

# 104(a) Citations

Fiscal Year 2004

MAR - 4 2004



Section I--Violation Data

1. Date Mo Da Yr 02/17/2004	2. Time (24 Hr. Clock) 0745	3. Citation/ Order Number 7096104
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

8a. Written Notice (103g)

The operating No. 2 conveyor belt drive is not provided with a properly installed and maintained fire suppression system. The drive was placed into service on 02/13/2004. The system is partially installed but has not yet been connected to the water supply. A miner is present at this time to work on the drive but does not have all the hardware to complete the installation.

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 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 02/17/2004	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)

Section IV--Automated System Data

19. Type of Inspection (activity code)	AAA	20. Event Number 4053992	21. Primary or Mill
22. Signature			23. AR Numbr

MSHA Form 7000-3, Mar 2003. In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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

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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 02/17/2004	3. Citation/ Order Number 7096104 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

The fire suppression was installed on the NO.2 belt drive and maintained in operating 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 AAA	10. Event Number 4053992	
11. Signature [Signature]	12. Date Mo Da Yr 02/18/2004	13. Time (24 Hr. Clock) 0835

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Mine Citation/Order

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

MAR - 4 2004



1. Date Mo Da Yr 02/17/2004	2. Time (24 Hr. Clock) 0950	3. Citation/ Order Number 7096105
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

8a. Written Notice (103g)

The methane monitor of the Joy 14cm15 remote control continuous mining machine, serial no. Jm 5530, approval no. 2g-4159a, being operated on the 001-0 mmu, is not properly maintained. (1) n tested with a known methane/air mixture of 2.5% methane the read out would only show 1.9% and would not de-energize the machine. (2) The strobe light that is provided to alert the machine operator when the methane reached the 1% level is covered with dirt and rock and can not be observed by the operator.

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 75.342(a)(4)
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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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 02/17/2004 B. Time (24 Hr. Clock) 1030

Section III--Termination Action

17. Action to Terminate Methane monitor was properly calibrated.

18. Terminated A. Date Mo Da Yr 02/17/2004 B. Time (24 Hr. Clock) 1030

Section IV--Automated System Data

19. Type of Inspection (activity code) AAA 20. Event Number 4053992 21. Primary or Mill  
23. AR Number [6]

MSHA Form 7000-3, Mar 85 (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 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

MAR 4 2004



Section I--Violation Data

2. Time (24 Hr. Clock) 1015	3. Citation/ Order Number 7096106
5. Operator ANKER WEST VIRGINIA MINING COMPANY	
7. Mine ID 46-08791	

(Contractor)

8a. Written Notice (103g)

The approved ventilation plan is not being complied with on the 001-0 mmu. The shuttle car roadways are not being maintained damp. The roadways are dry and dust is being generated by the operating shuttle cars. Visible dust is suspended in the air currents of the section to the point visibility of the equipment operators is being reduced. The dust also exposes the miners to needless respirable dust.

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 75.370(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: 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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 02/17/2004 B. Time (24 Hr. Clock) 1045

Section III--Termination Action

17. Action to Terminate Watered the roadways to control the dust.

18. Terminated A. Date Mo Da Yr 02/17/2004 B. Time (24 Hr. Clock) 1045

Section IV--Automated System Data

19. Type of Inspection (activity code): AAA 20. Event Number 4053992 21. Primary or Mill  
23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 85 (revised) In accordance with 1 or the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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

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Mine Safety and Health Administration

MAR 4 2004



2. Time (24 Hr. Clock) 1040		3. Citation/ Order Number 7096107
5. Operator ANKER WEST VIRGINIA MINING COMPANY		7. Mine ID 46-08791
6. Mine SAGO MINE		(Contractor)
8. Condition of Practice		8a. Written Notice (103g) <input type="checkbox"/>

The Fairchild battery powered scoop, serial no. T339-324 being operated on the 001-0 mmu is not maintained in a permissible condition. (1) No locking devices are provided for the battery cable connecting rings. (2) There are no locking devices for the battery covers.

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 02/17/2004	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 4053992	21. Primary or Mill
23. AR Number [66]		

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

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Mine Safety and Health Administration

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Section I—Subsequent Action/Continuation Data

Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 02/17/2004 Mo Da Yr	3. Citation/ Order Number 7096107-01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Locking devices are now provided for the battery lids and cable rings.

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 4053992	
11. Signature 	12. Date Mo Da Yr 02/18/2004	13. Time (24 Hr. Clock) 0755

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Mine Citation/Order

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

MAR - 4 2004



Section I—Violation Data

1. Date Mo Da Yr 02/17/2004	2. Time (24 Hr. Clock) 1115	3. Citation/ Order Number 7096108
4. Served To Brad Hamrick	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 S&S battery powered scoop, serial no. 488-1763 being operated on the 001-0 mmu is not maintained in a permissible condition. (1) No locking devices are being utilized for the battery cable connecting rings. (2) There are no locking devices for the battery covers.

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 02/17/2004 B. Time (24 Hr. Clock) 1500

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 4053992 21. Primary or Mill

23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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

MAR 18 2004

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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 02/17/2004	3. Citation/ Order Number 7096108 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

Locking devices are now provided for the battery lids and cable rings

See Continuation Form

Section III—Subsequent Action Taken

B. 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 4053992		
11. Signature [Signature]	AR Number 2565	12. Date Mo Da Yr 02/18/2004	13. Time (24 Hr. Clock) 0755

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Mine Citation/Order

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

MAR - 4 2004



Section I—Violation Data

1. Date Mo Da Yr 02/17/2004	2. Time (24 Hr. Clock) 1055	3. Citation/ Order Number 7096109
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8e. Written Notice (103g)

The S&S battery powered scoop serial no. 488-1763 being operated on the 001-0 mmu is not maintained in safe operating condition. The emergency stop switch (Panic Bar) can not be operated to de-energize the system. The panic bar will bottom out and not work. The automatic emergency parking brake is also supposed to be activated by the emergency stop/panic bar but will not set either.

Mine management removed the machine 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  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 02/17/2004	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

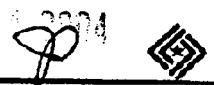
19. Type of Inspection (activity code) AAA	20. Event Number 4053992	21. Primary or Mill
22. Signature [ 6 ]		23. AR Number [ 6 ]

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 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

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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 02/17/2004	3. Citation/ Order Number 7096109 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

The scoop is now maintained in a safe operating condition.

See Continuation Form

Section III—Subsequent Action Taken

B. 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 4053992		
11. Signature [Signature]	AR Number J[6]	12. Date Mo Da Yr 02/18/2004	13. Time (24 Hr. Clock) 0800

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Mine Citation/Order

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

MAR - 4 2004



Section I--Violation Data

1. Date Mo Da Yr 02/18/2004	2. Time (24 Hr. Clock) 0745	3. Citation/ Order Number 7096110
4. Served To Brad Hamrick	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"/>

Line brattice is not being maintained to within 10' of the deepest point of penetration of the face in the cross cut of 3 to 4 on the 001-0 mmu. The mine roof of the cross cut is bolted to plan. The existing line brattice is a measured distance of 30' back from the face. No ch4 detected.

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			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
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr 02/18/2004	B. Time (24 Hr. Clock) 0755
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Section III--Termination Action

17. Action to Terminate Line brattice was installed to within 10' of the face.

18. Terminated	A. Date Mo Da Yr 02/18/2004	B. Time (24 Hr. Clock) 0800
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Section IV--Automated System Data

19. Type of Inspection (activity code) A A A	20. Event Number 4053992	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 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.

Handwritten initials and date: up 2/20 2004

1. Date Mo Da Yr 02/19/2004	2. Time (24 Hr. Clock) 0715	3. Citation/ Order Number 7096111
4. Served To Jeff Simmons	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)

The approved ventilation plan is not being complied with on the 001-0 mmu. The approved ventilation plan requires that the ventilating line brattice be maintained to within 10' of the point of deepest penetration of the faces. The no. 3 and 4 places are fully roof bolted to plan and the line brattice is a measured distance from the faces of 36' in no.3 place and 20' in no.4 place. Condition was left by midnight shift as inspector arrived on section with the day shift crew. A similar condition was cited by this inspector on 2/18/2004 citation no. 7096110. The requirement of the ventilation plan was discussed at length with mine management at that time. No ch4 was detected in any of the faces.

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

No Likelihood  Unlikely  Reasonably Likely  Highly Likely  Occ

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 02/19/2004	B. Time (24 Hr. Clock) 0730
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Section III—Termination Action

17. Action to Terminate Both faces were properly ventilated and the requirement of the ventilation plan was reviewed with the midnight shift foreman.

18. Terminated	A. Date Mo Da Yr 02/19/2004	B. Time (24 Hr. Clock) 0730
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Section IV—Automated System Data

19. Type of Inspection (activity code)	20. Event Number 4053992	21. Primary or Mill	23. AR Number [6]
22. Signature			

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

*at 2/20*

Mine Citation/Order

U.S. Department of Labor 12 MAR 2004  
Mine Safety and Health Administration



Section I—Violation Data

1. Date Mo Da Yr 02/24/2004	2. Time (24 Hr. Clock) 1550	3. Citation/ Order Number 7096004
4. Served To Sam Holcomb	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 windshield wipers on the Ingersoll Rand fork lift VR-636B serial number 173354 failed to operate when tested. The parts will have to be ordered for repairs on this machine.

See Continuation Form (MSHA Form 7000-3g)

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 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 type="checkbox"/>	D. Written Notice <input type="checkbox"/>		
15. Area or Equipment					

16. Termination Due	A. Date Mo Da Yr 02/26/2004	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) AAA	20. Event Number 4053992	21. Primary or Mit
22. Signature [ 6 ]	23. AR Number [ 6 ]	

MSHA Form 7000-1, 10/85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at 500 W. Madison Street, Suite 1240, Chicago, Illinois 60681. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

bc SH 2-24-04

Mine Citation/Order  
Continuation

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

12 MAR 2004



Section I - Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 02/24/2004 Mo Da Yr	3. Citation/ Order Number 7096004 - 01
4. Served To Brad Hamrick	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 windshield wipers being repaired and made operable.

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 4053992	11. Signature [ 6 ] AR [ 6 ]	12. Date 03/04/2004 Mo Da Yr	13. Time (24 Hr. Clock) 0758
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MSHA Form 1000-2B, Feb 01 (10/98)

CC BH 3-04-04

MC  
3/09



MAR 2004  
[Handwritten initials]

Section I--Violation Data

2. Time (24 Hr. Clock) 0940		3. Citation/ Order Number 7147273
6. Mine SAGO MINE		5. Operator ANKER WEST VIRGINIA MINING COMPANY
8. Condition or Practice		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

The approved Mine Ventilation Plan, page 3 was not being complied with on the Mains section, 001-0 MMU. The Fletcher twin boom road ranger roofbolter located in the number 3 entry did not have a minimum of 3000 cubic feet per minute of air maintained over the bolter while the bolter was in operation. When measured with a calibrated anemometer the air over the bolter was 2762 cubic feet per minute. The section is currently cutting 18 inches of stone above the coal and 6 to 8 inches of stone from the binder inherently in the coal seam. Visible dust was observed in the last open crosscut from the number 5 entry to the number 3 entry. The Fletcher road ranger roofbolter was bolting in the number 3 entry on the return side of the miner. For the last respirable dust sample taken 02-19-2004 by MSHA, two occupations, the intake and return side roof bolters were above the 2.0 standard,

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 03/02/2004 B. Time (24 Hr. Clock) 1015

Section III--Termination Action

17. Action to Terminate The ventilation controls were adjusted, air was maintained at 5015 CFM and bolter operators were removed from the return side of the miner by the operator.

18. Terminated A. Date Mo Da Yr 03/02/2004 B. Time (24 Hr. Clock) 1013

Section IV--Automated System Data

19. Type of Inspection (activity code) CED 20. Event Number 4076757 21. Primary or Mill

22. [ 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 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 3.15.2004

Section I--Violation Data

1. Date Mo Da Yr 03/02/2004	2. Time (24 Hr. Clock) 1000	3. Citation/ Order Number 7147272
4. Served To Johnnie Stemple-Safety Director		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, page 2 was not being complied with on the Mains section, 001-0 MMU. The Joy 14CM15 continuous miner located in the number 5 entry did not have the minimum number of working water sprays (30) working. The total number working water sprays were 19. The section is currently cutting 18 inches of stone above the coal and 6 to 8 inches of stone from the binder inherently in the coal seam. Visible dust was observed in the last open crosscut from the number 5 entry to the number 3 entry. The Fletcher road ranger roofbolter was bolting in the number 3 entry on the return side of the miner. For the last respirable dust sample taken 02-19-2004 by MSHA, two occupations, the intake and return side roof bolters were above the 2.0 standard,

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input checked="" 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 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 03/02/2004	B. Time (24 Hr. Clock) 1030
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Section III--Termination Action

17. Action to Terminate The sprays were cleaned and the bolter operators were removed from the return side of the miner by the operator.

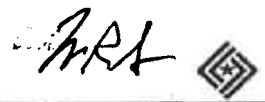
18. Terminated	A. Date Mo Da Yr 03/02/2004	B. Time (24 Hr. Clock) 1030
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Section IV--Automated System Data

19. Type of Inspection (activity code) CED	20. Event Number 4076757	21. Primary or Mill
22. Signa	23. AR Number	[ 6 ]

MSHA Form 7000-3, May 2003 (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 3-15-2004*



Section I—Violation Data

1. Date Mo Da Yr 03/02/2004	2. Time (24 Hr. Clock) 1020	3. Citation/ Order Number 7147274
4. Served To Johnnie Stemple-Safety Director		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

The approved Mine Ventilation Plan, page 2 was not being complied with on the Mains section, 001-0 MMU. The Joy 14CM15 continuous miner located in the number 5 entry did not have a minimum of 5880 cubic feet per minute of air maintained behind the line brattice. The continuous miner was in operation at the time. When measured with a calibrated anemometer the air behind the line brattice was 5434 cubic feet per minute. The section is currently cutting 18 inches of stone above the coal and 6 to 8 inches of stone from the binder inherently in the coal seam. Visible dust was observed in the last open crosscut from the number 5 entry to the number 3 entry. The Fletcher road ranger roofbolter was bolting in the number 3 entry on the return side of the miner. For the last respirable dust sample taken 02-19-2004 by MSHA, two occupations, the intake and return side roof

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

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 03/02/2004 B. Time (24 Hr. Clock) 1030

Section III—Termination Action

17. Action to Terminate The ventilation controls were adjusted, air was maintained at 8008 CFM. The bolter operators were removed from the return side of the miner by the operator.

18. Terminated A. Date Mo Da Yr 03/02/2004 B. Time (24 Hr. Clock) 1030

Section IV—Automated System Data

19. Type of Inspection (activity code) CED 20. Event Number 4076757 21. Primary or Mill  
22. Sign [ 6 ] 23. AR Number [ 6 ]

MSHA Form 7000-3, May 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 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.

Handwritten date: 3.15.2004



Mine Citation/Order  
Continuation

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



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input type="checkbox"/> <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 03/02/2004	3. Citation/ Order Number 7147274
4. Served To Johnnie Stemple-Safety Director	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID (Contractor) 46-08791	

Section II—Justification for Action

Continuation of 8. Condition or Practice

bolters were above the 2.0 standard,

See Continuation Form

Section III—Subsequent Action Taken

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

9. Type of Inspection CED	10. Event Number 4076757		
[ 6 ]	AR Number [ 6 ]	12. Date Mo Da Yr 03/02/2004	13. Time (24 Hr. Clock) 1020



Section I--Violation Data

1. Date Mo Da Yr 04/08/2004	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7147641
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 respirable dust samples submitted by the operator for the March-April 2004 bi-monthly sampling cycle, the average concentration of respirable dust in the working environment of the continuous miner operator, designated occupation 036-0, on the 001-0 MMU is 2.780 mg/m<sup>3</sup>, which exceeds the applicable standard of 2.0 mg/m<sup>3</sup> (Advisory Number 0018 dated April 06, 2004). The operator shall take immediate corrective action to lower the level of respirable dust in the working environment of the continuous miner operator, and then sample each production shift until five valid respirable dust samples are collected and submitted to the MSHA Respirable Dust Processing Laboratory in Pittsburgh, Pennsylvania. 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"/>	D. Number of Persons Affected: 002
C. Significant and Substantial:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		

11. Negligence (check one)	A. None <input type="checkbox"/>	B. Low <input type="checkbox"/>	C. Moderate <input checked="" type="checkbox"/>	D. High <input type="checkbox"/>	E. Reckless Disregard <input type="checkbox"/>
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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 04/12/2004	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) CED	20. Event Number 4077181	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

MSHA Form 7000-2 (rev 03) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at 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.

*4-14-04*

Mine Citation/Order  
Continuation

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

22 APR 2004

*WRS*  


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 04/08/2004		3. Citation/Order Number 7147641 - 01	
4. Served To Johnny Stemple			5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE			7. Mine ID (Contractor) 46-08791		

Section II--Justification for Action

Additional time is granted to allow the operator to make the following adjustments: (1) Install 2 blocks of 4 No.3 Fan type 65 @ 9.6 GPM which will raise the gallons per minute across the miner cutting head from 24 to 27.2 GPM. (2) Record a weekly full traverse pitot tube reading (3) The continuous miner operators will be retrained on page 9 part 3 of the ventilation plan concerning the cleaning of the scrubber duct work once a shift. Sampling will begin on the afternoon shift on 04/15/2004 and continue until five valid samples are collected.

See Continuation Form

Section III--Subsequent Action Taken

8. Extended To	A. Date Mo Da Yr 04/19/2004	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 CED		10. Event Number 4077181			
11. Sign. <i>[Signature]</i>		AB Number <i>[6]</i>	12. Date Mo Da Yr 04/12/2004	13. Time (24 Hr. Clock) 0705	

*Jul 4-14-04*

Mine Citation/Order  
Continuation

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

*JR for wes*  


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 04/08/2004	3. Citation/ Order Number 7147641 - 02
4. Served To Johnny Stemple	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 001-0 MMU is 1.417 mg/m<sup>3</sup> which is less than the applicable standard of 2.0 mg/m<sup>3</sup>.

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, CED	10. Event Number 4077181		
11. Signature <i>[Signature]</i>	AR Number <i>[Signature]</i>	12. Date Mo Da Yr 04/21/2004	13. Time (24 Hr. Clock) 0912

*Jul 4-22-04*

22 APR 2004 *MRK*

Mine Citation/Order

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



Section I--Violation Data			
1. Date Mo Da Yr 04/08/2004	2. Time (24 Hr. Clock) 0950	3. Citation/ Order Number	7147642
4. Served To Johnny Stemple		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 charging station located 2 blocks inby the #2 belt drive does not have the required 240 lbs. of rock dust and a portable fire extinguisher. There is no fire extinguisher and only 150 lbs. of rock dust.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR	75.1100-2(c)(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
15. Area or Equipment				

16. Termination Due	A. Date Mo Da Yr 04/08/2004	B. Time (24 Hr. Clock) 1000
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Section III--Termination Action

17. Action to Terminate Terminated due to 240 lbs of rock dust and a fire extinguisher being placed at the station.

18. Terminated	A. Date Mo Da Yr 04/08/2004	B. Time (24 Hr. Clock) 1000
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Section IV--Automated System Data

19. Type of Inspection (activity code) CED	20. Event Number 4077181	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

JW 4-14-04



Section I—Violation Data

1. Date Mo Da Yr 04/08/2004	2. Time (24 Hr. Clock) 1200	3. Citation/ Order Number 7147643
4. Served To Johnny Stemple	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The currently approved mine ventilation plan is not being complied with on the Mains section - 001-0 MMU. When a full traverse scrubber reading was taken to ensure the efficiency of the scrubber there was only 4595 CFM calculated, the ventilation plan requires a minimum of 6000 CFM. ( page 6a Approved March 15, 2004 ) This section and MMU is out of compliance for exceeding the 2.0mg/m3 standard of respirable dust (see citation 7147641 / 2.780mg/m3)

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 04/08/2004	B. Time (24 Hr. Clock) 1220
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Section III—Termination Action

17. Action to Terminate Terminated due to the entire scrubber system being cleaned and a full traverse being conducted. (8415 CFM)

18. Terminated	A. Date Mo Da Yr 04/08/2004	B. Time (24 Hr. Clock) 1220
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Section IV—Automated System Data

19. Type of Inspection (activity code) CED	20. Event Number 4077181	21. Primary or Mill
22. Signature [ 6 ]		23. AR Number [ 6 ]

MSHA Form 7000-3, Mar 85 (revised) In accordance with the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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 4. 11.04



Section I—Violation Data

1. Date Mo Da Yr 05/24/2004	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7096338
4. Served To Jim Swartz Superintendent		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 on the NARCO AB #5 shuttle car, (2G-3936-0) operating on the 001-0 MMU Mains section is not insulated adequately and fully protected. A repaired place in the cable, two feet from the anchor, had the tape worn away and the energized, bare power conductors were visible. The opening measured 4 inches long and the bare energized conductor is exposed for two inches. The section is damp.

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  
05/24/2004 B. Time (24 Hr. Clock) 1150

Section III—Termination Action

17. Action to Terminate The cable was repaired, insulated adequately and fully protected.

18. Terminated A. Date Mo Da Yr  
05/24/2004 B. Time (24 Hr. Clock) 1150

Section IV—Automated System Data

19. Type of Inspection (activity code) BAB 20. Event Number 4054423 21. Primary or Mill

22. Signature [Signature] 23. AR Number [67]

MSHA Form 7000-7, Mar 85 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at Small Business Administration, Office of the National Ombudsman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Ombudsman is in addition to any other rights you may have, including the right to contest citations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

cc: me JS  
OT

WPL  
5/24



Section I--Violation Data

1. Date	Mo Da Yr 05/18/2004	2. Time (24 Hr. Clock) 1045	3. Citation/ Order Number 7146294
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID 46-08791	
8. Condition or Practice		8a. Written Notice (103a) <input type="checkbox"/>	

The Co. No. 6 shuttle car being operated in the face areas of the Mains active mining section, was not equipped with a substantially constructed canopy. Four of the required six bolts for the canopy support standers, were missing. The shuttle car was removed 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 75.1710-1(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 05/18/2004	B. Time (24 Hr. Clock) 1245	
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Section III--Termination Action

17. Action to Terminate The four bolts were installed

18. Terminated	A. Date Mo Da Yr 05/18/2004	B. Time (24 Hr. Clock) 1330	
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Section IV--Automated System Data

19. Type of Inspection (activity code) CCA	20. Event Number 4076453	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 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.

*AW*  
5-20-4

Mine Citation/Order

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

20 JUN 2004

Section I--Violation Data

1. Date Mo Da Yr 06/08/2004	2. Time (24 Hr. Clock) 1545	3. Citation/ Order Number 7096341
4. Served To Jim Swartz Superintendent	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 company number 2 9-man mantrip operating on the 1st NE Mains track is not being maintained in a safe operating condition. The sanding devices would not work properly when activated. Three out of four would not work and the fourth one would not sand on the ball of the rail. The track to be traveled is on a down hill grade to the track end and has several water holes along the track. The track rail is damp to wet. There is also a set of air lock doors on a steep grade that the mantrip must go through. Mine mangement took the mantrip out of service. A miner had just brought the trip out for the evening shift crew to use.

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: 009		
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 06/09/2004	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)	20. Event Number 4054425	21. Primary or MR#
22. Signature [Signature]	23. AR Number [66]	

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



Mine Citation/Order  
Continuation

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

22 JUN 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 06/08/2004	3. Citation/Order Number 7096341 - 01
4. Served To Jim Swartz Superintendent		5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE		7. Mine ID (Contractor) 46-08791	

Section II—Justification for Action

The sanders were restored to proper working 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 AAA	10. Event Number 4054425		
11. Signal I 6	AR Number JL67	12. Date Mo Da Yr 06/14/2004	13. Time (24 Hr. Clock) 0605

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6/18

Mine Citation/Order

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

9 JUL 2004

Section I—Violation Data

1. Date Mo Da Yr 06/14/2004	2. Time (24 Hr. Clock) 0610	3. Citation/ Order Number 7096342
4. Served To Brent Wolfe Safety director	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)
8a. Written Notice (103g) <input type="checkbox"/>		

The primary escapeway for the 001-0 mmu is not being maintained in a safe condition to assure passage of anyone, including disabled persons. The walkway is obscured by water rib to rib and extending approximately 30 feet long and measured 13 inches along the edge to deeper in the middle. This condition is located 1 block inby the fan.

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) (ts): 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 06/16/2004	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)	20. Event Number 4054425	21. Primary or Mill
22. Signature [Signature]	23. AR Number [66]	

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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6/18

Mine Citation/Order  
Continuation

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

9 JUL 2004

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 06/14/2004 Mo Da Yr	3. Citation/ Order Number 7096342 - 01
4. Served To Brent Wolfe Safety director	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

A 6' wide unobscured walkway has been provided in the primary escapeway 1 block inby the fan.

See Continuation Form

Section III—Subsequent Action Taken

B. 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

10. Event Number 4054425	AP Number 1563	12. Date 06/17/2004 Mo Da Yr	13. Time (24 Hr. Clock) 0815
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Mine Citation/Order

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

- 9 JUL 2004



Section I—Violation Data

2. Time (24 Hr. Clock) 0815	3. Citation/ Order Number 7096343
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)

The company number 1 Fletcher Roof Bolter, approval # 2G-3715-1, operating on the 001-0 mmu is not being maintained in a permissible condition. The area light located on the helper side near the front of the machine allowed a .007 filler gauge to penetrate to 3/4 inch across the flame path. The maximum gauge should only be .003 inch. This area light has less than 123 square inches.

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 75.503
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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 of Equipment

16. Termination Due	A. Date Mo Da Yr 06/14/2004	B. Time (24 Hr. Clock) 0825
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Section III—Termination Action

17. Action to Terminate The area light was tightened to prevent the penetration of the .003 filler gauge.

18. Terminated	A. Date Mo Da Yr 06/14/2004	B. Time (24 Hr. Clock) 0825
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Section IV—Automated System Data

19. Type of Inspection (activity codes) AAA	20. Event Number 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Number [63]

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 6/15

Mine Citation/Order

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

- 9 JUL 2004



Section I—Violation Data

1. Date Mo Da Yr 06/14/2004	2. Time (24 Hr. Clock) 0845	3. Citation/ Order Number 7096564
4. Served To Brent Wolfe Safety director	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 spray type fire suppression on the Joy 14cm15 remote control continuous mining machine, serial number JM 5530, approval # 2G-4159A being operated on the 001-0 mmu section is not properly maintained. When tested, only 2 of the 8 sprays were working. This machine operates under a 40' deep cut plan.

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 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
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr 06/14/2004	B. Time (24 Hr. Clock) 0935
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Section III—Termination Action

17. Action to Terminate The sprays were cleaned and restored to proper operating condition.

18. Terminated	A. Date Mo Da Yr 06/14/2004	B. Time (24 Hr. Clock) 0935
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Section IV—Automated System Data

19. Type of Inspection (activity code)	AAA	20. Event Number 4054425	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, National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman of Small Business Administration, Office of the National Ombudsman, 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

9 JUL 2004

Section I--Violation Data

1. Date Mo Da Yr 06/14/2004	2. Time (24 Hr. Clock) 0945	3. Citation/ Order Number 7096565
4. Served To Brent Wolfe Safety director		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 methane monitor for the Joy 14cm15 remote control continuous mining machine, serial # JM5530, approval #2G-4159A, being operated on the 001-0 mmu is not properly maintained. 1) when tested with a known methane/air mixture of 2.5% methane, the read out at 2.0 would knock the power but when the read out reached 2.4 and 2.5 the power is trying to come on. The lights are going on and off. The power is not fully restoring itself. 2) The strobe light that is provided to alert the machine operator when the methane reached the 1% level is covered with dirt and rock and cannot be observed by the operator

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.342(a)(4)
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Section II--Inspector's Evaluation

10. Gravity:				
A. Injury or illness (has) (is): No Likelihood <input type="checkbox"/> Unlikely <input 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 Disabled <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	
15. Area or Equipment				
16. Termination Due A. Date Mo Da Yr 06/14/2004				
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) ... A A A	20. Event Number 4054425	21. Primary or MII
22. Signatu [ 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 Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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 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, 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

- 9 JUL 2004



Section I—Subsequent Action/Continuation Date

1. Subsequent Action <input checked="" type="checkbox"/> Continuation <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 06/14/2004	3. Citation/ Order Number 7096565 - 01
4. Served To Brent Wolfe Safety director	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

The methane monitor for the Joy 14cm15 miner has been repaired to an operative condition and the strobe light had the rock and dirt removed.

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 4054425		
11. Signature [ 6 ]	AR Number [ 56 ]	12. Date Mo Da Yr 06/17/2004	13. Time (24 Hr. Clock) 0730

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Mine Citation/Order

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

29 JUN 2004

Section I—Violation Data

1. Date Mo Da Yr 06/15/2004	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7096566
4. Served To Brad Hamrick 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 water spray type fire suppression on the Joy 14cm15 continuous miner, company #2, approval #2G-41594-00, operating on the 001-0 mmu is not being maintained. When tested the front spray block on the operators side did not activate. This mines operates under a 40' deep cut plan.

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 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 06/15/2004	B. Time (24 Hr. Clock) 0815
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Section III—Termination Action

17. Action to Terminate The fire suppression sprays were cleaned and restored to operative condition.

18. Terminated	A. Date Mo Da Yr 06/15/2004	B. Time (24 Hr. Clock) 0815
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Section IV—Automated System Data

19. Type of Inspection (activity code)	A A A	20. Event Number 4054425	21. Primary or Mill
22. Signature [ 6 ]			23. AR Number [ 66 ]

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

29 JUN 2004



Section I--Violation Data

1. Date Mo Da Yr 06/15/2004	2. Time (24 Hr. Clock) 0830	3. Citation/ Order Number 7096567
4. Served To Brad Hamrick Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791
8. Condition or Practice		Ba. Written Notice (103g) <input type="checkbox"/>

The Disconnecting devices for the equipment being operated on the 001-0 mnu are not properly identified in conjunction with the circuit breaker to provide visual evidence that the power is disconnected. The #2 shuttle car disconnecting device is plugged into the #8 shuttle car circuit breaker, the #1 scoop charger disconnecting device is plugged into an unidentified circuit breaker, the #5 shuttle car disconnecting device is plugged into the #3 shuttle car 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 75.903
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 06/15/2004	B. Time (24 Hr. Clock) 0900
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Section III--Termination Action

17. Action to Terminate Disconnecting devices were properly identified in conjunction with the circuit breakers.

18. Terminated	A. Date Mo Da Yr 06/15/2004	B. Time (24 Hr. Clock) 0900
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Section IV--Automated System Data

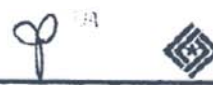
19. Type of Inspection (activity code) AAA	20. Event Number 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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, 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

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Section I—Violation Data

1. Date Mo Da Yr 06/15/2004	2. Time (24 Hr. Clock) 0905	3. Citation/ Order Number 7096568
4. Served To Brad Hamrick 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"/>

An adequate supply of potable drinking water is not provided for the 001-0 mmu section. There is no drinking water on the section.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1718
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Section II—Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 06/15/2004	B. Time (24 Hr. Clock) 1125
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Section III—Termination Action

17. Action to Terminate  
Six gallon of water and cups were provided for the 001-0 mmu section.

18. Terminated	A. Date Mo Da Yr 06/15/2004	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 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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

29 JUN 2004



Section I--Violation Data

1. Date Mo Da Yr 06/15/2004	2. Time (24 Hr. Clock) 0930	3. Citation/ Order Number 7096569
4. Served To Brad Hamrick 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"/>

There is no permanent tag attached to the fire extinguishers to show that a 6 month examination has been done. Locations of the extinguishers( at the 110 pump 1 break inby #3 belt drive 2) at the #3 belt drive KVA box 3) at the #3 belt drive starter 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 75.1100-3
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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 rea- sonably be expected to be: No Lost Workdays <input checked="" type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>	D. Number of Persons Affected: 001
C. Significant and Substantial:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	11. Negligence (check one) A. None <input type="checkbox"/> B. Low <input checked="" type="checkbox"/> C. Moderate <input type="checkbox"/> D. High <input type="checkbox"/> E. Reckless Disregard <input type="checkbox"/>	
12. Type of Action 104(a)	13. Type of Issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>		
14. Initial Action A. Citation <input type="checkbox"/> B. Order <input type="checkbox"/> C. Safeguard <input type="checkbox"/> D. Written Notice <input type="checkbox"/>	E. Citation/ Order Number		F. Dated
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr 06/15/2004	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) AAAA	20. Event Number 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-3a, (Rev. 10/10/03) has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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

8 2 JUN 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 06/15/2004		3. Citation/ Order Number 7096569 - 01	
4. Served To Brad Hamrick Mine Foreman			5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE			7. Mine ID 46-08791		(Contractor)

Section II—Justification for Action

Permanent tags were attached and an examination was done and recorded

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 4054425	11. Signature [Signature]	Number ] [ 6 ]	12. Date Mo Da Yr 06/17/2004	13. Time (24 Hr. Clock) 0615
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Mine Citation/Order

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

12 JUL 2004



Section I--Violation Data

1. Mo Da Yr 06/20/2004	2. Time (24 Hr. Clock) 0610	3. Citation/ Order Number 7096570
4. Served To Lonnie Short Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

The air lock doors, in the track entry two breaks inby the track portal, is not being maintained for the propose that they were built. The outby set of doors were damaged and laying against the rib. The 9 man mantrip was observed going in the mine with both sets of doors open.

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 of Equipment

16. Termination Due	A. Date Mo Da Yr 06/20/2004	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)
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Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054425	21. Primary or Mill
22. Signature [ 6 ]		23. AR Number [ 6 ]

MSHA Form 7000-37 Mar 00 (revised) Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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

2 JUL 2004



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 06/20/2004	Mo Da Yr	3. Citation/ Order Number 7096570 - 01
4. Served To Lonnie Short Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

The air lock doors in the track entry have been repaired to it intended purpose.

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 4054425	Signature E. G. J. C. C.	AR Number	12. Date Mo Da Yr 06/21/2004	13. Time (24 Hr. Clock) 0810
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Mine Citation/Order

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

12 JUL 2004

Section I—Violation Data

Mo Da Yr 06/20/2004	2. Time (24 Hr. Clock) 0730	3. Citation/ Order Number 7096571
4. Served To Lonnie Short 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 001-0 mmu non permissible power center, the 001-0 non-permissible feeder, the non-permissible scoop chargers are being ventilated with return air. The intake air ventilated number 8 working face and then it was coursed towards the common entries where the non-permissible equipment was setting. An air reading was taken with an anemometer and the results were 22,230 cfm of return air. There is no detection of methane and there was no extracting of coal being done at the time of this condition. Back up checks were installed and positive ventilation was restored.

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 75.507
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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"/>	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"/>					

16. Termination Due	A. Date Mo Da Yr 06/20/2004	B. Time (24 Hr. Clock) 0745
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Section III—Termination Action

17. Action to Terminate back up checks were installed and positive ventilation was restored

18. Terminated	A. Date Mo Da Yr 06/20/2004	B. Time (24 Hr. Clock) 0800
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Section IV—Automated System Data

19. Type of Inspection (activity coc)	AAA	20. Event Number 4054425	21. Primary or MIF
22. Signature			23. AR Number

MSHA Form 7000-3, Mar 85 (.....) In accordance with the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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

12 JUL 2004

Section I--Violation Data

1. Date Mo Da Yr 06/20/2004	2. Time (24 Hr. Clock) 0930	3. Citation/ Order Number 7096572
4. Served To Lonnie Short 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 air lock doors, in the #3 entry 2 breaks inby the portal, is not being maintained for the purpose that they were constructed. The inby set of doors were damaged and laying against the rib. A scoop was observed going through the doors with both sets of doors open.

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 75.333(d)(3)
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Section II--Inspector's Evaluation

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

16. Termination Due	A. Date Mo Da Yr 06/20/2004	B. Time (24 Hr. Clock) 1730
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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 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Num. [66]

MSHA Form 7000-3, Mar 03 of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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

12 JUL 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 06/20/2004	3. Citation/Order Number 7096572 - 01
4. Served To Brad Hamrick Mine Foreman	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

The air lock doors in the #3 entry have been repaired to its intended purpose.

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 4054425	
11. Signature [ 6 ] JE67	12. Date Mo Da Yr 06/21/2004	13. Time (24 Hr. Clock) 1010

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6/22*

Mine Citation/Order

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

12 JUL 2004

Section I—Violation Data

1. Date Mo Da Yr 06/21/2004	2. Time (24 Hr. Clock) 0925	3. Citation/ Order Number 7096573
4. Served To Brad Hamrick 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 compressed gas cylinder, (oxygen), located at the #3 coal conveyor belt drive is not secured in the upright position against being accidentally tipped over.

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 75.1106-3(a)(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 checked="" type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. NUMBER OF PERSONS AFFECTED: 001		
11. Negligence (check one)						
A. None <input type="checkbox"/>		B. Low <input type="checkbox"/>		C. Moderate <input checked="" type="checkbox"/>		D. High <input type="checkbox"/>
E. Reckless Disregard <input type="checkbox"/>						
12. Type of Action 104(a)			13. Type of Issuance (check one)			
			Citation <input checked="" type="checkbox"/>		Order <input type="checkbox"/>	Safeguard <input type="checkbox"/>
14. Initial Action			E. Citation/ Order Number		F. Dated Mo Da Yr	
A. Citation <input type="checkbox"/>			B. Order <input type="checkbox"/>		C. Safeguard <input type="checkbox"/>	
D. Written Notice <input type="checkbox"/>						
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr 06/21/2004	B. Time (24 Hr. Clock) 0930
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Section III—Termination Action

17. Action to Terminate The gas cylinder was secured against being tipped over.

18. Terminated	A. Date Mo Da Yr 06/21/2004	B. Time (24 Hr. Clock) 0930
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Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054425	21. Primary or MII
22. Signature [Signature]		23. AR Number [66]

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, 405 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

12 JUL 2004



Section I—Violation Data

1. Date Mo Da Yr 06/27/2004	2. Time (24 Hr. Clock) 2350	3. Citation/ Order Number 7096574
4. Served To Brad Hamrick 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"/>

Two separate and distinct travelable escapeways is not provided for the 001-0 mmu working section. The primary escapeway was blocked by a roof fall located 20' out-by spad #5107. There was no equipment involved in the fall. Measurements are as follows: 15' wide by 6' long by 4 1/2' high.

See Continuation Form (MSHA Form 7000-3a)

B. 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(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 06/28/2004	B. Time (24 Hr. Clock) 0500
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Section III—Termination Action

17. Action to Terminate The stopping line was moved over and a new escapeway was established and properly marked.

18. Terminated	A. Date Mo Da Yr 06/28/2004	B. Time (24 Hr. Clock) 0500
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Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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*  
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Mine Citation/Order

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

12 JUL 2004



Section I--Violation Data

1. Date Mo Da Yr 06/28/2004	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7096575
4. Served To Brad Hamrick 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 failed to submit a bimonthly sample for the designated area sampling point I. D. 90.10, for the sampling cycle of APR-MAY, according to advisory no.0020, dated JUNE 7, 2004

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 71.208(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 06/28/2004	B. Time (24 Hr. Clock) 0800
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Section III--Termination Action

NO termination, since the bimonthly period has passed

18. Terminated	A. Date Mo Da Yr 06/28/2004	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 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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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6/29

Mine Citation/Order  
Continuation

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

12 JUL 2004



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 06/28/2004	3. Citation/ Order Number 7096575 - 01
4. Served To Brad Hamrick 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	71.208(a)	70.208(a)

Reason

issued wrong standard 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 AAA	10. Event Number 4054425
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11. Signature [ 6 ] C 63	AR Number	12. Date Mo Da Yr 06/29/2004	13. Time (24 Hr. Clock) 1318
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Mine Citation/Order

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

12 JUL 2004

K7

Section I—Violation Data

1. Date Mo Da Yr 06/28/2004	2. Time (24 Hr. Clock) 0805	3. Citation/ Order Number 7096576
4. Served To Brad Hamrick Mine Foreman		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791 (Contractor)

8a. Written Notice (103g)

The operator failed to submit a bimonthly sample for the designated area sampling point I. D. 9011, for the sampling cycle of APR-MAY, according to advisory no.0019, dated JUNE 7, 2004

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 71.208(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 06/28/2004	B. Time (24 Hr. Clock) 0805
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Section III—Termination Action

17. Action to Terminate No termination, since the bimonthly period has passed

18. Terminated	A. Date Mo Da Yr 06/28/2004	B. Time (24 Hr. Clock) 0805
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Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054425	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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

12 JUL 2004



Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 06/28/2004	3. Citation/ Order Number 7096576 - 01
4. Mine SAGO MINE		5. Operator ANKER WEST VIRGINIA MINING COMPANY 7. Mine ID 46-08791 (Contractor)

Section II—Justification for Action

Change	From	To
9. C. Part/Section	71.208(a)	70.208(a)
Reason	issued wrong standard 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 AAA	10. Event Number 4054425		
11. Signature [Signature]	AR Number [66]	12. Date Mo Da Yr 06/29/2004	13. Time (24 Hr. Clock) 1326

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429



Section I--Violation Data

1. Date Mo Da Yr 07/07/2004	2. Time (24 Hr. Clock) 1030	3. Citation/ Order Number 7146297
4. Served To Roy Thorne	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

A. Condition or Practice

8a. Written Notice (103g)

Dates, times and initials were not present on the #1 Section, including the working places No. 1 through No. 8, to indicate a preshift examination had been conducted. Three persons were scheduled to work on the section and were performing maintenance work at the time the violation was observed.

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(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: 003

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 <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 07/07/2004	B. Time (24 Hr. Clock) 1120
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Section III--Termination Action

17. Action to Terminate A supplemental examination was conducted with dates, times and initials placed at appropriate locations.

18. Terminated A. Date Mo Da Yr 07/07/2004	B. Time (24 Hr. Clock) 1120
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Section IV--Automated System Data

19. Type of inspection (activity code) CEA	20. Event Number 4076458	21. Primary or Mill
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22. Signatur [Signature]	23. AR Number [67]
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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.

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Mine Citation/Order

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

26 JUL 2004

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E

Section I—Violation Data

1. Date Mo Da Yr 07/12/2004	2. Time (24 Hr. Clock) 1515	3. Citation/ Order Number 7096649
4. Served To Brent Wolfe	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)

The operator failed to submit a Mine Accident, Injury and Illness Report, 7000-1, to MSHA within 10 working days after the occurrence of a 03-05-2004 occupational injury to an underground employee, Marvin Brown, that resulted in lost work days and medical treatment that required surgery. This employee is still not back to work.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety Other <input type="checkbox"/> <input type="checkbox"/> <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 <input checked="" type="checkbox"/> Unlikely <input type="checkbox"/> Reasonably Likely <input type="checkbox"/> Highly Likely <input type="checkbox"/> Occurred <input type="checkbox"/>	B. Injury or Illness could reasonably be expected to be: No Lost Workdays <input checked="" type="checkbox"/> Lost Workdays Or Restricted Duty <input type="checkbox"/> Permanently Disabling <input type="checkbox"/> Fatal <input type="checkbox"/>	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)	
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
13. Type of issuance (check one) Citation <input checked="" type="checkbox"/> Order <input type="checkbox"/> Safeguard <input type="checkbox"/>			
15. Area or Equipment			

16. Termination Due	A. Date Mo Da Yr 07/12/2004	B. Time (24 Hr. Clock) 1530
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Section III—Termination Action

17. Action to Terminate Terminated due to the 7000-1 being submitted by the operator.

18. Terminated	A. Date Mo Da Yr 07/12/2004	B. Time (24 Hr. Clock) 1528
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Section IV—Automated System Data

19. Type of Inspection (activity type)	AAA	20. Event Number 4054300	21. Primary or Mill
22. Sigr	[ 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.

CC BW 7-12-04

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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 07/22/2004	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7147614
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791
8. Condition or Practice		(Contractor) 8a. Written Notice (103g) <input type="checkbox"/>

The roof was not adequately supported or other wise controlled to protect persons from the hazards related to the falls of the roof in the main return of the Sago Mine at 21 x-cut. The top was dislodged from bolt allowing a area to be exposed that measured 8 feet wide, 8 feet long. The bolt was out of the roof 13 inches. This top was loose, gapping, and seperated from the solid top. A second area that was exposed in the same return at 5 to 6 x-cut was 12 feet wide and 6 feet 10 inches from the rib. This return is traveled once a week by the mine examiner.

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  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 Debilitating

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 07/27/2004 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 4054300 21. Primary or Mill  
 22. Signature [Signature] 23. AR Number [66]

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.

*JHR 7/20/04*

Mine Citation/Order  
Continuation

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

16 AUG 2004

Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 07/22/2004	Mo Da Yr	3. Citation/ Order Number 7147614 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY		
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)		

Section II—Justification for Action

Post were set in the affected area

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 4054300	11. Signature [Signature]	AR Number [66]	12. Date Mo Da Yr 08/03/2004	13. Time (24 Hr. Clock) 1000
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MSHA Form 7000-3a, Mar 85 (revised)

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864

Mine Citation/Order

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

5 AUG 2004 MF!

Section I--Violation Data

1. Date Mo Da Yr 07/22/2004	2. Time (24 Hr. Clock) 0850	3. Citation/ Order Number 7147615
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791
8. Condition or Practice		(Contractor)

8a. Written Notice (103g)   
The stopping at spad # 3157 located in the main left return was not maintained to serve the purpose for which it was built. The stopping had a hole in the left side measuring 4 inches wide and 8 inches long.

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(h)
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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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 0915
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Section III--Termination Action

17. Action to Terminate Terminated due to the stopping hole being sealed.

18. Terminated	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 0915
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Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054300	21. Primary or Mill
22. Signatures [Signature] 6 [Signature]		23. AR Number [Signature] 6 [Signature]

MSHA F... In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to 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 7-26-04

Mine Citation/Order

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

- 5 AUG 2004

Section I--Violation Data

1. Date Mo Da Yr 07/22/2004	2. Time (24 Hr. Clock) 0905	3. Citation/ Order Number 7147616
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY
		7. Mine ID 46-08791 (Contractor)
8a. Written Notice (103g) <input type="checkbox"/>		

The # 3 scoop located in the NE Mains MMU 001-0 section was not being maintained in a safe operating condition due to the winch cable had a strand completely broken away from the main cable. The cable was also broken apart at the location where the hook attaches to the cable. This cable winch is used every other night to pull tail pieces on the 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 75.1725(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 07/22/2004	B. Time (24 Hr. Clock) 0930
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Section III--Termination Action

17. Action to Terminate Terminated due to the broken part of the cable being cut out of the cable.

18. Terminated	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 0930
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Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054300	21. Primary or Mill
22. Signature [Signature]		23. AR Number [6]

MSHA Form 7000-35 (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 26 2004



Mine Citation/Order

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

5 AUG 2004

*[Handwritten Signature]*

Section I--Violation Data

1. Date Mo Da Yr 07/22/2004	2. Time (24 Hr. Clock) 1045	3. Citation/ Order Number 7147617
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	

(Contractor)

Ba. Written Notice (103g)

The currently approved roof control plan is not being complied with in the NE Mains MMU 001-0 section. The plan stated that their will be 20 post readily accessible only 16 were available and sufficient cap pieces and wedges were not readily accessible also.

See Continuation Form (MSHA Form 7000-3a)

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

10. Gravity:

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

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

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

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

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

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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 1100
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Section III--Termination Action

17. Action to Terminate Terminated due to the post , wedges, and caps being supplied at a accessible location.

18. Terminated	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 1100
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Section IV--Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054300	21. Primary or Mill
22. Signat		23. AR Number [Handwritten Signature]

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.

*[Handwritten Signature]* 7-20-04

Mine Citation/Order

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

- 5 AUG 2004 *[Signature]*

Section I—Violation Data

1. Date Mo Da Yr 07/22/2004	2. Time (24 Hr. Clock) 1100	3. Citation/ Order Number 7147618
4. Served To Brad Hamrick		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 coal fines were allowed to accumulate at the tail piece on the NE Mains section. A belt roller was turning in the loose coal and black coal fines when the violation was observed. The accumulations when measured were 5 feet long, 4 feet wide and 18 inches deep.

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 07/22/2004	B. Time (24 Hr. Clock) 1130
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Section III—Termination Action

17. Action to Terminate Terminated due to the loose coal and black coal fines being cleaned up at the tail piece.

18. Terminated	A. Date Mo Da Yr 07/22/2004	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 4054300	21. Primary or Mill	23. AP Number [ 6 ]
22. Signature <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 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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7-26-04

Mine Citation/Order

U.S. Department of Labor  
Mine Safety and Health Administration 5 AUG 2004

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Section I--Violation Data

1. Date Mo Da Yr 07/22/2004	2. Time (24 Hr. Clock) 1110	3. Citation/ Order Number 7147619
4. Served To Brad Hamrick	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 ventilation plan is not being complied with in the NE Mains section. The co sensor device at the tail piece exceeded the 40 foot outby. The co device was located 127 feet outby the tail piece on the belt line.

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health <input type="checkbox"/> Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.370(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"/>			
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

15. Area or Equipment

16. Termination Due	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 1120
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Section III--Termination Action

17. Action to Terminate Terminated due to the co sensor device being moved up to the tail piece.

18. Terminated	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 1120
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Section IV--Automated System Data

19. Type of Inspection (activity code)	AAA	20. Event Number /4054300	21. Primary or Mill	23. AR Number [66]
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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 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 7-26-04*

Mine Citation/Order

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

- 5 AUG 2004

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Section I—Violation Data

1. Date Mo Da Yr 07/22/2004	2. Time (24 Hr. Clock) 1120	3. Citation/ Order Number 7147620
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The fire stand located 127 feet out by the feeder in the NE Mains section was not in a useable operative condition due to the nipple missing in the fire stand.

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 75.1100-3
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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
15. Area or Equipment						

16. Termination Due	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 1140
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Section III—Termination Action

17. Action to Terminate Terminated due to a nipple being placed in the fire stand on the belt line.

18. Terminated	A. Date Mo Da Yr 07/22/2004	B. Time (24 Hr. Clock) 1140
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Section IV—Automated System Data

19. Type of Inspection (activity code) AAA	20. Event Number 4054300	21. Primary or Mill	23. AR Number 6
22. Signatur			

MSHA Form 7000-3a, Mar 03 In accordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudsman and 10 Regional Fairness Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudsman annually evaluates enforcement activities and rates each agency's responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-888-734-3247), or write the Ombudsman at 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 7-26-04*

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 07/22/2004	2. Time (24 Hr. Clock) 1125	3. Citation/ Order Number 7147621
4. Served To Brad Hamrick		5. Operator ANKER WEST VIRGINIA MINING COMPANY
6. Mine SAGO MINE		7. Mine ID 46-08791
8. Condition or Practice		8a. Written Notice (103g) <input type="checkbox"/>

The tail piece located in the NE Mains MMU 001-0 was not provided with a fire stand

See Continuation Form (MSHA Form 7000-3a)

9. Violation	A. Health Safety <input checked="" type="checkbox"/> Other <input type="checkbox"/>	B. Section of Act	C. Part/Section of Title 30 CFR 75.1100-2(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
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 07/22/2004	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 4054300	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 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.

*JL 7-26-04*



Mine Citation/Order  
Continuation

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

16 AUG 2004

Section I—Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 07/22/2004	3. Citation/ Order Number 7147621 - 01
4. Served To Brad Hamrick	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

The tail piece was provided with a fire tap for the NE Mains MMU 001-0

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 4054300	
11. AR Number [Handwritten]	12. Date Mo Da Yr 08/03/2004	13. Time (24 Hr. Clock) 0922

Section I--Violation Data

1. Date Mo Da Yr 08/02/2004	2. Time (24 Hr. Clock) 1515	3. Citation/ Order Number 7147196
4. Served To JAMES SWARTZ, SUPERINTENDENT		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) <input type="checkbox"/>

WELL NO. 01502 WAS LOCATED BY THE OPERATOR; HOWEVER, A 300- FOOT DIAMETER BARRIER WAS NOT MAINTAINED AROUND THE GAS WELL. THE OPERATOR HAS MINED THREE CROSSCUTS PAST THE WELL AND THE OPERATOR MINED WITHIN APPROXIMATELY 95 FEET OF THE WELL WHEN THE WELL WAS MINED BY IN THE NO. 7 ENTRY OF THE NORTH MAINS SECTION. THE STATE OF WEST VIRGINIA HAS ISSUED PERMIT NO. UPS-324. THE DISTRICT MANAGER HAS NOT ISSUED A PERMIT TO MINE WITHIN THE 300-FOOT DIAMETER BARRIER.

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 75.1700
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Section II--Inspector's Evaluation

10. Gravity:					
A. Injury or illness (has) (is):	No Likelihood <input checked="" type="checkbox"/>	Unlikely <input type="checkbox"/>	Reasonably Likely <input type="checkbox"/>	Highly Likely <input type="checkbox"/>	Occurred <input type="checkbox"/>
B. Injury or illness could reasonably be expected to be:	No Lost Workdays <input checked="" type="checkbox"/>	Lost Workdays Or Restricted Duty <input type="checkbox"/>	Permanently Disabling <input type="checkbox"/>	Fatal <input type="checkbox"/>	
C. Significant and Substantial:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	D. Number of Persons Affected: 000		

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"/>
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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

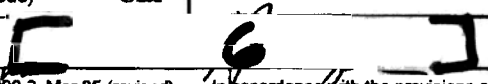
16. Termination Due	A. Date Mo Da Yr 08/06/2004	B. Time (24 Hr. Clock) 0900
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Section III--Termination Action

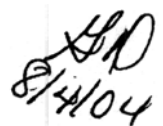
17. Action to Terminate

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

19. Type of Inspection (activity code) CEF	20. Event Number 407721	21. Primary or Mill
22. Signature 		23. AR Number [66]

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.

  
8/4/04

Mine Citation/Order  
Continuation

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

17 AUG 2004



Section I—Subsequent Action/Continuation Data

1. Subsequent Action <input checked="" type="checkbox"/> 1a. Continuation <input type="checkbox"/>	2. Dated (Original Issue) 08/02/2004 Mo Da Yr	3. Citation/ Order Number 7147196 - 01
4. Served To JAMES SWARTZ, SUPERINTENDENT	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

Section II—Justification for Action

THE DISTRICT MANAGER ISSUED A PERMIT FOR MINING WITHIN THE 300-FOOT DIAMETER BARRIER.

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 CEF	10. Event Number 4077211		
11. Signature [Signature]	AR Number [Signature]	12. Date 08/03/2004 Mo Da Yr	13. Time (24 Hr. Clock) 1243

40  
8/4/04



Section I--Violation Data

1. Date Mo Da Yr 08/03/2004	2. Time (24 Hr. Clock) 0825	3. Citation/ Order Number 7147628
4. Served To Brad Hamrick	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 2nd North East Mains section MMU 001-0 in that only 2,245 CFM was measured at the end of the line curtain with a properly calibrated anemometer and the scrubber off. The ventilation plan requires 6,000 CFM at the end of the line curtain with the scrubber off. (Page 2a) The Continuous Miner was cutting coal at the time the violation was observed.

See Continuation Form (MSHA Form 7000-3e)

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

15. Area or Equipment

16. Termination Due A. Date Mo Da Yr 08/03/2004 B. Time (24 Hr. Clock) 0900

Section III--Termination Action

17. Action to Terminate The proper amount of air was supplied to the Continuous Miner.

18. Terminated A. Date Mo Da Yr 08/03/2004 B. Time (24 Hr. Clock) 0900

Section IV--Automated System Data

19. Type of Inspection (activity code) CED 20. Event Number 4076681 21. Primary or Mill

22. Signature [Signature] 23. AR Number [66]

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 9.6.04

Mine Citation/Order

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

01 SEP 2004



Section I--Violation Data

1. Date Mo Da Yr 08/18/2004	2. Time (24 Hr. Clock) 1040	3. Citation/ Order Number 7146299
4. Served To Mike Kelley	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791 (Contractor)	

B. Condition of Practices

Written Notice (103g)

The mine roof was not adequately supported or otherwise controlled in the track entry, on the walkway side, at Break No. 15 of the Mains No. 1 Belt. There were two loose brows at the inby corner of the outby coal block. One brow was approx. 8" thick, 0 to 2' wide and 4' long, the other was 10" thick, 3' long and 0 to 2' wide. These were gapped from the roof and broken away from the rib approx. 1/2".

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 08/18/2004	B. Time (24 Hr. Clock) 1100
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Section III--Termination Action

17. Action to Terminate The brows were easily taken down using a slate bar of proper length.

18. Terminated	A. Date Mo Da Yr 08/18/2004	B. Time (24 Hr. Clock) 1245
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Section IV--Automated System Data

19. Type of Inspection (activity code) CEA	20. Event Number 4076459	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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.

new  
8-23-04



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

22 SEP 2004



Mine Citation/Order

Section I--Violation Data

1. Date Mo Da Yr 09/07/2004	2. Time (24 Hr. Clock) 0745	3. Citation/ Order Number 7147814
4. Served To AI 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 operator is not complying with his approved Smoker's Search Program, according their record book, a search was not was not conducted for the week of 08/29/2004 thru 09/04/2004 for the weekend crew on the afternoon shift. The approved program requires weekly searches and records maintained of such. Terminated time is set, due to the crew only works weekend.

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 75.1702
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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 09/10/2004	B. Time (24 Hr. Clock) 1530
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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 4054300	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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.

CC EP TH  
9/8/2004  
RLS

AW  
9-10-4

Citation/Order  
Continuation

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

7044

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 09/07/2004	3. Citation/ Order Number 7147814 - 01
4. Served To AI SCHOONOVER, SAFETY	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 take out one (was not) in bodily of citation on line (2).

The words (was not) duplicated in the body of 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 AAA	10. Event Number 4054300	11. Signature G J 67	12. Date Mo Da Yr 09/08/2004	13. Time (24 Hr. Clock) 0719
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all  
9-10-4

Mine Citation/Order  
Continuation

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

TCA 

Section I--Subsequent Action/Continuation Data

1. Subsequent Action 1a. Continuation <input checked="" type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 09/07/2004	3. Citation/ Order Number 7147814 - 02
4. Served To AI SCHOONOVER, SAFETY	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 The words (was not) duplicated in the body of citation.

Take out one (was not) in the body of citation on line (2)

See Continuation Form

Section III--Subsequent Action Taken

3. Expires 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 AAA	10. Event Number 4054300		
11. Signature 	AR Number JCG	12. Date Mo Da Yr 09/08/2004	13. Time (24 Hr. Clock) 1118

DBW  
9-10-04

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"/> <input type="checkbox"/>	2. Dated (Original Issue) Mo Da Yr 09/07/2004	3. Citation/ Order Number 7147814 - 03
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 smokers search was conducted for the weekend crew afternoon shift and properly recorded in the book used for that purpose.

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 4054300		
11. Signature <i>[Handwritten Signature]</i>	AR Number JFCJ	12. Date Mo Da Yr 09/13/2004	13. Time (24 Hr. Clock) 1247

*MC*  
*9/14*



Mine Citation/Order

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

09/07/2004 TCA

Section I—Violation Data

1. Date Mo Da Yr 09/07/2004	2. Time (24 Hr. Clock) 0800	3. Citation/ Order Number 7147815
4. Served To AI SCHOONOVER, SAFETY	5. Operator ANKER WEST VIRGINIA MINING COMPANY	
6. Mine SAGO MINE	7. Mine ID 46-08791	(Contractor)

8a. Written Notice (103g)

The operator's record of the required daily examination of the Main fan was not conducted on the following day the mine work: 09/06/2004. Men traveled underground to Pre-shift the mine.

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 75.312(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 09/07/2004	B. Time (24 Hr. Clock) 1045
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Section III—Termination Action

17. Action to Terminate Terminated due to the Main fan being checked and recorded in the book for that purpose.

18. Terminated	A. Date Mo Da Yr 09/07/2004	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 4054300	21. Primary or Mill
22. Signature [Signature]		23. AR Number [66]

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.

CC EA TH  
AL S 9/7/2004

WPL 9/14



**Citations  
7096971 & 7096972  
being withheld  
under FOIA  
Exemption 7(A)**