U.S. Department of Energy Energy Information Administration Form EIA-6 Schedule Q (April 2008)

QUARTERLY COAL REPORT SCHEDULE Q

Form Approved OMB No. 1905-0167 Expires 04/30/2011 Burden: 0.5 hours

NOTICE: This report is mandatory under the Federal Energy Administration Act of 1974 (Public Law 93-275). Failure to comply may result in criminal fines, civil penalties and other sanctions as provided by law. For further information concerning sanctions and data protections see the provision on sanctions and the provision concerning the disclosure of information in the instructions. Title 18 USC 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction.

SECTION 1 IDENTIFICATION						
Reporting Year and Quarter: State Code and Company ID Number: Company Name: Contact Name: Company Street Address: City State and ZIP:				If the information to the left is not correct please write the correct information below.		
GENERAL INSTRUCTIONS 1. You must complete this form if you have produced more than 30,000 short tons of coal during the last 4 quarters, or if you are a non-coal-producing distributor that averages 10,000 or more short tons of coal stocks per quarter. 2. Round all quantities reported to the nearest short ton (2,000 Pounds). 3. Sign and date the form.						
SECTION 2 COAL ORIGIN, PRODUCTION, AND STOCKS						
ORIGIN STATE	TOTAL PRODUCTION (SHORT TONS)	ENDING STOCKS (SHORT TONS)	ORIGIN STATE		TOTAL PRODUCTION (SHORT TONS)	ENDING STOCKS (SHORT TONS)
Alabama			Montana			
Alaska			New Mexico			
Arizona			North Dakota			
Arkansas			Ohio			
Colorado			Oklahoma			
Illinois			Pennsylvania Anthracite			
Indiana			Pennsylvania - Bituminous			
Iowa			Tennessee			
Kansas			Texas			
Eastern Kentucky			Utah			
Western Kentucky			Virginia			
Louisiana			Washington			
Maryland			Northern West Virginia			
Mississippi			Southern West Virginia			
Missouri			Wyomii	ng		
SECTION 3 VERIFICATION						
A. CERTIFICATION This part of the form must be completed by the official of the reporting company empowered to certify the truth and accuracy of the information provided on this form. Print or type the name and title of the certifying official. The certifying official must sign and date and certification. I certify that the information provided herein and appended hereto (if any) is true and accurate to the best of my knowledge.						
Telephone Number:						
			Fax Number:			
	E-Mail Address::					
Name		Title				Date