

104(a) Citations

Fiscal Year 2005

Mine Citation/Order

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

17 NOV 2004



Section I--Violation Data

1. Date Mo Da Yr 10/19/2004	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7093803
4. Served To JIM SWARTZ		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

In the Trubie Run Mains, the Fletcher twin boom truss bolter, 2G-2950A-1 Co #32, was not being maintained in permissible condition at the time of the examine. 2 lights (1 at the operator compartment and 1 at the bolter helper station) were not secure. Bolts were broke and the lights in these areas were hanging loose.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 10/19/2004	B. Time (24 Hr. Clock) 1550
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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) AAA	20. Event Number 4054503	21. Primary or Mill
22. Signature		23. AR Number

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

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/>	1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 10/19/2004 Mo Da Yr	3. Citation/ Order Number 7093803 - 01
4. Served To Jim Swartz		5. Operator ANKER WEST VIRGINIA MINING COMPANY (Contractor)	
6. Mine SAGO MINE		7. Mine ID 46-08791	

Section II—Justification for Action

The listed lights were properly secured.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054503		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 10/20/2004	13. Time (24 Hr. Clock) 1115

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Mine Citation/Order

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

17 NOV 2004



Section I—Violation Data

1. Date Mo Da Yr 10/25/2004	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7093804
4. Served To AL SCHOONOVER, SAFETY		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

In the 1 Right (001-0) working section, the trailing cable for the Joy 10SC32 shuttle car CO #6 was being anchored on a tensined rool bolt installed in the roof support pattern. This condition could affect the tension of the bolt.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.204(f)(7)
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 10/25/2004	B. Time (24 Hr. Clock) 1200
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Section III—Termination Action

17. Action to Terminate A bolt was installed for the anchor of the shuttle car.

18. Terminated	A. Date Mo Da Yr 10/25/2004	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054503	21. Primary or Mill
22. Signat		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 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 Old Capitol Bldg., Rm 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 10/26/2004	2. Time (24 Hr. Clock) 0850	3. Citation/ Order Number 7096804
4. Served To AL SCHOONOVER, SAFETY	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The starter switch for the 550 volt AC pump located in the #1 entry return of the Trubie Run Mains construction area is not maintained in permissible condition. The gromet for the cable entrance gland is not the proper size and an opening in excess of .005 of an inch exist around the cable into the switch. The cable will move freely within the entrance gland.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 10/26/2004	B. Time (24 Hr. Clock) 1200
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Section III--Termination Action

17. Action to Terminate The gromet of proper size has been installed for the cable entrance gland and the opening is now less than .004 of an inch.

18. Terminated	A. Date Mo Da Yr 10/26/2004	B. Time (24 Hr. Clock) 1045
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Section IV--Automated System Data

19. Type of Inspection (activity code)	AAA	20. Event Number 4054503	21. Primary or Mit
22. S	23. AR Number		



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

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Mine Citation/Order

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

17 NOV 2004

Section I--Violation Data

1. Date Mo Da Yr 10/26/2004	2. Time (24 Hr. Clock) 0945	3. Citation/ Order Number 7093805
4. Served To AL SCHOONOVER, SAFETY	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

In the Trubie Run construction Mains, the 35C Fairchild workhorse scoop was not being maintained in permissible condition at the time of the examine. The battery lids and cable plugs were not provided with lock rings to secure the lids and plugs. Also the batteries had dirt and mud accumulated on top of them causing terminals to corrode which could create a fire and/or shock hazard.

See Continuation Form (MSHA Form 7000-3a)

Safety Other of Act Title 30 CFR 75.503

Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 10/26/2004 B. Time (24 Hr. Clock) 1400

Section III--Termination Action

17. Action to Terminate Lids and plugs are now secured and the batteries have been cleaned to remove mud and dirt.

18. Terminated A. Date Mo Da Yr 10/26/2004 B. Time (24 Hr. Clock) 1225

Section IV--Automated System Data

19. Type of Inspection (activity code) AAA 20. Event Number 4054503 21. Primary or MR

22. Sign [Signature] 23. AR Number 6

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

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Mine Citation/Order

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

17 NOV 2004

Section I--Violation Data

1. Date Mo Da Yr 10/26/2004	2. Time (24 Hr. Clock) 0945	3. Citation/ Order Number 7096805
4. Served To AL SCHOONOVER, SAFETY	5. Operator ANKER WEST VIRGINIA 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 roof over the Trubie Run Mains construction area haulroad between the track supply area and the section is not adequately supported or controlled. A piece of roof rock 3' thick by 5' long by 3' wide is hanging loose between roof bolts and appears as if it will fall without warning. Several smaller pieces of rock are also present around the larger rock up to 1' by 1' that are broken, loose and hanging. Persons routinely use this haulroad to walk back and forth to the section and to use the scoop to haul supplies from the supply area to the section. The area is located between the 3rd and 4th open crosscut from the face in the No.4 entry.

See Continuation Form (MSHA Form 7000-3a)

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 10/26/2004	B. Time (24 Hr. Clock) 1000
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Section III--Termination Action

17. Action to Terminate The loose roof rock was scaled down and the area made safe.

18. Terminated	A. Date Mo Da Yr 10/26/2004	B. Time (24 Hr. Clock) 1000
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Section IV--Automated System Data

19. Type of Inspection (activity code)	AAA	20. Event Number 4054503	21. Primary or Mill	23. AR Number 6
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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 20415. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order

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

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Section I—Violation Data

1. Date Mo Da Yr 10/26/2004	2. Time (24 Hr. Clock) 1015	3. Citation/ Order Number 7096806
4. Served To AL SCHOONOVER, SAFETY	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

When checked, the velocity of air on the belt line was less than 50 FPM. Using a smoke tube, the air on the Trubie Run Mains construction area belt line was traveling at 27 FPM and direction of the air was traveling onto the section. The ventilation plan calls for the belt air to be maintained at least 50 FPM and direction of air is directed outby.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.370(a)(1)
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input 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 10/26/2004	B. Time (24 Hr. Clock) 1200
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Section III—Termination Action

17. Action to Terminate Adjustments were made to the backup checks and air is now greater than 50 FPM and traveling in the proper direction.

18. Terminated	A. Date Mo Da Yr 10/26/2004	B. Time (24 Hr. Clock) 1110
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Section IV—Automated System Data

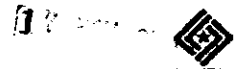
19. Type of Inspection (activity code) AAA	20. Event Number 4054503	21. Primary or Mill
22. Signat		23. AR Number 6

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

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Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 11/01/2004	2. Time (24 Hr. Clock) 0210	3. Citation/ Order Number 7096807
4. Served To AL SCHOONOVER, SAFETY	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

When testing the communication system on the 1 Right (001) working section from the surface to the section, the incoming communication (mine phone) was not provided with an audible alarm or visual alarm that can heard or seen by a miner regularly employed on the working section.

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 75.1600-2(b)
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input 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				

18. Termination Due	A. Date Mo Da Yr 11/01/2004	B. Time (24 Hr. Clock) 1000
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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)	AAA	20. Event Number 4054503	21. Primary or Mill
22. Signature	[Signature]		23. AR Number [6]

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

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Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 11/01/2004 Mo Da Yr	3. Citation/ Order Number 7096807 - 01
4. Served To AL SCHOONOVER, SAFETY	5. Operator ANKER WEST VIRGINIA MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II--Justification for Action

The incoming communication system (mine phone) is now provided with audible alarm and visual alarm that can be heard or seen by a miner regularly employed on the working section.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054503	
11. AR Number [6]	12. Date 11/02/2004 Mo Da Yr	13. Time (24 Hr. Clock) 0850

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Mine Citation/Order

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

16 NOV 2004



Section I--Violation Data

1. Date Mo Da Yr 11/02/2004	2. Time (24 Hr. Clock) 0820	3. Citation/ Order Number 7096808
4. Served To AL SCHOONOVER, SAFETY		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

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

In the 1 right (001) section, the previously rock dusted surfaces of the #12 and #13 entries 20 feet in by spad station #3247 is not maintained in such quantities that the incombustible content of the combined coal dust, rock dust, and other dust shall be not less than 65 per centum. Samples were collected in this area to substantiate citation. Termination time being established to allow operator to set up pod duster and start rock dusting of all entries.

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 11/09/2004 B. Time (24 Hr. Clock) 0800

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) AAA 20. Event Number 4054503 21. Primary or Mill

22. S 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 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.

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Mine Citation/Order Continuation

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

16 NOV 2004



Section I--Subsequent Action/Continuation Data

7. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) 11/02/2004	Mo Da Yr	3. Citation/Order Number 7096808 - 01
4. Served To AL SCHOONOVER, SAFETY			5. Operator ANKER WEST VIRGINIA MINING COMPANY (Contractor)	
6. Mine SAGO MINE			7. Mine ID 46-08791	

Section II--Justification for Action

Area listed in citation has been re-rockdusted and the rock dust appears to be adequate. Citation is hereby abated.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054503		
11. Signature [Signature]	11. AR Number [6]	12. Date Mo Da Yr 11/10/2004	13. Time (24 Hr. Clock) 0855

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Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 11/03/2004	2. Time (24 Hr. Clock) 1210	3. Citation/ Order Number 7147366
4. Served To Johnny Garrett	5. Operator ANKER WEST VIRGINIA 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 ventilation plan was not being complied with on the Trubie Run construction area belt line. Using a smoke tube, from the 5th crosscut outby, to the dumping point, the air currents were traveling at 32 fpm and the direction of air was traveling onto the section. The air currents when tested at the 8th crosscut outby the section, were traveling in an outby, (proper) direction, however the velocity of these air currents were measured at 20 fpm. The ventilation plan requires the belt air to be maintained at least 50 fpm in an outby direction. The operator stated that the affected belt line would be examined as stated in the ventilation plan for a failure of the CO monitoring system until the air currents were traveling in the proper direction at the required velocity.

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 <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: 008
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action 104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>			E. Citation/ Order Number	F. Dated Mo Da Yr
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr 11/03/2004	B. Time (24 Hr. Clock) 1500
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054503	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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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11-15-4

Mine Citation/Order
Continuation

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

17 NOV 2004



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 11/03/2004		3. Citation/Order Number 7147366 - 01	
4. Served To John Parker			5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

When tested with chemical smoke clouds, the air current along the Trubie Run area belt line, were traveling in excess of 50 fpm and in the proper direction.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054503
11. Signature [Signature] 6 [Signature]	12. Date Mo Da Yr 11/05/2004
	13. Time (24 Hr. Clock) 1025

up 11/17

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 11/03/2004	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7147367
4. Served To Johnny Garrett	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Permanent ventilation controls had not been installed in the last two crosscuts of the Trubie Run section to separate the intake air course from the belt haulage entry. This intake air is used to provide air to active working places.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.333(b)(3)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

C. Significant and Substantial: Yes No D. Number of Persons Affected: 008

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 11/04/2004	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) AAA	20. Event Number 4054503	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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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11-5-4

Mine Citation/Order
Continuation

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

17 NOV 2004



Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/>	1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 11/03/2004	3. Citation/ Order Number	7147367 - 01
4. Served To John Parker			5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II--Justification for Action

Permanent stoppings were installed at the cited locations, separating the intake and belt haulage entries.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection	AAA	10. Event Number	4054503
11. Signature		12. Date Mo Da Yr	11/05/2004
		13. Time (24 Hr. Clock)	1120

*OK AS
11-10-04*

Mine Citation/Order

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

18 NOV 2004



Section I--Violation Data

1. Date Mo Da Yr 11/05/2004	2. Time (24 Hr. Clock) 1035	3. Citation/ Order Number 7147368
4. Served To John Parker	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Return air currents were being used to ventilate the non-permissible section belt feeder of the Trubie Run working section. When tested with chemical smoke clouds, the air currents from the No. 5 entry face area were traveling outby the last line of open crosscuts and across the electrical box components of the feeder.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.507-1(a)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 11/05/2004	B. Time (24 Hr. Clock) 1155
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Section III--Termination Action

17. Action to Terminate The section ventilation control devices were adjusted to maintain the air currents of the face area traveling through the last line of crosscuts. When tested, with chemical smoke clouds, intake air currents

18. Terminated	A. Date Mo Da Yr 11/05/2004	B. Time (24 Hr. Clock) 1125
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Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054503	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-3, Mar 95 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. 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.

OK
11-10-04

Mine Citation/Order

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

16 DEC 2004



12

Section I--Violation Data

1. Date Mo Da Yr 12/06/2004	2. Time (24 Hr. Clock) 1005	3. Citation/ Order Number 7147374
4. Served To James Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The belt feeder of the Mains active mining section, was not being properly maintained to assure safe operating condition. The door to the electrical breaker and contactor compartment, was open exposing the energized bare leads of the 575 VAC power conductors. The power was removed from the feeder.

See Continuation Form (MSHA Form 7000-3a)

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 12/06/2004	B. Time (24 Hr. Clock) 1010
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Section III--Termination Action

17. Action to Terminate The door was bolted in place.

18. Terminated	A. Date Mo Da Yr 12/06/2004	B. Time (24 Hr. Clock) 1009
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Section IV--Automated System Data

19. Type of Inspection (activity code) CEA	20. Event Number 4077034	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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. 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.

12-9-4

e Citation/Order

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



NS

Section I--Violation Data

1. Date Mo Da Yr 12/06/2004	2. Time (24 Hr. Clock) 1030	3. Citation/ Order Number 7147375
4. Served To James Schoonover	5. Operator ANKER WEST VIRGINIA 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 roof control plan was not being complied with on the Mains active mining section. Tunnel Liners had not been installed in the No. 2 entry and the No. 4 entry to the tail piece prior to the belt being advanced further inby. The distance in the No. 2 entry needing Tunnel Liners is 145 feet and the No. 4 entry is 160 feet.

Page 13 of the approved plan states that the Tunnel Liners will be installed and maintained up to the belt tailpiece as the area advances under Trubie Run Crossing.

See Continuation Form (MSHA Form 7000-3a)

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

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

16. Termination Due	A. Date Mo Da Yr 12/20/2004	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) CEA	20. Event Number 4077034	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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/06/2004	3. Citation/ Order Number 7147375 - 01
4. Served To James Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

The installation of the Tunnel Liners in the cited area, has been completed with the exception of 45 feet of the outby end in the No. 4 entry. The mine floor at this location must be removed for the Tunnel Liners to clear the mine roof, therefore additional time is needed and granted to complete the installation.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 12/28/2004	B. Time (24 Hr. Clock) 0900	<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 CEA	10. Event Number 4077038	
11. Signature [Signature]	12. Date Mo Da Yr 12/20/2004	13. Time (24 Hr. Clock) 1045

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NR

06 JAN 2005



Mine Citation/Order Continuation

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

Section I-Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 12/06/2004	3. Citation/Order Number 7147375 - 02
4. Served To Bill Currence	5. Operator ANKER WEST VIRGINIA MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II-Justification for Action

Tunnel Liners have been installed in the cited areas.

See Continuation Form

Section III-Subsequent Action Taken

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

9. Type of Inspection CEA	10. Event Number 4077038		
11. Signature [Signature]	IR Number [6]	12. Date 12/28/2004	13. Time (24 Hr. Clock) 1035

Mine Citation/Order

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

28 DEC 2004

Section I--Violation Data			
1. Date Mo Da Yr 12/09/2004	2. Time (24 Hr. Clock) 0720	3. Citation/ Order Number	7096811
4. Served To AL SCHOONOVER, SAFETY		5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

In the 1 Right (001-0) working section, the trailing cable for the Joy 10SC32 shuttle car was being anchored on a tensioned roof bolt installed in the roof support pattern. This condition could affect the tension of the bolt.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.204(f)(7)
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Section II--Inspector's Evaluation						
10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			D. Number of Persons Affected:			
Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>		001		
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input 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		E. Citation/ Order Number		
A. Citation <input type="checkbox"/>		B. Order <input type="checkbox"/>		C. Safeguard <input type="checkbox"/>		
D. Written Notice <input type="checkbox"/>		F. Dated		Mo Da Yr		

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 12/09/2004	B. Time (24 Hr. Clock) 1000
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Section III--Termination Action

17. Action to Terminate A bolt was installed for the anchor of the shuttle car.

18. Terminated	A. Date Mo Da Yr 12/09/2004	B. Time (24 Hr. Clock) 0745
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Section IV--Automated System Data


19. Type of Inspection (activity code) AAA	20. Event Number 4054503	21. Primary or Mill
22. S [6]		23. AR Number [6]

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

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Mine Citation/Order

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

MRL


Section I--Violation Data

1. Date Mo Da Yr 12/20/2004	2. Time (24 Hr. Clock) 0730	3. Citation/ Order Number 7148310
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Based on the results of five valid samples collected by the operator for the November-December bi-monthly sample cycle (Advisory No. 0023, dated 12-15-2004), the average concentration of respirable dust in the working environment of the designated occupation, 036, continuous miner operator on the 002 MMU was 2.461 mg/m3. This exceeds the applicable standard of 2.0 mg/m3. The operator shall take corrective action to lower the respirable dust levels, then sample each production shift until five valid respirable dust samples are collected and submitted to the MSHA respirable dust processing laboratory in Pittsburgh, PA. Approved respiratory protection shall be made available to all persons working in the affected area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 70.100(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: 002		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of issuance (check one)			
		Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>	
14. Initial Action			E. Citation/ Order Number	F. Dated Mo Da Yr	
A. Citation <input type="checkbox"/>	B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>		
15. Area or Equipment					

16. Termination Due	A. Date Mo Da Yr 12/23/2004	B. Time (24 Hr. Clock) 1000
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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) CED	20. Event Number 4076989	21. Primary or Mill
22. Signature <i>[Signature]</i>		23. AR Number <i>[Number]</i>

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. 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.

Jill
12.22.04



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/>	1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue)	Mo 1	Da 2	Yr 2004	3. Citation/Order Number	7	1	4	8	3	1	0	0	1		
4. Served To Certified Mail						5. Operator Anker West Virginia Mining Company											
6. Mine Sago Mine						7. Mine ID 46-08791- Contractor											

Section II—Justification for Action

The Operator has made improvements to the dust control parameters of MMU #2, whose DO #36 is under citation. These improvements have been approved by the District Manager. This citation is extended to allow the Operator to implement this improvements and collect five consecutive valid respirable dust samples. Any parameters used in excess of the currently approved parameters (minimums) may be adopted into the currently approved ventilation plan.

See Continuation Form

Section III—Subsequent Action Taken

8. Extended To	A. Date	Mo 01	Da 11	Yr 05	B. Time (24 Hr. Clock)	0800	C. Vacated <input type="checkbox"/>	D. Terminated <input type="checkbox"/>	E. Modified <input type="checkbox"/>
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Section IV—Inspection Data

9. Type of Inspection	DGC	10. Event Number							
11. Sign	[Signature]	AR Number	6	12. Date	Mo 1	Da 2	Yr 3	13. Time (24 Hr. Clock)	1500

9/2 1305

Mine Citation/Order
Continuation

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

20 JAN 2005 *MRS*

Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 12/20/2004	3. Citation/ Order Number 7148310 - 02
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

Section II--Justification for Action

Based on the results of five valid samples submitted by the operator, the average concentration of respirable dust in the working environment of the continuous miner operator (designated occupation 036-0) on the 002-0 MMU is 0.999 mg/m3 which is less than the applicable standard of 2.0 mg/m3

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection DGC	10. Event Number 9746141	
11. Signature <i>[Signature]</i>	12. Date Mo Da Yr 01/13/2005	13. Time (24 Hr. Clock) 1309

[Signature]
1-14-05

Mine Citation/Order

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

04 JAN 05 *ZRA*

Section I--Violation Data

1. Date Mo Da Yr 12/20/2004	2. Time (24 Hr. Clock) 0900	3. Citation/ Order Number 7148311
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA 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 ventilation plan was not complied with on the Mains section (002 MMU). In the No. 5 entry the curtain was 16 feet from the idle bolted face. 0.7% methane was detected in the face. In the No. 3 entry the curtain was 15 feet from the idle bolted face. 0.1% methane was detected in the face. The approved ventilation plan requires the curtain to be maintained within 10 feet of the idle bolted face.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.370(a)(1)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 12/20/2004	B. Time (24 Hr. Clock) 0920
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Section III--Termination Action

17. Action to Terminate Curtain was extended to within 10 feet of the face.

18. Terminated	A. Date Mo Da Yr 12/20/2004	B. Time (24 Hr. Clock) 0920
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Section IV--Automated System Data

19. Type of Inspection (activity code) CED	20. Event Number 4076989	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-5, 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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. 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.

JHL
12-20-04

Mine Citation/Order

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

04-105 NPL

Section I--Violation Data

1. Date Mo Da Yr 12/20/2004	2. Time (24 Hr. Clock) 1003	3. Citation/ Order Number 7148312
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA 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 ventilation plan was not complied with on the Joy 14CM-15 continuous mining machine on the Mains section (002 MMU). When checked, the water pressure on the right side of the head was only 50 psi. The approved ventilation plan requires 60 psi water pressure. This MMU is currently under citation for excessive dust.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input 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 <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					

16. Termination Due	A. Date Mo Da Yr 12/20/2004	B. Time (24 Hr. Clock) 1052
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Section III--Termination Action

17. Action to Terminate The water filter was cleaned to get 60 psi.

18. Terminated	A. Date Mo Da Yr 12/20/2004	B. Time (24 Hr. Clock) 1052
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Section IV--Automated System Data

19. Type of Inspection (activity code) CFD	20. Event Number 4076989	21. Primary or MII
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. 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.

Jul 12 22 04

Mine Citation/Order

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

18 JAN 2005



Section I—Violation Data		
1. Date Mo Da Yr 01/06/2005	2. Time (24 Hr. Clock) 0755	3. Citation/ Order Number 7097101
4. Served To AL SCHOONOVER		5. Operator ANKER WEST VIRGINIA 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 VENTILATION PLAN, IS NOT BEING FOLLOWED, ON THE 1ST RIGHT SECTION, 001-0 MMU. THE FLETCHER ROOF BOLTING MACHINE, SER. NO. 82001, 2G-3715-A1, WAS OPERATING AT THE FACE OF THE NO. 1 ENTRY AND THE AIR QUANTITY AT THE END OF THE LINE CURTAIN WAS 0. THE APPROVED VENTILATION PLAN, PAGE 6, PARAGRAPH 2, STATES, A MINIMUM OF 3000CFM OF AIRFLOW IS REQUIRED AT THE END OF THE CURTAIN, WHILE THE ROOF BOLTING MACHINE IS IN OPERATION, ON A 20 FOOT CUT.

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

15. Area or Equipment			
16. Termination Due			
A. Date Mo Da Yr 01/06/2005	B. Time (24 Hr. Clock) 0755		

Section III—Termination Action	
17. Action to Terminate	3000CFM OF AIRFLOW WAS DIRECTED TO THE END OF THE LINE CURTAIN.

18. Terminated	
A. Date Mo Da Yr 01/06/2005	B. Time (24 Hr. Clock) 0805

Section IV—Automated System Data			
19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill	
22. Signature <i>[Signature]</i>			23. AR Number 6

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small 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, 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.

CC PV BC 1-6-05

wpl
1/07

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 01/06/2005	2. Time (24 Hr. Clock) 0840	3. Citation/ Order Number 7097102
4. Served To AL SCHOONOVER	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

THE DRY CHEMICAL FIRE SUPPRESSION SYSTEM FOR THE SCOOP BATTERY CHARGING STATION, LOCATED ON THE 1ST RIGHT SECTION, 001-0 MMU, NO. 15 BLOCK, IN THE 6 TO 7 CROSS CUT, WAS NOT ENERGIZED. THE DRY CHEMICAL CANNISTERS WERE HUNG BUT NOT CONNECTED TO THE CONTROL BOX. THE AIR VENTILATING THE SCOOP BATTERY CHARGER TRAVELS TOWARD THE FACE AREA.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.340(a)
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Section II—Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 01/06/2005	B. Time (24 Hr. Clock) 0900
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Section III—Termination Action

17. Action to Terminate THE DRY CHEMICAL FIRE SUPPRESSION WAS OPERATIONAL.

18. Terminated	A. Date Mo Da Yr 01/06/2005	B. Time (24 Hr. Clock) 0910
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Section IV—Automated System Data

19. Type of Inspection (activity code) A A A	20. Event Number 4054553	21. Primary or MII
22. Signature 	23. AR Number [6]	

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

cc 1-6-05 PV AS

1/07

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 01/09/2005	2. Time (24 Hr. Clock) 0725	3. Citation/ Order Number 7097103
4. Served To LONNIE SHORT	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

LOOSE COAL, FINE COAL AND COAL DUST HAS ACCUMULATED, UNDER AND ALONG SIDE THE 1ST RIGHT, 001-0 MMU, COAL CONVEYOR BELT TAIL PIECE. THE ACCUMULATION WAS A MEASURED 3 FEET WIDE, 3 FEET LONG AND 16 INCHES DEEP AT THE TAIL PIECE, TAIL ROLLER AND 12 FEET LONG, 1 FOOT WIDE AND 12 INCHES DEEP ALONG BOTH SIDES OF THE TAIL PIECE. THE BOTTOM BELT WAS RUBBING ON THE ACCUMULATION AND THE TAIL ROLLER WAS TURNING IN THE ACCUMULATION. THE ACCUMULATION WAS DAMP TO DRY.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 01/09/2005	B. Time (24 Hr. Clock) 0725
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Section III—Termination Action

17. Action to Terminate THE ACCUMULATION WAS REMOVED AND THE AREA WAS ROCK DUSTED.

18. Terminated	A. Date Mo Da Yr 01/09/2005	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	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 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, 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.

CC PV 1-9-05
RJ

me
1/10

Mine Citation/Order

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

24 JAN 2005



Section I--Violation Data

1. Date Mo Da Yr 01/10/2005	2. Time (24 Hr. Clock) 0620	3. Citation/ Order Number 7097104
4. Served To AL SCHOONOVER		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

NO CONTROL SWITCH WAS PROVIDED FOR THE JUG PUMP, OPERATING BETWEEN THE AIR LOCK DOORS ON THE MAIN SUPPLY TRACK.

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 75.520
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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 01/10/2005	B. Time (24 Hr. Clock) 1600
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Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	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.

CPV
DT 1-10-05

up
1/12

Mine Citation/Order
Continuation

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

24 JAN 2005



K7

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 01/10/2005	3. Citation/ Order Number 7097104 - 01
4. Served To AL SCHOONOVER	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

Section II—Justification for Action

A CONTROL SWITCH WAS PROVIDED FOR THE JUG PUMP, OPERATING BETWEEN THE AIR LOCK DOORS ON THE MAIN SUPPLY TRACK.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054553	
11. Signature <i>[Signature]</i>	12. Date Mo Da Yr 01/19/2005	13. Time (24 Hr. Clock) 1700

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Mine Citation/Order

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

24 JAN 2005

117



Section I—Violation Data

1. Date Mo Da Yr 01/10/2005	2. Time (24 Hr. Clock) 0650	3. Citation/ Order Number 7097105
4. Served To AL SCHOONOVER		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

THE ENERGIZED, 7200 VOLT, HIGH VOLTAGE CABLE, IS NOT GUARDED WHERE MEN REGULARLY WORK OR TRAVEL UNDER THEM, ALONG THE MAIN SUPPLY TRACK, NEAR SPAD NO. 3176. THE HIGH VOLTAGE CABLE IS HUNG ON THE RIB, 4 FEET OFF THE FLOOR, FOR 2 BLOCKS.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.807
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Section II—Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood 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 01/10/2005	B. Time (24 Hr. Clock) 1600
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill
22. Signature <i>[Signature]</i>		23. AR Number 567

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

CC PV
JG 1-10-05

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Mine Citation/Order
Continuation

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

2005



Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 01/10/2005	Mo Da Yr	3. Citation/ Order Number 7097105 - 01
4. Served To AL SCHOONOVER	5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)		

Section II--Justification for Action

THE HIGH VOLTAGE CABLE WAS GUARDED.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054553	
11. Signature 	12. Date Mo Da Yr 01/19/2005	13. Time (24 Hr. Clock) 1720

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Mine Citation/Order

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

117

Section I--Violation Data

1. Date Mo Da Yr 01/10/2005	2. Time (24 Hr. Clock) 0920	3. Citation/ Order Number 7097106
4. Served To AL SCHOONOVER		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

LOOSE COAL AND FINE COAL, HAS ACCUMULATED, IN HAY STACKS, UNDER THE BOTTOM BELT OF THE NO. 1 COAL CONVEYOR BELT. THE HAYSTACKS ARE ACCUMULATED, UNDER THE FIRST THREE BOTTOM BELT ROLLERS, IN-BY NO. 1 BELT DRIVE. THE BOTTOM BELT ROLLERS ARE TURNING IN THE HAYSTACKS.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of issuance (check one)			
		Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			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 01/10/2005	B. Time (24 Hr. Clock) 1600
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or MII
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small 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.

cc PV
JG 1-10-05

upl
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Mine Citation/Order
Continuation

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

24 JAN 2005



117

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 01/10/2005			3. Citation/Order Number 7097106 - 01	
4. Served To AL SCHOONOVER				5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE				7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

THE ACCUMULATIONS WERE REMOVED AND THE AREA WAS ROCK DUSTED.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054553		
11. Signal [6]	AR Number [306]	12. Date Mo Da Yr 01/19/2005	13. Time (24 Hr. Clock) 1730

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Mine Citation/Order

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

10 2 FEB 2005
MSHA

Section I--Violation Data

1. Date Mo Da Yr 01/24/2005	2. Time (24 Hr. Clock) 1600	3. Citation/ Order Number 7148704
4. Served To Andy Tinnel	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The charging station three blocks out-by the power center for the 002-0 MMU does not have the required amount of rock dust. (240 lbs.) This charging station has no rock dust. This condition will cause a delay in firefighting.

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 75.1100-2(e)(2)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 01/24/2005	B. Time (24 Hr. Clock) 1630
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Section III--Termination Action

17. Action to Terminate Terminated due to 240 lb of rockdust being provided at this location.

18. Terminated	A. Date Mo Da Yr 01/24/2005	B. Time (24 Hr. Clock) 2220
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Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. 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.

Jal
1-27-05

Mine Citation/Order

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

MR

Section I--Violation Data

1. Date Mo Da Yr 01/24/2005	2. Time (24 Hr. Clock) 1610	3. Citation/ Order Number 7148705
4. Served To Owen Jones	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The No. 3 Shuttle car on the 001-0 MMU is being repaired while still energized. The shuttle car is connected (plugged in) to the power center and the on-board breaker is still on. This condition creates a crushing hazard as this piece of equipment is trammed while being repaired. The repairs are being made on the off side of the shuttle car, which will impair the vision of an operator to recognize the repairs being made.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(c)
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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: 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 01/24/2005	B. Time (24 Hr. Clock) 1620
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Section III--Termination Action

17. Action to Terminate Terminated due to the shuttle car being locked and tagged out.

18. Terminated	A. Date Mo Da Yr 01/24/2005	B. Time (24 Hr. Clock) 1620
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Section IV--Automated System Data


19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill
22. Signature		23. AR Number [6]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small 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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60651. 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.

Jul
1-27-05

Mine Citation/Order

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

J.M.


Section I--Violation Data

1. Date Mo Da Yr 01/24/2005	2. Time (24 Hr. Clock) 1650	3. Citation/ Order Number 7148706
4. Served To Owen Jones	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The currently approved mine ventilation plan is not being complied with on the 001-0 MMU in that the minimum required quantity of 3,500 CFM (page 6a) is not being maintained in the number six entry while roof bolting is taking place. A properly calibrated anemometer would not measure a velocity in this entry.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.370(a)(1)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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 01/24/2005	B. Time (24 Hr. Clock) 1710
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Section III--Termination Action

17. Action to Terminate Terminated due to 4,070 CFM being provided at the end of the ventilation device.

18. Terminated	A. Date Mo Da Yr 01/24/2005	B. Time (24 Hr. Clock) 1720
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Section IV--Automated System Data


19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill
22. Signature		23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small 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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. 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.

J.M.
 1-27-05

Mine Citation/Order

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

09 FEB 2005 

Section I--Violation Data

1. Date Mo Da Yr 01/24/2005	2. Time (24 Hr. Clock) 2125	3. Citation/ Order Number 7148707
4. Served To Andy Tinnel	5. Operator ANKER WEST VIRGINIA 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 currently approved mine ventilation plan is not being complied with on the 002-0 MMU in that more than 50 percent of the throat sprays are inoperative. Only one of the five throat sprays are operating. (page 2a requires at least 50 percent of the sprays in each block will be working) This section has had two high inspector respirable dust samples taken on 1/18/2005 on the 036 and 073 occupations.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input 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 <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: 002	
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 01/24/2005	B. Time (24 Hr. Clock) 2135
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Section III--Termination Action

17. Action to Terminate Terminated due to the water sprays being made operative.

18. Terminated	A. Date Mo Da Yr 01/24/2005	B. Time (24 Hr. Clock) 2135
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Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill
22. Signature		23. AR Number 161

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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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1-27-05

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 02/02/2005	2. Time (24 Hr. Clock) 0735	3. Citation/ Order Number 7097121
4. Served To JOHNNY GARRETT	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

THE CIRCULAR MAIN MINE FAN PRESSURE RECORDING CHART WAS NOT CHANGED BEFORE THE BEGINNING OF A SECOND REVOLUTION.

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

16. Termination Due	A. Date Mo Da Yr 02/02/2005	B. Time (24 Hr. Clock) 1400
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Section III—Termination Action

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

Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

CC PV
BC 2-2-05

Hpl
2/3

Mine Citation/Order
Continuation

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

MAR 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 02/02/2005	3. Citation/ Order Number 7097121 - 01
4. Served To BILL CURRENCE	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

THE CIRCULAR MAIN MINE FAN PRESSURE RECORDING CHART WAS REPLACED.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection AAA	10. Event Number 4054553	
11. Signature 	12. Date Mo Da Yr 03/01/2005	13. Time (24 Hr. Clock) 0600

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Mine Citation/Order

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

117

Section I—Violation Data

1. Date Mo Da Yr 02/02/2005	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7097122
4. Served To JOHNNY GARRETT	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

THE WATER SPRINKLER SYSTEM, PROTECTING THE NO. 4 COAL CONVEYOR BELT DRIVE IS NOT INSTALLED AS REQUIRED. THE SPRINKLERS ARE NOT INSTALLED TO PROTECT ALL OF THE NECESSARY COMPONENTS OF THE BELT DRIVE SYSTEM.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1101-8(a)
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

12. Type of Action 104(a)

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 02/02/2005	B. Time (24 Hr. Clock) 1400
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-1, March 1999, 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.

CCPV
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Mine Citation/Order
Continuation

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

- 4 MAR 2005 *MT*


Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 02/02/2005		3. Citation/ Order Number 7097122 - 01	
4. Served To BILL CURRENCE			5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE			7. Mine ID 46-08791		(Contractor)

Section II—Justification for Action

THE SPRINKLER SYSTEM WAS INSTALLED AS REQUIRED.

See Continuation Form

Section III—Subsequent Action Taken

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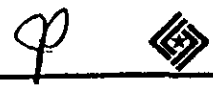
Section IV—Inspection Data

9. Type of Inspection AAA	10. Event Number 4054553	11. Signer <i>L</i>	12. Date Mo Da Yr 03/01/2005	13. Time (24 Hr. Clock) 0730
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Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 02/02/2005	2. Time (24 Hr. Clock) 0920	3. Citation/ Order Number 7097123
4. Served To JOHNNY GARRETT		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

THE SCOOP CHARGERS FOR THE MAINS SECTION 002 MMU IN THE NO. 5 ENTRY 50 FEET OUTBY MINE MARKER NO. 3375 IN CROSSCUT BETWEEN 5 AND 6 ENTRY AND 6 AND 7 ENTRY LOCATED IN THE MAIN INTAKE AIR COURSE IS CHARGEING IN THE AIR VENTILATING THE WORKING FACES AND IS NOT VENTILATED WITH INTAKE AIR THAT IS COURSED INTO THE RETURN AIR COURSE.

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 75.340(a)(2)(i)
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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 02/02/2005	B. Time (24 Hr. Clock) 1000
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Section III—Termination Action

17. Action to Terminate THE CHARGERS WERE MOVED AND VENTILATED WITH INTAKE AIR THAT IS COURSED INTO A RETURN AIR COURSE.

18. Terminated	A. Date Mo Da Yr 02/02/2005	B. Time (24 Hr. Clock) 1130
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Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054553	21. Primary or Mill
22. Signature		23. AR Number [6]

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

CCPV
BC 2-2-05

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Mine Citation/Order

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

17 APR 2005



Section I--Violation Data

1. Date Mo Da Yr 03/03/2005	2. Time (24 Hr. Clock) 0900	3. Citation/ Order Number 7148634
4. Served To BILL CURRENCE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

Records indicate that the Intake airway located in the middle entry of the old 1-right section, has not been traveled in it's entirety, at least every 7 days, by a certified person, for an examination for hazardous conditions. The approximately total distance is 1300 feet.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.364(b)(1)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 03/03/2005	B. Time (24 Hr. Clock) 1300
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Section III--Termination Action

17. Action to Terminate Terminated due to a certified person, making the examination and recorded in the book provided for that purpose.

18. Terminated	A. Date Mo Da Yr 03/03/2005	B. Time (24 Hr. Clock) 1300
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Section IV--Automated System Data

19. Type of Inspection (activity code) CCC	20. Event Number 4077603	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 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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17 APR 2005
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Section I--Violation Data

1. Date Mo Da Yr 03/03/2005	2. Time (24 Hr. Clock) 1200	3. Citation/ Order Number 7148635
4. Served To BILL CURRENCE, MINE FOREMAN	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The operator did not follow the approved ventilation plan as required. The water pressure on the left side on the Joy 14CM-15 continuous miner measured 50 PSI at the water spray with the scrubber running. The miner is operating on the Mains section, 002 MMU. The mine ventilation plan on page 2b requires 60 PSI.

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: 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 03/03/2005 B. Time (24 Hr. Clock) 1230

Section III--Termination Action

17. Action to Terminate Terminated due the water pressure pump being adjusted and providing more water pressure to the water sprays at the miner. 75 PSI was measured at the sprays, with the scrubber running.

18. Terminated A. Date Mo Da Yr 03/03/2005 B. Time (24 Hr. Clock) 1230

Section IV--Automated System Data

19. Type of Inspection (activity code) CCC 20. Event Number 4077603 21. Primary or Mill

22. Signature [Signature] 23. AR Number [Number]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at 500 W. Madison Street, Suite 1240, Chicago, Illinois 60661. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order

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

05 APR 2005



Section I—Violation Data

1. Date Mo Da Yr 03/16/2005	2. Time (24 Hr. Clock) 0900	3. Citation/ Order Number 7097588
4. Served To AL SCHOONOVER	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

BASED ON ADVISORY NO. 0024, DATED 03-07-2005, THE OPERATOR HAS FAILED TO SUBMIT, THE REQUIRED FIVE DESIGNATED OPERATOR SAMPLES, 036, CONTINUOUS MINER OPERATOR, FOR THE BI-MONTHLY CYCLE, JAN-FEB 2005, FOR MECHANIZED MINING UNIT I. D. 001-0.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 70.207
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Section II—Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 03/16/2005	B. Time (24 Hr. Clock) 0900
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Section III—Termination Action

17. Action to Terminate	SAMPLING CYCLE JAN-FEB 2005 HAS PASSED.
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18. Terminated	A. Date Mo Da Yr 03/16/2005	B. Time (24 Hr. Clock) 0900
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Section IV—Automated System Data

19. Type of Inspection (activity code)	AAA	20. Event Number 4054553	21. Primary or Mill
22. Sign	[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 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.

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Mine Citation/Order

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

91 APR 2005

Section I--Violation Data

1. Date Mo Da Yr 04/06/2005	2. Time (24 Hr. Clock) 0630	3. Citation/ Order Number 7097717
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA 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 ventilation plan is not being complied with on the Mains 002-0 MMU working section. The approved ventilation plan states that the line curtain being used for ventilate the #5 entry face is not maintained to within 10 feet of the face or on the second row of permanent roof support. The line curtain was found approximately 110 feet from the #5 entry face, which was 80 feet from the last permanent roof support bolt to the end of the existing line curtain which is hung on the 20th permanent roof support bolt outbid the face.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.370
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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 04/06/2005	B. Time (24 Hr. Clock) 0640
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Section III--Termination Action

17. Action to Terminate Terminated due to line curtain being hung from the end of the previous line curtain, inby to the second row of permanent roof support from the #5 face.

18. Terminated	A. Date Mo Da Yr 04/06/2005	B. Time (24 Hr. Clock) 0640
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mit
22. Sign	23. AR Number [6]	

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

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4/13

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 04/06/2005	2. Time (24 Hr. Clock) 0840	3. Citation/ Order Number 7097718
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #6 AWG trailing cable for the #1 scoop charger being operated on the Mains 002-0 MMU working section has the trailing cable plugged into a circuit breaker that has the instantaneous setting set on 750 amperes. The maximum instantaneous amperes setting for a #6 AWG trailing cable is 300 amperes. The mine operator immediately removed the #1 scoop charger trailing cable from service.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.601-1
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input 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
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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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/06/2005	B. Time (24 Hr. Clock) 0920
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Section III—Termination Action

17. Action to Terminate Terminated due to the #1 scoop charger trailing cable being plugged into a circuit breaker with the instantaneous setting set on 300 amperes.

18. Terminated	A. Date Mo Da Yr 04/06/2005	B. Time (24 Hr. Clock) 0920
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

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Mine Citation/Order

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

2 APR 2005

Section I--Violation Data

1. Date Mo Da Yr 04/06/2005	2. Time (24 Hr. Clock) 0850	3. Citation/ Order Number 7097719
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #6 AWG trailing cable for the #4 scoop charger being operated on the Mains 002-0 MMU working section has the trailing cable plugged into a circuit breaker that has the instantaneous setting set on 500 amperes. The maximum instantaneous setting for a #6 AWG trailing cable is 300 amperes. The mine operator immediately removed the #4 scoop charger trailing cable from service.

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 75.601-1
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 04/06/2005	B. Time (24 Hr. Clock) 0930
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Section III--Termination Action

17. Action to Terminate Terminated due to the #4 scoop charger trailing cable being plugged into a circuit breaker with the instantaneous setting set on 300 amperes.

18. Terminated	A. Date Mo Da Yr 04/06/2005	B. Time (24 Hr. Clock) 0930
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Section IV--Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054745	21. Primary or Mill
22. Signal	23. AR Number		
	6		

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

WPL
4/13

Mine Citation/Order

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

23 APR 2005

Section I—Violation Data

1. Date Mo Da Yr 04/07/2005	2. Time (24 Hr. Clock) 0945	3. Citation/ Order Number 7097720
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 <small>(Contractor)</small>
8. Condition or Practice		8a. Written Notice (103g) <input checked="" type="checkbox"/>

The trailing cable for the Joy 10 SC shuttle car serial no. 2008, Approval no. 2G-3936-0, being operated on the Mains 002-0 MMU right side working section is not insulated adequately and fully protected. The outer jacket of the trailing cable has a cut, which exposes the inner insulated energized power leads of 600 VAC. This condition is 1 1/2 inches long by 3/8 of an inch wide. All three of the inner insulated energized power leads also have the insulation cut which exposes the bare power leads. The bare power leads can be seen through the cut in the outer jacket of the trailing cable. The mine floor ranges from dry to wet on this section. The inner leads of the trailing cable ranged from damp to wet. The miners normally handle the trailing cables.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.517
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Section II—Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 04/07/2005	B. Time (24 Hr. Clock) 1025
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Section III—Termination Action

17. Action to Terminate Terminated due to the inner insulated leads and the outer protective jacket being insulated adequately and fully protected.

18. Terminated	A. Date Mo Da Yr 04/07/2005	B. Time (24 Hr. Clock) 1025
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	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

13 APR 2005

Section I—Violation Data

1. Date Mo Da Yr 04/11/2005	2. Time (24 Hr. Clock) 0925	3. Citation/ Order Number 7097721
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		

THE TRAILING CABLE FOR THE FLETCHER ROOF BOLTER SERIAL NO. 2003334, APPROVAL NO.2G-3715A-1, BEING OPERATED ON THE MAINS, 001-0 MMU WORKING SECTION IS NOT INSULATED ADEQUATELY AND FULLY PROTECTED. THE INSULATION ON TWO PREVIOUS PERMANENT SPLICE'S HAS WORN AWAY, LEAVING THE INNER INSULATED ENERGIZED POWER LEADS OF 600 VAC EXPOSED FOR A ONE INCH AREA ALL THE WAY AROUND THE # (1) SPLICE AND THE #(2) SPLICE HAS THE INNER INSULATED, ENERGIZED POWER LEADS EXPOSED FOR A 3/4 OF AN INCH AREA ALL THE WAY AROUND THE TRAILING CABLE. THE MINE FLOOR IS SLOPPY WET ON THIS SECTION. THIS CONDITION IS LOCATED 20 FEET AND FIFTY FEET OUTBY THE ROOF BOLTER AND THE MINERS HANDLE THIS CABLE SEVERAL TIMES PER SHIFT. THIS CONDITION IS A ELECTRICAL SHOCK HAZARD.

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 75.517
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>
	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	D. Number of Persons Affected: 001

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/11/2005	B. Time (24 Hr. Clock) 1000
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Section III—Termination Action

17. Action to Terminate
TERMINATED DUE TO THE TRAILING CABLE BEING INSULATED ADEQUATELY AND FULLY PROTECTED AT BOTH #(1) AND #(2) SPLICES.

18. Terminated	A. Date Mo Da Yr 04/11/2005	B. Time (24 Hr. Clock) 1000
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Section IV—Automated System Data

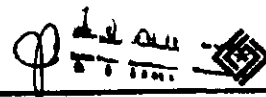
19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signal		23. AR Number 6

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

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Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 04/11/2005	2. Time (24 Hr. Clock) 0945	3. Citation/ Order Number 7097722
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Fletcher roof bolting machine serial no. 2003334, Approval no. 2G-3715A-1, being operated on the 001-0 MMU working section is not maintained in a permissible condition. The 110 VAC power cable for the operators side area light has been cut. The conduit is cut, the power cable, s outer jacket has been cut and the inner insulated power leads have the insulation cut which exposes the inner bare power leads for approximately 1/8 of an inch wide by 1/4 of an inch long.

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 75.503
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/11/2005	B. Time (24 Hr. Clock) 1030
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Section III--Termination Action

17. Action to Terminate Terminated due to the area light power cable being insulated and the conduit being repaired to provide protection for the area light power cable.

18. Terminated	A. Date Mo Da Yr 04/11/2005	B. Time (24 Hr. Clock) 1030
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signar		23. AR Number [6]

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

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Mine Citation/Order

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

18 APR 2005



Section I--Violation Data

1. Date Mo Da Yr 04/11/2005	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7097723
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #4 bottom conveyor belt is rubbing hard on 8 bottom belt roller hanger's in a row at the third block outby the Mains section tailpiece. The bottom belt roller hanger's range from very warm to hot to the touch. The mine floor is damp to wet. The mine operator immediately removed the #4 conveyor belt from service.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II--Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			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 04/11/2005	B. Time (24 Hr. Clock) 1120
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Section III--Termination Action

17. Action to Terminate Terminated due to the #4 bottom conveyor belt being re-aligned at the third block outby the Mains section tailpiece. The conveyor belt is now running straight with out rubbing the belt hanger's.		
18. Terminated	A. Date Mo Da Yr 04/11/2005	B. Time (24 Hr. Clock) 1120

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signal		23. AR Number 261

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

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4/12*

Mine Citation/Order

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

27 APR 2005



Section I--Violation Data

1. Date Mo Da Yr 04/12/2005	2. Time (24 Hr. Clock) 0900	3. Citation/ Order Number 7097724
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The trailing cable for the #6 Joy 10 SC Shuttle car serial no. 2007 Approval no. 2G-3619A-00 being operated on the Mains 002-0 MMU working section is not insulated adequately and fully protected. The trailing cable has three separate previous splices with the insulation worn away which exposes the inner insulated energized power leads of 600 VAC. (1) Splice has the inner energized leads exposed for approximately 3/4 of an inch wide all the way around the trailing cable. (2) Splice has the inner energized leads exposed for approximately 1/2 of an inch wide all the way around the trailing cable at both ends of the splice. (3) Splice has the inner energized leads exposed for approximately 1 inch wide all of the way around the trailing cable. (4) Is a cut in the outer jacket of the trailing cable that measured 1/2 of an inch wide by 1 1/2 inches long which exposes 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 75.517
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Section II--Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/12/2005	B. Time (24 Hr. Clock) 0945
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Section III--Termination Action

17. Action to Terminate Terminated due to all three of the splices and the cut place being insulated adequately and fully protected.

18. Terminated	A. Date Mo Da Yr 04/12/2005	B. Time (24 Hr. Clock) 0945
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Section IV--Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054745	21. Primary or Mill
22. Signal	23. AR Number		

MSHA Form 7000-3, Mar 80 (revise) ... 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.

WSP
4/14

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 04/12/2005	3. Citation/ Order Number 7097724
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Continuation of 3. Condition or Practice

inner insulated energized power leads, and the inner insulated leads also have the insulation cut which exposes the bare power leads of 600 VAC. The opening measured 1/2 of an inch wide by 3 inches long. The mine floor ranges from wet to sloppy wet. The miners normally handle the trailing cables.

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 E01	10. Event Number 4054745		
11. Signat: [Signature]	AR Number [Signature]	12. Date Mo Da Yr 04/12/2005	13. Time (24 Hr. Clock) 0900

Mine Citation/Order

U.S. Department of Labor
 Mine Safety and Health Administration 27 APR 2005



Section I--Violation Data			
1. Date Mo Da Yr 04/12/2005	2. Time (24 Hr. Clock) 1030	3. Citation/ Order Number	7097725
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The trailing cable for the #7 10 SC Shuttle car serial no. 2009, Approved no. 2G-3936-0 being operated on the Mains 001-0 MMU working section is not insulated adequately and fully protected. The trailing cable has a cut in the outer jacket that measured 1/8 of an inch wide by 1 inch long and the inner insulated energized power leads of 600 VAC are exposed and also the inner leads have the insulation cut which exposes the bare energized power leads for 1/8 of an inch wide by 1 inch long. This condition is located at the shuttle car trailing cable reel where the bare energized power leads can become grounded on the frame of the reel. The mine floor is wet to sloppy wet. The mine operator remove the shuttle car from service immediately.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.517
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/12/2005	B. Time (24 Hr. Clock) 1230
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054745	21. Primary or Mill
22. Signer		23. AR Number	

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

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Mine Citation/Order
Continuation

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

27 APR 2005



X7

Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 04/12/2005 Mo Da Yr	3. Citation/ Order Number 7097725 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Terminated due to trailing cable being reentered into the #7 shuttle car's cable reel.

Section III--Subsequent Action Taken

See Continuation Form

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signature [Signature]	12. Date Mo Da Yr 04/13/2005	13. Time (24 Hr. Clock) 0830

me
4/14

Mine Citation/Order

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

27 APR 2005



Section I—Violation Data		
1. Date Mo Da Yr 04/12/2005	2. Time (24 Hr. Clock) 1050	3. Citation/ Order Number 7097726
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA 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 ventilation plan is not being complied with on the Mains 001-0 MMU working section where the Joy continuous mining machine is mining coal in the #4 left crosscut at #45 block. The ventilation plan plainly states that minimum quantity of air with the scrubber on is 6000 cfm at the end of the line curtain. When this inspector tried to take a air reading at the end of the line curtain with the approved and calibrated anemometer serial no. 6365 the ventilation was not adequate enough to turn the wheel on the anemometer. The mine operator immediately shut down the continuous mining machine until the minimum amount of 6000 cfm could be obtained at the end of the line curtain. The Mains has fish tail blowing ventilation with 001-0 and 002-0 MMU's running on this super section.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input 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 <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				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 04/12/2005	B. Time (24 Hr. Clock) 1125
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Section III—Termination Action

17. Action to Terminate		
Terminated due to a run through curtain being installed in crosscut from #4 to #5 entry's at #44 block and the check curtain's being tightened. After taking another air reading the quantity of air at		
18. Terminated	A. Date Mo Da Yr 04/12/2005	B. Time (24 Hr. Clock) 1125

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signatures		23. AR Number [6]

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

WPL
4/14

Mine Citation/Order
Continuation

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


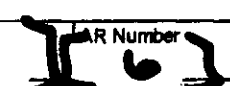
17.


Section I—Subsequent Action/Continuation Date				
1. Subsequent Action <input type="checkbox"/>	1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 04/12/2005	3. Citation/ Order Number 7097726
4. Served To Bill Currence Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY (Contractor)	
6. Mine SAGO MINE			7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 17. Action to Terminate
the end of the line curtain is now Q-6, 930 cfm.

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	E01	10. Event Number	4054745	
11. Signature 	AR Number 	12. Date Mo Da Yr 04/12/2005	13. Time (24 Hr. Clock) 1050	

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 04/13/2005	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7097727
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

B. Condition or Practice

8a. Written Notice (103g)

The #4 scoop battery charging station for the Mains 001-0 and 002-0 MMU's sections is not provided with a operational fire suppression system. The chemical canister type fire suppression system is not wired up and ready to provide protection for the scoop battery's while charging. The battery charging station is located at #40 block in the #8 intake entry. The mine operator immediately removed the #4 battery charger from service. Parts for the fire suppression system had to be ordered.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1107-16(b)
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 04/14/2005 B. Time (24 Hr. Clock) 1600

Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 21. Primary or Mill

22. Sign [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.

mc
4/14

Mine Citation/Order

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

12 MAY 2005
APR 2005
recalled

Section I—Violation Data

1. Date Mo Da Yr 04/13/2005	2. Time (24 Hr. Clock) 1415	3. Citation/ Order Number 7097728
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA 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 operator failed to submit a valid respirable dust sample for the Bi-monthly sampling cycle for February - March on the 001-0 MMU section.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input checked="" type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.208 70.208
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Section II—Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 04/13/2005	B. Time (24 Hr. Clock) 1420
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Section III—Termination Action

17. Action to Terminate	Terminated due to no action required by the operator as the sampling cycle can only be satisfied during the established sampling cycle.	
18. Terminated	A. Date Mo Da Yr 04/13/2005	B. Time (24 Hr. Clock) 1420

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature		23. AR Number

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

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Mine Citation/Order
Continuation

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

27 APR 2005



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 04/13/2005	3. Citation/Order Number 7097728 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Change	From	To
8. Condition Or Practice		

Reason Change summit to submit and add the following to the body of the citation. The designated area sampling point I.D 9011 for the intake - roof bolter on the 001-0 mechanized mining unit as identified in advisory no. 0025 dated April 07, 2005.

Wrote summit in error and also did not put all of the information needed in the body of the condition and practice of the citation.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signature [Signature]	12. Date Mo Da Yr 04/14/2005	13. Time (24 Hr. Clock) 0811

*Upd
4/15*

Citation/Order
Continuation

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

12 MAY 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 04/13/2005	3. Citation/ Order Number 7097728 - 02
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.208	70.208

Reason Accidentally hit 5 and should have hit 0 when issuing.

Issued under the wrong section of the 30 CFR in error.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signature 	12. Date Mo Da Yr 05/11/2005	13. Time (24 Hr. Clock) 1436

Handwritten: 6/15/12

Mine Citation/Order

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

08 MAY 2005

K7.

Section I--Violation Data

1. Date Mo Da Yr 04/18/2005	2. Time (24 Hr. Clock) 0710	3. Citation/ Order Number 7097729
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

Combustible materials in the form of loose coal, coal fines mixed with rock is allowed to accumulate on the Mains 001-0 and 002-0 MMU working section's. The accumulations range from damp to wet and measured from 4 inches to 20 inches deep by 12 inches to 8 feet wide by 15 feet to 30 feet in length in several locations on the 001-0 and 002-0 MMU section's. These accumulations are located in the haulroad entries # 1 through #9 and also in some of the crosscut's. The mine operator immediately shut down production and started cleaning up the accumulations.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			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 04/18/2005	B. Time (24 Hr. Clock) 1130
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Section III--Termination Action

17. Action to Terminate Terminated due to the accumulations being cleaned up and the area being rock dusted.

18. Terminated	A. Date Mo Da Yr 04/18/2005	B. Time (24 Hr. Clock) 1130
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Sig 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.

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Mine Citation/Order

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

03 MAY 2005 X1

Section I--Violation Data

1. Date Mo Da Yr 04/18/2005	2. Time (24 Hr. Clock) 0740	3. Citation/ Order Number 7097730
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

No apparent effort was made to replace the wiring for the canister on the chemical type fire suppression system for the #4 scoop charger located on the mains 001-0 & 002-0 MMU sections. The #4 scoop charger is ordered withdrawn from service until the canister can be repaired or replaced. This inspector went to the #4 scoop charger to terminate citation no. 7097727 when he found the scoop charger energized and in operation charging a set of scoop batteries.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1107-16(b)
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Section II--Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input 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 type="checkbox"/>			
C. Significant and Substantial: Yes <input type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected:
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(b)		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 7097727	F. Dated Mo Da Yr 04/13/2005

15. Area or Equipment The # 4 scoop charger located at SS#3768 in the crosscut between #8 and #9 entries.

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature 		23. AR Number [6]

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

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4/21

Mine Citation/Order
Continuation

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

03 MAY 2005 X1-



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 04/18/2005 Mo Da Yr	3. Citation/ Order Number 7097730 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the chemical type fire suppression canister's over the scoop batteries at the #4 scoop charger being replaced with new canister's. The canister's are wired up and ready for service to provide fire protection for the #4 scoop charger batteries.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signature, 	12. Date Mo Da Yr 04/18/2005	13. Time (24 Hr. Clock) 1740

Wpd
4/21



Section I--Violation Data

1. Date Mo Da Yr 04/18/2005	2. Time (24 Hr. Clock) 1015	3. Citation/ Order Number 7097731
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The trailing cable for the #1 Joy 10 SC 32 shuttle car serial no. ET14258, Approval no.2G-3619A-00 on the 001-0 MMU working section is not insulated adequately and fully protected. The insulation on three previous splices has worn away leaving the inner insulated energized power leads exposed for 1 inch area all of the way around the trailing cable on each of the three splices. The outer jacket of the trailing cable has 4 cut's which range from 1 inch to 2 inches in length by 1/4 of an inch to 1/2 of an inch wide and exposes the inner insulated leads. The inner insulated leads also have the insulation cut which exposes the bare power leads for approximately 1/4 to 3/8 of an inch wide by 1 to 2 inches in length. The mine floor ranges from damp to wet on this section. The miners normally handle the trailing cables.

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 75.517
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/18/2005	B. Time (24 Hr. Clock) 1200
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signal 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.

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Mine Citation/Order

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

04 MAY 2005



Section I--Violation Data

1. Date Mo Da Yr 04/20/2005	2. Time (24 Hr. Clock) 1130	3. Citation/ Order Number 7097732
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The personnel doors between the primary escapeway and the secondary escapeway are not maintained to less than 600 feet on the mains 001-0 & 002-0 MMU sections. The distance from the personnel door at #27 block along #4 haulage to the personnel door at #43 block along #4 haulage is approximately 1,360 feet. The mining height is approximately 7 feet high.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.333(c)(1)
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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"/>
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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"/>
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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 04/21/2005	B. Time (24 Hr. Clock) 0330
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature <i>[Signature]</i>	23. AR Number <i>[6]</i>	

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

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Mine Citation/Order
Continuation

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

0-4 MAY 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 04/20/2005	3. Citation/ Order Number 7097732 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to personnel doors being installed in the permanent ventilation controls (stoppings) at #37 block and at #32 block to provide the miners access to the primary escape way from the track entry.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature [Signature]	AR Number [Number]	12. Date Mo Da Yr 04/29/2005	13. Time (24 Hr. Clock) 1000

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5/03

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 04/26/2005	2. Time (24 Hr. Clock) 0750	3. Citation/ Order Number 7097733
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #6 AWG trailing cable for the water pressure pump being operated on the 2 Right, 003-0 MMU working section has the trailing cable plugged into a circuit breaker that has the instantaneous setting set on 700 amperes. The maximum instantaneous amperes setting for a #6 AWG trailing cable is 300 amperes. The mine operator immediately reset the instantaneous setting on the circuit breaker that provides 600 VAC for the water pressure pump down to 300 amperes.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.601-1
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/26/2005	B. Time (24 Hr. Clock) 0755
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Section III--Termination Action

17. Action to Terminate Terminated due to the water pressure pump circuit breaker instantaneous setting set down to 300 amperes.

18. Terminated	A. Date Mo Da Yr 04/26/2005	B. Time (24 Hr. Clock) 0755
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3, Mar 80 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 04/26/2005	2. Time (24 Hr. Clock) 1030	3. Citation/ Order Number 7097734
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #2 AWG trailing cable for the #4 Fletcher roof bolting machine serial no. 2004096, Approval no. 2G-3715A-1 being operated on the 2 Right, 003-0 MMU working section. The outer jacket is cut for 1 1/2 inches in length by 3/4 of an inch wide and exposes the inner insulated energized power leads and the inner insulated leads also have the insulation cut which measured 1 1/2 inches long by 3/8 of an inch wide which exposes the bare energized power leads that provide 600 VAC to the #4 Fletcher roof bolting machine.

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 75.517
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Section II—Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/26/2005	B. Time (24 Hr. Clock) 1045
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Section III—Termination Action

17. Action to Terminate Terminated due to the trailing cable being insulated adequately and fully protected.

18. Terminated	A. Date Mo Da Yr 04/26/2005	B. Time (24 Hr. Clock) 1045
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signatures: [Handwritten signatures]		23. AR Number [Handwritten]

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

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 04/26/2005	3. Citation/ Order Number 7097734 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change From To

8. Condition Or Practice

Reason Add the following to the body of the citation: The #4 Fletcher roof bolting machine trailing cable is not insulated adequately and fully protected.

Did not put this in the body of the citation before issuing.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature [Signature]	AR Number 3563	12. Date Mo Da Yr 04/26/2005	13. Time (24 Hr. Clock) 1215

Handwritten initials and date: WJ 4/26/05

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 04/26/2005	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7097735
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #3 scoop charging station for the 2 Right, 003-0 MMU section is located one block inby the 2 Right track switch and is energized charging a set of scoop batteries without having fire suppression provided over the scoop batteries. This charging station has a chemical canister type fire suppression system and the canister was not located over the charging scoop batteries when this inspector found this condition. The mine operator immediately positioned the chemical canister over the charging scoop batteries.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1107-16
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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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/26/2005	B. Time (24 Hr. Clock) 1105
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Section III--Termination Action

17. Action to Terminate Terminated due to the chemical canister being placed over the charging scoop batteries.

18. Terminated	A. Date Mo Da Yr 04/26/2005	B. Time (24 Hr. Clock) 1105
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Section IV--Automated System Data

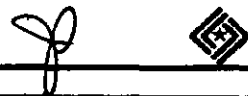
19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature		23. AR Number

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

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action: 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 04/26/2005	3. Citation/Order Number 7097735 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.1107-16	75.1107-16(b)

Reason Issued under the wrong section of the 30 CFR.

Issued under the wrong section of the 30 CFR.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signatures [Signature] 6	PAR Number [Signature]	12. Date Mo Da Yr 04/29/2005	13. Time (24 Hr. Clock) 1420

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Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 04/26/2005	2. Time (24 Hr. Clock) 1110	3. Citation/ Order Number 7097736
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #7 mantrip charging station located at the 2 Right track switch and is energized charging the #6 mantrip batteries without having fire suppression provided over the mantrip batteries. This charging station has a chemical canister type fire suppression system and the canister was located over the charging mantrip batteries and is not wired up to provide protection for the mantrip batteries when this inspector found this condition. The mine operator immediately removed this #7 mantrip charger from service until the fire suppression system can be wired up and fire protection can be provided at the #7 mantrip charging station.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1107-16
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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 04/26/2005 B. Time (24 Hr. Clock) 1400

Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 21. Primary or M#

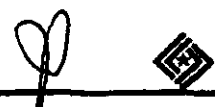
22. [Handwritten marks] 23. AR Number [Handwritten marks]

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

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/>	1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 04/26/2005	Mo Da Yr	3. Citation/ Order Number 7097736 - 01
4. Served To Brad Hamrick			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the chemical canister type fire suppression system being wired up to provide fire protection for the #7 mantrip charging station.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signature [Signature]	12. Date Mo Da Yr 04/27/2005	13. Time (24 Hr. Clock) 0935

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5/02*

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 04/26/2005	3. Citation/Order Number 7097736 - 02
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.1107-16	75.1107-16(b)

Reason Issued under the wrong section of the 30 CFR.

Issued under the wrong section of the 30 CFR.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signat [6] [6]	12. Date Mo Da Yr 04/29/2005	13. Time (24 Hr. Clock) 1428

MC
5/03

11 MAY 2005



Section I--Violation Data

1. Date Mo Da Yr 04/27/2005	2. Time (24 Hr. Clock) 0620	3. Citation/ Order Number 7097737
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The fire suppression system that provides fire protection for the #2 conveyor belt drive and take-up will not de-energize the 600 VAC when the fire suppression system was tested by this inspector.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1107-16(b)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

C. Significant and Substantial: Yes No

D. Number of Persons Affected: 001

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 04/27/2005 B. Time (24 Hr. Clock) 0700

Section III--Termination Action

17. Action to Terminate Terminated due to the fire suppression system will now de-energize the #2 conveyor belt head drive and take-up when tested.

18. Terminated A. Date Mo Da Yr 04/27/2005 B. Time (24 Hr. Clock) 0700

Section IV--Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 21. Primary or Mill

22. Sign 23. AR Number

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

WPL
5/103

Mine Citation/Order

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

11 MAY 2005



Section I—Violation Data

1. Date Mo Da Yr 04/27/2005	2. Time (24 Hr. Clock) 0635	3. Citation/ Order Number 7097738
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The fire suppression system that provides fire protection for the #3 conveyor belt and take-up does not provide fire protection for the top surfaces of the top conveyor belt. A branch line is not provided to supply water to this area of the conveyor belt.

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 75.1107-16(b)
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>			
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>			
	C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		D. Number of Persons Affected: 001	
11. Negligence (check one)	A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>			
12. Type of Action 104(a)	13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>			
14. Initial Action 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 04/27/2005	B. Time (24 Hr. Clock) 1600
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Section III—Termination Action

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or MII
22. Signature		23. AR Number

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

Wpl
5/02

Mine Citation/Order
Continuation

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

11 MAY 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> Continuation <input type="checkbox"/>	2. Dated (Original Issue) 04/27/2005	3. Citation/ Order Number 7097738 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the fire suppression system being provided with a additional branch line to supply water to the top surface of the top conveyor belt at the #3 head drive and take-up.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature <i>[Signature]</i>	PAR Number <i>[Signature]</i>	12. Date Mo Da Yr 04/29/2005	13. Time (24 Hr. Clock) 1330

me
5/03

Section I—Violation Data		
1. Date Mo Da Yr 04/27/2005	2. Time (24 Hr. Clock) 0640	3. Citation/ Order Number 7097739
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Combustible materials in the form of loose coal, coal fines and a heavy coating of float coal dust is allowed to accumulate at the #3 conveyor belt head drive rollers and take-up. The float coal dust is powder dry and black in color and has accumulated on previously rock dusted surfaces of the mine floor, ribs, water line and belt structure. The accumulations of loose coal, coal fines mixed with rock range from 6 to 12 inches deep by 48 inches wide by 25 feet in length. The bottom conveyor belt is running in the accumulations for approximately 15 feet in length under the take-up.

See Continuation Form (MSHA Form 7000-3a)

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/27/2005	B. Time (24 Hr. Clock) 0710
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Section III—Termination Action

17. Action to Terminate Terminated due to the accumulations being cleaned from the #3 head drive and take-up and the cited area being coated with a heavy coating of rock dust.

18. Terminated	A. Date Mo Da Yr 04/27/2005	B. Time (24 Hr. Clock) 1045
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Section IV—Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054745	21. Primary or Mill
22. Sign	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.

WJL
5/10/05

Mine Citation/Order

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

11 MAY 2005



Section I--Violation Data

1. Date Mo Da Yr 04/27/2005	2. Time (24 Hr. Clock) 0740	3. Citation/ Order Number 7097740
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Combustible materials in the form of loose coal, coal fines mixed with rock is allowed to accumulate along and under the #3 conveyor belt at #29 block. The accumulations of loose coal, coal fines mixed with rock range from 6 to 12 inches deep by 48 inches wide by 25 feet in length and range from damp to dry to the touch. The accumulations range from 6 to 17 inches deep by 24 to 36 inches wide by 70 feet in length and the bottom conveyor belt is running in the accumulations for approximately 30 feet in length. See citation no. 7097741 for bad bottom conveyor belt rollers in this area.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:

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

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

C. Significant and Substantial: Yes No

D. Number of Persons Affected: 001

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 04/27/2005 B. Time (24 Hr. Clock) 1000

Section III--Termination Action

17. Action to Terminate Terminated due to the accumulations being cleaned from the #3 conveyor belt at #29 block and the cited area being coated with a heavy coating of rock dust.

18. Terminated A. Date Mo Da Yr 04/27/2005 B. Time (24 Hr. Clock) 1045

Section IV--Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 21. Primary or Mill

22. Signal 6 23. AR Number [6]

MSHA Form 700-3, Mar 80 (revised) ... of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Wpl
5/02

Mine Citation/Order

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

11 MAY 2005 

Section I--Violation Data

1. Date Mo Da Yr 04/27/2005	2. Time (24 Hr. Clock) 0745	3. Citation/ Order Number 7097741
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #3 conveyor belt is not maintained in a safe operating condition at #29 block. The #3 bottom conveyor belt is rubbing on three stuck bottom belt rollers and four bottom belt rollers have the bearings worn out and the rollers are rubbing metal to metal and are warm to the touch. These bottom belt rollers are gobbled out with loose coal, coal fines mixed with rock. The accumulations around the seven bad bottom belt rollers is powder dry and the rollers are warm to the touch. Four of these rollers are in a row and the other three are in a row.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II--Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			D. Number of Persons Affected:			
Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	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 04/27/2005	B. Time (24 Hr. Clock) 0945
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Section III--Termination Action

17. Action to Terminate
 Terminated due to the bad bottom conveyor belt rollers being replaced.

18. Terminated	A. Date Mo Da Yr 04/27/2005	B. Time (24 Hr. Clock) 1040
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Sign 	23. AR Number 	

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

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5/02

Section I—Violation Data

1. Date Mo Da Yr 04/27/2005	2. Time (24 Hr. Clock) 0810	3. Citation/ Order Number 7097742
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Combustible materials in the form of loose coal and coal fines mixed with rock is allowed to accumulate the #4 conveyor belt drive and take-up. The accumulations are under the head drive and take-up for a distance of 40 feet. The accumulations measured 6 to 12 inches deep by 24 to 34 inches wide. The bottom conveyor belt is also running in the accumulations for a distance of 8 feet in length.

See Continuation Form (MSHA Form 7000-3a)

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

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

16. Termination Due	A. Date Mo Da Yr 04/27/2005	B. Time (24 Hr. Clock) 1010
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Section III—Termination Action

17. Action to Terminate Terminated due to the accumulations being cleaned up and the area rock dusted.

18. Terminated	A. Date Mo Da Yr 04/27/2005	B. Time (24 Hr. Clock) 1010
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Sign (1)		23. AR Number 565

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 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.

upl
5/02

Mine Citation/Order

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

1 1 MAY 2005

Section I—Violation Data	
1. Date Mo Da Yr 04/27/2005	2. Time (24 Hr. Clock) 1130
3. Citation/ Order Number 7097743	
4. Served To Brad Hamrick	
5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	
7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice	
8a. Written Notice (103g) <input type="checkbox"/>	

It is obvious that the preshift examination of the #2, #3 and #4 conveyor belts are not adequate. The conditions observed and listed on citations #7097737, #7097738, #7097739, #7097740, #7097741 and #7097742 issued this date were observed and should have been identified by a prudent examiner and corrective action taken. The preshift book maintained on the surface has the entry of "clear" listed for each of the belts for the past 30 preshift examinations. There could not be any evidence that any examinations have been conducted along the off side of any of the conveyor belt drive insulations found during today's inspection. Termination shall require a review of the preshift inspection requirements being made with all persons involved.

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

10. Gravity:

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

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

C. Significant and Substantial: Yes No

D. Number of Persons Affected: 001

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 04/28/2005 B. Time (24 Hr. Clock) 0800

Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 21. Primary or Mill

22. Signature [Signature] 23. AR Number [6]

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

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5/02

Mine Citation/Order
Continuation

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

11 MAY 2005

K1

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 04/27/2005 Mo Da Yr	3. Citation/ Order Number 7097743 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

Section II—Justification for Action

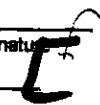
Terminated due to Bill Currence (Mine Foreman) going over the requirements of conducting a pre-shift examination of the mine, with all of the Foreman's and mine examiner's on all shift's.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signature 	12. Date Mo Da Yr 05/02/2005	13. Time (24 Hr. Clock) 0600

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

Wep
5/10/05

Mine Citation/Order

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

17 MAY 2005  *MT*

Section I--Violation Data			
1. Date Mo Da Yr 05/02/2005	2. Time (24 Hr. Clock) 0706	3. Citation/ Order Number	7096478
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The #3 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The sanding device's on this mantrip will not provide sand to the wheels and track for traction purpose's. This mine has several grade's and the track ranges from dry to wet. This condition will cause the mantrip to become out of control and also cause derailment which poses a hazard to the 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 75.1725(a)
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Section II--Inspector's Evaluation

10. Gravity:					
A. Injury or Illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or Illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 006		

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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 0715
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Section III--Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device's storage compartment and filling with dry sand. The sanding device will now provide sand to the wheel's and track for

18. Terminated	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 0715
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Section IV--Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number	4054745	21. Primary or Mill	
22. Sign	[Signature]			23. AR Number	[6]

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

Wpl
5/03

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 05/02/2005	3. Citation/ Order Number 7096478
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Continuation of 17. Action to Terminate
traction.

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 E01	10. Event Number 4054745		
11. Sig [6]	AR Number] [6]	12. Date Mo Da Yr 05/02/2005	13. Time (24 Hr. Clock) 0706

Mine Citation/Order

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

7 MAY 2005



X1.

Section I—Violation Data

1. Date Mo Da Yr 05/02/2005	2. Time (24 Hr. Clock) 0712	3. Citation/ Order Number 7096479
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #C03 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The sanding device's on this mantrip will not provide sand to the wheels and track for traction purpose's. This mine has several grade's and the track ranges from dry to wet. This condition will cause the mantrip to become out of control and also cause derailment which poses a hazard to the 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 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>
	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	D. Number of Persons Affected: 006

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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 0715
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Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device's storage compartment and filling with dry sand. The sanding device will now provide sand to the wheel's and track.

18. Terminated	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 0715
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Sign I	23. AR Number [6]	

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

upl
5/10/03

Mine Citation/Order
Continuation

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

17 MAY 2005



X1.

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/02/2005	3. Citation/ Order Number 7096479 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
8. Condition Or Practice		
Reason	Change the mantrip no. from #C03 to #C02 in the condition and practice body of the citation.	
	Wrote #C03 in error.	

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signatur [Signature]	12. Date Mo Da Yr 05/02/2005	13. Time (24 Hr. Clock) 1257

Wpl
5/10/05

Mine Citation/Order

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

17 MAY 2005



X1.

Section I - Violation Data

1. Date Mo Da Yr 05/02/2005	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7096480
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #2/0 power cable that provides 480 VAC from the # 5 belt head power box to the D #1 box at #25 block of #4 mains (which is approximately 750 of power cable) is not insulated adequately and fully protected. The insulation has worn away on four previous splices which exposes the inner energized power leads: (1) Inner insulated leads are exposed through a opening of 1/2 of an inch wide all of the way around the cable. (2) Inner insulated leads are exposed through a opening of 3/8 of an inch wide all of the way around the cable. (3) Inner insulated leads are exposed through a opening of 1/2 of an inch wide all of the way around the cable. (4) Inner insulated leads are exposed through a opening of 1 inch wide all of the way around the cable. This power cable is sloppy wet and is hanging over the track where miner's travel under or along side of the power cable and 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 75.517
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Section II - Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 1120
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Section III - Termination Action

17. Action to Terminate Terminated due to the power cable being insulated adequately and fully protected in all four location's

18. Terminated	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 1000
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Sign		23. AR Number

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

Upt
5/03

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 05/02/2005	3. Citation/ Order Number 7096480
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice

miner's can easily come into contact with the exposed inner insulated energized leads.

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 E01	10. Event Number 4054745	
11. Sign [Signature]	12. Date Mo Da Yr 05/02/2005	13. Time (24 Hr. Clock) 1000

Mine Citation/Order

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

17 MAY 2005

X1.

Section I--Violation Data

1. Date Mo Da Yr 05/02/2005	2. Time (24 Hr. Clock) 0814	3. Citation/ Order Number 7096481
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The high voltage power line cable located at no. 22 block is not guarded and the cable measured from 60 inches to 65 inches from the mine floor. Personnel doors are located in this line of crosscuts. This is a previously rock dusted crosscut and the foot prints indicates that miners regularly travel through this crosscut.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.807
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/03/2005	B. Time (24 Hr. Clock) 0200
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Sig		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.

WJL
5/03

Mine Citation/Order
Continuation

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

17 MAY 2005

MSHA 71

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 05/02/2005	Mo Da Yr	3. Citation/ Order Number 7096481 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE	7. Mine ID 46-08791		

Section II—Justification for Action

Terminated due to the high voltage power line being guarded at the #22 block on the mains.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	11. Signature [6 JL6]	12. Date Mo Da Yr 05/05/2005	13. Time (24 Hr. Clock) 0740
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WPL
5/10/06



Section I—Violation Data

1. Date Mo Da Yr 05/03/2005	2. Time (24 Hr. Clock) 0830	3. Citation/ Order Number 7096482
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #4 Fletcher roof bolting machine serial no. 2004096, Approval no. 25B-1021 being operated on the 2-Right 003-0 MMU working section is not maintained in a safe operating condition. The tram lever for the operator side of the roof bolting machine is sticking in the tram position in both directions which causes the operator side of the roof bolting machine to continue tramping. This tram lever does not self center when the operator releases the tram lever. The operator was tramping the roof bolting machine in the #5 face entry when I observed the roof bolting machine suddenly swing to the right side. The mine operator immediately removed the #4 Fletcher roof bolting machine from service.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 05/03/2005 B. Time (24 Hr. Clock) 1035

Section III—Termination Action

17. Action to Terminate Terminated due to the pin that holds the control levers on the #4 Fletcher roof bolting machine being repaired and the tram levers will now self center without sticking when tested.

18. Terminated A. Date Mo Da Yr 05/03/2005 B. Time (24 Hr. Clock) 1035

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 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.

Wpd
5/05

Mine Citation/Order

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

MAY 2005



11

Section I—Violation Data

1. Date Mo Da Yr 05/02/2005	2. Time (24 Hr. Clock) 0700	3. Citation/ Order Number 7097229
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #CO1 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The sanding device's on this mantrip will not provide sand to the wheels and track for traction purpose's. This mine has several grade's and the track ranges from dry to wet. This condition will cause the mantrip to become out of control and also cause derailment which poses a hazard to the 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 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:	A. Injury or Illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>
	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	D. Number of Persons Affected: 006

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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 0726
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Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device's storage compartment and filling with dry sand.

18. Terminated	A. Date Mo Da Yr 05/02/2005	B. Time (24 Hr. Clock) 0726
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

upd
5/10/03

Mine Citation/Order

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

17 MAY 2005

Section I—Violation Data

1. Date Mo Da Yr 05/03/2005	2. Time (24 Hr. Clock) 1420	3. Citation/ Order Number 7097805
4. Served To James Scott Mine Foreman		5. Operator GMS Mine Repair and Maintance, Inc.
6. Mine SAGO MINE		7. Mine ID 46-08791 MVK (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The mine operator failed to complete the 7000-1 that was sent to msha on the accident that occurred on 04/09/2005, at 9:00 am. The mine name and the company name was not entered on the 7000-1 form. This form was received by msha on 04/25/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input checked="" type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 50.20(a)
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Section II—Inspector's Evaluation

10. Gravity:

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

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

C. Significant and Substantial: Yes No

D. Number of Persons Affected: 001

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 05/09/2005 B. Time (24 Hr. Clock) 0800

Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 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.

WJL
5/10/06

Mine Citation/Order
Continuation

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

MAY 2005 

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 05/03/2005	3. Citation/ Order Number 7097805 - 01
4. Served To James Scott Mine Foreman		5. Operator GMS MINE REPAIR	
6. Mine SAGO MINE		7. Mine ID 46-08791	(Contractor) MVK

Section II—Justification for Action

Terminated due to the operator sending a completed 7000-1 form for the accident that occurred on 04/09/2005 at 9:00 am. The completed form was received at the MSHA office on 05/04/2005.

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 checked="" type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature [Signature]	AR Number 306	12. Date Mo Da Yr 05/10/2005	13. Time (24 Hr. Clock) 1100

Wpl
5/11

Mine Citation/Order

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

18 MAY 2005

Section I—Violation Data

1. Date Mo Da Yr 05/04/2005	2. Time (24 Hr. Clock) 0705	3. Citation/ Order Number 7097806
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #7 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The sanding device's on this mantrip will not provide sand to the wheels and track for traction purpose's. The sanding device storage container's are plugged up with wet sand and will not function. This mine has several grade's and the track ranges from dry to wet. When the sanding devices are not maintained in a operational condition the mantrip can become out of control which can cause derailment.

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 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 006		

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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/04/2005	B. Time (24 Hr. Clock) 0715
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Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device's storage container's and refilling with dry sand. The sanding device will now provide sand to the wheel's and track.

18. Terminated	A. Date Mo Da Yr 05/04/2005	B. Time (24 Hr. Clock) 0715
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

Wpl
5/05

Mine Citation/Order

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

18 MAY 2005



Section I—Violation Data

1. Date Mo Da Yr 05/04/2005	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7097807
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #1 locomotive which is used to transport supplies in and out of the mine is not maintained in a safe operating condition. The sanding device's on this locomotive will not provide sand to the wheels and track for traction purpose's. Two of the sanding device storage container's are plugged up with wet sand and will not function. This mine has several grade's and the track ranges from dry to wet. When the sanding devices are not maintained in a operational condition the locomotive can become out of control which can cause derailment.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 002		
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 05/04/2005	B. Time (24 Hr. Clock) 1000
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Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device's storage container's and refilling with dry sand and also two of the sanding device's were provided with hose's to supply sand to		
18. Terminated	A. Date Mo Da Yr 05/04/2005	B. Time (24 Hr. Clock) 1000

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

Wpl
5/05

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 05/04/2005	3. Citation/ Order Number 7097807
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Continuation of 17. Action to Terminate

the track and wheels. The sanding device will now provide sand to the wheel's and track.

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 E01	10. Event Number 4054745		
11. Signature [6]	PAR Number [356]	12. Date Mo Da Yr 05/04/2005	13. Time (24 Hr. Clock) 0800

Mine Citation/Order

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

18 MAY 2005



Section I-Violation Data

1. Date Mo Da Yr 05/04/2005	2. Time (24 Hr. Clock) 0600	3. Citation/ Order Number 7097808
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Based on the results of an MSHA full shift noise sample taken on 4/20/2005, the continuous mining machine operator (036 occupation) working on the 001-0 MMU received a permissible exposure level dose of 268%. This exceeds the permissible exposure level of 100% plus error factor (Of 132%). This machine was a Joy model 14CM15 serial no. C11430.

The machine operator was not wearing a hearing protector. A hearing protector must be provided and worn by the miner operating the continuous mining machine until the exposure is reduced to or below the permissible exposure level.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 62.130(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: 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"/>
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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"/>
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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 05/04/2005	B. Time (24 Hr. Clock) 0610
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Section III-Termination Action

17. Action to Terminate Terminated due to the (036 occupation) on the 001-0 MMU being retrained in the requirements of the hearing conservation program and the wearing of a hearing protector.

18. Terminated	A. Date Mo Da Yr 05/04/2005	B. Time (24 Hr. Clock) 0610
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Section IV-Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

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5/06

18 MAY 2005

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 05/04/2005	2. Time (24 Hr. Clock) 0615	3. Citation/ Order Number 7097809
4. Served To James Scott Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The operator failed to provide a record to indicate that the required testing, inspecting and maintenance is being conducted on the SR-100 Self Contained Self Rescuers which are provided for the 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 75.1714-3(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: 005

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 05/04/2005	B. Time (24 Hr. Clock) 0630
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Section III--Termination Action

17. Action to Terminate Terminated due to SAGO Mine safety director testing, inspecting the SR-100 Self Contained Self Rescuers and recording the results in a record book for the GMS Mine Repair and Maintenance, Inc.

18. Terminated	A. Date Mo Da Yr 05/04/2005	B. Time (24 Hr. Clock) 0630
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input type="checkbox"/> <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/04/2005	3. Citation/ Order Number 7097809
4. Served To James Scott Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Continuation of 17. Action to Terminate
contracting company.

Section III—Subsequent Action Taken

See Continuation Form

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 E01	10. Event Number 4054745		
11. Signature [Signature]	AR Number	12. Date Mo Da Yr 05/04/2005	13. Time (24 Hr. Clock) 0615

Mine Citation/Order
Continuation

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

18 MAY 2005



Section I—Subsequent Action/Continuation Date

1. Subsequent Action <input checked="" type="checkbox"/>	1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 05/04/2005	Mo Da Yr	3. Citation/ Order Number 7097809 - 01
4. Served To James Scott Mine Foreman				5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)
6. Mine SAGO MINE				7. Mine ID 46-08791

Section II—Justification for Action

Change From To
5. Operator ANKER WEST VIRGINIA MINING COMPANY INC GMS Mine Repair and Maintenance, Inc.

Reason
Issued to the wrong operator in error

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	11. Signature [Signature]	11. AR Number [Number]	12. Date Mo Da Yr 05/04/2005	13. Time (24 Hr. Clock) 1200
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5/10/05

Mine Citation/Order

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

18 MAY 2005



Section I - Violation Data

1. Date Mo Da Yr 05/04/2005	2. Time (24 Hr. Clock) 0830	3. Citation/ Order Number 7097810
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Combustible material in the form of a coating of float coal dust is allowed to accumulate on previously rock dusted surfaces of the mine floor and ribs at the following locations: Starting at the No.1 conveyor belt tailpiece which is located at No.23 block and extends outby for approximately 210 feet in length in the No.4 and No.5 entry's including the joining crosscuts. This area of the mine ranges from damp to wet.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>	
14. Initial Action			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 05/04/2005	B. Time (24 Hr. Clock) 1030
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Section III - Termination Action

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

Section IV - Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]		

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

Wpl
5/5/05

Mine Citation/Order
Continuation

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

18 MAY 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) 05/04/2005		3. Citation/Order Number 7097810 - 01	
4. Served To Bill Currence Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE			7. Mine ID 46-08791		

Section II—Justification for Action

Terminated due to the area being covered with a coating of rock dust.
Which diluted the combustible content.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	11. Signature [Signature]	AR Number [Number]	12. Date Mo Da Yr 05/05/2005	13. Time (24 Hr. Clock) 0820
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5/06*

Mine Citation/Order

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

19 MAY 2005



Section I—Violation Data		
1. Date Mo Da Yr 05/05/2005	2. Time (24 Hr. Clock) 0715	3. Citation/ Order Number 7097811
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #4 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The sanding device's on this mantrip will not provide sand to the wheels and track for traction purpose's. One sanding device storage container's is plugged up with wet sand and will not function and the other three are empty of sand. This mine has several grade's and the track ranges from dry to wet. When the sanding devices are not maintained in a operational condition the mantrip can become out of control which can cause derailment.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 006		
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 05/05/2005	B. Time (24 Hr. Clock) 0725
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Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device's storage container's and filling all storage container's with dry sand. The sanding device will now provide sand to the wheel's and

18. Terminated	A. Date Mo Da Yr 05/05/2005	B. Time (24 Hr. Clock) 0725
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Section IV—Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054745	21. Primary or Mill
22. Signature <i>[Signature]</i>		23. AR Number <i>[Signature]</i>	

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

*up
5/06*

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action	1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr	3. Citation/Order Number	7097811
4. Served To	Bill Currence Mine Foreman			5. Operator	ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine	SAGO MINE			7. Mine ID	46-08791 (Contractor)

Section II--Justification for Action

Continuation of 17. Action to Terminate track.

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	E01	10. Event Number	4054745		
11. Signature	[Signature]	12. Date	Mo Da Yr	13. Time (24 Hr. Clock)	0715

Mine Citation/Order

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

2005



Section I - Violation Data			
1. Date Mo Da Yr 05/10/2005	2. Time (24 Hr. Clock) 0600	3. Citation/ Order Number 7097804	
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID 46-08791	(Contractor)
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

Based on the results of a rock dust survey taken on 04/29/2005, on the 2-Right 003-0 MMU section is non-compliant. The lab results indicates that the 1-A-1 sample collected at 20 feet outby spad no. 3663 which is 0+00 located in the no. 9 Intake entry is 49.9% incombustible, 1-A-2 sample located at 0+00 in the no. 8 intake entry is 50.5% incombustible, 1-A-4 sample located at 0+00 in the no. 6 intake entry is 62.5% incombustible and 1-A-5 sample located at 0+00 in the no. 5 intake entry is 59.4% incombustible. The minimum incombustible content allowed in the Intake entry's is 65%. The mine does not have a means to mechanically apply rock dust to the outby areas of the mine, also the mine liberates around 100,000 cubic feet of methane in 24 hours. This is a notice that all areas of the mine shall be maintained in compliance with the 30 CFR, part 75.403.

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 75.403
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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: 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 05/10/2005	B. Time (24 Hr. Clock) 0800
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Section III - Termination Action

17. Action to Terminate Terminated due to the cited areas being covered with a coating of rock dust.

18. Terminated	A. Date Mo Da Yr 05/10/2005	B. Time (24 Hr. Clock) 1015
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature		23. AR Number [6]

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

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Section I—Violation Data

1. Date Mo Da Yr 05/10/2005	2. Time (24 Hr. Clock) 0610	3. Citation/ Order Number 7097812
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA 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 operator failed to submit a valid respirable dust sample for the Bi-monthly sampling cycle for February - March on the 001-0 MMU section. The designated area sampling point I.D.9010 for the Return - roof bolter on the 001-0 mechanized mining unit as identified in advisory no. 0026 dated April 07, 2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input checked="" type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.208 70.208
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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 Insurance (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 05/10/2005	B. Time (24 Hr. Clock) 0615
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Section III—Termination Action

17. Action to Terminate		Terminated due to no action required by the operator as the sampling cycle can only be satisfied during the established sampling cycle.	
18. Terminated	A. Date Mo Da Yr 05/10/2005	B. Time (24 Hr. Clock) 0615	

Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or MII
22. Signature		23. AR Number

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small 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.

WPL
5/11

Mine Citation/Order
Continuation

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

3 JUN 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) 05/10/2005	3. Citation/Order Number 7097812 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Charge	From	To
9. C. Part/Section	75.208	70.208

Reason Accidentally hit 5 and should have hit 0 when issuing.

Issued under the wrong section of the 30 CFR in error.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature [Signature]	AR Number 316	12. Date Mo Da Yr 05/11/2005	13. Time (24 Hr. Clock) 1426

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5/12*

3 JUN 2005

Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 05/20/2005	2. Time (24 Hr. Clock) 1110	3. Citation/ Order Number 7097823
4. Served To John Travise - Shift Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The mine operator failed to submit five valid respirable dust samples from the (036) designated occupation for the Bi-monthly sampling cycle March - April on the 003-0 mechanized mining unit section. The designated occupation sampling point I.D. 003-0 Designated occupation 036, continuous mining machine as identified in advisory no. 0027 dated May 09, 2005. Samples that were submitted are the following no.50773198, no.50773203, no.50773152 contaminated and no.50752709.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input type="checkbox"/> Other <input checked="" type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 70.207(a)
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Section II - Inspector's Evaluation

10. Gravity:	A. Injury or Illness (has) (is): No Likelihood <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
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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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/20/2005	B. Time (24 Hr. Clock) 1115
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Section III - Termination Action

17. Action to Terminate Terminated due to no action required by the operator as the sampling cycle can only be satisfied during the established sampling cycle.

18. Terminated	A. Date Mo Da Yr 05/20/2005	B. Time (24 Hr. Clock) 1115
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Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	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 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.

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Mine Citation/Order
Continuation

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

JUN 2005

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 05/20/2005	3. Citation/Order Number 7097823 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change	From	To
1. Issue Date	05/20/2005	05/19/2005

Reason Issued citation date as 05/20/2005 in error.

Issued the citation on the date of 05/20/2005 and it should have been issued on 05/19/2005.

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 E01	10. Event Number 4054745		
11. Signature [Signature]	11. AR Number [AR Number]	12. Date Mo Da Yr 05/23/2005	13. Time (24 Hr. Clock) 1315

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5/24

Section I--Violation Data

1. Date Mo Da Yr 05/19/2005	2. Time (24 Hr. Clock) 1145	3. Citation/ Order Number 7097824
4. Served To John Travise - Shift Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #4 motor charging station located at the #2 conveyor belt head drive is not provided with a fire suppression system. The #4 motor charger is energized at the time this condition was found. The mine operator immediately removed the #4 motor charger from service until a operational fire suppression system is provided.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/20/2005	B. Time (24 Hr. Clock) 0400
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

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8 JUN 2005

Mine Citation/Order Continuation

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

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Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/19/2005	3. Citation/Order Number 7097824 - 01
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4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)
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6. Mine SAGO MINE	7. Mine ID 46-08791
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Section II--Justification for Action

Terminated due to the #4 motor charger being removed from service by removing the trailing cable plug from the trailing cable and recording in the weekly electrical record book as the #4 motor charger out of service.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745
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11. Signature <i>[Handwritten signature]</i>	AR Number 306	12. Date Mo Da Yr 05/23/2005	13. Time (24 Hr. Clock) 0940
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5/24

Mine Citation/Order

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

3 JUN 2005



Section I—Violation Data

1. Date Mo Da Yr 05/20/2005	2. Time (24 Hr. Clock) 0105	3. Citation/ Order Number 7097826
4. Served To John Travise - Shift Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The rib is not adequately supported or otherwise controlled to protect a person from the hazards related to the fall of ribs on the main line haulage. Located one block inby station 3763 at block 42. The rib was loose, gapping and separated from the solid rib. The rock had broken away from the right rib in the track heading, this rock measured 10 feet long, 3 1/2 feet high and is gapping open from 1/2 of a inch to 2 1/2 inches. In the cross-cut of the same block there is a second rock separated from the rib 1 to 2 inches, measuring 8 feet long and 6 feet wide. This main line haulage is the primary walkway for all the miners to travel to the mains section MMU 001-0 and 002-0. Both of these rocks appear as if it will fall with out warning. Management danger this area off so miners will not be exposed.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>	
14. Initial Action			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 05/20/2005	B. Time (24 Hr. Clock) 1200
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Section III—Termination Action

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

Section IV—Automated System Data


19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature <i>[Signature]</i>		23. AR Number <i>[6]</i>

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

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5/31*

Mine Citation/Order
Continuation

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

JUN 2005 

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 05/20/2005	Mo Da Yr	3. Citation/ Order Number 7097826 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE	7. Mine ID 46-08791		

Section II—Justification for Action

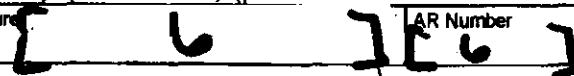
Extended due to the area being cribbed off by five cribs being built and the #52 block crosscut being dangered off. The mine operator has ordered seven arches to install at the #52 block. Additional time is granted for the mine operator to receive the materials, arches and to install the seven arches.

See Continuation Form

Section III—Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 05/27/2005	B. Time (24 Hr. Clock) 0800	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature 	AR Number	12. Date Mo Da Yr 05/23/2005	13. Time (24 Hr. Clock) 1100

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JUN 2005

Mine Citation/Order Continuation

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

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Section I-Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/20/2005	3. Citation/Order Number 7097826 - 02
4. Served To John Travise - Shift Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II-Justification for Action

Change	From	To
8. Condition Or Practice		

Reason Add the following modification to the body of the condition and practice. Change the location of the citation from one block inby spad station no. 3763 at block 42 to just outby spad station no. 3882 at no. 52 block.

Issued at the wrong spad number and also the wrong block number in error.

See Continuation Form

Section III-Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature <i>[Handwritten signature]</i>	AR Number	12. Date Mo Da Yr 05/23/2005	13. Time (24 Hr. Clock) 1110

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/20/2005	3. Citation/ Order Number 7097826 - 03
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to arches being installed in the #6 track entry on the outby side of #52 block and 2 arches being installed on the inby side of the #52 block. The miners are protected from the rock deteriorating from the mine roof and rib's as they travel in and out of the mine at this location by these arches.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature 	AR Number 116	12. Date Mo Da Yr 05/31/2005	13. Time (24 Hr. Clock) 0830

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Mine Citation/Order

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

15 JUN 2005 JUN 2005



Section I—Violation Data

1. Date Mo Da Yr 05/31/2005	2. Time (24 Hr. Clock) 0700	3. Citation/ Order Number 7097833 7097833
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

A light coating of float coal dust is allowed to accumulate on previously rock dusted surfaces of the mine floor and rib's in the no.3 entry and crosscuts. This no.3 entry run's parallel with the no.3 conveyor belt which is located in the no.4 entry. The float coal dust start's at the no.3 conveyor belt head drive and extends inby for approximately 1500 feet. The float coal dust ranges from dry to damp to wet and ranges from light gray to dark gray in color.

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 75.400
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Section II—Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one)			
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>
12. Type of Action	104(a)	13. Type of Issuance (check one)	
		Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/> Safeguard <input type="checkbox"/>
14. Initial Action		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 05/31/2005	B. Time (24 Hr. Clock) 1100
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature		23. AR Number

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

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Mine Citation/Order
Continuation

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

15 JUN 2005 *X7.*

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 05/31/2005	3. Citation/ Order Number	7097833 - 01
4. Served To Bill Currence Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE			7. Mine ID 46-08791	

Section II—Justification for Action

Terminated due to the cited area of the mine floor and rib's in the #3 entry being covered with a heavy coating of rock dust.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection	E01	10. Event Number	4054745
11. Signature	<i>[Signature]</i>	AR Number	<i>[Signature]</i>
12. Date	Mo Da Yr 06/02/2005	13. Time (24 Hr. Clock)	1145

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Mine Citation/Order

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

~~8 JUN 2005~~
9 JUN 2005

Section I--Violation Data

1. Date Mo Da Yr 05/31/2005	2. Time (24 Hr. Clock) 0825	3. Citation/ Order Number 7097834
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The air lock doors located at #49 block is not maintained in a useable condition. The structure of the air lock door on the track side at #49 block is damaged and these doors are open and can not be closed due to the damage. The mine operator is going to build a stopping in place of this set doors and move the air lock doors closer to the section.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.333(d)(3)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 05/31/2005	B. Time (24 Hr. Clock) 1200
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 05/31/2005	3. Citation/Order Number 7097834 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the air lock doors at #49 block being moved inby to #59 block and a permanent ventilation control (stopping) being built in the crosscut between #6 and #7 entry at #49 block.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature L b	AR Number 366	12. Date Mo Da Yr 06/02/2005	13. Time (24 Hr. Clock) 0635

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Mine Citation/Order

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

X1.

Section I—Violation Data

1. Date Mo Da Yr 06/02/2005	2. Time (24 Hr. Clock) 0725	3. Citation/ Order Number 7097836
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The pre-shift examination for the #3 scoop charging station and scoop supply haulroad is inadequate in that the following conditions were observed by this inspector and should have been recognized by any prudent mine examiner given the responsibility of conducting a mine examination to detect hazards at their earliest possible stages. (1) The #3 scoop battery charging station was found by this inspector in the #7 intake entry at #58 block crosscut between the #6 entry (secondary escape way) and #7 intake entry. (2) The #3 scoop charger is energized and charging a set of scoop batteries which is not ventilated directly to a return air course. (3) This #3 scoop charging station is ventilated with the main intake air that travels directly to the 001-0 & 002-0 mmu working super section and this intake air is used for face ventilation purposes. (4) The #3 scoop battery

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 checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input type="checkbox"/>	D. High <input checked="" type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(d)(2) ()		13. Type of issuance (check one)			
		Citation <input type="checkbox"/>		Order <input checked="" type="checkbox"/>	
14. Initial Action		E. Citation/ Order Number		F. Dated	
A. Citation <input type="checkbox"/>		B. Order <input checked="" type="checkbox"/>		C. Safeguard <input type="checkbox"/>	
D. Written Notice <input type="checkbox"/>		7097827		Mo Da Yr 05/20/2005	

15. Area or Equipment The #3 scoop charging station located in the #7 Intake entry at #58 block which is along the scoop supply haulroad.

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		
Terminated due to the 002-0 mmu section Foreman Rick Bragg calling out the condition that he detected on his on-shift examination to Bill Currence Mine Foreman and the conditions were recorded		
18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
	06/02/2005	1300

Section IV—Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number	4054745	21. Primary or Mill
22. Signature			23. AR Number	
[Signature]			24033	

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) 06/02/2005	Mo Da Yr	3. Citation/ Order Number 7097836
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Continuation of 6. Condition or Practice

charging station is not provided with a operational fire suppression system. (5) No evidence could be found by this inspector to indicate that a pre-shift examination was conducted for the #3 scoop charging station. (6) This #3 scoop charging station is located along the #7 intake entry which is also the scoop supply haulroad and this haulroad is regularly traveled by the miners. A pre-shift examination report was called out by John Travise, received by [6] at 6:00 A.M. on 06/02/2005 as no hazards observed. John Travise has engaged in aggravated conduct by his failure to record and take action on a known hazard. This violation is an unwarrantable failure to comply with a mandatory standard.

Note: order no. 7097835 has been issued in conjunction with order.

Continuation of 17. Action to Terminate

in the pre-shift and on-shift examination record book.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature [6]	AR Number [6]	12. Date Mo Da Yr 06/02/2005	13. Time (24 Hr. Clock) 0725

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 06/02/2005	3. Citation/Order Number 7097836 - 01
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID (Contractor) 46-08791	

Section II—Justification for Action

Change	From	To
12. Type of Action1	104(d)(2)	104(d)(1)
Reason	Issued under the wrong type of action in error.	

Issued under the wrong type of action in error.

Section III—Subsequent Action Taken See Continuation Form

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

9. Type of Inspection E01	10. Event Number 4054745		
11. Signature [Signature]	AR Number [Signature]	12. Date Mo Da Yr 06/07/2005	13. Time (24 Hr. Clock) 0355

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Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 06/02/2005	Mo Da Yr	3. Citation/ Order Number 7097836 - 02
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE	7. Mine ID 46-08791		

Section II--Justification for Action

Change	From	To
14. Initial Action	Order	Citation
Reason	Failed to modify line #14 from box (B) Order to box (A) Citation when line #12 was modified.	
14. E. Citation/Order Number	7097827	7097825
Reason	Failed to modify line #14, E from Order #7097827 to Citation #7097825 when line #12 was modified.	

Missed modifying line no. 14, Initial Action from box (B) Order to box (A) Citation and line #14, E from Order #7097827 to Citation #7097825 when line no.12, Type of Action was modified.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054745	
11. Signature [Signature]	12. Date Mo Da Yr 06/09/2005	13. Time (24 Hr. Clock) 1520

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Mine Citation/Order

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

28 JUN 2005



Section I--Violation Data

1. Date Mo Da Yr 06/14/2005	2. Time (24 Hr. Clock) 0605	3. Citation/ Order Number 7097924
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #CO2 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The sanding device's on this mantrip will not provide sand to the wheels and track for traction purpose's. One sanding device storage container is plugged up with wet sand and will not function and three of the sand storage container's are empty of sand. This mine has several grade's and the track ranges from dry to wet. When the sanding devices are not maintained in a operational condition the mantrip can become out of control which can cause a accident and derailment.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II--Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input checked="" type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
	C. Significant and Substantial: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			D. Number of Persons Affected: 006	
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 06/14/2005	B. Time (24 Hr. Clock) 0730
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Section III--Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device storage container and all of the sand storage container's being refill with dry sand. The sanding device will now provide sand to

18. Terminated	A. Date Mo Da Yr 06/14/2005	B. Time (24 Hr. Clock) 0730
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3a, Rev. 10/2004. In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input type="checkbox"/> Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 06/14/2005	3. Citation/ Order Number 7097924
4. Served To Bill Currence Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Continuation of 17. Action to Terminate

the wheel's and track for traction purpose's.

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 E01	10. Event Number 4054745		
11. Signature [6]	AR Number 263	12. Date Mo Da Yr 06/14/2005	13. Time (24 Hr. Clock) 0605

Mine Citation/Order

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

25 JUN 2005

Section I--Violation Data		
1. Date Mo Da Yr 06/14/2005	2. Time (24 Hr. Clock) 0645	3. Citation/ Order Number 7097842
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #2 locomotive which is used to transport supplies in and out of the mine is not maintained in a safe operating condition. The sanding device's on this locomotive will not provide sand to the wheels and track for traction purpose's. One of the sanding device's storage container's are plugged up with wet sand and will not function and one sanding device is not provided with a sand supply hose to direct the sand to the wheel and track. Both of these non-functional sanding device's are located on the off side of this #2 locomotive. This mine has several grade's and the track ranges from dry to wet. When the sanding devices are not maintained in a operational condition the locomotive can become out of control which can cause a accident.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 06/14/2005 B. Time (24 Hr. Clock) 0715

Section III--Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from one sanding device's storage container's and refilling with dry sand and also one of the sanding device's was provided with a hose to supply sand to the

18. Terminated A. Date Mo Da Yr 06/14/2005 B. Time (24 Hr. Clock) 1000

Section IV--Automated System Data

19. Type of Inspection (activity code) F01 20. Event Number 4054745 21. Primary or Mill
22. Signal 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.

WPC
6/21

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 06/14/2005	3. Citation/ Order Number	7097842
4. Served To Bill Currence Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

Continuation of 1i. Action to Terminate

track and wheels. The sanding device will now provide sand to the wheel's and track.

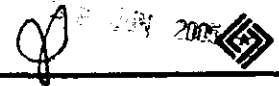
See Continuation Form

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	E01	10. Event Number	4054745
11. Signature		AR Number	JC63
12. Date	Mo Da Yr	13. Time (24 Hr. Clock)	0645
	06/14/2005		



Section I—Violation Data

1. Date Mo Da Yr 06/14/2005	2. Time (24 Hr. Clock) 0600	3. Citation/ Order Number 7097843
4. Served To Bill Currence Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #CO1 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The sanding device's on this mantrip will not provide sand to the wheels and track for traction purpose's. The sanding device storage container's are plugged up with wet sand and will not function. This mine has several grade's and the track ranges from dry to wet. When the sanding devices are not maintained in a operational condition the mantrip can become out of control which can cause a accident and derailment.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 006		
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 06/14/2005	B. Time (24 Hr. Clock) 0615
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Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sanding device's storage container's and refilling with dry sand. The sanding device will now provide sand to the wheel's and track.

18. Terminated	A. Date Mo Da Yr 06/14/2005	B. Time (24 Hr. Clock) 0615
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054745	21. Primary or Mill
22. Signature I G I		23. AR Number [6]

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

WJL
6/14/05

Mine Citation/Order

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

13 JUL 2005



Section I—Violation Data

1. Date Mo Da Yr 06/28/2005	2. Time (24 Hr. Clock) 0835	3. Citation/ Order Number 7148268
4. Served To Johnny Stemple	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Two compressed gas cylinders, (acetylene and oxygen), tanks were secured, with hemp rope, to the energized No. 2 battery charger located in the surface supply yard.

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 77.208(d)
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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 06/28/2005 B. Time (24 Hr. Clock) 0840

Section III—Termination Action

17. Action to Terminate The gas cylinders were removed from the area and secured in a safe manner.

18. Terminated A. Date Mo Da Yr 06/28/2005 B. Time (24 Hr. Clock) 0840

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054745 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.

2005
7-1-5

26 JUL 2005  *Y1*

Section I—Violation Data

1. Date Mo Da Yr 07/12/2005	2. Time (24 Hr. Clock) 0830	3. Citation/ Order Number 7097942
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #3 Fletcher roof bolting machine Model DDO-15, serial no. 82105/2004320, Approval no. 2G-3715A being operated on the 2-Left mains, 003 MMU working section is not maintained in a safe operating condition. A high pressure hydraulic hose to the right side bolter head rotation and both high pressure hydraulic hose's to the left side bolter head rotation have numerous broken steel wire's braids. These hose's are located within a few inches of the operators head and face during normal roof bolting activities. Mine management removed the machine from service immediately. The failure of any one of these weakened hydraulic hose's is reasonably likely to spray the operator with hot hydraulic oil under high pressure (2500 psi). Condition is obvious and should have been detected by a prudent pre-operational check. Both operators are exposed.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:					
A. Injury or Illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 002		
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 07/12/2005	B. Time (24 Hr. Clock) 0930
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Section III—Termination Action

17. Action to Terminate Terminated due to the hydraulic hose's being removed from the roof bolting machine and replaced with new hose's

18. Terminated	A. Date Mo Da Yr 07/12/2005	B. Time (24 Hr. Clock) 0930
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Section IV—Automated System Data

19. Type of Inspection (activity code)	F01	20. Event Number 4054749	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.

WJH
7/14

Section I--Violation Data

1. Date Mo Da Yr 07/12/2005	2. Time (24 Hr. Clock) 0950	3. Citation/ Order Number 7097943
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The fire suppression system of the Joy 14CM15 Remote control continuous mining machine serial no. JM5574, Company #2 being operated on the 2-Left 003 MMU working section is not properly maintained. When the system was activated water would only spray from 1 of the 10 surface sprays provided. This machine uses combustible hydraulic oil. This is a remote controlled mining machine that is operated in extended cuts. The approved ventilation requires that this system be tested daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1107-16(b)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 07/12/2005	B. Time (24 Hr. Clock) 1150
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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)	20. Event Number 4054749	21. Primary or Mill
R01		
22. Signature [Signature]	23. AR Number [6]	

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

WJL
7/14

Mine Citation/Order
Continuation

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

26 JUL 2005

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/12/2005 Mo Da Yr	3. Citation/ Order Number 7097943 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the fire suppression system being cleaned on the #2 mining machine and the system will now provide proper protection:

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Sign [Signature] 6	12. Date Mo Da Yr 07/13/2005	13. Time (24 Hr. Clock) 0855

Wpt
7/14

Mine Citation/Order

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

12 6 JUL 2005

71

Section I--Violation Data

1. Date Mo Da Yr 07/12/2005	2. Time (24 Hr. Clock) 0940	3. Citation/ Order Number 7097944
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The fire suppression system of the Joy 14CM15 Remote control continuous mining machine serial no. JM5530, Company #1 being operated on the 2-Left 003 MMU working section is not properly maintained. When the system was activated water would only spray from 3 of the 10 surface sprays provided. This machine uses combustible hydraulic oil. This is a remote controlled mining machine that is operated in extended cuts. The approved ventilation requires that this system be tested daily.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1107-16(b)
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Section II--Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>
	C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	D. Number of Persons Affected: 001

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/12/2005	B. Time (24 Hr. Clock) 1140
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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)	20. Event Number 4054749	21. Primary or Mill
22. Signature I 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 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

up 7/14

Mine Citation/Order
Continuation

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

26 JUL 2005  Y1

Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/12/2005 Mo Da Yr	3. Citation/ Order Number 7097944 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

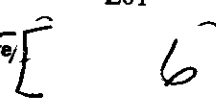
Terminated due to the fire suppression system being cleaned on the #1 continuous mining machine and the system will now provide proper protection.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature 	AR Number 63	12. Date Mo Da Yr 07/13/2005	13. Time (24 Hr. Clock) 0720

Wpl
7/14

Mine Citation/Order

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

26 JUL 2005

Y1

Section I--Violation Data

1. Page	Mo Da Yr 07/12/2005	2. Time (24 Hr. Clock) 0945	3. Citation/Order Number 7097945
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice 8a. Written Notice (103g) <input type="checkbox"/>			

The Joy 14CM15 continuous mining machine serial no. JM5530, Company #1 being operated on the 003 MMU working section is not maintained in a permissible condition. The following conditions were found (1) The right rear area light has an opening in excess of ,005 of an inch under the access lid. (2) The emergency stop button located on the operator's side of the mining machine will not de-energize the power source when the stop button is activated.

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 75.503
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 07/12/2005 B. Time (24 Hr. Clock) 1145

Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 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.

WJL
7/14

Mine Citation/Order
Continuation

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

26 JUL 2005  71

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/12/2005 Mo Da Yr	3. Citation/ Order Number 7097945 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

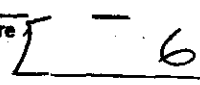
Terminated due to the opening in the area light being closed and the emergency stop button being repaired, the emergency stop will now properly stop the machine.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature 	12. Date 07/13/2005 Mo Da Yr	13. Time (24 Hr. Clock) 0725

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Section I--Violation Data

1. Date Mo Da Yr 07/12/2005	2. Time (24 Hr. Clock) 0835	3. Citation/ Order Number 7097946
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #6 power cable that provides 575 VAC to the #3 scoop battery charger is not hung to prevent the power cable from coming into contact with combustible material's. The power cable is laying on the mine floor for approximately 70 feet in length just outby SS3951 located in the #1 return entry.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			D. Number of Persons Affected:			
Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>		001		
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input 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 07/12/2005	B. Time (24 Hr. Clock) 0838
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Section III--Termination Action

17. Action to Terminate Terminated due to the #3 scoop charger power cable being hung to where the cable does not contact combustible materials, roof, or ribs.

18. Terminated	A. Date Mo Da Yr 07/12/2005	B. Time (24 Hr. Clock) 0840
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	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

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Section I--Violation Data

1. Date Mo Da Yr 07/12/2005	2. Time (24 Hr. Clock) 0837	3. Citation/ Order Number 7097947
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

No evidence could be found to indicate that a pre-shift examination was conducted for the day shift on 07/12/2005 for the haulroad leading to the scoop battery chargers and also including the #4 and #3 scoop battery charger station. Miners normally travel or work in these area's.

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

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>			
14. Initial Action			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 07/12/2005	B. Time (24 Hr. Clock) 0848
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Section III--Termination Action

17. Action to Terminate Terminated due to the section foreman conducted an on-shift examination in the cited area.

18. Terminated	A. Date Mo Da Yr 07/12/2005	B. Time (24 Hr. Clock) 0848
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or MII
22. Signature T G T		23. AR Number 562

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

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Mine Safety and Health Administration



Section I - Violation Data

1. Date Mo Da Yr 07/13/2005	2. Time (24 Hr. Clock) 0737	3. Citation/ Order Number 7097949
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #10 Stanco water pump located on the 2-Left, 003 MMU section is not clearly marked for identification to correspond with the circuit breaker that provides 575 VAC for this pump. The circuit breaker that the #10 Stanco water pump is plugged into is marked #2 shuttle car. The mine operator immediately removed the water pump from service.

See Continuation Form (MSHA Form 7000-3a)

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

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

15. Area or Equipment		
16. Termination Due		
A. Date Mo Da Yr 07/13/2005	B. Time (24 Hr. Clock) 0747	

Section III - Termination Action

17. Action to Terminate		
Terminated due to the #10 Stanco water pump located at on the 2-Left, 003 MMU section being clearly marked for identification to correspond with the circuit breaker that provides 575 VAC for this pump.		
18. Terminated		
A. Date Mo Da Yr 07/13/2005	B. Time (24 Hr. Clock) 0747	

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	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-PAIR (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 07/13/2005	2. Time (24 Hr. Clock) 0850	3. Citation/ Order Number 7097950
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice Ba. Written Notice (103g) <input type="checkbox"/>		

The #2, 14CM15 Joy continuous mining machine serial no. JM-5574 is not maintained in a permissible operating condition. The area light on the off side of the mining machine has an opening under the light access cover lid that is in excess of .005 of an inch. The mine operator immediately tightened the lid.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II - Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>			
14. Initial Action			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 07/13/2005	B. Time (24 Hr. Clock) 0900
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Section III - Termination Action

17. Action to Terminate	Terminated due to the area light access cover lid being tightened and the opening is now closed.	
18. Terminated	A. Date Mo Da Yr 07/13/2005	B. Time (24 Hr. Clock) 0900

Section IV - Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or MII
22. Sign [Signature]	23. AR Number [6]	

MSHA Form 7000-3, Mar 88 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 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

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X1

Section I--Violation Data		
1. Date Mo Da Yr 07/13/2005	2. Time (24 Hr. Clock) 0735	3. Citation/ Order Number 7097948
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The # 6 AWG trailing cable for the #10 Stanco water pump located on the 2-Left, 003 MMU working section is plugged into a circuit breaker that has the instantaneous setting range from 500 to 1000 amperes and the instantaneous setting is set on 750 amperes at the time of this inspection. The maximum allowable instantaneous setting for a #6 AWG trailing cable is 300 amperes. The mine operator immediately de-energized the trailing cable and disconnected the trailing cable from the circuit breaker.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.601-1
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Section II--Inspector's Evaluation

10. Gravity:

A. Injury or illness (has) (is): No Likelihood 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 07/13/2005 B. Time (24 Hr. Clock) 0745

Section III--Termination Action

17. Action to Terminate Terminated due to the trailing cable being connected to a circuit breaker that has the instantaneous setting set on 300 amperes.

18. Terminated A. Date Mo Da Yr 07/13/2005 B. Time (24 Hr. Clock) 0745

Section IV--Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 21. Primary or Mill

22. Signature [Signature] 23. AR Number [6]

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

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27 JUL 2005



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Mine Citation/Order

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

Section I--Violation Data

1. Date Mo Da Yr 07/13/2005	2. Time (24 Hr. Clock) 0830	3. Citation/ Order Number 7097951
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Joy 10SC32 shuttle car serial no. ET-16527, Approval no. 2G-3619A, Company #3 being operated on the 2-Left, 003 MMU is not maintained in a permissible condition. An opening in excess of .005 exist in the plane flange joint between the inspection cover and the operator's side tram motor.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 07/13/2005 B. Time (24 Hr. Clock) 1130

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) F01 20. Event Number 4054749 21. Primary or Mill

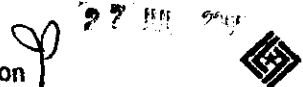
22. Signature [Signature] 23. AR Number [56]

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.

Copy 7/15

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/13/2005	3. Citation/Order Number 7097951 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID (Contractor) 46-08791	

Section II—Justification for Action

Terminated due to the opening on the #3 shuttle car tram motor being closed.

Section III—Subsequent Action Taken See Continuation Form

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature] 6	AR Number [6]	12. Date Mo Da Yr 07/15/2005	13. Time (24 Hr. Clock) 0735

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7/19*

Mine Citation/Order

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

275 918 X1

Section I--Violation Data

1. Date Mo Da Yr 07/13/2005	2. Time (24 Hr. Clock) 0840	3. Citation/ Order Number 7097952
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The PMS 10SC shuttle car serial no. 2007, Approval no. 2G-3936-0, Company #6 being operated on the 2-Left mains (003) MMU is not maintained in a permissible condition. (1) The conveyor start switch will hang up in the start position and not center. (2) The main contactor box is not secured to the machine and has slid out about 5 inches and is starting to place strain on the cables. The box appears the have had a chain around it at one time as a effort to keep the box in place how ever the chain is loose and dragging under the car.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/13/2005	B. Time (24 Hr. Clock) 1140
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Section III--Termination Action

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

Section IV--Automated System Data

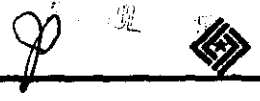
19. Type of Inspection (activity code)	E01	20. Event Number 4054749	21. Primary or Mill
22. Signature	6		23. AR Number [6]

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 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.

Wp
7/14

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) 07/13/2005 Mo Da Yr	3. Citation/ Order Number 7097952 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Terminated due to the #6 shuttle car conveyor switch being repaired and the main contactor box being slid back in place and secured to the frame of the shuttle car.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature 	AR Number [unclear]	12. Date 07/15/2005 Mo Da Yr	13. Time (24 Hr. Clock) 0740

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Section I--Violation Data

1. Date Mo Da Yr 07/13/2005	2. Time (24 Hr. Clock) 0845	3. Citation/ Order Number 7097953
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Joy 10SC32 shuttle car serial no. ET-16527, Approval no. 2G-3619A, Company #3 being operated on the 2-Left, (003) MMU section is not maintained in a permissible condition. An opening in excess of .005 of an inch exist in the plane flange joint between the main contactor box and the inspection cover lid of the main contactor box.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II--Inspector's Evaluation

10. Gravity:	A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
	B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
	C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001	

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/13/2005	B. Time (24 Hr. Clock) 0845
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Sign [Signature]	23. AR Number [6]	

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

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/13/2005	3. Citation/ Order Number 7097953 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
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8. Condition Or Practice

Reason Change the first sentence in the body of the citation from (The Joy 10SC32 shuttle car serial no. ET-16527, Approval no. 2G-3619A, Company #3 being operated on the 2-Left, (003) MMU section is not maintained in a permissible condition.)
Change to (The PMS 10SC shuttle car serial no. 2008, Approval no. 2G-3936-0, Company #5 being operated on the 2-Left, (003) MMU section is not maintained in a permissible condition.)

Issued using the identification numbers from the wrong shuttle car in error.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature L 6	AR Number [6]	12. Date Mo Da Yr 07/14/2005	13. Time (24 Hr. Clock) 1400

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Mine Citation/Order
Continuation

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

P 2 ? JUL 05

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/13/2005	3. Citation/ Order Number 7097953 - 02
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the opening on the #5 shuttle car main contactor box being closed.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature <i>[Signature]</i>	AR Number 6	12. Date Mo Da Yr 07/15/2005	13. Time (24 Hr. Clock) 0730

*Wpl
7/19*

Mine Citation/Order

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

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Section I—Violation Data

1. Date Mo Da Yr 07/13/2005	2. Time (24 Hr. Clock) 1015	3. Citation/ Order Number 7097954
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Fairchild scoop model 35C-WH, serial no. T3390327, Approval no. 2G-3599-2, Company #2 is not maintained in a permissible condition due to the following: (1) Batteries are not provided with lid locks. (2) Cable connector's are not provided with locks. (3) Batteries are not maintained due to 1 inch of mud, water, dirt is allowed to accumulate on the top surface's of both batteries and 3 battery cap's are popped up. (4) The emergency stop switch located on the battery side of the operators deck has fallen off and is hanging loose by the power wire's.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 07/13/2005 B. Time (24 Hr. Clock) 1215

Section III—Termination Action

17. Action to Terminate

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

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 21. Primary or Mill

22. Signature [Signature] 23. AR Number [6]

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

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/13/2005 Mo Da Yr	3. Citation/ Order Number 7097954 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Terminated due to the #2 Fairchild scoop (1) Battery locks being replaced, (2) Cable locks being replaced. (3) Batteries being cleaned by washing with water. (4) The emergency stop switch being restored to a operational condition.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature <i>[Signature]</i>	AB Number <i>[Signature]</i>	12. Date Mo Da Yr 07/15/2005	13. Time (24 Hr. Clock) 0800

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Section I--Violation Data

1. Date Mo Da Yr 07/15/2005	2. Time (24 Hr. Clock) 0710	3. Citation/ Order Number 7097956
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The trailing cable for the #11, 575 VAC water pump located on the 2-Left, (003) MMU working section is not insulated adequately and fully protected. The inner insulated power leads are exposed through a cut in the outer jacket that measured 1/8 of an inch wide by 1 1/2 inches long. The insulation is also cut on the inner insulated power leads which expose the bare power leads. The mine floor is sloppy wet. The mine operator removed the #11 water pump from service immediately.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.517
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/15/2005	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) FN1	20. Event Number 4054749	21. Primary or Mill
22. Signature L 6	23. AR Number 567	

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

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Mine Citation/Order
Continuation

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

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Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/15/2005	3. Citation/ Order Number 7097956 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action


Terminated due to the trailing cable for the #11 water pump being insulated adequately and fully protected.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature 	AR Number 7567	12. Date Mo Da Yr 07/18/2005	13. Time (24 Hr. Clock) 0645


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Mine Citation/Order

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

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Section I--Violation Data	
1. Date Mo Da Yr 07/15/2005	2. Time (24 Hr. Clock) 0830
3. Citation/ Order Number 7097957	
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)
8. Condition or Practice	
8a. Written Notice (103g) <input type="checkbox"/>	

The 2-Left, (003) MMU working section is not provided with a up to date escapeway map that is readily accessible to the miners on this section.

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

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/16/2005	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) R01	20. Event Number 4054749	21. Primary or Mill
22. Sign <i>[Signature]</i>	23. AR Number <i>[6]</i>	

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

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/15/2005	3. Citation/ Order Number 7097957 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to an up to date escapeway map being provided for the 2-Left, (003) MMU section. The section foreman went over the escapeway map with the crew.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature [Signature]	12. Date Mo Da Yr 07/18/2005	13. Time (24 Hr. Clock) 0640

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7/21

21

Section I--Violation Data

1. Date Mo Da Yr 07/15/2005	2. Time (24 Hr. Clock) 0900	3. Citation/ Order Number 7097958
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA 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 roof control plan is not being complied with at the 2 - Right track switch shelter hole along the main line track haulage. The coal and rock rib has deteriorated way for approximately 14 feet in length which leaves 3 permanently installed roof bolts in excess 4 feet from the rib. These roof bolts range from 5 feet to 6 1/2 feet from the rib.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.220(a)(1) 75.202a
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 07/15/2005	B. Time (24 Hr. Clock) 1100
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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)	20. Event Number 4054749	21. Primary or Mill
22. Signature L 6	23. AR Number L 6	

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

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Mine Citation/Order
Continuation

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

MSHA 21

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/15/2005	3. Citation/Order Number 7097958 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to 7 metal jacks being set along the rib at the 2-Right track switch to reduce the distance from the rib to the permanent roof support.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature L 6	12. Date Mo Da Yr 07/18/2005	13. Time (24 Hr. Clock) 0620

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/15/2005 Mo Da Yr	3. Citation/ Order Number 7097958 - 02
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.220(a)(1)	75.202(a)


Reason Issued under the section of the 30 CFR in error.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature / 	AR Number JL6J	12. Date 07/18/2005 Mo Da Yr	13. Time (24 Hr. Clock) 1430

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Mine Citation/Order

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

2 AUG 2005

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Section I--Violation Data

1. Date Mo Da Yr 07/18/2005	2. Time (24 Hr. Clock) 0735	3. Citation/ Order Number 7097959
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Combustible materials in the form of wooden crib blocks, wooden pallets, card board boxes, old hydraulic oil cans and plastic wrapping off of supplies is allowed to accumulate in the intake entry's. These accumulations start at #54 block along #4 conveyor belt and extend inby to the 2-Left, 003 MMU section. There have been 10 citation's issued for violations of section 75.400 at this mine since 01/09/2005.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

18. Termination Due	A. Date Mo Da Yr 07/20/2005	B. Time (24 Hr. Clock) 0600
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature L 6 I		23. AR Number L 6 I

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

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Mine Citation/Order Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/18/2005	3. Citation/Order Number 7097959 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the combustibile materials being cleaned from the cited area. The materials are being transported to the surface by track haulage.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature 	AR Number J. L. 6	12. Date Mo Da Yr 07/20/2005	13. Time (24 Hr. Clock) 1230

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Mine Citation/Order

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



Section I - Violation Data			
1. Date Mo Da Yr 07/18/2005	2. Time (24 Hr. Clock) 0745	3. Citation/ Order Number 7097960	
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The primary escapeway is not separated from the conveyor belt and track haulage entry's for its entire length, to and including the first connecting crosscut outby each loading point on the 2-Left (003) MMU section. The permanent ventilation controls (stoppings) are not maintained to serve their intended purpose of maintaining separation between these entry's. A hole exist in the stopping located at SS#3981 that measured 14 inches high by 29 inches long and A hole exist in the stopping located at SS#3980 that measured 12 inches high by 10 inches wide. These permanent ventilation controls are located at the tail of #4 conveyor belt.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			D. Number of Persons Affected:			
Yes <input type="checkbox"/>		No <input checked="" type="checkbox"/>		001		
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input 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 07/18/2005	B. Time (24 Hr. Clock) 0900
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Section III - Termination Action

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

Section IV - Automated System Data

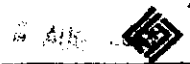
19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or MII
22. Signature L G I		23. AR Number L G I

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

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Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/18/2005	3. Citation/ Order Number 7097960 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II--Justification for Action

Terminated due to the holes in the permanent ventilation controls (stoppings) being closed and plastered.

Section III--Subsequent Action Taken

See Continuation Form

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature L 6	IR Number 316	12. Date Mo Da Yr 07/19/2005	13. Time (24 Hr. Clock) 1255

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Mine Citation/Order

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

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Section I--Violation Data

1. Date Mo Da Yr 07/18/2005	2. Time (24 Hr. Clock) 0825	3. Citation/ Order Number 7097961
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #3 Stanco water pump located along the track haulage, along #4 conveyor belt is not clearly marked for identification to correspond with the circuit breaker that this pump receives 575 VAC is connected. The #3 Stanco water pump is energized.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.904
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 07/18/2005	B. Time (24 Hr. Clock) 0840
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]		23. AR Number [67]

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

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Mine Citation/Order
Continuation

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

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/18/2005	3. Citation/Order Number 7097961 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID (Contractor) 46-08791	

Section II—Justification for Action

Terminated due to the circuit breaker providing 575 VAC for the #3 Stanco water pump being clearly marked for identification.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749
11. Signature 	12. Date Mo Da Yr 07/19/2005
13. Time (24 Hr. Clock) 1305	14. AR Number 6 767

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Mine Citation/Order

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

2 Aug 2005



Section I--Violation Data

1. Date Mo Da Yr 07/18/2005	2. Time (24 Hr. Clock) 0920	3. Citation/ Order Number 7097962
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #10 trailing cable for the #6 Stanco water pump located along the track haulage at #25 block along no.4 conveyor belt is plugged into a circuit breaker that has the instantaneous setting range from 480 to 1500 amperes and the instantaneous setting is set on 900 amperes at the time of this inspection. The maximum allowable instantaneous setting for a #10 trailing cable is 150 amperes. The mine operator immediately de-energized the trailing cable and disconnected the trailing cable from the circuit breaker.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.601-1
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/18/2005	B. Time (24 Hr. Clock) 0935
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Section III--Termination Action

17. Action to Terminate Terminated due to the #10 trailing cable for the #6 Stanco water pump being plugged into a circuit breaker that has the instantaneous setting set on 150 amperes.

18. Terminated	A. Date Mo Da Yr 07/18/2005	B. Time (24 Hr. Clock) 0935
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature L 6		23. AR Number L 6

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

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Mine Citation/Order

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Section I—Violation Data

1. Date Mo Da Yr 07/19/2005	2. Time (24 Hr. Clock) 0700	3. Citation/ Order Number 7097963
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The 110 VAC power cable for the head light on the operators side of the Joy 14CM15 continuous mining machine serial no. JM-5574, Company no. 2 is not insulated adequately and fully protected. The outer jacket of the power cable is cut and the inner energized power leads are exposed through an opening that measured 1/2 of an inch wide by 1 inch long. There have been 9 citations issued for violations of section 75.517 at this mine since 05/24/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.517 75.503
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Section II—Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/19/2005	B. Time (24 Hr. Clock) 0715
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Section III—Termination Action

17. Action to Terminate		
Terminated due to the head light power cable on the Joy 14CM15 continuous mining machine serial no. JM-5574 being insulated adequately and fully protected.		
18. Terminated	A. Date Mo Da Yr 07/19/2005	B. Time (24 Hr. Clock) 0715

Section IV—Automated System Data


19. Type of Inspection (activity code)	R01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]	23. AR Number L6J		

MSHA Form 7000-3, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rules, sends agencies' responses 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, 400 3rd Street, SW, MSB 2120, Washington, DC 20519. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/19/2005 Mo Da Yr	3. Citation/ Order Number 7097963 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.517	75.503

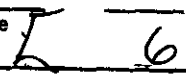
Reason Issued under the wrong section of the 30 CFR in error.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature 	12. Date Mo Da Yr 07/21/2005	13. Time (24 Hr. Clock) 1017

Handwritten note:
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Mine Citation/Order

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

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Section I--Violation Data

1. Date Mo Da Yr 07/19/2005	2. Time (24 Hr. Clock) 0705	3. Citation/ Order Number 7098104
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The 995 VAC trailing cable for the Joy 14CM15 continuous mining machine serial no. JM-5574, Company no. 2 being operated on the 2-Left, (003) MMU working section is not insulated adequately and fully protected. The insulation has worn away from a previous splice leaving the inner energized power leads exposed through an opening that measured 1/2 of an inch wide by 2 inches long. This section is sloppy wet. There have been 10 citations issued for violations of section 75.517 at this mine since 05/24/2005.

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 75.517
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 07/19/2005	B. Time (24 Hr. Clock) 0730
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Section III--Termination Action

17. Action to Terminate Terminated due to the trailing cable for the Joy 14CM15 continuous mining machine serial no. JM-5574, company no.2 being insulated adequately and fully protected.		
18. Terminated	A. Date Mo Da Yr 07/19/2005	B. Time (24 Hr. Clock) 0730

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	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 activities, you may call (888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

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Mine Citation/Order

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Section I—Violation Data

1. Date Mo Da Yr 07/19/2005	2. Time (24 Hr. Clock) 0805	3. Citation/ Order Number 7098105
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The 110 VAC power cable for the area light on the operators side of the Joy 14CM15 continuous mining machine serial no. JM-5530, Approval no. 2G-4159A-00, Company no. 1 is not insulated adequately and fully protected. The outer jacket of the power cable is cut and the bare inner energized power leads are exposed through an opening that measured 1/2 of an inch wide by 1 inch long. This mine is sloppy wet. There have been 9 citations issued for violations of section 75.517 at this mine since 05/24/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.517
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Section II—Inspector's Evaluation

10. Gravity:

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

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

C. Significant and Substantial: Yes No

D. Number of Persons Affected: 001

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 07/19/2005 B. Time (24 Hr. Clock) 0830

Section III—Termination Action

17. Action to Terminate Terminated due to the area light power cable on the Joy 14CM15 continuous mining machine serial no. JM-5530 being insulated adequately and fully protected.

18. Terminated A. Date Mo Da Yr 07/19/2005 B. Time (24 Hr. Clock) 0830

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 21. Primary or Mill

22. Signat [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.

up 1/21

Mine Citation/Order
Continuation

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

2 AUG 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 07/19/2005	3. Citation/Order Number 7098105 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.517	75.503

Reason Issued under the wrong section of the 30 CFR in error.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [Number]	12. Date Mo Da Yr 07/21/2005	13. Time (24 Hr. Clock) 1021

*mc
up
7/22*

Mine Citation/Order

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

3 AUG 2005



Section I--Violation Data

1. Date Mo Da Yr 07/20/2005	2. Time (24 Hr. Clock) 0630	3. Citation/ Order Number 7098106
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The clearance space's along the track haulage at #52 block along #4 conveyor belt is obstructed in that four 6 inch diameter by 20 feet in length water lines are laying in the 24 inch clearance space (walkway) and three of the same size water lines are laying in the 12 inch clearance space. The track mounted mantrips are barely missing the water lines as they are used to transport miners in and out of the mine. The mine operator immediately removed the water lines from the clearance space.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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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"/>
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 Debilitating <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 314(b) 104-a		13. Type of Issuance (check one)	
		Citation <input checked="" type="checkbox"/>	
		Order <input type="checkbox"/>	
		Safeguard <input checked="" type="checkbox"/>	
14. Initial Action		E. Citation/ Order Number	F. Dated
A. Citation <input type="checkbox"/>		7097926	Mo Da Yr 6/14/05
B. Order <input checked="" 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 07/20/2005	B. Time (24 Hr. Clock) 0635
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Section III--Termination Action

17. Action to Terminate Terminated due to the 6 inch water line being removed from the clearance space's (walkway) at #52 block along the #4 conveyor belt.

18. Terminated	A. Date Mo Da Yr 07/20/2005	B. Time (24 Hr. Clock) 0635
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Section IV--Automated System Data

19. Type of Inspection (activity code)	20. Event Number 4054749	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.

MIC
8/02

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original issue) Mo Da Yr 07/20/2005	3. Citation/Order Number 7098106 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID (Contractor) 46-08791	

Section II—Justification for Action

Change	From	To
12. Type of Action1 Reason Entered 314(b) in this citation in error.	314(b)	104(a)
13. Type of issuance Reason Entered safeguard in this citation in error.	Safeguard	Citation
14. Initial Action Reason Missed entering safeguard in this citation in error.		Safeguard
14. E. Citation/Order Number Reason Missed entering the safeguard no. in this citation in error.		7097926
14. F. Initial Action Dated Reason Missed entering the safeguard date in this citation in error.		06/14/2005

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 E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 07/28/2005	13. Time (24 Hr. Clock) 0600

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Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 07/20/2005	3. Citation/Order Number 7098106 - 02
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
10. A. Injury or Illness		Reasonably Likely
Reason	Missed checking box for Reasonably Likely, Line 10-A.	
10. B. Injury Expected		Lost Workdays
Reason	Missed checking box for lost workdays or restricted duty, line 10-B.	
10. C. Significant and Substantial	No Selected	Yes
Reason	Missed checking box for Yes, line 10-C.	
10. D. Persons Affected	0	1
Reason	Missed checking box for number of persons affected, Line 10-D.	
11. Negligence		Moderate
Reason	Missed checking box C for Moderate on Line 11.	

Missed checking these items when I modified the type of action on this citation from 314(b) to 104(a) on 07/28/2005.

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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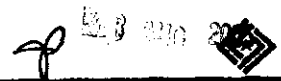
Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature <i>[Signature]</i>	AR Number <i>[6]</i>	12. Date Mo Da Yr 08/01/2005	13. Time (24 Hr. Clock) 1400

MC 8/02

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 07/20/2005	2. Time (24 Hr. Clock) 0655	3. Citation/ Order Number 7098107
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Loose coal and coal fines mixed with rock is allowed to accumulated at the coal feeder located on the 2-Left, (003) MMU working section. The accumulations measured 26 feet in length by 6 to 9 feet wide by 6 to 18 inches deep and range from damp to wet. The accumulations have been generated from the conveyor chain on the Joy shuttle car dragging the material back as the shuttle car dump's on the coal feeder. There have been 11 citations issued for violations of section 75.400 at this mine since 01/09/2005.

See Continuation Form (MSHA Form 7000-3a)

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

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

16. Termination Due	A. Date Mo Da Yr 07/20/2005	B. Time (24 Hr. Clock) 0730
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Section III--Termination Action

17. Action to Terminate Terminated due to the accumulations being cleaned up by scooping the area.

18. Terminated	A. Date Mo Da Yr 07/20/2005	B. Time (24 Hr. Clock) 0730
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Section IV--Automated System Data

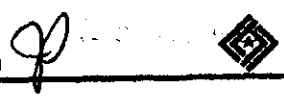
19. Type of Inspection (activity code)	E01	20. Event Number 4054749	21. Primary or Mill
22. Sign	6		23. AR Number [6]

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.

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Mine Citation/Order

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



Section I—Violation Data		
1. Date Mo Da Yr 08/01/2005	2. Time (24 Hr. Clock) 0340	3. Citation/ Order Number 7098123
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #8 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. The four sanding devices which are located on this mantrip will not provide sand to the wheels and track for traction purpose's. All four of the sanding device's storage container's are plugged up with wet sand. The sanding device's will not provide sand to the wheel's and track for traction purpose's. This mine has several grade's and the track ranges from wet to dry.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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Section II—Inspector's Evaluation						
10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			D. Number of Persons Affected:			
Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	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	
A. Citation <input type="checkbox"/>		B. Order <input type="checkbox"/>	C. Safeguard <input checked="" type="checkbox"/>	D. Written Notice <input type="checkbox"/>	7097925	
					Mo Da Yr 06/14/2005	
15. Area or Equipment						

16. Termination Due		
A. Date Mo Da Yr 08/01/2005	B. Time (24 Hr. Clock) 0350	

Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sand storage containers and the sand storage containers being filled with dry sand. The sanding device's will now function as required.

18. Terminated	A. Date Mo Da Yr 08/01/2005	B. Time (24 Hr. Clock) 0350
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Section IV—Automated System Data		
19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill
E01	4054749	
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.

ME
8/02

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/01/2005	3. Citation/Order Number 7098123 - 01
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Change	From	To
2. Issue Time Reason Did not use the 24 hour clock when issuing.	03:40	15:40
16. B. Termination Due Time Reason Did not use the 24 hour clock when issuing.	03:50	15:50
18. B. Terminated Time Reason Did not use the 24 hour clock when issuing.	03:50	15:50

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature [Signature]	12. Date Mo Da Yr 08/01/2005	13. Time (24 Hr. Clock) 2058

mc
8/02

Mine Citation/Order

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

19 AUG 2005



Section I—Violation Data

1. Date Mo Da Yr 08/01/2005	2. Time (24 Hr. Clock) 1645	3. Citation/ Order Number 7098124
4. Served To Lonnie Short		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Firechild scoop model 35C-WH, Serial no. T339-346, Approval no. 2G - 3599-2, company #6 is not maintained in a safe operating condition, in that the following condition was found. [1] The batteries were not provided with lid locks.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II—Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/01/2005	B. Time (24 Hr. Clock) 1650
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Section III—Termination Action

17. Action to Terminate The batteries lids were chained, and they are now secure.

18. Terminated	A. Date Mo Da Yr 08/01/2005	B. Time (24 Hr. Clock) 1650
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

Wpd
8/03

Mine Citation/Order

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

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Section I—Violation Data		
1. Date Mo Da Yr 08/01/2005	2. Time (24 Hr. Clock) 1707	3. Citation/ Order Number 7098125
4. Served To Lonnie Short		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Fairchild scoop model 35C-WH, serial no. T339-324, Approval no. 2G-3599-2, Company #1 is not maintained in a permissible condition in that the following conditions were found: (1) The batteries are not provided with lid locks. (2) The emergency stop switch (panic bar) located on the battery side of the operators deck has fallen off and is hanging loose by the power wire's. There have been 16 citation issued for violation's of section 75.503 at this mine since 02/17/2004.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.503
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Section II—Inspector's Evaluation

10. Gravity:			
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001	

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/01/2005	B. Time (24 Hr. Clock) 1725
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Section III—Termination Action

17. Action to Terminate Terminated due to the #1 scoop battery lids being chained, and they are now secured. The emergency stop switch (panic bar) being put back in it's holding bracket.

18. Terminated	A. Date Mo Da Yr 08/01/2005	B. Time (24 Hr. Clock) 1725
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Section IV—Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054749	21. Primary or Mill
22. Signature	[Signature]		23. AR Number [6]

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

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8/105

Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 08/01/2005 Mo Da Yr	3. Citation/ Order Number 7098125 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change From To
8. Condition Or Practice

Reason Remove the following from the body of the condition and practice of this citation. The emergency stop switch (panic bar) located on the battery side of the operator's deck has fallen off and is hanging loose by the power wire's.

Entered the statement about the emergency stop switch (panic bar) in this permissibility violation in error. Citation no. 7098129 has been issued for the condition of the of the emergency stop switch (panic bar) on the #1 Fairchild scoop.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	IR Number [6]	12. Date Mo Da Yr 08/03/2005	13. Time (24 Hr. Clock) 1235

4/8/05

Mine Citation/Order

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

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Section I - Violation Data			
1. Date Mo Da Yr 08/02/2005	2. Time (24 Hr. Clock) 1445	3. Citation/ Order Number	7098126
4. Served To Lonnie Short		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The #C01 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. Three of the four sanding devices which are located on this mantrip will not provide sand to the wheels and track for traction purpose's. The tube's that direct the location of the sand from the sanding device to the track rail is plugged up with wet sand. This mine has several grade's and the track ranges from wet to dry.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.1403
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Section II - Inspector's Evaluation								
10. Gravity:								
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>		
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>			
C. Significant and Substantial:			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001			
11. Negligence (check one)								
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>		C. Moderate <input checked="" type="checkbox"/>		D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action			104(a)	13. Type of Issuance (check one)				
				Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>	
14. Initial Action				E. Citation/ Order Number	7097925	F. Dated	Mo Da Yr 06/14/2005	
A. Citation <input type="checkbox"/>				B. Order <input type="checkbox"/>		C. Safeguard <input checked="" type="checkbox"/>		D. Written Notice <input type="checkbox"/>
15. Area or Equipment								

16. Termination Due	A. Date Mo Da Yr 08/02/2005	B. Time (24 Hr. Clock)	1945
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Section III - Termination Action			
17. Action to Terminate			
Terminated due to the wet sand being cleaned from the tube's that provide sand to the track rail's. The sanding device's will now function as required.			
18. Terminated	A. Date Mo Da Yr 08/02/2005	B. Time (24 Hr. Clock)	1945

Section IV - Automated System Data			
19. Type of Inspection (activity code)	20. Event Number	21. Primary or Mill	
001	4054749		
22. Signat	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 20415. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Wep
8/05

Mine Citation/Order

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

27

Section I—Violation Data

1. Date Mo Da Yr 08/02/2005	2. Time (24 Hr. Clock) 1622	3. Citation/ Order Number 7098127
4. Served To Lonnie Short		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The track haulage along the #6 conveyor belt is not maintained in a safe condition in that the following condition was found. Water is allowed to accumulate in a dip in the track haulage entry 1 block in by the #6 conveyor belt head drive. The water measured 8 inches to 14 1/2 inches deep from rib to rib for approximately 25 feet in length and ranges from 2 inches to 3 inches deep over the ball of the track rail's.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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Section II—Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>		C. Moderate <input checked="" type="checkbox"/>		D. High <input type="checkbox"/>
E. Reckless Disregard <input type="checkbox"/>						
12. Type of Action 104(a)			13. Type of Issuance (check one)			
			Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			E. Citation/ Order Number		F. Dated	
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input checked="" type="checkbox"/> D. Written Notice <input type="checkbox"/>			7097927		Mo Da Yr 06/14/2005	

15. Area or Equipment

18. Termination Due	A. Date Mo Da Yr 08/02/2005	B. Time (24 Hr. Clock) 2200
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [6]		23. AR Number [6]

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

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8/2/05

Mine Citation/Order
Continuation

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

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 08/02/2005	Mo Da Yr	3. Citation/ Order Number 7098127 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE	7. Mine ID 46-08791		

Section II—Justification for Action

Terminated due to the water being pumped from the track haulage entry in the cited area along the #6 conveyor belt.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 08/03/2005	13. Time (24 Hr. Clock) 1730

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8/03

Mine Citation/Order

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

19 AUG 2005  X7

Section I—Violation Data

1. Date Mo Da Yr 08/02/2005	2. Time (24 Hr. Clock) 0610	3. Citation/ Order Number 7098128
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved roof control plan is not being complied with on the 2-Left, 003 MMU working section in that the following conditions were found: (1) The #6 entry was mined from 21 feet to 21.75 wide for a distance of 24 feet in length starting at SS4065. (2) Six permanently installed roof bolts along the left rib in the #6 entry range from 51 inches to 66 inches from the rib. (3) The corner of the #6 to #7 crosscut at SS4065 in the #6 entry has rolled off leaving the permanently installed roof bolt at this corner 6 feet from the rib. (4) The #2 entry was mined from 20.75 wide to 22 feet wide for distance of 17 feet in length just inby SS4077. Five permanently installed roof bolts in a row in this area measured from 4.9 inches wide to 5.5 feet wide from bolt to bolt. (5) The #4 entry was mined from 20.75 feet wide to 23.5 feet wide for a distance of 17 feet in length

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:			
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>
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"/>
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 08/02/2005	B. Time (24 Hr. Clock) 1100
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Section III—Termination Action

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

Section IV—Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054749	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 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.

Wet 8/10/05

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) 08/02/2005	Mo Da Yr	3. Citation/ Order Number 7098128
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE	7. Mine ID 46-08791		(Contractor)

Section II—Justification for Action

Continuation of 8. Condition or Practice

just outby SS4091. A cutter has run along the right rib for approximately 50 feet in length. The cutter ranges from 2 inches to 10 inches deep by 12 inches to 48 inches wide by approximately 50 feet in length. This is the same area in the #4 entry where the entry was mined over the maximum 20 feet entry width provided in the approved roof control plan.

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 E01	10. Event Number 4054749		
11. Signature [Signature]	IR Number [6]	12. Date Mo Da Yr 08/02/2005	13. Time (24 Hr. Clock) 0610

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) 08/02/2005	Mo Da Yr	3. Citation/ Order Number 7098128 - 01
4. Served To Brad Hamrick			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to the entry's on the 2-Left, 003-0 MMU being narrowed down to 20 feet wide by installing Heintzmann alternative crib support's along the rib's in the cited areas on this section. Also roof bolt's were installed in the cited areas where the permanent roof bolt spacing's are beyond the maximum allowable distance provided in the approved roof control plan.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [E6]	12. Date Mo Da Yr 08/03/2005	13. Time (24 Hr. Clock) 1830

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Mine Citation/Order

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

19 AUG 2005



Sector I—Violation Data			
1. Date Mo Da Yr 08/01/2005	2. Time (24 Hr. Clock) 1710	3. Citation/ Order Number	7098129
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The Fairchild scoop model 35C-WH, serial no. T339-324, approval no. 2G-3599-2, company #1 is not maintained in a safe operating condition. The emergency stop switch (panic bar) located on the battery side of the operators deck has fallen off and is hanging loose by the power wire's.

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	75.523
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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 08/01/2005 B. Time (24 Hr. Clock) 1730

Section III—Termination Action

17. Action to Terminate Terminated due to the emergency stop switch (panic bar) being put back in it's holding bracket on the #1 Fairchild scoop. The panic bar will now function properly when tested.

18. Terminated A. Date Mo Da Yr 08/01/2005 B. Time (24 Hr. Clock) 1723

Section IV—Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 21. Primary or Mill

22. Signature [Signature] 23. AR Number [6]

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

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8/05

Mine Citation/Order

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

71

Section I--Violation Data		
1. Date Mo Da Yr 08/03/2005	2. Time (24 Hr. Clock) 1620	3. Citation/ Order Number 7098130
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #CO2 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. Three of the four sanding device's located on this mantrip will not provide sand to the wheels and track for traction purpose's. Three of the sanding device's storage containers are empty of sand. This mantrip was inspected just inby the portal after the mantrip operator received clearance from the dispatcher to travel under ground. The track haulage of this mine has several grade's and the track rail's range from wet to dry. The have been 8 citations issued for violation of section 75.1403 a this mine since 05/03/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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Section II--Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>					
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>			
14. Initial Action			E. Citation/ Order Number		F. Dated
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input checked="" type="checkbox"/> D. Written Notice <input type="checkbox"/>			7097925		Mo Da Yr 06/14/2005

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/03/2005	B. Time (24 Hr. Clock) 1630
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Section III--Termination Action

17. Action to Terminate Terminated due to all four of the sand storage containers being filled with dry sand. The sanding device's will now provide sand to the wheels and track for traction purpose's.

18. Terminated	A. Date Mo Da Yr 08/03/2005	B. Time (24 Hr. Clock) 1630
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Section IV--Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054749	21. Primary or MHI
22. Signature [Signature]			23. AR Number L6

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

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Mine Citation/Order

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

18 AUG 2005



Section I--Violation Data			
1. Date Mo Da Yr 08/03/2005	2. Time (24 Hr. Clock) 1915	3. Citation/ Order Number 7098131	
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The approved ventilation plan is not being complied with on the 1-Left, 006-0 MMU working section in that the air quantity in the last open crosscut is not being maintained to at least 9000 cubic feet per minute. When this inspector attempted to take a air reading in the last open crosscut between the #2 & #3 entry's the wheel on the approved and calibrated anemometer would not even turn.

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) 3256
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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: 002	
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 08/03/2005	B. Time (24 Hr. Clock) 1935
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Section III--Termination Action

17. Action to Terminate Terminated due to the check curtains and run through curtains being tighten. The ventilation was rechecked and the air quantity in the last line of open crosscuts is now 16,758 CFM.

18. Terminated	A. Date Mo Da Yr 08/03/2005	B. Time (24 Hr. Clock) 1935
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Section IV--Automated System Data

19. Type of Inspection (activity code)	FN1	20. Event Number 4054749	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 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, 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.

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8/05

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/03/2005	3. Citation/ Order Number 7098131 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.370(a)(1)	75.325(b)
Reason	Issued under the wrong section of the 30 CFR in error.	

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [62]	12. Date Mo Da Yr 08/04/2005	13. Time (24 Hr. Clock) 1230

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 08/08/2005	2. Time (24 Hr. Clock) 0605	3. Citation/ Order Number 7098132
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
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 #C01 mantrip which is used to transport miners in and out of the mine is not maintained in a safe operating condition. All of the four sanding devices which are located on this mantrip will not provide sand to the wheels and track for traction purpose's. Two of the sand storage containers are empty of sand and two of the sand storage containers are plugged up with wet sand. This mine has several grade's and the track ranges from wet to dry. There have been 9 citations issued for violations of section of 75.1403 at this mine since 05/03/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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Section II—Inspector's Evaluation

10. Gravity:

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

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

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

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

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

14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice E. Citation/Order Number 7097925 F. Dated Mo Da Yr 06/14/2005

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/08/2005	B. Time (24 Hr. Clock) 0620
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Section III—Termination Action

17. Action to Terminate Terminated due to the wet sand being cleaned from the sand storage containers and all four of the sand storage containers being filled with dry sand. The sanding device's will now function as required.

18. Terminated	A. Date Mo Da Yr 08/08/2005	B. Time (24 Hr. Clock) 0620
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Section IV—Automated System Data

19. Type of Inspection (activity code) 001	20. Event Number 4054749	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.

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Mine Citation/Order

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

24 AUG 2005



Section I—Violation Data

1. Date Mo Da Yr 08/08/2005	2. Time (24 Hr. Clock) 0725	3. Citation/ Order Number 7098133
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved ventilation plan is not being complied with on the 2-Left, 003-0 MMU working section in that the air quantity in the last open crosscut is not being maintained to at least 9000 cubic feet per minute. When this inspector attempted to take a air reading in the last open crosscut between the #2 & #3 entry's located one block inby SS4092, the wheel on the approved and calibrated anemometer would not even turn.

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) 75.325a
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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: 002
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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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/08/2005	B. Time (24 Hr. Clock) 0740
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Section III—Termination Action

17. Action to Terminate
Terminated due to the check curtains and run through curtains being tighten. The ventilation was rechecked and the air quantity in the last line of open crosscuts is now 15,029 CFM.

18. Terminated	A. Date Mo Da Yr 08/08/2005	B. Time (24 Hr. Clock) 0740
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

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Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 08/08/2005 Mo Da Yr	3. Citation/ Order Number 7098133 - 01
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Change	From	To
9. C. Part/Section	75.370(a)(1)	75.325(a)

Reason Issued under the wrong section of the 30 CFR in error.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [6]	AR Number [6]	12. Date Mo Da Yr 08/09/2005	13. Time (24 Hr. Clock) 0434

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Mine Citation/Order

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



Section I—Violation Data			
1. Date	Mo Da Yr	2. Time (24 Hr. Clock)	3. Citation/Order Number
	08/09/2005	0745	7098135
4. Served To		5. Operator	
Lonnie Short		ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine		7. Mine ID	(Contractor)
SAGO MINE		46-08791	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The fire suppression system of the Joy 14CM15 remote controlled continuous mining machine serial no. JM5581, company #4 being operated on the 1-Left, 006-0 MMU working section is not properly maintained. When the system was activated three of the 10 sprays located on the top surface of the continuous mining machine would not provide water to the top surfaces of the continuous mining machine for fire protection purposes. This machine uses combustible hydraulic oil. This is a remote controlled mining machine that is operated in extended cuts. The approved ventilation plan requires that this system be tested daily. There have been 11 citations issued for violations of section 75.1107-16(b) at this mine since 02/17/2005.

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
			75.1107-16(b)

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		13. Type of Issuance (check one)			
104(a)		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	B. Time (24 Hr. Clock)
	08/09/2005		0805

Section III—Termination Action

17. Action to Terminate Terminated due to the sprays being cleaned for the fire suppression system of the #2 Joy continuous mining machine.

18. Terminated	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)
	08/09/2005		0805

Section IV—Automated System Data

19. Type of Inspection (activity code)	FN1	20. Event Number	4054749	21. Primary or Mill
22. Signature	[Signature]			23. AR Number [6]

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

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 08/09/2005	2. Time (24 Hr. Clock) 0910	3. Citation/ Order Number 7098136
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		

8a. Written Notice (103g)

The trailing cable for the #7 PMS 10SC shuttle car serial no. 2009, Approval no. 2G-3936-0 being operated on the 1-Left, 006-0 MMU working section is not adequately insulated and fully protected. The outer jacket of the trailing cable has a cut through the outer insulating jacket that measured 1/8 of an inch wide by 3/4 of an inch long, which expose the inner insulated power leads. A inner insulated power lead also has the insulation cut for approximately 1/8 of an inch wide by 1/4 of an inch long which exposes the bare energized power leads that provide 575 VAC to this shuttle car. The mine floor is sloppy wet and the miners normally handle the trailing cables. There have been 10 citations issued for violations of section 75.517 at this mine since 05/24/2004.

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 75.517
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 08/09/2005	B. Time (24 Hr. Clock) 0945
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Section III--Termination Action

17. Action to Terminate Terminated due to the #7 shuttle car trailing cable being adequately insulated and fully protected.

18. Terminated	A. Date Mo Da Yr 08/09/2005	B. Time (24 Hr. Clock) 0945
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	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.

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Mine Citation/Order

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

7098137



Section I—Violation Data

1. Date Mo Da Yr 08/09/2005	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7098137
4. Served To Lonnie Short	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

An adequate supply of potable drinking water is not provided on the 1-Left, 006-0 MMU working section for drinking purposes. All such drinking water shall be carried, stored, and otherwise protected in sanitary containers.

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 75.1718
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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 08/09/2005	B. Time (24 Hr. Clock) 1500
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Section III—Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code)	20. Event Number 4054749	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.

WSP

Mine Citation/Order
Continuation

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

07 SEP 2005

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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/>	1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue)	Mo Da Yr 08/09/2005	3. Citation/ Order Number	7098137 - 01
4. Served To Brad Phillips			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE			7. Mine ID 46-08791		

Section II—Justification for Action

Terminated due to an adequate supply of drinking water being supplied on the (006-0) MMU working section.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection	E01	10. Event Number	4054749
11. Signature	[b]	AR Number	[6]
		12. Date	Mo Da Yr 08/30/2005
		13. Time (24 Hr. Clock)	0900

MC
9/07

09 SEP 2005

Mine Citation/Order

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



Section I--Violation Data		
1. Date Mo Da Yr 08/16/2005	2. Time (24 Hr. Clock) 1145	3. Citation/ Order Number 7098155
4. Served To Brad Phillips		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

A bar of an adequate length is not provided for taking down loose material on the (003) MMU working section. The bars that are provided on this section are not of a length and design that will allow the removal of loose material from a position that will not expose the person performing this work to injury from falling material. The mining height measured from 7 feet to 10 feet high on this section.

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 75.211(d)
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Section II--Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			D. Number of Persons Affected:			
Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>	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 08/17/2005	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code)	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

WPL 8/19

Mine Citation/Order
Continuation

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



X1

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/16/2005	3. Citation/Order Number 7098155 - 01
4. Served To Brad Phillips	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Terminated due to a bar of the proper length and design being provided on the 2-Left, (003) MMU section for the purpose of taking down loose material.

See Continuation Form

Section III—Subsequent Action Taken

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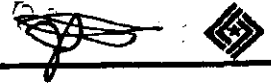
Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number 6	12. Date Mo Da Yr 08/30/2005	13. Time (24 Hr. Clock) 1310

MC
9/07

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 08/16/2005	2. Time (24 Hr. Clock) 0815	3. Citation/ Order Number 7098156
4. Served To Brad Phillips		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The primary escapeway for the (003) & (006) MMU sections is not being maintained in a safe condition to always assure safe passage of anyone, including disabled persons. The following conditions were observed by this inspector in the primary escapeway starting at the #3 conveyor belt and extends inby to where the mine roof screened area starts at Trubie Run. (1) The walkway is obstructed by concrete blocks, rock that has deteriorated and fallen from the mine roof which ranges from 6" to 15 inches deep. (2) The mine roof has deteriorated away from around the permanently installed fully grouted roof bolts at #9 block along the #3 conveyor belt, some roof bolt plates now range from 8" to 12" from the mine roof. (3) The walkway leading to the personnel door located at #16 block along the #3 conveyor belt is obstructed with rock, concrete blocks and wooden pallets. (4) 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 75.380(d)(1)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 09/01/2005 B. Time (24 Hr. Clock) 0800

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) R01 20. Event Number 4054749 21. Primary or MII

22. Signature [Signature] 23. AR Number [6]

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

Wep 8/19

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 08/16/2005	3. Citation/ Order Number	7098156
4. Served To Brad Phillips			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II--Justification for Action

Continuation of 8. Condition or Practice

walkway at the outby end of the tunnel liner located at #32 block is obstructed with mud and water that ranges from 10" to 18" deep. (5) loose rock is hanging from the mine roof in several locations of the travelway starting at the #3 conveyor belt head and extends inby to where the screening starts at Trubie Run.

Section III--Subsequent Action Taken

See Continuation Form

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	E01	10. Event Number	4054749
11. Signature	[Signature]	AR Number	[6]
12. Date	Mo Da Yr	13. Time (24 Hr. Clock)	
	08/16/2005		0815

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	3. Citation/Order Number	7098156 - 01
			08/16/2005		
4. Served To Brad Phillips			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

Additional time is granted to correct the listed conditions. It took longer to get the additional equipment to the mine site than expected. When the equipment was received at the mine site mechanical work had to be conducted on the equipment before it could be transported underground to start the project. The screening and cleaning of the primary escapeway is in process at this time. Citation is extended until 09/22/2005 and the amount of progress accomplished at that time will determine any further extensions.

Section III—Subsequent Action Taken

See Continuation Form

8. Extended To	A. Date	Mo Da Yr	B. Time (24 Hr. Clock)	0600	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
	09/22/2005						

Section IV—Inspection Data

9. Type of Inspection	E01	10. Event Number	4054749
11. Signature	[Signature]	AR Number	[6]
		12. Date	Mo Da Yr
		08/31/2005	
		13. Time (24 Hr. Clock)	1430

WPL
8/30/07

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/16/2005	3. Citation/Order Number 7098156 - 02
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II--Justification for Action

Extended due to 29 blocks out of 39 block of the mine roof has been screened in the primary escapeway. Approximately one to two blocks of screening is the average distance that the screening is being installed on the mine roof in the primary escapeway per day.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 10/21/2005	B. Time (24 Hr. Clock) 0600	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV--Inspection Data

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature [Signature]	12. Date Mo Da Yr 09/28/2005	13. Time (24 Hr. Clock) 0625

up 10/04

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/16/2005	3. Citation/ Order Number 7098156 - 03
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II--Justification for Action

Change From To

17. Action To Terminate

Reason Entered the wrong block numbers in the extension of this citation.

Modify extension of citation no.70989156-02 to read as 55 blocks out of 65 blocks.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature 	AR Number 7067	12. Date Mo Da Yr 09/28/2005	13. Time (24 Hr. Clock) 0628

Carl
9/10/04

Mine Citation/Order

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



Section I--Violation Data		
1. Date Mo Da Yr 08/16/2005	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7098157
4. Served To Brad Phillips		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The primary escapeway for the (003) & (006) MMU sections is not being maintained in a safe condition to always assure safe passage of anyone, including disabled persons. The following conditions were observed by this inspector in the primary escapeway starting at the tunnel liner located at Trubie Run. (1) Mud and water in the walkway for distance of 2 blocks starting at #37 block along the #3 conveyor belt which ranges from 8" to 26" deep. (2) Loose rock is hanging in several locations of the walkway starting at Trubie Run and extends inby to the (006) section. (3) The ramps that are provided for the miners to travel across the overcast in the escapeway located at the old 2-Right section are made of lumber which is wet, slick, obstructed with rock that has fallen from the mine roof and these ramps were installed on a step slope which makes it difficult for

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:

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

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

C. Significant and Substantial: Yes No

D. Number of Persons Affected: 001

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 09/01/2005 B. Time (24 Hr. Clock) 0800

Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 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.

Walt
10/19

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 08/16/2005	3. Citation/ Order Number	7098157
4. Served To Brad Phillips			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

Continuation of 8. Condition or Practice

miners that are not disabled to cross. (4) The travelway to the personnel door located at #14 block being obstructed with 18" to 30" of mud and rock. (5) A permanently installed roof bolt has the plate and bolt head broken off over the walkway located at #14 block along #4 conveyor belt. (6) The escapeway is not maintained travelable from just outby #18 block to just inby #19 block along the #4 conveyor belt due to excessive mud and water. (7) Loose rock is hanging just inby #26 block along the #4 conveyor belt that ranges from 3" thick by 5' long by 3" to 14" wide. (8) An excessive amount of mud and water that ranges from 10" to 24" deep has been allowed to accumulate in the travelway starting from #22 block along #4 conveyor belt and extends inby approximately 3 blocks inby the #6 conveyor belt which is the (006) MMU section conveyor belt. (9) Loose rocks hanging from the mine roof just inby #37 block that measured (1) 12" wide by 20" long by 4" thick, (2) measured 3' by 4' by 5" to 12" thick, (3) measured 5' by 3' by 3" to 12" thick. (10) The ramps that are provided for the miners to travel across the overcast located at the mouth of the (003) MMU section which are located at #51 block along #4 conveyor belt are made of lumber which is wet, slick, these ramps were installed on a step slope which makes it difficult for miners that are not disabled to cross.

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	E01	10. Event Number	4054749
11. Signature	<i>[Signature]</i>	AR Number	<i>[6]</i>
	6	12. Date Mo Da Yr	08/16/2005
		13. Time (24 Hr. Clock)	1000

Mine Citation/Order
Continuation

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

09 SEP 2005  XI

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/16/2005	3. Citation/ Order Number 7098157 - 01
4. Served To Brad Phillips	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Additional time is granted to correct the listed conditions. It took longer to get additional equipment to the mine site than expected. When the equipment was received at the mine site mechanical work had to be conducted on the equipment before it could be transported underground to start the project. The screening and cleaning of the primary escapeway is in process at this time. Citation is extended until 09/22/2005 and the amount of progress accomplished at that time will determine any further extensions.

Section III—Subsequent Action Taken

See Continuation Form

8. Extended To	A. Date Mo Da Yr 09/22/2005	B. Time (24 Hr. Clock) 0600	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature [Signature] 6	12. Date Mo Da Yr 08/31/2005	13. Time (24 Hr. Clock) 1435

Use
9/07

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 08/16/2005		3. Citation/Order Number 7098157 - 02	
4. Served To Carl Crumrine - Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II--Justification for Action

Extended due to 29 blocks of the mine roof has been screened in the primary escapeway. Approximately 1/2 to one block of screening is the average distance that the screening is being installed on the mine roof in the primary escapeway per day.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 10/21/2005	B. Time (24 Hr. Clock) 0600	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV--Inspection Data

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 09/28/2005	13. Time (24 Hr. Clock) 0630

lup
10/04



Section I--Violation Data

1. Date Mo Da Yr 08/22/2005	2. Time (24 Hr. Clock) 1115	3. Citation/ Order Number 7149367
4. Served To BRAD PHIPPS	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The current approved roof control plan for the 2 left working section, 003 mmu was not being complied with in that four of the eight entries was not cut less than 18 feet in width. These entries measured from 19 feet 1 inch to 20 feet in width and another measured 18 feet 11 inches.

Since August 8, 2005 this section has had two roof falls and a fall of roof which result in injury to a worker. On August 12, 2005 a change to the roof control plan for this section was submitted and approved to limit the widths to 18 feet.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.220(a)
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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 08/23/2005	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code)	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

WPL
9/10/07

Mine Citation/Order Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/22/2005	3. Citation/Order Number 7149367 - 01
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4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
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6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)
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Section II--Justification for Action

Terminated due to the entry's being narrowed to within 18 feet wide in the areas listed in the citation by setting timbers.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749
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11. Signature [Signature] 6	AR Number [6]	12. Date Mo Da Yr 09/20/2005	13. Time (24 Hr. Clock) 0735
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Wpl
9/20



Section I--Violation Data

1. Date Mo Da Yr 08/22/2005	2. Time (24 Hr. Clock) 1205	3. Citation/ Order Number 7149368
4. Served To BRAD PHIIIPS	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The left side roof bolter (Fletcher dual boom) on the 2-left working section, 003 mmu was not being maintained in a safe working condition. The hydraulic hoses, one hose on each drill head had broken brads. These pressure on these hoses are set at 2000 psi and the machine operator must be in close proximity the hoses went operation the machine.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II--Inspector's Evaluation

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/22/2005	B. Time (24 Hr. Clock) 1300
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Section III--Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [6] oc 8/22/05		23. AR Number [6]

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

Handwritten: 6/9/07

Mine Citation/Order
Continuation

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

29 SEP 2005



17.

Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 08/22/2005	3. Citation/ Order Number 7149368 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Terminated due to the damaged high pressure hydraulic hoses on both drill heads on the left side (Fletcher dual boom) roof bolter being replaced with new hoses.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [6]	AR Number [6]	12. Date Mo Da Yr 09/20/2005	13. Time (24 Hr. Clock) 0800

up
9/22

Mine Citation/Order

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



Section I—Violation Data			
1. Date Mo Da Yr 08/29/2005	2. Time (24 Hr. Clock) 0645	3. Citation/ Order Number	7098172
4. Served To Brad Phillips		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The no.1 coal conveyor belt is not being maintained in a safe operating condition. The bottom coal conveyor belt is allowed to run out of alignment, causing it to rub the carriage for the coal conveyor take-up .The metal on the carriage is hot to the touch and the coal conveyor belt is smoking. This take-up is located in the pit mouth and the area is damp, also the air is flowing to the surface.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1725(a)
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Section II—Inspector's Evaluation						
10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one)		A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
12. Type of Action		104(a)		13. Type of Issuance (check one)		
				Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action		A. Citation <input type="checkbox"/>		B. Order <input type="checkbox"/>		C. Safeguard <input type="checkbox"/>
		D. Written Notice <input type="checkbox"/>		E. Citation/ Order Number		F. Dated Mo Da Yr
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 0710
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Section III—Termination Action	
17. Action to Terminate	The no. 1 coal conveyor belt was realigned to correct the condition. The belt is now running correctly and not rubbing in the coal conveyor take-up.

18. Terminated	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 0710
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Section IV—Automated System Data		
19. Type of Inspection (activity code)	20. Event Number 4054749	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.

me
9/08

Mine Citation/Order
Continuation

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

20 SEP 2005



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 08/29/2005	3. Citation/ Order Number 7098172 - 01
4. Served To Brad Phillips	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
8. Condition Or Practice		
Reason	Add the following to the body of the citation. The mine operator immediately removed the #1 coal conveyor belt from service.	
10. A. Injury or Illness	Unlikely	Reasonably Likely
Reason	Coal can become dried out in a short period of time and become ignited easily.	
10. C. Significant and Substantial	No	Yes
Reason	Missed checking this box when the citation was issued.	

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 08/29/2005	13. Time (24 Hr. Clock) 1430

7M
9/02

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 08/29/2005	2. Time (24 Hr. Clock) 0745	3. Citation/ Order Number 7098173
4. Served To Brad Phillips	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #2 conveyor belt head roller is not adequately guarded in that the guarding is missing along both sides of the head roller. The exposed area on the off side measured 6 feet long by 2 feet high and the exposed area on the walkway side measured 4 feet by 2 feet. A miner can easily slip and become caught between the belt and the conveyor belt head roller while the conveyor belt is in motion.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1722(b)
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Section II—Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 0815
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Section III—Termination Action

17. Action to Terminate Terminated due to guarding material being installed over the effected area of the #2 conveyor belt head roller to prevent persons from becoming caught between the belt and the head roller.

18. Terminated	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 0815
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Section IV—Automated System Data

19. Type of Inspection (activity code) F01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

MC
9/08

Mine Citation/Order

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

8/29/2005



Section I--Violation Data

1. Date Mo Da Yr 08/29/2005	2. Time (24 Hr. Clock) 0850	3. Citation/ Order Number 7098174
4. Served To Brad Phillips		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The trailing cable for the Thromor water pump is not insulated adequately and fully protected. The outer protective jacket of the trailing cable is cut and the inner insulated, energized power leads are exposed through an opening that measured 2 inches long by 3/4 of an inch wide. There have been 11 citations issued for violations of section 75.517 at this mine since 04/07/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.517
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Section II--Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 0910
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Section III--Termination Action

17. Action to Terminate Terminated due to the trailing cable for the #4 Thromor water pump being insulated adequately and fully protected.

18. Terminated	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 0910
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Section IV--Automated System Data

19. Type of Inspection (activity code) R01	20. Event Number 4054749	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.

MC
9/08

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 08/29/2005	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7098175
4. Served To Brad Phillips	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

Combustible materials in the form of loose coal, coal fines mixed with rock is allowed to accumulate under the take-up for the #4 conveyor belt. A bottom conveyor belt roller is stuck from the accumulations being packed in around the belt roller. The accumulations measured 6 feet long by 50 inches wide by 8 to 12 inches deep and range from damp to wet to the touch. There have been 12 citations issued for violations of section 75.400 at this mine since 01/10/2005.

See Continuation Form (MSHA Form 7000-3a)

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

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

16. Termination Due	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 1030
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Section III—Termination Action

17. Action to Terminate Terminated due to the combustible materials being cleaned from the area of the take-up for the #4 conveyor belt and the bottom belt roller unstuck.

18. Terminated	A. Date Mo Da Yr 08/29/2005	B. Time (24 Hr. Clock) 1030
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Section IV—Automated System Data

19. Type of Inspection (activity code)	EN1	20. Event Number 4054749	21. Primary or Mill
22. Signature	[Signature]		23. AR Number [6]

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

me
9/08

Mine Citation/Order

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

23 SEP 2005



21

Section I—Violation Data

1. Date Mo Da Yr 08/30/2005	2. Time (24 Hr. Clock) 0720	3. Citation/ Order Number 7098176
4. Served To Brad Phillips		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The trailing cable for the #3, 110 VAC water pump is not insulated adequately and fully protected. The trailing cable has been damaged in an area that measured 1 1/2 inches long by 3/4 of an inch wide. The inner insulated, energized power leads are exposed through an opening that measured 1/8 of an inch wide by 1/8 of an inch long. The mine operator immediately removed the #3 water pump from service. There have been 12 citations issued for violations of section of 75.517 at this mine since 04/07/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.517
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Section II—Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 08/30/2005	B. Time (24 Hr. Clock) 0840
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Section III—Termination Action

17. Action to Terminate Terminated due to the trailing cable for the #3, 110 VAC water pump being insulated adequately and fully protected.

18. Terminated	A. Date Mo Da Yr 08/30/2005	B. Time (24 Hr. Clock) 0840
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

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9/08

Mine Citation/Order

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

X7

Section I—Violation Data		
1. Date Mo Da Yr 08/30/2005	2. Time (24 Hr. Clock) 1215	3. Citation/ Order Number 7098177
4. Served To Brad Phillips		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #2 Stamler coal feeder serial no. 13781 being operated on the 1-Left, (006) MUM working section is not maintained in a safe operating condition. This coal feeder is equipped with a crusher and when tested the emergency stop pull cord will not de-energize the power from the crusher in the event of an emergency. The load end of the feeder is approximately 14 inches above the mine floor and a miner could easily step or fall onto the moving conveyor chain and be transported into and through the moving crusher. The mine operator immediately removed the #2 Stamler coal feeder from service.

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 75.1403
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Section II—Inspector's Evaluation

10. Gravity:						
A. Injury or illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one)		A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
12. Type of Action 104(a)		13. Type of Issuance (check one)		Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			E. Citation/ Order Number	7098134	F. Dated	Mo Da Yr 08/08/2005
A. Citation <input type="checkbox"/>			B. Order <input type="checkbox"/>	C. Safeguard <input checked="" type="checkbox"/>	D. Written Notice <input type="checkbox"/>	
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr 08/30/2005	B. Time (24 Hr. Clock) 1228
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Section III—Termination Action

17. Action to Terminate		
Terminated due to the emergency stop pull cord being adjusted and the power will now de-energize from the crusher when the emergency stop pull cord is tested.		
18. Terminated	A. Date Mo Da Yr 08/30/2005	B. Time (24 Hr. Clock) 1228

Section IV—Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054749	21. Primary or Mill
22. Signatu.	[Signature]		23. AR Number [6]

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

mc
9/08

Mine Citation/Order

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

X1

Section I—Violation Data		
1. Date Mo Da Yr 08/30/2005	2. Time (24 Hr. Clock) 1400	3. Citation/ Order Number 7098178
4. Served To Brad Phillips	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The mine operator failed to submit a valid respirable dust sample from the (001) section feeder for the Bi-monthly sampling cycle June-July on the 001-0 mechanized mining unit section. The designated area sampling point I.D. (501-0) designated sampling area as identified in advisory no.0030 dated June 08, 2005. No sample was received for the sampling area.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" type="checkbox"/> Safety <input type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 70.208
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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 type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
12. Type of Action	104(a)		13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action	A. Citation <input type="checkbox"/>	B. Order <input type="checkbox"/>	C. Safeguard <input type="checkbox"/>	D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number
					F. Dated Mo Da Yr
15. Area or Equipment					

16. Termination Due	A. Date Mo Da Yr 08/30/2005	B. Time (24 Hr. Clock) 1405
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Section III—Termination Action

17. Action to Terminate Terminated due to no action required by the operator as the sampling cycle can only be satisfied during the established sampling cycle.

18. Terminated	A. Date Mo Da Yr 08/30/2005	B. Time (24 Hr. Clock) 1405
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Section IV—Automated System Data

19. Type of Inspection (activity code): E01	20. Event Number 4054749	21. Primary or Mill
22. Signat. [Signature]		23. AR Number [6]

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

me 9/08

Mine Citation/Order
Continuation

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

23 SEP 2005



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Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation	2. Dated (Original Issue) 08/30/2005	3. Citation/ Order Number 7098178 - 01
4. Served To Brad Phillips	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change	From	To
10. B. Injury Expected	Lost Workdays	No Lost Workdays
Reason	Checked the wrong box in error when issuing the citation.	

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AR Number [6]	12. Date Mo Da Yr 09/06/2005	13. Time (24 Hr. Clock) 0450

MC
9/03

Mine Citation/Order

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

77

Section I--Violation Data

1. Date Mo Da Yr 08/31/2005	2. Time (24 Hr. Clock) 0742	3. Citation/ Order Number 7098179
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The trailing cable on the #41 Fletcher roof bolting machine serial no. 92073, approval no. 25B-439, model no. RR II-15 being operated in the intake (Primary escapeway) 3 blocks outby the overcast at the 1-right track switch is not insulated adequately and fully protected in that the following conditions were observed: Six previously insulated splices have the insulation worn away exposing the inner insulated power leads, which are energized with 575 VAC. (1) power leads are exposed through an opening that measured 1/2 of an inch wide all of the way around the trailing cable. (2) power leads are exposed through an opening that measured 3/4 of an inch wide all of the way around the trailing cable. (3) power leads are exposed through an opening that measured 1/2 of an inch wide all of the way around the trailing cable. (4) power leads are exposed through an opening that

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.517
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 08/31/2005	B. Time (24 Hr. Clock) 1050
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Section III--Termination Action

17. Action to Terminate Terminated due to the old trailing cable on the #41 Fletcher roof bolting machine being replaced with a new trailing cable.

18. Terminated	A. Date Mo Da Yr 08/31/2005	B. Time (24 Hr. Clock) 1050
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Section IV--Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054749	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.

mc
9/10/08

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 08/31/2005	3. Citation/ Order Number	7098179
4. Served To Carl Crumrine - Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

Continuation of 8. Condition or Practice

measured 1 1/4 inches wide all of the way around the trailing cable. (5) power leads are exposed through an opening that measured 2 inches long by 1 1/2 inches wide. (6) power leads are exposed through an opening that measured 1/4 of an inch wide by 1 1/4 of an inch long. The mine floor in this area of the mine is wet. The mine operator immediately removed the #41 roof bolting machine from service. There have been 13 citations issued for violations of section 75.517 at this mine since 04/07/2005.

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 type="checkbox"/> E. Modified
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Section IV—Inspection Data

9. Type of Inspection	E01	10. Event Number	4054749
11. Signatur	[Signature]	AR Number	[6]
12. Date	Mo Da Yr 08/31/2005	13. Time (24 Hr. Clock)	0742

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 08/31/2005	2. Time (24 Hr. Clock) 0822	3. Citation/ Order Number 7098180
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #16 S&S scoop [serial no. 488-1791 approval no. 2G 2831-5 being operated in the intake (primary escapeway) 3 blocks outby the overcast at 1-right track switch is not being operated in a safe operating condition. When the panic bar is activated the circuit breaker will not de-energized. The scoop pump motor will shut down when the emergency stop switch (panic bar) is held in and when the emergency stop switch (panic bar) is released the scoop pump motor immediately starts running again. The scoop was removed from service immediately by mine management. There have been 18 citations issued for violations of section 75.1725(a) at this mine since 04/11/2005.

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 75.1725(a)
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Section II—Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)				
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
12. Type of Action	104(a)	13. Type of issuance (check one)		
		Citation <input checked="" type="checkbox"/>	Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action		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 08/31/2005	B. Time (24 Hr. Clock) 1500
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Section III—Termination Action

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

Section IV—Automated System Data

19. Type of Inspection (activity code)	E01	20. Event Number 4054749	21. Primary or Mill
22. Signature	6		23. AR Number [6]

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

MC
9/10/08

SEP 2005



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) 08/31/2005	3. Citation/Order Number 7098180 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Terminated due to the circuit breaker being replaced on the #16 scoop and now when the panic bar is activated the tram motors are de-energize.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signatur. [Signature]	AR Number [6]	12. Date Mo Da Yr 09/07/2005	13. Time (24 Hr. Clock) 0650

WJL 9/13

23 SEP 2005



Mine Citation/Order

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

Section I--Violation Data

1. Date Mo Da Yr 09/07/2005	2. Time (24 Hr. Clock) 0840	3. Citation/ Order Number 4890527
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved ventilation plan is not being complied with on the 2-Left, 006-0 MMU working section in that the air quantity in the last open crosscut is not being maintained to at least 9000 cubic feet per minute. When this inspector attempted to take an air reading in the last open crosscut between #2 & #3 entry's the wheel on the approved and calibrated anemometer would not even turn. A smoke tube air reading was taken and it took the smoke 18 seconds to travel 10 feet which equals 4,200 cfm in an area of 140 square feet. The mine operator immediately starting the miners tightening up the curtains.

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 75.325(b)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 09/07/2005	B. Time (24 Hr. Clock) 0920
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Section III--Termination Action

17. Action to Terminate		
Terminated due to the check curtains and the run through curtains being tightened up and the last open crosscut air reading is now Q-13,020 cfm.		
18. Terminated	A. Date Mo Da Yr 09/07/2005	B. Time (24 Hr. Clock) 0920

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signat: [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.

Wolfe
9/13

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 09/07/2005	2. Time (24 Hr. Clock) 0825	3. Citation/ Order Number 4890528
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #1 Stamler coal feeder serial no. 13717 being operated on the 2-Left, 006-0 MMU working section is not maintained in a safe operating condition. This coal feeder is equipped with a crusher and when tested the emergency pull cord will not de-energize the power from the crusher in the event of an emergency. The load end of the feeder is approximately 14 inches above the mine floor and a miner could easily step or fall onto the moving conveyor chain and be transported into and through the moving crusher. The mine operator immediately removed the #1 Stamler coal feeder from service.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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Section II--Inspector's Evaluation

10. Gravity:

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

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

C. Significant and Substantial: Yes No

D. Number of Persons Affected: 001

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

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

14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice

E. Citation/Order Number 7098134 F. Dated Mo Da Yr 08/08/2005

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 09/07/2005 B. Time (24 Hr. Clock) 1000

Section III--Termination Action

17. Action to Terminate

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 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.

upl
9/13

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 09/07/2005		3. Citation/Order Number 4890528 - 01	
4. Served To Brad Hamrick			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791		(Contractor)

Section II--Justification for Action

Terminated due to the emergency stop being securely anchored to the frame of the #1 Stamler coal feeder. Also the pull cord was relocated and the emergency stop will now de-energize the crusher when the pull cord is tested.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection	E01	10. Event Number	4054749
11. Signature	[Signature]	AR Number	[6]
12. Date	Mo Da Yr 09/12/2005	13. Time (24 Hr. Clock)	1650

WPH
9/21

Mine Citation/Order

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



Section I--Violation Data

1. Date Mo Da Yr 09/07/2005	2. Time (24 Hr. Clock) 1015	3. Citation/ Order Number 4890529
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The approved ventilation plan is not being complied with on the 1-Left, 003 MMU working section. The #2 entry face has been driven approximately 32 feet inby the inby corner of the #2 right crosscut and the continuous mining machine is setting in this crosscut attempting to cut the #2 to #1 crosscut head on. The line curtain is rolled up across the #2 to #3 crosscut and the #2 entry face is not ventilated. The mine operator immediately hung a curtain from the #3 entry to ventilate the face of the #2 entry.

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 09/07/2005	B. Time (24 Hr. Clock) 1028
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Section III--Termination Action

17. Action to Terminate Terminated due to a line curtain being hung from the #3 entry through the left crosscut into #2 entry to ventilate the face of #2 entry while the #2 left crosscut is being cut. The face of #2 entry is now

18. Terminated	A. Date Mo Da Yr 09/07/2005	B. Time (24 Hr. Clock) 1028
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signatur J 6 J		23. AR Number [6]

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

WPL
9/15

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 09/07/2005	3. Citation/ Order Number 4890529
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Continuation of 17. Action to Terminate
ventilated.

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 E01	10. Event Number 4054749		
11. Signature [Signature]	AB Number [Signature]	12. Date Mo Da Yr 09/07/2005	13. Time (24 Hr. Clock) 1015

Mine Citation/Order
Continuation

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

23 SEP 2005  *Y1*

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) 09/07/2005	3. Citation/Order Number 4890529 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Change From To

8. Condition Or Practice

Reason Add the following to the body of the citation. The line curtain is not maintained to within 10 feet of the fully bolted face in the #2 entry while the 2 left crosscut is being cut. Page 6 of the approved roof control plan provided that the line curtains are to be maintained to within 10 feet of a fully supported face.

Missed entering this statement in the body of the citation when the citation was issued.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature <i>[Signature]</i>	AR Number 6	12. Date Mo Da Yr 09/07/2005	13. Time (24 Hr. Clock) 1630

wpl
9/13

Mine Citation/Order

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

23
X1.

Section I--Violation Data

1. Date Mo Da Yr 09/07/2005	2. Time (24 Hr. Clock) 0630	3. Citation/ Order Number 4890530
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The track haulage is not being maintained in a safe condition in that a continuous clearance space of at least 12 inches from the furthest projection of normal traffic is not being maintained on the tight side at 16 block track switch along #1 belt. There is 4 inches of clearance from the mantrip to the solid coal rib approximately 50 feet in by the switch going into the motor barn track.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1403
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Section II--Inspector's Evaluation

10. Gravity:						
A. Injury or Illness (has) (is):		No Likelihood <input type="checkbox"/>	Unlikely <input checked="" type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:		No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 001	
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>		C. Moderate <input checked="" type="checkbox"/>		D. High <input type="checkbox"/>
E. Reckless Disregard <input type="checkbox"/>						
12. Type of Action 104(a)			13. Type of Issuance (check one)			
			Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			E. Citation/ Order Number		F. Dated	
A. Citation <input type="checkbox"/>			B. Order <input type="checkbox"/>		C. Safeguard <input checked="" type="checkbox"/>	
D. Written Notice <input type="checkbox"/>			7097926		Mo Da Yr 06/14/2005	
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr 09/08/2005	B. Time (24 Hr. Clock) 1600
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code)	20. Event Number 4054749	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.

Wp
9/13

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 09/07/2005	3. Citation/Order Number 4890530 - 01
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE		7. Mine ID 46-08791	

Section II--Justification for Action

Terminated due to the rib roll being cleaned from the offside walkway along the #4 conveyor belt at #36 block.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature [Signature]	12. Date Mo Da Yr 09/12/2005	13. Time (24 Hr. Clock) 1600

WPH
9/21

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 09/07/2005		3. Citation/Order Number 4890530 - 02	
4. Served To Carl Crumrine - Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE			7. Mine ID 46-08791		

Section II—Justification for Action

Change From To

17. Action To Terminate

Reason Wrote the wrong termination for this citation in error.

Change the body of the termination no. 4890530-01: Change from terminated due to the rib roll being cleaned up from the offside walkway along the #4 conveyor belt at #36 block.

Change to terminated due to the haulage track being slid over and blocked and the corner of the rib being chipped off to provide adequate clearance along the offside rib located in the motor barn.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature] 6	11. AR Number [Signature] 6	12. Date Mo Da Yr 09/12/2005	13. Time (24 Hr. Clock) 1300

Upl
9/21

Mine Citation/Order

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

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Section I—Violation Data		3. Citation/Order Number	
1. Date Mo Da Yr 09/07/2005	2. Time (24 Hr. Clock) 0830	4890531	
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>	

The return air that has ventilated the no. 7, 6, 5, and 4 faces of the MMU 006-0 2 Left section is being coursed outby through the check curtain of the no. 5 entry and is being used to ventilate the non-permissible power connections of the section power center, section feeder and other non-permissible equipment. When chemical smoke is released at the check curtains in the #5 entry and the #4 entry outby the last line of open crosscuts it can be observed traveling outby over the non-permissible equipment. The check curtain in #5 entry had 2 holes measuring 3 feet wide by 9 feet high each. The check curtain in #4 entry had 3 holes in it. (1) 10 inches high by 18 feet wide on the bottom. (2) 1 foot wide by 9 feet high on one end. (3) 3 feet wide by 9 feet high on the other end.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.507
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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"/>
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"/>	Highly Likely <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"/>
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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"/>
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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
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15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 09/07/2005	B. Time (24 Hr. Clock) 0925
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Section III—Termination Action

17. Action to Terminate The check curtains were repaired and the backup check curtains were tightened. The return air is traveling the proper direction.

18. Terminated	A. Date Mo Da Yr 09/07/2005	B. Time (24 Hr. Clock) 0925
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Section IV—Automated System Data


19. Type of Inspection (activity code)	E01	20. Event Number 4054749	21. Primary or Mill
22. Signature	[6]		23. AR Number [6]

MSHA Form 7C-30-3, 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.

Upd
9/13

Mine Citation/Order

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

23 SEP 2005  X1

Section I--Violation Data		
1. Date Mo Da Yr 09/07/2005	2. Time (24 Hr. Clock) 1055	3. Citation/ Order Number 4890532
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

A clear unobstructed travelway of at least 24 inches wide is not being maintained on the offside of the #4 coal conveyor belt located just inby 36 block. A rib roll has obstructed the walkway measuring 10 feet long, 2 feet wide and 6 inches to 18 inches high. The weekly examiner has to come out of the impassible return entries at #43 block and travel along #4 belt to #36 block where he re-enters the 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 75.1403
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Section II--Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>					
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>			
14. Initial Action			E. Citation/ Order Number	F. Dated	
A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input checked="" type="checkbox"/> D. Written Notice <input type="checkbox"/>			7096483	Mo Da Yr 05/03/2005	
15. Area or Equipment					

16. Termination Due	A. Date Mo Da Yr 09/07/2005	B. Time (24 Hr. Clock) 2000
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Section III--Termination Action

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

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	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.

Wpl
9/13

Mine Citation/Order
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 09/07/2005		3. Citation/Order Number 4890532 - 01	
4. Served To Brad Hamrick			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)		
6. Mine SAGO MINE			7. Mine ID 46-08791		

Section II—Justification for Action

Terminated due to the rib roll being cleaned up from the offside walkway along the #4 conveyor belt at #36 block.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	11. Signature 	12. Date Mo Da Yr 09/12/2005	13. Time (24 Hr. Clock) 2015
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upl
9/21

Mine Citation/Order

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



Section I - Violation Data			
1. Date Mo Da Yr 09/07/2005	2. Time (24 Hr. Clock) 1230	3. Citation/ Order Number	4890533
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE		7. Mine ID	46-08791 (Contractor)
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The return air course can not be traveled in it's entirety in that the following conditions were observed: (1) water is allowed to accumulate over 12 inches deep for 2 blocks in the return entry travel way at #58 block in both #1 and #2 entry's along the #4 conveyor belt. (2) water is allowed to accumulate in the return air course in #1 and #2 entry's along the #5 conveyor belt starting at SS4096 and extends inby for 2 blocks, the water is over 15 inches deep. (3) roof fall's have occurred in the #1 and #2 return entry's at #40 block and the mine examiner leaves the return air course at #43 block and travels outby along the #4 conveyor belt to #36 block where he re-enters the return entry's to get around the roof fall's.

See Continuation Form (MSHA Form 7000-3e)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.364(b)(2)
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Section II - Inspector's Evaluation				
10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input checked="" type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>				
B. Injury or illness could reasonably be expected to be: No Lost Workdays <input type="checkbox"/> Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>				
C. Significant and Substantial: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			D. Number of Persons Affected: 001	
11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input type="checkbox"/> C. Moderate <input checked="" type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>				
12. Type of Action		13. Type of Issuance (check one)		
104(a)		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 09/12/2005	B. Time (24 Hr. Clock)	0600
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Section III - Termination Action	
17. Action to Terminate	

18. Terminated	A. Date Mo Da Yr	B. Time (24 Hr. Clock)
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Section IV - Automated System Data				
19. Type of Inspection (activity code)	E01	20. Event Number	4054749	21. Primary or Mill
22. Signature		23. AR Number		
[Signature]		[6]		

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

Wpd
9/13

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 09/07/2005	3. Citation/Order Number 4890533 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II--Justification for Action

Terminated due to the water being pumped from the cited area along #4 conveyor belt at #58 block in the return, the water being pumped from the cited area in the 1-left return and the stopping line has been set over to provide additional return entries at #40 block along the #4 conveyor belt. Seven stoppings have been built to provide these additional return entries. The return entry can now be traveled in it's entirety.

See Continuation Form

Section III--Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature [6]	12. Date Mo Da Yr 09/13/2005	13. Time (24 Hr. Clock) 1025

WPA 9/21

Mine Citation/Order

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

29 SEP 2005



Section I--Violation Data

1. Date Mo Da Yr 09/12/2005	2. Time (24 Hr. Clock) 1845	3. Citation/ Order Number 4890538
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The guarding along the #4 conveyor belt take-up roller which is along the walkway on the off side of the conveyor belt is missing. The 24 inch diameter take-up roller is exposed the an area that measured 38 inches wide by 48 inches high. The top of the exposed take-up roller is 32 inches above the walkway floor and a miner can easily slip, trip or fall into moving conveyor belt take-up roller and become caught between the roller and the conveyor belt. The mine floor is sloppy wet and slick.

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 75.1722
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 09/12/2005	B. Time (24 Hr. Clock) 2045
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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)	20. Event Number 4054749	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.

UP 9/21

Mine Citation/Order
Continuation

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

29 SEP 2005

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 09/12/2005	3. Citation/Order Number 4890538 - 01
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II—Justification for Action

Terminated due to the #4 take-up roller being guarded with wire screen.

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection E01	10. Event Number 4054749	
11. Signature [Signature]	12. Date Mo Da Yr 09/13/2005	13. Time (24 Hr. Clock) 0800

upl 9/21

Mine Citation/Order

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

04 OCT 2005



Section I—Violation Data

1. Date Mo Da Yr 09/20/2005	2. Time (24 Hr. Clock) 0740	3. Citation/ Order Number 7093329
4. Served To Carl Crumrine - Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY INC
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #10 Stanco water pump located in the sump which is in the #1 return entry on the 2-left, 003-0 MMU section is not clearly marked for identification to correspond with the circuit breaker that provides 575 VAC to this water pump. The circuit breaker is marked #10 pump and the water pump is not clearly marked for identification.

See Continuation Form (MSHA Form 7000-3a)

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

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

16. Termination Due	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 0747
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Section III—Termination Action

17. Action to Terminate Terminated due to the #10 Stanco water pump being clearly marked for identification.

18. Terminated	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 0747
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Section IV—Automated System Data

19. Type of inspection (activity code) E01	20. Event Number 4054749	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.

UP 9/22

Mine Citation/Order

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

9 3 OCT 2005



Section I--Violation Data

1. Date Mo Da Yr 09/20/2005	2. Time (24 Hr. Clock) 0830	3. Citation/ Order Number 7093330
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The #6 AWG trailing cable for the #10 water pump located in the sump which is in the #1 return entry on the 2-left, 003-0 MMU section is plugged into a circuit breaker that has an instantaneous setting range from 300 to 700 amperes and the instantaneous setting is set on 700 amperes at the time of this inspection. The maximum allowable instantaneous setting for a #6 trailing cable is 300 amperes. The mine operator immediately adjusted the circuit breakers instantaneous setting.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.601-1
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 0835
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Section III--Termination Action

17. Action to Terminate	Terminated due to the instantaneous setting on the circuit breaker that provides 575 VAC to the #10 Stanco water pump being set back to 300 amperes which is the maximum allowable instantaneous setting for a	
18. Terminated	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 0835

Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]	23. AR Number [6]	

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

Wpl
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Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 09/20/2005	3. Citation/ Order Number 7093330
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II--Justification for Action

Continuation of 17. Action to Terminate

#6 AWG trailing cable.

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 E01	10. Event Number 4054749	
11. Signature [Signature]	12. Date Mo Da Yr 09/20/2005	13. Time (24 Hr. Clock) 0830

Mine Citation/Order

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

04 OCT 2005

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Section I--Violation Data

1. Date Mo Da Yr 09/20/2005	2. Time (24 Hr. Clock) 0720	3. Citation/ Order Number 7093331
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

The approved ventilation plan is not being complied with on the 2-left, 003-0 MMU section. The inby end of the line curtain in the #2 face entry is not maintained to the next to the last row of permanently installed roof support. The line curtain is located on the eighth full row of roof support outby which is approximately 28 feet in length. This face is unsupported for approximately 20 feet past the last full row of roof support. The total distance the line curtain is from the face is approximately 48 feet. There have been 19 citations issued for violations of section 75.370(a)(1) at this mine since 02/17/2005.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.370(a)(1)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 0730
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Section III--Termination Action

17. Action to Terminate Terminated due to the line curtain being extended to the next to the last row of permanently installed roof support (roof bolts).

18. Terminated	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 0730
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]		23. AR Number [67]

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

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Mine Citation/Order

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



Section I - Violation Data

1. Date Mo Da Yr 09/20/2005	2. Time (24 Hr. Clock) 1020	3. Citation/ Order Number 7093332
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The John Deere 675B Skid Steer serial no. M0675BB010106 is not maintained in a safe operating condition in that the steering lever's are sticking and do not self center. This condition allows the Skid Steer to continue traming when the steering lever's are released. The mine operator immediately removed the Skid Steer form service by tagging it out of service.

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 77.404(a)
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Section II - Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 1300
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Section III - Termination Action

17. Action to Terminate

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

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature I [Signature]]	23. AR Number [6]	

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

Wpl
9/22

Mine Citation/Order
Continuation

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

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Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>		2. Dated (Original Issue) Mo Da Yr 09/20/2005		3. Citation/ Order Number 7093332 - 01	
4. Served To Al Schonmover			5. Operator ANKER WEST VIRGINIA MINING COMPANY INC		
6. Mine SAGO MINE			7. Mine ID 46-08791		(Contractor)

Section II--Justification for Action

Extended due to parts being ordered for this Skid Steer. Additional time is granted to receive the parts and to repair this Skid Steer.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 09/27/2005	B. Time (24 Hr. Clock) 0450	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV--Inspection Data

9. Type of Inspection E01	10. Event Number 4054749		
11. Signature [Signature]	AB Number [6]	12. Date Mo Da Yr 09/23/2005	13. Time (24 Hr. Clock) 0430

Wpl 9/27

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 09/20/2005	3. Citation/Order Number 7093332 - 02
4. Served To Carl Crumrine - Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	7. Mine ID 46-08791
6. Mine SAGO MINE		

Section II--Justification for Action

Extended due to the parts have not been received. This Skid Steer will remain out of service until the condition is corrected.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 10/07/2005	B. Time (24 Hr. Clock) 0600	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV--Inspection Data

9. Type of Inspection E01	10. Event Number 4054749		
11. Signatur [Signature]	AB Number [6]	12. Date Mo Da Yr 09/28/2005	13. Time (24 Hr. Clock) 1229

WJL
10/04

Mine Citation/Order

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



Section I--Violation Data			
1. Date	Mo Da Yr 09/20/2005	2. Time (24 Hr. Clock) 1045	3. Citation/ Order Number 7093333
4. Served To Charles Lucas		5. Operator HWM TRUCK LINES, INC.	
6. Mine SAGO MINE		7. Mine ID 46-08791	E467 (Contractor)
8. Condition or Practice			8a. Written Notice (103g) <input type="checkbox"/>

The 1999 Mack truck serial no.1M2AA14YOXW101582 company #131 being operated on mine property to transport coal from the mine site to the cleaning plant is not maintained in a safe operating condition in that the following conditions were observed by this inspector. (1) The air valve for the truck braking system has a excessive air leak when the braking system was tested by applying foot pressure to the brake pedal. (2) The brake lights and the signal lights located on the back of this truck will not burn when tested. The operator immediately removed the truck from service.

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 1245
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Section III--Termination Action

17. Action to Terminate Terminated due to the brake lights and signal lights being replaced and the leaking air valve for the truck braking system being replaced with a new valve.

18. Terminated	A. Date Mo Da Yr 09/20/2005	B. Time (24 Hr. Clock) 1245
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

WPL
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Mine Citation/Order

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



Section I-Violation Data

1. Date Mo Da Yr 09/23/2005	2. Time (24 Hr. Clock) 0200	3. Citation/ Order Number 7093337
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The right return air course can not be traveled in it's entirety in that the following conditions were observed by this inspector: (1) The mine roof has fallen in the #7 return entry at SS#3746 the fall is rib to rib by approximately 8 feet high. (2) The mine roof has fallen in the #7 return entry at SS#3744 the fall is rib to rib by approximately 8 feet high. (3) The mine roof has fallen in the #7 return entry at #24 block, the fall is rib to rib by approximately 8 feet high. This #7 return entry can not be traveled through the areas listed.

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(b)(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 09/30/2005 B. Time (24 Hr. Clock) 0600

Section III-Termination Action

17. Action to Terminate

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

Section IV-Automated System Data

19. Type of Inspection (activity code) E01 20. Event Number 4054749 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.

Local
9/27

Mine Citation/Order
Continuation

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



Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 09/23/2005	3. Citation/ Order Number 7093337 - 01
4. Served To Jeff Toler	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II--Justification for Action

submitted a plan to MSHA and West Virginia State on 9-30-2005 to make ventilation change from return airway to common with the intake airway

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 10/21/2005	B. Time (24 Hr. Clock) 1600	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV--Inspection Data

9. Type of Inspection E01	10. Event Number 4054434		
11. Signature [Signature]	AR Number J E 6 7	12. Date Mo Da Yr 10/04/2005	13. Time (24 Hr. Clock) 1155

WPT, 10/06

Mine Citation/Order

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



Section I—Violation Data

1. Date Mo Da Yr 09/23/2005	2. Time (24 Hr. Clock) 0300	3. Citation/ Order Number 7093338
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The conveyor belt system in this mine is not maintained in a safe condition in that the wire screen being used for guarding on the #3, #4, #5, and #6 conveyor belt head drive's, take-up's, head roller's and tailpiece's are inadequate due to the holes in the screen are 4 inches by 4 inches. A miner can stick his hand through a hole of this size.

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 75.1722(b)
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Section II—Inspector's Evaluation

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 09/30/2005	B. Time (24 Hr. Clock) 0600
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Section III—Termination Action

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

Section IV—Automated System Data

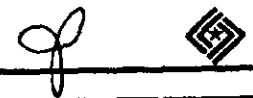
19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

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9/27

Mine Citation/Order
Continuation

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



Section I-Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 09/23/2005	3. Citation/ Order Number 7093338 - 01
4. Served To Jeff Toler	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC (Contractor)	
6. Mine SAGO MINE	7. Mine ID 46-08791	

Section II-Justification for Action

Purchase order records show fencing was ordered on 9-26-2005 and has not been received as of today's date 10-04-2005, additional time is being granted for materials to arrive.

See Continuation Form

Section III-Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 10/21/2005	B. Time (24 Hr. Clock) 0800	<input type="checkbox"/> C. Vacated	<input type="checkbox"/> D. Terminated	<input type="checkbox"/> E. Modified
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Section IV-Inspection Data

9. Type of Inspection FOI	10. Event Number 4054434
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11. Signature [Signature] 6	AR Number JL67	12. Date Mo Da Yr 10/04/2005	13. Time (24 Hr. Clock) 1158
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Wpl
10/06

Mine Citation/Order

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

1 001 235



Section I—Violation Data

1. Date Mo Da Yr 09/30/2005	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7098384
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The roof and rib on the 2-Left Mains section are not being supported or otherwise controlled to protect persons against the hazards associated with falls of roof and rib at the following locations:

- 1.) Fifty feet inby spad #4060 in the track entry, loose hanging rib, 10" thick, extending inby to the corner.
- 2.) Loose hanging brow measuring 3' x 5' x 2' thick on the inby left corner.
- 3.) Thirty feet inby spad #4060 on left rib, large (2' x 3' x 8") pieces extend 6' into the track entry.
- 4.) Cross-cut from track to belt at 9 Room, loose hanging roof 8-10 inches thick.
- 5.) Belt Entry: 20' outby 9 Room Intersection, Inby feeder left and right ribs, loose hanging brow measuring up to 10" thick.

The roof and rib conditions in these areas are loose and appear as if they will fall without warning.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input checked="" type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input type="checkbox"/>	Lost Workdays Or Restricted Duty <input checked="" type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	D. Number of Persons Affected: 001		
11. Negligence (check one)					
A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)		13. Type of Issuance (check one)			
		Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			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 09/30/2005	B. Time (24 Hr. Clock) 1030
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Section III—Termination Action

17. Action to Terminate The listed hazardous conditions were scaled down.

18. Terminated	A. Date Mo Da Yr 09/30/2005	B. Time (24 Hr. Clock) 1030
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Section IV—Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

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

April 10/04

Mine Citation/Order

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

14 OCT 2005



Section I--Violation Data

1. Date Mo Da Yr 09/30/2005	2. Time (24 Hr. Clock) 1015	3. Citation/ Order Number 7098385
4. Served To Al Schoonover	5. Operator ANKER WEST VIRGINIA MINING COMPANY INC	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

It's obvious the pre-shift examination conducted for the day shift 9/30/2005 on the 2 Left Mains Section was not adequate. The hazardous conditions listed on citation #7098384 issued on 9/30/2005 were extensive and obvious, and should have been detected by a prudent examiner. The hazards were not posted with a conspicuous danger sign or corrected.

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 09/30/2005	B. Time (24 Hr. Clock) 1100
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Section III--Termination Action

17. Action to Terminate An examination was conducted and the examination requirements were discussed with mine management.

18. Terminated	A. Date Mo Da Yr 09/30/2005	B. Time (24 Hr. Clock) 1100
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Section IV--Automated System Data

19. Type of Inspection (activity code) E01	20. Event Number 4054749	21. Primary or Mill
22. Signature [6]		23. AR Number [6]

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*Wpl
11/10/05*