provided in both escapeway to show to route and direction of travel.

18. Terminated	A. Date Mo Da Yr 10/05/2005	B. Time (24 Hr. Clock) 1300
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signatu [6]		23. AR Number [6]

MSHA Form 7000-3a (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 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.

CCEP JT
10/15/2005

OBW
10-11-5

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 10/05/2005	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7149291
4. Served To JEFF TOLER, SUPT.	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The fire suppression system on the Joy Continuous Miner, Model No. 14 CM15-11, Serial No. 2G-4159A-00, on the MMU 006 Section, is not properly maintained, When activated only (one) spray of the (four) sprays on the front of the miner would spray any 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 75.1107-16(b)
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 001

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

12. Type of Action 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 10/05/2005	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate Terminated due to the sprays being cleaned and made operable on the Miner.

18. Terminated	A. Date Mo Da Yr 10/05/2005	B. Time (24 Hr. Clock) 1120
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature CC EP JT 10/5/05		23. AR Numbe. [6]

MSHA Form 7000-3, with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-6247), 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.

CC EP JT
10/5/05

10-11-

Citation/Order

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

Section I--Violation Data

1. Date Mo Da Yr 10/06/2005	2. Time (24 Hr. Clock) 0658	3. Citation/ Order Number 7098356
4. Served To Marty Conrad	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Fairchild 35C scoop, approval # 2G-3599-2, scoop operating on the 1-Left section mmu 006-0 is not being maintained in a safe operating condition. The wire rope used on the scoop wench has several distortion of the rope structure, the rope lays are separated and several broken wire strands exist at the end of the termination.

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

16. Termination Due	A. Date Mo Da Yr 10/06/2005	B. Time (24 Hr. Clock) 0705
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Section III--Termination Action

17. Action to Terminate The wire rope was removed from the scoop.

18. Terminated	A. Date Mo Da Yr 10/06/2005	B. Time (24 Hr. Clock) 0705
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature 		23. AR Number [6]

MSHA Form 7000-3a, revised 10/2004. 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 checked="" type="checkbox"/>	2. Dated (Original Issue) 10/06/2005	3. Citation/ Order Number 7098356 - 01
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II-Justification for Action

Change	From	To
9. C. Part/Section	75.1434(e)	75.1725(a)

Reason

Incorrect section of 30 CFR

See Continuation Form

Section III-Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434	
11. Signature 	12. Date Mo Da Yr 10/11/2005	13. Time (24 Hr. Clock) 1517

6/10/13

Mine Citation/Order

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

17.

Section I—Violation Data

1. Date Mo Da Yr 10/06/2005	2. Time (24 Hr. Clock) 0930	3. Citation/ Order Number 7098357
4. Served To Marty Conrad	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

8. Condition or Practice Ba. Written Notice (103g)
 There is no fire fighting equipment (hose and fittings) available for the #7 coal conveyor belt line.

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 75.1100-2(b)
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 001

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

12. Type of Action 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 10/06/2005	B. Time (24 Hr. Clock) 1100
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Section III—Termination Action

17. Action to Terminate The fire fighting equipment was provided for the #7 coal conveyor belt line.

18. Terminated	A. Date Mo Da Yr 10/06/2005	B. Time (24 Hr. Clock) 1100
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3 (Rev. 03/01) 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.

WPL
10/10/07

Mine Citation/Order

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

2 5 2005



Section I--Violation Data

1. Date Mo Da Yr 10/11/2005	2. Time (24 Hr. Clock) 0935	3. Citation/ Order Number 7098358
4. Served To Carl Crumrine Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The required first aid materials for the 1 left section 006-0 mmu are not being properly maintained in that 10 triangular bandages of the required 24 and 0 tourniquets of the required 2 were provided.

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 75.1713-7(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 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 of Equipment			

16. Termination Due	A. Date Mo Da Yr 10/11/2005	B. Time (24 Hr. Clock) 1130
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Section III--Termination Action

17. Action to Terminate All first aid supplies were delivered and provided to the section.

18. Terminated	A. Date Mo Da Yr 10/11/2005	B. Time (24 Hr. Clock) 1130
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3 (Rev. 03/01) 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.

Sept 10/13

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 10/18/2005	2. Time (24 Hr. Clock) 0952	3. Citation/ Order Number 7098363
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The approved roof control plan is not being complied with on the 1 left 006 mmu section. The crosscut between # 5 and #6 entry 2 blocks inby station spad 3816, was completed and there is no reflectors or visible warning device provided in the #6 entry out-by the crosscut to warn miners of unsupported mine roof.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.220(a)(1)
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Section II--Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 001

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

12. Type of Action 104(a) 13. Type of Issuance (check one) Citation Order Safeguard

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 10/18/2005	B. Time (24 Hr. Clock) 1005
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Section III--Termination Action

17. Action to Terminate The crosscut was bolted and the reflectors were also hung.

18. Terminated	A. Date Mo Da Yr 10/18/2005	B. Time (24 Hr. Clock) 1005
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Section IV--Automated System Data

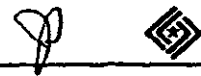
19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature 		23. AR Number [6]

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.

Upl
10/30

Mine Citation/Order

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



Section I--Violation Data		
1. Date Mo Da Yr 10/18/2005	2. Time (24 Hr. Clock) 1030	3. Citation/ Order Number 7098365
4. Served To Carl Crumrine Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The mine roof of areas where persons work or travel on the 1 left 006 mmu section is not supported or otherwise controlled to protect persons from hazards related to falls of the mine roof. The #7 entry starting approximately 60' in-by station spad 3816 has loose material hanging, (rock) and appears that it will fall with warning. Several loose rocks measuring 1/4 inch to 6" thick by 24" wide by 29" long and 2" thick by 12" wide by 30" long and 4" to 9" thick by 15" wide by 48" long was removed from the mine roof at a height measured to be 10 1/2' along with several other smaller pieces.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.202(a)
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Section II--Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
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 10/18/2005	B. Time (24 Hr. Clock) 1040
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Section III--Termination Action

17. Action to Terminate	The loose material was removed.
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18. Terminated	A. Date Mo Da Yr 10/18/2005	B. Time (24 Hr. Clock) 1040
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Section IV--Automated System Data

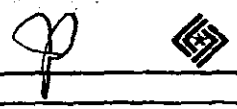
19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

Wep
10/20

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 10/18/2005	2. Time (24 Hr. Clock) 1045	3. Citation/ Order Number 7098366
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The # 13 Stanco Pump operating in the #8 entry at # 8 block on the 1 left section is not being provided with a fire extinguisher or 240 lbs of rock dust.

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 75.1100-2(e)(2)
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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 10/18/2005	B. Time (24 Hr. Clock) 1100
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Section III--Termination Action

17. Action to Terminate A fire extinguisher and the required amount of rock dust was provided.

18. Terminated	A. Date Mo Da Yr 10/18/2005	B. Time (24 Hr. Clock) 1100
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signatur		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.

Copy 10/20

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 10/18/2005	2. Time (24 Hr. Clock) 0955	3. Citation/ Order Number 7098367
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The ventilation control (line brattice) provided for the #6 entry on the 1 left 006 mmu section is not being maintained to within 10' from the area of deepest penetration of face. The line brattice is installed to 17' of the face.

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 75.330(b)(2)
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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 10/18/2005	B. Time (24 Hr. Clock) 1012
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Section III--Termination Action

17. Action to Terminate The ventilation control was extended to within 10' of the face

18. Terminated	A. Date Mo Da Yr 10/18/2005	B. Time (24 Hr. Clock) 1012
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. 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.

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10/20

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 10/24/2005	2. Time (24 Hr. Clock) 0830	3. Citation/ Order Number 7098368
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The operator is not complying with his approved Smoker's program. According to the operators record book, no search was done for the week of 10-17-2005 thru 10-22-2005 for the C-crew. The approved program requires weekly searches and records maintained of such.

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 75.1702-1
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 001

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

12. Type of Action 104(a) 13. Type of Issuance (check one) Citation Order Safeguard

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 10/24/2005	B. Time (24 Hr. Clock) 1500
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature		23. AR Number

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.

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10/25*

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 10/24/2005	3. Citation/ Order Number	7098368 - 01
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC			
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)			

Section II—Justification for Action

Smoke search was conducted and entered in the record book.

See Continuation Form

Section III—Subsequent Action Taken

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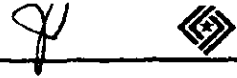
Section IV—Inspection Data

9. Type of Inspection	E01	10. Event Number	4054434				
11. Signature	[Signature]	LAP Number	[6]	12. Date Mo Da Yr	10/25/2005	13. Time (24 Hr. Clock)	1600

Handwritten initials: WJ, cp7

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 10/24/2005	2. Time (24 Hr. Clock) 0930	3. Citation/ Order Number 7098369
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The required amount of fire protection is not being maintained with on the #1 coal conveyor haulage system in that there is only 400' of the required 500' of fire hose provided and also no fire nozzle provided.

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 75.1100-2(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 A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number	
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr 10/24/2005	B. Time (24 Hr. Clock) 1600
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Section III—Termination Action

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

*Lepl
10/25*

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 10/24/2005	3. Citation/Order Number 7098369 - 01
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

Section II—Justification for Action

The required amount of fire hose was provided along with a fire nozzle.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434
11. Signature 	12. Date Mo Da Yr 10/25/2005
13. Time (24 Hr. Clock) 1545	

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10/27*

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 10/24/2005	2. Time (24 Hr. Clock) 0935	3. Citation/ Order Number 7098370
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #1 coal conveyor belt starter box, located at #1 block, is not provided with fire protection.

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 75.1101-8(a)
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Section II--Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: 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	
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr 10/24/2005	B. Time (24 Hr. Clock) 1400
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

WJH
10/25

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 10/24/2005	3. Citation/Order Number 7098370 - 01
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

The proper fire protection was provided.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 10/25/2005	13. Time (24 Hr. Clock) 1550

Handwritten note: 10/24

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 10/24/2005	2. Time (24 Hr. Clock) 1400	3. Citation/ Order Number 7098371
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

There is no record provided as required for the function test of the fire hydrants and fire hoses for the #1,2,3,4,5,6 and 7 Coal conveyor belts.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1103-11
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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 10/26/2005	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

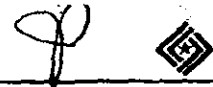
19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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 established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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10/25

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 11/01/2005	2. Time (24 Hr. Clock) 0957	3. Citation/ Order Number 7098379
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The company #2 and #3 Joy shuttle cars, operating on the 003 mmu section, are anchored to the permanent roof support, 1 block out-by station spad 3940, in the #4 entry and #3 to #4 crosscut and the pemanent support is loose.

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 75.204(f)(7)
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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 11/01/2005	B. Time (24 Hr. Clock) 1125
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Section III - Termination Action

17. Action to Terminate The affected roof support was replaced and additional bolts were installed for anchors.

18. Terminated	A. Date Mo Da Yr 11/01/2005	B. Time (24 Hr. Clock) 1125
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-3, May 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.

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11/03

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 11/01/2005	2. Time (24 Hr. Clock) 1020	3. Citation/ Order Number 7098380
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The 575 Volt A.C. Trailing cable for the Joy Shuttle car, company #3 Approval No.2G-3191A-00, being operated on the 003 MMU, is not insulated adequately and fully protected. The outer protective cover of an old splice is worn away and is gapping open, exposing the inner insulated wires to the abrasive conditions of the mine environment and allowing water to freely enter the cable. This cable is routinely pulled around the coal corners as the machine travels from place to place and then is hung to the mine roof or positioned along the rib by hand. (This section is damp to wet).

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 11/01/2005	B. Time (24 Hr. Clock) 1040
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Section III—Termination Action

17. Action to Terminate The cable was properly repaired with adequate insulation.

18. Terminated	A. Date Mo Da Yr 11/01/2005	B. Time (24 Hr. Clock) 1040
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Section IV—Automated System Data

19. Type of Inspection (activity code)	20. Event Number 4054434	21. Primary or Mit
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 Ombudsmen 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.

Wep
11/03

Mine Citation/Order

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

2 # NOV 2005



Section I--Violation Data

1. Date Mo Da Yr 11/08/2005	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7148619
4. Served To CARL CRUMRINE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved roof control plan was not being complied with in the 1 Left Mains MMU 006 section. Beginning at the A panel belt drive and extending for a distance of approximately 17 feet the entry width ranged from 21 feet to 22 feet. Maximum entry width allowed by the approved roof control plan is 20 feet.

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 75.220(a)(1)
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Section II--Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input 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 I04(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 11/08/2005	B. Time (24 Hr. Clock) 1800
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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, 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.

cc 11-8-05 RTT
c.c

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 11/08/2005	3. Citation/ Order Number 7148619 - 01
4. Served To CARL CRUMRINE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Beginning inby the A panel belt drive 7 post were installed to reduce the entry width to 20 feet or less.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 11/09/2005	13. Time (24 Hr. Clock) 1030

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 11/08/2005	2. Time (24 Hr. Clock) 1200	3. Citation/ Order Number 7148620
4. Served To CARL CRUMRINE, MINE FOREMAN		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 <small>(Contractor)</small>

8. Condition or Practice 9a. Written Notice (103g)

The approved roof control plan was not being complied with at the following locations in the 1 Left Mains MMU 006 section where the sum of the diagonal distance in 90 degree 4-way intersections exceeded 60 feet and no posts or cribs were installed to reduce the span.

No. 5 track entry No. 23 block diagonal distance of 67 feet, No.5 track entry No. 26 block diagonal distance of 68 feet, No. 5 track entry No. 25 block diagonal distance of 64 feet, and No. 4 belt entry diagonal distance of 66 feet.

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 75.220(a)(1)
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected 001

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

12. Type of Action 104(a) 13. Type of Issuance (check one) Citation Order Safeguard

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 11/08/2005	B. Time (24 Hr. Clock) 1800
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. 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.

cc 11-8-05 AJT
CC

Mine Citation/Order
Continuation

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

29 NOV 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 11/08/2005	3. Citation/Order Number 7148620 - 01
4. Served To CARL CRUMRINE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Post were installed in the affected 4-way intersections of the 1-A Mains MMU 006 section to reduce the diagonal distance span to 60 feet or less.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434	
11. Signature [Signature]	12. Date Mo Da Yr 11/09/2005	13. Time (24 Hr. Clock) 0945

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 11/08/2005	2. Time (24 Hr. Clock) 1245	3. Citation/ Order Number 7149863
4. Served To CARL CRUMRINE, MINE FOREMAN		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Beginning in the last open crosscut between the No.3 to No.2 entry, and between the No. 2 to No1 entry of the 1 Left Mains MMU 006 section there was a light coat of coal float dust deposited on the roof, ribs and mine floor.

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: 000

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 11/08/2005	B. Time (24 Hr. Clock) 1345
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Section III - Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or MII
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.

cc 11-8-05 RFF
cc

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 11/08/2005 Mo Da Yr	3. Citation/ Order Number 7149863 - 01
4. Served To CARL CRUMRINE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	7. Mine ID 46-08791
6. Mine SAGO MINE		

Section II—Justification for Action

Rock dust was applied to the roof, ribs, and mine floor to dilute the float coal dust in the affected area of the 1-Left Mains MMU 006 section.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434	
11. Signature [Signature]	12. Date 11/09/2005 Mo Da Yr	13. Time (24 Hr. Clock) 1000

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 10/24/2005	2. Time (24 Hr. Clock) 1400	3. Citation/ Order Number 7098371
4. Served To Carl Crumrine Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

There is no record provided as required for the function test of the fire hydrants and fire hoses for the #1,2,3,4,5,6 and 7 Coal conveyor belts.

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 75.1103-11
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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 10/26/2005	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature <i>[Handwritten 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.

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Mine Citation/Order
Continuation

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

14 DEC 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 10/24/2005	3. Citation/Order Number 7098371 - 01
4. Served To Carl Crumrine, Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID (Contractor) 46-08791	

Section II—Justification for Action

The record has been provided for the # 1-7 coal belts function test.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434	
11. Signature 	12. Date Mo Da Yr 12/07/2005	13. Time (24 Hr. Clock) 1505

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M...tion/Order

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



1. Date Mo Da Yr 11/01/2005			2. Time (24 Hr. Clock) 0655		3. Citation/ Order Number 7098375	
4. Served To Carl Crumrine Mine Foreman				5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE				7. Mine ID 46-08791 (Contractor)		

8a. Written Notice (103g)

The mine operator is not complying with the approved roof control plan on the 003 mmu 2 Left section. The #2 entry starting 18' in-by station spad 3951exceeded the maximum allowed 20' width. The entry is cut 21 1/2' wide for a distance of 12' with no supplemental support added.

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 75.220(a)(1)
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Section II--Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 001

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

12. Type of Action 104(a) 13. Type of Issuance (check one) Citation Order Safeguard

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 11/01/2005	B. Time (24 Hr. Clock) 1110
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Section III--Termination Action

17. Action to Terminate Supplemental roof support was installed.

18. Terminated	A. Date Mo Da Yr 11/01/2005	B. Time (24 Hr. Clock) 1110
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

lup
11/03

Mine Citation/Order

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

15 NOV 2005

Section I--Violation Data

1. Date Mo Da Yr 11/01/2005	2. Time (24 Hr. Clock) 0715	3. Citation/ Order Number 7098376
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The mine operator is not complying with the approved ventilation plan, on the 003 mmu 2 Left section. The Joy continuous miner, co. #2 JM5574 is observed operating in the #4 to #5 crosscut without the required minimum 6,000 CFM with scrubber on. When tested with an approved anemometer only 3,066 CFM is provided at the end of the line brattice.

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 75.370(a)(1)
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Section II--Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 002

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 11/01/2005	B. Time (24 Hr. Clock) 0730
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Section III--Termination Action

17. Action to Terminate The required ventilation was established and the new air reading was 7,980 CFM.

18. Terminated	A. Date Mo Da Yr 11/01/2005	B. Time (24 Hr. Clock) 0730
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature		23. AR Number

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.

Wep
11/03

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 11/01/2005	2. Time (24 Hr. Clock) 0730	3. Citation/ Order Number 7098377
4. Served To Carl Crumrine Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The roof of areas where persons work or travel on the 003 mmu section is not supported or otherwise controlled to protect persons from hazards related to falls of the mine roof. The last open crosscut between #3 and #4 entries, 1 block in-by station spad 3951, has loose hanging material that appear it will fall without warning. Material measuring 1/8th inch to 4 inches thick by widths ranging from 2" to 18" by 2 1/2' to 5' in length. The height of the mine roof in the affected area is 8'.

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 75.202(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 11/01/2005	B. Time (24 Hr. Clock) 0745
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Section III—Termination Action

17. Action to Terminate The loose material was removed.

18. Terminated	A. Date Mo Da Yr 11/01/2005	B. Time (24 Hr. Clock) 0745
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-4, 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.

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11/03

Mine Citation/Order

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

16 NOV 2005



Section I--Violation Data

1. Date Mo Da Yr 11/01/2005	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7098378
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The approved roof control plan, page 6-- item 7, is not being complied with on the 2 left 003 mmu section. The crosscut between # 4 and #5 entry 2 blocks inby station spad 3941, was completed and unsupported and there is no reflectors or visible warning device provided in the #5 entry out-by the crosscut to warn miners of unsupported mine roof.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.220(a)(1)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 11/01/2005	B. Time (24 Hr. Clock) 0805
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Section III--Termination Action

17. Action to Terminate Two reflective indicators were provided on the out-by corner of the crosscut.

18. Terminated	A. Date Mo Da Yr 11/01/2005	B. Time (24 Hr. Clock) 0850
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

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11/03

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 11/08/2005	2. Time (24 Hr. Clock) 1545	3. Citation/ Order Number 7149864
4. Served To CARL CRUMRINE, MINE FOREMAN		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

In the 1-Left A panel MMU 006 section the right coal rib in the No. 4 belt entry starting 5 feet 6 inches in by survey station No. 3724 and extending for a distance of approximately 17 feet was not controlled to protect persons from the hazards of rib rolls. ON 11-07-05 at approximately 8:45 pm a roof bolter operator was seriously injured when a rib rolled measuring 17 feet long, 6 feet high and up to 16 inches thick.

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 75.202(a)
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Section II - Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input checked="" type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input checked="" type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>		C. Moderate <input checked="" type="checkbox"/>	
D. High <input type="checkbox"/>		E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 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 11/09/2005	B. Time (24 Hr. Clock) 0800
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Section III - Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

CC 11-8-05 RTJ
CC

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 11/08/2005	3. Citation/ Order Number 7149864 - 01
4. Served To CARL CRUMRINE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

A safety meeting was held with all three shifts on the hazards of rib rolls, and to examine the roof, and ribs where they are required to work or travel.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 11/09/2005	13. Time (24 Hr. Clock) 1030

Mine Citation/Order

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

X  21.

Section I-Violation Data

1. Date Mo Da Yr 11/08/2005	2. Time (24 Hr. Clock) 1110	3. Citation/ Order Number 7098544
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The mine roof of areas where persons work or travel on the 1 Left Mains 006 mmu section, 22 block mantrip station, is not supported or otherwise controlled to protect persons from hazards related to falls of the mine roof. The loose material, (rock and coal), measured 3' long by 18" wide by 7" thick,----- 2' long by 1' wide by 7" thick,----- 28" long by 3" thick by 8" wide and several other smaller pieces, appear that it will fall with warning. This area is at the mantrip station and men routinely traveled under the material going to and from the section. Little or no effort was used to remove the loose material.

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 75.202(a)
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Section II-Inspector's Evaluation

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

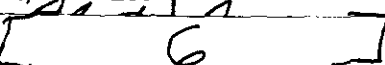
16. Termination Due	A. Date Mo Da Yr 11/08/2005	B. Time (24 Hr. Clock) 1130
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Section III-Termination Action

17. Action to Terminate The loose material was removed.

18. Terminated	A. Date Mo Da Yr 11/08/2005	B. Time (24 Hr. Clock) 1130
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Section IV-Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mit
22. Signature 		23. AR Number [6]

MSHA Form 7000-g, 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.

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11/10

Mine Citation/Order

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

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Section I - Violation Data

1. Date Mo Da Yr 11/08/2005	2. Time (24 Hr. Clock) 1115	3. Citation/ Order Number 7098545
4. Served To Carl Crumrine Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

The designated escapeway for the 1 Left Mains 006 mmu section is not being maintained in a safe condition to assure passage of anyone, including disabled persons. Mud and water is being allowed to exist in the #5 entry at crosscut # 22. The measurements extend toward # 6 and #4 entries and in-by and out-by in the #5 entry, 30 to 35 feet long by 40' wide by 6 to 8 inches deep. The muddy water and thick mud does not let you see the uneven bottom and would cause a slip, trip and fall hazard.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.380(d)(1)
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Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood 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 11/08/2005	B. Time (24 Hr. Clock) 1800
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Section III - Termination Action

17. Action to Terminate

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

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature 		23. AR Number L 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 (NSBOR) and 18 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-FED-FAIR (1-888-736-3270), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 1400 K 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.

not being
46-08791
11/08/2005
1115

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 11/08/2005 Mo Da Yr	3. Citation/ Order Number 7098545 - 01
4. Served To CARL CRUMRINE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

A wooden bridge was installed across the mud and water in the 1-Left Mains designated excaveway at No. 22 block.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature <i>[Signature]</i>	AR Number <i>[Signature]</i>	12. Date 11/09/2005 Mo Da Yr	13. Time (24 Hr. Clock) 0940

[Handwritten initials]

Mine Citation/Order

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

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Section I - Violation Data

1. Date Mo Da Yr 11/08/2005	2. Time (24 Hr. Clock) 1155	3. Citation/ Order Number 7098546
4. Served To Carl Crumrine Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The mine operator is not complying with the approved roof control plan on the 1 Left Mains 006 mmu section. The last open crosscut between the #7 and #8 entries is not bolted per plan. The distance between the crosscut bolts and the #8 entry bolts exceeds the maximum allowable distance of 4' centers. The bolt spacing is measured to be 5' to 5 1/2' in length for Four bolts.

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 75.220(a)(1)
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Section II - Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input 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	
14. Dated Mo Da Yr					

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 11/08/2005	B. Time (24 Hr. Clock) 1300
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Section III - Termination Action

17. Action to Terminate Four permanent roof supports were installed and centers is now per plan.

18. Terminated	A. Date Mo Da Yr 11/08/2005	B. Time (24 Hr. Clock) 1300
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

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11/10

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 12/07/2005	2. Time (24 Hr. Clock) 1300	3. Citation/ Order Number 7098535
4. Served To Carl Crumrine, Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

8. Condition or Practice

8a. Written Notice (103g)

A light coat of coal dust has been deposited on the mine floor under the 48 inch belt and on the tight side for the # 4 coal conveyor belt at the following locations beginning at 5 belt transfer on the tight side for 2 blocks outby, and starting at 39 block to 15 block for a total distance of approx. 2,700 feet. The area has been previously rock dusted and has damp to wet pavement.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.400
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Section II--Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input 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	
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr 12/09/2005	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mit
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 05 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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12/13

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/07/2005	3. Citation/ Order Number 7098535 - 01
4. Served To Lonnie Smith, Shift Froman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II--Justification for Action

The light layer of coal dust on the #4 belt has been re-rock and made inert from 19to35 block under the belt.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 12/18/2005	13. Time (24 Hr. Clock) 1800

*gmc
12/20*

Mine Citation/Order

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

2 2 2005



711

Section I--Violation Data

1. Date Mo Da Yr 12/07/2005	2. Time (24 Hr. Clock) 1330	3. Citation/ Order Number 7098536
4. Served To Carl Crumrine, Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g)

The advisory # 0032 for the Sept.- Oct. bimonthly cycle ,MMU-036, shows that the cassette # 50772432 submitted on 10-18-2005 has been a contaminated sample . Five were submitted for the period and this one is not in compliance, therefore only 4 have meet requisite requirement of 5 valid samples.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 70.207(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 12/07/2005	B. Time (24 Hr. Clock) 1335
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Section III--Termination Action

17. Action to Terminate The bimonthly cycle and sampling period has pasted.

18. Terminated	A. Date Mo Da Yr 12/07/2005	B. Time (24 Hr. Clock) 1335
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

WPL
12/13

Mine Citation/Order

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

29 DEC 2005



Section I--Violation Data

1. Date Mo Da Yr 12/14/2005	2. Time (24 Hr. Clock) 0910	3. Citation/ Order Number 7098540
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Accumulations of coal have been deposited on the mine floor under the section belt for the MMU-006 1 left B Panel for a distance of approx. 4 blocks, 280 feet, at intermittent location under the belt stands and some rollers beginning at the drive. The accumulations are wet and vary in height from 6 to 9 inches.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.400
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Section II--Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001	
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input 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
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr 12/14/2005	B. Time (24 Hr. Clock) 1600
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 95 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order
Continuation

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

29 DEC 2005

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/14/2005	3. Citation/ Order Number 7098540 - 01
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

The accumulations under the belt were shoveled on to the belt and rock dusted.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [66]	12. Date Mo Da Yr 12/14/2005	13. Time (24 Hr. Clock) 1510

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29 DEC 2005

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 12/14/2005	2. Time (24 Hr. Clock) 0920	3. Citation/ Order Number 7098542
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

A clear unobstructed travel way of 24 inches was not provided along the coal belt for the 1 left section B Panel near the feeder on the right side. Energized power feeder cable was lying in the walkway were miners travel for a distance of approx. 17-19 feet. The cable was approx. 50 feet in length laced in that distance.

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 -75.333(c)(1) 75.1403
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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 12/14/2005	B. Time (24 Hr. Clock) 1517
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Section III - Termination Action

17. Action to Terminate The cable was hung along the rib on insulated j- hooks.

18. Terminated	A. Date Mo Da Yr 12/14/2005	B. Time (24 Hr. Clock) 1517
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature		23. AR Number [6]

MSHA Form 7000-3, Mar 88 (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.

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/14/2005	3. Citation/Order Number 7098542 - 01
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change	From	To
1. Issue Date	12/14/2005	
Reason		
9. C. Part/Section	75.333(c)(1)	75.1403
Reason	Correct standard	
Change standard		

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature <i>[Signature]</i>	AR Number <i>[Signature]</i>	12. Date Mo Da Yr 12/14/2005	13. Time (24 Hr. Clock) 1829

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Mine Citation/Order
Continuation

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

29 DEC 2005



Section I-Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/14/2005	3. Citation/ Order Number 7098542 - 02
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID (Contractor) 46-08791	

Section II-Justification for Action

Change	From	To
14. Initial Action		Safeguard
Reason	did not add to citation	
14. E. Citation/Order Number		7096483
Reason	omitted from citation	
14. F. Initial Action Dated		05/03/2005
Reason		
Change initial action		

See Continuation Form

Section III-Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [66]	12. Date Mo Da Yr 12/15/2005	13. Time (24 Hr. Clock) 0712

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Mine Citation/Order

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

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Section I - Violation Data		
1. Date Mo Da Yr 12/14/2005	2. Time (24 Hr. Clock) 0850	3. Citation/ Order Number 7098539
4. Served To AI Schoonover, Safety		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

A light layer of coal dust has been deposited in the belt starter box on the metal floor for the section MMU-006 belt 1 Left B Panel. This electrical box has 575 volts and is currently powered at the time of inspection. This presents a fire hazard

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.400
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Section II - Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				D. Number of Persons Affected: 001
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input 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 12/14/2005	B. Time (24 Hr. Clock) 1400
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Section III - Termination Action

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

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 96 (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.

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Mine Citation/Order
Continuation

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

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Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) 12/14/2005	3. Citation/Order Number 7098539 - 01
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

The light coat of coal dust has been removed from the box.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [66]	12. Date Mo Da Yr 12/14/2005	13. Time (24 Hr. Clock) 1500

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Mine Citation/Order

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

29 DEC 2005



Section I-Violation Data

1. Date Mo Da Yr 12/14/2005	2. Time (24 Hr. Clock) 0905	3. Citation/ Order Number 7098541
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The CO monitoring used at this mine is at 1000 feet intervals and the 1 left B panel MMU-006 belt did not have the required 50 feet per minute. When measured with mechanical smoke the average is approx. 35 feet per minute at 3 to 4 block. The air current is coursed in it's proper direction traveling outby.

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 75.351(e)(3)
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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 12/15/2005	B. Time (24 Hr. Clock) 1200
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Section III-Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 05 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order
Continuation

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

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/14/2005	3. Citation/ Order Number 7098541 - 01
4. Served To Lonnie Smith, Shift Froman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

Section II—Justification for Action

The ventilating air current on the #7 section belt, 1 left B Panel, is 63 feet per minute when measured and is coursed to the outside.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434	
11. Signature 	AR Number 6-]] [6]	12. Date Mo Da Yr 12/18/2005
		13. Time (24 Hr. Clock) 1600

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Mine Citation/Order

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

29 DEC 2005



Section I--Violation Data

1. Date Mo Da Yr 12/14/2005	2. Time (24 Hr. Clock) 0840	3. Citation/ Order Number 7098543
4. Served To Al Schoonover, Safety	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

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

A clear and unobstructed travel way was not provided along the #5 coal belt on the walkway side beginning at the power box and continuing to the tail roller, approx. 120 feet and beginning at the drive for the section belt, an additional 70 feet, and at 6 block, approx. 20 feet in length, there is water in the walkway in these areas measuring 6 to 11 inches deep. This water is murky and mucky and is very difficult to walk and work along the belt. Miners must carry an assortment of belt supplies to do their jobs through this area.

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 75.1403
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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 7096483 F. Dated Mo Da Yr 05/03/2005

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 12/15/2005	B. Time (24 Hr. Clock) 1200
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Section III--Termination Action

17. Action to Terminate

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


19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

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Mine Citation/Order
Continuation

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

DEC 2005 

Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/14/2005	3. Citation/Order Number 7098543 - 01
4. Served To Lonnie Smith, Shift Froman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action


A wooden bridge has been built for a walkway at the following locations on #5 belt beginning at the power car, continuing to the tail roller, at the drive a clear walkway has been made and at 6 block a wooden bridge has been made.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature 	AR Number [6]	12. Date Mo Da Yr 12/18/2005	13. Time (24 Hr. Clock) 1550

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Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 12/18/2005	2. Time (24 Hr. Clock) 1750	3. Citation/ Order Number 7098645
4. Served To Lonnie Smith, Shift Froman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The mine's approved roof control plan is not being complied with, page 4, when the tunnel liner being used as primary support did not have the top of the liner covered with a layer of cushioning material. The tunnel liner is located in the #2 entry across from number 4 belt at 40 block. The exposed area is approx. 16 feet long by 18 feet wide. The area had a roof fall and has not been bolted however a tunnel liner has been used and has been completed for several days

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 75.220(a)(1)
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood Unlikely Reasonably Likely Highly Likely Occurred

B. Injury or illness could reasonably be expected to be: No Lost Workdays Lost Workdays Or Restricted Duty Permanently Disabling Fatal

C. Significant and Substantial: Yes No D. Number of Persons Affected: 001

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

12. Type of Action 104(a) 13. Type of Issuance (check one) Citation Order Safeguard

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 12/21/2005	B. Time (24 Hr. Clock) 1200
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Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

7/10/200

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/18/2005	3. Citation/Order Number 7098645 - 01
4. Served To Carl Crumrine, Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

Section II—Justification for Action

Information was provided to the inspector that shows an invoice/P.O.# 67021 for foam sheets to be delivered 12-22-05 and 12-23-05 for the mine for the tunnel liner.

See Continuation Form

Section III—Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 12/26/2005	B. Time (24 Hr. Clock) 0800	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 12/21/2005	13. Time (24 Hr. Clock) 1314

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Mine Citation/Order

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

1. Date Mo Da Yr 12/18/2005	2. Time (24 Hr. Clock) 1745	3. Citation/ Order Number 7098646
4. Served To Lonnie Smith, Shift Froman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The mine's roof control plan is not being complied with, see page 4, when the tunnel liner being used as a primary support did not have the top of the liner covered with a layer of cushioning material. The tunnel liner is located in the #4 entry across from number 4 belt at 39 block. The exposed area is approx. 28 feet long and 18 feet wide. The area had a fall and has not been bolted however a tunnel liner has been used and has been completed for several days.

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 75.220(a)(1)
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Section II--Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>		C. Moderate <input checked="" type="checkbox"/>		D. High <input type="checkbox"/>
E. Reckless Disregard <input type="checkbox"/>						
12. Type of Action 104(a)			13. Type of Issuance (check one)			
			Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action				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 12/21/2005	B. Time (24 Hr. Clock) 1200
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

ME
12/20

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/18/2005	3. Citation/ Order Number 7098646 - 01
4. Served To Carl Crumrine, Mine Forman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

Section II—Justification for Action

Information was provided to the inspector that shows an invoice/P.O. #67021 for the foam sheets to be delivered on 12-22-05 and 12-23-05 for the mine for tunnel liner.

Section III—Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 12/26/2005	B. Time (24 Hr. Clock) 0800	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AB Number [66]	12. Date Mo Da Yr 12/21/2005	13. Time (24 Hr. Clock) 1321

Handwritten signature and date
12/21/05

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 12/20/2005	2. Time (24 Hr. Clock) 0205	3. Citation/ Order Number 7098647
4. Served To John Travise, Shift Forman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

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

The mine's roof control plan is not being complied with, see page 4, when the tunnel liner being used as a primary support did not have the top of the liner covered with a layer of cushioning material. The tunnel liner is located in the number 8 entry for MMU-003 section inby spad station #4212 one block. This is the primary escapway for the section. The exposed area is approx. 24 feet long and 18 feet wide. The cited area has had a fall and has not been bolted but a tunnel liner has been used and has been completed for several days.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.220(a)(1)
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Section II - Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood 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 12/22/2005	B. Time (24 Hr. Clock) 1200
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Section III - Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature <i>[Handwritten Signature]</i>		23. AR Number <i>[Handwritten Number]</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.

[Handwritten initials]

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/20/2005	3. Citation/Order Number 7098647 - 01
4. Served To Carl Crumrine, Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Information was provided to the inspector that shows an invoice/P.O. #67021 for the foam sheets to be delivered on 12-22-05 and 12-23-05 for the mine tunnel liner.

See Continuation Form

Section III—Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 12/26/2005	B. Time (24 Hr. Clock) 0800	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	R. Number [Number]	12. Date Mo Da Yr 12/21/2005	13. Time (24 Hr. Clock) 1325

Wol 12/26/05

Mine Citation/Order

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

VAC
12/20



Section I—Violation Data

1. Date Mo Da Yr 12/20/2005	2. Time (24 Hr. Clock) 0100	3. Citation/ Order Number 7098648
4. Served To John Travise, Shift Forman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #6 shuttle car ,off standard, on the MMU-003 section does not have flame resistant spooling device for the level wind near the reel compartment. The trailing cable courses through these metal parts. There are 3 metal spooling devices are that in place at this location, see Part 18.45(e). The approval number is 2G-3936-0.

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 12/20/2005	B. Time (24 Hr. Clock) 2000
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Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) EQ1	20. Event Number 4054434	21. Primary or Mill
22. Signature L [Signature] 6	23. AR Number [Signature] 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, 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.

WJP
12/20/05

Mine Citation/Order
Continuation

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

VAC
ASD



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/20/2005	3. Citation/ Order Number 7098648 - 01
4. Served To Dick Wilfong, Maintance Chief	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Additional information was provided to the inspector that shows a fire resistant spooling device that is grounded for the #6 shuttle car level wind on the MMU-003.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature] 6	AR Number	12. Date Mo Da Yr 12/21/2005	13. Time (24 Hr. Clock) 1257

WV
12/21/05

Mine Citation/Order

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

YAC



Section I--Violation Data

1. Date Mo Da Yr 12/20/2005	2. Time (24 Hr. Clock) 0130	3. Citation/ Order Number 7098649
4. Served To John Travise, Shift Forman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The #5 shuttle car ,standard, on the MMU-003 section does not have flame resistant spooling device for the level wind near the reel compartment. The trailing cable courses through these metal parts. There are 4 spooling devices at this location., see Part 18.45(e). The approval number 2G-3936-0.

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 12/20/2005	B. Time (24 Hr. Clock) 2200
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Section III--Termination Action

17. Action to Terminate

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


19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature <i>[Signature]</i>	23. AR Number 6	

MSHA Form 7000-3, May/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.

WJL 12/20/05

Mine Citation/Order
Continuation

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

VAC 

Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/20/2005	3. Citation/Order Number 7098649 - 01
4. Served To Dick Wilfong, Maintenance Chief	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Additional information was provided to the inspector that shows a fire resistant spooling device that is grounded for the #5 shuttled car level wind on the MMU-003 section.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054434	
11. Signature [Signature] 6	12. Date Mo Da Yr 12/21/2005	13. Time (24 Hr. Clock) 1305
	14. AR Number [6]	

look 12/23

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 12/20/2005	2. Time (24 Hr. Clock) 0200	3. Citation/ Order Number 7098650
4. Served To John Travise, Shift Forman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

The Joy 14CM15-11 EX, 2G-4149A-00 continuous miner has a missing right head light guard. The miner is operating on the MMUJ-003 section. See Part 18.46(b).

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"/>				
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 12/20/2005	B. Time (24 Hr. Clock) 0800
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Section III - Termination Action

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

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mit
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, May 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.

lip
12/24

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 12/21/2005	2. Time (24 Hr. Clock) 1200	3. Citation/ Order Number 7098613
4. Served To Carl Crumrine	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The 8 fire extinguishers located on the surface that were strategically positioned have not been examined or tagged within the required 6 months.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 77.1110
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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 12/21/2005	B. Time (24 Hr. Clock) 1300
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Section III—Termination Action

17. Action to Terminate The fire extinguishers have been examined and tagged.

18. Terminated	A. Date Mo Da Yr 12/21/2005	B. Time (24 Hr. Clock) 1300
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	21. Primary or Mill
22. Signature 	23. AR Number L6	

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.

WPL
12/21/05

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 12/21/2005	2. Time (24 Hr. Clock) 1220	3. Citation/ Order Number 7098614
4. Served To Carl Crumrine	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g)

Coal and rock has been allowed to accumulate on the elevated walkways on the incline stacker belt. This condition creates a slipping and tripping hazard. The accumulations had frozen and had a 3 foot section of the walkway completely blocked. The material rolls under foot when miners travel this walkway.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 77.205(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 checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>		
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001			
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action	104(a)		13. Type of Issuance (check one)	Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input type="checkbox"/>	B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number	F. Dated Mo Da Yr
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr 12/21/2005	B. Time (24 Hr. Clock) 1400
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Section III--Termination Action

17. Action to Terminate	The hazardous material was removed.
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18. Terminated	A. Date Mo Da Yr 12/21/2005	B. Time (24 Hr. Clock) 1400
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054434	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.

Handwritten initials/signature