

Mine Citation/Order

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



Section I—Violation Data		
1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583341
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The electrical system supplying 480 volt 3 phase power to the bath house, office, and dispatchers trailer was not grounded. The safety ground wire was cut in two at the power pole connection point.

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 77.701
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Section II—Inspector's Evaluation

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

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

17. Action to Terminate The power was disconnected and the grounds reconnected.

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

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature b		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 1-800-REG-FAIR (1-800-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583342
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The automatic device that gives a signal at the mine when the mine fan either slows or stops was not being tested by stopping the fan every 31 days, as reflected on the circular mine fan pressure recording charts and acknowledged by the chief electrician.

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 75.312(c)
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

12. Type of Action 104(a)

13. Type of Issuance (check one) Citation Order Safeguard

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

15. Area or Equipment

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

17. Action to Terminate The fan was shut down and the signal heard by the dispatcher and the chief electrician from their respective offices.

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

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

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583343
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The seven day circular main mine fan pressure recording charts at the Sago mine were not being changed before the beginning of the second revolution. A review of the recent fan charts indicated that this occurred on 4 different occasions. The main mine fan pressure recording chart installed on October 14, 2005 was not removed until October 24, 2005, a period of 10 days. The main mine fan pressure recording chart installed on October 30, 2005 was not removed until November 8, 2005, a period of 9 days. The main mine fan pressure recording chart installed on December 14, 2005 was not removed until December 24, 2005, a period of 10 days. The main mine fan pressure recording chart installed on December 24, 2005 was not removed until January 2, 2006, a period of 9 days. Also, during the period between November 14, 2005 and December 14, 2005, a period of 4 weeks and 2 days the

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 75.312(e)
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

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

17. Action to Terminate

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) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6	23. AR Number 6	

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/> Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 03/31/2006	3. Citation/ Order Number 7583343
4. Served To Dick Wilfong, Maintenance Superintendent	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Continuation of 8. Condition or Practice

operator could only provide one 7 day main mine fan pressure recording chart.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415		
11. Signature 	AR Number 6	12. Date Mo Da Yr 03/31/2006	13. Time (24 Hr. Clock) 1130

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 03/31/2006	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7583344
4. Served To Dick Wilfong, Maintenance Superintendent		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The location and the electrical rating of some of the stationary electric apparatus in connection with the Sago mine electric system, including permanent cables, switchgear, transformers, permanent pumps, underground circuits, were not shown on a mine electrical map, and some were not located where identified.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.508
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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				F. Dated Mo Da Yr

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

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

Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I - Violation Date		3. Citation/Order Number	7100904
1. Date	Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock)	0800
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>	

The Mine Ventilation Plan addendum approved on October 24, 2005, which required the installation of 40-inch thick, Omega Block Seals, not to exceed 8 feet in height and 20 feet in width, was not being followed. Ten Omega Block Seals were constructed to seal off the 2 North Mains area of the Sago Mine I.D. No. 46-08791. The following deficiencies were discovered during an on site investigation of the seal locations following an explosion that occurred on January 2, 2006 and from testimony of various witnesses that assisted in the construction of the seals:

BlocBond powder, 1 to 3 inches thick, was spread on the mine floor directly from the bag. The BlocBond was dumped on the mine floor and leveled as a base. The first course of omega blocks were laid in the dry BlocBond. The

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: 029

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

12. Type of Action: 104(d)(1)

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: 7100911

F. Dated: Mo Da Yr 05/09/2007

15. Area or Equipment: The entire mine.

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

17. Action to Terminate: The seals were destroyed during the explosion. No seals were built and the area was ventilated. When seals are to be installed in the future miners will be trained in proper seal construction.

18. Terminated	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)
		05/09/2007	0800

Section IV - Automated System Data

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

MSHA Form 700 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.

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



Mine Citation/Order
 Continuation

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/>	1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 05/09/2007	3. Citation/ Order Number 7100904
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE		7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice

BlocBond was not mixed with water as required.

Vertical joints were not completely filled with the bonding agent as required.

Wooden planks did not extend completely across the top of the Omega block seal as required. In some cases, a center plank was not used.

The wood wedges required to be installed between the plank and mine roof were installed between the plank and the omega block.

The wood wedges installed over the center plank were one and a half feet to 2 feet apart. The plan requires that the wood wedges be installed one foot apart.

The No. 1 seal was installed on an angle. The height and width of the No. 1 seal exceeded the 8 feet high and 20 feet wide requirement of the plan. The seal was 21.7 feet wide and a portion of the seal was 8.9 feet high.

The No.1 seal was not at least 10 feet in by the corner of the coal block as required. The right side of the No.1 seal was 6.6 feet in by the corner. The left side of the seal was installed against the rounded corner.

The No.2 seal was 8.7 feet in height and 20.4 feet wide.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415	12. Date Mo Da Yr 05/09/2007	13. Time (24 Hr. Clock) 0800
11. Signature 	AR Number 6		

MSHA Form 7000-3a, Mar 85 (rev 6-07)

Mine Citation/Order

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



Section I - Violation Data		3. Citation/Order Number 7100905	
1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800		
4. Served To Carl Cummie, Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791	(Contractor) <input type="checkbox"/>
8. Written Notice (103g) <input type="checkbox"/>			

8. Condition of Practice
 There were ten miners working at the Sago mine whose job duties required testing for methane. These miners have not demonstrated to the satisfaction of an authorized representative of the Secretary that they are qualified to test for methane with a portable methane detector approved by the Mine Safety and Health Administration under Part 22.

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 75.151
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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: 010

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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III - Termination Action

17. Action to Terminate: The miners have demonstrated to the satisfaction of an authorized representative of the secretary that they are qualified to test for methane and oxygen deficiency with a methane detector approved by

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV - Automated System Data

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

MSHA For 3-3, Mar 85 (revised) in accordance with 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 of 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.

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/> 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 05/09/2007 Mo Da Yr	3. Citation/ Order Number 7100905
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 17. Action to Terminate

MSHA. All ten of the miners are no longer employed by the mine therefore only those still employed were qualified.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415	11. Citation 6	12. Date 05/09/2007 Mo Da Yr	13. Time (24 Hr. Clock) 0800
AR Number 6				

Mine Citation/Order

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



Section I--Violation Date		3. Citation/Order Number	
1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	7100906	
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8a. Written Notice (103g) <input type="checkbox"/>			

8. Condition or Practice
Based of the results of a rock dust survey conducted in the 2nd Left Parallel section between January 30, and February 3, 2006, it was found that the incombustible content of samples collected did not meet the requirements of 75.403. Fourteen of forty-two samples or 33% were substandard. The substandard samples were 71.4%, 65.9%, 66.2%, 61.8%, 61.1%, 59.4%, 71.9%, 75.1%, 55.2%, 50.7%, 64.4%, 61.6%, 64.7%, and 59.4% respectively.

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 75.403
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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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action
17. Action to Terminate The areas were rockdusted.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV--Automated System Data

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

MSHA Form J-3, rev 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 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100907
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8. Condition or Practice
A CSE SR-100 serial No. 46433 self-rescuer device was found underground in the 2nd Left Parallel barricade area. The device had exceeded the manufacturers recommended life of ten years. The manufactured date stamped on the unit was 8/95, the unit was found underground in January of 2006. Therefore the self-rescue device had not been inspected adequately to evaluate its shelf life and to timely remove the device from service when the shelf life was exceeded. Even though testing performed after the January 2, 2006 accident indicated that the device could function, had continued normal mining operations continued, the SCSR would likely have deteriorated over time affecting its effectiveness during emergency situations.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1714-3(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(d)(1)

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: 7100911

F. Dated: Mo Da Yr 05/09/2007

15. Area or Equipment: No area affected.

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

17. Action to Terminate: The unit has been removed from the mine.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100908
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		

Surface electrical qualification retraining was conducted at the Sago mine without an approved surface electrical retraining program. Electrical retraining was given by a qualified instructor in 2004 and 2005. They were retrained without an approved program.

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 77.107
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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 checked="" type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>		
	C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 022			
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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate An electrical retraining program was submitted and approved by the district manager dated March 21, 2006 for underground and surface. All subjects, course materials and a means to evaluate the training listed

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or MII
22. Signat 6	7	23. AR Number [6]

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

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/09/2007	3. Citation/Order Number 7100908
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 17. Action to Terminate
was completed during the retraining.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415		
11. Signature 	AR Number 7167	12. Date Mo Da Yr 05/09/2007	13. Time (24 Hr. Clock) 0800

MSHA Form 00-3a, Mar 85 (revised)

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100909
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Written Notice (103g) <input type="checkbox"/>		

8. Condition or Practice
[] had not received annual retraining within the last 12 months. Refresher training was last given to the miner on November 16, 2004. [] had not received any annual retraining since he began his employment in July, 2004. The mine operator was aware of the training requirements. [] and [] had not received annual retraining within the past twelve months. The operator is hereby ordered to withdraw the miners from the mine until they have received the required training. Section 104(g) of the Federal Mine Safety and Health Act of 1977 declares that an untrained miner is a hazard to himself and others.

See Continuation Form (MSHA Form 7000-3e)

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 48.8(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 type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	D. Number of Persons Affected: 012	
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
12. Type of Action 104(g)(1)	13. Type of Issuance (check one)		Citation <input type="checkbox"/>	Order <input checked="" 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 Craig Newsome, Richard Yoakum II, John Boni, Denver Wilfong, James Schoonover, Pat Boni

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

17. Action to Terminate Annual refresher training was given to the five miners on March 10, 13, 2006. [] has retired from mining.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

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

Mine Citation/Order
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) 05/09/2007	3. Citation/Order Number 7100909 - 01
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change	From	To
10. D. Persons Affected		6
Reason Incorrect number was written		

The incorrect number of persons affected was marked 12 instead of 6.

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 E16	10. Event Number 4134415		
11. <u>5</u> <u>6</u>	AR Number <u>7267</u>	12. Date Mo Da Yr 05/09/2007	13. Time (24 Hr. Clock) 0800

Mine Citation/Order

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



Section I—Violation Date

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100910
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

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

Underground electrical qualification retraining was conducted at the Sago mine without an approved underground electrical retraining program. Electrical retraining was given by a qualified instructor in 2004 and 2005. They were retrained without an approved program.

See Continuation Form (MSHA Form 7000-3e)

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 75.160
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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: 022

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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate An electrical retraining program was submitted and approved by the district manager dated March 21, 2006 for underground and surface. All subjects, course materials and a means to evaluate the training listed

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

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

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/> 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 05/09/2007	3. Citation/ Order Number	7100910
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY		(Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791			

Section II—Justification for Action

Continuation of 17. Action to Terminate
was completed during the retraining.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection	E16	10. Event Number	4134415
11. Signat	6	AR Number	[6]
12. Date	Mo Da Yr	13. Time (24 Hr. Clock)	
	05/09/2007	0800	

MSHA Form 300-3a, Mar 85 (revised)

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100911
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 <small>(Contractor)</small>
8. Condition or Practice 8a. Written Notice (103g) <input type="checkbox"/>		

According to a sworn statement and a review of training documents, a management official signed training form 5000-23 and directed that a miner sign the training form indicating that annual refresher training was given to the miner, when in fact, no such training occurred as required.

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 48.9(b)
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (rate): 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(d)(1) 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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate The miner is no longer in the coal industry and could not receive the training.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3a, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established the National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 408 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data		
1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100912
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g)

Based on statements made during an interview conducted on February 20, 2006 with a miner during the accident investigation, it was determined that annual refresher training was not adequate. During questioning regarding donning of the SCSR unit, a miner stated that he did not assume a donning position, open the device, activate the device, insert the mouthpiece or simulate this task while explaining proper insertion of the mouthpiece, and putting on the nose clip during training.

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 48.8(b)(8)
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Section II—Inspector's Evaluation								
10. Gravity:								
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>		
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>			
C. Significant and Substantial:			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001			
11. Negligence (check one)		A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>		
12. Type of Action		104(d)(1)		13. Type of Issuance (check one)		Citation <input type="checkbox"/>	Order <input checked="" type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action		A. Citation <input checked="" type="checkbox"/>		B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number 7100911	F. Dated Mo Da Yr 05/09/2007
15. Area or Equipment		No area affected.						

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

17. Action to Terminate Hands on SCSR training was given to the miners during annual retraining conducted on March 13, 2006.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data		
19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number 6

MSHA Form 7000-3a (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, 408 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100914
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved mine emergency evacuation and firefighting program of instruction was not being followed between December 19, 2004 and January 2, 2006 at the Sago mine as required on page 7 of the program. There were 18 occasions when either an alert or alarm was signaled from the CO monitoring sensor "(Sta... 1.99 1 Left Section CO Monitor)" ranging from 10 to 26 parts per million CO and appropriate action was not taken. The [] was resetting the sensor and not taking the appropriate action. The program also requires that, "A record of each alert and alarm signal given and the action taken shall be maintained at the mine for a period of 1 year." There was no record kept of action taken in response to AMS alerts and alarms.

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 75.1502(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: 029

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

12. Type of Action: 104(d)(1) 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: 7100911 F. Dated: Mo Da Yr 05/09/2007

15. Area or Equipment: Entire mine.

16. Termination Due	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock)
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Section III—Termination Action

17. Action to Terminate: A record of action taken for recent alerts and alarms of the AMS is being maintained at the mine.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form Mar 85 (rev) 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 businesses. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order
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) 05/09/2007 Mo Da Yr	3. Citation/ Order Number 7100914 - 01
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change From To

8. Condition Or Practice

Reason Modified due to clerical error.

The date December 19, 2004 is modified to December 19, 2005.

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 E16	10. Event Number 4134415	
11. Signature [Signature]	AR Number [6]	12. Date 05/10/2007 Mo Da Yr
		13. Time (24 Hr. Clock) 0747

Mine Citation/Order

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

Section I--Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100915
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor) <input type="checkbox"/>
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved mine emergency evacuation and firefighting program of instruction was not followed at the Sago mine. Page 7 of the program states, "when the carbon monoxide warning system give an audible alarm at 15 ppm above the established ambient level at shift change, no one shall be permitted to enter the mine except qualified persons designated to investigate the source of the alarm". On January 2, 2006 at 6:05:10 a.m., Station 1.99, CO sensor at the 1 Left section gave an alarm of 26 parts per million. The alarm was reset without anyone investigating the source of the alarm and the 1 Left section miners working the shift were permitted to enter the mine.

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 75.1502(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: 029

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

12. Type of Action 104(d)(1) 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 7100911 F. Dated Mo Da Yr
05/09/2007

15. Area or Equipment Entire mine.

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

17. Action to Terminate The requirements of 75.1502 in regard to AMS alarm and alert responses were discussed with the operator.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV--Automated System Data

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

MSHA Form 7000-3a, Mar 85 (revised) in accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I--Violation Data		3. Citation/Order Number	
1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	7100916	
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>	

The approved mine emergency evacuation and firefighting program of instruction was not being followed in the Sago mine. The atmospheric monitoring system installed throughout the mine was not being used as approved. Based on statements made during the investigation it was discovered that the belt fire detection system was being activated manually to signal working sections to answer the mine phone, rather than to evacuate. The system is intended to give an audible and visual alarm to miners in the working sections so that they can rapidly evacuate to a safe location outby the affected sensor in case of fire. This improper use of the system circumvented the integrity of the fire warning system. Miners were not properly reacting to alerts and alarms as required by the approved

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
			75.1502(a)

Section II--Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>			D. Number of Persons Affected: 010
	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		E. Reckless Disregard <input type="checkbox"/>	
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>
12. Type of Action	104(d)(1)		13. Type of Issuance (check one)	Citation <input type="checkbox"/> Order <input checked="" type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input checked="" type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/Order Number	7100911
			F. Dated	Mo Da Yr 05/09/2007
15. Area or Equipment	The entire underground mine			

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

Section III--Termination Action

17. Action to Terminate The firefighting program of instruction was reviewed during annual retraining conducted on 3/10 & 3/13 2006.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV--Automated System Data

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

MSHA Form 7000-3a (rev. 8-85) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established the National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/>	1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 05/09/2007	3. Citation/ Order Number	7100916
4. Served To Carl Crumrine, Mine Foreman			5. Operator WOLF RUN MINING COMPANY		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

Continuation of 8. Condition or Practice

program. Timely and rapid evacuation of the area is of the utmost importance in saving miner's lives.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection	E16	10. Event Number	4134415
11. Signature		AR Number	67
12. Date	Mo Da Yr	13. Time (24 Hr. Clock)	05/09/2007 0800

MSHA Form 7500-3a, Mar 85 (rev/06)

Mine Citation/Order

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



Section I--Violation Data		3. Citation/Order Number	7100917
1. Date	Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock)	0800
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice			

Based on interviews conducted during the accident investigation, it was determined that mine dispatchers, designated as the responsible persons, were not knowledgeable in the mine ventilation system, the location of the mine escapeways, the mine monitoring system and the mine emergency evacuation and firefighting program of instruction.

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	75.1501(a)
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Section II--Inspector's Evaluation

10. Gravity:	No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input checked="" type="checkbox"/> Occurred <input type="checkbox"/>			
A. Injury or illness (has) (is):	No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>			D. Number of Persons Affected: 029
B. Injury or illness could reasonably be expected to be:	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input checked="" type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action	104(d)(1)	13. Type of Issuance (check one)		Citation <input type="checkbox"/> Order <input checked="" type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input checked="" type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>		E. Citation/Order Number	7100911
15. Area or Equipment		The entire mine.		
16. Termination Due		A. Date	Mo Da Yr	B. Time (24 Hr. Clock)

Section III--Termination Action

17. Action to Terminate All mine dispatchers have been trained in specific duties required as a responsible person and tested. The written examination and training is given to each person that may act in this position before

18. Terminated	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	0800
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Section IV--Automated System Data

19. Type of Inspection (activity code)	E16	20. Event Number	4134415	21. Primary or Mill
22. Signature			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 enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/>	1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 05/09/2007	3. Citation/ Order Number	7100917
4. Served To Carl Crumrine, Mine Foreman			5. Operator WOLF RUN MINING COMPANY		
6. Mine SAGO MINE			7. Mine ID 46-08791		(Contractor)

Section II—Justification for Action

Continuation of 17. Action to Terminate

assuming these duties. Training is documented on form 5000-23.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection	E16	10. Event Number	4134415
11. Sig	[Signature]	12. Date	Mo Da Yr 05/09/2007
	6	13. Time (24 Hr. Clock)	0800
	[Signature]	AR Number	[6]

MSHA 300-3a, Mar 85 (revised)

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100918
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved mine emergency evacuation and firefighting program of instructions was not followed. Miners failed to act in accordance with the emergency evacuation SCSR donning procedures. Six miners of the 1st left crew did not don their SCSR's as required during the mine emergency that occurred on January 2, 2006. Four other miners failed to don their SCSR when evacuating the mine after the explosion. Failure to don SCSR devices as required during fire or explosion could be a contributing factor in the death of miners.

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 75.1502(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: 010

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

12. Type of Action 104(d)(1) 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 7100911 F. Dated Mo Da Yr 05/09/2007

15. Area or Equipment No area or equipment.

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

17. Action to Terminate Requirements of the emergency evacuation and firefighting program of instruction and SCSR donning procedures were given during annual retraining on 3/10 & 3/13 2006.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or MII
22. Signature 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 businesses. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100919
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

8a. Written Notice (103g)

8. Condition or Practice
An explosion occurred at the Sago mine in the sealed area of the 2 North Mains on January 2, 2006, at 6:26 a.m. MSHA was not immediately notified of the explosion as required. According to testimony during the investigation, the 1st Left section foreman, who was underground at the track switch at 49 1/2 crosscut at the time of the explosion made a call to the surface approximately 5 minutes after the explosion. He informed mine management, that "we've had a mine explosion in here" and "get mine rescue teams here now." According to testimony, no attempt was made by those people to contact MSHA. According to testimony the Director of Safety and Employee Development initiated the notification to MSHA. His telephone call log, provided to MSHA during the investigation, indicated that the first attempt to notify MSHA of the explosion was made at 7:50 a.m. on

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 50.10
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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: 018

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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate Congress has passed the Mine Improvement and New Emergency Response Act of 2006. The provisions of this final rule has been distributed and discussed with the mining community. This final rule

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3a, 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 businesses. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/> 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 05/09/2007	3. Citation/ Order Number	7100919
4. Served To Carl Crumrine, Mine Foreman			5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE			7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice
January 2, 2006.

The violation is not marked "significant and substantial" only because, at the time of the violation, 30 C.F.R. 50.10 was a regulation and not a standard and because of a Court decision holding that only violations of mandatory standards can be "significant and substantial". Otherwise, this violation is reasonably likely to be cause a reasonably serious injury since failing to timely notify MSHA of emergency accident events could delay important health and safety decisions affecting miners at the mine.

Continuation of 17. Action to Terminate

requires mine operators to make notification of all incidents/accidents which pose a reasonable risk within 15 minutes to MSHA. More timely notification has been discussed with the mine operator. This violation is reasonably likely to cause a reasonably serious injury. The violation is not marked "significant and substantial" only because of a court decision holding that only violations of mandatory standards can be "significant and substantial".

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection	E16	10. Event Number	4134415
11. Signature		AR Number	163
12. Date	Mo Da Yr 05/09/2007	13. Time (24 Hr. Clock)	0800

MSHA Form 7000-3a, Mar 85 (rev 10/01)



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7100920
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

A explosion occurred at the Sago mine, I.D.46.08791 in the sealed area of the 2 North Mains on January 2, 2006, at 6:26 a.m. The Mine Emergency Evacuation and Firefighting Program of Instruction approved on February 3, 2004 was not complied with. On page 12 of the plan under "Mine Rescue" it states "In the event of a mine fire or explosion the Barbour County Mine Rescue team is to be notified immediately at 457-2745." The Barbour County Mine Rescue team was not immediately notified of the explosion. According to testimony during the investigation, the 1st Left section foreman, who was underground at the track switch at 49 1/2 crosscut at the time of the explosion made a call to the surface approximately 5 minutes after the explosion. He informed the mine dispatcher, and mine management that "we've had a mine explosion in here" and "get mine rescue team here now."

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 75.1502(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 type="checkbox"/>	Highly Likely <input checked="" type="checkbox"/>	Occurred <input type="checkbox"/>	
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>		
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 018			
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action	104(d)(1)		13. Type of issuance (check one)	Citation <input type="checkbox"/>	Order <input checked="" type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input checked="" type="checkbox"/>	B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number 7100911	F. Dated Mo Da Yr 05/09/2007
15. Area or Equipment	Entire mine.					

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

17. Action to Terminate Congress has passed the Mine Improvement and New Emergency Response Act of 2006. The provisions of this final rule has been distributed and discussed with the mining community. Requirements of the

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3a, Mar 85 (revised) in accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established the National Small Business 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 <input type="checkbox"/>	1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 05/09/2007	Mo Da Yr	3. Citation/Order Number 7100920
4. Served To Carl Crumrine, Mine Foreman			5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE			7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice

According to testimony, no attempt was made by those people informed by the 1st Left foreman to get a mine rescue team. According to testimony the Director of Safety and Employee Development initiated the first attempt to contact the Barbour County Mine Rescue team. His telephone call log, provided to MSHA during the investigation, indicated that the first attempt to notify the rescue team after the explosion was at 8:04 a.m. on January 2, 2006.

Continuation of 17. Action to Terminate

Mine Emergency Evacuation and Firefighting Program of Instruction has been discussed with the mine operator.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415	AR Number 6	12. Date Mo Da Yr 05/09/2007	13. Time (24 Hr. Clock) 0800
11. Signature [Signature]				

MSHA Form JO-3a, Mar 85 (revised)

Mine Citation/Order

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



Section I - Violation Date

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7292254
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The cable supplying 128 vdc power to the trolley phone on the #8 mantrip does not enter into the metal frame through a proper fitting. The clamp on the strain relief was not over the cable jacket.

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 checked="" type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected:		001
11. Negligence (check one)					
A. None <input type="checkbox"/>		B. Low <input 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 05/09/2007		B. Time (24 Hr. Clock) 0800			

Section III - Termination Action

17. Action to Terminate The #8 mantrip was taken out of service and removed from the mine site.					
18. Terminated					
A. Date Mo Da Yr 05/09/2007		B. Time (24 Hr. Clock) 0800			

Section IV - Automated System Data

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

MSHA Form 7000-3, (Rev. 11-19-99) in accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7292255
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		

The communication cable connected from the trolley phone to its longer antenna on the #8 mantrip was not protected from mechanical damage. There was a series of 3 or 4 small diagonal parallel slices in this cable's jacket in a location approximately 38 inches from the cable entrance to the antenna, but no conductors were visible. The jacket of the cable entering the shorter antenna was damaged at the point where it entered the antenna housing. An area of the cable approximately 1/8 inches long was missing the jacket, and the conductors were exposed. Also, the flange at the cable entrance to the speaker enclosure was broken.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.516-2(b)
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Section II—Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):	No Likelihood <input checked="" type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>	
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input checked="" type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>		
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001			
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input 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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate The #8 mantrip was taken out of service and removed from the mine site.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 408 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7292256
4. Served To Carl Crumrine, Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		

The mine emergency evacuation and firefighting program approved on February 3, 2004, was not followed at this mine. The sensor for the Atmospheric Monitoring System (AMS) located at the 1 Left Section loading point would not activate the fire alarm signal when tested on February 1, 2006. Also, the dispatcher could not manually operate the fire alarm signal. The fire alarm signal was not wired properly. The fire alarm signal provides an audible and visual alarm on the working section when carbon monoxide reaches the alert and alarm levels.

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 75.1502(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 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: 010		
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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate The wiring for the fire alarm signal has been corrected as observed during the inspection on February 1, 2006.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7292257
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The mine emergency evacuation and firefighting program approved on February 3, 2004, was not followed at this mine. The sensor at Motor Barn Spur, No.1 belt crosscut 16, was not calibrated within the required 31 days. Review of the stored data in the Atmospheric Monitoring System (AMS) sensor on January 30, 2006, revealed that it had been 80 days since the last calibration. A review of the data from the master control station shows that the AMS had been turned off for at least 20 days since the accident. The sensor had not been calibrated for at least 100 calendar days. The sensor was tested and found not to be in calibration. The sensor displayed a lower value of CO than what was applied to the sensor.

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 75.1502(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 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: 029		
11. Negligence (check one)					
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>		C. Moderate <input type="checkbox"/>	
D. High <input checked="" type="checkbox"/>		E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(d)(1)			13. Type of Issuance (check one)		
			Citation <input type="checkbox"/>		Order <input checked="" type="checkbox"/>
			Safeguard <input type="checkbox"/>		
14. Initial Action			E. Citation/ Order Number		F. Dated
A. Citation <input checked="" type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			7100911		Mo Da Yr 05/09/2007
15. Area or Equipment Motor Barn Spur, No.1 belt crosscut 16					

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

17. Action to Terminate The sensor has been calibrated as observed during the inspection on January 30, 2005.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 408 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7292258
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

8. Condition or Practice

Six of the cap lamps used at this mine are not in permissible condition for the following reasons:

Exhibit KLH-20 had exposed stranded wire in the black insulated conductor under the plastic battery top. It appeared that the black conductor had been pinched between the plastic battery top and the edge of the battery cell cover. There was no evidence of overheating or burning in this area.

The cable of Exhibit KLH-18 had exposed stranded wire and an exposed insulated conductor, both of which were covered in black tape. The cable of Exhibit KLH-8 had an exposed insulated conductor.

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: 006

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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate The cap lamps were removed from the mine on January 6, 2006.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

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

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/> 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 05/09/2007	Mo Da Yr	3. Citation/ Order Number 7292258
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE		7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice

The hex head cap hook screws of Exhibit KLH-1 were modified to be able to use a flat blade screwdriver. One of the cap hook screws was missing on Exhibit KLH-18.

A difference of potential was obtained between the positive contact screw and the metal battery top of Exhibit KLH-12.

The bezel rings on Exhibits KLH-1, KLH-8, and KLH-9 were able to be removed without the use of the unlocking tool.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E16	10. Event Number 4134415	11. Signer 6	AR Number 6	12. Date Mo Da Yr 05/09/2007	13. Time (24 Hr. Clock) 0800
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MSHA Form 7000-3a, Mar 85 (revised)

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7335227
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The cable supplying 120 vac power to the repeater for the trolley phone system located at 9 crosscut of No. 4 belt does not enter into the metal frame through a proper fitting. The fitting is on the frame but is not clamped to the cable, allowing the cable to move.

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 checked="" type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>	D. Number of Persons Affected: 001
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>	13. Type of issuance (check one)	Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>
12. Type of Action 104(a)	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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III - Termination Action

17. Action to Terminate The repeater was replaced on 01/29/2006.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV - Automated System Data

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

MSHA Form 7000-3, Mar 86 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 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.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7335233
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

8. Condition or Practice
The exposed telephone wire and trolley phone wire that lead underground are not equipped with suitable lightning arresters of approved type within 100 feet of the point where the circuits enter the mine. No lightning arresters were found.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.521
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate Lightning arresters have been installed as seen on 02/22/2006.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or MR
22. Signature 6	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 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I--Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7458180
4. Served To Carl Crumrine-Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

A certified mine examiner failed to conduct a preshift examination within 3 hours preceding the beginning of the 8 hour interval during which persons were scheduled to work on the 2nd Left Parallel Section on January 1, 2006.

Based on interviews conducted during an accident investigation and a review of the record books, it was determined that 3 miners worked on a water pump one crosscut inby the 2nd Left Parallel Section power center before any preshift was conducted for that area.

See Continuation Form (MSHA Form 7000-3e)

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

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 003		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(d)(1)		13. Type of Issuance (check one)			
		Citation <input type="checkbox"/>		Order <input checked="" type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			E. Citation/ Order Number	F. Dated	Mo Da Yr
A. Citation <input checked="" type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			7100911	05/09/2007	
15. Area or Equipment The entire underground mine.					

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

Section III--Termination Action

17. Action to Terminate A preshift exam has been conducted on the 2nd Left Parallel Section.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV--Automated System Data

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

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I - Violation Data		3. Citation/Order Number	7458181
1. Date	Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock)	0800
4. Served To Carl Crumrine-Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>	

All preshift records were not countersigned by the mine foreman or equivalent mine official by the end of their next regularly scheduled working shift. The following preshift records were not countersigned:

- 1 Left: 12/30/2005 3rd shift, 12/31/2005 day shift, 01/02/2006 day shift
- 2 Left: 12/30/2005 afternoon shift, 01/02/2006 day shift
- Belt&Track: 12/27/2005 day shift and afternoon shift, 12/30/2005 day shift, 12/31/2005 day shift, 01/01/2006 day shift, 01/02/2006 day shift.

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	75.360(f)
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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 checked="" type="checkbox"/>		Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		D. Number of Persons Affected: 001	
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input checked="" type="checkbox"/>		C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action	104(a)		13. Type of issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>	
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 05/09/2007	B. Time (24 Hr. Clock)	0800
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Section III - Termination Action

17. Action to Terminate The results of the preshift exam have been countersigned by the mine foreman since the time of the accident.

18. Terminated	A. Date	Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock)	0800
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Section IV - Automated System Data

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

MSHA Form 7000-3, Mar 85 (rev) has established a National Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration 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 businesses. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7458182
4. Served To Carl Crumrine—Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor) Ba. Written Notice (103g) <input type="checkbox"/>

8. Condition or Practice

The map of the Sago Mine was not kept up-to-date. Upon completion of MSHA's mapping of the mine following the explosion that occurred on January 2, 2006, the following discrepancies were found:

There were 76 permanent ventilations controls in place that were not shown on the map. There were 41 ventilation controls shown on the mine map that were not in place.

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 75.1202
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>	D. Number of Persons Affected: 029
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input checked="" type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>		
12. Type of Action	104(d)(1)	13. Type of Issuance (check one)	Citation <input type="checkbox"/> Order <input checked="" type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input checked="" type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number 7100911	F. Dated Mo Da Yr 05/09/2007
15. Area or Equipment	The entire map.		

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

17. Action to Terminate The 1200 map has been reviewed and is up-to-date.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 80 (rev.) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I - Violation Data		
1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7458183
4. Served To Carl Crummie-Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

There is no indication that the required weekly examination for hazardous conditions was conducted during the week of December 14, 2005 as required by 30 CFR 75.364(b). The record of the results for hazardous conditions indicates an examination was conducted December 7, 2005 and December 21, 2005, a period of 14 calendar days. A weekly examination is required to be made at least every 7 calendar days.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input type="checkbox"/> Other <input checked="" type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.364(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 type="checkbox"/>	Highly Likely <input checked="" type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input checked="" type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 029		
11. Negligence (check one)					
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
12. Type of Action 104(d)(1)			13. Type of Issuance (check one)		
			Citation <input type="checkbox"/>	Order <input checked="" type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			E. Citation/ Order Number	F. Dated	Mo Da Yr
A. Citation <input checked="" type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			7100911		05/09/2007
15. Area or Equipment The entire underground mine.					

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

17. Action to Terminate The examination was conducted on December 21, 2005.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV - Automated System Data

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

MSHA Form 7000-3, Mar 85 (rev. 11/00), in accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7458184
4. Served To Carl Crumrine-Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

8. Condition or Practice
 8a. Written Notice (103g)
 The record of the results for the weekly examination for hazardous conditions indicates that the certified mine examiner conducting the weekly examination on November 23, 2005, failed to record the required air readings. No record was entered to show the quantity of air where the air leaves the main return.

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 75.364(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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate The air reading was entered on 11/30/2005 for the air leaving the main return.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 85 (rev.) 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 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7458185
4. Served To Carl Crumrine—Mine Foreman	5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor) <input type="checkbox"/>
8. Condition or Practice 8a. Written Notice (103g) <input type="checkbox"/>		

The Industrial Scientific ITX methane detectors serial # 0408001-374 and serial # 0309270-042 used at the Sago Mine and recovered after the explosion that occurred on January 2, 2006, were not calibrated within the required 31 days. An examination of the detectors revealed that the last calibration date for the detectors were November 16, 2005 and March 1, 2004 respectively.

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 75.320(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 type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input checked="" type="checkbox"/>
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> D. Number of Persons Affected: 016
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 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III—Termination Action

17. Action to Terminate The detectors were collected for evidence by MSHA during the accident investigation and subsequently tested and calibrated by MSHA A&CC.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 85 (rev.) 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 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-PAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7458186
4. Served To Carl Crumrine-Mine Foreman		5. Operator WOLF RUN MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		

The mine operator failed to produce records which certified that the 90-day inspection test was done for fourteen SCSR's that were assigned to the miners that were underground at the time of the January 2, 2006 explosion, or were assigned to the miners that traveled underground during the rescue attempt. The serial numbers for the units are the following:

83566, 63277, 75648, 60035, 86537, 92652, 89765, 56495, 57878, 101868, 91947, 55656, 106603, and 57604.

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 75.1714-3(e)
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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 checked="" type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>	D. Number of Persons Affected: 014
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input checked="" type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>		
12. Type of Action	104(d)(1)	13. Type of Issuance (check one)	Citation <input type="checkbox"/> Order <input checked="" type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action	A. Citation <input checked="" type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number 7100911	F. Dated Mo Da Yr 05/09/2007
15. Area or Equipment	The fourteen SCSR units.		

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

17. Action to Terminate The units were removed from service at the mine.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

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

MSHA Form 7000-3, Mar 85 (r) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citation/Order

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



Section I--Violation Data		3. Citation/Order Number	7583340
1. Date	Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock)	0800
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice			

The lightning arresters grounding medium was not separated from the neutral grounds by a distance of 25 feet. The arresters were wired in a manner that would not prevent the frames of the equipment being used underground which are connected to the neutral grounding field from becoming energized in the event of a strike on the surface. The arrester ground was connected to the frames of the surface belt structure which are entering the mine and are connected to the mine track and all underground electrical equipment.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.521
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Section II--Inspector's Evaluation

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

18. Termination Due	A. Date	Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock)	0800
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Section III--Termination Action

17. Action to Terminate The arrester grounds and the neutral ground fields were properly separated.

18. Terminated	A. Date	Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock)	0800
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Section IV--Automated System Data

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

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

Mine Citation/Order

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



Section I - Violation Data		3. Citation/Order Number	
1. Date Mo Da Yr 05/09/2007	2. Time (24 Hr. Clock) 0800	7583345	
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice			

The mine program of examining, testing and maintaining electrical equipment is not effective. The electrical equipment is not being properly examined, tested and maintained by a qualified person to assure the equipment is not in a run down state and potentially dangerous conditions don't exist. Although the mine record books reveal the examinations were conducted, inspections by M.S.H.A. personnel revealed several potential hazardous conditions were observed and cited, several of these potential hazardous conditions have existed for a long period and should have been observed by the qualified person conducting the examination. The following type conditions were observed during the course of the inspection, accumulations of combustible material, lack of guarding, extended lengths of power and trailing cables, damaged cables, cables not protected, improper short

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR
			75.512

Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input checked="" type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				D. Number of Persons Affected: 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				

18. Termination Due	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section III - Termination Action

17. Action to Terminate Based on abatements of the cited conditions it is determined the mine operator is now complying with this standard.

18. Terminated	A. Date Mo Da Yr 05/09/2007	B. Time (24 Hr. Clock) 0800
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Section IV - Automated System Data		
19. Type of Inspection (activity code) E16	20. Event Number 4134415	21. Primary or Mill
22. Signature 6		23. AR Number 6

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

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data			
1. Subsequent Action <input type="checkbox"/> 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/09/2007	3. Citation/Order Number 7583345	
4. Served To Carl Crumrine, Mine Foreman		5. Operator WOLF RUN MINING COMPANY (Contractor)	
6. Mine SAGO MINE		7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice
circuit protection, improper overload protection, ineffective brakes, ineffective fire suppression systems, damaged electrical conductors, and permissibility violations.

See Continuation Form

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

Section IV—Inspection Data			
9. Type of Inspection E16	10. Event Number 4134415		
11. Signat 6	AR Number 6	12. Date Mo Da Yr 05/09/2007	13. Time (24 Hr. Clock) 0800

MSHA Form 7000-3a, Mar 85 (revised)