# **MSHA Handbook Series**



U.S. Department of Labor Mine Safety and Health Administration Coal Mine Safety and Health Metal and Nonmetal Mine Safety and Health

March 2008

Handbook Number PH08-I-1

## CITATION AND ORDER WRITING HANDBOOK FOR COAL MINES AND METAL AND NONMETAL MINES

This handbook sets forth procedures to be followed in writing and issuing citations and orders for health, safety, training, and documentation violations at coal and metal and nonmetal mines. Changes to this handbook must be authorized by the Administrator for Coal Mine Safety and Health and the Administrator for Metal and Nonmetal Mine Safety and Health. Previously issued instructions relating to this subject are superseded by this handbook. Compliance related instructions contained in the MSHA Program Policy Manual are not superseded by this handbook.

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#### DISCLAIMER

The citations and orders shown in the Appendices are examples for illustrative purposes only. Citation and order forms depicted in this Handbook are also for illustrative purposes and may not be an exact duplicate of the actual forms. Citations and orders issued for violations of the Federal Mine Safety and Health Act of 1977, the Mine Improvement and New Emergency Response Act of 2006, or other standards or regulations must depict gravity and negligence determinations reflective of circumstances present at the time of issuance.

## **CHAPTER 1 – INTRODUCTION**

#### I. AUTHORITY

The Federal Mine Safety and Health Act of 1977 (Mine Act) directs an Authorized Representative (AR) of the Secretary of Labor to issue citations and orders when he or she believes that a violation of the Mine Act or any mandatory health or safety standard, rule, order, or regulation promulgated pursuant to the Mine Act has occurred. The Mine Act also authorizes an AR to issue an order of withdrawal when an imminent danger condition exists. Sections 103, 104, and 107 of the Mine Act describe in detail the authority for issuing these citations and orders.

The Mine Improvement and New Emergency Response Act of 2006 (MINER Act) amended the Mine Act. It provides for such things as:

- increased protection for underground coal miners;
- changed reporting requirements for certain accidents occurring at mine sites;
- established a new classification of violations which may be deemed flagrant; and
- a modified civil penalty criteria.

#### **II. PURPOSE**

This handbook is intended to provide guidance for all enforcement personnel in:

- issuing, extending, modifying, vacating, and terminating citations and orders;
- describing the conditions or practices constituting a violation or imminent danger;
- writing clear justification for extensions and modifications of citations and orders;
- adequately describing the area or equipment affected by citations or orders; and
- adequately evaluating the degree of gravity and negligence of the violation.

This handbook has been combined to reflect the uniformity of citation and order writing for both metal and nonmetal and coal enforcement personnel. Procedures, scenarios, and examples in this handbook should be used by all enforcement personnel, except for safeguards which can only be issued by coal inspectors.

#### **III. RESPONSIBILITY**

If, upon inspection or investigation, an AR believes that a mine operator has committed a violation of the Mine Act or any mandatory health or safety standard, rule, order, or regulation promulgated pursuant to the Mine Act, he or she must issue a citation or order to the mine operator. Each citation or order must be in writing and shall describe with particularity the nature of the violation, including reference to the provision of the Mine

Act, standard, rule, regulation, or order alleged to have been violated. In addition, each citation must fix a reasonable time for abatement of the violation.

#### **IV.BACKGROUND**

Mine Safety and Health Administration (MSHA) personnel must constantly strive for accuracy in writing citations and orders. A significant percentage of citations and orders have been overturned during the legal process for reasons such as:

- failure to cite the appropriate standard;
- failure to establish the existence of an imminent danger;
- assumptions or suppositions not based on evidence of facts;
- failure to specifically describe the area of danger or area affected;
- issuance of a 107(a) order for control purposes when no imminent danger exists;
- illegible or confusing writing; and
- failure to properly evaluate the degree of gravity, exposure to the hazard, or the mine operator's negligence.

The description of a violation must be written in such a manner that all parties know the true nature of the situation. The descriptive narrative must include information that clearly establishes a violation and describes with particularity the nature of the violation. The proposed civil penalty prepared by the Office of Assessments is determined, in part, by information contained in the citation or order.

### **CHAPTER 2 - SELECTED PROVISIONS OF THE MINE ACT**

#### I. INSPECTIONS AND INVESTIGATIONS

#### A. Section 103(a)

MSHA must conduct frequent inspections and investigations at coal and other mines each year for the purpose of: obtaining, utilizing, and disseminating information relating to health and safety conditions, the causes of accidents, and the causes of diseases and physical impairments originating in such mines; gathering information with respect to mandatory health and safety standards; determining whether an imminent danger exists; and determining whether mine operators have complied with mandatory health and safety standards, citations, orders, and decisions issued under the Mine Act. Additionally, MSHA must develop guidelines for additional inspections of mines.

#### B. Section 103(j)

Enforcement personnel shall consult with the appropriate District Manager before issuing 103(j) orders of withdrawal. In the event of a mine accident where rescue and recovery work is necessary, MSHA is authorized to take any action deemed appropriate to protect lives, including supervising and directing any mine rescue and recovery effort. The mine operator is required to take measures to prevent destruction of evidence that could assist accident investigators.

#### C. Section 103(k)

In the event of a mine accident MSHA may issue orders deemed appropriate to ensure the safety of any person in the mine. The operator of that mine shall obtain the approval of the MSHA representative, in consultation with state mining agency representatives (if appropriate), regarding any plan to recover any person in the mine, to recover the mine, or to return affected mining areas to normal.

#### **II. CITATIONS, ORDERS AND NOTICES**

#### A. Section 104(a)

If, upon inspection or investigation, an inspector believes that a mine operator subject to the Mine Act has violated this Act, or any mandatory health or safety standard, rule, order, or regulation promulgated pursuant to the Mine Act, he or she shall, with reasonable promptness, issue a citation to the mine operator. Each citation shall be in writing and shall describe with particularity the nature of the violation, including a reference to the provision of the Mine Act, standard, rule, regulation, or order alleged to have been violated. In addition, the citation shall fix a reasonable time for the abatement of the violation. The requirement for the issuance of a citation with reasonable promptness shall not be a jurisdictional prerequisite to the enforcement of any provision of the Mine Act.

#### **B.** Section 104(b)

When an inspector finds that a violation previously cited has not been abated and that the period of time for abatement should not be further extended, he or she must issue a withdrawal order for the cited equipment or that part of the mine affected by the violation. The operator is required by such an order to remove all persons from the area affected, except those persons necessary to correct the violation as referenced in Section 104(c), until the violation is abated.

#### C. Section 104(d)(1) Citations

Upon MSHA's finding of a violation which could significantly and substantially contribute to the cause and effect of a safety or health hazard and is due to the mine operator's unwarrantable failure to comply, such a finding shall be included in any citation issued to the operator.

#### D. Sections 104(d)(1) and 104(d)(2) Orders

If another violation of a mandatory standard, whether significant and substantial or not and which is caused by the mine operator's unwarrantable failure, is found during the same or any subsequent inspection within 90 days of issuance of the 104(d)(1)citation, MSHA shall issue a 104(d)(1) withdrawal order. If an unwarrantable failure violation is observed during any subsequent inspection made after a 104(d)(1) order has been issued, a 104(d)(2) order shall be issued. These two sections provide for the issuance of withdrawal orders that are caused by the mine operator's unwarrantable failure to comply with mandatory safety and health standards.

#### E. Section 104(e)(1)

If MSHA has established that a mine operator has the same pattern of violations by receiving repeat or multiple significant and substantial violations of mandatory MSHA standards, the operator shall be issued a notice that such a pattern exists. Provisions are also made in this section for withdrawing all persons from the affected area if MSHA finds another significant and substantial violation during an inspection within 90 days of issuance of the notice of pattern of violations. The 104(e) withdrawal order remains in effect until MSHA finds the violation has been abated.

#### F. Section 104(e)(2)

Where miners have been withdrawn under Section 104(e)(1), a further withdrawal order shall be issued upon MSHA's finding of a significant and substantial violation during a subsequent inspection.

#### G. Section 104(e)(3)

The pattern of violations that resulted in the issuance of a notice shall be terminated if an MSHA inspection of the entire mine finds no significant and substantial violations of mandatory standards. However, a mine operator can reestablish a pattern of violation status as a result of subsequent significant and substantial violations.

#### H. Section 104(g)(1)

If an inspector finds that any miner has not received the mandatory health and safety training required under Section 115 of the Mine Act, the miner shall be ordered withdrawn from the mine until he or she has completed the required training.

#### I. Flagrant Violations

With the passage of the MINER Act, Section 110(b) of the Mine Act was amended to include:

"Violations under this Section [110(b)] of the Mine Act that are deemed to be flagrant may be assessed a civil penalty of not more than \$220,000. For purposes of the preceding sentence, the term 'flagrant' with respect to a violation means a reckless or repeated failure to make reasonable efforts to eliminate a known violation of a mandatory health or safety standard that substantially and proximately caused, or reasonably could have been expected to cause, death or serious bodily injury."

"Flagrant" violations are an MSHA assessment enforcement tool as are other special assessments. They are applied only to elevated enforcement actions meeting certain criteria. The inspectors' determination of the proper level of enforcement action remains the same. The enforcement actions of 104(d)(1) citations, 104(d)(1) orders, and 104(d)(2) orders and the policies and procedures used to determine their use remains the same without regard to a 'flagrant' designation. More information on this subject can be found in Chapter 4 in this handbook.

#### **III. PROCEDURES TO COUNTERACT DANGEROUS CONDITIONS**

#### **A. Section 107(a)**

If an inspector finds an imminent danger condition or practice existing at a mine, he or she shall issue a 107(a) order withdrawing persons from the affected area or equipment from service. No one may enter the area, except those persons necessary to correct the conditions as referenced in Section 104(c), until MSHA determines that conditions and practices which caused the imminent danger no longer exist.

#### B. Section 107(b)

If an inspector finds that conditions exist at a mine which have not yet resulted in an imminent danger, that such conditions cannot be effectively abated using existing technology, and that an imminent danger cannot be ruled out if mining activities were to proceed, the inspector shall issue a 107(b) notice to the operator informing him or her of such conditions. A copy of this notice shall be filed with the Secretary of Labor and with the representative(s) of the miners. This section also permits MSHA to issue notices, conduct investigations, hold public hearings, and make findings of fact. The appropriate District Manager shall be consulted before these types of actions are issued.

#### IV. MINERS SMOKING OR CARRYING SMOKING MATERIALS IN PROHIBITED AREAS -- SECTION 110(g)

Any miner who willfully violates the mandatory safety standards relating to smoking or the carrying of smoking materials, matches, or lighters shall be subject to a civil penalty assessed by the Commission of not more than \$375 for each occurrence of such violation.

## **CHAPTER 3 - VIOLATION DESCRIPTION AND ISSUING FORM**

#### I. FACTUAL INFORMATION

It is important that factual information, not conclusions, be included in each citation or order. Statements such as "additional roof support is needed" or "adequate fire protection was not provided" may be true but these descriptions do not clearly describe a violation. The former does not describe the condition of the roof or the type and amount of roof supports installed, nor identify a hazard. The latter does not indicate the nature of the fire hazard nor the degree to which protection is not provided.

The citation or order must contain facts sufficient to establish a violation of the standards under the Mine Act and any special circumstances related to the violation, such as "significant and substantial" and "unwarrantable failure" findings.

#### **II. VIOLATION DESCRIPTION**

Essential elements to be considered in a violation description are:

- A. The conditions and practices causing and constituting the violation of a specific regulation or section of the Mine Act. They must be accurately identified and described.
- B. A determination of what caused the violation by clearly describing conditions and practices. This determination is particularly significant when citing violations in conjunction with imminent danger orders and Section 104(d) citations and orders.
- C. The location or equipment where the violation or hazard exists. This element <u>must</u> be specifically identified for several reasons:
  - 1. It serves as notification to the mine operator for abatement purposes;
  - 2. It informs the miners and miners' representative(s) of the exact location of the hazard; and
  - 3. It serves as clarification for inspectors on abatement visits.
- D. Information concerning gravity and negligence. This information must be provided so an accurate determination of the proposed civil penalty can be made.
- E. Information concerning the hazard, exposure, or lack of exposure to miners. Some mandatory standards require that exposure be shown to support a citation or order.
- F. Facts relevant to the mine operator's knowledge of the violative condition or practice.

#### III. CITATION, CONTINUATION, SUBSEQUENT ACTION, AND ORDER FORMS

- A. MSHA Form 7000-3 shall be used for issuing citations, orders, 110(g) notices, and the initial pattern of violations notice.
- B. MSHA Form 7000-3a shall be used for continuations and subsequent actions for citations, orders, and pattern of violations notices.
- C. Each set of forms are usually distributed as follows:

| Original    | - | mine operator                         |
|-------------|---|---------------------------------------|
| Second page | - | MSHA inspector                        |
| Third page  | - | miners' representative, if applicable |

- D. Computer generated citations/orders require an original signature for each printed copy.
- E. Distribution of the computer copies will be the same as for the hand written copies.

### **CHAPTER 4 - CITATIONS AND ORDERS**

These procedures shall be followed when completing Mine Citation/Order Form 7000-3 unless otherwise specified. The items referenced below correspond to the appropriate sections on Form 7000-3. Many of the documentation procedures in this Handbook do not include, for redundancy purposes, completion of Section IV of the Citation/Order or Continuation forms.

#### I. COMPLETING MINE CITATION/ORDER FORMS

#### A. Section I - Violation Data

- 1. Date Enter the issue date by using the following format for the month, day, and year mm/dd/yyyy (e.g., 01/07/2008).
- 2. Time Enter the time of the violation with a four-digit number based on a 24 hour clock (military time, e.g., 22:30)
- 3. Citation/Order Number The seven-digit number preprinted on the 7000-3 Form or generated by an inspector's computer.
- 4. Served To Enter the first and last name of the operator (or operator's agent) and title to whom the citation or order is served.
- 5. Operator Enter the official business name of the mining company as shown on the MSHA Legal Identity Report Form 2000-7 in effect at the time the violation occurred. Enter the name of the independent contractor if a contractor is being cited.
- 6. Mine Enter the mine name as shown on the Legal Identity Report Form in effect at the time the violation occurred.
- 7. Mine ID Enter the seven-digit MSHA mine identification (ID) number. If applicable, also enter the contractor's three or four digit MSHA ID number.
- 8. Condition or Practice Provide a detailed description of the condition(s) or practice(s) which causes and constitutes a violation or an imminent danger. If more space is needed, check the "Continuation" block in the lower right hand corner of Item 8 and use a Mine Citation/Order Continuation Form 7000-3a.
- 8a. Written Notice This block is for coal inspectors to use when a violation is cited during any inspection conducted as a result of a written complaint. Coal inspectors should not use this block for any violation other than those issued as a result of the complaint. This does not alter the type of inspection that is ongoing.

#### 9. Violation

- A. Health, Safety, and Other These blocks are for coal inspectors to use to mark whether the cited hazard relates to health, safety, or other (administrative). For violations of 30 CFR 75.370, coal inspectors may mark both the health and safety blocks.
- B. Section of Act Enter the applicable section [e.g., 103(a), 104(b)] here if a section of the Mine Act has been violated, otherwise leave blank.
- C. Part/Section of Title 30 CFR Identify the Part and Section of Title 30 CFR violated including the subparagraphs of the section violated.

**Exception:** <u>Do not</u> complete Item 9C if a 107(a) imminent danger order is cited without a violation of a mandatory health or safety standard. Refer to Section XVII in this chapter for further guidance concerning 107(a) imminent danger orders.

#### **B.** Section II - Inspector's Evaluation

- 10. Gravity
  - A. Injury or Illness (has)(is) Check the appropriate block based on the facts available.
  - B. Injury or Illness Could Reasonably Be Expected To Be Check the appropriate box based on the facts available.
  - C. Significant and Substantial Check the appropriate box based on the evaluations made in 10A and 10B. Violations of sections of the Mine Act, (e.g., denials of entry or interference with MSHA investigations) which do not violate a mandatory standard, must always be designated as "non significant and substantial." For these violations, Section II, item 10A shall be evaluated as "No Likelihood", item 10B will be marked "No Lost Workdays", and 10C shall be checked "No." Violations of interim mandatory health and safety standards found in Title 2 and Title 3 of the Mine Act not superseded by mandatory health and safety standards can be cited as "S&S" based on the evaluations made in 10A and 10B. Refer to the "S&S" criteria in Section VI in this chapter for further guidance.
  - D. Number of Persons Affected Enter the number of persons who were actually injured or became ill as a result of the hazard caused by the violation or the number of persons who could or would be affected if the anticipated event occurred.

- 11. Negligence Enter the degree of negligence by checking one of the appropriate boxes. Refer to the "negligence" criteria in Section IX in this chapter for guidance (Section 10 "Gravity" and Section 11 "Negligence" are not to be completed for 103(j), 103(k), 107(a) and 104(b) orders.
- 12. Type of Action Identify the Section of the Mine Act under which action is being taken [e.g., 104(a), 104(d)(1)].
- 13. Type of Issuance The "Safeguard" block is for Coal use only. Check the "Citation," or "Order," or "Safeguard" block for the appropriate type of issuance. The "Written Notice" block is to be used by District Managers when issuing the initial 104(e) Pattern of Violations Notices. It is also used by inspectors when issuing 110(g) notices for miners smoking or carrying smoking materials in prohibited areas.
- 14. Initial Action Check block "A" or "B" or "D" for the type of initial issuance, if appropriate, that subsequently resulted in this action. The "Safeguard" block (block "C") is for Coal use only.
  - E. Citation/Order Number Enter the seven-digit preprinted control number from the initial action.
  - F. Dated Enter the date of the initial action.
- 15. Area or Equipment This pertains only to orders of withdrawal [i.e., 104(b), 104(d), 104(e), 104(g), 107(a), 103(j) and 103(k)] and must indicate the area from which employees shall be withdrawn until the dangerous conditions and causes of those conditions have been corrected. Equipment should be identified by manufacturer, model, serial number (if known), color, and name, etc. if it is ordered removed from service.

**Note:** The phrase "No Area Affected" should be written in this space if this is a technical order of withdrawal [e.g., 104(b) order for failure to complete Part 50 employment or injury reporting reports.

16. Termination Due Date and Time (A and B) - Enter the date and time the mine operator is required to have the violation corrected. These blocks are left blank for orders of withdrawal.

#### C. Section III - Termination Action

17. Action to Terminate - Describe in detail the specific action(s) taken to correct the cited condition(s) or practice(s) which justifies termination. Do not write terms like "The condition was corrected."

18. Terminated Date and Time (A and B) - Enter the date and time the termination was issued.

#### **D.** Section IV - Automated System Data

- 19. Type of Inspection (Activity Code) Enter the appropriate enforcement activity code.
- 20. Event Number Enter the preprinted event number from the Inspection/Investigation Data Summary Form 4000-40 for M/NM and from the Mine Activity Data Form 2000-22 for Coal.
- 21. Primary or Mill This block is for metal and nonmetal inspectors. They should enter the letter "P" if the violation occurred in the production or primary mining phase of the operation. Generally, an entry of "P" includes activities and/or equipment from the mining site up to, but not including, milling processes. Enter the letter "M" if the violation occurred in the milling phase of the operation.

**Exception:** Violations cited at free standing mills with a separate Mine ID number should have "P" entered in this space.

- 22. Signature The signature of the inspector issuing the citation or order must be entered in this block.
- 22. AR Number Enter the AR number of the inspector issuing the citation or order.

#### II. SECTION 103(a) - CITATIONS FOR DENIAL OF ENTRY

#### A. Denial of Entry - Established MSHA Mine ID Number

When a mine operator or his or her agent directly refuses to allow an inspector entry to an active mining operation having an MSHA mine ID number, the inspector must issue a Section 104(a) citation citing Section 103(a) of the Mine Act and immediately contact his or her supervisor. The inspector must either hand deliver or mail the citation to the mine operator certified mail, return receipt requested.

**Note:** In the rare instances that these types of violations are issued, inspectors and supervisors should discuss them with the district office and/or regional solicitor prior to issuance. These violations are frequently litigated and are often contentious so consultation and coordination with all parties prior to issuance will assure that everyone understand the situation and are in agreement with the actions being taken.

#### B. Denial of Entry - No Established MSHA Mine ID Number

The inspector must notify his or her supervisor to determine whether or not the mining operation falls under the jurisdiction of the Mine Act. If it is subsequently

determined that the operator is engaged in mining or milling activities and if entry is denied to a mine that does not have an MSHA mine ID number, a mine ID number should be obtained based on the information that has been acquired.

After the mine ID number has been obtained, the field office supervisor and inspector should return to the mine, or make arrangements to meet with the mine operator, and request access under the provisions of the Mine Act.

#### C. Other Forms of Denial of Entry

Denial of right of entry procedures also apply when inspectors have been granted entry but are not allowed to inspect or to continue an inspection or investigation. These procedures apply to any type of interference whether it be delay, harassment, or personal assault.

In all such cases, except personal threats or assault, the inspector should try to communicate with the mine operator, explaining the entry and inspection rights of MSHA under Section 103(a) of the Mine Act.

MSHA policy requires that an inspector leave the scene where an apparent violation of Section 111 of Title 18 of the United States Code is about to occur. To avoid a confrontation, inform the person(s) involved that an attack on an MSHA inspector is a Federal crime and that they may be subject to arrest. If the inspector believes that he/she is subject to physical harm or assault, he/she should leave the property immediately and promptly notify his/her supervisor.

#### D. 104(b) Orders - Denial of Entry

A Section 104(b) order of withdrawal must be issued if the operator still refuses entry after a Section 104(a) citation has been issued. Injunctive proceedings may be initiated by the District Manager if the operator does not comply with the order. Section XIX in this chapter details procedures on issuing 104(a) citations if the operator works in the face of an order of withdrawal.

**Note:** In the rare instances these types of violations are issued, supervisors should discuss them with the district office and/or regional solicitor prior to issuance. These types of violations are frequently litigated and are often contentious so consultation and coordination with all parties prior to issuance will assure that everyone understand the situation and are in agreement with the actions being taken.

#### E. Documentation for Denial of Entry

1. On a Mine Citation/Order Form, fill out the other blocks as you normally would and then:

- a. After the violation description has been entered in Section I, item 8, the following sentence shall be added: The condition has not been designated as "significant and substantial" because the conduct violated a provision of the Mine Act rather than a mandatory safety or health standard.
- b. Enter "103(a)" in Item 9B. Leave Item 9C blank since a standard is not violated.
- c. Complete Items 10A through 10D, Item 11, and enter "104(a)" in Item 12. Note: Item 10C must be marked "no."
- d. Check the "Citation" block in Item 13 and leave Item 15 "Area or Equipment" blank.
- e. In Item 16 enter the "Termination Due Date and Time." Terminate the citation if entry is permitted.
- 2. On an Order of Withdrawal, fill out the other blocks as you normally would and then:
  - a. Enter "103(a)" in Item 9B and leave Item 9C blank.
  - b. Do not complete Items 10A through 10D and Item 11. In Item 12 enter "104(b)" and check the "Order" block in Item 13.
  - c. In Item 14 check the "Citation" block and enter the number of the denial of entry citation and the date it was issued.
  - d. In Item 15 enter "No Area Affected" and leave Item 16 blank. Terminate the order if entry is permitted.
- 3. In Item 19 enter the appropriate "Type of Inspection" MIS code for the inspection type that was intended if the inspection occurs.

#### III. SECTION 103(j) AND 103(k) ORDERS

After a mine accident defined in 30 CFR Part 50.2 has occurred, an AR may assume the authority to take whatever action is necessary to <u>protect the health, safety, and life of any person</u> under Section 103(k) of the Mine Act.

A 103(j) or 103(k) order **<u>should not</u>** be solely issued to preserve accident evidence since the mine operator is required to take this action under 30 CFR Part 50.12.

If the operator does not preserve accident evidence, it is appropriate to issue a 104(a) citation citing Part 50.12. This 104(a) citation should not be issued unless pertinent accident evidence has been removed, changed or destroyed.

# INSPECTORS SHALL NOT ISSUE 103(j) ORDERS UNTIL CONSULTING WITH THE APPROPRIATE DISTRICT MANAGER.

#### A. Accident and Rescue/Recovery Procedures

Inspectors will generally use Section 103(k) to protect the safety of any person in the mine when a mine condition exists as a result of an accident that threatens the safety of miners. The 103(k) order does not preclude the issuance of a Section 107(a) order if an imminent danger situation is found. It is imperative that discretion and good judgment be exercised by inspectors when using the broad authority provided by the Mine Act.

In instances where an accident has resulted in the death or serious injury to a miner and the inspector believes that the hazardous condition(s) or practice(s) causing that accident is likely to exist elsewhere at the mine, the Section 103(k) order shall include all such areas of the mine. In some instances it will be obvious that the conditions are peculiar to the accident site, and, therefore, the Section 103(k) order would not apply to areas other than the accident site.

The 103(k) order should remain in effect until a systematic evaluation of the conditions and safety practices is conducted and a determination is made that hazards similar to those which caused or contributed to the accident have been eliminated. The evaluation can be made prior to the accident investigation or concurrent with it. After this evaluation and determination has been made, the Section 103(k) order may be modified to permit an area of the mine to resume operations, or terminated, provided that such action will not pose a hazard to the miners.

#### B. Differences Between Sections 103(j), 103(k), and 107(a) Orders

Section 107(a) orders contain an exception to the requirement to withdraw persons from the affected area(s) under Section 104(c).

Section 104(c) of the Mine Act states that certain persons are not required to be withdrawn or prohibited from entering any mine area. This refers to persons who, in the judgment of the mine operator or the inspector, are necessary to eliminate the conditions described in the order.

Sections 103(j) and 103(k) of the Mine Act contain no exceptions. If an inspector believes it is necessary to protect the life or safety of any person, even those persons mentioned in Section 104(c) may be prohibited from entry into a mine area. This exclusion would be noted in the written narrative of the 103(j) or 103(k) order.

The issuance of a Section 103(k) order does not preclude the issuance of a Section 107(a) order should an imminent danger situation be found. Additionally, a 103(k) order will not be used as a substitute for, or in place of, a 107(a) imminent danger order.

#### C. Documentation for 103(j) and 103(k) Orders

1. Section I of Form 7000-3: fill out the other blocks as you normally would and then:

Item 8 - describe in detail what has occurred and what the mine operator is required to do.

Item 9 - leave blank.

2. Section II of Form 7000-3:

Items 10 and 11 - leave blank.

Item 12 - enter "103(j)" or "103(k)" whichever is applicable.

Item 13 - check the "Order" box.

Item 14 - leave blank.

Item 15 - provide a detailed description of the area or equipment affected.

Items 16, 17, and 18 - leave blank.

#### IV. SECTION 104(a) CITATIONS

Section 104 citations are the primary tool for obtaining compliance with the Mine Act, mandatory health, safety, training, and other standards, rules or regulations.

A Section 104(a) citation must set forth:

- a violation of a standard, regulation, or section of the Mine Act;
- the degree of hazard that exists;
- the degree of exposure to the hazard; and
- the degree of negligence by the mine operator.

The time fixed for abatement of a violation shall be determined, whenever practical, after a discussion with the mine operator or the operator's agent. Inspectors shall give primary consideration to the health and safety of miners in establishing abatement times for all citations.

#### V. GRAVITY CRITERIA

A. The inspector's evaluation of gravity relative to the citation or order requires a weighing of factors in three general areas:

- the likelihood of an occurrence of the injury or illness against which the standard is directed;
- the gravity of the injury or illness if it has occurred or were to occur; and
- the number of persons affected if the event or injury occurred or were to occur. The number of persons affected is the number of persons who would be expected to be injured if an accident or overexposure occurred as a result of the violation.

Note: When describing persons affected, do not write "or more" or "1 or 2."

The degree of hazard and exposure documented will determine the significant and substantial (S&S) rating in Section II of the Mine Citation/Order Form.

B. "Number of Persons Affected" (Item 10D) are all miners that were or could be affected if the event occurred, were to occur, or was allowed to continue to occur. This number can vary, depending on mining conditions, the hazard, and the area of exposure. For example, the "Number of Persons Affected" would be the total number of miners for conditions that are affecting or that could affect a number of miners such as the scenarios below:

- **Scenario:** A citation was issued for an overexposure to noise. The inspector determined that the crusher operated three shifts, seven days a week and that one miner worked in the crusher area performing the same duties on each of the three shifts. The total "Number of Persons Affected" for this violation would be 3.
- **Scenario:** A citation was issued for overexposure to respirable dust for the designated occupation on a mechanized mining unit (MMU). The inspector determined that 7 miners worked on the MMU on each of three shifts. The total "Number of Persons Affected" for this violation would be 21.
- **Scenario:** A citation was issued because a mine operator was not complying with the Approved Mine Emergency Evacuation and Firefighting Program of Instruction. The inspector determined that 10 miners worked underground on one shift. The total "Number of Persons Affected" for this violation would be 10.
- **Scenario:** A citation was issued to a mine operator for a front end loader not having effective service brakes. The inspector determined that one miner operated the loader on each of three shifts. The total "Number of Persons Affected" would be 1. Since only one miner was exposed at a time to the hazard then only one miner could reasonably be expected to be injured or killed if the event were to occur.

**Scenario:** An "S&S" violation was issued to a mine operator for two miners working on a crusher without the machinery's controls having been locked or tagged as being out of service. The inspector determined that the two miners were the only persons working on the crusher and that work was not performed on the machinery on other shifts. The total "Number of Persons Affected" would be 2.

#### VI. "S&S" CRITERIA

By checking "Yes" in Item 10C ("S&S"), the inspector has indicated that based upon the particular facts surrounding the violation there exists a reasonable likelihood the hazard contributed to will result in an injury or illness of a reasonably serious nature.

Violations of Sections of the Mine Act, without an accompanying mandatory standard, shall be designated as "non significant and substantial." For these violations, Section II, item 10A shall be evaluated as "No likelihood", item 10B will be marked "No Lost Workdays", and item 10C shall be checked "No." These violations shall also have the following written in the body of the violation description in Section I, item 8:

"The condition has been designated as "non significant and substantial" because the conduct violated a provision of the Mine Act other than a mandatory safety or health standard."

#### Violations of interim mandatory health and safety standards found in Title 2 and Title 3 of the Mine Act not superseded by mandatory health and safety standards can be cited as "S&S" and evaluated as flagrant based on the evaluations conducted in Items 10A and 10B of the Citation/Order form.

The below table specifies what violations can and cannot be designated as "S&S."

| 30 CFR regulations which <b>CANNOT</b> be | 30 CFR health and safety standards which       |
|---|--|
| evaluated as "S&S"                        | CAN be evaluated as "S&S"                      |
| 40, 41, 43, 44, 45, 50 (except 50.10)     | 46, 47, 48, 49, 50.10, 56, 57, 58, 62, 70, 71, |
|   | 72, 75, 77, 90                                 |

In determining whether conditions or practices created by a violation could significantly and substantially contribute to the cause and effect of a mine safety or health hazard, inspectors must determine:

- whether there is an underlying violation of a mandatory health or safety standard;
- whether there is a discrete safety or health hazard -- that is, a measure of danger to safety or health -- contributed to by the violation;
- whether there is a reasonable likelihood that the hazard contributed to will result in an injury or illness; and

• whether there is a reasonable likelihood that the injury or illness in question will be of a reasonably serious nature.

#### <u>All of these determinations must be made before a violation can be designated as</u> <u>''significant and substantial.''</u>

The Federal Mine Safety and Health Review Commission (Commission) has determined that "...the relevant time frame for determining whether a reasonable likelihood of injury exists includes both the time that a violative condition existed prior to the citation and the time that it would have existed if normal mining operations had continued." **The violation would be evaluated as ''S&S'' if miners were not in the area when the violation was observed, but they had been, would be, or could be if normal mining operations were to continue and the other ''S&S'' criteria were met.** The Commission has also held that in evaluating the reasonable likelihood of a fire, ignition, or explosion, one must examine whether a "confluence of factors" is present based on the particular facts surrounding the violation.

**Note:** Under the "confluence of factors" test, the Commission generally looks to see if there are both fuel and ignition sources. For example, the Commission has held that there was no "confluence of factors" necessary to support a finding that violations consisting of impermissible equipment were "S&S" where methane concentration levels at the time of the violations were below the level necessary for ignition, there had never been a methane ignition or explosion at the mine, there was no evidence that methane concentrations in the ignitable or explosive range had ever been detected at the mine, and there was no evidence that other ignitable fuel was present. This process should be utilized to determine if violations are "S&S."

A violation must remain "S&S" if it is properly evaluated as "S&S" at the time it was observed. The mine operator or contractor might withdraw equipment, or personnel, or immediately proceed to correct the violation. However, <u>none</u> of these actions would alter the citation's "S&S" evaluation.

Certain conditions may require citing violations on equipment or machinery that the mine operator has designated as "removed from service." See Chapter 7, Section XII, in this Handbook for what actions constitute "removed from service." If defective machinery or equipment was damaged and designated as "removed from service" by the mine operator as the result of an accident, a subsequent MSHA investigation might determine that violations existed on the machinery or equipment prior to being damaged. In this case, citations or orders (as appropriate) should be issued for those violations.

The violation shall not be evaluated as "S&S" when any of the following blocks - "No Likelihood," "Unlikely," or "No Lost Workdays" - are checked in Item 10 of the Mine Citation/Order Form.

The "Occurred" block can only be checked when an injury or illness actually occurs. Gravity evaluations, for violations where an injury or illness has not occurred, are based on the probability of the occurrence of the injury or illness and on the expected results if the injury or illness was to occur.

#### Examples of properly evaluated violations -

- Scenario: (Referencing 56/57.14107 or 77.400) Persons were working next to the stacking conveyor while it was in motion. They were reasonably likely to come in contact with the unguarded moving machine parts of the #2 self-cleaning tail pulley. (Reasonably Likely; Permanently Disabling; "S&S" Yes)
- Scenario: (Referencing 56/57.14107 or 77.400) A guard was not provided on the #2 self-cleaning tail pulley of the stacking conveyor. Persons did not work or travel in the area on any shift while the machinery was running. The conveyor was turned off and locked out when maintenance was performed. (Unlikely; Permanently Disabling; "S&S" No)
- Scenario: (Referencing 56/57.14107 or 77.400) A guard was not provided on the #4 self-cleaning tail pulley adjacent to the walkway. Persons were not in the area and the tail pulley was not in operation at this time. However, persons had been in the area and the equipment had been operating on the previous shift with the guard off. The tail pulley was not out of service, however, and it was scheduled to operate when night shift operations began later today. Personnel travel on the walkway next to the energized tail pulley during the night shift. (Reasonably Likely; Permanently Disabling; "S&S" Yes)

#### Examples of improperly evaluated violations -

Scenario: (Referencing 56.14107) The #2 conveyor motor V-belt drive was not guarded and persons were not in the area at the time. (Unlikely; Permanently Disabling; ''S&S'' - No)

This evaluation is not correct. It is based on the insufficient reason that miners were not in the area at the time the violation was observed. There must be documented evidence that based on past, present, and continued mining operations, that miners had not or would not be in the area for the violation to be properly be evaluated as "non-S&S." Further, a statement that "the machinery was not operating at this time" is not sufficient reason for evaluating a violation as "non-S&S."

**Scenario:** A loader was observed parked and not operating at the time of inspection. It did not have the required seat belts installed. The inspector determined that the machine was used as a spare and was not out of service. The inspector did not issue a citation for the lack of seat belts. The rationale used by the inspector was that the loader was not operating at the time he or she observed the violation.

This evaluation is not correct - a violation was observed on mobile equipment that could be started and used any time subjecting miners to possible injury or death. A citation shall be issued for all violations found on equipment or machinery not taken out of service and tagged prior to being inspected by MSHA.

# Example of an injury or illness occurring and the results are less than could have been expected -

**Scenario:** A miner was trapped in a bin for an hour, but emerged with only minor injuries. However, a more severe injury could have been expected given the facts of the entrapment.

Assuming a violation was observed that directly related to the entrapment, it would at least be evaluated as "Reasonably Likely" and "Fatal" rather than "Occurred" and "No Lost Workdays." These types of violations shall be based on the expected, rather than the actual results, and would be evaluated as "Reasonably Likely" and the expected injury or illness.

#### Example of an event occurring and the results are equal to or more than expected-

**Scenario:** A miner was hit in the head with a small rock and later dies as a result of the injury.

Assuming a violation was observed that directly related to the miner being injured, the violation would be marked "Occurred" and "Fatal." These types of violations shall be based on the actual, rather than the expected, results and would be evaluated as "Occurred" along with the actual injury.

#### VII."NON-S&S" CRITERIA

"Non significant and substantial" violations are those violations where an inspector has determined that there is no likelihood of injury or illness, or that the injury or illness is unlikely, or that the injury or illness would not result in lost workdays. When a mine operator is cited for a violation of a section of the Mine Act or a violation of Parts 40, 41, 43, 44, 45, or 50 (excluding 50.10), inspectors will evaluate the violation as "non-S&S."

Scenario: The mine operator failed to notify MSHA of their legal identity by completing and submitting an MSHA Form 2000-7 (Legal Identity Report) to the appropriate MSHA district manager.(30 CFR 41.13)

In this situation, the citation would be evaluated with "Unlikely" marked in Item 10A; "No Lost Workdays," in Item 10B; and the "No" box in Item 10C.

#### VIII. MODIFYING CITATIONS TO "NON-S&S"

An "S&S" citation may be reduced to "non-S&S" only if:

- the "S&S" determination was made in error;
- evidence is presented to the inspector or other MSHA officials (e.g., Conference Litigation Representative) justifying a modification to "non-S&S";
- the determination of "S&S" is modified on the recommendation of the Office of the Solicitor; or
- the determination of "S&S" is modified by an Administrative Law Judge.

The specific reason(s) for an inspector to modify an "S&S" violation to "non-S&S" <u>must</u> <u>be documented on MSHA Form 7000-3a</u>. A violation has to meet the minimum criteria of "Reasonably Likely" and "Lost Workdays or Restricted Duty" to have been evaluated as "S&S." Therefore, to re-evaluate the citation or order to "non-S&S," at least one of those requirements must be reduced to a lower evaluation and the specific reason(s) for the change documented. The modification must also indicate that the "S&S" block in Item 10C is changed to "No."

Note – See example in Appendix A (Safety Violations) of this Handbook.

#### IX. NEGLIGENCE CRITERIA

Negligence has been defined in 30 CFR 100.3(d) as "...conduct either by commission or omission which falls below a standard of care established under the Mine Act to protect miners against the risk of harm." The level of knowledge that mine operators had or should have had regarding conditions or practices that could affect the safety and health of miners, the greater the degree of neglect exhibited by the operator. The facts as documented must support the degree of negligence checked on the Mine Citation/Order Form.

Negligence for unwarrantable failure violations has been defined as aggravated conduct constituting more than ordinary negligence. Further, the MINER Act has defined a flagrant violation as one where there is "...a reckless or repeated failure to make reasonable efforts to eliminate a known violation of a mandatory safety or health standard that substantially and proximately caused, or reasonably could have been expected to cause, death or serious bodily injury."

Degrees of negligence are generally defined as:

**No Negligence** The operator exercised diligence and could not have known of the violative condition or practice.

| Low Negligence      | The operator could have known of the violative condition or practice but there are considerable mitigating circumstances. |
|---------------------|---|
| Moderate Negligence | The operator could have known of the violative condition or practice but there are some mitigating circumstances.         |
| High Negligence     | The operator knew or should have known of the violative condition or practice and there are no mitigating circumstances.  |
| Reckless Disregard  | The operator displayed conduct which exhibits the absence of the slightest degree of care.                                |

#### X. MITIGATING CIRCUMSTANCES

Mitigating circumstances may include but are not limited to action(s) taken by the operator to prevent or correct hazardous conditions or practices. Mine operators are required to be on alert for conditions or practices in the mine that affect the safety or health of miners and to take the steps necessary to correct or prevent hazardous conditions or practices. The mine operator or contractor might withdraw equipment, personnel and/or immediately proceed to correct the violation but <u>none</u> of those actions taken after they have been cited alters the negligence evaluation made by the inspector when the violation was cited.

#### XI. NOTICE TO PROVIDE SAFEGUARDS

Section 314(b) of the Mine Act is specific to coal only and is intended for use in regards to minimizing haulage and hoisting related hazards with respect to the transportation of men or materials that are identified at a specific mine.

When preparing for an inspection, an inspector must review the safeguard summary sheet in the uniform mine file so that he/she knows what safeguards have been previously issued for the mine. The inspector should also be familiar with the requirements for each safeguard.

When an inspector identifies a hazard specific to the mine and similar to those already identified in 30 CFR, Subpart O, Sections 75.1403-2 through 75.1403-11, he/she will issue a notice to provide safeguards to the mine operator if one has not been previously issued. Refer to Appendix A (Safety Violations) of this Handbook for further guidance. In those cases where the provisions of a safeguard notice are found to be violated at a mine, a citation or order will be issued as appropriate. The safeguard originally issued will be referenced in the initial action block on the Mine Citation/Order Form 7000-3.

#### XII. SECTION 104(b) ORDERS

Inspectors shall review the circumstances when the time fixed for a citation's abatement has expired. In determining whether to issue a Section 104(b) order, the inspector must

determine whether there is a reasonable basis for extending the abatement date. If an extension of time is not justified and the cited condition or practice is not abated, the inspector must issue a Section 104(b) order of withdrawal. Upon abatement of the condition or practice cited in the original citation, the order can be terminated.

Chapter 7 in this handbook details the action to be taken if the mine operator files for a petition for modification or appeals a violation to the Federal Mine Safety and Health Review Commission.

A 104(b) order will not be issued when other orders of withdrawal are not complied with. See Section XIX in this chapter regarding mine operators who work in violation of an order of withdrawal.

#### **Documentation for Section 104(b) Orders**

- 1. Section I of Form 7000-3: fill out the other blocks as you normally would and then:
  - Complete Item 9B with the appropriate section of the Mine Act if a section [e.g., Sections 103(j) or 103(k)] is violated.
  - If appropriate, complete Item 9C with the standard violated.
  - Do not complete Items 10A through D or Item 11.
  - **Do not** modify the initial citation to make the negligence or gravity higher than was marked on the initial citation.
- 2. Enter 104(b) in Item 12 and check the "Order" block in Item 13.
- 3. Check the "Citation" block in Item 14A; enter the initial citation number in Item 14E and the date of citation issuance in Item 14F.
- 4. Complete Item 15 "Area or Equipment" with the area or equipment affected by the order. Enter the phrase "No Area Affected" if this is a technical violation.
- 5. Do not complete item 16A or B.
- 6. A 104(b) order does not require the completion of a Special Assessment Review Form or a Possible Knowing/Willful Violation Review Form.
- 6. Terminate the 104(b) order when the out of compliance condition(s) is/are corrected.

#### XIII. SECTION 104(d) CITATIONS AND ORDERS

#### A. Criteria for Issuing a 104(d)(1) Citation

A 104(d)(1) citation shall be issued if:

- 1. there is a violation of a mandatory health or safety standard;
- 2. the violation significantly and substantially contributes to the cause and effect of a mine safety or health hazard; and
- 3. there is an unwarrantable failure of the mine operator or contractor to comply with the standard.

**Note:** A violation of a section of the Mine Act cannot be issued as a 104(d) citation or a 104(d) order even if the negligence evaluation is determined to be "high" or "reckless disregard." Violations of regulations at 30 CFR Parts 40, 41, 43, 44, 45, or 50 [excluding 50.10] also cannot be issued as 104(d) citations or orders even if the negligence evaluation is "high" or "reckless disregard." However, violations of interim mandatory health and safety standards found in Title 2 and Title 3 of the Mine Act, not superseded by mandatory health and safety standards, can be cited as "S&S" and evaluated as unwarrantable failure citations or orders based on the evaluations conducted in Items 10A and 10B of the Citation/Order form.

A violation is caused by an unwarrantable failure if it is determined that the mine operator or contractor has engaged in aggravated conduct constituting more than ordinary negligence.

#### **B.** Determining "Aggravated Conduct" for Purposes of Determining Unwarrantable Failure

Factors inspectors should evaluate when determining "aggravated conduct" include one or more of the following:

- 1. the violative condition or practice was obvious or extensive;
- 2. the violative condition or practice had existed for a period of time;
- 3. similar violations have been issued at the mine or to the contractor in the recent past;
- 4. an agent of the operator or contractor had conducted an examination or had been in the area, or was aware of the existence of the condition;

- 5. the violative condition or practice had been reported to the operator or contractor who then allowed it to exist, without correcting or adequately addressing the problem, for a period of time;
- 6. the individual who committed or allowed the condition or practice to exist was a supervisor or an agent of the operator or contractor;
- 7. reasonable efforts were not made by the mine operator or contractor to correct the violative condition or practice; and
- 8. other factors, not enumerated above, resulted in a negligence evaluation by the inspector of "high" or "reckless disregard."

Only one 104(d)(1) citation can be issued during a 90-day period, or for as long as the mine operator or contractor remains under the 104(d) series. The inspector who issues the 104(d)(1) citation must keep other MSHA inspectors at the mine informed that the operator or contractor is under the 104(d) series to avoid the issuance of two 104(d)(1) citations to the operator or contractor.

**Note:** The mine operator or contractor remains on the 104(d) citation series until 90 days pass since the issuance of the original 104(d)(1) citation.

If another unwarrantable failure violation is observed during the same inspection, or any other type of inspection being conducted at the same time, or any other inspection within 90 days of the issuance of the unwarrantable failure citation, a 104(d)(1) order must be issued. If a 104(d)(1) order is issued, inspectors will issue 104(d)(2) orders for unwarrantable failure violations observed during <u>any subsequent</u> inspections until the mine is inspected in its entirety without an unwarrantable violation found.

#### C. Criteria for 104(d) Orders

Section 104(d) orders are required to meet the following criteria:

- 1. there is a violation (either "S&S" or "non-S&S") of a mandatory health or safety standard which was caused by the mine operator's or contractor's unwarrantable failure to comply;
- 2. the first 104(d)(1) order must be issued within 90 days of the issuance of a 104(d)(1) citation; and
- 3. 104(d)(2) orders follow the issuance of a 104(d)(1) order and must be issued on a subsequent inspection following issuance of a 104(d)(1) order. All 104(d)(2) orders are to refer to the original 104(d)(1) order.

**Note:** Section 104(d) orders do not have to be issued for a violation of the same health or safety standard as the 104(d)(1) citation. The violation causing the

issuance of a 104(d)(1) or (d)(2) order does not have to be evaluated as "S&S." The only requirement for a 104(d)(1) or (d)(2) order is that the safety or health violation was caused or contributed to by the operator's or contractor's aggravated conduct.

Unwarrantable failure violations observed on a subsequent inspection will be 104(d)(2) orders if two conditions are met:

- the operator or contractor is on the 104(d) series; and
- a 104(d)(1) order was issued on a previous inspection

Section 104(d) orders will be issued until a "clean" inspection is made of the <u>entire</u> <u>mining operation</u>, through any combination of enforcement related inspections, and no unwarrantable failure violations are observed. The mine operator or contractor remains on the 104(d) order series until this clean inspection occurs and no further unwarrantable failure violations are observed.

**Note:** The 90 day time frame established for 104(d) citations does not apply to 104(d) orders.

If a 104(d)(1) or (d)(2) order is issued at a large mine and it is not possible to inspect the entire mine during the same inspection, the areas inspected will be documented until the mine is inspected in its entirety. Examples of the 104(d) series are:

- **Scenario:** The inspector issues a 104(d)(1) citation. Other unwarrantable failure violations are not found on that inspection or any other inspection within 90 days. Other violations are cited but they are not unwarrantable failures. The operator is removed from the 104(d) series.
- **Scenario:** The inspector issues a 104(d)(1) citation on a regular inspection. Another unwarrantable failure is found during the same inspection and a 104(d)(1) order is issued. Another inspector returns to the property several days later and conducts a subsequent inspection of the entire operation. Unwarrantable failure violations are found during the inspection and 104(d)(2) orders are issued.
- **Scenario:** The inspector issues a 104(d)(1) citation. Other unwarrantable failure violations are not found during the inspection. An inspector goes back to the property within 90 days. Another unwarrantable failure violation is found and a 104(d)(1) order is issued. Several other unwarrantable failure violations are cited during the same inspection all are 104(d)(1) orders.
- **Scenario:** The inspector issues a 104(d)(1) citation. Another inspector returns to the property within 90 days on a subsequent inspection to check on compliance of an outstanding citation and finds no unwarrantable failure violations. The mine

operator remains on the 104(d) series for the remainder of the 90 days (assuming that other unwarrantable violations are not found and cited during that time).

- **Scenario:** The inspector issues a 104(d)(1) citation and a 104(d)(1) order during the same inspection. Another inspector returns to the property on a subsequent inspection, finds an unwarrantable failure violation and issues a 104(d)(2) order. Several days later, an inspection is made of the entire mine and unwarrantable failure violations are not found during that inspection. The operator is removed from the 104(d) series because of this "clean" inspection.
- **Scenario:** The mine operator is issued a 104(d)(1) citation. Ninety days pass and other unwarrantable failure violations are not found. An inspector returns to the mine on the 91st day and finds an unwarrantable failure violation. The unwarrantable sequence starts over with the issuance of a Section 104(d)(1) citation.
- **Scenario:** An operator is issued a 104(d)(1) citation and a 104(d)(1) order. On a subsequent inspection the operator is issued a 104(d)(2) order. Two weeks later a complete inspection of the entire mine is conducted and unwarrantable failure violations are not cited. An inspector returns to the property after this clean inspection and finds an unwarrantable failure violation. The unwarrantable series is started anew with the issuance of a 104(d)(1) citation.
- **Scenario:** The inspector issues a 104(d)(1) citation. Other unwarrantable failure violations are not found during the inspection. An inspector goes back to the property within 90 days. An imminent danger with an unwarrantable failure violation is found, a 107(a) order is issued, and a 104(d)(1) order is issued in conjunction with the 107(a). Several other unwarrantable failure violations are cited during this same inspection; all are 104(d)(1) orders.

#### D. Documentation for Section 104(d) Citation/Orders

1. Section 104(d)(1) Citation: Item 8 of the Mine Citation/Order Form shall include the following statement in the violation narrative:

"This violation is an unwarrantable failure to comply with a mandatory standard."

The remainder of the form is completed similarly to a 104(a) citation except that "104(d)(1)" is written in Item 12. Item 8 of the Mine Citation/Order Form shall also include the factors that explain how the operator engaged in aggravated conduct. The violation must be evaluated as "S&S," the "Yes" block checked, and negligence evaluation marked at least "High."

**Note:** A Section 104(b) withdrawal order will be issued, not a 104(d) order of withdrawal, if the operator or contractor fails to abate or correct a condition cited under a 104(d)(1) citation.

2. Section 104(d)(1) Order: Item 8 of the Mine Citation/Order Form shall include the factors that show how the operator engaged in aggravated conduct. The following statement must also be written within the violation narrative:

"This violation is an unwarrantable failure to comply with a mandatory standard."

Enter "104(d)(1)" in Item 12 and check the "Order" block in Item 13. **The order can be evaluated as "S&S" or "non-S&S."** Complete Item 14 by checking the "Citation" block and Items 14E and F with the number of the 104(d)(1) citation and the date it was issued.

- Section 104(d)(2) Order: The procedure is the same as for the 104(d)(1) order except in Item 14 E & F, check the "Order" block; in Item 14E refer to the <u>first</u> 104(d)(1) order; and in Item 14F enter the date the first 104(d)(1) order was issued. The order can be evaluated as "S&S" or "non-S&S." Note: All 104(d)(2) orders must refer to the <u>first</u> 104(d)(1) order issued.
- 4. Section 104(d)(1) and 104(d)(2) Orders: Item 15 "Area or Equipment" is completed with information relating to what is ordered withdrawn. Enter the phrase "No Area Affected" if the 104(d) order is a technical violation and evaluated as "non-S&S."
- 5. Initiate both a Possible Knowing/Willful Violation Review Form for each 104(d)(1) citation <u>and</u> each "S&S" 104(d) order issued.
- 6. Prepare and send to the District Office a packet that includes: the original Possible Knowing/Willful Violation Review Form; a copy of the Legal Identity Report; a copy of the relevant general field notes; a copy of the citation/order notes; photographs if available; a copy of relevant citation(s) or order(s); and a copy of all modifications. Each photograph should be identified by the citation or order number and a descriptive and legible narrative should be attached or written underneath each photograph. This packet shall be submitted to the District Office in a timely manner or as directed by the District Manager.

# XIV. FLAGRANT CITATIONS AND ORDERS

There are two types of violations which can be deemed to be flagrant - reckless and repeat failures. Only violations of mandatory health or safety standards can be evaluated as flagrant violations. Most violations of sections of the Mine Act can not be designated as "flagrant" because they are not mandatory health or safety standards. However, violations of interim mandatory health and safety standards found in Title 2 and Title 3 of the Mine Act, not superseded by mandatory health and safety standards, can be cited as "S&S" and evaluated as flagrant violations. Flagrant violations also require that the cited condition or practice has to be the <u>substantial and proximate cause of the injury or expected injury.</u>

#### A violation must meet the criteria below to be classified as flagrant:

Flagrant violations that arise from a mine operator's reckless failure must have been -

- 1. evaluated as significant and substantial;
- 2. evaluated with an expected injury of at least permanently disabling,
- 3. marked as an unwarrantable failure; and
- 4. evaluated with a negligence level of reckless disregard.

Flagrant violations that arise from a mine operator's repeat failures must have -

- 1 been evaluated as significant and substantial;
- 2. been evaluated with an expected injury of at least permanently disabling;
- 3. been marked as an unwarrantable failure; and

4. two prior "unwarrantable failure" violations of the same safety or health standard have been cited within the past 15 months.

For repeat failure evaluations, prior citations must be violations of the same safety or health standard citing <u>the same subsections</u> (e.g., citing 56/57. 14201(<u>a</u>) and 56/57.14201(<u>b</u>) do not meet the criteria for flagrant repeat violation consideration), and have been cited as 104(d)(1) or 104(d)(2) enforcement actions. Prior violations do <u>not</u> have to have been evaluated as significant and substantial.

**Scenario:** A 104(d)(1) "S&S" citation was issued for the mine operator's failure to install a guard on the tail pulley of a conveyor belt with miners working in the area. Injury or illness was evaluated as permanently disabling and negligence was evaluated as reckless disregard because the mine operator had been informed of the condition for several work shifts prior to being cited and had instructed miners to continue operating the belt without providing a suitable guard.

This type of violation is required to be evaluated as a "reckless" flagrant violation in conjunction with the unwarrantable failure violation. This violation is also required to be reviewed as a possible knowing/willful violation.

Scenario: A 104(d)(2) "S&S" order of withdrawal was issued for a mine operator's having failed to install a guard on the tail pulley of a conveyor belt with miners working in the area. Injury or illness was evaluated as permanently disabling. Negligence was evaluated as high negligence because the operator had: (a) been informed of the condition several work shifts prior to being cited; (b) instructed miners to continue operating the belt without providing a suitable guard; and (c) given miners an oral warning to be careful in this area. The inspector determined that three unwarrantable violations of the same subsection of the guarding standard (56.14107a) had been cited within the past 15 months.

This violation is required to be reviewed as a possible knowing/willful because it is a "repeat" flagrant violation issued in conjunction with the unwarrantable failure violation.

Inspectors should send to the District Office a packet that includes: the completed Possible Knowing/Willful Violation Review Form; a copy of the Legal Identity Report; a copy of the relevant general field notes; a copy of the citation/order notes; photographs if available; a copy of relevant citation(s) or order(s); and a copy of all modifications. This packet shall be submitted to the District Office in a timely manner or as directed by the District Manager.

# XV. SECTION 104(e) PATTERN OF VIOLATIONS

Section 104(e) of the Mine Act provides for sanctions against mine operators who have a pattern of violations of mandatory health and safety standards that could significantly and substantially contribute to the cause and effect of health and safety hazards. 30 CFR Part 104 includes procedures for initial screening of mines that may be developing a pattern of violations; criteria for determining whether a pattern of violations exists at a mine; procedures for issuance of potential pattern notice and final pattern notice; and procedures for terminating a Notice of Pattern of Violations. Either the Administrator for Coal Mine Safety and Health or the Administrator for Metal and Nonmetal Mine Safety and Health makes the final determination as to whether a Notice of Pattern of Violations will be issued at a specific mine. Mine operators remain on the 104(e) Pattern of Violation series until:

- No 104(e) Order of Withdrawal is issued within 90 days of issuance of the initial 104(e) Notice of Pattern of Violations;
- An inspection of the entire mine occurs and no "S&S" violations are issued; or
- Partial mine inspections, collectively covering the entire mine, are conducted within 90 days of issuance of the 104(e) Notice of Pattern of Violations and no "S&S" violations are cited.

# A. Issuance of a Notice of Pattern of Violations

The Notice of a Pattern of Violations shall only be issued by a District Manager on an MSHA Citation/Order Form 7000-3.

1. Complete Item 8 with the following language:

Pursuant to Section 104(e)(1) of the Federal Mine Safety and Health Act of 1977 (Mine Act), you are hereby notified that a violation exists at the (Name of Mine). If upon any inspection within 90 days after issuance of this Notice, an Authorized Representative of the Secretary finds any violation of a mandatory health or safety standard that could significantly and substantially contribute to the cause and effect of a coal or other mine

safety or health hazard, the Authorized Representative shall issue an order requiring the operator to cause all persons in the area affected by such violation, except those persons referred to in Section 104(c) of the Mine Act, to be withdrawn from, and to be prohibited from entering such area until an Authorized Representative of the Secretary determines that such violation has been abated. This Notice of Pattern of Violations shall remain posted at the (Name of Mine) until it is terminated by an Authorized Representative.

2.Leave Items 9A, 9B, 9C, 10A through 10D, and Item 11 blank.

3.In Item 12, enter "104(e).

4. Check the "Written Notice" block in Item 13.

5. Items 14A through 14F should be left blank.

6.Items 15, 16, 17, and 18 are left blank.

# **B.** Issuing 104(e)(1) or 104(e)(2) Orders of Withdrawal on MSHA Citation/Order 7000-3 Form

1. Complete Item 8 with a narrative description of the violation. At the end of the narrative, add the following statement: "A Notice of Pattern of Violations, number xxxxxx, was issued on xx/xx/xx."

2. Leave Items 9A and 9B blank. However, where violations of interim mandatory health and safety standards found in Title 2 and Title 3 of the Mine Act, not superseded by mandatory health and safety standards, are cited as "S&S" enter the appropriate section in 9B. Complete Item 9C with the mandatory standard violated;

3. Complete Items 10A through D and Item 11 based on the determination made at the time the violation was observed.

4. In Item 12, enter "104(e)(1)" or "(2)" and in Item 13 check the "Order" box; For 104(e)(1) orders, check Item 14D. Complete Item 14E with the Notice of Pattern of Violations number and Item 14F with its issuance date; For 104(e)(2) orders, check the "Order" box in Item 14B. Write the number from the 104(e)(1) order in Item 14E and its date of issue in Item 14F;

5. In Item 15 "Area or Equipment" describe the area or equipment affected; and

6. Item 16 "Termination Due Date and Time" is left blank.

# C. Terminating a Notice of Pattern of Violations

Terminating a Notice of Pattern of Violations is done on a Mine Citation/Order Continuation Form 7000-3a using the initial number from the Notice of Pattern of Violations. Termination of Notices of Pattern of Violations will be issued by the District Manager or his designee. Depending on the basis for terminating the Notice of Pattern of Violations, language in the narrative should include one of the following statements:

**Example One -** "xxxxx Mine has gone 90 days from the issuance of a Notice of Pattern of Violations without being cited for a violation which could significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Therefore, the mine is no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977. Accordingly, the Notice of Pattern of Violations is terminated."

**Example Two -** "xxxxx Mine underwent an inspection of the entire mine which was completed on xx/xx/xx without being cited for a violation which could significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Therefore, the mine is no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977. Accordingly, the Notice of Pattern of Violations is terminated."

**D.** All 104(e) violations should be reviewed for possible knowing and willful if the negligence is at least "High."

**E.** Prepare and send to the District Office a packet that includes: the original Possible Knowing/Willful Violation Review Form; a copy of the Legal Identity Report; a copy of the relevant general field notes; a copy of the citation/order notes; photographs if available; a copy of relevant citation(s) or order(s); and a copy of all modifications. This packet shall be submitted to the District Office in a timely manner or as directed by the District Manager.

# XVI. SECTION 104(g)(1) ORDERS

Section 104(g)(1) of the Mine Act provides for the withdrawal of untrained miners from a mine or mill until they have received the training required by Section 115 of the Mine Act. The purpose of a Section 104(g)(1) order is to eliminate the hazard that untrained or inadequately trained miners pose to themselves and to other miners. Section 104(g)(1) orders shall be evaluated for "S&S" using the criteria in Section VI of this Chapter.

**Underground Mines (Part 48).** Sections 48.5, .6, .7, .8, and .11 are the only standards which may be cited under 104(g)(1) for untrained miners.

**Surface Mines and Surface Areas of Underground Mines (Part 48)**. Sections 48.25, .26, .27, .28, and .31 are the only sections that may be cited under 104(g)(1) for untrained miners.

**Surface Mines (Part 46)**. Sections 46.5, .6, .7, .8, and .11 are the only sections that may be cited under 104(g)(1) for untrained miners.

Citations shall <u>not</u> be issued in lieu of Section 104(g)(1) orders <u>unless</u> the miner cannot be trained because he or she is no longer employed at the mine, was permanently disabled, or was fatally injured.

When miners have received training but there are violations involving training plans, cooperative training programs, records of training, compensation for training, etc., Section 104(g)(1) orders of withdrawal should not be issued. Issuances of 104(a) or 104(d) actions, in these situations, are appropriate.

Section 104(g)(1) orders of withdrawal shall be written for the following types of untrained miners:

- new miners;
- experienced or newly-hired experienced miners;
- miners assigned to perform a task for which they have had no previous experience;
- miners whose annual refresher training is not up-to-date; and
- miners or applicable persons working on mine property who have not been given hazard training.

# A. Determining the Number and Type of Citations or Orders to Issue for Part 46 and Part 48 Training Violations

1. Violations Involving One Miner:

If one miner is involved, but two or more sections of Part 46 or Part 48 have been violated, one Section 104(g)(1) order will be issued citing the appropriate section(s). Separate evaluations of negligence and gravity should be provided for each violation.

Scenario: One underground miner was found not task trained and had not received annual refresher training. One Section 104(g)(1) order would be issued.

- 2. Violations Involving More Than One Miner:
  - a. When more than one untrained miner is withdrawn from a mine, a single 104(g)(1) order is appropriate provided the Part 46 or Part 48 training violation is the same for all the miners.
  - b. Where multiple miners are involved and different violations of the training requirements have occurred for each miner, one or more 104(g)(1) orders of withdrawal would be issued, depending on the circumstances.

- **Scenario:** Eight underground miners did not have the requisite safety training (three did not receive new miner training; two were not task trained; three missed annual refresher training). Three separate 104(g)(1) orders would be issued: one citing 30 CFR 48.5; one citing 30 CFR 48.7; and one citing 30 CFR 48.8. The relevant miners' names will also be listed in Item 15 "Area or Equipment" on each violation.
- c. When more than one miner is involved in violation of the same standard, the total number of miners withdrawn will be entered in Item 10D "Number of Persons Affected" on Form 7000-3. Each miner's name will also be listed in Item 15 "Area or Equipment."
- d. A 104(g)(1) order including more than one miner may be modified to allow individual miners to return to work as soon as each miner completes the training specified in the order.
- 3. 104(g)(1) Violations Involving Independent Contractors:

A Section 104(g)(1) order of withdrawal would be issued to the direct employer of any miner who has not received the required training. If there is uncertainty as to who employs the miner, the order of withdrawal should be issued to the operator with the greatest physical presence at the mine. Any discrepancies occurring after the miner is withdrawn can be resolved through subsequent modification actions.

4. Citations Issued With Section 104(g)(1) Orders:

Citations shall not be issued in addition to 104(g)(1) orders for the same violation except in instances of overlapping compliance responsibility between contractors and mine operators. There may be circumstances where it is appropriate to issue citations or orders for training violations to both the independent contractor and the production operator.

**Scenario:** A miner is the employee of an independent contractor and the production operator had agreed to provide the miner training in accordance with the mine's MSHA approved training plan. The miner has not received the required training. A 104(g)(1) order would be issued to the independent contractor and, as appropriate, a 104(a) citation, or a 104(d)(1) citation, or a 104(d)(1) order, or a 104(d)(2) order would be issued to the production operator.

#### **B.** Documentation for Section 104(g)(1) Orders

1. Write the violation narrative in Item 8. For a single employee and multiple training violations, follow the first narrative by noting the second cited standard then add a second narrative. If more space is needed, use a Mine Citation/Order Continuation Form. Include separate evaluations for gravity and negligence for

each standard violated. Insert the following statement at the end of the violation narrative in Item 8:

"The Federal Mine Safety and Health Act of 1977 declares that untrained miner(s) are a hazard to themselves and others."

- 2. In Item 9C, enter the first standard cited.
- 3. "S&S" evaluations should be based on the criteria found in Section VI of this Chapter.
- 4. Enter 104(g)(1) in Item 12.
- 5. In Item 13 check the "Order" block.
- 6. In Item 15 "Area or Equipment" indicate the person(s) to be withdrawn. Use a Mine Citation/Order Continuation Form if more room is required to list all the miners.
- 7. Items 16A and B are not completed.

### XVII. SECTION 107(a) IMMINENT DANGER ORDERS

Imminent danger is defined in the Mine Act as "the **existence** of any condition or practice in a coal or other mine which could reasonably be expected to cause death or serious physical harm before such condition or practice can be abated." Courts interpreting this provision have stated that that an **imminent danger exists only** when the hazardous condition has a reasonable potential to cause death or serious injury to a miner if normal mining operations were permitted to proceed in the area before the dangerous condition was eliminated or corrected.

An imminent danger order cannot be issued for an accident which has already occurred unless the imminence still exists. Immediate physical exposure to the imminent danger does not have to be witnessed by the inspector to issue a 107(a) order.

Because the purpose of Section 107(a) orders is to immediately remove miners from exposure to serious hazards and to prevent them from entering such hazardous areas or utilizing hazardous equipment, an imminent danger must be **impending** at the time an order is issued. Therefore, when an imminent danger is observed, the inspector must, as soon as possible and as the imminent danger is being observed, issue an oral Section 107(a) order. An oral order should be documented in writing as soon as practical.

If an oral Section 107(a) order is issued, it should be stated in precise terms such as: "I am issuing you a Section 107(a) imminent danger order." At the least, the inspector must use the words "imminent danger" or "107(a)" at the time the oral order is issued.

A written order, issued after an oral Section 107(a) order was communicated to the operator, must clearly state that it is confirming an oral imminent danger order and identify:

- the individual to whom the oral order was issued;
- the time and date the oral order was issued;
- the location at which the oral order was issued; and
- the reason the oral order was issued. This reason should be in the manner developed for issuance of Section 107(a) orders.

Imminent danger orders shall contain a detailed description of the conditions or practices which cause and constitute the imminent danger and a description of the area of the mine from which persons must be withdrawn and prohibited from entering. Only those persons described in Section 104(c) of the Mine Act may enter the affected area while the order is in place.

An imminent danger withdrawal order often arises because of a violation of the Mine Act and its mandatory health or safety standards. All violations which caused or contributed to the imminent danger are to be addressed as separate citations or orders referring back to the 107(a) Imminent Danger order of withdrawal. The issuance of an imminent danger order does not preclude the issuance of a section 104(d)(1) citation or order or a section 104(d)(2) order

#### A. Documentation for 107(a) Orders - Mandatory Standard Not Violated

- 1. In Item 8 describe the condition(s) or practice(s) which contributed to the imminent danger situation. Add the following statement at the end of the Item 8 narrative: "This condition is an imminent danger." Also include a statement concerning when, where, why, and to whom the verbal order was issued. If additional space is needed, a Mine Citation/Order Continuation Form 7000-3a must be used.
- 2. Leave items 9A, 9B, 9C, 10, and 11 blank.
- 3. In Item 12 enter "107(a)".
- 4. In Item 13 check the "Order" block.
- 5. Leave Item 14 blank.
- 6. In Item 15 describe the "Area or Equipment" affected.
- 7. In Item 16 "Termination Due Date and Time" are left blank.

- 8. Terminate the order when the condition(s) or practice(s) that created the imminent danger is abated.
- 9. Completion of a Possible Knowing/ Willful Violation Review Form is not required for imminent danger orders issued with no violations of mandatory standards.

#### B. Documentation - 107(a) Order Issued and Mandatory Standard(s) Violated

 Complete Item 8 as indicated above and include the statement, "Citation No.\Order No. <u>xxxxxxx</u> is being issued in conjunction with this order." Describe the condition(s) or practice(s) which created the imminent danger situation and why the risk of hazard will occur before it can be remedied. Add the following statement in the Item 8 narrative: "This condition is an imminent danger." Also include a statement concerning when, why, where, and to whom the verbal order was issued.

A Mine Citation/Order Continuation Form 7000-3a will be used if additional space is needed. When one or more violations create an imminent danger, each violation must be described in Item 8. Complete additional Form 7000-3s for each violation. For each additional Form 7000-3, indicate in Item 8 that the violation was a contributing factor in the issuance of the imminent danger order and that an abatement time is not set for 104(a) citations and 104(d)(1) citations issued in conjunction with 107(a) Orders.

- 2. Leave items 9A, 9B, 9C, 10 and 11 blank.
- 3. In Item 12 enter "107(a)."
- 4. In Item 13 check the "Order" block.
- 5. Leave Item 14 blank for all 104(a) and 104(d) citations issued in conjunction with 107(a) orders of withdrawal. However, Item 14 must be completed for all 104(d) orders issued in conjunction with 107(a) orders of withdrawal by checking Item 14A or 14B, entering either the initial 104(d) citation or 104(d) order number (as appropriate) in Item 14 E, and entering the date in Item 14F.
- 6. In Item 15 describe the "Area or Equipment" affected.
- 7. In Item 16 "Termination Due Date and Time" is not entered.
- 8. Terminate the imminent danger order when <u>all</u> conditions or practices creating the imminent danger have been abated.

9. A Possible Knowing/Willful Violation Review Form must be completed for 104(a) citations and 104(d) citations and orders issued in conjunction with a 107(a) imminent danger order regardless of the negligence evaluation.

### XVIII. SECTION 107(b)(1) NOTICES

Section 107(b) provides unique enforcement procedures and requirements to contend with the unusual circumstances of dangerous conditions that cannot be effectively abated through the use of existing technology. Accordingly, enforcement personnel or District Managers shall not issue orders or take any action under Section 107(b) before consulting with the Administrators for Metal and Nonmetal or Coal Mine and Safety and Health.

Further, Section 107(b) orders are not to be modified, terminated, or vacated by inspectors or district officials without prior consultation with the Administrators for Metal and Nonmetal or Coal Mine Safety and Health.

### XIX. SECTION 110(g) NOTICES

A miner shall be issued a notice under Section 110(g) of the Mine Act if he or she is found willfully violating any of the mandatory safety standards relating to smoking or the carrying of smoking materials, matches, or lighters. Mandatory standards applicable to smoking are: 56/57.4100, 57.5041, 56/57.6904, 56/57.7805, 57.22101, 57.22102, 57.22105, 75.1702, and 77.1711.

To find a <u>willful</u> violation of the safety standard relating to smoking, the inspector must have evidence that the miner actually smoked in an underground coal mine or smoked in a restricted area in an underground metal or nonmetal mine or surface area. The restricted area on the surface must be posted as being a non-smoking area. Further, for a miner to willfully violate the standards regarding the carrying of smoking materials, the inspector must have proof that the miner actually knew that he or she was carrying the smoking materials into a restricted area or into an underground coal mine.

If the miner who was smoking or carrying materials in restricted areas was an agent of a mine operator, such as a foreman or other supervisor, the miner should not be subject to a Section 110(g) penalty but instead should be subject to a referral under Section 110(c) or Section 110(d) of the Mine Act.

Inspectors should make all reasonable efforts to document the miner's past training regarding smoking and the carrying of smoking materials, obtain and note the miner's address and rate of pay so the nature of the proposed civil penalty can be accurately assessed and mailed to him or her since the civil penalty for this notice is assessed to the miner and not the mine operator or contractor.

The mine operator or contractor shall be issued a citation and a possible imminent danger order (depending on the circumstances observed) whenever a miner is found to be smoking or found carrying smoking materials, matches, or lighters in prohibited areas.

**Scenario:** A miner is observed smoking a cigarette in an underground explosives magazine. There are six open cases of dynamite within three feet of the miner. A 110(g) notice shall be issued to the miner. Also, a 104(a) citation or a 104(d) Citation or order and a separate 107(a) order shall be issued, depending on the circumstances, to the mine operator or contractor for a violation of 57.6904 or 75.1702.

#### **Documentation for 110(g) Notice**

- 1. Item 4 of the Mine Citation/Order form is completed with the miner's name. Items 5, 6, and 7 are completed with the operator's name, the mine name, and the Mine ID number.
- 2. Item 8 is completed with a description of the observed violation. The following statement shall be included at the end of that description:

"This is notification to the individual that he or she will receive a civil penalty for willfully violating a mandatory safety standard relating to smoking or the carrying of smoking materials, matches, or lighters."

- 3. Item 9B is completed with "110(g)".
- 4. Item 9C is completed with one of the standards violated: 56/57.4100, 57.5041, 56/57.6904, 56/57.7805, 57.22101, 57.22102, 57.22105, 75.1702, and 77.1711.
- 5. Complete Section II, items 10A through D based on the determination made at the time the violation was observed. Section II, item 11 will always be completed with at least "high" negligence checked.
- 6. Item 16 is not completed.
- 7. One copy of the completed notice is given to the miner.
- 8. A copy of the notice will be mailed to the MSHA Office of Assessments in Arlington, Virginia. A cover letter shall be attached explaining the circumstances and any mitigating factors relating to its issuance. The letter shall also provide the miner's address so that the proposed civil penalty can be processed.

#### XX. MINE OPERATOR IN VIOLATION OF AN ORDER OF WITHDRAWAL

A separate 104(a) citation shall be issued, in all instances, for failure to comply with each order violated citing the applicable section [104(b), 104(d)(1), 104(d)(2), 104(e)(1), 104(e)(2), 104(g)(1), 107(a), 103(j) or 103(k)] when an inspector encounters a mine operator working in violation of an order of withdrawal. In citing this violation,

inspectors should explain to the mine operator what MSHA's rights are under the Mine Act and the penalty for continuing to operate in the face of a withdrawal order.

**Note:** A 104(a) citation for operating in the face of an order shall not be issued when an order of withdrawal is issued and the "Area or Equipment" in Item 15 is noted as "No Area Affected" because the mine operator was notified that an "Area or Equipment" was not required to be withdrawn. If appropriate, injunctive action can be initiated by the District Manager if the mine operator continues to operate in the face of a withdrawal order.

While these violations are not issued often, civil penalties assessed to mine operators can be substantial; therefore, inspectors must document in detail the activity and statements regarding all the circumstances concerning the issuance of this citation.

**Note:** In the rare instances these types of violations are issued, inspectors and supervisors should discuss them with the district office and/or regional solicitor prior to their issuance. As these violations are frequently litigated and are often contentious, consultation and coordination with all parties prior to issuance will assure that is knowledgeable regarding the actions being taken.

Since this citation stands alone for assessment purposes, it will be separately evaluated for gravity and negligence. Violations of the Mine Act are always designated as "non S&S." The following guidance applies to these evaluations:

**Negligence evaluation** - shall be based on existing conditions and circumstances at the time of its issuance and **does not** have to reflect the same negligence as the preceding order of withdrawal since circumstances may have changed since the order's issuance. Evaluations for negligence, however, are usually "high" or "reckless disregard" because the mine operator was previously issued an order of withdrawal.

<u>Gravity evaluation</u> – shall be designated as "non significant and substantial" as it is a violation of a section of the Mine Act. Further, these types of violations cannot be evaluated as unwarrantable failure or flagrant.

A Possible Knowing/Willful Violation Review Form will be completed for all citations issued for a mine operator operating in the face of an order of withdrawal.

#### Documentation for Working in Violation of a Withdrawal Order

1. In Item 9B of the Mine Citation/Order Form enter the section of the Mine Act violated; this entry will be the same as the type of order originally issued.

**Example:** If a 104(b) order is not complied with, enter "104(b)" in Item 9B. Enter "107(a)" in Item 9B if the operator is working in violation of a 107(a) order of withdrawal. Enter 104(d)(1), 104(d)(2), 104(g)(1), 104(e)(1), 104(e)(2), 103(j), or 103(k) in Item 9B if the operator is working in violation of one of these orders.

- 2. Item 9C is left blank.
- 3. Items 10 and 11 are completed with gravity and negligence evaluations made dependent on the circumstances present at the time of observation.
- 4. In Item 14 check the "Order" block, enter the order number and the date it was issued.
- 5. In Items 16A and B enter the "Termination Due Date" and "Time."
- 7. Terminate the citation when personnel are withdrawn as required. Terminate the order when the original condition or practice is abated.
- 8. Prepare and send to the District Office a packet that includes:
  - a. the original Possible Knowing/Willful Violation Review Form;
  - b. a copy of the Legal Identity Report;
  - c. a copy of relevant general field notes;
  - d. a copy of the citation/order notes;
  - e. appropriate photographs;
  - f. a copy of relevant citation(s) or order(s); and
  - g. a copy of all modifications.

This packet shall be mailed to the District Office in a timely manner.

# CHAPTER 5 - HEALTH CRITERIA (METAL AND NONMETAL)

# I. DOCUMENTATION OF HEALTH VIOLATIONS

Generally, when health sample results indicate that there has been an overexposure to dust, chemical contaminants, etc., the following information will be documented by the inspector:

- type of contaminant
- amount of exposure as compared to what is allowed
- error factor used
- length of the miner's exposure
- personal protective equipment program (or lack of) implemented by the operator
- type of (or lack of) personal protective equipment worn when the overexposure occurred
- training provided to the miner in the use of the personal protective equipment (if appropriate)
- controls used and their condition
- feasible controls available

# II. CONTAMINANTS WITH CEILING DESIGNATIONS

When there is an overexposure to a contaminant that has a ceiling designation it is appropriate to issue a 104(a) citation with an abatement time reflecting the time needed to remove miners. Miners shall not reenter the area until the hazardous condition(s) is corrected except for those miners who are working to establish the necessary engineering controls. These miners must wear appropriate personal protective equipment. In this case, standards 56/57.5001(c) and 56/57.5005 should be considered as one standard and should be entered in Item 9C of the Mine Citation/Order Form (e.g., 56.5001(c)/.5005).

The above situation warrants issuance of a 107(a) imminent danger order only if the concentration(s) measured and the work condition(s) create a situation that is immediately dangerous to the exposed miners.

# III. IMMINENT DANGER SITUATIONS INVOLVING CHEMICAL HAZARDS

#### A. IDLH Levels

MSHA considers the atmosphere "immediately harmful to life" whenever a contaminant's Immediate Danger to Life or Health (IDLH) limit is exceeded. The IDLH limits for various contaminants can be found in the "National Institute for Occupational Safety and Health (NIOSH) Pocket Guide to Chemical Hazards." However, imminent danger situations can exist below IDLH levels due to a miner's length of exposure, work activity, or time to escape. The following procedures shall be utilized whenever a contaminant's IDLH limit, plus the sampling factor, is exceeded:

- 1. A 107(a) order of withdrawal with contributing citations and/or orders shall be issued noting the contaminant levels and the conditions constituting the imminent danger situation.
- 2. The order of withdrawal shall require that all miners be immediately withdrawn from the contaminated atmosphere. The order should note that only those miners wearing appropriate personal protective equipment, and who are working on establishing engineering controls, are permitted to reenter the affected area.
- 3. Additionally, as required by 56/57.5005(c), at least one other person with backup equipment and rescue capability shall be present before any unprotected miner may reenter an atmosphere immediately harmful to life.
- 4. See Chapter 4, Section XVII of this handbook concerning the issuance of an imminent danger order with contributing citations and orders.

#### **B.** Other Situations

In some cases an imminent danger may exist even though a contaminant's IDLH limit is not exceeded. Continual exposure at high levels and adsorption through all routes of exposure can result in similar harm to miners. The issuance of an imminent danger order may be warranted if dizziness, headaches, slowed reflexes, lack of coordination, or other serious symptoms are shown by miners and are believed to be caused by exposure, including direct contact, along with consideration of the work environment, and serious physical harm or death may occur. The following procedures are to be implemented whenever there is exposure that may cause serious physical harm or death:

- 1. A 107(a) order of withdrawal with contributing citations and/or orders shall be issued noting the contaminant levels and the conditions constituting the imminent danger situation.
- 2. The order of withdrawal shall require that miners be immediately withdrawn from the contaminated atmosphere. It should be noted on the order that only those miners

wearing appropriate personal protective equipment, and who are working to establish engineering controls, are permitted to reenter the affected area.

- 3. Additionally, as required in metal and nonmetal mines under 56/57.5005(c), at least one other person with backup equipment and rescue capability shall be present before any miner enters an atmosphere immediately harmful to life.
- 4. See Chapter 4, Section XVII of this handbook concerning the issuance of an imminent danger order with contributing citations and orders.
  - **Scenario:** A miner has been exposed to 700 parts per million (ppm) of carbon monoxide. He has been drilling in the same area for the last four hours. The miner complains of dizziness, headache, nausea, is uncoordinated, and exhibits severe mental confusion. The miner's partner indicates that he also has similar symptoms. Further investigation reveals that the drill has fallen on both miners three times within the last hour due to their lack of concentration and inability to coordinate drilling activities. Ventilation in the area is not adequate due to holes and blockages observed in the vent tubing providing air into the area.
  - **Scenario:** A cyanide pipe in a mill broke and is spraying the solution everywhere including near miners working in the area. The exposed solution has flowed through the mill and has contacted some acidic material. Hydrogen Cyanide levels are measured at the doorway to the mill at 35 ppm.

In both of the above scenarios, due to the high exposure to a contaminant, the length of exposure time, the noted symptoms of miners, the safety hazards associated with incorrectly operating equipment, and the hazardous workplace environment, an imminent danger situation exists. In these cases, inspectors would issue a 107(a) imminent danger order and withdraw affected miners from their workplace.

# IV. NEGLIGENCE AND GRAVITY EVALUATIONS - HEALTH VIOLATIONS

The following instructions apply to Section II of the Mine Citation/Order Form unless otherwise specified.

# A. Negligence

The degree of negligence is dependent on what the mine operator did **before** MSHA collected the samples that established the violation. Factors to be considered by the inspector include items such as:

- 1. whether the mine operator knew or had been told of the high contaminant level(s);
- 2. the condition of engineering control systems;
- 3. whether engineering control systems had been provided;

4. whether the operator provided appropriate personal protection, whether it was fit-tested (if appropriate), whether personnel were trained in its use and limitations (if appropriate), and whether it was worn, properly maintained, cleaned.

# **B.** Gravity

1. Likelihood: Consider "Reasonably Likely" or "Highly Likely" if respiratory or hearing protection was not provided; if the respiratory or hearing protection was not adequately maintained; if the individual was not respirator fit-tested; if the person was not trained in the use or limitations of the respirator; or if the protection was not suitable for the hazard. Also, consider "Reasonably Likely" or "Highly Likely" if the respiratory or hearing protection program had deficiencies which caused the personal protection to be inadequate.

**Note:** With regard to nuisance particulates and silver metal overexposures between  $0.01 \text{ mg/m}^3$  and  $0.1 \text{ mg/m}^3$ , operators must use engineering controls to reduce exposure to the permissible limit and comply with the respiratory protection requirements of standard 56/57.5005. However, .5001(a)/.5005 citations for overexposure to nuisance particulates and to silver metal in the above concentration range cannot be evaluated as "S&S." Overexposures to soluble compounds of silver, such as silver nitrate, above 0.01 mg/m<sup>3</sup> can be evaluated as "S&S" if adequate respiratory protection was not worn.

Occurrence would be marked as "Unlikely" if appropriate respiratory protection was being worn, was appropriate to the hazard, the miner was respirator fit-tested, and the mine operator had an acceptable respiratory protection program.

- 2. Severity: Overexposure to airborne contaminants and physical agents should be marked according to the severity of the disease they produce.
  - **Examples:** Silica causes silicosis which is permanently disabling and sometimes fatal; radon daughter exposure can cause lung cancer which can be fatal; and excessive noise causes hearing loss which can be permanently disabling.
- 3. Number of Persons Affected: For most situations, indicate the number of miners sampled. There are situations, however, where more workers should be entered in Item 10D of the Mine Citation/Order Form. If other miners perform the same job on different shifts or if several miners rotate during the same shift and perform the identical job, that number should be entered in this box.
  - **Example:** A day-shift crusher operator is overexposed to respirable silica bearing dust. Two other miners operate the crusher on the evening shift. Item 10D would have the number "3" entered for Persons Affected.

#### C. Significant and Substantial Violations

The "**Yes**" block in Item 10C must be marked if it is reasonably likely that one or more miners will or could suffer at least "Lost Workdays" or "Restricted Duty" as a result of exposure to the contaminant.

The "**No**" block in Item 10C is to be marked if it is not reasonably likely that one or more miners will or could suffer at least "Lost Workdays" or "Restricted Duty" as result of exposure to the contaminant.

**Note:** Since all overexposure limits have a likelihood of health impairment, this evaluation is dependent on the use of adequate personal protective equipment.

# V. DOCUMENTATION OF AIRBORNE CONTAMINANT VIOLATIONS

Complete the citation form as usual except as follows:

- A. "Date and Time of Issue" is the date and time the citation was issued.
- B. In Item 8 include the following information: The Threshold Limit Value (TLV) or the exposure limit; the error factor; the contaminant; the concentration; the job title of the person sampled; the equipment and area where the person was working; and the believed reason for the overexposure. Always include information as to whether or not the miner was wearing approved respiratory protection with an adequate training, fit-testing, and maintenance program. Include a statement noting the sample date which is the date entered as the occurrence date in IPAL.
- C. When there is an overexposure to airborne contaminants (except asbestos or those having ceiling limits), standards 56/57.5001(a) and 56/57.5005 should be considered as one standard. Enter the standard in Item 9C using the following format: 56.5001(a)/56.5005. When overexposures are for asbestos, inspectors should use 56/57.5001(b) and 56/57.5005 as one standard [e.g., 56.5001(b)/.5005 or 57.5001(b)/.5005].
- D. Standard 56/57.5005 can be written alone **only** where MSHA requires a respiratory protection program for compliance and the mine operator fails to follow the program's requirements or the overexposed miner is not wearing a respirator where required. Standard 56/57.5005 can be cited without resampling if:

the area or equipment in question was observed operating without miner(s) complying with the respiratory protection program mandated by an outstanding citation for dust overexposure; or

the mine operator had been allowed to operate because all feasible engineering or administrative controls had been implemented but a respiratory protection program was still required by MSHA to gain compliance. E. These citations should be evaluated as "S&S" if a respirator was not being worn; if the miner sampled had not been properly fit-tested with the respirator being worn; if the respirator was not properly maintained; or if the respirator was not selected in accordance with American National Standards Institute (ANSI) Z88.2-1969. Additionally, there may be other circumstances where the citation should be evaluated as "S&S." Inspectors should review ANSI requirements and the circumstances of each case to determine if a citation should be evaluated as "S&S."

**Note:** With regard to nuisance particulates and silver metal overexposures between  $0.01 \text{ mg/m}^3$  and  $0.1 \text{ mg/m}^3$ , operators must use engineering or administrative controls to reduce exposure to the permissible limit and comply with the respiratory protection requirements of standard 56/57.5005. However, .5001(a)/.5005 citations for overexposure to nuisance particulates and to silver metal in the above concentration range can not be evaluated as "S & S." Overexposures to soluble compounds of silver, such as silver nitrate, above 0.01 mg/m<sup>3</sup> should be evaluated as "S & S" if adequate respiratory protection was not worn.

F. If approved protection was not being worn, the initial termination due date will be the time necessary for the operator to provide appropriate respirators and develop a respiratory protection program in accordance with ANSI Z88.2-1969.

Inspectors should also include a statement in citations that when a respiratory protection program was implemented in accordance with ANSI Z88.2-1969, the citation will be extended to allow the mine operator time to implement engineering or administrative controls.

- G. When issued, state in extensions what items are required to be accomplished by the abatement due date.
- H. If resampling has been done and results have not been received, an extension of time is not needed.
- I. When an extension of time is required because MSHA sampling indicated that additional work needs to be completed by the mine operator, inspectors will issue an appropriate extension.
- J. When resampling results indicate that contaminant levels are in compliance, enter the date and time the termination was issued in Item 12 of Form 7000-3a.

# VI. ORDERS OF WITHDRAWAL - AIRBORNE CONTAMINANT VIOLATIONS

A. If appropriate personal protection is being worn and progress has not been made towards compliance, resampling must be conducted to determine if an overexposure still exists before issuing a Section 104(b) order of withdrawal.

B. If the due date and time has passed, a Section 104(b) order of withdrawal must be issued if the operator or contractor has failed to provide appropriate respiratory protection, if the miner was not wearing an appropriate respirator, or if the operator has not implemented an appropriate respiratory protection program. Once an appropriate respiratory protection program is implemented or an appropriate respirator has been provided and/or worn, the Section 104(b) order can be modified to allow work to continue until feasible engineering or administrative controls are implemented.

**Note:** If the operator or contractor can install feasible engineering or administrative controls more quickly than acquiring the respiratory protection, the quicker means of abatement should be required.

A 104(b) order must also be issued if the operator or contractor has failed to implement feasible engineering or administrative controls within the established abatement time and further extension of time is not warranted. Once appropriate engineering controls have been implemented, the 104(b) order can be modified to allow work to continue until resampling is conducted and the results analyzed to determine compliance. The order can be terminated if resampling indicates that the mine operator is in compliance.

- C. When an inspector issues a Section 104(b) order of withdrawal, item 8 of the citation/order form should note, in detail, the reasons for the operator's failure to abate the citation and what must be done to achieve abatement of the condition or practice that caused issuance of the citation. It also should be noted in the 104(b) order, if applicable, that the failure to abate the violation involved a deficiency in the use of personal protective equipment (e.g., respirators).
- D. When an operator continues production in violation of a 104(b) order or neglects to abide by the conditions under which the 104(b) order was modified, the inspector must issue a 104(a) citation to the operator for a violation of Section 104(b) of the Mine Act and require, as an abatement condition, that a respiratory protection program be instituted for compliance. See Chapter 4, Section XX of this handbook for procedures to follow when an operator operates in the face of a withdrawal order.

# VII. GENERIC WORDING - CHEMICAL CONTAMINANT OR DUST CITATION

"The (job description) (location description) was exposed to a (shift or time weighted average) of (contaminant) on (sampling date). This exceeded the Threshold Limit Value (TLV) times the error factor of (enter factor). The analytical results were received and the citation was issued on (date citation was issued)."

Include language in the citation regarding the possible sources of the contaminant and any obvious deficiencies of the control systems; the type and condition of any personal protective equipment; and, if a respirator was used, whether or not a respirator program consistent with ANSI Z88.2-1969 was in place. When a respiratory protection program is nonexistent or deficient, state that the abatement time will be extended, if necessary, after a respiratory

protection program consistent with ANSI Z88.2-1969 is in place so as to allow a reasonable period for the installation of controls.

# **CHAPTER 6 - HEALTH CRITERIA (COAL)**

Information and guidance on the issuance of health citations and orders at coal mines may be found in the Coal Mine Health Inspection Procedures Manual and related Procedure Instruction Letters (PILs). Appendix C of this document contains examples of coal mine health citations and orders.

### **CHAPTER 7 - GENERAL INFORMATION**

#### I. CITATION/ORDER BOOKS / IPAL CITATION NUMBERS - ACCOUNTABILITY

Citation/Order books are accountable government property and inspectors are required to sign an issuance sheet. Inspectors are also accountable for violation numbers issued through the IPAL system. Upon receipt of the violation numbers, the inspector must sign and date to acknowledge receipt of these numbers.

### **II. ISSUING CITATIONS AND ORDERS**

It is not mandatory to give mine operators the citation or order form at the time the violation is observed. The operator or his designee, however, shall be told that there is a violation and a thorough discussion will ensue as to exposure, negligence, severity, and time permitted for abatement. Citations and orders shall be issued to the mine operator or his or her agent with reasonable promptness.

**Note:** Some citations or orders, because of the time needed for analysis or for other reasons, might be cited and delivered to the mine operator at a time after the violation has occurred. Examples include, but are not limited to: certain Part 50 violations, certain health violations, violations cited as a result of accident investigations, and violations cited as a result of reviewing accident forms.

#### **III. INSPECTION OR INVESTIGATION CLOSEOUT CONFERENCE**

At the conclusion of any enforcement-related inspection or investigation, inspectors shall discuss their general findings and each violation issued during that activity with the mine operator and, if applicable, with contractors and/or miners representatives. During this conference, inspectors will inform operators of citations or orders that have been evaluated as possibly flagrant and/or any that will be recommended for possible special assessment.

All parties will also be informed that they have 10 days in which to request a safety and health conference with the appropriate district manager if they disagree with actions taken by the inspector during the inspection or investigation. Further, all parties should be told that it is within the sole discretion of MSHA to grant requests for a conference and that a request for such conference must be in writing and include a brief statement of the reason(s) why each citation or order should be conferenced.

# IV. COMPLIANCE ASSISTANCE VISIT INSPECTION FOLLOW-UP (METAL AND NONMETAL)

If an inspector observes a violation that is not abated which was noted on a previous CAV inspection, a 104(a) citation will be issued without referencing the CAV notice in the narrative or negligence evaluation section of the citation.

Inspectors should remember that a 104(a) citation is not the only action that can be taken for unabated CAV notices. Since the CAV inspection, the hazard observed during that inspection may have worsened or miners' exposure to the hazard might have increased. If an imminent danger situation now exists, a Section 107(a) withdrawal order should be issued with **no reference** made to the CAV notice in the body or negligence evaluation section of the order.

# V. FIELD NOTES

For MNM inspectors, the forms provided to document inspectors' observations during enforcement activities are MSHA Forms 4000-49E (Citation/Order Documentation) and 4000-49F (General Field Notes), both 8½" x 11" in size, or Forms 4000-49G (Citation/Order Documentation), 4000-49H (General Field Notes), both 5" x 8" in size, and 4000-31 (Health Field Notes). For Coal inspectors, the forms provided to document inspectors' observations during enforcement activities are MSHA Form 7000 series. **Inspectors are not to take notes on other paper and copy them to these forms unless directed otherwise.** 

# VI. CONTRACTOR CITATIONS AND MSHA ID NUMBERS

Unless a contractor is cited, has a reportable accident, or is engaged in one of the nine types of construction or services listed in the MSHA Program Policy Manual (Volume III), an MSHA contractor ID number is not necessary. Some mine operators, however, require contractors to get numbers as a precondition for contract bidding. MSHA will provide an ID number for any contractor who requests one, but they need not apply except for the reasons specified above.

A contractor without an MSHA ID number can be cited using the mine operator's mine ID number until a contractor number is issued. A modification can then be written to include the new contractor number and to change the company name to the contractor's name when that number is obtained.

**Note:** The contractor's name entered on the citation must be exactly as it was when the MSHA Contractor ID number was assigned.

Contractor citations cannot be put into the MSHA computer system until the contractor is linked to the mine ID number. The Contractor Form 4000-39 must be submitted to link that contractor number with the mine ID number.

# VII. ISSUING CITATIONS OR ORDERS - ACCIDENT INVESTIGATIONS

Inspectors will initiate a separate event and use that event number if citations or orders are issued which are not directly related to an accident. If a regular inspection is not ongoing at the mine at the time of the accident, a new event should be initiated.

Note: Unrelated citations or orders should not be included with the accident report.

### VIII. TERMINATION (ABATEMENT) TIMES FOR CITATIONS

**Inspectors shall give primary consideration to the health and safety of miners in establishing abatement times for all citations.** The termination time for a citation must be specific and provide a reasonable time for mine operators to abate the conditions, practices, or circumstances which caused issuance of the citation. Citation abatement times **shall not** be established for the convenience of the mine operator, or for the inspector, or because the mine operator has filed an appeal with the Federal Mine Safety and Health Review Commission, or because the operator filed a Petition for Modification.

### IX. EXTENDING/TERMINATING CITATIONS AT AN MSHA OFFICE

Most citations and orders require an on-site inspection to verify conditions before they can be terminated. Some citations and orders, such as those relating to certain records, may be terminated without conducting an on-site inspection. A field office supervisor should review and approve any citations or orders that are terminated by inspectors without conducting an on-site inspection. A "new" event number should not be initiated when a citation or order is extended, terminated, or vacated from an MSHA office. The appropriate enforcement activity code from the last on-site inspection should be used. Coal Inspectors could also use the T02 activity code for Office Generated Issuances.

# X. EXTENDING CITATIONS - OPERATOR HAS APPEALED A CITATION OR ORDER

The filing of an appeal of a citation or order by a mine operator or contractor with the Federal Mine Safety and Health Review Commission (Commission) or the filing of a petition for modification does not relieve the operator or contractor of the responsibility of complying with the cited mandatory standard by its due date. These activities are not a basis to extend any citation unless inspectors are directed otherwise.

The extension of any citation <u>is</u> appropriate if primary consideration has been given to whether a safety or health hazard exists or may exist to the miners. An extension of time for the operator or contractor to comply may be appropriate if the hazard can be eliminated or minimized with an interim measure which ensures protection of miners.

#### XI. MODIFICATIONS TO CITATIONS/ORDERS/SUBSEQUENT ACTIONS

The original Mine Citation/Order Form 7000-3 and 7000-3a and all copies must be exactly alike. Any items written or entered in error on the form must be modified using a Mine Citation/Order Continuation Form 7000-3a. **Inspectors will not make changes on MSHA copies nor ask mine operators to make the same changes on their copies.** 

**Example:** If a subsequent extension action is being changed, state: "The extension dated  $\frac{mm/dd/yy}{y}$  is being modified." If a subsequent termination action is being modified, state: "The termination dated  $\frac{mm/dd/yy}{y}$  is being modified." If a modification is being changed, state: "The modification dated  $\frac{mm/dd/yy}{y}$  is being corrected." If a Mine Citation/Order

Form is being modified or corrected, state: "Citation (or Order) No.  $\underline{xxxxxxx}$  is being modified in Section  $\underline{xx}$ , Item  $\underline{xx}$ , to (the corrected action should be entered)."

### XII. TERMINATING CITATIONS AND ORDERS

A. Citations and orders will be terminated on either the Mine Citation/Order Form or a Continuation Form and given to the mine operator or contractor.

**Example:** Four citations/orders were written and issued to the mine operator on Monday. Three days later all violative conditions were corrected. The four citations/orders shall be individually terminated on a Mine Citation/Order Continuation Form 7000-3a.

B. Citations and orders shall be terminated when a mine is classified by MSHA as permanently abandoned and sealed, or if it moves to a location some distance from the original site (e.g., a portable crusher). Citations and orders shall also be terminated when out of compliance equipment is permanently "removed from service," is permanently retired from service, or is permanently removed from the mine site.

The following procedures shall apply when citations and orders are terminated in the above situations:

1. Mine operation status is changed to "permanently abandoned."

The inspector shall make every reasonable attempt to determine if the operator complied with the cited standards.

a. If the operator did comply then:

Terminate any outstanding citations or orders and hand deliver or mail the operator the terminations. Write on the termination(s) that the violative condition(s) or practice(s) was corrected.

b. If it is determined that the operator did not correct the violative condition(s) or practice (s) before the mine was abandoned then:

Terminate any outstanding citations or orders and hand deliver or mail the operator the terminations. Write the following on each termination:

"The basis for termination of this citation (or order) is the classification of the mine as permanently abandoned. The violative condition(s) or practice(s) was not corrected. The operator is required to comply with the provisions of the cited standard before resuming activities at this location or at another mine.

2. Operation or equipment moves to a new location away from the initial mine site.

a. If the inspector determines that the operator did comply prior to moving then:

Terminate all outstanding citations or orders and hand deliver or mail the operator all terminations. Note on the termination(s) that the basis for termination is that the violative condition was corrected.

b. If the inspector determines that the operator did not comply prior to moving then:

Terminate all outstanding citations or orders and hand deliver or mail the operator all terminations. Write the following statement on each termination:

"The basis for termination of this citation (or order) is the moving of mining operations (or equipment). The violative condition(s) or practice(s) was not corrected prior to moving. The operator is required to comply with the provisions of the standard before resuming any activities at another mine. Failure to correct the cited condition(s) or practice(s) prior to resuming these activities will be considered by MSHA to be aggravated conduct constituting more than ordinary negligence."

### XIII. EQUIPMENT REMOVED FROM SERVICE

The term "removed from service" does not mean that the mine operator stopped using and parked a piece of equipment (e.g., front-end loader, truck) or a mining unit (e.g., portable crusher, screening unit) when it could or can be restarted and easily placed back into service in the same condition which caused issuance of the original citation(s) or order(s). Rather, "removed from service" refers to the action(s) taken by the mine operator or contractor to permanently incapacitate or render inoperable the equipment and eliminate the violation. The inspector should note those actions on the termination and refer to any evidence that the equipment was removed from service such as documentation and relevant statements made by the mine operator, or his or her representatives,

**Scenario:** A loader is cited for not having an audible back-up alarm installed. The mine operator (or contractor) takes the tires off the loader, places it on blocks, removes the battery, and welds the doors closed. Any of these actions could qualify the equipment as being "removed from service" and justify termination of any outstanding citation(s) or order(s).

### XIV. MINE OWNERSHIP CHANGES WITH OUTSTANDING CITATIONS OR ORDERS

When ownership of a mine changes after a citation(s) or order(s) is issued, the termination should be issued to the operator of the property at the time of termination. The operator of the mine at the time a citation is issued is the entity that will be assessed the civil penalty even though the mine no longer belongs to that operator.

#### In all cases, do not modify the outstanding citation(s) to change mine ownership.

When a change in mine operator occurs after a citation is issued but before it is terminated and justification is not found to extend the citation, a Section 104(b) order of withdrawal can be issued to the new mine operator.

Unless conditions that were noted on the original citation have deteriorated and now pose an imminent danger to miners, the new mine operator should generally be given the same amount of time to correct the violative condition as was given the previous mine operator.

**Example:** On July 1, Jane Doe Sand and Gravel is cited for an unguarded conveyor head pulley and given one week to abate the condition. On July 7, Tom Brown Crushing purchases the mine and begins managing the operation the same day. On July 10, an inspector returns to check on the outstanding guarding citation and finds that a guard had not been installed on the head pulley.

Based on the circumstances noted above:

- an extension would be issued if the inspector found and documented mitigating circumstances (e.g., the new mine operator was unaware of the violation). The extension would be issued to "Tom Brown Crushing" noting in Section II narrative of form 7000-3a that Tom Brown Crushing purchased the operation on July 7 and was the new mine operator; or
- a Section 104(b) order of withdrawal would be issued if the inspector found and documented that there were no mitigating circumstances to issue an extension (e.g., the new mine operator was aware of the violation but chose not to abate the cited condition). The 104(b) order would be issued to "Tom Brown Crushing" noting in the Item 8 narrative that Tom Brown Crushing purchased the operation on July 7 and was the new mine operator.

# XV. VACATING CITATIONS/ORDERS

Vacated citations and orders must be included with inspection or investigation reports as they are part of the inspection record. If the inspector is still at the mine, he or she will not reclaim the previous copies and mark the citation or order "Void." Instead, those copies shall be left with the mine operator and inspectors shall issue a "Vacate" action on Form 7000-3a. Inspectors shall state the specific reason for vacating the citation or order on that form. Copies of all vacated citations and orders shall be forwarded to the District Office separate from the inspection report. Vacating an imminent danger order must be authorized by the appropriate District or Assistant District Manager prior to that action occurring.

### XVI. VOIDING CITATIONS/ORDERS

A voided citation or order is one which was written or typed on the Mine Citation/Order Form and an error was discovered before it was presented to the mine operator or contractor.

The inspector will mark "Void" on the original citation or order form and all copies. The circumstances which caused the voidance will be noted on all forms. These voided forms will not be included with the inspection report but will be kept with the citation book until it is completed. The inspector should attach the voided forms to the empty book and return it to the field office supervisor when the book is finished.

When using the IPAL system, a citation or order that is issued in error must be vacated or modified by using Form 7000-3a.

### XVII. STANDARD SUBSECTIONS - CITATIONS/ORDERS

Unless directed otherwise, specify both the standard <u>AND</u> the appropriate subsection when a violation is cited.

**Examples:** Citations for failure to guard a piece of equipment should be issued under 56/57.14107(a) **and not** 56/57.14107; violations for failure to maintain an audible warning device on self-propelled equipment should be cited as 56/57.14132(a) **and not** 56/57.14132.

# XVIII. PART 41 - LEGAL IDENTITY

Each mine operator is required to file notification of legal identity and every change thereto on an MSHA Legal Identity Report Form 2000-7 with the appropriate MSHA office.

Inspectors will check for any change in the mine operator, mine name, company officers, parent company, and the address of record during every inspection. An updated Legal Identity Report Form must be submitted by the mine operator within 30 days if changes have occurred. When applicable, a citation will be issued to the mine operator when corporate, company, partnership, or any other changes have been made without MSHA being notified as required under 30 CFR Part 41.

The operator and the mine name on a Mine Citation/Order Form and Continuation Form must be the same as on the Legal Identity Report Form in effect at the time a citation or order is issued.

# **XIX. PART 44 - PETITIONS FOR MODIFICATION**

Title 30 CFR Part 44.4(c) reads in part: "... Orders granting petitions for modification may contain special terms and conditions to assure adequate protection to miners. The

modification, together with any conditions, shall have the same effect as a mandatory standard."

During each regular inspection, inspectors shall:

- determine that all requested petitions for modification, or a notice of their availability, are posted on the mine bulletin board as required by 30 CFR Part 44.9; and
- determine if a final petition decision or summary of that decision is posted. A copy of the full decision must be kept at the affected mine office and made available to the miners in accordance with 30 CFR 44.5(b).
- review the terms and conditions contained in the decision and order section of all granted petitions for modification.

When a violation of one or more of the conditions specified in granted petitions for modification is found, the inspector shall:

- cite the safety standard for which the petition for modification was granted;
- include the docket number of the granted petition for modification in Item 8 of the Mine Citation/Order Form;
- note the specific condition which was violated in the narrative of the Mine/Citation Order Form; and
- notify his (or her) supervisor after citing this violation.

This citation may be the basis for initiating action to revoke the granted petition depending on the circumstances present at the time of issuance.

# XX. PART 50 - ACCIDENT, INJURY AND EMPLOYMENT REPORTING VIOLATIONS

An evaluation of compliance with employee and injury reporting requirements under 30 CFR Part 50 and the MINER Act shall be made during every regular inspection.

Inspectors shall issue a citation for each separate instance of:

- failing to immediately notify MSHA of an accident as defined in Part 50.2(h) within 15 minutes (50.10);
- failing to investigate an accident or occupational injury (50.11);
- altering an accident site (50.12);

- failing to report an accident, injury, or illness (50.20);
- failing to report quarterly employment (50.30); and
- reporting employment hours, production (coal), illnesses, or reportable injuries or accidents after the due date and each instance of inaccurate reporting (50.20 or 50.30).

Inspectors shall issue only one citation where mine operators have:

- failed to maintain quarterly employment or accident investigation reports (50.40); and
- failed to allow an MSHA representative to inspect and copy information related to accidents, injuries, or illnesses (50.41).

Violations of 30 CFR Part 50 (excluding 50.10) are violations of regulations as opposed to standards and will always be evaluated as "non-S&S." These violations, however, may be the result of high negligence, depending on circumstances. Violations of 30 CFR 50.10 may be evaluated as "S&S" or "non-S&S" depending on circumstances.

# XXI. POSSIBLE KNOWING/WILLFUL VIOLATION REVIEW FORM (7000-20)

A. Inspectors will initiate a Possible Knowing/Willful Violation Review Form for:

- 107(a) orders with 104(a) and 104(d) citations;
- 107(a) orders with 104(d) orders;
- "S&S" 104(d) citations and orders with an evaluation of at least "high" for negligence;
- 104(e) orders of withdrawal with an evaluation of at least "high" for negligence;
- flagrant violations; and
- citations issued for working in violation of an order.
- B. The District Office shall be sent a packet that includes:
  - 1. the original Possible Knowing/ Willful Violation Review Form;
  - 2. a copy of the Legal Identity Report;
  - 3. a copy of the relevant general field notes;
  - 4. a copy of the citation/order notes;
  - 5. appropriate photographs; a copy of the relevant citation(s) or order(s); and
  - 6. a copy of all modifications.

This packet shall be mailed to the District Office in a timely manner following the date the citation(s) or order(s) was issued.

Appendix A

Safety Violations

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|---|------|
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Mine Safety and Health Administration

| Section 1 Y                                  | /iolation Data  |             |                               |                           |                |
|--|---|-------------|-------------------------------|---------------------------|----------------|
| 1. Date                                      | Mo Da Yr 2. Time (24 Hr. Clock)   |             |                               | 3. Citation/Order         |                |
|  | 0 7 0 1 0 8   | 0800        | n                             | Number                    | 4 4 1 0 1 6 1  |
| 4. Served To                                 |   | 0000        | 5. Operator                   | rumber                    |                |
| FRED BI                                      | RCH, OWNER  |             | F. B. MINING COMPAN           | NΥ                        |                |
| 6. Mine                                      |   |             | 7. Mine ID                    |                           |                |
| F. B. MI                                     | νE  |             | 5 6 - 0 9                     | 999- (co                  | ontractor)     |
| 8. Condition                                 | or Practice   |             |                               | 8a. Written N             | Notice (103g)  |
|  |   |             |                               |                           |                |
|  | Birch, owner of the F. B. Mining Company, refus   |             |                               |                           | stated         |
|  | ISHA inspector could not enter his mine to condu<br>rch warrant was not necessary and that refusal to a |             |                               |                           |                |
|  | the Mine Act. This condition has not been design  |             |                               |                           |                |
|  | n of the Mine Act rather than a mandatory safety  |             |                               |                           |                |
|  |   |             |                               |                           |                |
|  |   |             |                               |                           |                |
| NOTE: S                                      | ection I, Item 9B, is completed with 103(a)   |             |                               |                           |                |
|  |   |             |                               |                           |                |
|  |   |             | See Cor                       | ntinuation Form (MSHA For | rm 7000-3a)    |
| 9. Violation                                 | A. Health   |             |                               |                           |                |
| <i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Safety B. Section   |             | C. Part/Section of            |                           |                |
|  | Other of Act 1 0 3 -  | а           | Title 30 CFR                  |                           |                |
| Section II                                   | Inspector's Evaluation  |             |                               |                           |                |
| 10. Gravity:                                 | _   | _           | _                             | _                         | _              |
| A. Injury                                    | or Illness (has) (is): No Likelihood X U  | nlikely     | Reasonably Likely             | Highly Likely             | Occurred       |
|  | y or Illness could rea-   |             |                               |                           |                |
| sonat  | bly be expected to be: No Lost Workdays   | X Lost V    | Workdays or Restricted Duty   | Permanently Disabli       | ng Fatal       |
| C. Signi                                     | ficant and Substantial (See Reverse): Yes   | No          | X                             | D. Number of Persons A    | Affected 0 0 0 |
|  | ce (check one)  | C Malant    |                               |                           |                |
| A. Non                                       |   | C. Moderate | ε                             |                           | ess Disregard  |
| 12. Type of                                  |   | 1           | 3. Type of Issuance (check on |                           |                |
|  | 1 0 4 - a - , -   | -           | Citation X Order              | Safeguard                 | Written Notice |
| 14. Initial A                                |   | D. Wri      | itten E. Citation/            | F. Date                   | d Mo Da Yr     |
| A. Cita                                      | ion B. Order C. Safeguard   | Noti        |                               |                           |                |
|  |   |             | Number                        |                           |                |
| 15. Area or 1                                | Equipment   |             |                               |                           |                |
|  |   |             |                               |                           |                |
| 16. Termina                                  | tion Due Mo Da Yr   |             |                               |                           |                |
|  |   | ne (24      |                               |                           |                |
| <u> </u>                                     |   | r. Clock)   | 0 8 3 0                       |                           |                |
|  | Termination Action  |             |                               |                           |                |
| 17. Action to                                | Terminate   |             |                               |                           |                |
|  |   |             |                               |                           |                |
| 18. Termina                                  |   |             |                               |                           |                |
|  | A. Date B. Time (24   | Hr Clock)   |                               |                           |                |
| Section IV -                                 | - Automated System Data   |             |                               |                           |                |
| 19. Type of                                  |   |             | 21. Primary or Mill           |                           |                |
| (activi                                      | E 1 5   | 0 7 3 5     | 5 0 0                         |                           |                |
| 22. Signatur                                 |   | <u> </u>    |                               | 23. AR Nur                | nber           |
| JOHN SN                                      |   |             |                               |                           | 0 1 9 9 9      |
|  | n 7000-3 Mar 85 (Revised)   |             |                               |                           |                |
|  |   |             |                               |                           |                |

#### 104(a) CITATION - DENIAL OF RIGHT OF ENTRY

#### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Violation Data   | 1 1                               |                             |                    |
|--|-----------------------------------|-----------------------------|--------------------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |                                   | 3. Citation/Order           |                    |
| 0 7 0 1 0 8 0 7 0  | 0                                 | Number                      | 4 4 1 0 0 0 1      |
| 4. Served To   | 5. Operator                       | Tuniou                      |                    |
| Joe Doe, Co-owner  | Big Lick Coal Company             |                             |                    |
| 6. Mine  | 7. Mine ID                        |                             |                    |
| Big Lick No. 1   | 6 4 - 0 7 1                       | 1 5 3 - (co                 | ntractor)          |
| 8. Condition or Practice   | 04-07                             | 8a. Written No              | ,                  |
| 8. Condition of Flactice   |                                   | oa. witten No               | Juce (105g)        |
| On 7/1/08, Joe Doe, partner and mine foreman, refused to allow P   | aul longs on authorized represent | ative of the Secretary entr | winto the Dig Liek |
|  |                                   |                             |                    |
| No. 1 Mine for the purpose of conducting an inspection of the min  |                                   |                             |                    |
| could not enter the mine to conduct any inspection without a searc<br>This condition has not been designated as "significant and substan |                                   |                             |                    |
| mandatory safety or health standard.   | that because the conduct violated | a provision of the Mille A  |                    |
| mandatory safety of nearth standard.   |                                   |                             |                    |
|  |                                   |                             |                    |
|  |                                   |                             |                    |
|  |                                   |                             |                    |
|  |                                   |                             |                    |
|  | See Conti                         | nuation Form (MSHA For      | m 7000-3a)         |
| 9. Violation A. Health   |                                   |                             |                    |
| 9. Violation A. Health Safety B. Section   | C. Part/Section of                |                             |                    |
| Other of Act 1 0 3 - a   | Title 30 CFR                      |                             |                    |
| Section II Inspector's Evaluation  | The 50 CFR                        |                             |                    |
| 10. Gravity:   |                                   |                             |                    |
| A. Injury or Illness (has) (is): No Likelihood X Unlikely  | Reasonably Likely                 | Highly Likely               | Occurred           |
|  |                                   |                             |                    |
| B. Injury or Illness could rea-  |                                   |                             |                    |
| sonably be expected to be: No Lost Workdays $X$ I  | Lost Workdays or Restricted Duty  | Permanently Disa            | bling Fatal        |
| C. Significant and Substantial (See Reverse): Yes N  | o X                               | D. Number of Persons At     | ffected 0 0 0      |
| 11. Negligence (check one)   |                                   |                             |                    |
| A. None B. Low C. Mode   | rate D. High                      | X E. Reckless               | s Disregard        |
| 12. Type of Action   | 13. Type of Issuance (check one)  |                             |                    |
|  |                                   |                             | Witten Nation      |
| 1 0 4 - a - ,  | Citation X Order                  | Safeguard W                 | Vritten Notice     |
| 14. Initial Action D. V  | Vritten E. Citation/              | F. Dated                    | d Mo Da Yr         |
|  |                                   | 1. Dated                    |                    |
| A. Citation B. Order C. Safeguard N  | otice Order                       |                             |                    |
| 15. Area or Equipment  |                                   |                             |                    |
| 13. Alea of Equipment  |                                   |                             |                    |
|  |                                   |                             |                    |
| 16. Termination Due Mo Da Yr   |                                   |                             |                    |
| A. Date   B. Time (24  |                                   |                             |                    |
| 0 7 0 1 0 8 Hr. Clock)   | 0 7 4 5                           |                             |                    |
| Section III Termination Action   |                                   |                             |                    |
| 17. Action to Terminate  |                                   |                             |                    |
|  |                                   |                             |                    |
|  |                                   |                             |                    |
| 18. Terminated Mo Da Yr  |                                   |                             |                    |
| A. Date B. Time (24 Hr Cloc  | k)                                |                             |                    |
|  |                                   |                             |                    |
| Section IV Automated System Data   |                                   |                             |                    |
| 19. Type of Inspection 20. Event Number  | 21. Primary or Mill               |                             |                    |
|  | 0 8 0                             |                             |                    |
| 22. Signature  |                                   | 23. AR Num                  | her                |
| -  |                                   | 23. mix mulli               |                    |
| Paul Jones   |                                   |                             | 2 9 3 2 0          |
| MSHA Form 7000-3 Mar 85 (Revised)  |                                   |                             |                    |

#### 104(a) CITATION - DENIAL OF RIGHT OF ENTRY

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8         3         4   | 3. Citation/Order         4         4         1         0         1         6         2  |
| 4. Served To  | 5. Operator  |
| FRED BIRCH, OWNER   | F. B. MINING COMPANY   |
| 6. Mine<br>F. B. MINE   | 7. Mine ID 5 6 - 0 9 9 9 9 - (contractor)  |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
|   |  |
| Mr. Fred Birch, owner and operator of the F. B. Mining Company, contright of entry into the F.B. Mine for the purpose of conducting an inspec   |  |
| Section 103(a) of the Federal Mine Safety and Health Act of 1977.   | and of the finite in accordance with the requirements of   |
| · · · · · · · · · · · · · · · · · · ·   |  |
| NOTE: Section I. Item 9B, is completed with 103(a). Items 10 and 11   | are not completed. Item 15 is completed with the phrase "No Area Affected."  |
|   |  |
|   |  |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health  |  |
| Safety     B. Section       Other     of Act       1     0       3     -  | C. Part/Section of   |
| Other         of Act         1         0         3         -         a         I           Section II Inspector's Evaluation         Image: Section II | Title 30 CFR         . <t< td=""></t<> |
| 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely Highly Likely Occurred   |
| B. Injury or Illness could rea-   |  |
|   | st Workdays or Restricted Duty 🔲 Permanently Disabling 🗌 Fatal 🗌   |
| C. Significant and Substantial (See Reverse): Yes No  | D. Number of Persons Affected  |
| 11. Negligence (check one)  |  |
| A. None B. Low C. Moderat   |  |
| 12. Type of Action 1 0 4 - b - ,  | 3. Type of Issuance (check one)         Citation       Order       X       Safeguard       Written Notice  |
| 14. Initial Action   D. Wr     A. Citation   X     B. Order   C. Safeguard  |  |
| T5. Area or Equipment   |  |
| NO AREA AFFECTED  |  |
|   |  |
| Intermination Due     Mo     Da     Yr       A. Date     B. Time (24)       Hr. Clock)  |  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
|   |  |
| 18. Terminated     Mo     Da     Yr       A. Date     Mo     I     I   B. Time (24 Hr Clock)  |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection 20. Event Number   | 21. Primary or Mill  |
| (activity code) $\mathbf{E} \begin{bmatrix} 2 & 7 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 7 & 3 \end{bmatrix}$  |  |
| 22. Signature   | 23. AR Number  |
| JOHN SMITH  | 0 1 9 9 9  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

# 104(b) ORDER - DENIAL OF RIGHT OF ENTRY

Mine Safety and Health Administration

| Section 1 Violation Data  |   |          |
|---|---|----------|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8 |   | 0 2      |
| 4. Served To  | 5. Operator   |          |
| Joe Doe, Co-owner   | Big Lick Coal Company   |          |
| 6. Mine<br>Big Lick No. 1   | 7. Mine ID 6 4 - 0 7 1 5 3 - (contractor)   |          |
| 8. Condition or Practice  | 8a. Written Notice (103g)   |          |
|   |   |          |
|   | es, an authorized representative of the Secretary, the right of entry into the Big Lick<br>nine in accordance with the requirements of Section 103(a) of the Act. | <u> </u> |
| No. 1 Mille for the purpose of conducting an inspection of the fill                         | ane in accordance with the requirements of Section 105(a) of the Act.   |          |
|   |   |          |
|   |   |          |
|   |   |          |
|   |   |          |
|   |   |          |
|   | See Continuation Form (MSHA Form 7000-3a)   |          |
| 9. Violation A. Health  |   | -        |
| Safety B. Section   | C. Part/Section of  |          |
| Other of Act 1 0 3 - a  | Title 30 CFR  |          |
| Section II Inspector's Evaluation<br>10. Gravity:   |   |          |
| A. Injury or Illness (has) (is): No Likelihood Unlikely                                     | Reasonably Likely   Highly Likely   Occurred  |          |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays              | Lost Workdays or Restricted Duty Permanently Disabling Fatal  |          |
|   | No   D. Number of Persons Affected  |          |
| 11. Negligence (check one)  | D. Number of Ferson's Affected  |          |
| A. None B. Low C. Mode  | erate D. High E. Reckless Disregard   |          |
| 12. Type of Action  | 13. Type of Issuance (check one)  | _        |
| 1 0 4 - b - ,   –   –   | Citation Order X Safeguard Written Notice   |          |
| 14. Initial Action D.   | Written E. Citation/ F. Dated Mo Da   | Yr       |
| A. Citation X B. Order C. Safeguard N   | Notice Order  |          |
| 16 A E. '   | Number         4         4         1         0         0         1         0         7         0         1  | 0 8      |
| 15. Area or Equipment<br>No area affected.  |   |          |
| No area affected.   |   |          |
| 16. Termination Due Mo Da Yr  |   |          |
| A. Date B. Time (24<br>Hr. Clock)   |   |          |
| Section III Termination Action  |   |          |
| 17. Action to Terminate   |   |          |
|   |   |          |
| 18. Terminated Mo Da Yr   |   |          |
| A. Date B. Time (24 Hr Clo  | ock)  |          |
| Section IV Automated System Data  |   |          |
| 19. Type of Inspection   20. Event Number   | 21. Primary or Mill   |          |
|   |   |          |
| 22. Signature   | 23. AR Number   |          |
| Paul Jones<br>MSHA Form 7000-3 Mar 85 (Revised)   |   | 2 0      |
|   |   |          |

#### 104(b) ORDER - DENIAL OF RIGHT OF ENTRY

Mine Citation/Order Continuation

#### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subs   |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|------------------|---------------|--------------|-----------|-----------------------|-------------|-------------|--------------|--------|---------|----------------|--------|--------|---------|-------|---------|---------|-------|-------|------|-----|
| 1. Subsequent A  | ction 1a. C   | Continuation |           | ted<br>riginal Issue) | Mo<br>      | Da          | Yr           |        | 3.      | Citati<br>Numl |        | Order  |         |       |         |         |       |       |      |     |
|                  |               |              | x -       | 8                     |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
| 4. Served To     |               |              |           |                       |             | 5. Op       | erator       |        |         |                |        |        |         |       |         |         |       |       |      |     |
| John Smith, A    | Assistant Fo  | reman        |           |                       |             |             |              |        | lompa   | any, In        | с.     |        |         |       |         |         |       |       |      |     |
| 6. Mine          |               |              |           |                       |             | 7. Mi       | ine ID       |        | ΠÎ      | ГП             |        |        |         |       |         |         |       |       |      |     |
| No. 1            |               |              |           |                       |             |             |              | 4 4    | - 0     | 3 5            | 3 6    | 5 -    |         | (     | contr   | acto    | r)    |       |      |     |
| Section Il Just  | ification for | Action       |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
| Purpose - Thi    | s inspectior  | n was condu  | icted to  | investigate a         | compla      | int dat     | ted 7/2      | 2/08 a | ıllegir | ng that        | dang   | gerou  | s loos  | se co | oal, co | oal d   | lust, | and   |      |     |
| float coal dus   | t have accu   | mulated thr  | oughou    | t the 2 south b       | oelt enti   | ry.         |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
| Negative Find    | lings -The e  | entire 2 sou | th belt e | entry was exar        | nined a     | and acc     | cumula       | tions  | of loc  | ose coa        | l, coa | al dus | st or f | loat  | coal    | dust    | t wer | e not | four | nd. |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
| This example     |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
| are alleged to   |               |              |           |                       |             |             |              | ards   | must    | be add         | iresse | ed by  | issui   | ing a | ı citat | ion     | or or | der   |      |     |
| or by providin   | ng written n  | otification  | that eac  | h alleged haza        | ard did     | not ex      | ist.         |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        | ~       | ~     |         |         | _     |       |      | _   |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        | Se      | e Co  | ontinu  | atio    | n Fo  | rm    |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
| Section III Sub  | osequent Ac   |              |           |                       |             |             |              |        | 1       |                |        |        |         |       |         |         |       |       |      |     |
| 8. Extended To   |               | Mo Da        |           |                       |             |             |              |        | ~       |                | _      |        | _       |       |         | —       |       |       |      | _   |
|                  | A. Date       |              |           | B. Time (24 I         | Hr. Clo     | ck)         |              |        | C. V    | acated         |        | D      | . Ter   | mina  | ated    |         | E. N  | 4odif | ied  |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
| Section IV Ins   | 1             |              |           |                       | <del></del> | <del></del> | <del> </del> |        |         |                |        |        |         |       |         |         |       |       |      |     |
| 9. Type of Inspe |               |              | Event N   |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  | ΕC            | 3            |           | 0 8                   | 8 8 8       | 8 8 0       | 1            |        |         |                |        |        |         |       |         |         |       |       |      |     |
|                  |               |              |           |                       |             |             |              |        |         |                |        |        |         |       |         | <u></u> |       |       | -    |     |
| 11. Signature    |               |              |           |                       | R Numb      |             | . Date       |        |         |                |        | 3. Tii | me (2   | 4 H   | r. Clo  | ck)     |       |       |      |     |
| James Lee        |               |              |           | 2 0                   | 077         | 7           |              | 0      | 7 2     | 2 3 0          | 8      |        |         |       |         |         |       | 1 (   | ) 3  | 0   |
| MSHA Form 70     | 00-3a, Mar    | 85 (Revised  | d)        |                       |             |             |              |        |         |                |        |        |         |       |         |         |       |       |      |     |

#### 103(g) HAZARD COMPLAINT INSPECTON NOTICE OF NEGATIVE FINDINGS

Mine Safety and Health Administration

| Castian 1 Wielstian Data   |  |
|--|--|
| Section 1 Violation Data       1. Date     Mo     Da     Yr     2. Time (24 Hr. Clock) | 3. Citation/Order  |
| 1. Date Mo Da 11 2. Time (24 HI. Clock) $0 7 0 2 0 8$ 1 3 4                            |  |
| 4. Served To   | 5. Operator  |
| J.R. JOHNSON, SAFETY DIRECTOR  | ABC MINING COMPANY   |
| 6. Mine  | 7. Mine ID   |
| ABC MINE AND MILL  | 7 5 - 0 9 1 3 3 - (contractor)   |
| 8. Condition or Practice   | 8a. Written Notice (103g)  |
| A mine fire occurred at the 2315 level near the power substation. Se                   | even miners are trapped behind a barricade erected on the No. 7 Gangway. |
| This entrapment was confirmed by the mine foreman in a telephone                       | conversation with one of the trapped miners. Contact with the            |
| trapped miners was lost just before 0930 hours. All persons are proh                   | ibited from entering the mine with the exception of a 6-person rescue    |
| team which must coordinate with the Fresh Air Base to determine if                     |  |
| team must be at the Fresh Air Base while the other team is pursuing                    | the rescue effort.   |
|  |  |
| NOTE: The Gravity and Negligence Sections are not completed.                           |  |
|  |  |
|  | See Continuation Form (MSHA Form 7000-3a)                                |
| 9. Violation A. Health   | C. Dert/Centien of   |
| Safety B. Section<br>Other of Act -  | C. Part/Section of<br>Title 30 CFR                                       |
| 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 rea-  |  |
| sonably be expected to be: No Lost Workdays Lo   | ost Workdays or Restricted Duty Permanently Disabling Fatal              |
| C. Significant and Substantial (See Reverse): Yes No                                   | D. Number of Persons Affected  |
| 11. Negligence   (check one)     A. None   B. Low     C. Modera                        | te D. High E. Reckless Disregard   |
| 12. Type of Action   | 13. Type of Issuance (check one)   |
| 1 0 3 - j - ,  | Citation Order X Safeguard Written Notice                                |
| 14. Initial Action D. Wri  | tten E. Citation/  |
| A. Citation B. Order C. Safeguard Not  | tice Order   |
| 15. Area or Equipment  | i vullioor   |
| ENTIRE MINE  |  |
| 16 Tompingting Days I Mal Dal Val  |  |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24)    |  |
| Hr. Clock)   |  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
|  |  |
| 18. Terminated Mo Da Yr  |  |
| A. Date B. Time (24 Hr Clock)  |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection   20. Event Number  | 21. Primary or Mill  |
|  | 5 1 1  |
| 22. Signature  | 23. AR Number  |
| JOHN SMITH   | 0 1 9 9 9  |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |

103 (j) ORDER - CONTROL OF RESCUE AND RECOVERY OPERATIONS

Continuation

#### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subsequent Action                         | n/Continuat  | ion Data             |         |              |          |             |              |                   |                   |           |
|---|--------------|----------------------|---------|--------------|----------|-------------|--------------|-------------------|-------------------|-----------|
| 1. Subsequent Action 1a. Co                         |              |                      | Mo      | Da Y         | r        | 3. Cit      | ation/Order  |                   |                   |           |
| Χ   |              | (Original Issue)     | 07      | 2 5 0        | 8        | Nu          | mber         | 4 4 1             | 0 0 0 6 -         | 0 1       |
| 4. Served To  |              |                      |         | 5. Operato   | or       |             |              |                   |                   |           |
| John Smith, Assistant Fore                          | man          |                      |         | J and        | S Coal C | Company, Ir | nc.          |                   |                   |           |
| 6. Mine   |              |                      |         | 7. Mine II   | )        |             |              |                   |                   |           |
| No. 1   |              |                      |         |              | 4        | 4 0 3 5     | 3 6 -        | (contrac          | tor)              |           |
| Section II Justification for A                      | Action       |                      |         |              |          |             |              |                   |                   |           |
| Order No. 4410006 dated 7                           | 7/25/08 is h | ereby modified to pe | rmit re | ehabilitatio | n of the | 2 south sec | tion accordi | ing to the agreed | upon plan date    | 17/25.    |
| All items listed on this plan                       |              |                      |         |              |          |             |              | 6                 | - I · I · · · · · |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              |                   |                   |           |
|   |              |                      |         |              |          |             |              | See Continuat     | ion Form          |           |
| Section III Subsequent Activ                        | on Takan     |                      |         |              |          |             |              |                   |                   |           |
| 8. Extended To                                      | Mo Da        | Yr                   |         |              | ТТ       |             |              |                   |                   |           |
| A. Date   |              | B. Time (24 H        | Ir. Clo | ock)         |          | C. Vacate   | ed D         | D. Terminated     | E. Modified       | i X       |
|   |              |                      |         |              |          |             |              |                   |                   |           |
| Section IV Inspection Data<br>9. Type of Inspection | 10 E         | vent Number          | п       |              |          |             |              |                   |                   |           |
| E 0   |              |                      | 8 8     | 8 0 8        |          |             |              |                   |                   |           |
| 11. Signature                                       |              | AR                   | Num     | ber 12. Da   | ate      | Mo Da       | Yr 13. Ti    | me (24 Hr. Clock  | ()                |           |
| James Lee   |              | 2 0                  | 7 7     | 7            |          | 0 8 0 5     | 0 8          |                   | 0 9               | 0 0       |
|   |              | • •                  |         |              |          |             |              |                   |                   | · · · · · |

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

# 103(j) ORDER - MODIFICATION

Continuation

### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subseq     | uent Action/Con   | ntinuation | Data                |         |          |         |        |           |            |           |               |        |         |        |        |               |
|----------------------|-------------------|------------|---------------------|---------|----------|---------|--------|-----------|------------|-----------|---------------|--------|---------|--------|--------|---------------|
| 1. Subsequent Acti   | on 1a. Cont       | inuation   | 2. Dated            | Mo      | Da       | Yr      |        | 3. Ci     | itation/Or | der       |               |        |         |        |        |               |
| X                    |                   |            | (Original Issue)    | 0 7     | 2 5      | 0 8     |        | Nu        | umber      |           | 4             | 4 1    | 0 0     | 0      | 6 -    | 0 2           |
| 4.0 175              |                   | -          |                     |         |          | Ļ       | ļ      |           |            |           |               |        |         |        |        |               |
| 4. Served To         |                   |            |                     |         | 5. Ope   |         | G      |           |            |           |               |        |         |        |        |               |
| John Smith, Assis    | tant Foreman      |            |                     |         |          |         | Comp   | any, Inc. |            | <u> </u>  |               |        |         |        |        |               |
| 6. Mine              |                   |            |                     |         | 7. Min   | ne ID   |        |           |            |           |               |        |         |        |        |               |
| No. 1                |                   |            |                     |         |          |         | 4 4    | 0 3 5     | 3 6        | -         |               | (cont  | ractor) |        |        |               |
| Section Il Justific  | cation for Action | n          |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
| Ventilation has      | been restored to  | o the No 2 | south section. An e | xamin   | ation of | f the m | ine wa | is made a | and sampl  | es of th  | e mi          | ne atn | osphe   | re did | not    | reveal        |
| the presence of      |                   |            |                     |         |          |         |        |           | and sump   | 00 01 01  |               |        | iospiie | 10 010 | nov    | <u>tovour</u> |
| ł                    |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      |                   |            |                     |         |          |         |        |           |            | S         | See C         | ontin  | uation  | Form   |        |               |
| Section 111 Subse    | quent Action T    | aken       |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
| 8. Extended To       |                   | Io Da      | Yr                  |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      | A. Date           |            | B. Time (24 H       | Ir. Clo | ck)      |         |        | C. Vaca   | ted        | D. Te     | ermin         | ated   | XE      | E. Moc | lified | 1             |
|                      |                   |            |                     |         |          |         |        |           |            |           |               |        | -       |        |        |               |
| Section IV Inspec    | ction Data        |            |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |
| 9. Type of Inspectio | on                | 10. Eve    | ent Number          |         |          |         |        |           |            |           |               |        |         |        |        |               |
|                      | E 0 1             |            | 0 8                 | 8 8 8   | 8 8 0    | 9       |        |           |            |           |               |        |         |        |        |               |
| 11. Signature        |                   |            | A T                 |         | iber 12  | Dete    | N      | Io Da     | Yr 13.     | Time      | <u>()</u> / I |        | ab)     |        | Т      |               |
| 11. Signature        |                   |            |                     |         |          | . Date  | N      |           |            | i iiile ( | (∠ <b>4</b> ∏ | u. Cit | UK)     |        |        |               |
| James Lee            |                   |            | 2 (                 | 0 7 7   | 7        |         | 0      | 8 0 5     | 0 8        |           |               |        |         |        | 09     | 0 0           |
| MSHA Form 7000       | -3a, Mar 85 (Re   | evised)    |                     |         |          |         |        |           |            |           |               |        |         |        |        |               |

103(j) ORDER - TERMINATION

Mine Safety and Health Administration

| Section 1 Violation Data   |                                    |
|--|------------------------------------|
| Mo         Da         Yr         2. Time (24 Hr. Clock)         0         9         0         0  | 3. Citation/Order<br>Number4410164 |
| 4. Served To 5. Operator   |                                    |
| JAMES JOHNSON, MINE SUPERINTENDENT J.H. MINING COMPANY,  | INC.                               |
| 6. Mine 7. Mine ID 7. Mine ID  |                                    |
|  | 0 1 3 - (contractor)               |
| 8. Condition or Practice   | 8a. Written Notice (103g)          |
|  |                                    |
| A fatal accident occurred at this operation on July 2, 2008, when two miners were attempting to blast  |                                    |
| point area. This order is issued to assure the safety of all persons at this operation. It prohibits all act   | ivity at the No. 4 draw point area |
| until MSHA has determined that it is safe to resume normal mining operations in the area. The mine   |                                    |
| from an authorized representative for all actions to recover and/or restore operations to the affected ar  | ea.                                |
|  |                                    |
| NOTE: The gravity and negligence sections are not completed nor is a termination due date establis   | ahad                               |
| NOTE. The gravity and negrigence sections are not completed not is a termination due date establis   | sneu.                              |
|  |                                    |
| See Contin   | uation Form (MSHA Form 7000-3a)    |
| 9. Violation A. Health   |                                    |
| Safety B. Section C. Part/Section of   |                                    |
| Other of Act - Title 30 CFR  |                                    |
| 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 rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty  | Permanently Disabling Fatal        |
|  |                                    |
| C. Significant and Substantial (See Reverse): Yes No   | D. Number of Persons Affected      |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High  | E. Reckless Disregard              |
| 12. Type of Action       1       0       3       -       k       -       -       13. Type of Issuance (check one)         Citation       Order                     | X Safeguard Written Notice         |
| 14. Initial Action       D. Written       E. Citation/         A. Citation       B. Order       C. Safeguard       Notice         Number       Number       Number | F. Dated Mo Da Yr                  |
| 15. Area or Equipment  |                                    |
| NO. 4 DRAW POINT AREA  |                                    |
|  |                                    |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24<br>Hr. Clock)   |                                    |
| 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 20. Event Number 21. Primary or Mill  |                                    |
| (activity code) $E 0 6$ 0 0 7 3 5 1 2  |                                    |
| 22. Signature  | 23. AR Number                      |
| -  |                                    |
| JOHN SMITH<br>MSHA Form 7000-3 Mar 85 (Revised)  | 0 1 9 9 9                          |
| IVISTIA FUTIT / UUU-J IVISTOJ (KEVISEU)  |                                    |

# 103(k) ORDER - CONTROL AND CONSULTATION DURING RESCUE AND RECOVERY OPERATIONS

Continuation

U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subsequen      | t Action/Continuat | ion Data               |         |          |          |  |
|--------------------------|--------------------|------------------------|---------|----------|----------|--|
| 1. Subsequent Action     | 1a. Continuation   | 2. Dated               | Mo      | Da       | Yr       | 3. Citation/Order  |
| X                        |                    | (Original Issue)       | 0 7     | 0 2      | 0 8      | Number         4         4         1         0         1         6         4         -         0         1 |
| 4. Served To             |                    |                        |         | 5. Op    | erator   |  |
| JAMES JOHNSON            | I, MINE SUPERIN    | TENDENT                |         | J.       | H. MIN   | ING COMPANY, INC.  |
| 6. Mine                  |                    |                        |         | 7. Mii   | ne ID    |  |
| JACKSON HOLE             | MINE               |                        |         |          |          | 5 6 - 0 0 0 1 3 - (contractor)   |
| Section Il Justification | on for Action      |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
| Order #4410164 is        | terminated. Condit | tions that contributed | to the  | e accide | ent have | e been corrected and normal mining operations can resume.  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          |  |
|                          |                    |                        |         |          |          | See Continuation Form  |
| Section Ill Subseque     |                    |                        |         |          |          |  |
| 8. Extended To<br>A. D   | Mo Da              | Yr<br>B. Time (24 H    | Ir. Clo | ock)     |          | C. Vacated D. Terminated X E. Modified   |
|                          |                    |                        |         |          |          |  |
| Section IV Inspectio     |                    |                        |         |          |          |  |
| 9. Type of Inspection    | E 0 6              | vent Number 0 0        | 73      | 5 1      | 2        |  |
| 11. Signature            |                    | AR                     | Num     | ber 12   | 2. Date  | Mo Da Yr 13. Time (24 Hr. Clock)   |
| JOHN SMITH               |                    | 0 1                    | 99      | 9        |          | 0 7 0 3 0 8 0 8 1 5  |
| MSHA Form 7000-3a        | , Mar 85 (Revised) |                        |         |          |          |  |

103(k) ORDER - TERMINATION

Mine Safety and Health Administration

| Section 1 Y               | Violation Da     | ta               |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|---------------------------|------------------|------------------|-----------|---------|---------------|----------------|---------------|--------|----------|----------|------------------|---------|----------|-------------|--------|--------|---------|---------|----------|-------|-------------------|
| 1. Date                   | Mo Da<br>0 8 1 0 |                  | e (24 Hı  | : Cloc  | :k)           | 0 8            | 3 0 (         |        |          |          |                  |         | 3.       | Cita<br>Nun |        | Order  |         |         | 4 1      |       | 0 7               |
| 4. Served To              |                  | 0 0              |           |         |               | 0 0            |               |        | Dperat   | or       |                  |         |          | INUII       | ibei   |        |         | 4       | + 1      | 0 0   | 0 7               |
|                           | th, Mine For     | eman             |           |         |               |                |               |        | •        |          | l Comp           | anv Ir  | nc       |             |        |        |         |         |          |       |                   |
| 6. Mine                   |                  | eman             |           |         |               |                |               | _      | Aine I   |          |                  |         |          |             |        | ТТ     | 1       |         |          |       |                   |
| No. 1                     |                  |                  |           |         |               |                |               |        |          | 4        | 4 -              | 0 3     | 53       | 6           | _      |        | (cc     | ontract | or)      |       |                   |
| 8. Condition              | or Practice      |                  |           |         |               |                |               |        |          |          |                  | 0.0     | 00       | Ŭ           |        | a. Wri |         |         | (103g)   | )     |                   |
|                           |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         | (        |       |                   |
| The mine                  | has experier     | nced a fatal tr  | ack hau   | lage a  | ccident       | along          | g the 1       | 0 lef  | t haul   | way.     | This O           | rder is | issued   | to er       | nsure  | the sa | fety of | f any   |          |       |                   |
| person in                 | the coal min     | e until an exa   | minatio   | n or ir | ivestiga      | ation          | is ma         | de to  | deter    | nine t   | hat the          | 10 left | haulw    | ay is       | safe.  | Only   | those   |         |          |       |                   |
|                           |                  | company off      |           |         |               |                |               |        |          |          |                  | r perso | ons wh   | o are       | deen   | ned by | MSH     | A to    |          |       |                   |
| have info                 | ormation relev   | vant to the inv  | vestigati | on ma   | y enter       | or re          | main          | in the | e affe   | cted an  | rea.             |         |          |             |        |        |         |         |          |       |                   |
|                           |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|                           |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|                           |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|                           |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|                           |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|                           |                  |                  |           |         |               |                |               |        |          |          | Se               | e Cont  | tinuatio | on Fo       | orm (l | MSHA   | Form    | n 7000  | -3a)     |       |                   |
| 9. Violation              | A. Health        |                  |           |         |               |                | ТТ            |        |          |          |                  |         |          |             |        | T      |         | ТТ      | TT       | ТТ    | $\overline{\Box}$ |
|                           | Safety           | B. Secti         |           |         |               |                |               |        | C        |          | /Sectior         |         |          |             |        |        |         |         |          |       |                   |
|                           | Other            | of Ac            | rt        |         | -             |                |               |        |          | Title    | 30 CFI           | 2       |          |             |        |        |         |         |          |       |                   |
|                           | Inspector's E    | Evaluation       |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
| 10. Gravity:<br>A. Injury |                  | as) (is): No     | Likeliho  | ood     | Unl           | ikely          |               | R      | leasoi   | nably    | Likely           |         | F        | lighl       | y Lik  | ely    |         | 0       | ccurre   | d     |                   |
|                           | ry or Illness c  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
| sonal                     | bly be expect    | ed to be: N      | o Lost V  | Workd   | lays          |                | Lo            | st Wo  | orkday   | /s or F  | Restricte        | ed Dut  | у        | P           | Perma  | nently | v Disał | oling   | ]]       | Fatal |                   |
| C. Signi                  | ificant and Su   | ubstantial (Se   | e Revers  | se):    | Yes           |                | No            |        |          |          |                  |         | D. 1     | Numł        | per of | Perso  | ons Af  | fected  |          | ТТ    |                   |
| 11. Negliger<br>A. Non    | nce (check on    | ne)<br>B. Lo     | ow        |         |               | С. М           | oderat        | e      |          |          | D. H             | igh     |          | ]           |        | E. R   | eckles  | s Disr  | egard    |       |                   |
| 12. Type of               | Action           |                  | П         | П       | Ш             |                | 1             | 3. Ty  | pe of    | Issuar   | nce (che         | eck on  | e)       |             |        |        |         |         |          |       |                   |
|                           | 1                | 03-k-            | ,         |         | -             | -              |               | Ci     | tation   |          | ] (              | Order   | Х        |             | Safeg  | guard  |         | Wri     | tten No  | otice |                   |
| 14 7 14                   | ·                |                  |           |         |               |                | <u>.</u>      |        | <u> </u> | E C      | · · · ·          |         |          |             |        |        |         |         |          | -     | v                 |
| 14. Initial A<br>A. Cita  |                  | Order            | C. Safe   | eouard  |               | D              | . Wri<br>Noti |        | - I      |          | itation/<br>rder |         |          |             |        | F.     | . Dated | 1       | Mo       | Da    | Yr                |
| n. chu                    |                  |                  | C. Dai    | eguare  | * LLI         |                | 11011         | L      | -        |          | umber            |         |          |             |        |        |         |         |          |       |                   |
| 15. Area or               | Equipment        |                  |           |         |               |                |               |        |          |          |                  |         |          |             | -      | -      |         |         |          |       |                   |
| Entire 10                 | left track ha    | ulway and eq     | uipment   | : invol | ved in t      | the ac         | cciden        | t.     |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|                           | 1                |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
| 16. Termina               |                  | Mo I             | Da Y      | r       | <b>р</b> . т: | (2)            | 1             |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
|                           | A. 1             | Date             |           |         | B. Tin        | ie (24<br>Cloc |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
| Section III -             | - Termination    | n Action         |           |         | 111.          | CIOC           | к)            | 11     |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
| 17. Action to             |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
| The 10 le                 | ft track hauly   | way and the e    | quipme    | nt invo | olved in      | the t          | fatal h       | aulag  | ge acc   | ident    | has bee          | n exan  | nined a  | nd it       | has t  | been d | etermi  | ned th  | at it is |       |                   |
|                           |                  | mining operation |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |
| 18. Termina               | ted              | Mo Da            | Yr        | 1       |               |                |               | 11     | 11       | 1        |                  |         |          |             |        |        |         |         |          |       |                   |
|                           | A. Dat           | e 0 8 1 0        |           | В. Т    | Time (24      | 4 Hr           | Clock         | ) 1    | 60       | 0        |                  |         |          |             |        |        |         |         |          |       |                   |
|                           |                  | System Data      |           |         |               |                |               |        |          | <u> </u> |                  |         |          |             |        |        |         |         |          |       |                   |
| 19. Type of               | Inspection       | 20.              | Event N   | lumbe   | r   [         |                |               |        | 21       | . Prin   | nary or          | Mill    |          | II          |        |        |         |         |          |       |                   |
|                           |                  | E 0 6            |           |         | 0             | 8 8            | 888           | 3 1    | 1        |          |                  |         |          |             |        |        |         |         |          |       |                   |
| 22. Signatur              | e                |                  |           |         |               |                |               |        |          |          |                  |         |          |             | 1      | 23. AF | R Num   | ber     |          |       |                   |
| James Le                  |                  |                  |           |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         | 2        | 0 7   | 7 7               |
| MSHA Form                 | n 7000-3 Ma      | r 85 (Revised    | )         |         |               |                |               |        |          |          |                  |         |          |             |        |        |         |         |          |       |                   |

# 103(k) ORDER - ISSUANCE AND TERMINATION

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

| Section I \                  | Violation D  | Data        |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|------------------------------|--------------|-------------|-------------|-------------|-------------------|----------|--------|--------|------|------------------|----------|------------|---------|--------|---------|-----------|---------|----------------|----------|-----|-----|
| 1. Date                      | Mo D         | Da Yr       | 2. Tim      | e (24 H     | r. Cloc           | k)       |        |        |      |                  |          |            | 3.      | Citat  | ion/Or  | der       |         |                |          |     | Τ   |
|                              |              | 6 0         |             | - (- · · ·  |                   | ,        | 1 3    | 3 0    | 0    |                  |          |            | -       | Num    |         |           | 4       | 4 1            |          | 6   | 8   |
| 4. Served To                 |              | 00          | 0           |             |                   |          | 1.     |        | _    | 5. Operator      |          |            |         | INUIT  | bei     |           | -       | <del>-</del> 1 | •        |     | 0   |
|                              |              | IEVEI       | FOREMA      | N           |                   |          |        |        |      | ABLE MININ       | NG ING   | 7          |         |        |         |           |         |                |          |     |     |
| 6. Mine                      | Z ADAMS,     |             | TOKEMA      |             |                   |          |        |        |      | 7. Mine ID       |          | <u>_</u> . | П       | П      | ТТ      |           |         |                |          |     |     |
|                              | UBLE M N     | <b>/INE</b> |             |             |                   |          |        |        |      | 5                | 7 -      | 0 6        | 7 8     | 9.     | -       | (co       | ontract | or)            |          |     |     |
| 8. Condition                 | or Practio   | ce          |             |             |                   |          |        |        |      |                  |          |            |         |        | 8a. V   | Vritten N |         | ,              | )        |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      | e underground s  |          |            |         |        |         |           |         | d. Tl          | he Safe  | ety |     |
|                              |              |             |             |             |                   |          |        |        |      | had been instru  |          |            |         |        |         |           |         |                |          |     |     |
| flammab                      | le liquids.  | . Sever     | al large mi | ılti-purp   | pose fi           | re extin | guish  | ners v | vere | e in the area wh | ich rec  | luced t    | the cha | ances  | of a fi | re spread | ing.    |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  | Se       | e Cont     | tinuati | on Fo  | rm (MS  | SHA Forr  | n 7000  | )-3a)          |          |     |     |
| 9. Violation                 | A. Health    | n I         |             |             | П                 | П        |        |        |      |                  |          |            |         |        | ТТ      | ТТТ       |         |                |          |     | T   |
|                              | Safet        | у 🗌         | B. Sect     | ion         |                   |          |        |        |      | C. Part          | /Sectio  | n of       |         |        |         |           |         |                |          |     |     |
|                              | Other        |             | of A        | ct          |                   | -        |        |        |      | Title            | 30 CF    | R          |         | Ę      | 57.     | 4 1       | 0 1     |                |          |     |     |
| Section II<br>10. Gravity:   |              | 's Evalu    | ation       |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
| A. Injury o                  |              | (has) (is   | ): No Lik   | elihood     |                   | Un       | likely | Х      |      | Reasonably L     | ikely    |            | I       | Highly | Likely  |           | 0       | ccurre         | əd       |     |     |
|                              | ry or Illnes |             |             |             |                   |          |        |        |      |                  |          |            | _       |        |         |           |         | _              | 1        |     | _   |
| sona                         | ably be ex   | pected      | to be:      | No Lost     | Work              | days     | Х      | Lo     | ost  | Workdays or Re   | estricte | d Duty     | ′       | J P    | erman   | ently Dis | abling  |                | Fatal    |     |     |
| C. Sign                      | ificant and  | d Substa    | antial (See | Revers      | e):               | Yes      |        | No     |      | Х                |          |            | D.      | Numb   | er of F | Persons A | Affecte | d              | (        | 0 0 | ) 5 |
| 11. Negliger<br>A. Non       | `            | k one)      | B. L        | wc          |                   |          | C. M   | odera  | ate  |                  | D. H     | ligh       | Г       | 1      | E       | . Reckle  | ss Dis  | regar          | d        | 7   |     |
| 12. Type of                  | Action       | ĪTT         |             | ТТ          | $\overline{\Box}$ |          |        |        | 13   | . Type of Issuan | ce (ch   | ack on     | <u></u> |        |         |           |         |                |          | _   |     |
| 12. 1990 01                  | / lolion     | 1 0         | 4 - a       | -    ,      |                   | -        |        | -      | 10.  | Citation X       |          | Drder      |         | ] s    | afegua  | ard       | Wr      | itten          | Notice   |     | ]   |
| 14. Initial Ac               | tion         |             |             |             |                   |          | D      | . Wr   | itte | en E. Ci         | itation/ |            |         |        |         | F. Date   | d       | Мо             | Da       | Yr  |     |
| A. Cita                      | tion         | B. Or       | der         | C. Sa       | feguar            | d        |        | No     | tice |                  | rder     |            |         |        |         |           |         |                |          |     | 1   |
| 15. Area or                  | Equipmen     | nt          |             |             |                   |          |        |        |      | INU              | umber    |            |         |        |         |           |         |                |          |     |     |
|                              |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              | _           |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
| 16. Termina                  | tion Due     | A. Date     |             |             | /r                | B. Tim   | ne (24 | 1      |      |                  |          |            |         |        |         |           |         |                |          |     |     |
| O a ati a m III              | Tamatiant    |             |             | 0 6 0       | 8                 | Hr.      | Cloc   | k)     |      | 1 6 0 0          |          |            |         |        |         |           |         |                |          |     |     |
| Section III<br>17. Action to |              |             | on          |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
|                              |              |             | IGNS WE     | RE PO       | STED              | IN AP    |        | PRIA   | TF   | AREAS OF TH      | IF SHO   | <b>DP</b>  |         |        |         |           |         |                |          |     |     |
| 1001                         | to billon    |             | 10110 111   | ILL I U     | JILD              |          | ROI    | iun i  | 112  |                  |          | <u>.</u>   |         |        |         |           |         |                |          |     |     |
| 18. Termina                  |              | Date        | Mo Da       | Yr<br>6 0 1 | В. Т              | ime (24  | 4 Hr C | Clock  | )    | 1 5 3 5          |          |            |         |        |         |           |         |                |          |     |     |
| Section IV                   | - Automat    | ed Syst     |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |
| 19. Type of                  |              |             |             | Event       | Numbe             | er       |        | Π      |      | 21. Prim         | nary or  | Mill       |         |        |         |           |         |                |          |     |     |
| (activ                       | ity code)    | E           | 0 1         |             |                   | 0        | 3 4    | 1 5    | 6    | 78               | -        |            |         |        |         |           |         |                |          |     |     |
| 22. Signatur                 |              | 1=1         |             |             |                   |          | -      | -      | -    | -                |          |            |         |        | 23.     | AR Num    | ber     |                |          | Т   |     |
| BILL WIL                     |              |             |             |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         | 0              | 2 :      | 5 5 | 5   |
| MSHA Form                    |              | lar 85 (    | Revised)    |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                | <u> </u> |     | 1 3 |
|                              | 1000-51      | nai 00 (    | (Ceviseu)   |             |                   |          |        |        |      |                  |          |            |         |        |         |           |         |                |          |     |     |

#### 104(a) CITATION - "NON-S&S"

Mine Safety and Health Administration

| Section 1 Violation Data  |
|---|
| Mo       Da       Yr       2. Time (24 Hr. Clock)       0       8       4       5         0       7       2       0       0       8       4       5       3. Citation/Order       4       4       1       0       0       0       3   |
| 4. Served To 5. Operator  |
| John Smith, Assistant Foreman J and S Coal Company, Inc.  |
| 6. Mine ID<br>No. 1 7. Mine ID<br>4 4 - 0 3 5 3 6 - (contractor)  |
| 8. Condition or Practice 8a. Written Notice (103g)  |
|   |
| Energized insulated power wires were not passing through insulated bushings where they entered a power control switchbox on the Labour water<br>pump at the northeast pumping station. The wires were resting against the metal frame of the switchbox, and there was no apparent damage to the   |
| insulation.   |
| (The wrong section number has been used on purpose in this example. See Example 5 for modification.)  |
|   |
| See Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation  A. Health   |
| 9. Violation     A. Heattin       Safety     B. Section       Other     of Act       -     Title 30 CFR       7     5       5     1   |
| Section II Inspector's Evaluation   |
| 10. Gravity:         A. Injury or Illness (has) (is):       No Likelihood         Unlikely       X         Reasonably Likely       Highly Likely         Occurred   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling Fatal   |
| C. Significant and Substantial (See Reverse): Yes No X D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)     A. None     B. Low     C. Moderate     X     D. High     E. Reckless Disregard   |
| 12. Type of Action  |
| 1   0   4   -   -   -   Citation   X   Order   Safeguard   Written Notice   |
| 14. Initial Action     D. Written     E. Citation/     F. Dated     Mo     Da     Yr       A. Citation     B. Order     C. Safeguard     Notice     Order     Number     Image: Constraint of the second seco |
| 15. Area or Equipment   |
|   |
| 16. Termination DueMoDaYrA. DateMoDaYr $0$ 72108Hr. Clock)080   |
| 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<br>(activity code)       20. Event Number       21. Primary or Mill  |
| 22. Signature 23. AR Number   |
| James Lee         2         0         7         7           MSHA Form 7000-3 Mar 85 (Revised)         2         0         7         7   |

#### 104(a) CITATION - "NON-S&S"

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     2. Dated       X     (Original                            | Mo<br>al Issue) 0 7 | Da Yr<br>2 0 0 8 | ·       | 3. Citat<br>Num | ion/Order<br>ber | 4     | 4 4   | 1 0   | 0 0        | 03-   | 0 1   |
| 4. Served To  |                     | 5. Operator      |         |                 |                  |       |       |       |            |       |       |
| John Smith, Assistant Foreman   |                     | J and S C        | oal Com | pany, In        | с.               |       |       |       |            |       |       |
| 6. Mine   |                     | 7. Mine ID       |         |                 |                  |       |       |       |            |       |       |
| No. 1   |                     |                  | 4 4 -   | 0 3 5           | 3 6 -            |       | (co   | ntrac | ctor)      |       |       |
| Section II Justification for Action   |                     |                  |         |                 |                  |       |       |       |            |       |       |
| The energized power wires entering a power control provided with insulated bushings. A power failure re |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   |                     |                  |         |                 |                  | See   | Cont  | inua  | tion F     | Form  |       |
| Section Ill Subsequent Action Taken           8. Extended To         Mo         Da         Yr           |                     |                  |         |                 |                  |       |       |       |            |       |       |
|   | ime (24 Hr. Clo     |                  | 0 0 C.  | Vacated         | D. '             | Term  | inate | ed    | <b>E</b> . | Modif | ïed 🗌 |
| Section IV Inspection Data  |                     |                  |         |                 |                  |       |       |       |            |       |       |
| 9. Type of Inspection E 0 1 10. Event Number  | er 0 8 8 8          | 8 0 0            | _       | _               |                  | _     | _     | _     |            | _     |       |
| 11. Signature   | AR Numb             | per 12. Date     | Мо      | Da Y            | r 13. Tim        | e (24 | Hr. ( | Cloc  | k)         |       |       |
| James Lee   | 2 0 7 7             | 7                | 07      | 2 1 0           | 8                |       |       |       |            | 0 8   | 8 3 0 |

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

### 104(a) CITATION - EXTENSION

Continuation

U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subsequent Action/Continuat | ion Data   |         |        |        |                                 |      |                |      |      |       |      |       |   |
|---------------------------------------|--|---------|--------|--------|---------------------------------|------|----------------|------|------|-------|------|-------|---|
| 1. Subsequent Action 1a. Continuation | 2. Dated   | Mo      | Da     | Yr     | 3. Citation/Order               |      |                |      |      |       |      |       |   |
| X 🗌                                   | (Original Issue)                                     | 0 7     | 2 0    | 0 8    | Number                          | 4    | 4              | 1    | 0    | 0 (   | ) 3  | - 0   | 2 |
| 4. Served To                          |  |         | 5. Ope | rator  |                                 | -    |                |      |      |       |      |       |   |
| John Smith, Assistant Foreman         |  |         | Ja     | nd S ( | Coal Company, Inc.              |      |                |      |      |       |      |       |   |
| 6. Mine                               |  |         | 7. Min |        |                                 |      |                |      |      |       |      |       |   |
| No. 1                                 |  |         |        |        | 4 4 - 0 3 5 3 6 -               |      | (cc            | ontr | acto | or)   |      |       |   |
| Section II Justification for Action   |  |         | 1      |        |                                 |      | <b>X</b> · · · |      |      | - /   |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
| The power wires were entered through  | insulated bushings i                                 | nto th  | e powe | r cont | rol switches on the Labour wate | r pu | mp             |      |      |       |      |       |   |
| at the northeast pumping station.     |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       |  |         |        |        | S                               | See  | Con            | ntin | uati | ion I | Form | Г     |   |
|                                       |  |         |        |        | -                               |      | 001            |      |      |       |      |       |   |
| Section III Subsequent Action Taken   |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
| 8. Extended To A. Date Mo Da          | $\begin{bmatrix} Yr \\ B. Time (24 H) \end{bmatrix}$ | Ir. Clo | ock)   |        | C. Vacated D. Te                | ermi | nate           | ed   | Х    | E. I  | Mod  | ified |   |
| Section IV Inspection Data            |  |         |        |        |                                 |      |                |      |      |       |      |       |   |
|                                       | vent Number  |         |        |        |                                 |      |                |      |      |       |      |       |   |
| E 0 1                                 | 0 8  | 88      |        |        |                                 |      |                |      |      |       |      |       |   |
| 11. Signature                         | AR   | Num     | ber 12 | . Date | Mo Da Yr 13. Time (             | (24) | Hr.            | Clo  | ock) | )     |      |       |   |
| James Lee                             | 2 0  | 7 7     | 7      |        | 0 7 2 3 0 8                     |      |                |      |      |       | 0    | 8 0   | 0 |
|                                       | • •  |         |        |        |                                 |      |                |      |      |       |      |       |   |

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

### 104(a) CITATION - TERMINATION

Mine Citation/Order Continuation

### U.S. Department of Labor

Mine Safety and Health Administration

|                              | uent Action/Continuat     |                        |          |          |        |          |                        |       |      | _       |      |          |       |        |          |
|------------------------------|---------------------------|------------------------|----------|----------|--------|----------|------------------------|-------|------|---------|------|----------|-------|--------|----------|
| 1. Subsequent Acti           | on 1a. Continuation       | 2. Dated               | Mo       |          | Yr     |          | 3. Citation/Order      | Τ     |      |         |      | IT       |       | Τ      |          |
| X                            |                           | (Original Issue)       | 0 7      | 2 0      | 0 8    | 8        | Number                 | 4     | 4    | 1       | 0    | 0        | 0 3   | - (    | 0 3      |
| 4.0                          |                           | <u> </u>               |          |          |        | 1        | 1                      |       |      | L       |      | ட        |       |        |          |
| 4. Served To                 | · · · F                   |                        |          | 5. Ope   |        |          | T                      |       |      |         |      |          |       |        |          |
| John Smith, Ass              | sistant Foreman           |                        |          |          |        | Coal Cor | mpany, Inc.            | -     | 1    |         |      |          |       |        |          |
| 6. Mine                      |                           |                        |          | 7. Mir   | ne ID  |          |                        |       |      |         |      |          |       |        |          |
| No. 1<br>Section II Justifie | cation for Action         |                        |          | ļ        |        | 4 4 -    | 0 3 5 3 6 -            |       | (co  | ont     | trac | tor)     |       |        |          |
| Section II Justing           |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
| Citation No. 44              | 10003, issued for a vic   | plation of 30 CFR 75.  | .514 is  | modifi   | ied in | Item 9 C | to show the correct se | ctio  | n nu | ım      | ber  | 30 (     | CFR   | 75.5   | 15.      |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
| (Modification to             | o correct wrongly cited   | l section number of th | he regu  | ulations | s.)    |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      | —       |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      | _       |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      | —       |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      | _       |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        |       |      | _       |      |          |       |        |          |
|                              |                           |                        |          |          |        |          |                        | See   |      | nti     | inus | ation    | For   | пГ     | <u></u>  |
|                              |                           |                        |          |          |        |          |                        | 500   |      |         | Inde | on       | 1 011 | " L    | <u> </u> |
| 8. Extended To               | equent Action Taken Mo Da | Yr                     |          |          | п      | <u></u>  |                        |       |      |         |      |          |       |        |          |
|                              | A. Date                   | B. Time (24 F          | Ir Clo   | ock)     |        | C        | . Vacated D. T         | erm   | inat | ed      |      | E        | Mod   | lified | 1 X      |
|                              |                           |                        | III. CIU | )en)     |        |          |                        | UIIII | mat  | eu      |      |          | 11100 |        | • •      |
| Section IV Inspe             | ction Data                | • • •                  |          |          | • •    |          |                        |       |      |         |      |          |       |        |          |
| 9. Type of Inspecti          | on 10. E                  | vent Number            |          |          |        |          |                        |       |      | _       |      |          |       |        |          |
|                              | E 0 1                     | 0 8                    | 8 8 8    | 8 0      | 0      |          |                        |       |      |         |      |          |       |        |          |
| 11. Signature                |                           |                        | Num      | ber 12   | Date   | e Mo     | Da Yr 13. Time         | (24   | Hr   | $C^{1}$ | ock  | <u>.</u> |       |        |          |
| -                            |                           |                        | ТТ       |          | 2. Dat |          |                        | (24   |      | CI      | JULA | .)       |       |        |          |
| James Lee                    |                           | 2 0                    | 077      | 7        |        | 0 7      | 7 2 3 0 8              |       |      |         |      |          | 1     | 0      | 0 0      |
| MSHA Form 7000               | -3a, Mar 85 (Revised)     |                        |          |          |        |          |                        |       |      |         |      |          |       |        |          |

# 104(a) CITATION - MODIFICATION

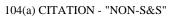
Mine Safety and Health Administration

| Section 1 Violation Data  |
|---|
| Mo       Da       Yr       2. Time (24 Hr. Clock)       3. Citation/Order         0       7       0       6       0       8       1       3       0   |
| 4. Served To 5. Operator  |
| SAMUEL ADAMS, LEVEL FOREMAN MUDDY MINING, INC.  |
| 6. Mine 7. Mine ID 7. Mine ID   |
| THE DOUBLE M MINE       5       7       -       0       6       7       8       9       -       (contractor)  |
| 8. Condition or Practice 8a. Written Notice (103g)  |
|   |
| A written record of workplace examinations was not available for review by MSHA. Examinations had been conducted every shift of   |
| each working place and appropriate action had been taken to correct hazardous conditions. However, the operator had failed to record those examinations.  |
|   |
| NOTE: Do not issue this citation in conjunction with, or in addition to, a citation for failing to conduct the workplace examination required   |
| under 56/57.18002(a).   |
|   |
|   |
| Nee Centimation Lower (MBULA Down 7000 2c)  |
| See Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health<br>Safety B. Section C. Part/Section of  |
| Salety         B. Section           Other         of Act           -         Title 30 CFR           5         7           .         1           8         0           0         2                               |
| Section II Inspector's Evaluation   |
| 10. Gravity:  |
| A. Injury or Illness (has) (is): No Likelihood X Unlikely Reasonably Likely Highly Likely Occurred  |
| B. Injury or Illness could reasonably be expected to be: No Lost Workdays X Lost Workdays or Restricted Duty Permanently Disabling Fatal  |
| C. Significant and Substantial (See Reverse): Yes No X D. Number of Persons Affected 0 0  |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       X         D. High       E. Reckless Disregard   |
| 12. Type of Action 13. Type of Issuance (check one)   |
| $1 0 4 - a - , \qquad - \qquad - \qquad Citation \qquad X  Order \qquad Safeguard \qquad Written Notice \qquad -$   |
| 14. Initial Action       D. Written       E. Citation/       F. Dated       Mo       Da       Yr         A. Citation       B. Order       C. Safeguard       Notice       Order       I       I       I       I |
|   |
| 15. Area or Equipment   |
|   |
| 16. Termination DueMoDaYrA. Date $0$ 70608Hr. Clock)1600  |
| Section III Termination Action  |
| 17. Action to Terminate   |
| A RECORD OF EXAMINATIONS WAS NOW BEING KEPT AND WAS AVAILABLE FOR REVIEW BY MSHA.   |
| 18. TerminatedMoDaYrA. DateMoDaYr $0$ 7060888   |
| Section IV Automated System Data  |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill   |
| (activity code) E 0 1 0 3 4 5 6 7 8   |
| 22. Signature 23. AR Number   |
| BILL WILLIAMS 0 2 5 5   |
| MSHA Form 7000-3 Mar 85 (Revised)   |

104(a) CITATION - NON-"S&S"

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8         0         0   | 3. Citation/Order<br>Number 4 4 1 0 1 7 0                |
| 4. Served To 5. Operator  |  |
| LEFTY JONES, SAFETY DIRECTOR WHEAT MINI   | NG COMPANY   |
| 6. Mine 7. Mine ID 5. | 5 - 0 0 3 3 3 - (contractor)                             |
| 8. Condition or Practice  | 8a. Written Notice (103g)                                |
|   |  |
| The cab window of the front-end loader was cracked on the driver's side creating a line   |  |
| The loader was being operated in the stockpile area. According to the operator, the load  |  |
| Other traffic or employees were not in the immediate vicinity. The windshield cracks e numerous smaller cracks radiating from the larger cracks.  | xtend two feet vertically by two feet horizontally, with |
| numerous smaner cracks radiating nom the larger cracks.   |  |
| Equipment: 988 Caterpillar front-end loader, #10, Serial Number 234567  |  |
|   |  |
|   |  |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)                |
| 9. Violation A. Health<br>Safety B. Section<br>Other of Act - C. Part/Se<br>Title 30  |  |
| Section II Inspector's Evaluation   |  |
| 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely X Reasonably Lik  | tely Highly Likely Occurred                              |
| B. Injury or Illness could rea-   |  |
| sonably be expected to be: No Lost Workdays Lost Workdays or Res  | tricted Duty Permanently Disabling X Fatal               |
| C. Significant and Substantial (See Reverse): Yes No X  | D. Number of Persons Affected 0 0 1                      |
| 11. Negligence (check one)  | D. High E. Reckless Disregard                            |
| 12. Type of Action 13. Type of Issuance   | (check one)  |
| 1 0 4 - a - , Citation X  |  |
| 14. Initial Action     D. Written       A. Citation     B. Order       C. Safeguard     Notice  | er IIIIIIIIIIIIIIIIIIIIIII                               |
| 15. Area or Equipment   |  |
|   |  |
|   |  |
| 16. Termination Due     Mo     Da     Yr       A. Date     0     7     2     2     0     8     Hr. Clock)     1     6     0     0   |  |
| 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<br>(activity code)         20. Event Number         21. Primar           0         4         5         6         7         8         9   | y or Mill  |
| 22. Signature   | 23. AR Number  |
| PAULA FIELDS<br>MSHA Form 7000-3 Mar 85 (Revised)   | 0 3 1 1 1  |
|   |  |



Continuation

#### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subsequent Action/Continuat   | tion Data           |         |          |         |                                   |                          |         |
|---|---------------------|---------|----------|---------|-----------------------------------|--------------------------|---------|
| 1. Subsequent Action 1a. Continuation   | 2. Dated            | Mo      | Da       | Yr      | 3. Citation/Order                 |                          |         |
| X                                       | (Original Issue)    | 0 7     | 08       | 0 8     | Number                            | 4 4 1 0 1 7 0            | 0 - 0 1 |
| 4. Served To                            |                     |         | 5. Ope   | rator   |                                   |                          |         |
| LEFTY JONES, SAFETY DIRECTO             | )B                  |         | -        |         | MINING COMPANY                    |                          |         |
| 6. Mine                                 | лк                  |         | 7. Mir   |         |                                   |                          |         |
| WMC MINE AND MILL                       |                     |         | /. 14111 |         | 5 6 - 0 0 3 3 3 -                 | (contractor)             |         |
| Section II Justification for Action     |                     |         |          |         |                                   | (contractor)             |         |
|   |                     |         |          |         |                                   |                          |         |
| The loader was removed from the min     |                     |         |          |         |                                   |                          | •       |
| by the operator. The mine operator w    |                     |         |          |         |                                   |                          |         |
| cited standard. If the operator does no | ot comply, MSHA wil | l cons  | ider his | s actic | ns to be aggravated conduct const | ituting more than ordina | ary     |
| negligence.                             |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   |                          |         |
|   |                     |         |          |         |                                   | See Continuation Form    |         |
| Section Ill Subsequent Action Taken     |                     |         |          |         |                                   |                          |         |
| 8. Extended To Mo Da                    | Yr                  |         |          |         |                                   |                          |         |
| A. Date                                 | B. Time (24 H       | Ir. Clo | ck)      |         | C. Vacated D. Term                | inated X E. Modi         | fied    |
| Section IV Inspection Data              |                     |         |          |         |                                   |                          |         |
|   | vent Number         |         | П        |         |                                   |                          |         |
| E 1 5                                   | 0 3                 | 3 5 7   | 91       | 0       |                                   |                          |         |
| 11. Signature                           | AR                  | Numł    | per 12   | . Date  | Mo Da Yr 13. Time (24             | Hr. Clock)               |         |
| JOHN SMITH                              | 0 1                 | 99      | 9        |         | 0 7 1 8 0 8                       | 0                        | 8 3 0   |
| MCHA E- 7000 2- Mar 95 (Dession d)      |                     | 111     |          |         |                                   |                          |         |

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

# 104(a) CITATION - TERMINATION EQUIPMENT REMOVED FROM MINE SITE

Mine Safety and Health Administration

| Section 1 Violation Data   |  |
|--|--|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8         0         0  | 3. Citation/OrderNumber441016                |
| 4. Served To 5. Operator   |  |
| RICHARD MORE CB ENTERPRISE   | S  |
| 6. Mine 7. Mine ID   |  |
| CRUSHED AND BROKEN MINE 5 6 -  | 0 3 1 1 2 - (contractor)                     |
| 8. Condition or Practice   | 8a. Written Notice (103g)                    |
|  |  |
| The self-cleaning tail pulley of the No. 2 conveyor belt was not guarded. The conveyor w   |  |
| but had operated the day before. The guard was lying on the ground. Several feet of dust   |  |
| it had not been in place for an extended period of time. Employees were required to work   |  |
| The unguarded conveyor tail pulley was within two feet of an active workplace and was vi   | sible to anyone in the area. Miners would be |
| seriously injured if they came in contact with the unguarded pulley.   |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | ee Continuation Form (MSHA Form 7000-3a)     |
| 9. Violation A. Health   |  |
| Safety B. Section C. Part/Section  |  |
| Other of Act   -   Title 30 CF   | R 5 6 . 1 4 1 1 2 b                          |
| Section II Inspector's Evaluation  |  |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely   | X Highly Likely Occurred                     |
| B. Injury or Illness could rea-  |  |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restrict  | ed Duty Permanently Disabling X Fatal        |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 1          |
| 11. Negligence (check one)   |  |
| A. None B. Low C. Moderate X D. H  | High   E. Reckless Disregard                 |
|  |  |
| 12. Type of Action 1 0 4 - a - , 13. Type of Issuance (che Citation X Order  |  |
| 14. Initial Action D. Written E. Citation/   | F. Dated Mo Da Yr                            |
| A. Citation B. Order C. Safeguard Notice Order Number  |  |
| 15. Area or Equipment  |  |
|  |  |
|  |  |
| 16. Termination Due         Mo         Da         Yr         B. Time (24         Da         Da         Yr           A. Date         0         7         0         3         0         8         Hr. Clock)         1         2         0         0 |  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
| THE GUARD WAS REINSTALLED ON THE TAIL PULLEY.  |  |
|  |  |
| 18. TerminatedMoDaYrB. Time (24 Hr Clock)1330  |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection 20. Event Number 21. Primary or   | Mill   |
| (activity code) E 0 1 0 0 8 9 6 6 9  |  |
| 22. Signature  | 23. AR Number                                |
|  |  |
| JANE JONES   | 0 2 1 3 6                                    |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |

104(a) CITATION - "S&S"

Mine Safety and Health Administration

| Section 1 Violation Data   |  |
|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order                      |
| 0 7 0 3 0 8 1 1 0 0  | Number 4 4 1 0 1 6 6                   |
| 4. Served To 5. Operator   |  |
| RICHARD MORE CB ENTERPRISES  |  |
| 6. Mine 7. Mine ID   |  |
| CRUSHED AND BROKEN MINE 5 6 - 0 1  | 3 1 1 2 - (contractor)                 |
| 8. Condition or Practice   | 8a. Written Notice (103g)              |
|  |  |
| A competent person designated by the mine operator was not examining each working place at le  |  |
| which could adversely affect safety or health. This was evidenced by the two citations issued this   |  |
| machinery guards, one citation issued for failure to repair broken emergency stop cords on conve<br>failure to replace electrical motor junction box covers.   | yors, and one citation issued for      |
| Tanute to replace electrical motor junction box covers.  |  |
|  |  |
| NOTE: Do not issue a second citation for failing to record the examination [56/57.18002(b)] if a   | a citation is issued, as in this case, |
| for failing to conduct the examination.  |  |
| Ver Der  | time tion from (MSHA From 7000 2c)     |
|  | ntinuation Form (MSHA Form 7000-3a)    |
| 9. Violation A. Health Safety B. Section C. Part/Section of  |  |
| Other of Act - Title 30 CFR  | 5 6 . 1 8 0 0 2 a                      |
| 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 rea-  |  |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Du   | ty Permanently Disabling X Fatal       |
|  |  |
| C. Significant and Substantial (See Reverse): Yes X No<br>11. Negligenc (check one)  | D. Number of Persons Affected 0 0 1    |
| A. None B. Low C. Moderate X D. High   | E. Reckless Disregard                  |
| 12. Type of Action 13. Type of Issuance (check of  |  |
| 1 0 4 - a - , - Citation X Order   | Safeguard Written Notice               |
| 14. Initial Action D. Written E. Citation/   | F. Dated Mo Da Yr                      |
| A. Citation B. Order C. Safeguard Notice Order   |  |
| Number   |  |
| 15. Area or Equipment  |  |
|  |  |
| 16. Termination Due Mo Da Yr   |  |
| Itermination Due       Mo       Da       II         A. Date $ </td <td></td> |  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
|  |  |
|  |  |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)  |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill  |  |
| (activity code) E 0 1 0 0 8 9 6 6 9  |  |
| 22. Signature  | 23. AR Number                          |
| JANE JONES   | 0 2 1 3 6                              |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |

104(a) CITATION - "S&S"

Continuation

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U.S. Department of Labor

| Mine Safety and Health Ad | ministration |
|---------------------------|--------------|
|---------------------------|--------------|

| Section I Subsequent A                         | ction/Continuation D   | ata                 |           |        |        |         |                      |       |       |          |       |       |        |      |
|--|------------------------|---------------------|-----------|--------|--------|---------|----------------------|-------|-------|----------|-------|-------|--------|------|
| 1. Subsequent Action                           | 1a. Continuation       | 2. Dated            | Mo<br>0 7 | Da     | Yr     |         | 3. Citation/Order    |       |       |          | 0 1   |       |        | 0 1  |
| Х  |                        | (Original Issue)    | 0 /       | 0 0    | 0 8    |         | Number               |       | 4 4   |          |       | 0     | 9 -    | 0 1  |
| 4. Served To                                   |                        |                     |           | 5. Ope | rator  |         | 1                    |       | لسطي  | <u> </u> | لسط   |       |        |      |
| SAMUEL ADAMS, L                                | EVEL FOREMAN           |                     |           | -      |        | Y MININ | IG, INC.             |       |       |          |       |       |        |      |
| 6. Mine  |                        |                     |           | 7. Min | e ID   |         |                      |       |       |          |       |       |        |      |
| THE DOUBLE M MI                                | NE                     |                     |           |        |        | 57-     | 06789-               |       | (cr   | ontra    | ictor | )     |        |      |
| Section Il Justification                       | for Action             |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
| This action is to modif                        |                        |                     |           |        |        |         |                      |       |       |          |       |       | eceiv  | ed   |
| included: the loose sla                        |                        |                     |           |        |        |         |                      |       |       |          |       |       | 1.6.   | a d  |
| walk approximately fiv<br>to "Non-S&S". Item 1 |                        |                     |           |        |        |         | Based on this inform | ation | 1 the | citat    | 10n 1 | is mo | 001110 | ea   |
|  | OA IS IIIOUIIIeu to ui | linkery and item 10 |           | angeu  |        | Γ.      |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
|  |                        |                     |           |        |        |         |                      | Se    | e Co  | ntin     | uatio | n Fc  | orm    | П    |
| Section III Subsequent                         | Action Takan           |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
| 8. Extended To                                 | Mo Da                  | Yr                  |           |        |        |         |                      |       |       |          |       |       |        |      |
| A. Da  | te                     | B. Time (24 H       | Hr. Clo   | ck)    |        | C       | . Vacated D.         | Tern  | ninat | ed       | ] E   | . Mo  | odifie | ed X |
| Section IV Inspection I                        | Data                   |                     |           |        |        |         |                      |       |       |          |       |       |        |      |
| 9. Type of Inspection                          | E 0 1 10. E            | vent Number 0 3     | 4 5       | 67     | 8      |         |                      |       |       |          |       |       |        |      |
| 11. Signature                                  |                        | AR                  | R Numb    | ber 12 | . Date | Mo      | Da Yr 13. Tim        | e (24 | Hr.   | Cloc     | ck)   | Т     |        |      |
| PAUL SMITH                                     |                        | 0 1                 | 6 5       | 4      |        |         |                      |       |       |          |       |       | 1 2    |      |
| MSHA Form 7000-3a, M                           | ar 85 (Revised)        | 0 1                 | 65        | 4      |        | 0 7     | 2 1 0 8              |       |       |          |       |       | 1 3    | 0 0  |
| 11101111111111111111111111111111111111         | u 00 (100 1000)        |                     |           |        |        |         |                      |       |       |          |       |       |        |      |

104(a) CITATION - "S&S" MODIFIED TO "NON-S&S"

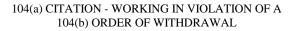
Mine Safety and Health Administration

| Section 1 Violation Data  |   |   |
|---|---|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)           0         7         2         4         0         8 | 0 8 0 0   | 3. Citation/Order4410171Number4410171   |
| 4. Served To  | 5. Operator   |   |
| LEFTY JONES, SAFETY DIRECTOR  | WHEAT MINING COMPAN   | NY  |
| 6. Mine<br>WMC MINE AND MILL  | 7. Mine ID 5 6 - 0 0 3  | 3 3 - (contractor)  |
| 8. Condition or Practice  | · · · · · · ·   | 8a. Written Notice (103g)   |
|   |   |   |
| No apparent effort was made to replace the cracked cab  |   |   |
| in the stockpile area. The loader is hereby ordered withd<br>can observe the windshield in the loader.                                | frawn from service until the cab window is rej  | placed and an MSHA inspector  |
| Equipment: 988 Caterpillar front-end loader, #10, S   | erial Number 234567   |   |
| Equipment. 900 Caterpinal Hont-end Ioader, #10, 5   |   |   |
| NOTE: Section II, Items 10, 11, 16A and 16B are not co  | ompleted. If equipment is ordered withdrawn   | from service enter the equipment's  |
| name, model, and serial number (if known) in Ser  | ction II, Item 15.  |   |
|   |   |   |
|   |   |   |
|   | See Continu   | ation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health  |   |   |
| Safety B. Section   | C. Part/Section of  |   |
| Other of Act -  | Title 30 CFR  | 5 6 . 1 4 1 0 3 b   |
| Section II Inspector's Evaluation   |   |   |
| 10. Gravity:  |   |   |
|   | ilikely Reasonably Likely   | Highly Likely Occurred  |
| B. Injury or Illness could rea-   | Lest Weddene en Destricted Destri   |   |
| sonably be expected to be: No Lost Workdays   | Lost Workdays or Restricted Duty  | Permanently Disabling Fatal   |
| C. Significant and Substantial (See Reverse): Yes   | No  | D. Number of Persons Affected   |
| 11. Negligence (check one)       A. None       B. Low   | C. Moderate D. High   | E. Reckless Disregard   |
| 12. Type of Action  | -         13. Type of Issuance (check one)           -         Citation         Order | Safeguard Written Notice  |
|   |   | Saleguard Witten Notice   |
| 14. Initial Action<br>A. Citation X B. Order C. Safeguard   | D. Written E. Citation/<br>Notice Order 4 4 1   | 0         1         7         0         F. Dated         Mo         Da         Yr           0         1         7         0         0         7         0         8         0         8 |
|   |   |   |
| 15. Area or Equipment   |   |   |
| CATERPILLAR FRONT-END LOADER (MODEL 988   | 3, SERIAL #234567)  |   |
| 16. Termination Due Mo Da Yr  |   |   |
| A. Date B. Tir  | me (24<br>. Clock)  |   |
| Section III Termination Action  |   |   |
| 17. Action to Terminate   |   |   |
| 17. Tedon to Terminate  |   |   |
|   |   |   |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (2)   | 24 Hr Clock)  |   |
| Section IV Automated System Data  |   |   |
| 19. Type of Inspection   20. Event Number   | 21. Primary or Mill   |   |
| (activity code) E 1 5   | 0 3 5 7 9 1 3   |   |
| 22. Signature   |   | 23. AR Number   |
| JOHN SMITH  |   | 0 1 9 9 9   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |   |

#### 104(b) - ORDER OF WITHDRAWAL

Mine Safety and Health Administration

| Section 1 Violation Data  |           |
|---|-----------|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         3. Citation/Order           0         7         2         7         0         8         0         9         0         0         9         0         1         8   | 8         |
| 4. Served To 5. Operator  |           |
| LEFTY JONES, SAFETY DIRECTOR WHEAT MINING COMPANY   |           |
| 6. Mine       7. Mine ID       5       6       0       0       3       3       -       (contractor)   |           |
| 8. Condition or Practice 8a. Written Notice (103g)  | $\square$ |
|   |           |
| The mine operator is continuing to operate the Caterpillar 988 front-end loader even though a 104(b) order #4410171 for non-compliance  |           |
| was issued by MSHA on July 24, 2008. This order required the loader to be removed from service until a cracked cab window was repaired.   |           |
| The loader was loading trucks in the plant on July 27, 2008. The foreman stated that they had production to worry about and did not have  |           |
| time to shut the loader down and replace the window. This condition has not been designated as "significant and substantial" because the  |           |
| conduct violated a provision of the Mine Act rather than a mandatory safety or health standard.<br>NOTE: Section I, Item 9B, is completed with the section of the mine act violated. Item 9C is not completed. A 104(a), not a 104(d),  |           |
| citation is to be issued regardless of the negligence evaluation.   |           |
|   |           |
|   |           |
| See Continuation Form (MSHA Form 7000-3a)   |           |
| 9. Violation A. Health  | F         |
| Safety B. Section C. Part/Section of  |           |
| Other         of Act         1         0         4         -         b         Title 30 CFR         I |           |
| Section II Inspector's Evaluation   |           |
| 10. Gravity:  |           |
| A. Injury or Illness (has) (is):       No Likelihood       X       Unlikely       Reasonably Likely       Highly Likel       Occurred   |           |
| B. Injury or Illness could rea-   |           |
| sonably be expected to be: No Lost Workdays X Lost Workdays or Restricted Duty Permanently Disabling Fatal  |           |
| C. Significant and Substantial (See Reverse): Yes No X D. Number of Persons Affected 0 0  | 1         |
| 11. Negligence (check one)  |           |
| A. None B. Low C. Moderate D. High X E. Reckless Disregard  |           |
| 12. Type of Action 13. Type of Issuance (check one)   |           |
| 1 0 4 - a - ,   -   - Citation X Order Safeguard Written Notice   | I I       |
|   |           |
|   | ٢r        |
|   | 8         |
|   |           |
| 15. Area or Equipment   |           |
|   |           |
| 16. Termination Due Mo Da Yr  |           |
| A. Date   B. Time (24   |           |
| 0 7 2 7 0 8 Hr. Clock) 0 9 3 0  |           |
| Section III Termination Action  |           |
| 17. Action to Terminate   |           |
|   |           |
| 18. Terminated Mo Da Yr   |           |
| A. Date B. Time (24 Hr Clock)   |           |
| Section IV Automated System Data  |           |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill   |           |
| (activity code) E 1 5 0 3 8 5 1 9 3   |           |
| 22. Signature 23. AR Number   | $ \top$   |
| TED JOHNSON 0 4 7 8   | 9         |
| MSHA Form 7000-3 Mar 85 (Revised)   | لــــــر  |



Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date     Mo     Da     Yr     2. Time (24 Hr. Clock)       0     7     2     1     0     8         0     7     2     1     0     8 | 3. Citation/Order           Number           4           4           0           0 |
| 4. Served To 5. Operator  |  |
| John Smith, Assistant Foreman J and S Coal Company, Inc.  | с.   |
| 6. Mine 7. Mine ID  |  |
| No. 1 4 4 - 0 3   | 5 3 6 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
| No apparent effort was made by the operator to install a proper bushing where the energized power                                     | er wires go through the metal frame into the                                       |
| switches of the Labour water pump in the northeast pumping station.   | er wites go unough the metal frame into the  |
| switches of the Eucour water pump in the northeast pumping station.   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| See Conti   | nuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health  |  |
| Safety B. Section C. Part/Section of  |  |
| Other of Act - Title 30 CFR   | 7 5 . 5 1 5  |
| 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 rea-   |  |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty  | y Permanently Disabling Fatal  |
| C. Significant and Substantial (See Reverse): Yes No  | D. Number of Persons Affected  |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High   | E. Reckless Disregard  |
| 12. Type of Action 1 0 4 - b - , 13. Type of Issuance (check one Citation Order   | e)<br>X Safeguard Written Notice   |
|   |  |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr  |
|   | 1 0 0 0 3 0 7 2 0 0 8  |
| 15. Area or Equipment Number  |  |
| The Labour water pump located at the northeast pumping station  |  |
| The Dabbal water pump rotated at the northoldst pumping station   |  |
| 16. Termination Due Mo Da Yr  |  |
| A. Date       B. Time (24   |  |
| Hr. Clock)  |  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
|   |  |
| 18. Terminated Mo Da Yr   |  |
| A. Date A. Date B. Time (24 Hr Clock)   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill   |  |
| (activity code)         E         0         1         0         8         8         8         0         0                             |  |
| 22. Signature   | 23. AR Number  |
| James Lee   | 2 0 7 7 7  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

#### 104(b) ORDER OF WITHDRAWAL - FAILURE TO ABATE

Mine Safety and Health Administration

| Section 1 V              | iolation Data   |                        |          |                           |          |             |             |            |          |        |
|--------------------------|---|------------------------|----------|---------------------------|----------|-------------|-------------|------------|----------|--------|
| 1. Date                  | Mo Da Yr 2. Time (24 Hr. Close  | :k)                    |          |                           | 3        | . Citation  | /Order      |            |          |        |
|                          | 0 7 2 1 0 8   | 1                      | 1 0 0    |                           |          | Number      |             | 4          | 4 1      | 0 0 0  |
| 4. Served To             |   |                        |          | 5. Operator               |          |             |             |            |          |        |
|                          | h, Assistant Foreman  |                        |          | J and S Coal Compan       | ıy, Inc. |             |             | 1          |          |        |
| 6. Mine                  |   |                        |          | 7. Mine ID                |          |             |             | <i>.</i>   |          |        |
| No. 1<br>8. Condition    |   |                        |          | 4 4 - (                   | 0 3 5 3  | 3 6 -       | NV.: 44 - 1 | (contra    |          |        |
| 8. Condition             | or Practice   |                        |          |                           |          | 88          | i. writter  | n Notice   | (103g)   |        |
| The Labou                | r pump was not removed from operatio  | n as required          | l by Orc | ler of Withdrawal No. 44  | 10004 da | ated 7/21/0 | 8 at 0830   | ) hours. ' | The Or   | der    |
| has not be               | en modified, vacated, or terminated. Th   | is condition           | has not  | been designated as "sign  |          |             |             |            |          |        |
| violated a               | provision of the Mine Act rather than a   | mandatory s            | afety or | health standard.          |          |             |             |            |          |        |
|                          |   |                        |          |                           |          |             |             |            |          |        |
|                          |   |                        |          |                           |          |             |             |            |          |        |
|                          |   |                        |          |                           |          |             |             |            |          |        |
|                          |   |                        |          |                           |          |             |             |            |          |        |
|                          |   |                        |          |                           |          |             |             |            |          |        |
|                          |   |                        |          | See                       | Continua | ation Form  | (MSHA       | Form 70    | 00-3a)   |        |
| 9. Violation             |   |                        |          |                           |          |             |             |            |          |        |
|                          | Safety B. Section   |                        |          | C. Part/Section o         | of       |             |             |            |          |        |
| Section II               | Other of Act 1 (<br>nspector's Evaluation   | ) 4 - b                |          | Title 30 CFR              |          |             | •           |            |          |        |
| 10. Gravity:             | inspector's Evaluation  |                        |          |                           |          |             |             |            |          |        |
| A. Injury c              | r Illness (has) (is): No Likelihood X   | Unlikel                | у        | Reasonably Likely         |          | Highly Li   | kely        | ] (        | Occurre  | ed 🗌   |
|                          | or Illness could rea-<br>ly be expected to be: No Lost Workd  |                        | Log      | Workdays or Restricted    |          | Dorm        | on on the F | Disabling  |          | Fatal  |
|                          |   |                        |          |                           |          |             | -           |            |          |        |
|                          | icant and Substantial (See Reverse):  | Yes                    | No       | X                         | D        | . Number    | of Person   | ns Affecte | ed       | 0 0    |
| A. None                  | B. Low  | C. M                   | Ioderate | D. Hig                    | gh X     | ζ           | E. Rec      | kless Dis  | regard   |        |
| 12. Type of A            |   |                        | 13       | . Type of Issuance (check | k one)   | _           |             | _          |          | _      |
|                          | 1 0 4 - a - ,   |                        |          | Citation X Or             | rder     | Sa          | afeguard    | W          | ritten N | lotice |
| 14. Initial Ac           | tion  | D                      | . Writte | en E. Citation/           |          |             | F. D        | ated       | Mo       | Da Yr  |
| A. Citati                | on 🔲 B. Order 🔀 C. Safeguard  |                        | Notic    | e Order A                 | 4 4 1    | 0 0 0       | 4           |            | 0 7      | 2 1 0  |
| 15. Area or E            | quipment  |                        |          | Number                    |          |             |             |            |          |        |
|                          | 1 1   |                        |          |                           |          |             |             |            |          |        |
| 16 5                     |   |                        |          |                           |          |             |             |            |          |        |
| 16. Terminat             | on Due         Mo         Da         Yr           A. Date         0         7         2         1         0         8 | B. Time (2<br>Hr. Cloo |          | 1 1 1 5                   |          |             |             |            |          |        |
| Section III              | Termination Action  | 111. Clo               | CK)      |                           |          |             |             |            |          |        |
| 17. Action to            |   |                        |          |                           |          |             |             |            |          |        |
|                          | s removed from service.   |                        |          |                           |          |             |             |            |          |        |
|                          |   |                        |          |                           |          |             |             |            |          |        |
| 18. Terminat             |   | ime (24 Hr <b>(</b>    | Clock)   | 1 1 0 5                   |          |             |             |            |          |        |
|                          | Automated System Data   |                        |          |                           |          |             |             |            |          |        |
| 19. Type of I<br>(activi | spection E 0 1 20. Event Numbe  |                        | 8 8 8    | 21. Primary or M          | lill     |             |             |            | _        |        |
| 22. Signature            | 5   |                        | <u> </u> | 0                         |          | <br>        | 23. AR N    | lumber     |          |        |
| James Lee                |   |                        |          |                           |          |             |             |            | 2        | 0 7 7  |
|                          | 7000-3 Mar 85 (Revised)   |                        |          |                           |          |             |             |            |          |        |

#### 104(a) CITATION - WORKING IN VIOLATION OF A 104(b) ORDER OF WITHDRAWAL

Continuation

### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subsequent                    |                         | n Data                       |           |           |   |          |                             |           |          |          |       |              |
|---|-------------------------|------------------------------|-----------|-----------|---|----------|-----------------------------|-----------|----------|----------|-------|--------------|
| 1. Subsequent Action                    | 1a. Continuation        | 2. Dated<br>(Original Issue) | Mo<br>0 7 | Da<br>2 1 | $\begin{array}{c c} Yr \\ 0 \\ 8 \end{array}$ | 3        | 3. Citation/Order<br>Number | 4 4       | 1 0      | 0 0      | 4 -   | 0 1          |
|   |                         | (englina issue)              |           |           |   |          |                             |           | Ĩ        | Ű        |       |              |
| 4. Served To                            | _                       |                              |           | 5. Oper   |   |          | _                           |           |          |          |       |              |
| John Smith, Assistan                    | t Foreman               |                              |           |           |   | Coal Con | npany, Inc.                 |           |          |          |       |              |
| 6. Mine                                 |                         |                              |           | 7. Mine   | e ID  |          |                             |           |          |          |       |              |
| No. 1                                   | n for Action            |                              |           |           |   | 4 4 -    | - 03536-                    | (00       | ontract  | or)      |       |              |
| Section II Justification                | n for Action            |                              |           |           |   |          |                             |           |          |          |       |              |
| A suitable bushing w                    | as provided and pro     | perly installed at the       | point     | t where t | he ene  | rgized p | ower wires entered the      | power c   | ontrol   | switc    | hbox  | on           |
| the Labour pump loc                     |                         |                              | <u>^</u>  |           |   | <u> </u> |                             | •         |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             |           |          |          |       |              |
|   |                         |                              |           |           |   |          |                             | See Co    | ntinuo   | tion F   | Form  |              |
| ~                                       |                         |                              |           |           |   |          |                             | See Co    | ntinua   |          | onn   |              |
| Section III Subsequen<br>8. Extended To | t Action Taken<br>Mo Da | Yr                           |           |           | <u> </u>                                      |          |                             |           |          |          |       |              |
| A. Da                                   |                         | B. Time (24 H                | Ir. Clo   | ock)      |   |          | C. Vacated D. 7             | Ferminat  | ed X     | E. N     | lodif | ied          |
| Section IV Inspection                   | Data                    |                              |           |           |   |          |                             |           |          |          |       |              |
| 9. Type of Inspection                   | E 0 1 10. Eve           | ent Number 0 8               | 8 8       | 8 0       | 0   |          |                             |           |          |          |       |              |
| 11.0                                    |                         |                              |           |           |   |          |                             | (04.11    | <u> </u> | <u>`</u> |       | <u>т г т</u> |
| 11. Signature                           |                         |                              | Num       | iber 12   | . Date  | Mo       | Da Yr 13. Time              | e (24 Hr. | Clock    | )        |       |              |
| James Lee                               |                         | 2 0                          | 77        | 7         |   | 0        | 7 2 1 0 8                   |           |          |          | 1 2   | 2 0 0        |
| MSHA Form 7000-3a, I                    | Mar 85 (Revised)        | <b>_</b>                     |           |           |   |          |                             |           |          |          |       |              |

#### 104(b) ORDER OF WITHDRAWAL - TERMINATION

Mine Safety and Health Administration

| Section 1 Violation Data   |   |
|--|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8         0         0  | 3. Citation/Order         4         4         1         0         1         7         2 |
| 4. Served To 5. Operator   |   |
| PETER JONES, SAFETY DIRECTOR XYZ MINING, INC.  |   |
| 6. Mine XYZ MINE 7. Mine ID 5 6 - 0 1  | 0 0 8 - (contractor)  |
| 8. Condition or Practice   | 8a. Written Notice (103g)   |
|  |   |
| The headpulley guard was removed and not replaced on the primary crusher discharge conveyor belt or  |   |
| employee, Foreman Chester Coombs ordered the guard taken off because it was binding the headpulley   |   |
| off ground level, was highly visible, and was turning at a high rate of speed. A laborer usually shovels   |   |
| immediately adjacent to the headpulley. Leaving machinery guards off is a violation of the company's<br>and was aware of this policy but that if an employee was careful an injury would not occur. Foreman C  |   |
| constituting more than ordinary negligence in that he was aware that the headpulley guard was off and the  |   |
| when the machinery was in motion. This violation is an unwarrantable failure to comply with a manda  |   |
|  | -   |
|  |   |
|  | nuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health<br>Safety B. Section Other of Act - C. Part/Section of<br>Title 30 CFR  | 5 6 . 1 4 1 1 2 b   |
| Section II Inspector's Evaluation  |   |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely         X   | Highly Likely Occurred  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty  | Permanently Disabling Fatal X   |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 1   |
| 11. Negligenct(check one)       A. None       B. Low       C. Moderate       D. High   | X E. Reckless Disregard   |
| 12. Type of Action104-1,13. Type of Issuance (check one)<br>Citation $\overline{X}$ Order  | Safeguard Written Notice  |
| 14. Initial Action D. Written E. Citation/   | F. Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard Notice Order Number  |   |
| 15. Area or Equipment  |   |
| 16. Termination Due     Mo     Da     Yr       A. Date     0     7     0     8     0     8     Time (24       Image: Height of the second |   |
| Section III Termination Action   |   |
| 17. Action to Terminate  |   |
| THE GUARD WAS REPLACED OVER THE PRIMARY CRUSHER DISCHARGE HEADPULLEY<br>REINSTRUCTED ON COMPANY GUARDING POLICY BY THE PLANT MANAGER.  | . ALSO, FOREMAN COOMBS WAS  |
| 18. Terminated   Mo Da Yr  |   |
| A. Date 0 7 0 8 0 8 B. Time (24 Hr Clock) 1 0 1 5  |   |
| Section IV Automated System Data   |   |
| 19. Type of Inspection<br>(activity code)20. Event Number21. Primary or Mill012345   |   |
| 22. Signature  | 23. AR Number   |
| TED SMITH  | 0 2 9 3 3   |
| MSHA Form 7000-3 Mar 85 (Revised)  |   |

#### 104(d)(1) CITATION - UNWARRANTABLE FAILURE WITH TERMINATION

U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Violation Data  |   |
|---|---|
| 1. Date     Mo     Da     Yr     2. Time (24 Hr. Clock)                             | 3. Citation/Order   |
| 0 8 1 9 0 8 1 3 3 0   |   |
| 4. Served To  |   |
| John Smith, Mine Foreman  | J and S Coal Company, Inc.  |
| 6. Mine   | 7. Mine ID  |
| No. 1   |   |
| 8. Condition or Practice  | 8a. Written Notice (103g)   |
| The methane and dust control plan is not being complied with on 1                   | left section. Line brattice (or other approved device) was not installed for                                  |
|   | entry, where the continuous miner was cutting coal. The plan requires   |
|   | penetration of the face. The air at the face contained 0.9 per centum   |
| of methane as indicated by a permissible methane detector. The for                  | eman, Ray Smith, was directing mining operations in the face and knew   |
|   | ged in aggravated conduct by ordering work to be performed in a working                                       |
|   | tions. This violation is an unwarrantable failure to comply with a mandatory                                  |
| standard.   |   |
|   | See Continuation Form (MSHA Form 7000-3a)   |
|   | See Continuation Form (MISHA Form 7000-5a)  |
| 9. Violation A. Health<br>Safety B. Section<br>Other of Act -                       | C. Part/Section of 7 5 3 3 0 b 2<br>Title 30 CFR 7 5 .  |
| Section II Inspector's Evaluation   |   |
| 10. Gravity:  |   |
| A. Injury or Illness (has) (is): No Likelihood Unlikely                             | Reasonably Likely   X   Highly Likely   Occurred  |
| B. Injury or Illness could rea-   |   |
|   | t Workdays or Restricted Duty X Permanently Disabling Fatal   |
|   |   |
| C. Significant and Substantial (See Reverse): Yes X No<br>11. Negligenc (check one) | D. Number of Persons Affected002  |
| A. None B. Low C. Moderate  |   |
| 12. Type of Action     1     0     4     -     d     -     1     1                  | 3. Type of Issuance (check one)         Citation       X         Order       Safeguard         Written Notice |
| 14. Initial Action   D. Writt     A. Citation   B. Order   C. Safeguard             |   |
| 15. Area or Equipment   | Number  |
| 15. Area of Equipment   |   |
|   |   |
| 16. Termination DueMoDaYrA. Date081908B. Time (24Hr. Clock)                         | 1 3 4 0   |
| Section III Termination Action  |   |
| 17. Action to Terminate   |   |
| Line brattice was installed to within 10 feet of the face. Methane could            | 1 not be detected immediately after the brattice was installed.   |
|   |   |
| 18. Terminated A. Date $Mo$ Da Yr<br>0 8 1 9 0 8 B. Time (24 Hr Clock)              |   |
| Section IV Automated System Data  | · · · · •   |
| 19. Type of Inspection<br>(activity code)20. Event Number088                        | 3   0   |
| 22. Signature   | 23. AR Number   |
| James Lee   | 2 0 7 7 7   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |

#### 104(d)(1) CITATION - UNWARRANTABLE FAILURE WITH TERMINATION

#### Mine Safety and Health Administration

| Section 1 Violation Data   |  |
|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order  |
| 0 8 1 0 0 8 0 0  |  |
| 4. Served To 5. Ope  |  |
| •  | IEAT MINING COMPANY  |
| 6. Mine 7. Min   |  |
| WMC PORTABLE CRUSHER   | 5 6 - 0 1 9 7 5 - (contractor)                                     |
| 8. Condition or Practice   | 8a. Written Notice (103g)  |
| 8. Condition of Practice   | sa. written Notice (105g)  |
| The window of the front-end loader was cracked on the driver's side creati           | ng a line of vision problem for the operator. The loader           |
| was operating in the stockpile area. Because of the broken windshield the            |  |
| other vehicular traffic and employees in the area. The windshield cracks e           |  |
| This loader and condition was cited (#4410168) on July 8, 2008, at anothe            |  |
| citation was terminated, the operator was informed in writing that the viola         |  |
| removal from that mine site. Further, the operator was informed that they            | were required to repair the broken windshield prior to working the |
| machine at another mine site. The Safety Director stated that there wasn't           |  |
| were behind on production. The mine operator has engaged in aggravated               |  |
| violation is an unwarrantable failure to comply with a mandatory standard            |  |
| Equipment: 988 Caterpillar front-end loader (Serial #234567)                         |  |
|  | See Continuation Form (MSHA Form 7000-3a)                          |
| 9. Violation A. Health   |  |
| Safety   B. Section     Other   of Act   | C. Part/Section of<br>Title 30 CFR 5 6 . 1 4 1 0 3 b               |
|  | 11ue 50 CFR 5 0. 1 4 1 0 5 0                                       |
| Section II Inspector's Evaluation<br>10. Gravity:                                    |  |
|  | sonably Likely X Highly Likely Occurred                            |
| B. Injury or Illness could rea-  |  |
| sonably be expected to be: No Lost Workdays Lost Work                                | days or Restricted Duty Permanently Disabling Fatal X              |
| C. Significant and Substantial (See Reverse): Yes X No                               | D. Number of Persons Affected 0 0 1                                |
| 11. Negligence (check one)     A. None     B. Low     C. Moderate                    | D. High E. Reckless Disregard X                                    |
|  | of Issuance (check one)  |
| $1 0 4 - d - 1 , \qquad Citat$   |  |
|  |  |
| 14. Initial Action   D. Written     A. Citation   B. Order   C. Sateguard     Notice | E. Citation/<br>Order  |
|  | Number   |
| 15. Area or Equipment  |  |
| 15. Area of Equipment  |  |
|  |  |
| 16. Termination Due A. Date Mo Da Yr B. Time (24                                     |  |
|  | 3 0  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
|  |  |
| 18. Terminated Mo Da Yr  |  |
| A. Date B. Time (24 Hr Clock)  |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection   20. Event Number  | 21. Primary or Mill  |
| (activity code) E 0 1 0 4 5 6 6 1 9  |  |
| 22. Signature  | 23. AR Number  |
|  | 0 1 9 9 9  |
| JOHN SMITH<br>MSHA Form 7000-3 Mar 85 (Revised)                                      | 01999  |
|  |  |

# 104(d)(1) CITATION - UNWARRANTABLE FAILURE - CITING MINE OPERATOR FOR PREVIOUSLY TERMINATED VIOLATION

Mine Safety and Health Administration

| Section 1 Violation Data  |   |
|---|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8         1         0 | 3. Citation/Order<br>Number 4 4 1 0 1 7 4 |
| 4. Served To 5. Operator  |   |
| PETER JONES, SAFETY DIRECTOR XYZ MINING, INC.   |   |
| 6. Mine 7. Mine ID  |   |
| XYZ MINE 5 6 - 0 1 0  | 0 8 - (contractor)                        |
| 8. Condition or Practice  | 8a. Written Notice (103g)                 |
|   |   |
| A six-foot section of handrail on the elevated walkway by the coarse gravel bins was missing, exposing          |   |
| The fall to ground was estimated to be 18 feet. Mine Foreman, Chester Coombs, was walking along the             |   |
| daily route of travel. The missing handrail had been reported to Foreman Coombs on June 27, 2008, in a          |   |
| loader operator. Coombs stated he had more important things to worry about than a missing handrail. F           |   |
| conduct constituting more than ordinary negligence in that he knew the handrail was missing and employ          | yees were exposed to falling hazards.     |
| This violation is an unwarrantable failure to comply with a mandatory standard.                                 |   |
|   |   |
| NOTE: Section II, Items 14A, 14E, and 14F are completed with the initial 104(d)(1) citation number and          | l it's issue date                         |
|   | ation Form (MSHA Form 7000-3a)            |
| 9. Violatio A. Health   |   |
| Safety B. Section C. Part/Section of  |   |
| Other of Act I - Title 30 CFR   | 5 6 . 1 1 0 0 2                           |
| Section II Inspector's Evaluation   |   |
| 10. Gravity:  | IIi ahlu Lihahu 🗌 — Ossumed 🔲             |
| A. Injury or Illness (has) (is): No Likelihood Unlikely Reasonably Likely X                                     | Highly Likely Occurred                    |
| B. Injury or Illness could rea-   |   |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty                                    | Permanently Disabling Fatal X             |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected001          |
| 11. Negligenc (check one)   |   |
| A. None B. Low C. Moderate D. High  | E. Reckless Disregard X                   |
| 12. Type of Action 13. Type of Issuance (check one)   |   |
| 1 0 4 - d - 1, $ Citation$ Order X  | Safeguard Written Notice                  |
|   |   |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr                         |
| A. Citation X B. Order C. Safeguard Notice Order 4 4 1  | 0 1 6 0 0 7 0 8 0 8                       |
| Number  |   |
| 15. Area or Equipment   |   |
| WALKWAY AT THE NO. 7 COARSE GRAVEL BINS   |   |
| 16. Termination Due Mo Da Yr  |   |
| A. Date $\begin{bmatrix} 1 & 0 & Da & 11 \\ 1 & 1 & B. Time (24) \end{bmatrix}$                                 |   |
| Hr. Clock)  |   |
| Section III Termination Action  |   |
| 17. Action to Terminate   |   |
|   |   |
|   |   |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)                         |   |
| D. Time (24 Th Clock)   |   |
| Section IV Automated System Data  |   |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill   |   |
| (activity code) $E = 0 1$ 0 1 2 3 4 5 6   |   |
| 22. Signature   | 23. AR Number                             |
| -   |   |
| TED SMITH<br>MSHA Form 7000-3 Mar 85 (Revised)  | 0 2 9 3 3                                 |
|   |   |

# 104(d)(1) - "S&S" UNWARRANTABLE FAILURE ORDER

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
| 0 8 3 0 0 8 1 0 0 0   | Number         4         4         1         0         0         1         6 |
| 4. Served To 5. Operator  |  |
| John Smith, Mine Foreman J and S Coal Company, Inc.   |  |
| 6. Mine 7. Mine ID  |  |
|   | 3 5 3 6 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
| The trailing cable to the No. 2 shuttle car on 1st left section contained five poorly made temporary          | v splices: three of the splices had exposed                                  |
| uninsulated conductors. The condition of the temporary splices contributes substantially to a fire            |  |
| Persons without gloves handle trailing cables. The condition of the cable was reported in the pres            |  |
| and was countersigned by the mine foreman. The mine operator was engaged in aggravated cond                   |  |
| taking corrective action. This violation is an unwarrantable failure to comply with a mandatory s             | standard.  |
|   |  |
|   |  |
|   |  |
|   | ntinuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health<br>Safety B. Section C. Part/Section of  |  |
| Other of Act - Title 30 CFR   | 7 5 . 6 0 3  |
| Section II Inspector's Evaluation   |  |
| 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely Reasonably Likely X                                   | Highly Likely Occurred   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Du | ty Permanently Disabling Fatal X   |
|   |  |
| C. Significant and Substantial (See Reverse): Yes X No<br>11. Negligence (check one)                          | D. Number of Persons Affected 0 0 1  |
| A. None B. Low C. Moderate D. High  | E. Reckless Disregard X  |
| 12. Type of Action  |  |
| 1 0 4 - d - 1, - Citation Order   | X Safeguard Written Notice   |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr  |
| A. Citation X B. Order C. Safeguard Notice Order 4<br>Number  | 4 1 0 0 1 5 0 8 1 8 0 8  |
| 15. Area or Equipment   |  |
| No. 2 shutle car, 1st left section  |  |
|   |  |
|   |  |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24                            |  |
| A. Date B. Thile (24<br>Hr. Clock)  |  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
|   |  |
| 18. Terminated   Mo   Da   Yr   |  |
| A. Date B. Time (24 Hr Clock)   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill   |  |
| (activity code) E 0 1 0 8 8 8 3 1   | 22 AD Number   |
| 22. Signature   | 23. AR Number  |
| James Lee<br>MSHA Form 7000-3 Mar 85 (Revised)  | 2 0 7 7 7  |
| moral i official of (iconsou)   |  |

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
|   | Number         4         4         1         0         0         1         7 |
| 4. Served To     5. Operator       John Smith, Mine Foreman     J and S Coal Company, Inc.  |  |
| John Smith, Mine Foreman     J and S Coal Company, Inc.       6. Mine     7. Mine ID  |  |
| No. 1 4 4 - 0 3   | 5 3 6 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
|   |  |
| Positive-acting stop controls are not installed along the belt conveyor in 2 south section. The belt h  |  |
| This condition has been reported in the pre-shift and on-shift examination books for the dates of 8/2 required by Notice to Provide Safeguard No. 1 ABC, dated 9/16/76. The mine operator has engage  |  |
| correct a known safety violation. This violation is an unwarrantable failure to comply with a manda   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| See Conti   | nuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health  |  |
| Safety B. Section C. Part/Section of  |  |
| Other         of Act         -         Title 30 CFR           Section II Inspector's Evaluation         - | 7 5 . 1 4 0 3  |
| 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely X Reasonably Likely   | Highly Likely Occurred   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty   | X Permanently Disabling Fatal  |
|   |  |
| C. Significant and Substantial (See Reverse): Yes No X  | D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High   | X E. Reckless Disregard  |
| 12. Type of Action 13. Type of Issuance (check one)   |  |
| 1 0 4 - d - 1 , Citation - Order  | X Safeguard Written Notice   |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr  |
| A. Citation X B. Order C. Safeguard Notice Order 4 4  | 1 0 0 1 5 0 8 1 9 0 8  |
|   |  |
| 15. Area or Equipment<br>Belt conveyor in 2 south section   |  |
| Ben conveyor in 2 south section   |  |
| 16. Termination Due Mo Da Yr  |  |
| A. Date       B. Time (24   |  |
| Section III. Terreinstien Action  |  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
|   |  |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)   |  |
| Section IV Automated System Data  |  |
| Section IV Automated System Data         19. Type of Inspection       20. Event Number         21. Primary or Mill  |  |
| $\begin{array}{c ccccccccccccccccccccccccccccccccccc$   |  |
| 22. Signature   | 23. AR Number  |
| James Lee   | 2 0 7 7 7  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

#### 104(d)(1) UNWARRANTABLE FAILURE ORDER - BASED ON NOTICE TO PROVIDE SAFEGUARDS

Mine Safety and Health Administration

| Section 1 Violation Data   |       |
|--|-------|
| 1. Date     Mo     Da     Yr     2. Time (24 Hr. Clock)     3. Citation/Order  |       |
| $\begin{array}{c ccccccccccccccccccccccccccccccccccc$  | 1 7 5 |
| 4. Served To         5. Operator   | 1 / 3 |
| J.R. JOHNSON, SAFETY DIRECTOR ABC MINING COMPANY   |       |
| 6. Mine 7. Mine ID 7. Mine ID  |       |
| ABC MINE 7 5 - 0 9 1 3 3 - (contractor)  |       |
| 8. Condition or Practice 8a. Written Notice (103g)   |       |
|  |       |
| The underground water truck driver did not have on his person a positive means of identification. The driver stated that he had not been   |       |
| issued any identification in the three months he had worked underground. The safety director stated "we just haven't issued dog tags to the new man because we've got production to think about." This mine has been issued fourteen previous violations for this standard in the last |       |
| three months. Management engaged in aggravated conduct constituting more than ordinary negligence in that production was deemed more   |       |
| important than issuing ID tags to an employee. This violation is an unwarrantable failure to comply with a mandatory standard.   |       |
|  |       |
| NOTE: For 104(d)(2) orders, Section II, Item 14 is completed with the initial 104(d)(1) order and not the 104(d)(1) citation. Also note that 104(D) orders can be either "S&S" or "Non-S&S".   |       |
| See Continuation Form (MSHA Form 7000-3a)  |       |
| 9. Violation A. Health   | ╌┝┥   |
| Safety B. Section C. Part/Section of   |       |
| Other         of Act         -         Title 30 CFR         5         7         .         1         1         0         5         8  |       |
| Section II Inspector's Evaluation<br>10. Gravity:  |       |
| A. Injury or Illness (has) (is): No Likelihood X Unlikely Reasonably Likely Highly Likely Occurred   |       |
| B. Injury or Illness could rea-  |       |
| sonably be expected to be: No Lost Workdays X Lost Workdays or Restricted Duty Permanently Disabling Fat   | al 🗌  |
| C. Significant and Substantial (See Reverse): Yes No X D. Number of Persons Affected   | 0 0 1 |
| 11. Negligence (check one)   |       |
| A. None B. Low C. Moderate D. High X E. Reckless Disregard   | ]     |
| 12. Type of Action 13. Type of Issuance (check one)  |       |
| 1 0 4 - d - 2, $ Citation Order X$ Safeguard Written Notice  | ;     |
| 14. Initial Action D. Written E. Citation/ F. Dated Mo Da  | ı Yr  |
| A. Citation B. Order X C. Safeguard Notice Order $4 4 1 0 1 5 9$ $0 7 0$   |       |
|  |       |
| 15. Area or Equipment<br>WATER TRUCK DRIVER - BENNY FRANKLIN   |       |
| WATER TROCK DRIVER - DENNI TRANKLIN  |       |
| 16. Termination Due Mo Da Yr   |       |
| A. Date B. Time (24<br>Hr. Clock)  |       |
| Section III Termination Action   |       |
| 17. Action to Terminate  |       |
|  |       |
| 18. Terminated Mo Da Yr  |       |
| A. Date $\begin{bmatrix} 1 & 0 & Da & 11 \\ 1 & 1 & B. Time (24 Hr Clock) \end{bmatrix}$   |       |
|  |       |
| Section IV Automated System Data   |       |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill  |       |
| (activity code) E 0 1 0 5 6 7 8 9 0  |       |
| 22. Signature 23. AR Number  |       |
| JANE JONES 0 2<br>MSHA Form 7000-3 Mar 85 (Revised)  | 136   |
| WISTIN 1000-5 MIAL 03 (NCVISCU)  |       |

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
| 1 1 0 1 0 8 0 9 0 0   | Number 4 4 1 0 0 1 9   |
|   | 5. Operator  |
|   | J and S Coal Company, Inc.   |
|   | 7. Mine ID   |
| No. 1   | 4 4 - 0 3 5 3 6 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
|   |  |
|   | for a distance of 125 feet inby spad No. 100. Additional roof support had not proved roof control plan, which was revised 4/15/08, because of fragile roof |
| conditions. Sam Jones is the section foreman and one of the preshift                              |  |
|   | on has a history of unintentional roof falls. Three citations have been issued   |
| at this mine for violations of 75.203(e) in the past 6 months. Sam Jon                            | es engaged in aggravated conduct by his failure to record and take action on   |
| a known hazard. This violation is an unwarrantable failure to comply                              | y with a mandatory standard.   |
|   |  |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health  |  |
| Safety B. Section   | C. Part/Section of 7 5 2 0 3 e   |
| Other of Act -  | Title 30 CFR   |
| Section II Inspector's Evaluation   |  |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely                           | Dassonably Likely 🔽 Highly Likely 🗌 Ossurred 🗍   |
|   | Reasonably Likely   X   Highly Likely   Occurred   |
| B. Injury or Illness could rea-   | Workdays or Restricted Duty Permanently Disabling Fatal  |
| sonably be expected to be: No Lost Workdays Lost  | Workdays or Restricted Duty Permanently Disabling Fatal X  |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)  |  |
| A. None B. Low C. Moderate  |  |
|   | Type of Issuance (check one)   |
| 1 0 4 - d - 2 ,   -   -   | Citation Order X Safeguard Written Notice  |
| 14. Initial Action D. Writt   | en E. Citation/ F. Dated Mo Da Yr  |
| A. Citation B. Order X C. Safeguard Notice  | e Order 4 4 1 0 0 1 6 0 8 3 0 0 8  |
|   | Number   |
| 15. Area or Equipment<br>No. 1 entry of 1 right section beginning at spad No. 100 and extending i | nhy for a dictance of 125 feat   |
| No. 1 entry of 1 fight section beginning at spac No. 100 and extending f                          | noy for a distance of 125 feet.  |
|   |  |
| 16. Termination Due Mo Da Yr  |  |
| A. Date B. Time (24   |  |
| Section III Tempiration Action  |  |
| Section III Termination Action<br>17. Action to Terminate   |  |
| 17. Action to Terminate   |  |
|   |  |
| 18. Terminated Mo Da Yr   |  |
| A. Date B. Time (24 Hr Clock)   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection 20. Event Number   | 21. Primary or Mill  |
| (activity code) E 0 1 0 8 8 8 8   |  |
| 22. Signature   | 23. AR Number  |
| James Lee   | 2 0 7 7 7  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

#### 104(d)(2) UNWARRANTABLE FAILURE ORDER - SUBSEQUENT INSPECTION

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         9         0         0                               | 3. Citation/Order       4       4       1       0       1       7         Number       4       4       1       0       1       7       7 |
|   | 5. Operator  |
| JANE SMITHSON, OWNER  | BEDROCK MINING COMPANY   |
| 6. Mine   | 7. Mine ID   |
| BEDROCK MINE  | 5 6 - 0 7 8 9 1 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
|   |  |
| A laborer was not wearing safety glasses, goggles, face shields, or ot<br>feet from a hydraulic rock breaker. The breaker was being used to b |  |
| propelled directly into the area where the laborer was standing and c   |  |
|   |  |
| A written Notice of Pattern of Violations, No. 8765931, was issued by   | y MSHA on 06/13/08.  |
|   |  |
| NOTE: Leave Section II, Item 14, blank for 104(e)(1) orders. Also,  | 104(a) orders are required to be evaluated as "S&S"  |
| NOTE. Leave Section II, Reni 14, Blank for 104(e)(1) orders. Also,  | 104(c) orders are required to be evaluated as 5&5.   |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health  |  |
| Safety B. Section   | C. Part/Section of   |
| Other of Act -  | Title 30 CFR         5         6         .         1         5         0         0         4   |
| Section II Inspector's Evaluation 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely   X   Highly Likely   Occurred   |
| B. Injury or Illness could rea-   | וויקע אין אין אין אין אין אין אין א  |
| sonably be expected to be: No Lost Workdays Lost  | Workdays or Restricted Duty Permanently Disabling X Fatal  |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate   | E. Reckless Disregard  |
| 12. Type of Action 1 0 4 - e - 1 , 13   | . Type of Issuance (check one)<br>Citation Order X Safeguard Written Notice  |
|   |  |
| 14. Initial Action       D. Writ         A. Citation       B. Order       C. Safeguard         Notic  |  |
| 15. Area or Equipment   |  |
| TOM SMITH, LABORER  |  |
|   |  |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24       Hr. Clock)   |  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
| THE LABORER REMOVED THE SAFETY GLASSES FROM HIS   | S POCKET AND PUT THEM ON.  |
|   |  |
| 18. TerminatedMoDaYrA. Date071208B. Time (24 Hr Clock)  | 0 9 0 5  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection<br>(activity code)20. Event Number0876   | 4 3 21. Primary or Mill  |
| 22. Signature   | 23. AR Number  |
| JANE JONES  | 0 2 1 3 6  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

#### 104(e)(1) PATTERN OF VIOLATIONS ORDER - ISSUANCE AND TERMINATION

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         9         0         0   | 3. Citation/Order4410178Number4410178    |
| 4. Served To       5. Operator         JANE SMITHSON, OWNER       BEDROCK MINING CON  | MPANY                                    |
| 6. Mine 7. Mine ID  |  |
| BEDROCK MINE 5 6 - 0 7  | 8 9 1 - (contractor)                     |
| 8. Condition or Practice  | 8a. Written Notice (103g)                |
| The driver of haul truck (Number H-35) did not sound an audible warning or use other means to war   |  |
| moving the vehicle. The haul truck, with its engine running, was parked in the shop area. Two mec   | chanics walked in front                  |
| of the haul truck and had to jump clear to avoid being hit when it unexpectedly moved into their path   | h  |
| A Notice of Pattern of Violations, No. 8765931, was issued by MSHA on 06/13/08.   |  |
| NOTE: Complete Section II, Item 14, with the number of the first 104(e) order. Also, 104(e) orders  |  |
| 104(e)(2) orders are written for all "S&S" violations observed on any subsequent inspection   | after a 104(e)(1) order has been issued. |
|   |  |
| See Conti   | inuation Form (MSHA Form 7000-3a)        |
| 9. Violation A. Health  |  |
| Safety B. Section C. Part/Section of  |  |
| Other of Act - Title 30 CFR   | 5 6 . 1 4 2 0 0                          |
| Section II Inspector's Evaluation   |  |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely         X  | Highly Likely Occurred                   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty   | Permanently Disabling Fatal X            |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 2      |
| 11. Negligence (check one)       A. None       B. Low       C. Moderate       X       D. High   | E. Reckless Disregard                    |
| 12. Type of Action 13. Type of Issuance (check one  |  |
| $1  0  4  -  e  -  2  , \qquad \qquad -  -  -  Citation  \Box  Order  \Sigma$   |  |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr                        |
| A. Citation B. Order X C. Safeguard Notice Order 4 4<br>Number  | 1 0 1 7 7 0 7 1 2 0 8                    |
| 15. Area or Equipment   |  |
| Haul Truck H-35   |  |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24  |  |
| Hr. Clock)  |  |
| Section III Termination Action  |  |
| 17. Action to Terminate<br>THE WARNING HORN WAS FOUND TO BE OPERABLE AND COULD BE HEARD ABOVE 7   |  |
| WAS REINSTRUCTED TO SOUND THE HORN WHENEVER THE VEHICLE WAS MOVED.  | THE SURROUNDING NOISE. THE TRUCK DR      |
| Image: Non-StructureNoDaYr18. TerminatedA. DateMoDaYr $0$ 81308B. Time (24 Hr Clock)090   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection<br>(activity code)20. Event Number0975319  |  |
| (activity code)         E         1         5         0         9         7         5         1         9           22. Signature         23         24         24         25         25         25         26         27         3         1         9         1         9         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1         1         9         1 | 23. AR Number                            |
| JANE JONES  | 0 2 1 3 6                                |
| MSHA Form 7000-3 Mar 85 (Revised)   | 0 2 1 3 0                                |
|   |  |

# 104(e)(2) PATTERN OF VIOLATIONS ORDER - ISSUANCE AND TERMINATION

Continuation

#### U.S. Department of Labor

Mine Safety and Health Administration

| 1. Subsequent Action       1a. Continuation       2. Dated       Mo       Da       Yr       3. Citation/Order       Number       8       8       3       4       5       6       7       0       1         4. Served To       JANE SMITHSON, OWNER       5. Operator       BEDROCK MINING COMPANY       6       6       1       7       Mine       D       7       Nime ID       5       6       -       0       7       8       9       1       -       0       1   |
|--|
| 4. Served To       5. Operator         JANE SMITHSON, OWNER       BEDROCK MINING COMPANY         6. Mine       7. Mine ID         BEDROCK MINE       5 6 - 0 7 8 9 1 - (contractor)         Section II Justification for Action       5 6 - 0 7 8 9 1 - (contractor)         Bedrock Mine has gone 90 days from the issuance of a Notice of Pattern of Violations without being cited for a violation which could significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Given this action, the mine is no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977. Accordingly, the Notice of Pattern of Violations is terminated.         NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"   |
| JANE SMITHSON, OWNER       BEDROCK MINING COMPANY         6. Mine       7. Mine ID       7 |
| 6. Mine       7. Mine ID       5       6       0       7       8       9       1       -       (contractor)         Section II Justification for Action       5       6       -       0       7       8       9       1       -       (contractor)         Bedrock Mine has gone 90 days from the issuance of a Notice of Pattern of Violations without being cited for a violation which could significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Given this action, the mine is no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977. Accordingly, the Notice of Pattern of Violations is terminated.         NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"   |
| BEDROCK MINE       5       6       -       0       7       8       9       1       -       (contractor)         Section II Justification for Action  |
| Section II Justification for Action Bedrock Mine has gone 90 days from the issuance of a Notice of Pattern of Violations without being cited for a violation which could significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Given this action, the mine is no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977. Accordingly, the Notice of Pattern of Violations is terminated. NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"  |
| Bedrock Mine has gone 90 days from the issuance of a Notice of Pattern of Violations without being cited for a violation which could significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Given this action, the mine is no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977. Accordingly, the Notice of Pattern of Violations is terminated.   |
| significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Given this action, the mine is<br>no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977.<br>Accordingly, the Notice of Pattern of Violations is terminated.<br>NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"  |
| significantly and substantially contribute to the cause and effect of a mine safety or health hazard. Given this action, the mine is<br>no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977.<br>Accordingly, the Notice of Pattern of Violations is terminated.<br>NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"  |
| no longer subject to orders of withdrawal issued pursuant to Section 104(e) of the Federal Mine Safety and Health Act of 1977.<br>Accordingly, the Notice of Pattern of Violations is terminated.<br>NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"  |
| Accordingly, the Notice of Pattern of Violations is terminated. NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"   |
| NOTE: This termination of a 104(e) Notice of Pattern of Violations was issued after the mine operator went 90 days without any "S&S"   |
|  |
|  |
| violations issued.   |
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|  |
| See Continuation Form  |
| Section III Subsequent Action Taken  |
| 8. Extended To       A. Date       Mo       Da       Yr       B. Time (24 Hr. Clock)       C. Vacated       D. Terminated X       E. Modified  |
| Section IV Inspection Data   |
| 9. Type of Inspection E 0 1 10. Event Number 0 1 3 5 7 9 1   |
| 11. Signature     AR Number     12. Date     Mo     Da     Yr     13. Time (24 Hr. Clock)  |
|  |
| JANE JONES       0       2       1       3       6       0       9       1       3       0       8       1       0       0       0         MSHA Form 7000-3a, Mar 85 (Revised)       1       3       6       0       9       1       3       0       8       1       0       0       0   |

### 104(e) TERMINATION OF NOTICE OF PATTERN OF VIOLATIONS

Mine Safety and Health Administration

| Setton 1       Violation Data<br>(0)       21       10       01       21       10  |   |  |
|--|---|--|
| 0       7       2       0       Number       4       4       1       0       1       8       3         4. Served To       S. Operator       INTER CEMENT CORPORATION       INTER CEMENT CORPORATION       INTER CEMENT CORPORATION         6. Mine       7. Mine ID       7       5       0       0       2       4  | Section 1 Violation Data  |  |
| 4. Served 16       Image: constraint of the                    | 1. Date Mo Da Yr 2. Time (24 Hr. Clock)                             | 3. Citation/Order  |
| 4. Served 16       Image: constraint of the                    |   | 0 Number 4 4 1 0 1 8 3   |
| RICHARD JONES. SAFETY DIRECTOR       INTER CEMENT CORPORATION         6. Mine       7. Mine ID       7 [ s].       0       0       0       2 [ 4 ]       [contraction]         8. Conduiton or Practice       8. Written Notice (103g)   |   |  |
| 6. Mine       7. Mine ID       7       S       0       0       2       4       -   | RICHARD JONES, SAFETY DIRECTOR                                      | *  |
| IC MILL       7 S - 0 0 2 4       Image: contractor)         8. Condition or Practice       8a. Written Notice (103g)         Cement dust accumulations on the roof of the No. 2 kith building and a loss of structural integrity caused the root for fail on the north side at 0630 hones on this date.       State 1030 hones of the No. 2 kith building and a loss of structural integrity survey         must be completed and given to MSHA prior to allowing personnel into the area under the root. An oral 107(a) imminent danger       order was issued to James Town, Mill Foreman, on the mill floor at 0720 hours this date.         NOTE: Do not complete Section 1, Item 9C and Section II, Items 10 and 11.       See Continuation Form (MSHA Form 7000-3a)       See Continuation Form (MSHA Form 7000-3a)         9. Violation A: Health       B. Section       C. Part/Section of Tube 30 CFR       See Continuation Form (MSHA Form 7000-3a)         9. Violation A: Health       B. Section I. Item 9C and Section II, Items 10 and 11.       See Continuation Form (MSHA Form 7000-3a)         9. Violation A: Health       B. Section I. Item 9C and Section II, Items 10 and 11.       See Continuation Form (MSHA Form 7000-3a)         9. Violation A: Health       B. Section I. Item 9C and Section II, Items 10 and 11.       See Continuation Form (MSHA Form 7000-3a)         9. Notion A: See Tore of A form II.       B. Section II.       C. Part/Section of Tube 30 CFR       Section II.         10. Tore of These Could rea-sonably Likely       Highly 1 kkely       Occurred   |   |  |
| 8. Condition or Practice       8a. Written Notice (103g)         Cement dust accumulations on the roof of the No. 2 kiln building and a loss of structural integrity caused the roof to fail on the north side at 0630 hours on this date. Structural steel and debris were being cleaned up to allow the installation of temporary support at the remaining north side. The total of the No. 2 kiln multiply cleaned the No. 2 kiln multiply cleaned the north side at 0530 hours on this date. Structural steel and debris were being cleaned up to allow the installation of temporary support at the remaining north side. The total of the No. 2 kiln multiply cleaned and a structural integrity survey must be completed and given to MSHA prior to allowing personnel into the area under the roof. An oral 107(a) imminent danger order was issued to James Town. Mill Foreman, on the mill floor at 0720 hours this date.         NOTE: Do not complete Section I, Item 9C and Section II, Items 10 and 11.         Section III - imspector's Evaluation         W. Gravity:       B. Section         Other       Satesy in the second to the reso of the second to fail on the north side at 0720 hours this date.         NOTE: Do not complete Section I, Item 9C and Section II. Items 10 and 11.       Section III - imspector's Evaluation         W. Gravity:       B. Section III: Imspector's Evaluation       C. Part/Section of Tail 's Order III': imspector's Evaluation         T. Order Y       B. Section III: espector's Evaluation       Interpret Persons Affected       Interpret Persons Affected         Singuificant and Substantial (See Reverse): Yes       No       D. Number of Persons Affected       <  |   | 75 - 00 - 24 - 000 - 000 - 24 - 000 - 00 |
| Censent dust accumulations on the roof of the No. 2 kiln building and a loss of structural integrity caused the roof to fail on the north side<br>at 0630 hours on this date. Structural steel and debris were being cleaned up to allow the installation of temporary support at the<br>remaining north side. The huilding of ement dust on the roof of the No. 2 kiln must be emoved and a structural integrity survey<br>must be completed and given to MSHA prior to |   |  |
| at 0630 hours on this idate. Structural steel and debris were being cleaned up to allow the installation of temporary support at the remaining north side. The building of cement dues on the root of the No. 2 kills must be removed and a structural integrity survey must be completed and given to MSHA prior to allowing personnel into the area under the root. An oral 107(a) imminent danger order was issued to James Town, Mill Foreman, on the mill floor at 0720 hours this date.         NOTE: Do not complete Section I, Item 9C and Section II, Items 10 and 11.       See Continuation Form (MSHA Form 7000-3a)         9. Violation A. Health       B. Section of of Act       C. Part/Section of Title 30 CFR         Section II: Order       B. Section of Act       C. Part/Section of Title 30 CFR         Notres: On the section II: Items (has) (is): No Likelihood       Unlikely       Reasonably Likely       Highly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse): Yes       No       D. Number of Persons Affected       III. Type of Action       Written Notice         11. Neglegiene: Check one)       I. Order       C. Safeguard       Written Notice       Safeguard       Written Notice         12. Type of Action       B. Order       C. Safeguard       D. Written Notice       Number       Number         15. Area or Faujament       Number       D. Written Notic   |   |  |
| at 0630 hours on this idate. Structural steel and debris were being cleaned up to allow the installation of temporary support at the remaining north side. The building of cement dues on the root of the No. 2 kills must be removed and a structural integrity survey must be completed and given to MSHA prior to allowing personnel into the area under the root. An oral 107(a) imminent danger order was issued to James Town, Mill Foreman, on the mill floor at 0720 hours this date.         NOTE: Do not complete Section I, Item 9C and Section II, Items 10 and 11.       See Continuation Form (MSHA Form 7000-3a)         9. Violation A. Health       B. Section of of Act       C. Part/Section of Title 30 CFR         Section II: Order       B. Section of Act       C. Part/Section of Title 30 CFR         Notres: On the section II: Items (has) (is): No Likelihood       Unlikely       Reasonably Likely       Highly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse): Yes       No       D. Number of Persons Affected       III. Type of Action       Written Notice         11. Neglegiene: Check one)       I. Order       C. Safeguard       Written Notice       Safeguard       Written Notice         12. Type of Action       B. Order       C. Safeguard       D. Written Notice       Number       Number         15. Area or Faujament       Number       D. Written Notic   | Comment dust accumulations on the roof of the No. 2 kiln building a | and a loss of structural integrity caused the roof to fail on the north side   |
| remaining north side. The buildup of cement dust on the roof of the No. 2 kind must be convoluted integrity survey         must be completed and given to MSHA prior to allowing personnel into the are under the roof. An ord 107(a) imminent danger         order was issued to James Town, Mill Foreman, on the mill floor at 0720 hours this date.         NOTE: Do not complete Section 1. Item 9C and Section II, Items 10 and 11.         9. Violation [A. Health   |   |  |
| must be completed and given to MSHA prior to allowing personnel into the area under the roof. An oral 107(a) imminent danger order was issued to James Town, Mill Foreman, on the mill floor at 0720 hours this date.         NOTE: Do not complete Section I, Item 9C and Section II, Items 10 and 11.         NOTE: Do not complete Section I, Item 9C and Section II, Items 10 and 11.         See Continuation Form (MSHA Form 7000-3a)         9. Violation A, Health         Safety         B. Safety         A. Health         Section II.         To Gravity:         A. Injury or Illness (has) (is): No Likelihood         Unlikely         Reasonably Likely         Highly vor Illness (bas) (is): No Lost Workdays         Lost Workdays or Restricted Duty         Permanently Disabling         Fatal         C. Significant and Substantial (See Reverse): Yes       No         11. Negligence (check one)         12. Type of Action       B. Low       C. Moderate         D. Number of Persons Affected         11. Neitle Reverse       Yes         Notice       Order       Safeguard         Number       Notice         F: Dated       Mo       Da         Yr       B. Time (24       Hr. Clock)         Safeguard       Written Notice   |   |  |
| order was issued to James Town, Mill Foreman, on the mill floor at 0720 hours this date.         NOTE: Do not complete Section I, Item 9C and Section II, Items 10 and 11.         Secton III  |   |  |
| NOTE: Do not complete Section I, Item 9C and Section II, Items 10 and 11.         Sector II - Inspectors Evaluation         Other         B. Section         Other         Other         Other         Sector II - Inspectors Evaluation         To, Gravity:         A. Injury or Illness (ns) (s): No Likelihood         Unlikely         Reasonably Likely         Highly be expected to be:         No Lost Workdays         Lost Workdays or Restricted Duty         Permanently Disabling         Fatal         C. Significant and Substantial (See Reverse):         Yes       No         11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High         E. Reckless Disregard         A. None       B. Order         C. Safeguard       Order         X. Station       B. Order         C. Safeguard       Order         Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard         NUMBER 2 KILN BUILDING       Notice         16. Termination Action       Date       Mo         17. Action to Terminate       Q      <  |   |  |
| See Continuation Form (MSHA Form 7000-3a)         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety       B. Section<br>Other         A. Injury or Illness (has) (is): No Likelihood       Unlikely         Reasonably Likely       Highly Likely         0. Gravity:       A. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays         11. Negligneor (check one)       D. Number of Persons Affected         11. Negligneor (check one)       B. Low       C. Moderate       D. High         12. Type of Action       1       0       7 - a       -         13. Type of Issuance (check one)       Safeguard       Written Notice         14. Initial Action       A. Order       C. Safeguard       D. Written         NUMBER 2 KILN BUILDING       B. Time (24<br>Hr. Clock)       Hr. Clock)       F. Dated       Mo       Da         17. Action to Terminate       D. Number       0       8 / 8 / 3 / 1       21. Primary or Mill       23. AR Number       0 / 3 / 3 / 3         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       23. AR Number <t< td=""><td></td><td></td></t<>   |   |  |
| See Continuation Form (MSHA Form 7000-3a)         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety       B. Section<br>Other         A. Injury or Illness (has) (is): No Likelihood       Unlikely         Reasonably Likely       Highly Likely         0. Gravity:       A. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays         11. Negligneor (check one)       D. Number of Persons Affected         11. Negligneor (check one)       B. Low       C. Moderate       D. High         12. Type of Action       1       0       7 - a       -         13. Type of Issuance (check one)       Safeguard       Written Notice         14. Initial Action       A. Order       C. Safeguard       D. Written         NUMBER 2 KILN BUILDING       B. Time (24<br>Hr. Clock)       Hr. Clock)       F. Dated       Mo       Da         17. Action to Terminate       D. Number       0       8 / 8 / 3 / 1       21. Primary or Mill       23. AR Number       0 / 3 / 3 / 3         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       23. AR Number <t< td=""><td></td><td></td></t<>   |   |  |
| See Continuation Form (MSHA Form 7000-3a)         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety<br>Other       B. Section<br>Other         9. Violation   A. Health<br>Safety       B. Section<br>Other         A. Injury or Illness (has) (is): No Likelihood       Unlikely         Reasonably Likely       Highly Likely         0. Gravity:       A. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays         11. Negligneor (check one)       D. Number of Persons Affected         11. Negligneor (check one)       B. Low       C. Moderate       D. High         12. Type of Action       1       0       7 - a       -         13. Type of Issuance (check one)       Safeguard       Written Notice         14. Initial Action       A. Order       C. Safeguard       D. Written         NUMBER 2 KILN BUILDING       B. Time (24<br>Hr. Clock)       Hr. Clock)       F. Dated       Mo       Da         17. Action to Terminate       D. Number       0       8 / 8 / 3 / 1       21. Primary or Mill       23. AR Number       0 / 3 / 3 / 3         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       23. AR Number <t< td=""><td></td><td></td></t<>   |   |  |
| 9. Violation A. Health<br>Safety       B. Section<br>of Act       C. Part/Section of<br>Title 30 CFR         9. Other       of Act       -         9. 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 (See Reverse):       Yes       No       D. Number of Persons Affected         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1 0 7 - a       -       -       13. Type of Issuance (check one)         A. Citation       B. Order       C. Safeguard       D. Written       Notice       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       F. Dated       Mo       Da       Yr         NUMBER 2 KILN BUILDING       Inter (24 Hr. Clock)       Inter (24 Hr. Clock)       Inter (24 Hr. Clock)       Inter (24 Hr. Clock)       <  | NOTE: Do not complete Section I, Item 9C and Section II, Items 1    | 10 and 11.   |
| 9. Violation A. Health<br>Safety       B. Section<br>of Act       C. Part/Section of<br>Title 30 CFR         9. Other       of Act       -         9. 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 (See Reverse):       Yes       No       D. Number of Persons Affected         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1 0 7 - a       -       -       13. Type of Issuance (check one)         A. Citation       B. Order       C. Safeguard       D. Written       Notice       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       F. Dated       Mo       Da       Yr         NUMBER 2 KILN BUILDING       Inter (24 Hr. Clock)       Inter (24 Hr. Clock)       Inter (24 Hr. Clock)       Inter (24 Hr. Clock)       <  |   | See Continuation Form (MSHA Form 7000-3a)  |
| Safety       B. Section       -       C. Part/Section of<br>Title 30 CFR         Section II Inspectors Evaluation       -       Title 30 CFR         10. Gravity:       -       -       File 30 CFR         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 (See Reverse):       Yes       No       D. Number of Persons Affected       Inseggience (check one)         A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard       Initial Action         A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard       Initial Action         A. Cone       B. Low       C. Moderate       D. High       E. Reckless Disregard       Initial Action         A. Citation       B. Order       C. Safeguard       D. Written       Notice       Number         13. Type of Action no       B. Order       C. Safeguard       D. Written       Notice       Initial Action         A. Citation       B. Order       C. Safeguard       D. Written       Notice       Initial Action </td <td>9. Violation A. Health</td> <td></td>   | 9. Violation A. Health  |  |
| Other       of Act       -       Title 30 CFR       .         Section II Inspectors Evaluation       Inspectors Evaluation       Inspectors Evaluation       Occurred         A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Highly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Highly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse): Yes       No       D. Number of Persons Affected       Inspector of Persons Affected         11. Negligence (check one)       B. Low       C. Moderate       D. High       E. Reckless Disregard       Inspector         12. Type of Action       10       7 - a - r       -       -       IS. Type of Issuance (check one)       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       F. Dated       Mo       Da       Yr         NUMBER 2 KILN BUILDING       NUMBER 2 KILN BUILDING       Inter (24 Hr Clock)       Hr. Clock)       Inter (24 Hr Clock)       Inter (24 Hr Clock)       Inter (24 Hr Clock)       Inter (24 Hr Clock)       In   |   | C. Part/Section of   |
| 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 (See Reverse): Yes       No       D. Number of Persons Affected       Image: Comparison of the system of Persons Affected         11. Negligence (check one)       B. Low       C. Moderate       D. High       E. Reckless Disregard         A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       10       7 - a       -       -       13. Type of Issuance (check one)         C. Station       Order       X       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written Notice       E. Citation/<br>Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       NUMBER 2 KILN BUILDING       E. Time (24       Hr. Clock)       E. Citation       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       E. Citation / Hr. Clock)       E. Cotin torerminate       E. Citation / Hr. Clock  |   | Title 30 CFR   |
| 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 (See Reverse):       Yes       No       D. Number of Persons Affected       Image: Construction of Persons Affected         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       10       7 - a - ,       -       -       Citation       Order       X       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       Order       Number       Number       Number       F. Dated       Mo       Da       Yr         A. Citation       B. Order       C. Safeguard       D. Written       Notice       Number       Number <td></td> <td></td>  |   |  |
| 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 (See Reverse):       Yes       No       D. Number of Persons Affected       Image: Second Control of Persons Affected         11. Negligence (check one)       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       10       7       a       -       -       13. Type of Issuance (check one)         14. Initial Action       B. Order       C. Safeguard       D. Written       Order       X. Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       F. Dated       Mo       Da       Yr         A. Citation       B. Order       C. Safeguard       D. Written       Notice       F. Dated       Mo       Da       Yr         Section III Termination Due       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       E. Citation       Section IV Automated System Data         19. Type of Inspection       Q       Q       Section IV Automated System Data       Q       Section IV Automated System Data       Q       Section IV Automated System Data       Q       Section IV -   |   |  |
| sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse):       Yes       No       D. Number of Persons Affected         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1 0 7 - a       -       ,       -       -       IS. Type of Issuance (check one)         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written Notice         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written Notice         15. Area or Equipment       Number       Vinumber       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)       Image: Section III Termination Action       Image: Section IV Automated System Data         19. Type of Inspection       I       0       N       No       1       1       20. Event Number       0       0       8       0       1       21. Primary or Mill       23. AR Number       0       3       3       3       3       3       3       3       3   | A. Injury or Illness (has) (is): No Likelihood Unlikely             | Reasonably Likely Highly Likely Occurred   |
| sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse):       Yes       No       D. Number of Persons Affected         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1 0 7 - a       -       ,       -       -       IS. Type of Issuance (check one)         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written Notice         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written Notice         15. Area or Equipment       Number       Vinumber       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)       Image: Section III Termination Action       Image: Section IV Automated System Data         19. Type of Inspection       I       0       N       No       1       1       20. Event Number       0       0       8       0       1       21. Primary or Mill       23. AR Number       0       3       3       3       3       3       3       3       3   | B Injury or Illness could rea-                                      |  |
| C. Significant and Substantial (See Reverse):       Yes       No       D. Number of Persons Affected         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1       0       7 - a       -       -       I3. Type of Issuance (check one)         14. Initial Action       B. Order       C. Safeguard       D. Written       Order       X       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       C. Citation       Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       Number       Number       Image: Safeguard       Image: Safeguard       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)         Section III Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Section IV Automated System Data         19. Type of Inspection       I       0       Image: Safeguard       Image: Safeg   |   | ost Workdays or Restricted Duty Permanently Disabling Fatal  |
| 11. Negligence (check one)       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1       0       7       -       a       -       -       I3. Type of Issuance (check one)       Citation       Order       X       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Order       X       Safeguard       Written Notice         15. Area or Equipment       NUMBER 2 KILN BUILDING       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)       Hr. Clock)         17. Action to Terminate       Mo       Da       Yr       B. Time (24 Hr. Clock)       Hr. Clock)       Section III Terminated       Section IV Automated System Data         19. Type of Inspection       E       0       1       Number       0       1       21. Primary or Mill       23. AR Number       0       3  |   |  |
| A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1       0       7       -       a       -       -       I3. Type of Issuance (check one)<br>Citation       Order       X       Safeguard       Written Notice         14. Initial Action<br>A. Citation       B. Order       C. Safeguard       D. Written<br>Notice       E. Citation/<br>Order       F. Dated       Mo       Da       Yr         15. Area or Equipment<br>NUMBER 2 KILN BUILDING       Ho       Da       Yr       B. Time (24<br>Hr. Clock)       Hr. Clock)       Hr. Clock)         16. Termination Due<br>A. Date       Mo       Da       Yr       B. Time (24<br>Hr. Clock)       Hr. Clock)       Hr. Clock)         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: System Data         19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       0       0       8       3       0       1       21. Primary or Mill       23. AR Number       0       3  |   | D. Number of Persons Affected  |
| 12. Type of Action       1       0       7       a       -       .       13. Type of Issuance (check one)<br>Citation       Order       X       Safeguard       Written Notice         14. Initial Action<br>A. Citation       B. Order       C. Safeguard       D. Written<br>Notice       F. Dated       Mo       Da       Yr         15. Area or Equipment<br>NUMBER 2 KILN BUILDING       B. Order       C. Safeguard       Mo       Da       Yr         16. Termination Due<br>A. Date       Mo       Da       Yr       B. Time (24<br>Hr. Clock)       Hr. Clock)         17. Action to Terminate       Image: Comparison of the state of the  |   |  |
| 1       0       7       a       -       .       Citation       Order       X       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       B. Citation/Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       NUMBER 2 KILN BUILDING       Image: Constraint of the product of the pro   | A. None B. Low C. Modera  | ate D. High E. Reckless Disregard  |
| 14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       Order       Notice       Number       F. Dated       Mo       Da       Yr         15. Area or Equipment       Number       Number       Image: Section III Termination Action         17. Action to Terminate       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         10. And the section IV Automated System Data       Image: Section IV Automated System Data       Imag  | 12. Type of Action  | 13. Type of Issuance (check one)   |
| A. Citation       B. Order       Order       Order       Number       Image: C. Safeguard       Image: C. Safeguard       Order       Number       Image: C. Safeguard       Im  | 1 0 7 - a - ,     -   -   | Citation Order X Safeguard Written Notice  |
| A. Citation       B. Order       Order       Order       Number       Image: C. Safeguard       Image: C. Safeguard       Order       Number       Image: C. Safeguard       Im  |   |  |
| 15. Area or Equipment       Number       Number         NUMBER 2 KILN BUILDING         16. Termination Due       A. Date       Mo       Da       Yr         B. Time (24       Hr. Clock)       Image: Clock of the second se  |   |  |
| 15. Area or Equipment         NUMBER 2 KILN BUILDING         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24         Hr. Clock)       Hr. Clock)       Hr. Clock)       Hr. Clock)       Hr. Clock)         Section III Termination Action       17. Action to Terminate       Hr. Clock)       Hr. Clock)         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         19. Type of Inspection       Image: Clock in the second seco   | A. Citation B. Order C. Safeguard Not                               |  |
| NUMBER 2 KILN BUILDING         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24         Hr. Clock)       Hr. Clock)       Hr. Clock)       Image: Section III Termination Action         17. Action to Terminate       Image: Section III Termination Action       Image: Section III Terminate         18. Terminated       A. Date       Mo       Da       Yr         Is. Time (24 Hr Clock)       Image: Section IV Automated System Data       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automate System Data         JOHN REDWOOD       Image: Section IV Automate System Data       Image: S  | 15 Area or Equipment  | Nullidel   |
| 16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24         Hr. Clock)       Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         19. Type of Inspection       Image: Clock of the second seco   |   |  |
| A. Date       B. Time (24<br>Hr. Clock)         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<br>(activity code)       E         0       0       8       3       0         22. Signature<br>JOHN REDWOOD       0       3       3       3  | NOMBER 2 KIEN BOIEDING  |  |
| A. Date       B. Time (24<br>Hr. Clock)         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<br>(activity code)       E         0       0       8       3       0         22. Signature<br>JOHN REDWOOD       0       3       3       3  | 16 Termination Due Mo Da Vr   |  |
| Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         Section IV Automated System Data         19. Type of Inspection       20. Event Number       0       0       8       8       0       1       21. Primary or Mill         22. Signature       23. AR Number       0       3       3       3       3  |   |  |
| 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       20. Event Number       0       0       8       8       0       1       21. Primary or Mill         22. Signature       23. AR Number       0       3       3       3       3  |   |  |
| 18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         Section IV Automated System Data         19. Type of Inspection       20. Event Number       0       0       8       8       0       1       21. Primary or Mill         22. Signature       23. AR Number       0       3       3       3       3   |   |  |
| 18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         Section IV Automated System Data         19. Type of Inspection       20. Event Number       0       0       8       8       0       1       21. Primary or Mill         22. Signature       23. AR Number       0       3       3       3       3   | 17 Action to Terminate  |  |
| A. Date       B. Time (24 Hr Clock)       Display         Section IV Automated System Data       9. Type of Inspection (activity code)       20. Event Number       0       0       8       3       0       1       21. Primary or Mill       22. Signature       23. AR Number       0       3       3       3       3       3  | 17. Action to Terminate   |  |
| A. Date       B. Time (24 Hr Clock)       Display         Section IV Automated System Data       9. Type of Inspection (activity code)       20. Event Number       0       0       8       3       0       1       21. Primary or Mill       22. Signature       23. AR Number       0       3       3       3       3       3  |   |  |
| A. Date       B. Time (24 Hr Clock)       Display         Section IV Automated System Data       9. Type of Inspection (activity code)       20. Event Number       0       0       8       3       0       1       21. Primary or Mill       22. Signature       23. AR Number       0       3       3       3       3       3  | 18. Terminated Mo Da Yr   |  |
| 19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       0       0       8       8       0       1       21. Primary or Mill         22. Signature<br>JOHN REDWOOD       23. AR Number       0       3       3       3       3   |   | k)   |
| 19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       0       0       8       8       0       1       21. Primary or Mill         22. Signature<br>JOHN REDWOOD       23. AR Number       0       3       3       3       3   |   |  |
| (activity code)       E       0       1       0       0       8       3       0       1         22. Signature<br>JOHN REDWOOD       23. AR Number       0       3       3       3  |   |  |
| 22. Signature         23. AR Number         0         3         3         3           JOHN REDWOOD         0         3         3         3         3   | 19. Type of Inspection   20. Event Number                           | 21. Primary or Mill  |
| 22. Signature         23. AR Number         0         3         3         3           JOHN REDWOOD         0         3         3         3         3   | (activity code) E 0 1 0 0 8 8                                       | 3 0 1  |
| JOHN REDWOOD 0 3 3 3 3   |   |  |
|  | -   |  |
|  |   |  |

#### 107(a) ORDER - IMMINENT DANGER NO VIOLATION OF A MANDATORY STANDARD

Mine Safety and Health Administration

| Section 1 Violation Data  | <u> </u>            |                       |                            |                  |
|---|---------------------|-----------------------|----------------------------|------------------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   |                     |                       | 3. Citation/Order          |                  |
|   | 0 9 0 0             |                       | Number                     | 4 4 1 0 1 8 4    |
| 4. Served To  | 5. Oper             | ator                  |                            |                  |
| RICHARD JONES, SAFETY DIRECTOR  | INTI                | ER CEMENT CORP        | ORATION                    |                  |
| 6. Mine   | 7. Mine             | ID                    |                            |                  |
| ICC MILL  |                     | 7 5 - 0 0             | 0 2 4 -                    | (contractor)     |
| 8. Condition or Practice  |                     |                       | 8a. Writte                 | en Notice (103g) |
|   |                     |                       |                            |                  |
| Two mechanics were not wearing life jackets when repairin                         | ng a broken six-inc | h dredge discharge li | ine approximately 100 ya   | ards offshore.   |
| The discharge line was located atop flotation barrels position                    |                     |                       |                            |                  |
| feet. At the broken spot, one mechanic was sitting on a flot                      | tation barrel. The  | other mechanic was    | adjacent to the first mine | r in a wooden    |
| boat. The second mechanic was bending over the side tryin                         |                     | e. Neither employee   | knew how to swim. Life     | e jackets        |
| were available and the foreman had instructed the employed                        |                     | 00001 (1:1            |                            |                  |
| An oral 107(a) imminent danger order was issued to Bob St                         | mith, Foreman, at   | 0900 hours on this da | ate.                       |                  |
| Citation No. 4410185 is being issued in conjunction with th                       | his order           |                       |                            |                  |
| Citation No. 4410185 is being issued in conjunction with th                       | llis order.         |                       |                            |                  |
|   |                     | See Cont              | inuation Form (MSHA F      | Form 7000 3a)    |
| 9. Violation A. Health  | <u> </u>            | See Cont              |                            |                  |
| Safety B. Section   |                     | C. Part/Section of    |                            |                  |
| Other of Act -  |                     | Title 30 CFR          |                            |                  |
| Section II Inspector's Evaluation   |                     | 1110 30 0110          |                            |                  |
| 10. Gravity:  |                     |                       |                            |                  |
|   | cely Reas           | onably Likely         | Highly Likely              | Occurred         |
| B. Injury or Illness could rea-   |                     |                       |                            |                  |
| sonably be expected to be: No Lost Workdays                                       | Lost Workda         | ys or Restricted Dut  | Permanently I              | Disabling Fatal  |
| C. Significant and Substantial (See Reverse): Yes                                 | No                  |                       | D. Number of Person        | as Affected      |
| 11. Negligence (check one)       A. None       B. Low       C.                    | . Moderate          | D. High               | E. Rec                     | ckless Disregard |
| 12. Type of Action  |                     | f Issuance (check one |                            |                  |
|   | Citatio             |                       | X Safeguard                | Written Notice   |
| 1 0 7 - a -   | Citatio             | li Oldel              | A Salegualu                | witten Notice    |
| 14. Initial Action  | D. Written          | E. Citation/          | F. D                       | Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard   | Notice              | Order                 |                            |                  |
|   |                     | Number                |                            |                  |
| 15. Area or Equipment   |                     |                       |                            |                  |
| JOHN JONES, TOM SMITH - MECHANICS   |                     |                       |                            |                  |
| 16. Termination Due Mo Da Yr  | <u> </u>            | 1 1                   |                            |                  |
| A. Date     B. Time   | (24                 |                       |                            |                  |
| Hr. C   |                     |                       |                            |                  |
| Section III Termination Action  |                     | •                     |                            |                  |
| 17. Action to Terminate   |                     |                       |                            |                  |
|   |                     |                       |                            |                  |
|   |                     |                       |                            |                  |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 II) | Hr Clock)           |                       |                            |                  |
| Section IV Automated System Data  |                     |                       |                            |                  |
| 19. Type of Inspection   20. Event Number   |                     | 21. Primary or Mill   |                            |                  |
|   |                     |                       |                            |                  |
| (activity code) E 0 1 0 0   | 0 8 8 3 0 1         |                       |                            | Number           |
| 0   |                     |                       | 23. AR 1                   |                  |
| JOHN REDWOOD  |                     |                       |                            | 0 3 3 3 3        |
| MSHA Form 7000-3 Mar 85 (Revised)   |                     |                       |                            |                  |

#### 107(a) ORDER - IMMINENT DANGER VIOLATON OF A MANDATORY STANDARD

Mine Safety and Health Administration

| Section 1 Violation Data   |  |
|--|--|
| 1. Date     Mo     Da     Yr     2. Time (24 Hr. Clock)  | 3. Citation/Order  |
|  |  |
| 0 7 1 0 0 8 0 9 0 0<br>4. Served To 5. Operator  | Number         4         4         1         0         1         8         5 |
| RICHARD JONES, SAFETY DIRECTOR INTER CEMENT CORPORA  |  |
| 6. Mine 7. Mine ID   |  |
|  | 0 2 4 - (contractor)   |
| 8. Condition or Practice   | 8a. Written Notice (103g)  |
|  |  |
| Two mechanics were not wearing life jackets when repairing a broken six-inch dredge discharge li                       | ne approximately 100 yards offshore.   |
| The discharge line was located atop flotation barrels positioned between the dredge and the shore.                     | The water depth was estimated to be 32                                       |
| feet. At the broken spot, one mechanic was sitting on a flotation barrel. The other mechanic was a                     |  |
| boat. The second mechanic was bending over the side trying to repair the line. Neither employee                        | knew how to swim. Life jackets   |
| were available and the foreman had instructed the employees to use them.   |  |
| This condition was a factor that contributed to the issuance of imminent danger order N0. 4410184                      | dated 7/10/01 Therefore no abatement   |
| time was set.  | dated 7/10/01. Therefore, no abatement                                       |
|  |  |
| See Continuati   | on Form (MSHA Form /000-3a)  |
| 9. Violatio A. Health  |  |
| Safety B. Section C. Part/Section of   |  |
| Other of Act - Title 30 CFR  | 5 6 . 1 5 0 2 0  |
| Section II Inspector's Evaluation  |  |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely | Highly Like X Occurred   |
|  |  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty        | Permanently Disabling Fatal X  |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty   |  |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 2  |
| 11. Negligenc (check one)  |  |
| A. None B. Low C. Moderate X D. High   | E. Reckless Disregard  |
| 12. Type of Action 13. Type of Issuance (check one)  |  |
| 1 0 4 - a -  Citation X Order  | Safeguard Written Notice   |
|  |  |
| 14. Initial Action     D. Written     E. Citation/       A. Citation     B. Order     C. Safeguard     Notice          | F. Dated Mo Da Yr  |
| A. Chanon _ B. Older _ C. Saleguard _ Nonce _ Older _ Number   |  |
|  |  |
| 15. Area or Equipment  |  |
|  |  |
| 16. Termination Due Mo Da Yr   |  |
| A. Date B. Time (24  |  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
| 17. Action to Terminate  |  |
|  |  |
| 18. Terminated Mo Da Yr  |  |
| A. Date B. Time (24 Hr Clock)  |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill  |  |
| (activity code) $\mathbf{E}$ 0 1 0 0 8 8 3 0 1   |  |
| 22. Signature  | 23. AR Number  |
|  |  |
| JOHN REDWOOD<br>MSHA Form 7000-3 Mar 85 (Revised)  | 0 3 3 3 3  |
| MISTA FUHI /000-5 Mar 85 (Kevisea)   |  |

#### 104(a) CITATION ISSUED FOR A CONDITION IN 107(a) IMMINENT DANGER ORDER

Mine Safety and Health Administration

| Section 1 Violation Data  |   |
|---|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         9         1         5                                     | 3. Citation/Order       Number       4       4       1       0       1  |
|   | 5. Operator   |
| John Smith, Mine Foreman  | J and S Coal Company, Inc.  |
|   | 7. Mine ID  |
| No. 1   | 4 4 - 0 3 5 3 6 - (contractor)  |
| 8. Condition or Practice  | 8a. Written Notice (103g)   |
|   | od. Whiteh Holice (105g)  |
| One man was approximately 8 inches from the bare trolley wire. To read  | on top of a 6-ton track locomotive with their legs hanging over the front end.<br>ch its destination, the locomotive had to pass through a low area (14 inches<br>de. Tom Davis, Chief Electrician, was operating the locomotive (No. 29) |
| near the mouth of the 2 east section. This is an imminent danger. An or   |   |
| This hazard has been cited on other occasions. The underlying cause wa  |   |
| Notice No. 4011337 dated 4/7/08 which requires that all personnel be sa   |   |
| A separate citation for a violation of 75.1403 (#4410012) is being issued   |   |
|   |   |
|   | See Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health<br>Safety B. Section<br>Other of Act -   | C. Part/Section of<br>Title 30 CFR  |
| Section II Inspector's Evaluation<br>10. Gravity:   |   |
| A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely   Highly Likely   Occurred  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost   | Workdays or Restricted Duty Permanently Disabling Fatal   |
| C. Significant and Substantial (See Reverse): Yes No  | D. Number of Persons Affected   |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate   | D. High E. Reckless Disregard   |
| 12. Type of Action 1 0 7 - a - , 13.  | Type of Issuance (check one)         Citation       Order       X       Safeguard       Written Notice  |
|   |   |
| 14. Initial Action       D. Writte         A. Citation       B. Order       C. Safeguard         Motion       D. Writte         Notice       Notice |   |
| 15. Area or Equipment<br>The transportation system used by the maintenance crews.   |   |
| The transportation system used by the maintenance crews.  |   |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24<br>Hr. Clock)  |   |
| Section III Termination Action  |   |
| 17. Action to Terminate   |   |
| Suitable transportation was provided for the two repairmen. All the repairn   |   |
| instructed in safe operating procedures for operating and riding transportation   | on equipment.   |
| 18. Terminated A. Date Mo Da Yr<br>0 8 1 8 0 8 B. Hine (24 FIT Clock)   | 0 7 3 0   |
| Section IV Automated System Data  |   |
| 19. Type of Inspection<br>(activity code)         20. Event Number         0         8         8         8  | 2 1. Primary or Mill  |
| 22. Signature   | 23. AR Number   |
| James Lee   |   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |

### 107(a) ORDER - IMMINENT DANGER WITH UNDERLYING CAUSES

Mine Safety and Health Administration

| Section 1 Violation Data   |  |
|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order  |
| 0 8 1 7 0 8 0 9 3 0  |  |
| 4. Served To   | 5. Operator  |
| John Smith, Mine Foreman   | J and S Coal Company, Inc.   |
| 6. Mine  | 7. Mine ID   |
| No. 1<br>8. Condition or Practice  | 4 4 - 0 3 5 3 6 - (contractor)<br>8a. Written Notice (103g)            |
| 8. Collution of Placifice  | sa. whiten Nouce (105g)  |
| Safe seating facilities were not provided for the two repairmen who w                                  | ere riding on top of a 6-top locomotive being operated by Tom Davis    |
|  | ed to the issuance of Imminent Danger Order No. 4410011 dated 8/17/08. |
| Therefore, no abatement time was set.  | ed to the issuance of miniment Danger Order No. 4410011 dated 0/17/00. |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | See Continuation Form (MSHA Form 7000-3a)                              |
| 9. Violation A. Health   |  |
| Safety B. Section<br>Other of Act  | C. Part/Section of 7 5 1 4 0 3<br>Title 30 CFR 7 5 . 1 4 0 3           |
|  |  |
| 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 rea-  |  |
| sonably be expected to be: No Lost Workdays Los  | t Workdays or Restricted Duty Permanently Disabling X Fatal            |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 2                                    |
| 11. Negligence (check one)     A. None     B. Low     C. Moderate                                      | D High V E Dasklass Disrogard  |
|  |  |
|  | 3. Type of Issuance (check one)  |
| 1 0 4 - a - ,       -   -  | Citation X Order Safeguard Written Notice                              |
| 14. Initial Action D. Writ   | ten E. Citation/ F. Dated Mo Da Yr                                     |
| A. Citation B. Order C. Safeguard X Notic  |  |
| 15. Area or Equipment  |  |
| 13. Alea of Equipment  |  |
|  |  |
| 16. Termination Due Mo Da Yr   |  |
| A. Date     B. Time (24  |  |
| Hr. Clock)   |  |
| Section III Termination Action   |  |
| 17. Action to Terminate<br>Suitable transportation with adequate seating facilities was provided for t | ha two ranairman   |
| Suitable transportation with adequate seating facilities was provided for t                            | ne two repairmen.  |
| 18. Terminated Mo Da Yr  |  |
| A. Date 0 8 1 8 0 8 B. Time (24 Hr Clock)  | 0 7 3 0  |
|  |  |
| Section IV Automated System Data       19. Type of Inspection     20. Event Number                     | 21. Primary or Mill  |
|  |  |
| (activity code)   E   0   1   0   8   8   8  |  |
| 22. Signature  | 23. AR Number  |
| James Lee  |  |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |

## 104(a) CITATION - CONTRIBUTING FACTOR IN IMMINENT DANGER ORDER BASED ON NOTICE TO PROVIDE SAFEGUARDS

#### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Violation Data   |  |
|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order  |
| 0 8 1 9 0 8 0 9 3  | Number $4 4 1 0 0 1 3$   |
| 4. Served To   | 5. Operator  |
| John Smith, Mine Foreman   | J and S Coal Company, Inc.                                       |
| 6. Mine  | 7. Mine ID   |
| No. 1  | 4 4 - 0 3 5 3 6 - (contractor)                                   |
| 8. Condition or Practice   | 8a. Written Notice (103g)  |
|  |  |
| The following conditions, which collectively constitute an imminent danger.  | existed on 2 left mains section:                                 |
| 1. Only 120 cubic feet of air a minute was reaching the working face of  |  |
| mining machine. [30CFR 75.325(a)(1)]   |  |
| <ol> <li>The air at the face of the No. 2 entry contained 2.75 per centum of m</li> <li>The permissible methane detector carried by the section foreman was</li> </ol> | ethane. [30CFR 75.323(b)(ii)]                                    |
| <ol> <li>The permissible methane detector carried by the section foremain was</li> <li>The methane monitor on the continuous mining machine (serial numl</li> </ol>    | * · · · · · · · · · · · · · · · · · · ·                          |
| An oral imminent danger order was issued to John Smith at 0930 hours. Se   |  |
| included in this Order of Withdrawal.  | parate citations and/or orders will be issued for all violations |
| (See Example No. 18 for an example of one citation issued for a violation  | n included in this Order of Withdrawal)                          |
| (See Example No. 18 for an example of one charlon issued for a violatio  | See Continuation Form (MSHA Form 7000-3a)                        |
| 9. Violation A. Health   |  |
| Safety B. Section  | C. Part/Section of   |
| Other of Act -   | Title 30 CFR   |
| 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 rea-  |  |
| sonably be expected to be: No Lost Workdays Los  | t Workdays or Restricted Duty Permanently Disabling Fatal        |
| C. Significant and Substantial (See Reverse): Yes No   | D. Number of Persons Affected                                    |
| 11. Negligence (check one)   |  |
| A. None B. Low C. Moderate   | D. High E. Reckless Disregard                                    |
| 12. Type of Action   | B. Type of Issuance (check one)                                  |
|  | Citation Order X Safeguard Written Notice                        |
|  |  |
| 14. Initial Action D. Writt  |  |
| A. Citation B. Order C. Safeguard Notic  | e Order IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII                      |
| 15. Area or Equipment  | Number   |
| The 2 left mains section from the dumping point inby to the working faces.   |  |
| The 2 fert mains section from the damping point moy to the working races.  |  |
| 16. Termination Due Mo Da Yr   |  |
| A. Date B. Time (24  |  |
| Section III - Terreinstein Action  |  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
|  |  |
| 18. Terminated Mo Da Yr  |  |
| A. Date B. Time (24 Hr Clock)  |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection 20. Event Number  | 21. Primary or Mill  |
| (activity code) E 1 5 0 8 8 8  | 8 3 0  |
| 22. Signature  | 23. AR Number  |
| James Lee  |  |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |

Mine Safety and Health Administration

| Section 1 Violation Data   |  |  |
|--|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)                          |  | 3. Citation/Order  |
| 0 8 1 9 0 8  | 0 9 3 0  | Number         4         4         1         0         0         1         4 |
| 4. Served To   | 5. Operator                                    |  |
| John Smith, Mine Foreman   | J and S Coal Company, Inc.                     |  |
| 6. Mine  | 7. Mine ID                                     |  |
| No. 1  | 4 4 - 0 3 5                                    |  |
| 8. Condition or Practice   |  | 8a. Written Notice (103g)  |
| The only permissible methane detector available on the 2 lef     | t mains section was inonerable. According to B | illy Bow Section Foreman he  |
| reported the condition of the detector to his immediate super    |  |  |
| This citation was one of the factors that contributed to the iss |  |  |
| time was set.  | ¥  |  |
|  |  |  |
| Note: Appropriate action must be taken for all violations        | a contained in a 107(a) Order                  |  |
| Note: Appropriate action must be taken for all violations        | s contained in a 107(a) Order.                 |  |
|  |  |  |
|  |  |  |
|  | See Continu                                    | ation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health   |  |  |
| Safety B. Section<br>Other of Act -                              | C. Part/Section of<br>Title 30 CFR             | 7 5 3 2 0  |
| Section II Inspector's Evaluation                                | The 50 CFR                                     |  |
| 10. Gravity:   |  |  |
| A. Injury or Illness (has) (is): No Likelihood U                 | nlikely Reasonably Likely                      | Highly Likely X Occurred   |
| B. Injury or Illness could rea-                                  |  |  |
| sonably be expected to be: No Lost Workdays                      | Lost Workdays or Restricted Duty               | X Permanently Disabling Fatal  |
| C. Significant and Substantial (See Reverse): Yes                | X No   | D. Number of Persons Affected 0 0 7  |
| 11. Negligence (check one)     A. None     B. Low                | C. Moderate D. High                            | X E. Reckless Disregard  |
| 12. Type of Action   | 13. Type of Issuance (check one)               |  |
| 1 0 4 - a - ,  | - Citation X Order                             | Safeguard Written Notice   |
|  |  |  |
| 14. Initial Action<br>A. Citation B. Order C. Safeguard          | D. Written E. Citation/<br>Notice Order        | F. Dated Mo Da Yr  |
| A. Challon D. Older C. Saleguard                                 |  |  |
| 15. Area or Equipment  |  |  |
|  |  |  |
| 16. Termination Due Mo Da Yr                                     |  |  |
|  | me (24   |  |
|  | r. Clock)                                      |  |
| Section III Termination Action                                   |  |  |
| 17. Action to Terminate  |  |  |
|  |  |  |
| 18. Terminated   Mo   Da   Yr                                    |  |  |
|  | 4 Hr Clock)                                    |  |
| Section IV Automated System Data                                 |  |  |
| 19. Type of Inspection   20. Event Number                        | 21. Primary or Mill                            |  |
|  | 0 8 8 8 8 3 0                                  |  |
| 22. Signature  |  | 23. AR Number  |
| James Lee  |  |  |
| MSHA Form 7000-3 Mar 85 (Revised)                                |  |  |

#### 104(a) CITATION - ISSUED FOR A CONDITION IN 107(a) ORDER NO. 4410013

Mine Safety and Health Administration

| Section 1 Violation Data   |  |
|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order  |
| 0 8 2 3 0 8 1 0 0 0  | Number         4         4         1         1         1         0 |
| 4. Served To 5. Operator   |  |
| JOSEPH COMBS, FOREMAN SENTINEL AGGREGATE   | S  |
| 6. Mine 7. Mine ID   |  |
|  | 0 8 2 - (contractor)   |
| 8. Condition or Practice   | 8a. Written Notice (103g)  |
| Two employees were not wearing life jackets while working from a platform in about 20 feet of wa   | ter. The platform was constructed                                  |
| of four barrels, about 24" in diameter and 36" long, tied together with pieces of hemp rope. The en  |  |
| to provide access to the dewatering pump. The foreman stated that he and the employees always u  |  |
| the pump or perform maintenance work on it. The foreman engaged in an aggravated conduct cons<br>This violation is an unwarrantable failure to comply with a mandatory standard. This violation is o | stituting more than ordinary negligence.                           |
| order No. 4411109 dated 8/23/08. Therefore, no abatement time was set.   | one of the factors cited in imminent danger                        |
| order No. 4411107 dated 6/25/08. Therefore, no abatement time was set.   |  |
|  |  |
|  |  |
| See Continu  | ation Form (MSHA Form /000-3a)                                     |
| 9. Violation A. Health   |  |
| Safety B. Section C. Part/Section of   |  |
| Other of Act - Title 30 CFR  | 5 6 . 1 5 0 2 0  |
| Section II Inspector's Evaluation  |  |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely   | Highly Likel X Occurred  |
| B. Injury or Illness could rea-  |  |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty   | Permanently Disabling Fatal X                                      |
|  |  |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 2                                |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High  | X E. Reckless Disregard  |
| 12. Type of Action 1 0 4 - d - 1 , - 1 . 13. Type of Issuance (check one) Citation X Order   | Safeguard Written Notice   |
| 14. Initial Action D. Written E. Citation/   | F. Dated Mo Da Yr  |
| A. Citation B. Order C. Safeguard Notice Order   |  |
|  |  |
| 15. Area or Equipment  |  |
|  |  |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     B. Time (24<br>Hr. Clock)   |  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
|  |  |
|  |  |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)  |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill  |  |
| (activity code) E 0 1 0 9 9 5 5 7 6  |  |
| 22. Signature  | 23. AR Number  |
| JOHN REDWOOD   | 0 3 3 3 3  |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |

# 104(d)(1) CITATION ISSUED AS PART OF A 107(a) IMMINENT DANGER ORDER

**U.S. Department of Labor** Mine Satety and Health Administration

| Section I V                  | iolation  | Data    |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
|------------------------------|-----------|---------|---------|----------|----------|--------|---|--------|-------------------|--------|--------|-------------|---------------|--------|----------|--------------|-------|------|-------|-------|-------|-------|-------|--------|-------|--------|--------------|------------|------|------|
| 1. Date                      | Мо        | Da      | Yr      | 2. Tir   | ne (24   | Hr. C  | Clock)                                  |        |                   |        |        |             |               |        |          |              |       |      |       | 3.    | Cita  | tion/ | Ord   | er     |       |        |              |            |      |      |
|                              | 0 7       | 1 0     | 1       |          |          |        | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |        | 1                 |        | 0 0    | ,           |               |        |          |              |       |      |       |       |       |       |       |        |       | 4      | 4            | 10         | 1    | 8 7  |
| 4. Served To                 |           | 10      | 0 0     | <u> </u> |          |        |   |        | 11                | U      |        | ,<br>5. C   | Door          | otor   |          |              |       |      |       |       | nun   | nber  |       |        |       | 4      | 4            | 10         |      |      |
|                              |           |         |         |          |          |        |   |        |                   |        |        |             | •             |        |          | <del>.</del> | ~~    |      |       |       |       |       |       |        |       |        |              |            |      |      |
| RICHARE<br>6. Mine           | JONE      | 3, SAI  |         | JIREC    | UR       |        |   |        |                   |        |        |             | lin i<br>1ine |        |          |              |       |      |       |       |       |       | Т     | Т      | 1     |        |              |            |      |      |
| ICC MILL                     |           |         |         |          |          |        |   |        |                   |        |        | 7. IV       | iine          | ID.    | 7        | 5            |       | 0    | 0 0   | ) 2   | 4     | _     |       |        | (00   | ntrac  | tor)         |            |      |      |
| 8. Condition                 | or Prac   | tice    |         |          |          |        |   |        |                   |        |        |             |               |        | 1        | J            | '     |      |       | / 2   | 4     | - 8   | a M   | /ritte | `     |        | (103c        | <u>(r</u>  |      |      |
| 0. Condition                 |           | 100     |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       | 0     | u. v. | /11110 |       |        | <u>, 100</u> | <i>31</i>  |      |      |
| Two mec                      | hanics    | were n  | ot wea  | ring lif | e jack   | ets wł | nen re                                  | pairi  | ng a              | brok   | en d   | redge       | disc          | charg  | e lin    | e an         | pro   | xim  | atel  | v 100 | ) va  | rds o | offsh | ore.   |       |        |              |            |      |      |
| The disch                    |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       | feet.  |              |            |      |      |
| At the bro                   |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| The second                   | nd mecl   | hanic v | vas bei | iding o  | ver the  | e side | of the                                  | e boa  | at tryi           | ing t  | o rep  | air th      | e lin         | ne. N  | Jeith    | er m         | nech  | anio | c kn  | ew h  | ow t  | o sw  | /im.  | Re     | porte | dly,   |              |            |      |      |
| Foreman                      |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| constituti                   |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       | table  |              |            |      |      |
| failure to                   | comply    | with a  | a manc  | latory s | tandar   | d. Th  | nis vio                                 | olatic | on is a           | a fac  | ctor c | ited in     | n im          | nmine  | ent d    | ange         | er or | der  | No    | . 441 | 018   | 4 iss | ued   | 7/10   | 0/08. |        |              |            |      |      |
|                              |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
|                              |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
|                              |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       | _    |       |       |       |       |       |        |       |        |              |            |      |      |
|                              | -         |         |         |          |          |        |   |        |                   |        |        |             |               |        |          | Ś            | See   | Cor  | ntinu | atior | I Fo  | rm (I | MSF   | IA F   | orm   | 7000-  | 3a)          |            |      |      |
| 9. Violation                 | A. Hea    |         |         |          |          |        |   |        |                   |        |        |             |               | _      |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
|                              | Saf       | -       |         | B. Sec   |          |        |   |        |                   |        |        |             |               |        | Part/S   |              |       | of   |       |       |       | _     |       |        |       |        |              |            |      |      |
| Contine                      | Oth       | -       |         | -        | Act      |        |   | -      | -                 |        |        |             |               | I      | itle 3   | 30 C         | FR    |      |       |       |       | 5 6   | δ.    | 1      | 5     | 0 2    | 0            |            |      |      |
| Section II I<br>10. Gravity: | nspecie   |         | aluatio | 1        |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| A. Injury o                  | r Illness | (has)   | (is):   | No Like  | elihooc  | ł      |   | U      | Jnlike            | ly [   |        | R           | Reas          | onab   | oly Li   | kely         | Γ     | ٦    |       | н     | ighly | / Lik | ely   | Х      | 1     | C      | Dccur        | red        |      |      |
| B. Injury                    |           | 200.001 |         |          |          |        |   |        |                   |        |        |             |               |        |          |              | _     |      |       |       |       |       | -     | _      |       |        |              |            |      |      |
|                              | bly be e  |         |         |          | No Lo    | ost W  | orkda                                   | VS     |                   | 1      | Los    | t Wor       | kdav          | vs or  | Res      | tricte       | ed D  | outv |       |       | F     | Perm  | ane   | ently  | Disa  | olina  | Г            | ΠE         | atal | Х    |
| -                            |           |         |         |          |          |        |   |        |                   | 1<br>T |        |             | ,             | ,      |          |              |       | ,    | -     |       |       |       |       | -      |       | _      |              |            |      |      |
| C. Signi                     |           |         |         | ıl (See  | Revers   | se):   |   | Yes    | Х                 |        | No     |             |               |        |          |              |       |      |       | D. N  | uml   | oer c | of Pe | ersor  | ns Af | fected | 1            |            | 0    | 0 2  |
| 11. Negligen<br>A. None      |           | eck on  | e)      | В.       | Low      |        |   |        | C. I              | Mod    | erate  | •           |               |        |          | D.           | Hig   | h    |       |       |       |       | E.    | Re     | ckles | s Dis  | regar        | ď          | Х    |      |
| 12. Type of A                | ction     |         |         |          |          |        |   |        |                   |        | 1:     | 3. Тур      | be of         | f Issu | iance    | e (ch        | neck  | on   | e)    |       |       |       |       |        |       |        |              |            |      |      |
|                              |           | 1       | 04      | - d      | - 1      |        |   |        |                   |        |        | Cit         | tatio         | n      |          | O            | rder  |      | Х     |       | Ş     | Safe  | guai  | rd     |       | W      | ritter       | n No       | tice |      |
| 14. Initial Act              | -         |         |         | _        |          |        |   | _      |                   | D. \   | Writt  | en _        |               | E      | . Cit    | atior        |       |      |       |       |       |       |       | F. C   | Dated |        | Мо           |            |      | Yr   |
| A. Citat                     | on        | X B.    | . Order | ·        | C.       | Safe   | guard                                   |        |                   | I      | Notic  | е           |               |        |          | der<br>mbe   |       | 4    | 4 1   | 0     | 1     | 4 5   | 5     |        |       |        | 0            | 6 1        | 0    | 8  0 |
| 15. Area or E                |           | ent     |         |          |          |        |   |        |                   |        |        |             |               |        | INU      | mbe          | ,     | _    | _     |       | _     | _     | -     |        |       |        |              | _          |      |      |
| JOHN JC                      |           |         | MITH    | - MEC    | 'HAN     | ICS    |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
|                              |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| 16. Terminat                 | ion Due   |         | Data    | Мо       | Da       | Yr     |   | от:    | me (2             | 04     |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
|                              |           | А.      | Date    |          |          |        |   |        | Ine (2<br>Ir. Clo |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| Section III                  | Termina   | ation A | ction   |          | <u> </u> |        |   |        |                   | oony   |        | 1 1         |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| 17. Action to                | Termin    | ate     |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
|                              |           |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| <u></u>                      |           |         |         |          | <u> </u> | , T    |   |        |                   |        |        | <del></del> |               | _      | T        |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| 18. Terminat                 |           | A. Dat  |         | lo D     | a Y      |        | B. Tin                                  | ne (2  | 24 Hr             | Cloc   | ck)    |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| Section IV                   | Automa    | ated Sy | /stem   | Data     |          |        |   |        |                   |        |        |             |               |        | <u>ا</u> |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| 19. Type of I                | nspectio  | on      |         | 20       | 0. Ever  | nt Nui | nber                                    |        |                   |        | Τ      |             | Τ             | 21. F  | Prima    | ary c        | or Mi | ill  |       |       | Т     |       |       |        |       |        |              |            |      |      |
| (activi                      | ty code)  | )       | E 0     | 1        |          |        |   |        | 0 0               | 8      | 8 3    | 3 0         | 1             |        |          |              |       |      |       |       |       |       |       |        |       |        |              |            |      |      |
| 22. Signature                | •         |         |         | <u> </u> | ,        |        |   |        |                   |        |        |             | -             |        |          |              |       |      |       |       |       |       | 23. / | AR N   | lumb  | er     | Τ            | Τ          |      |      |
| JOHN RE                      |           | חו      |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        |              | <u>د</u> ا | 2    | 3 3  |
|                              | 2000 2    |         |         |          |          |        |   |        |                   |        |        |             |               |        |          |              |       |      |       |       |       |       |       |        |       |        | <u> </u>     | 5          | J    | 5 3  |

MSHA Form 7000-3 Mar 85 (Revised)

#### 104(d)(1) UNWARRANTABLE FAILURE ORDER ISSUED AS PART OF 107(a) ORDER

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

| Section I V                 | iolatio   | n Data        | 1        |            |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
|-----------------------------|-----------|---------------|----------|------------|-----------|---------------|--------|------|---------|------|---------------|---------------|--------|-------------|---|--------|--------|-------|--------|----------|--------|--------|----------|-------|-------|------------|
| 1. Date                     | Мо        | Da            | Yr       | 2. Tim     | e (24 H   | r. Clock)     |        |      |         |      |               |               |        |             |   |        | 3.     | Cita  | ation/ | Order    |        |        |          |       |       |            |
|                             | 0 8       | 3 1           | 0 8      |            |           |               | 6      |      | 94      | 5    |               |               |        |             |   |        |        | Nur   | nber   |          |        | 4      | 4 ·      | 10    | 0     | 18         |
| 4. Served To                |           | •             | • •      | <u> </u>   |           |               |        | -    | · ·     | _    | 5 One         | erator        |        |             |   |        |        |       |        |          |        |        | <u> </u> |       | Ū     | . <b>-</b> |
| John Smith,                 |           | orem          | an       |            |           |               |        |      |         |      | •             | S Co          |        | mna         | anv I   | nc     |        |       |        |          |        |        |          |       |       |            |
| 6. Mine                     |           | oronn         |          |            |           |               |        |      |         | -    | 7. Min        |               |        |             | <u>, , , , , , , , , , , , , , , , , , , </u> |        |        | П     |        |          |        |        |          |       |       |            |
| No. 1                       |           |               |          |            |           |               |        |      |         | ľ    |               |               | 4      | Δ.          | - 0   | 3      | 5 3    | 6     | _      |          | (00    | ntrac  | tor)     |       |       |            |
| 110.1                       |           |               |          |            |           |               |        |      |         | _    |               |               |        | '           | 0   | U I    |        | v     | _      |          | (00)   | ninao  | .01)     |       |       |            |
| 8. Condition                | or Pra    | ctice         |          |            |           |               |        |      |         |      |               |               |        |             |   |        |        |       | 88     | a. Writ  | ten No | otice  | (103     | ig)   |       |            |
| The traili                  | ng cab    | le to t       | he No    | . 2 shuttl | e car or  | n 1st left se | ection |      | ontain  | ed f | ïve p         | oorly         | mad    | e ter       | npor  | ary s  | plice  | s. T  | hree   | of the   | splice | es had | l exp    | osed  | ,     |            |
|                             | -         |               |          |            |           | ne tempora    |        |      |         |      |               |               |        |             | -   |        | -      |       |        |          |        |        |          |       |       |            |
| the cable                   | was re    | portec        | l in th  | e preshif  | t exami   | ner's book    | on 8/  | /28  | 3/01 ar | nd 8 | /29/0         | 1. Tl         | he m   | ine o       | pera  | tor w  | as e   | ngag  | ed in  | aggra    | vated  | cond   | uct ł    | зу    |       |            |
| acknowle                    | dging     | a safe        | ty haz   | ard and r  | 10t takii | ng correcti   | ve ac  | tio  | n. Th   | is v | iolati        | on is         | an u   | nwai        | rrant   | able f | failu  | re to | com    | ply wi   | th a m | anda   | tory     | stand | lard. |            |
| This viola                  | ation is  | s one o       | of the   | factors c  | ited in l | mminent l     | Dange  | er ( | Order   | No.  | 441(          | 0028 i        | issue  | d 8/3       | 31/01   |        |        |       |        |          |        |        |          |       |       |            |
|                             |           |               |          |            |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
|                             |           |               |          |            |           |               |        |      |         |      |               |               |        |             | See C   | Contir | nuatio | on Fr | orm (  | MSHA     | Form   | 700    | 0-3a     | )     |       |            |
| 9. Violation                |           | alth          |          |            |           |               | П      | Т    |         |      |               |               |        |             |   |        | laan   |       |        |          |        |        | T        | ,<br> |       | +          |
| 5. 10121011                 | Sat       |               |          | B. Sect    | ion       |               |        |      |         |      |               | C.            | Part/  | Sect        | ion c   | of     |        |       |        |          |        |        |          |       |       |            |
|                             | Oth       |               |          | of A       |           |               | -      |      |         |      |               |               | Title  |             |   |        |        |       | 7 5    | 5 . E    | S 0 3  | 3      |          |       |       |            |
| Section II I                | nspect    | or's E        | valuat   | ion        |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| 10. Gravity:<br>A. Injury o | r Illnes  | s (has        | s) (is): | No Lik     | elihood   |               | Unlik  | ely  | / 🗆     |      | Rea           | asona         | ıbly L | ikely       | /   | ]      | I      | Highl | ly Lik | ely X    | ]      | С      | )ccur    | rred  |       |            |
| B. Injur                    | y or Illn | ess c         | ould re  | ea-        |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| sona                        | bly be    | expec         | ted to   | be:        | No Lost   | Workdays      | › [    |      | Lo      | st V | Vorko         | lays c        | or Re  | stric       | ted D   | Outy   |        | ]     | Perm   | anent    | y Disa | abling | Γ        | Fa    | ital  | Х          |
| C. Signi                    | ficant a  | Ind Su        | ıbstan   | tial (See  | Revers    | e): Ye        | s X    | T    | No      |      |               |               |        |             |   |        | D.     | Num   | ber o  | of Pers  | ons A  | ffecte | ed       |       | 0     | 0 1        |
| 11. Negligen                | ce (ch    |               |          |            |           | <u> </u>      |        |      |         |      |               | _             |        |             |   |        |        | -     |        |          |        |        |          |       | _     |            |
| A. None                     | •         |               |          | B. L       | ow        |               | С      | . N  | lodera  | ite  |               |               |        | D.          | High  | ۱      | Х      |       |        | E. R     | eckles | ss Dis | rega     | ard   |       |            |
| 12. Type of A               | Action    | 1             | 04       | - d        | - 1.      |               | _      |      | _       | 13.  | Type<br>Citat | of Iss<br>ion | suanc  | ce (c       | heck  | one)   |        | Orde  | er     | X        | S      | Safegi | lard     |       |       |            |
|                             |           |               |          |            | . ,       |               |        |      |         |      | onat          |               |        |             |   |        |        |       |        | <u> </u> |        |        |          |       |       |            |
| 14. Initial Act             |           |               |          | _          |           |               | _      | D    | D. Wri  | tter |               | .   1         | E. Ci  | tatio       |   |        |        |       |        |          | Dated  | 1      | Мо       |       |       | Yr         |
| A. Citat                    | ion       | ХВ            | . Orde   | r          | C. Sa     | afeguard      |        |      | Not     | ce   |               |               |        | der<br>Imbe | 4<br>er                                       | 4      | 1 0    | 0     | 1 5    | 5        |        |        | 0        | 8 1   | 9     | 0 1        |
| 15. Area or E               |           |               | 1.6      |            |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| No. 2 shuttl                | e car o   | on 1st        | left s   | ection     |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
|                             |           |               |          |            |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| 16. Terminat                | ion Du    |               |          | Мо         | Da        | /r            |        |      |         |      |               |               | 1      |             |   |        |        |       |        |          |        |        |          |       |       |            |
|                             |           | А.            | Date     |            |           | В.            | Time   |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| Section III                 | Tormir    | nation        | Action   | ЦЦ         |           |               | Hr. C  | 100  | ск)     |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| 17. Action to               |           |               | Action   | <u>.</u>   |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
|                             |           |               |          |            |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
|                             |           |               |          |            |           | 1             |        |      |         |      |               |               | _      |             |   |        |        |       |        |          |        |        |          |       |       |            |
| 18. Terminat                |           | A. Da         |          | /lo Da     | Yr        | B. Time       | (24 6  | Jr ( |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
|                             |           | <b>л</b> . Da |          |            |           | D. Time       | (241   |      | CIUCK   |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| Section IV                  | Autom     | ated S        | Syster   | n Data     |           |               |        |      |         |      |               |               | _      |             |   |        |        |       |        |          |        |        |          |       |       |            |
| 19. Type of I               | nspect    | ion           |          | 20. 1      | Event N   | umber         | Γ      | Τ    | П       |      |               | 2             | 1. Pri | imar        | y or I  | Vill   |        | Π     |        |          |        |        |          |       |       |            |
| (activit                    | ty code   | e)            | E 0      | 1          |           |               | 08     | 3    | 8 8     | 8    | 3 1           |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |
| 22. Signature               | -         |               |          | · · ·      |           |               |        |      |         |      |               |               |        |             |   |        |        |       | 2      | 23. AR   | Numb   | oer    | Т        |       |       |            |
| James Lee                   |           |               |          |            |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          | 2 0   | 7     | 7 7        |
| MSHA Form                   | 7000-3    | 3 Mar         | 85 (R    | evised)    |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        | <u> </u> |       | ·     | <u> </u>   |
|                             |           |               | •        | ,          |           |               |        |      |         |      |               |               |        |             |   |        |        |       |        |          |        |        |          |       |       |            |

#### 104(d)(1) ORDER ISSUED AS PART OF A 107(a) IMMINENT DANGER ORDER

Mine Safety and Health Administration

| Section 1 Vi                 | iolation                | Data         |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
|------------------------------|-------------------------|--------------|---------|-------------|-----------|---------|-----------|---------------------|--------|--------|----------|----------|---------|--------------|----------|----------|--------|-------|--------|---------|---------|---------|--------|------|-------|
| 1. Date                      | Мо                      | Da           | Yr      | 2. Tim      | ne (24 Hi | r. Clo  | ck)       |                     |        |        |          |          |         |              |          |          | 3.     | Citat | ion/C  | rder    |         |         |        |      |       |
|                              | 0 8                     | 3 0          | 0 8     |             | ,         |         | ,         | 0                   | 9      | 0 0    |          |          |         |              |          |          |        | Num   | her    |         |         | 1       | 1      |      | 1 8 9 |
| 4. Served To                 | 0 0                     | 5 0          | 0 0     |             |           |         |           | U                   | ,      | U C    | 5. Op    | erator   |         |              |          |          |        | Ituii |        |         |         | - T     |        | U    | 1 0 ) |
| JOHN BA                      | NKS, N                  | <b>1INER</b> |         |             |           |         |           |                     |        |        | -        | OGGY     | MIN     | JING         | СОМ      | PAN      | Y      |       |        |         |         |         |        |      |       |
| 6. Mine                      | ,                       |              |         |             |           |         |           |                     |        |        | _        | ne ID    |         |              |          |          |        |       | Т      |         |         |         |        |      |       |
| CLAIM N                      | UMBEI                   | R 3          |         |             |           |         |           |                     |        |        |          |          | 9       | 3 -          | 0        | 1        | 2 3    | 4 -   |        |         | (co     | ntracto | or)    |      |       |
| 8. Condition of              | or Practi               | ce           |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       | 8a     | . Writ  | ten No  | tice (1 | 03g)   |      |       |
|                              |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| A miner (J                   |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        | 1       |         |         |        |      |       |
| within thre<br>were award    |                         |              |         |             |           |         |           |                     |        |        | ttes and | i a ligh | iter of | n his        | perso    | n. Co    | mpan   | y per | sonne  | el      |         |         |        |      |       |
| wele await                   |                         | II. Dalik    | is rout | nery sin    | lokeu III | anu a   | iouna u   | ne mag              | gazii  | IC.    |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| This is to i                 | inform N                | Mr. Ban      | ks that | he will     | receive   | a Not   | ification | n of Pr             | opo    | sed Ci | vil Per  | alty fo  | r viol  | lating       | a ma     | ndato    | ry sta | ndaro | i rela | ting to | )       |         |        |      |       |
| smoking n                    |                         |              |         |             |           |         |           |                     |        |        |          | 5        |         |              |          |          |        |       |        | U       |         |         |        |      |       |
|                              |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| NOTE: TI                     |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         | th      |        |      |       |
| the miner's<br>In this case  |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         | •       |         |        |      |       |
| in uns case                  | c, a 107                | (a) IIIII    | ment    |             |           | 1 a 10- | +(a) cita |                     | л vi   | 014110 | 10157    | .0704    | would   |              |          |          |        |       |        |         | form 7  | 000-3a  | ι)     |      |       |
| 9. Violation                 | A. Heal                 | th           |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       | Ť      |         |         |         |        | ТТ   |       |
|                              | Safe                    | ety          |         | B. Secti    | ion       |         |           |                     |        |        |          |          |         | Sectio       |          |          |        |       |        |         |         |         |        |      |       |
|                              | Oth                     | -            |         | of A        | ict       | 1       | 1 0       | - g                 |        |        |          | 1        | Title   | 30 CI        | FR       |          |        |       | 5 7    |         | 69      | 0 4     |        |      |       |
| Section II In                | nspector                | 's Evalı     | lation  |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| 10. Gravity:<br>A. Injury or | r Illness               | (has) (i     | s): N   | o Likeli    | ihood     | [       |           | Unlike              | ly     |        | Re       | asonab   | ly Lil  | kely         | Х        | I        | Н      | ighly | Like   | ly 🗌    |         | O       | ccurre | d [  |       |
| B. Injury<br>sonab           | y or Illne<br>oly be ex |              |         |             | No Lost   | Worl    | kdavs     |                     | 1      | Lost   | Workd    | lavs or  | Rest    | ricted       | Dutv     | ,        |        | Р     | erma   | nentlv  | Disab   | ling    | Г      | Fata | al X  |
|                              | •                       | <u>^</u>     |         |             |           |         | •         |                     | I<br>I |        | П        |          |         |              |          |          |        |       |        | -       |         | -       |        |      |       |
| C. Signifi<br>11. Negligence |                         | d Subst      |         | See Re      | verse):   |         | Yes       | X                   |        | No     |          |          |         |              |          |          | D. N   | umb   | er of  | Perso   | ns Affe | ected   |        |      | 0 0 1 |
| A. None                      |                         |              | )       | B. L        | .0W       |         |           | C. N                | Mod    | erate  |          |          |         | D.           | High     |          | Χ      |       |        | E. Re   | eckless | Disree  | ard    | Г    |       |
| 12. Type of A                | ction                   |              |         | <del></del> | <u> </u>  | -       |           |                     |        |        | . Type   | of Issu  | ance    |              | -        | <u>.</u> |        |       |        |         |         |         |        |      |       |
| 12. Type of A                | ction                   |              |         | -           | - ,       |         |           | -                   | -      | 15     | Cita     |          |         | T            | der      | Ē        | Saf    | egua  | rd     |         | Writ    | ten No  | otice  |      |       |
| 14. Initial Act              | 10 <b>n</b>             |              |         |             |           |         |           |                     | υ.     | Writte | en       |          | E. Ci   | tation       | /        |          |        |       | Τ      | F.      | Dated   |         | Мо     | Da   | Υr    |
| A. Citati                    | ion                     | В.           | Order   |             | C. Sa     | ifegua  | urd       |                     |        | Notice | e 🗌      |          |         | der<br>umper | r        |          |        |       |        |         |         |         |        |      |       |
| 15. Area or Ec               | quipmer                 | nt           |         |             |           |         |           |                     |        |        |          |          | 1.0     |              | <u> </u> |          |        |       |        | I       |         |         |        |      |       |
|                              |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| 16 Torminatio                | on Duo                  |              |         | Malt        |           | V       |           |                     |        |        |          |          | -       |              |          |          |        |       |        |         |         |         |        |      |       |
| 16. Terminatio               | on Due                  | A. I         | Date    | MO          |           |         |           | l'ime (2<br>Hr. Clo |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| Section III 7                | Termina                 | tion Ac      | ction   |             |           |         |           |                     | JUR)   |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| 17. Action to                |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
|                              |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| 18. Terminate                | d                       |              | M       | o Da        | ı Yr      |         |           |                     |        |        | <u> </u> | <u> </u> |         |              |          |          |        |       |        |         |         |         |        |      |       |
| 18. Terminate                |                         | A. Date      |         |             |           | В.      | Time (    | 24 Hr (             | Clo    | ck)    |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |
| Section IV A                 |                         |              | tem Da  |             |           |         |           |                     |        |        | · · ·    |          | -       |              |          |          |        |       |        |         |         |         |        |      |       |
| 19. Type of In               | spection                | 1            |         | 20          | . Event N | Numb    | er        |                     | ]      |        | ΙT       | 21.      | Prim    | ary oi       | Mill     |          |        | T     |        |         |         |         |        |      |       |
|                              | ty code)                | ]            | E 0     | 1           |           |         |           | 0 0                 | 7      | 63     | 8 9      | 9        |         |              |          |          |        |       |        |         |         |         |        |      |       |
| 22. Signature                |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       | 2      | 3. AR   | Numb    | er      |        | Π    |       |
| TED JOHI                     |                         |              |         |             |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         | (      | ) 4  | 7 8 9 |
| MSHA Form                    | 7000-3                  | Mar 85       | (Revis  | ed)         |           |         |           |                     |        |        |          |          |         |              |          |          |        |       |        |         |         |         |        |      |       |

# 110(g) NOTICE - MINER SMOKING IN PROHIBITED AREA

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
| 0 8 2 2 0 8 0 9 3 0   | Number         4         4         1         0         0         2         3 |
|   | Operator   |
| Edgar Simms, Locomotive Operator J a  | nd S Coal Company, Inc.  |
|   | Mine ID  |
| No. 1   | 4 4 - 0 3 5 3 6 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
| Edgar Simms was holding a lighted cigar while operating a track locon   | notive near the 2 North switch. The switch is located approximately one      |
|   | an, revealed a butane lighter and one other cigar. This is notification that |
| Mr. Simms will receive a civil penalty for violating a mandatory safety   |  |
| Anytown, USA, 99999.  |  |
| (A violation will be issued to the mine operator for the san  | ne standard )  |
| (A violation will be issued to the ninic operator for the same  |  |
|   |  |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)                                    |
| 9. Violation A. Health<br>Safety B. Section   | C. Part/Section of   |
| Safety   B. Section     Other   of Act  | Title 30 CFR 7 5 . 1 7 0 2   |
| Section II Inspector's Evaluation   |  |
| 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likel Cccurred  |
| B. Injury or Illness could rea-   |  |
|   | orkdays or Restricted Duty Permanently Disabling Fatal X                     |
|   |  |
| C. Significant and Substantial (See Reverse): Yes X No<br>11. Negligence (check one)  | D. Number of Persons Affected 0 0 1  |
| A. None B. Low C. Moderate  | D. High X E. Reckless Disregard  |
| 12. Type of Action 13. Type   | /pe of Issuance (check one)  |
|   | itation Safeguard Written Notice   |
| 14. Initial Action D. Written   | E. Citation/ F. Dated Mo Da Yr   |
|   |  |
| A. Citation B. Order C. Safeguard Notice  | Order Order  |
| 15. Area or Equipment   |  |
|   |  |
|   |  |
| 16. Termination Due Mo Da Yr  |  |
| A. Date B. Time (24   |  |
| Hr. Clock)  |  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
| The Mine Foreman removed Edgar Simms and the smoking materials from   | n the mine.  |
| 18. Terminated Mo Da Yr   |  |
| A. Date   B. Time (24 Hr Clock)   |  |
|   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection 20. Event Number 0. 8, 8, 8, 8, 8, 8, 8, 8, 8, 8, 8, 8, 8,   | 21. Primary or Mill  |
| (activity code)         E         0         1         0         8         8         8         3           22. Signature         23         24         25         25         26         26         27 | 23. AR Number  |
| -   |  |
| James Lee<br>MSHA Form 7000-3 Mar 85 (Revised)  |  |
|   |  |

# 110(g) NOTICE - MINER SMOKING IN PROHIBITED AREA

Mine Safety and Health Administration

| Section 1 Violation Data                                  |   |                  |                   |               |                |                |           |          |
|---|---|------------------|-------------------|---------------|----------------|----------------|-----------|----------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)                   |   |                  |                   | 3. Ci         | tation/Order   |                |           |          |
|   | 0 8 3 0                                       |                  |                   | N             | umber          | 4 4            |           | 1 9 0    |
| 4. Served To  |   | . Operator       |                   |               |                |                |           | -1 -1 -1 |
| SYDNEY JONES, PRESIDENT                                   |   | TMC MININ        | G COMPA           | NY            |                |                |           |          |
| 6. Mine   | 7.  | . Mine ID        |                   |               |                |                |           |          |
| TRIANGLE MINE   |   | 7                | 2 - 0             | 0 0 1 2       |                | (contractor)   |           |          |
| 8. Condition or Practice                                  |   |                  |                   |               | 8a. Writte     | en Notice (10  | 13g)      |          |
| There were no speed limit signs posted along the unbermed | portion of the ma                             | ain service road | This is a vi      | iolation of ( | Condition No.  | 3              |           |          |
| of the Granted Modification of Mandatory Standard 56.9300 |   |                  |                   |               |                | 5              |           |          |
| posted along the unbermed portion. The Assistant Safety M |   |                  |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
|   |   |                  | See Con           | ntinuation F  | orm (MSHA I    | form 7000-3a   | .)        |          |
| 9. Violation A. Health                                    |   |                  | а                 |               |                |                |           |          |
| Safety B. Section<br>Other of Act -                       |   |                  | Section of 30 CFR |               | 56.9           | 3 0 0 d        |           |          |
| Section II Inspector's Evaluation                         |   | The              | 50 CI K           |               | 50.7           |                |           |          |
| 10. Gravity:  |   |                  |                   |               |                |                |           |          |
| A. Injury or Illness (has) (is): No Likelihood U          | nlikely X                                     | Reasonably Li    | ikely             | Hig           | hly Likely     | ] Occ          | urred     | ]        |
| B. Injury or Illness could rea-                           |   | lankdorra on Dog | triated Duty      |               | Dommonontly    | Dischling      | - Esta    | 1        |
| sonably be expected to be: No Lost Workdays               | X Lost W                                      | orkdays or Res   | Incled Duly       |               | Permanently    |                | Fata      |          |
| C. Significant and Substantial (See Reverse): Yes         | No X  |                  |                   | D. Nu         | mber of Person | ns Affected    |           | 0 0 1    |
| 11. Negligence (check one)     A. None     B. Low         | C. Moderate                                   | X                | D. High           |               | E. Re          | ckless Disrega | ard 🗌     | ٦        |
| 12. Type of Action  |   | Type of Issuance | -                 |               |                | 8              |           | <u> </u> |
| 1 0 4 - a - ,   |   | Citation X       | Order             |               | Safeguard      | Writte         | en Notice |          |
|   |   |                  | order             |               | Suicguard      |                |           |          |
| 14. Initial Action  | D. Written                                    |                  | tation/           |               | F. I           | Dated N        | Mo Da     | Yr       |
| A. Citation B. Order C. Safeguard                         | Notice  |                  | rder<br>umber     |               |                |                |           |          |
| 15. Area or Equipment                                     |   | 110              |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
|   | me (24<br>r. Clock)                           | 0 9 0 0          |                   |               |                |                |           |          |
| Section III Termination Action                            | I. CIOCK)                                     |                  |                   |               |                |                |           |          |
| 17. Action to Terminate                                   |   |                  |                   |               |                |                |           |          |
|   |   |                  |                   |               |                |                |           |          |
| 18. Terminated Mo Da Yr                                   |   |                  |                   |               |                |                |           |          |
|   | 4 Hr Clock)                                   |                  |                   |               |                |                |           |          |
| Section IV Automated System Data                          | <u>, , , , , , , , , , , , , , , , , , , </u> |                  |                   |               |                |                |           |          |
| 19. Type of Inspection   20. Event Number                 |   |                  | ary or Mill       |               |                |                |           |          |
|   | 0 7 6 8 9                                     | 8 7              |                   |               |                |                |           |          |
| 22. Signature   |   |                  |                   |               | 23. AR         | Number         |           |          |
| TED JOHNSON   |   |                  |                   |               |                |                | 04        | 7 8 9    |
| MSHA Form 7000-3 Mar 85 (Revised)                         |   |                  |                   |               |                |                |           |          |

104(a) CITATION - VIOLATION OF A GRANTED PETITION FOR MODIFICATION

#### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Violation Data                |                                |
|---|--------------------------------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock) | 3. Citation/Order              |
|   | 0 7 0 0 Number 1 2 3 4 5 7 5   |
| 4. Served To                            | 5. Operator                    |
| Mike McGregor, Safety Director          | Black Rock Coal Company        |
| 6. Mine                                 | 7. Mine ID                     |
| No. 1                                   | 1 5 - 0 3 5 3 6 - (contractor) |
| 8. Condition or Practice                | 8a. Written Notice (103g)      |

The North Mains section (MMU 001-0) was not provided two communication systems routed through two separate entries to the surface as required in the Emergency Response Plan in accordance with the Mine Improvement and New Emergency response Act of 2006 (Miner Act). The emergency notification telephone for the North Mains working section was not operational. The telephone could not send or receive a message in the page or talk mode from the responsible person located on the surface.

|   | See Continuation                             | Form (MSHA Form 7000-3     | ia)            |
|---|--|----------------------------|----------------|
| 9. Violation A. Health<br>Safety X B. Section<br>Other of Act 3 1 6 - b   | C. Part/Section of<br>Title 30 CFR           |                            |                |
| Section II Inspector's Evaluation   |  |                            |                |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         R                              | easonably Likely X H                         | lighly Likely              | Occurred       |
| B. Injury or Illness could reasonably be expected to be: No Lost Workdays Lost Work   | days or Restricted Duty                      | Permanently Disabling      | x Fatal        |
| C. Significant and Substantial (See Reverse): Yes X No  | D. N   | Number of Persons Affected | 0 1 6          |
| 11. Negligence       (check one)         A. None       B. Low       C. Moderate   | X D. High                                    | E. Reckless Disr           | regard         |
|   | e of Issuance (check one)<br>ation X Order 0 | Safeguard V                | Written Notice |
| 14. Initial Action     D. Written       A. Citation     B. Order     C. Safeguard   | E. Citation/<br>Order<br>Number              | F. Dated                   | Mo Da Yr       |
| 15. Area or Equipment   |  |                            |                |
| 16. Termination DueMoDaYrA. Date $1$ $1$ $2$ $3$ $0$ $8$ B. Time (24 $1$ $1$ $2$ $3$ $0$ $8$  | 7 0 0  |                            |                |
| 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<br>(activity code)         E         0         1         7         6         5         4         3         2 | 21. Primary or Mill                          |                            |                |
| 22. Signature   | ·  | 23. AR Number              | 2 3 1 9 0      |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |                            |                |

#### 104(a) CITATION - 316(B) VIOLATION (EMERGENCY RESPONSE PLANS)

Mine Safety and Health Administration

| Section 1 Violation Data  |                        |                     |                                |                           |                 |
|---|------------------------|---------------------|--------------------------------|---------------------------|-----------------|
| 1. Date Mo Da Yr 2. Time (  | 24 Hr. Clock)          |                     |                                | 3. Citation/Order         |                 |
| 0 7 1 1 0 8   | 0                      | 9 0 0               |                                | Number                    | 4 4 1 0 1 9 1   |
| 4. Served To  |                        |                     | 5. Operator                    |                           |                 |
| SYDNEY JONES, PRESIDENT   |                        |                     | TMC MINING COMPANY             | 7                         |                 |
| 6. Mine   |                        |                     | 7. Mine ID                     |                           |                 |
| TRIANGLE MINE   |                        |                     | 7 2 - 0 0                      | 0 1 2 - (con              | tractor)        |
| 8. Condition or Practice  |                        |                     |                                | 8a. Written Not           | ice (103g)      |
|   |                        |                     |                                |                           |                 |
| A miner (Payroll #9876) was injured on  |                        |                     |                                |                           | -               |
| submit an MSHA #7000-1 (Mine, Accid<br>violations during the past twelve months |                        |                     |                                |                           |                 |
| employment reports (MSHA #7000-2 for  |                        |                     |                                |                           | Itelly          |
| on completing and submitting the require  |                        | inpuny pers         | sinier nuve seen repeatedry ms |                           |                 |
|   |                        |                     |                                |                           |                 |
|   |                        |                     |                                |                           |                 |
|   |                        |                     |                                |                           |                 |
|   |                        |                     | See Contin                     | uation Form (MSHA Form 7  | (000 35)        |
| 9. Violation A. Health  |                        | <del> </del>        | See Contin                     |                           | 000-5a)         |
| Safety B. Section   |                        |                     | C. Part/Section of             |                           |                 |
| Other of Act  |                        |                     | Title 30 CFR                   | 5 0 . 2 0 a               |                 |
| Section II Inspector's Evaluation   |                        |                     |                                |                           |                 |
| 10. Gravity:  |                        |                     |                                |                           |                 |
| A. Injury or Illness (has) (is): No Likeli                                      | hood X Unlik           | ely                 | Reasonably Likely              | Highly Likely             | Occurred        |
| B. Injury or Illness could rea-   |                        | ] Т )               | Washdana an Dastaistad Duta    | Demuenter (h. Diesh)      | lin a 🗖 Retal 🗖 |
| sonably be expected to be: No   | Lost Workdays X        | Lost                | Workdays or Restricted Duty    | Permanently Disable       | ling Fatal      |
| C. Significant and Substantial (See Rev   | erse): Yes             | No                  | X                              | D. Number of Persons Affe | ected 0 0 0     |
| 11. Negligence (check one)       A. None       B. Low                           | с.                     | Moderate            | D. High                        | X E. Reckless             | Disregard       |
| 12. Type of Action  |                        | 13.                 | Type of Issuance (check one)   |                           |                 |
| 1 0 4 - a -   | , –                    | -                   | Citation X Order               | Safeguard                 | Written Notice  |
| 14. Initial Action  |                        | D. Writte           | n E. Citation/                 | F. Dated                  | Mo Da Yr        |
|   | C. Safeguard           | D. Writte<br>Notice |                                | P. Dated                  |                 |
|   | Ŭ L                    |                     | Number                         |                           |                 |
| 15. Area or Equipment   |                        |                     |                                |                           |                 |
|   |                        |                     |                                |                           |                 |
| 16. Termination Due Mo Da   | a Yr                   |                     |                                |                           |                 |
| A. Date 0 7 1   | 2 0 8 B. Time<br>Hr. C |                     | 0 8 0 0                        |                           |                 |
| Section III Termination Action  |                        |                     |                                |                           |                 |
| 17. Action to Terminate   |                        |                     |                                |                           |                 |
|   |                        |                     |                                |                           |                 |
|   |                        |                     |                                |                           |                 |
| 18. Terminated A. Date Mo Da  | Yr   B. Time (24 H     | r (Flock)           |                                |                           |                 |
| A. Date   | D. 11110 (24 11        | I CIUCK)            |                                |                           |                 |
| Section IV Automated System Data  |                        |                     |                                |                           |                 |
| 19. Type of Inspection20. E   | vent Number            |                     | 21. Primary or Mill            |                           |                 |
| (activity code) E 0 1   | 0 7                    | 6 8 9               | 8 7                            |                           |                 |
| 22. Signature   |                        |                     |                                | 23. AR Numbe              | er              |
| TED JOHNSON   |                        |                     |                                |                           | 0 4 7 8 9       |
| MSHA Form 7000-3 Mar 85 (Revised)   |                        |                     |                                |                           |                 |

#### 104(a) CITATION - FAILURE TO PREPARE AND SUBMIT AN MSHA 7000-1 FORM

#### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
| 0 7 1 1 0 8 0 9 0 5   |  |
| 4. Served To  | 5. Operator  |
| SYDNEY JONES, PRESIDENT   | TMC MINING COMPANY   |
| 6. Mine<br>TRIANGLE MINE  | 7. Mine ID $7 2 - 0 0 1 2 - (contractor)$                        |
|   |  |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
| An MSHA #7000-2 (Quarterly Employment Report) for the 4th Quarter 200   | (October November December) was not completed                    |
| nor mailed to MSHA's Health and Safety Analysis Center prior to January 15  |  |
| during the past twelve months for failing to report on-the-job injuries to MSI  | HA and two violations for failing to submit quarterly employment |
| reports. Additionally, company personnel have been repeatedly instructed in   | Part 50 regulations on completing and submitting                 |
| the required forms to MSHA.   |  |
|   |  |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)                        |
| 9. Violation A. Health  |  |
| Safety B. Section   | C. Part/Section of<br>Title 30 CFR 5 0 . 3 0 a                   |
| Other of Act  | Title 30 CFR     5     0     .     3     0     a                 |
| Section II Inspector's Evaluation<br>10. Gravity:   |  |
| A. Injury or Illness (has) (is): No Likelihood X Unlikely   | Reasonably Likely Highly Likely Occurred                         |
| B. Injury or Illness could rea-   |  |
| sonably be expected to be: No Lost Workdays X Lost  | Workdays or Restricted Duty Permanently Disabling Fatal          |
| C. Significant and Substantial (See Reverse): Yes No  | X   D. Number of Persons Affected   0   0                        |
| 11. Negligence       (check one)         A. None       B. Low         C. Moderate   | D. High X E. Reckless Disregard                                  |
| 12. Type of Action 13   | B. Type of Issuance (check one)                                  |
| 1 0 4 - a - ,   -   -   | Citation X Order Safeguard Written Notice                        |
|   |  |
| 14. Initial Action   D. Writte     A. Citation   B. Order   C. Safeguard  |  |
|   | Number   |
| 15. Area or Equipment   |  |
|   |  |
| 16. Termination DueMoDaYrA. Date071208B. Time (24)Hr. Clock)  |  |
| 0         7         1         2         0         8         Hr. Clock)           Section III Termination Action                     | 0 8 0 0  |
| 17. Action to Terminate   |  |
| THE QUARTERLY REPORT WAS FILLED OUT AND SUBMITTED TO  | MSHA.  |
| 18. Terminated Mo Da Yr   |  |
| A. Date $\begin{vmatrix} MO \\ 0 \end{vmatrix} = \begin{vmatrix} Da \\ 1 \end{vmatrix}$ B. Time (24 Hr Clock) B. Time (24 Hr Clock) | 0 8 0 0  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection   20. Event Number   | 21. Primary or Mill  |
| (activity code) E 0 1 0 7 6 8 9   |  |
| 22. Signature   | 23. AR Number  |
| TED JOHNSON   | 0 4 7 8 9  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

104(a) CITATION - FAILURE TO PREPARE AND SUBMIT AN MSHA 7000-2 FORM

Mine Safety and Health Administration

| Section 1 V          | iolation       | Data     |         |  |                         |        |                            |               |                       |             |          |     |
|----------------------|----------------|----------|---------|--|-------------------------|--------|----------------------------|---------------|-----------------------|-------------|----------|-----|
| 1. Date              | Мо             | Da       | Yr      | 2. Time (24 Hr. Clock)                                       |                         |        |                            | 3. C          | itation/Order         |             |          |     |
|                      | 0 7            | 1 1      | 0 8     |  | 0 9                     | 1 0    |                            | N             | Jumber                | 4 4 1       | 0 1      | 9 3 |
| 4. Served To         |                |          |         |  |                         |        | 5. Operator                |               |                       |             |          |     |
| SYDNEY               | JONES          | , PRES   | SIDEN   | Т  |                         |        | TMC MINING COMP.           | ANY           |                       |             |          |     |
| 6. Mine              |                |          |         |  |                         |        | 7. Mine ID                 |               |                       |             |          |     |
| TRIANG               |                |          |         |  |                         |        | 72-                        | 0 0 1         |                       | ntractor)   |          |     |
| 8. Condition         | or Practi      | ce       |         |  |                         |        |                            |               | 8a. Written No        | tice (103g) |          |     |
|                      | MOIL           |          |         | 100 1 1 . 1  | 1.111 . D               |        |                            | .1 .          | 1. 1                  |             |          |     |
|                      |                |          |         | 1 (Mine Accident, Injury, and 08, was not at the mine office |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         | st twelve months for failing to                              |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         | Additionally, company person                                 |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         | to MSHA. Those instructions                                  |                         |        |                            |               |                       | -           |          |     |
| by MSHA              |                |          |         |  |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         |  |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         |  |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         |  |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         |  |                         |        | See (                      | ontinuation L | orm (MSHA Form 7      | 000.20      |          |     |
| 9. Violation         | A. Hea         | lth      |         | ·····  |                         |        | 566 (                      |               |                       | 100-3a)     |          |     |
| 9. VIOIation         | A. Hea<br>Safe |          | _       | B. Section   |                         |        | C. Part/Section of         | •             |                       |             |          |     |
|                      | Oth            |          |         | of Act   |                         |        | Title 30 CFR               |               | 5 0 . 4 0             | b           |          |     |
| Section II I         | nonactor       | la Eval  | notion  |  |                         |        |                            |               |                       |             |          |     |
| 10. Gravity:         | Ispector       | S Evai   | uation  |  |                         |        |                            |               |                       |             |          |     |
| 2                    | r Illness      | (has) (  | is): N  | No Likelihood X  | Unlikely                |        | Reasonably Likely          | Hig           | hly Likely            | Occurre     | d 🗌      |     |
| B. Injur             | v or Illne     | ess cou  | ld rea- |  |                         |        |                            | _             |                       |             |          |     |
|                      | bly be ex      |          |         |  | Х                       | Lost ' | Workdays or Restricted Dut | ty 🗌          | Permanently Disab     | ing         | Fatal    |     |
| C Signif             | licant an      | d Subs   | tantial | (See Reverse): Yes   |                         | No     | X                          |               | umber of Persons Affe | ected       | -        | 0 0 |
| 11. Negligend        | ce (che        | eck one  |         |  | , 1                     | 10     | 1                          | D.110         |                       | etted       | 0        | 0 0 |
| A. None              |                |          | /       | B. Low   | C. Mode                 | erate  | D. Hig                     | h X           | E. Reckless           | Disregard   |          |     |
| 12. Type of A        | ction          |          |         |  |                         | 13     | Type of Issuance (check or |               |                       |             |          |     |
| 12. 1990 011         | •••••          | 1        | 0 4     | - a - ,  |                         | 10.    | Citation X Order           |               | Safeguard             | Written N   | Jotice [ |     |
|                      |                | -        | •       |  |                         |        |                            |               |                       |             |          |     |
| 14. Initial Act      | ion            |          |         |  | D. V                    | Writte | n E. Citation/             |               | F. Dated              | Мо          | Da       | Yr  |
| A. Citat             | ion            | В.       | Order   | C. Safeguard   | N                       | Notice |                            |               |                       |             |          |     |
| 15 Area or E         |                | .+       |         |  |                         |        | Number                     |               |                       |             |          |     |
| 15. Area or E        | quipinei       | IL       |         |  |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         |  |                         |        |                            |               |                       |             |          |     |
| 16. Terminati        | on Due         |          |         | Mo Da Yr   |                         |        |                            |               |                       |             |          |     |
|                      |                | A. 1     | Date    |  | l'ime (24<br>Hr. Clock) |        | 0 8 0 0                    |               |                       |             |          |     |
| Section III '        | Tormina        | tion A   | ation   | 0 7 1 2 0 8  | HI. CIOCK)              |        |                            |               |                       |             |          |     |
| 17. Action to        |                |          | ction   |  |                         |        |                            |               |                       |             |          |     |
| 17.710101110         | 1 CI IIIII     | ue       |         |  |                         |        |                            |               |                       |             |          |     |
|                      |                |          |         |  |                         |        |                            |               |                       |             |          |     |
| 18. Terminate        |                |          |         | 10 Da Yr   |                         |        |                            |               |                       |             |          |     |
|                      |                | A. Date  | e       | B. Time (  | (24 Hr Clock            | k)     |                            |               |                       |             |          |     |
| Section IV           | Automa         | ted Svs  | stem D  | ata  |                         |        |                            |               |                       |             |          |     |
| 19. Type of Ir       |                |          |         | 20. Event Number   |                         |        | 21. Primary or Mil         | 1             |                       |             |          |     |
| • •                  | ty code)       |          | E 0     | 1  | 0 7 6                   | 8 9    |                            | -             |                       |             |          |     |
| 22. Signature        |                |          |         |  | 0 / 0                   | 0 9    | 0 /                        |               | 23. AR Numb           | er          | ттт      |     |
| -                    |                |          |         |  |                         |        |                            |               | 23. AN INUILIU        |             |          |     |
| TED JOH<br>MSHA Form |                | Mar 85   | Ravi    | (ba)   |                         |        |                            |               |                       | (           | ) 4 7    | 89  |
| MORA FOIII           | 1000-3         | ivial 63 |         | seuj   |                         |        |                            |               |                       |             |          |     |

#### 104(a) CITATION - FAILURE TO MAINTAIN PART 50 RECORDS

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

| Section I Violation Data  |   |
|---|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         I <thi< th="">         I         <thi< th="">         I</thi<></thi<> | 3. Citation/Order         4         4         1         0         0         2         1 |
| 4. Served To 5. Operator  |   |
| John Smith, Mine Foreman J and S Coal Compa   |   |
| 6. Mine 7. Mine 10 and 2 coal compa   |   |
| No. 1 4 4 - 0   | 3 5 3 6 - (contractor)  |
| 8. Condition or Practice  | 8a. Written Notice (103g)   |
|   |   |
| The No. 17 track-mounted self-propelled personnel carrier was not provided with sand-rigging  | . This mine has wet track, steep grades, and "S"  |
| curves. This presents the hazard of derailment and associated injuries. The personnel carrier v   |   |
| This is a Notice to Provide Safeguard(s) requiring No. 17 personnel carrier and all other person  |   |
| operable sand rigging when transporting 6 or more miners.   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| See   | Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health  |   |
| Safety B. Section C. Part/Section   | of 7514036b3  |
| Other of Act - Title 30 CFR   |   |
| 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 rea-   |   |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted   | Duty Permanently Disabling Fatal  |
| C. Significant and Substantial (See Reverse): Yes No  | D. Number of Persons Affected   |
| 11. Negligence (check one)  |   |
| A. None B. Low C. Moderate D. Hig   | h E. Reckless Disregard   |
| 12. Type of Action 13. Type of Issuance (chec   |   |
| 12. Type of Action 3 1 4 - b - , 13. Type of Issuance (chec   | Safeguard X Written Notice  |
|   | Saleguard X WITHEIT NOTICE  |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard Notice Order  |   |
| 15. Area or Equipment   |   |
|   |   |
|   |   |
| 16. Termination Due Mo Da Yr  |   |
| A. Date B. Hime (24<br>0 8 2 1 0 8 Hr. Clock) 1 5 0 0   |   |
| Section III Termination Action  |   |
| 17. Action to Terminate   |   |
| New linkage was properly installed and the sand-rigging was working satisfactorily on   | the No. 17 personnel carrier.   |
| 18. Terminated         Mo         Da         Yr           A. Date         0         8         2         1         0         8         1         4         4         5   |   |
| Section IV Automated System Data  |   |
| 19. Type of Inspection 20. Event Number 21. Primary or M  | ill   |
| (activity code) E 0 1 0 8 8 8 3 1   |   |
| 22. Signature   | 23. AR Number   |
| -   | 2 0 7 7 7   |
| James Lee<br>MSHA Form 7000 2 Mar 85 (Povisod)  |   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |

#### NOTICE TO PROVIDE SAFEGUARD AND TERMINATION

Mine Safety and Health Administration

| Section 1 V                  | violation   | ı Data      |         |                   |                 |       |         |       |  |
|------------------------------|-------------|-------------|---------|-------------------|-----------------|-------|---------|-------|--|
| 1. Date                      | Mo          | Da          | Yr      | 2. Time (24 H     | r. Clock)       |       |         |       | 3. Citation/Order  |
|                              | 0 8         | 2 2         | 0 8     |                   |                 | 0     | 8 0     | 0     | Number 4 4 1 0 0 2 2   |
| 4. Served To                 |             |             |         |                   |                 |       |         |       | 5. Operator  |
| John Smith,                  | Mine Fo     | oreman      | I       |                   |                 |       |         |       | J and S Coal Company, Inc.   |
| 6. Mine                      |             |             |         |                   |                 |       |         |       | 7. Mine ID   |
| No. 1                        |             |             |         |                   |                 |       |         |       | 4 4 - 0 3 5 3 6 - (contractor)   |
| 8. Condition                 | or Prac     | tice        |         |                   |                 |       |         |       | 8a. Written Notice (103g)  |
| Citations                    | iccurd      | luring      | the ine | nactions conduc   | tad on August   | 10.   | and 21  | 20    | 008, had not been posted on the mine bulletin board.   |
| Citations                    | issued (    | uring       | the ms  | pections conduc   | ted off August  | 197   | and 21, | , 20  | Jos, nad not been posted on the nime bunetin board.  |
|                              |             |             |         |                   |                 |       |         |       |  |
|                              |             |             |         |                   |                 |       |         |       |  |
|                              |             |             |         |                   |                 |       |         |       |  |
|                              |             |             |         |                   |                 |       |         |       |  |
|                              |             |             |         |                   |                 |       |         |       |  |
|                              |             |             |         |                   |                 |       |         |       |  |
|                              |             |             |         |                   |                 |       |         |       | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation                 | A. Hea      | lth         |         |                   |                 |       |         |       |  |
|                              | Saf         |             |         | B. Section        |                 |       |         |       | C. Part/Section of   |
| C                            | Oth         |             | 1       | of Act            | 1 0 9 -         | а     |         |       | Title 30 CFR         . <t< td=""></t<> |
| Section II 1<br>10. Gravity: | Inspecto    | ors eva     | aiuatio | a                 |                 |       |         |       |  |
|                              | or Illnes   | s (has)     | (is):   | No Likelihood     | X Un            | like  | ly 🗌    |       | Reasonably Likely Highly Likely Occurred   |
| B. Injur                     |             |             |         |                   |                 | -     |         |       |  |
|                              | bly be e    |             |         |                   | Workdays        | Χ     | Lo      | ost ' | Workdays or Restricted Duty Permanently Disabling Fatal  |
| C Signi                      | ficente     | -<br>nd Sub | atontia | l (See Reverse):  | Yes             |       | No      |       | X   D. Number of Persons Affected   0   0  |
| 11. Negligen                 |             |             |         | .1 (See Reverse). | 168             |       | INU     |       | A     D. Number of Persons Affected     0     0     0  |
| A. None                      |             |             | •)      | B. Low            |                 | C. N  | Modera  | ıte   | X D. High E. Reckless Disregard  |
| 12. Type of A                | Action      |             |         |                   |                 |       |         | 13.   | . Type of Issuance (check one)   |
|                              |             | 1           | 0 4     | - a               |                 |       | -       |       | Citation X Order Safeguard Written Notice  |
|                              |             |             |         | Í                 |                 |       |         |       |  |
| 14. Initial Ac               |             |             |         | _                 | _               |       | D. Wr   |       |  |
| A. Citat                     | tion        | B           | . Order | C. Sa             | feguard         |       | Not     | tice  | e Order  |
| 15. Area or E                | Equipme     | ent         |         |                   |                 |       |         |       |  |
|                              | • •         |             |         |                   |                 |       |         |       |  |
|                              |             |             |         |                   |                 |       |         |       |  |
| 16. Terminat                 | 10n Due     |             |         | Mo Da             | Yr              |       |         |       |  |
|                              |             |             | Date    |                   | B. Tin          | · ·   |         |       |  |
| <b>0</b> III                 | <del></del> |             |         | 0 8 2 2 0         | 0 8 Hr.         | . Clo | ock)    |       | 0 8 3 0  |
| Section III                  |             |             | Action  |                   |                 |       |         |       |  |
| 17. Action to                |             |             |         |                   |                 |       |         |       |  |
| Copies of the                | e citatio   | ns and      | orders  | were posted on    | the bulletin bo | ard.  |         |       |  |
| 18. Terminat                 | ed          |             |         | Io Da Yr          | 1               |       |         |       |  |
| 10. Terminat                 |             | A. Dat      |         |                   | B. Time (24     | Hr    | Clock)  | )     | 0 8 3 0  |
| Section IV                   | Autom       | ated S      |         |                   | ~               |       |         |       |  |
| 19. Type of I                |             |             |         | 20. Event 1       | Number          |       |         |       | 21. Primary or Mill  |
| (activi                      | ity code    | )           | E 0     | 1                 | 0               | 8     | 8 8     | 8     | 3 1  |
| 22. Signature                | e           |             | •       |                   | •               |       |         |       | 23. AR Number  |
| James Lee                    |             |             |         |                   |                 |       |         |       |  |
| MSHA Form                    | 7000-3      | 8 Mar 8     | 35 (Rev | vised)            |                 |       |         |       |  |

#### 109(a) VIOLATION OF THE MINE ACT WITH TERMINATION

Appendix B

**Training Violations** 

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Mine Safety and Health Administration

| Section 1 Violation Data  |          |
|---|----------|
| 1. Date       Mo       Da       Yr       2. Time (24 Hr. Clock)       3. Citation/Order         0       7       0       2       0       8       0       0   | 7 9      |
| 4. Served To 5. Operator  |          |
| TIMOTHY DAWSON, PRESIDENT ABCD MINING COMPANY, INC.   |          |
| 6. Mine 17. Mine ID   |          |
| ABCD MINE 7 3 - 0 1 2 3 5 - (contractor)  |          |
| 8. Condition or Practice 8a. Written Notice (103g)  |          |
| Michael Martin (Payroll Number 123456), a temporary summer employee, had not received the required MSHA 40-hour new miner training  |          |
| prior to performing maintenance duties underground. The mine operator was aware of the Part 48 training requirements, but   |          |
| believed it was unnecessary for a temporary employee. Mr. Martin had no previous mining experience. The operator is hereby  |          |
| ordered to withdraw Michael Martin from the mine until he has received the required training. The Federal Mine Safety and Health  |          |
| Act of 1977 declares that an untrained miner is a hazard to himself and to others.  |          |
|   |          |
|   |          |
| Confirmation France (MCHA France 2000 2-)   |          |
| See Continuation Form (MSHA Form 7000-3a)   |          |
| 9. Violation A. Health<br>Safety B. Section C. Part/Section of  |          |
| Safety     B. Section     C. Part/Section of       Other     of Act     -       Title 30 CFR     4       8     5  |          |
| Section II Inspector's Evaluation   |          |
| 10. Gravity:  |          |
| A. Injury or Illness (has) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred  |          |
| B. Injury or Illness could rea-   |          |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty Permanently Disabling Fatal  | Х        |
| C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0  | 0 1      |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       X         D. High       E. Reckless Disregard   |          |
| 12. Type of Action   13. Type of Issuance (check one)   |          |
| 1  0  4  -  g  -  1  ,  1  -  -  -  -  -  -  -  -  -  |          |
| 14. Initial Action D. Written E. Citation/ F. Dated Mo Da   | Yr       |
| A. Citation B. Order C. Safeguard Notice Order Number   |          |
| 15. Area or Equipment   |          |
| MICHAEL MARTIN (PAYROLL NUMBER 123456)  |          |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     B. Time (24)   |          |
| Hr. Clock)  |          |
| Section III Termination Action  |          |
| 17. Action to Terminate   |          |
|   |          |
| 18. Terminated     Mo     Da     Yr       A. Date     Image: Date of the second s |          |
| Section IV Automated System Data  |          |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill   |          |
| (activity code) $E \begin{bmatrix} 0 \\ 1 \end{bmatrix}$ 20. Even realized $\begin{bmatrix} 0 \\ 9 \end{bmatrix}$ 7 7 5 5 3   |          |
| (activity code)         E         0         1         0         9         7         7         5         5           22. Signature         23. AR Number         23  | <u> </u> |
|   |          |
| JOHN REDWOOD 0 3 3  | 3 3      |
| MSHA Form 7000-3 Mar 85 (Revised)   |          |

#### 104(g)(1) ORDER - PART 48 SINGLE MINER AND A SINGLE VIOLATION

Mine Safety and Health Administration

| 1. Date       Mo       Da       Yr.       2. Time (24 Hr. Clock)       0       8       0       Sumber       4       4       4       1       0       0       2       0         4. Served To       S. Operator       Jand S Call Company, Inc.       S. Mine ID       4       4       4       1       0       0       2       0         6. Mine       No.1       2. Mine ID       4       4       4       0       3       3       6       -       (contractor)         8. Condition or Practice       8. Online mains sequence/particle by Section 115 of the Act. Mr. Jones is a new miner, hired by this company on 81308. He has received the early of mining, a determined by an Autorized Representative.       -<   | Section 1 Violation Data  |   |
|---|---|---|
| 4. Served To       jr and S Caal Company, Inc.         John Smith, Mine Foreman       jr and S Caal Company, Inc.         6. Mine       jr and S Caal Company, Inc.         8. Condition or Practice       8. Written Notice (103g)         John Jones was performing laborer duties in the mains section conveyor belt entry in the underground portion of the mine. He has not received the stady training as required by Dositor 115 of the Act. Mr. Jones is a new miner, hird by this company on 81308. He has received mone of the required Homos is declarable humons is declarable humos is declarable.         (If a miner has not received raining is violation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an impector's evaluation on a Form 7000-3a.)         9. Violation [A, Health]       B. Section         9. Violation [A, Health]       B. Section [C, C, Parti Section 15]         9. Violation [A, Health]       B. Section [C, C, Parti Section 16]         9. Violation [A, Health]       B. Section [C, C, PartiSection 16]         9. Violat  | 1. Date     Mo     Da     Yr     2. Time (24 Hr. Clock)                         | 3. Citation/Order   |
| John Smith, Mine Foreman       J and S Coal Company, Inc.         6. Mine       7. Mine ID       4       4       0       3       5       6  |   |   |
| 6. Mine       7. Mine ID       4       4       0       3       5       3       6       . (contractor)         8. Condition of Practice       8a. Written Notice (105g)  |   |   |
| No. 1       4       4       -0       3       5       3       -0       (contractor)         8. Condition or Practice       8a. Written Notice (105g)       John Jones was performing laborer duties in the mains section conveyor belf entry in the underground portion of the mine. He has not received the safety training as required by texton 115 of the Act. Mr. Jones is an examiner, hired by this company on 81/308. He has received one of the required training in the ubsence of such training. John Jones is declared a hazard to himself and others, and is to be withdrawn immediately from the mine until he has received the required training, as determined by an Authorized Representative.         (If a miner has not received training in violation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation on a Porm 7000-3a.)         9. Violation [A Health]       B. Section       C. Part/Section of Title 30 CFR       4       8       5       3       1         10. Gravity:       A. Bealth       Section II       Unlikely       Reasonably Likely       Fightly Likely       Occurred       8         10. Gravity:       A. None       B. Low       C. Moderate       D. Number of Persons Affected       10       0       1         11. Neglegence (check one)       Not Cenker one)       C. Stafeguard       Written Notice       II. Notice       F. Dated       Mo       Da       Yr         12. Type of Action <td></td> <td></td>  |   |   |
| 8. Condition or Practice       8a. Written Notice (103g)         John Jones was performing laborer duties in the mains section conveyor belt entry in the underground portion of the mine. He has not received<br>the safety training as required by Section 115 of the Act. Mr. Jones is a new miner, hired by this company on 81/308. He has not received none of the<br>rupuited 4b Notice of new miner training. In the absence of such training, John Jones is decade a hazard to hismer and is to be<br>withdrawn immediately from the mine until he has received the required training, as determined by an Authorized Representative.         (If a miner has not received training in violation of 2 or more of the training regulations, a single Order is issued; however, each additional<br>violation is given an inspector's evaluation on a Form 7000-3a.)       Sec Continuation Form (MSHA Form 7000-3a)         9. Violation       N. Health<br>Safety<br>of Act       B. Section<br>of Act       C. Part/Section of<br>the 30 CFR       4 ////////////////////////////////////   |   |   |
| John Jones was performing laborer duties in the mains section conveyor belt entry in the underground portion of the mine. He has not received the safety training, as required by Section 115 of the Act. Mr. Jones is a new miner, hired by dhis company on 8/13/08. He has received none of the required 4/hours of new miner training. In the absence of such training, John Jones is declared a hazard to himself and dones, and is to be withdrawn immediately from the mine until be has received the required training, as determined by an Authorized Representative.         (If a miner has not received training in violation of 2 or more of the training, as determined by an Authorized Representative.         (If a miner has not received training in violation of 2 or more of the training as determined by an Authorized Representative.         (If a miner has not received training in violation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation on a Form 7000-3a.)         9. Violation       A. Health       B. Section         Safety       B. Section       C. Part/Section of Title 30 CFR         4       8       Safety         0. Gravity:       A. Injury or Illness could reasonably Likely       Mightly Likely       Occurred         10. Gravity:       A. Injury or Illness could reasonably takely in the violation of C. Noderate       D. Highly Likely       D. Number of Persons Affected         11. Neglegnene (Calcck one)       B. Low       C. Moderate       D. Highly E. Reckless Disregard       Mo         12. Type of Action   |   |   |
| the safety training as required by Section 115 of the Ast. Mr. Jones is a new miner, hired by this company on 81308. Heas received none of the required 40 hours of new miner training. John Jones is determined by an Autohotzed Representative.         withdrawn immediately from the mine until he has received the required training. as determined by an Autohotzed Representative.         (If a miner has not received training in violation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation on a Form 7000-3a.)         9. Violation [A. Health]       B. Section         Safety of Mr.       B. Section         0. Other       Safety of Mr.         0. Other       Safety of Mr.         0. True 30 CFR       4 sl. 5 sl         10. Gravity:       A. Injury or Illness could reasonably Likely       Measonably Likely       Occurred []         11. Reglignence (check one)       No Loss Workdays       Lost Workdays or Restricted Duty []       Permanently Disabling []       Fatal X         12. Type of Action       I. B. Low       C. Moderate []       D. Number of Persons Affected []       []       []       []         13. Reglignence (check one)       C. Safeguard []       D. Viriten Notice []       I. A. None []       B. Low       C. Moderate []       D. High Y       F. Dated []       Mo []       []       []         14. Initital Action []       A. Date [] <td>8. Condition or Practice</td> <td>8a. Written Notice (103g)</td>   | 8. Condition or Practice  | 8a. Written Notice (103g)   |
| required 40 hours of new miner training. In the absence of such training. John Jones is declared a hazard to himself and others, and is to be<br>withdrawn immediately from the mine until he has received the required training regulations, a single Order is issued; however, each additional<br>violation is given an inspector's evaluation on a Form 7000-3a.)         9. Violation   A. Health<br>Setton II Inspector's Evaluation<br>of Act       B. Section of<br>of Act       C. Part/Section of<br>Tide 30 CFR       4       8.       5.         9. Violation   C. Part/Section of<br>Other       B. Section of<br>of Act       C. Part/Section of<br>Tide 30 CFR       4       8.       5.         9. Violation   A. Health<br>Setton II Inspector's Evaluation       B. Section of<br>of Act       C. Part/Section of<br>Tide 30 CFR       4       8.       5.         9. Violation   A. Health<br>Setton II Inspector's Evaluation       B. Section II Inspector's Evaluation       0       0       1         10. Gravity:       A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       M. Tide 30 CFR       6       0       0       0       1         10. Gravity:       A. Injury or Illness cult rea-<br>sonably be expected to be:       No Lost Workdays or Restricted Duty       Permanently Disabling       Fatal       Set         12. Type of Action       B. Low       C. Moderate       D. High       E. Reckless Disregard       0       0       1         13. Area o  |   |   |
| withdrawn immediately from the mine until he has received the required training, as determined by an Authorized Representative.         (If a miner has not received training in violation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation on a Form 7000-3a.)         See Continuation Form (MSHA Form 7000-3a)         9. Violation         A. Health       B. Section         Other       B. Section         Other       B. Section         C. Part/Section of       4 8   |   |   |
| If a miner has not received training in violation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation on a Form 7000-3a.)         Seet of the second of the second of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation on a Form 7000-3a.)         Seet of the second of the second of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is given an inspector's evaluation of 2 or more of the training regulations, a single Order is issued; however, each additional violation is a form 7000-3a.)         9. Violation   A. Health   B. Section   Other Kase (has) (size ( |   |   |
| violation is given an inspector's evaluation on a Form 7000-3a.)         See Continuation Form (MSHA Form 7000-3a.)         9. Violation       A. Health       B. Section       C. Part/Section of       4       8       .5       a         10. Gravity:       A. Injury or Illness could reasonably Likely       C. Part/Section Of       4       8       .5       a         10. Gravity:       A. Injury or Illness could reasonably could reasonably be expected to be:       No Lost Workdays or Restricted Duty       Permanently Disabling       Fatal       X         C. Significant and Substantial (See Reverse):       Yes X       No       D. Number of Persons Affected       0       0       1         11. Negligence       (check one)       R. None       B. Low       C. Moderate       D. High       E. Reckless Disregard       D         12. Type of Action       1       0       4       g       -1       . <td>withdrawn immediately from the mine until he has received the required training</td> <td>g, as determined by an Authorized Representative.</td>   | withdrawn immediately from the mine until he has received the required training | g, as determined by an Authorized Representative.                   |
| See Continuation Form (MSHA Form 7000-3a)         9. Violation       A. Health<br>Safety       B. Section<br>of Act       C. Part/Section of<br>Title 30 CFR       4       8       . 5 Ja         See Continuation Form (MSHA Form 7000-3a)         0. Grewiy:       A. Social       C. Part/Section of<br>Title 30 CFR       4       8       . 5 Ja         Section II - Inspector's Evaluation         10. Grewiy:       A. Injury or Ilness (bas) (is): No Likelihood       Unlikely       Reasonably Likely       Yithely Likely       Occurred         B. Juny or Ilness       No Likelihood       Unlikely       Reasonably Likely       Yithely Cocurred       0       0         1. Negligence (check one)       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal       X         2. Type of Action       1       0       4       -       1       .       1       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Note       B. Low       C. Moderate       D. High       X       Reaceless Disregard       No         12. Type of Action       1       0       4       Yithen       Notice       Notice       Noder       X       Safeguard   | (If a miner has not received training in violation of 2 or more of the training | ing regulations, a single Order is issued; however, each additional |
| 9. Violation       A. Health<br>of Act<br>of Act       B. Section<br>of Act       C. Part/Section of<br>Tille 30 CFR       4       8       . 5         No line       File 30 CFR       4       8       . 5       8         10. Gravity:       A. lajury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Mighly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Mighly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Mighly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabiling       Fatal       Stressonably         C. Significant and Substantial (See Reverse):       Yes X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       B. Low       C. Moderate       D. High       E. Reckless Disregard       Initial Action         12. Type of Action       B. Order       C. Safeguard       D. Written       Notice       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       Notine       Nothan bethan bet  |   |   |
| 9. Violation       A. Health<br>of Act<br>of Act       B. Section<br>of Act       C. Part/Section of<br>Tille 30 CFR       4       8       . 5         No line       File 30 CFR       4       8       . 5       8         10. Gravity:       A. lajury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Mighly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Mighly Likely       Occurred         B. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Mighly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabiling       Fatal       Stressonably         C. Significant and Substantial (See Reverse):       Yes X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       B. Low       C. Moderate       D. High       E. Reckless Disregard       Initial Action         12. Type of Action       B. Order       C. Safeguard       D. Written       Notice       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       Notine       Nothan bethan bet  |   | See Continuation Form (MSHA Form 7/000-3a)                          |
| Safety       B. Section       C. Part/Section of<br>Title 30 CFR       4       8       5  a          Section II - Inspector's Evaluation       IO. Gravity:       A. Injury or Illness (has) (hs): No Likelihood       Unlikely       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal       X         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1       1       Negligence (check one)<br>A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard       II:       II:       Negligence (check one)<br>Citation       Order       Safeguard       Written Notice       II:       Notice       II:       Notice       II:  | Q Violation A Health  |   |
| $ \begin{array}{c c c c c c c c c c c c c c c c c c c $   |   | C. Part/Section of  |
| 10. Gravity:       A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal       X         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0] 0] 1         11. Negligence       (check one)       A. None       B. Low       C. Moderate       D. High       X       E. Reckless Disregard         12. Type of Action       1       0       4 - g       -       13. Type of Issuance (check one)       X       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       Order<br>Order<br>Number       F. Dated       Mo       Da       Yr         15. Area or Equipment       John Jones is withdrawn from the mine       Number       If the code of the   |   |   |
| 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       X         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0 [0] 0]       1         11. Negligence       (Check one)       B. Low       C. Moderate       D. High       X       E. Reckless Disregard         12. Type of Action       1       0       4       g       1       1       Type of Issuance (check one)         A. Citation       B. Order       C. Safeguard       D. Written       Notice       Order       X       Safeguard       Written Notice         14. Initial Action       A. Otate       Mo       Da       Yr       Notice       Order       Number       Note       Note       Note       Note       Image: Notice       Note       Note       Note       Note       Note       Note       Image: Note       Note       Note       Note       Note       Image: Note       Note       Note       Note       Note       Image: Note       Note       Image: Note       Image: Note       <  |   |   |
| B. Injury or Illness could reasonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal       X         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       B. Low       C. Moderate       D. High       X       E. Reckless Disregard       I         12. Type of Action       1       0       4 - g       -       1       IS. Type of Issuance (check one)       Safeguard       Written Notice         14. Initial Action       A. Oate       C. Safeguard       D. Written       Notice       Order       X       Safeguard       Written Notice         15. Area or Equipment       John Jones is withdrawn from the mine       D. Mumber       Product       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)       Section III Termination Action       II. Negligence       E. Oil 1       D. B. Time (24 Hr Clock)       Section IV Automated System Data       II. Pype of Inspection [E 0 1]       O. B 8 8 8 3 1       21. Primary or Mill       Z. AR Number       Z. AR Number       Z. O 7 7 7         2. Signature       Z. O 7 7 7<  |   |   |
| sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         II. Negligence       (check one)       B. Low       C. Moderate       D. High       E. Reckless Disregard       Image: Constraint of the state of the sta   |   | sonably Likely X Highly Likely Occurred                             |
| C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       0       1         11. Negligence       (check one)       B. Low       C. Moderate       D. High       X       E. Reckless Disregard       Image: Check one)         12. Type of Action       1       0       4       g       1       1       Yr       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       C. Stafeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       F. Dated       Mo       Da       Yr         15. Area or Equipment       John Jones is withdrawn from the mine       Dohn Jones is withdrawn from the mine       Hr. Clock)       Section III Termination Action       Hr. Clock)       Section III Termination Action         17. Action to Terminate       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Section IV Automated System Data         19. Type of Inspection       Image: Cloce of the section       Image: Cloce of the section       Image: Cloce of the section       Section IV Automated System Data         19. Type of Inspection       Image: Cloce of the section       Image: Cloce of the section <td></td> <td>lays or Restricted Duty</td>   |   | lays or Restricted Duty   |
| 11. Negligence       (check one)       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1       0       4 - g       -       1       1.3. Type of Issuance (check one)         12. Type of Action       1       0       4 - g       -       1       1.3. Type of Issuance (check one)       C. Moderate         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written       Order       Safeguard       Written Notice         15. Area or Equipment       John Jones is withdrawn from the mine       D. Written       Notice       E. Citation/<br>Order<br>Number       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24<br>Hr. Clock)       Hr. Clock)       Section III Termination Action         17. Action to Terminate       III Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       III       III Terminate       III Section IV Automated System Data         19. Type of Inspection       III - 1       II   |   |   |
| A. None       B. Low       C. Moderate       D. High       X       E. Reckless Disregard         12. Type of Action       1       0       4 - g       -       13. Type of Issuance (check one)<br>Citation       Order       X       Safeguard       Written Notice         14. Initial Action<br>A. Citation       B. Order       C. Safeguard       D. Written<br>Notice       E. Citation/<br>Order<br>Number       F. Dated       Mo       Da       Yr         15. Area or Equipment<br>John Jones is withdrawn from the mine       D. Written<br>Notice       E. Citation/<br>Order<br>Number       F. Dated       Mo       Da       Yr         16. Termination Due<br>R. Citation III Termination Action       A. Date       Mo       Da       Yr       B. Time (24<br>Hr. Clock)       Hr. Clock)         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Section IV Automated System Data       20. For thy Number       21. Primary or Mill       23. AR Number       21. 0 T/7       7 <td></td> <td>D. Number of Persons Affected 0 0 1</td>  |   | D. Number of Persons Affected 0 0 1                                 |
| 1       0       4       g       -       1       .       .       Citation       Order       X       Safeguard       Written Notice         14. Initial Action       B. Order       C. Safeguard       D. Written       D. Written       F. Dated       Mo       Da       Yr         15. Area or Equipment       John Jones is withdrawn from the mine       .  |   | D. High X E. Reckless Disregard                                     |
| 14. Initial Action       B. Order       C. Safeguard       D. Written       E. Citation/<br>Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       John Jones is withdrawn from the mine       Image: Section III - Termination Action       Image: Section III - Termination Action       Image: Section III - Terminate       Image: Section III - Terminate       Image: Section III - Terminate         18. Terminated       A. Date       Mo       Da       Yr       Image: Section III - Terminate       Image: Section III - Terminate         18. Terminated       A. Date       Mo       Da       Yr       Image: Section III - Terminate       Image: Section III - Terminate         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section III - Terminate       Image: Section III - Terminate       Image: Section III - Terminate         22. Signature       23. AR Number       2       0       7       7       7  |   |   |
| A. Citation       B. Order       C. Safeguard       Notice       Order       Number       Image: Section III - Termination Action         15. Area or Equipment       John Jones is withdrawn from the mine       Image: Section III - Termination Action       Image: Section III - Termination Action       Image: Section III - Termination Action         16. Terminated       A. Date       Mo       Da       Yr       B. Time (24       Image: Hr. Clock)         17. Action to Terminate       Image: Section III Termination Action       Image: Section III Terminated       Image: Section III Terminated       Image: Section III Terminated         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section III Termination III       Image: Section III Termination III       Image: Section III Terminated System Data         19. Type of Inspection       Image: Section III Termination III         20. Z. Signature       Image: Section III Termination III       Image: Section I   | 1 0 4 - g - 1 , Citat   | ion Order X Safeguard Written Notice                                |
| Number         Number         Number         I5. Area or Equipment         John Jones is withdrawn from the mine         I6. Termination Due       A. Date       Mo       Da       Yr       B. Time (24         I6. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)       Hr. Clock)         Section III Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Hr. Clock)         I8. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Hr. Clock)         Section IV Automated System Data       III       III       20       III       IIII       IIII       IIIII       IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII   |   | E. Citation/ F. Dated Mo Da Yr                                      |
| 15. Area or Equipment<br>John Jones is withdrawn from the mine         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24<br>Hr. Clock)         Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr         B. Time (24 Hr Clock)       Image: Clock description of the section III Terminate       Image: Clock description of the section III Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         19. Type of Inspection       Image: Clock description of the section III Termination III Termination III Terminate       Image: Clock description of the section III Terminate         22. Signature       Image: Clock description of the section III Terminate       Image: Clock description of the section III Termination III Termination III Termination III Terminate         22. Signature       Image: Clock description of the section of the section of the section III Termination IIII Termination IIII Termination III Terminati   | A. Citation B. Order C. Safeguard Notice  |   |
| John Jones is withdrawn from the mine         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24         Hr. Clock)       Section III Termination Action         17. Action to Terminate       Image: Section to Terminate         18. Terminated       A. Date       Mo       Da       Yr         B. Time (24 Hr Clock)       Image: Section IV Automated System Data       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       23. AR Number       Image: Section IV Signature       Image: Section IV Signature         James Lee       Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature         Image: Section IV Automated System Data       Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature         Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature         Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature       Image: Section IV Signature         Image: Se   | 15 Area or Equipment  | Number  |
| 16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24         Hr. Clock)       Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr         B. Time (24 Hr Clock)         18. Terminated       A. Date       Mo       Da       Yr         B. Time (24 Hr Clock)       Image: Section IV Automated System Data       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       23. AR Number       2       0       7       7         James Lee       20       7       7       7  |   |   |
| A. Date       B. Time (24         Hr. Clock)       B. Time (24         Hr. Clock)       Image: Clock description of the state descripti   |   |   |
| A. Date       B. Time (24         Hr. Clock)       B. Time (24         Hr. Clock)       Image: Clock description of the state descripti   | 16 Termination Due Mo De Vr   | 1 1   |
| 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       20. Event Number       0       8       8       8       3       1       21. Primary or Mill         22. Signature       23. AR Number       2       0       7       7       7   |   |   |
| 17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       Image: Section IV Automated System Data       Image: Section IV Automated System Data         23. AR Number       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       Image: Section IV Automated System Data       Image: Section IV Automated System Data         James Lee       Image: Section IV Automated System Data       Image: Section IV Automated System Data   | Hr. Clock)  |   |
| 18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         Section IV Automated System Data         19. Type of Inspection       20. Event Number       0       8       8       3       1       21. Primary or Mill         22. Signature       23. AR Number       2       0       7       7       7  |   |   |
| A. Date       B. Time (24 Hr Clock)       Date         Section IV Automated System Data         19. Type of Inspection<br>(activity code)       20. Event Number       20. Event Number         22. Signature       23. AR Number       20. 0 7 7 7         James Lee       20. 7 7 7   | 17. Action to Terminate   |   |
| A. Date       B. Time (24 Hr Clock)       Date         Section IV Automated System Data         19. Type of Inspection<br>(activity code)       20. Event Number       20. Event Number         22. Signature       23. AR Number       20. 0 7 7 7         James Lee       20. 7 7 7   |   |   |
| Section IV Automated System Data         19. Type of Inspection<br>(activity code)       20. Event Number       0       8       8       3       1       21. Primary or Mill         22. Signature       23. AR Number       2       0       7       7       7         James Lee       2       0       7       7       7   |   |   |
| 19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       0       8       8       8       3       1       21. Primary or Mill         22. Signature       23. AR Number       2       0       7       7       7         James Lee       2       0       7       7       7  | A. Date B. Time (24 Hr Clock)   |   |
| (activity code)       E       0       1       0       8       8       3       1         22. Signature       23. AR Number       2       0       7       7         James Lee       2       0       7       7       7   |   |   |
| 22. Signature     23. AR Number     2     0     7     7       James Lee     2     0     7     7     7   |   | 21. Primary or Mill   |
| James Lee 2 0 7 7 7   |   |   |
|   | -   |   |
|   | James Lee<br>MSHA Form 7000-3 Mar 85 (Revised)                                  |   |

104(g)(1) ORDER - PART 48 UNTRAINED MINER

Mine Safety and Health Administration

| Section 1 Violation Data  |           |
|---|-----------|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8         0         3. Citation/Order           1. Date         0         7         0         3         0         8         0         0         8         0         0         3. Citation/Order         4         4 | 1 0 1 8 0 |
| 4. Served To 5. Operator  | 1 0 1 0 0 |
| TIMOTHY DAWSON, PRESIDENT ABCD MINING COMPANY, INC.   |           |
| 6. Mine 7. Mine ID 7. Mine ID   |           |
| ABCD MINE 7 3 - 0 1 2 3 5 - (contractor   | )         |
| 8. Condition or Practice 8a. Written Notice (10   | 3g)       |
|   |           |
| Fifty-six miners working in the mine and mill have not received annual refresher training within the last twelve months. Refresher  |           |
| training was last given to these miners on February 10, 2007. The mine operator was aware of the training requirements. The safety director said "the production schedule has been too tight to work in the training." The operator is hereby ordered to withdraw the 56                                      |           |
| miners from the mine or mill until they have received the required training. The Federal Mine Safety and Health Act of 1977 declares  |           |
| that an untrained miner is a hazard to himself and to others.   |           |
|   |           |
|   |           |
| See Continuation Form (MSHA Form 7000-3a  |           |
| 9. Violation   A. Health  | <u> </u>  |
| Safety B. Section C. Part/Section of  |           |
| Other         of Act         -         Title 30 CFR         4         8         8   |           |
| Section II Inspector's Evaluation   |           |
| 10. Gravity:  | . —       |
|   | urred     |
| B. Injury or Illness could rea-   |           |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling  | Fatal     |
| C. Significant and Substantial (See Reverse): Yes No X D. Number of Persons Affected  | 0 5 6     |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High         X       E. Reckless Disrega   | rd        |
| 12. Type of Action       1       0       4       -       g       -       13. Type of Issuance (check one)         Citation       Order       X       Safeguard       Writtee  | en Notice |
|   |           |
| 14. Initial Action D. Written E. Citation/ F. Dated M.  | lo Da Yr  |
| A. Citation B. Order C. Safeguard Notice Order Number   |           |
| 15. Area or Equipment   |           |
| Ben Hopper, Lois Smith, Tom Jones, Ezra D. Light; Billy Kidd; Mina Byrd; Jack Hammer; Justin Hustin; Manny Keys; et. al.  |           |
| 16. Termination Due Mo Da Yr  |           |
| A. Date A. Date B. Time (24<br>Hr. Clock)   |           |
| Section III Termination Action  |           |
| 17. Action to Terminate   |           |
|   |           |
| 18. Terminated Mo Da Yr   |           |
| A. Date B. Time (24 Hr Clock)   |           |
| Section IV Automated System Data  |           |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill   |           |
| (activity code) E 0 1 0 9 7 7 5 5 3   |           |
| 22. Signature 23. AR Number   |           |
| JOHN REDWOOD  | 0 3 3 3 3 |
| MSHA Form 7000-3 Mar 85 (Revised)   |           |

104(g)(1) ORDER - PART 48 MULTIPLE MINERS AND A SINGLE VIOLATION

Mine Safety and Health Administration

| Section 1 Violation Data   |   |
|--|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order   |
| 0 7 0 3 0 8  |   |
| 4. Served To   | 5. Operator   |
| JEFF CRIBS, PRESIDENT  | XYZ MINING COMPANY, INC.                                      |
| 6. Mine  | 7. Mine ID  |
| XYZ MINE   | 7 3 - 0 1 2 3 6 - (contractor)                                |
| 8. Condition or Practice   | 8a. Written Notice (103g)                                     |
|  | × 0,  |
| Jim Jones, an underground driller working in the mine, had not received  |   |
| assuming work duties on June 16, 2008. (48.8) Mr. Jones had started the  |   |
| indicated that he had not received any training. Jim Jones had also not  |   |
| Mr. Jones' last MSHA training was received on 1/13/08. Mr. Jones had<br>mine on January 8, 2008. The mine operator was aware of the training |   |
| has been too tight to work in the training." The Federal Mine Safety an  |   |
| himself and others.  | a realth Act of 1777 deciates an untrained ninier a nazard to |
| NOTE: The second standard is evaluated for "S&S" on a mine citation  | order continuation form.                                      |
|  | See Continuation Form (MSHA Form 7000-3a) X                   |
| 9. Violation A. Health   |   |
| Safety B. Section  | C. Part/Section of  |
| Other of Act -   | Title 30 CFR         4         8         7                    |
| Section II Inspector's Evaluation  |   |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely  | Reasonably Likely X Highly Likely Occurred                    |
|  |   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Los   | st Workdays or Restricted Duty Permanently Disabling X Fatal  |
|  | t Workdays or Restricted Duty Permanently Disabling X Fatal   |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 1                           |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate  | e D. High X E. Reckless Disregard                             |
| 12. Type of Action   | 3. Type of Issuance (check one)                               |
| 1 0 4 - g - 1 ,  | Citation Order X Safeguard Written Notice                     |
| 14. Initial Action D. Wri  |   |
| A. Citation B. Order C. Safeguard Noti   |   |
| 15 Area on Environment   | Number Number   |
| 15. Area or Equipment<br>JIM JONES (PAYROLL NO. 31234567)  |   |
| JIM JONES (PATROLL NO. 51254507)   |   |
| Id. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24)  |   |
| Hr. Clock)   |   |
| Section III Termination Action 17. Action to Terminate   |   |
| 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 20. Event Number  | 21. Primary or Mill   |
|  | 5 5 4   |
| 22. Signature  | 23. AR Number   |
| C  |   |
| JOHN SMITHE<br>MSHA Form 7000-3 Mar 85 (Revised)   |   |
| NISTATUTII /000-3 IVIAL OJ (NEVISCA)   |   |

104(g)(1) ORDER - PART 48 SINGLE MINER AND MULTIPLE VIOLATIONS Mine Citation/Order Continuation

# U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subsequent Action/Continuation Data |                              |         |  |                             |                       |
|---|------------------------------|---------|--|-----------------------------|-----------------------|
| 1. Subsequent Action 1a. Continuation         | 2. Dated<br>(Original Issue) |         | $\begin{array}{c c} \text{Da} & \text{Yr} \\ \text{D} & 3 & 0 & 8 \end{array}$ | 3. Citation/Order<br>Number | 4 4 1 0 1 8 1 -       |
| 4. Served To                                  |                              | 5.      | Operator   |                             |                       |
| JEFF CRIBS, PRESIDENT                         |                              |         |  | ING COMPANY, INC.           |                       |
| 6. Mine                                       |                              | 7.      | Mine ID  |                             |                       |
| XYZ Mine                                      |                              |         |  | 7 3 - 0 1 2 3 6 -           | (contractor)          |
| Section II Justification for Action           |                              |         |  |                             | · ·                   |
| Continuation of Section II, Inspector's Eval  | uation, to evaluate 30 Cl    | FR 48.8 |  |                             |                       |
| ITEM 10A - Reasonably Likely                  |                              |         |  |                             |                       |
| ITEM 10B - Lost Workdays                      |                              |         |  |                             |                       |
| ITEM 10C - Significant and Substantial - Y    | /es                          |         |  |                             |                       |
| ITEM 10D - Number of Persons Affected -       | 001                          |         |  |                             |                       |
| ITEM 11 - Negligence - High                   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             |                       |
|   |                              |         |  |                             | See Continuation Form |
| Section Ill Subsequent Action Taken           |                              |         |  |                             |                       |
| 8. Extended To A. Date Mo Da                  | Yr<br>B. Time (24 Hr. C      | lock)   |  | C. Vacated D. Terr          | ninated E. Modified   |
| Section IV Inspection Data                    |                              |         | . 1  |                             |                       |
|   | ent Number 0 9               | 7 7 5   | 5 5 4  |                             |                       |
| 11. Signature                                 | AR N                         | lumber  | 12. Date   | Mo Da Yr 13. Time (24       | Hr. Clock)            |
| JOHN SMYTHED                                  | 0 3                          | 3 3 4   | 4  | 0 7 0 3 0 8                 | 1 0 0 0               |

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

### 104(g)(1) ORDER - PART 48 CONTINUATION SHEET SINGLE MINER AND MULTIPLE VIOLATIONS

Mine Safety and Health Administration

| Section 1 Violation Data  |  |   |
|---|--|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)           0         8         2         0         8 | 0 8 0 0  | 3. Citation/Order         8         8         3         4         5         6 |
| 4. Served To  | 5. Operator  |   |
| KEN SWIFT, QUARRY FOREMAN   | NORTHEAST AGGREGAT                                     | ES  |
| 6. Mine   | 7. Mine ID   |   |
| NORTHEAST   | 4 7 - 9 9  | 1 2 3 - (contractor)  |
| 8. Condition or Practice  |  | 8a. Written Notice (103g)   |
| The training plan did not include the minimum information   | specified in 20 CEP Dart 46 2(h)(1) through 4          | 52(h)(5) nor has the plan   |
| been submitted to MSHA for approval.  | r specified in 50 CFK Part 40.5(0)(1) through 40       | 5.5(0)(5), not has the plan   |
| The following items contribute to the ineffectiveness of the  | nlan.  |   |
| There was not a general description of the teaching n   |  |   |
| No approximate time range was given for the subject   |  |   |
| No evaluation procedures were included to determin  |  |   |
| No course material was provided for training new mi   | iners in recognizing and avoiding electrical and       | other hazards at the mine.  |
|   |  |   |
|   |  |   |
|   | See Contin   | uation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health<br>Safety B. Section   | C. Part/Section of                                     |   |
| Other of Act  | Title 30 CFR   | 4 6 . 3 a   |
| Section II Inspector's Evaluation   |  |   |
| 10. Gravity:  |  |   |
|   | Inlikely X Reasonably Likely                           | Highly Likely Occurred  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays  | Lost Workdays or Restricted Duty                       | X Permanently Disabling Fatal   |
|   |  |   |
| C. Significant and Substantial (See Reverse): Yes   | No X   | D. Number of Persons Affected 0 1 2   |
| 11. Negligence (check one)       A. None       B. Low   | C. Moderate X D. High                                  | E. Reckless Disregard   |
| 12. Type of Action 1 0 4 - a , -  | - 13. Type of Issuance (check one)<br>Citation X Order | Safeguard Written Notice  |
| 14. Initial Action  | D. Written E. Citation/                                | F. Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard   | Notice Order   |   |
| 15. Area or Equipment   | Number   |   |
| 15. Area of Equipment   |  |   |
|   |  |   |
| 16. Termination DueMoDaYrA. Date $0$ $8$ $2$ $7$ $0$ $8$ H $0$ $8$ $2$ $7$ $0$ $8$ $8$                                      | ne (24<br>Ir. Clock) 0 8 0 0                           |   |
| Section III Termination Action  |  |   |
| 17. Action to Terminate   |  |   |
|   |  |   |
| 18. Terminated Mo Da Yr   |  |   |
|   | 4 Hr Clock)  |   |
| Section IV Automated System Data  |  |   |
| 19. Type of Inspection   20. Event Number   | 21. Primary or Mill                                    |   |
| (activity code) E 0 1   | 0 9 8 9 3 4 1  |   |
| 22. Signature   |  | 23. AR Number   |
| Jay Lowe  |  | 0 3 3 3 2   |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |   |
|   |  |   |
|   | 104() OTTATION DADTAC                                  |   |

104(a) CITATION - PART 46 INADEQUATE TRAINING PLAN

Mine Safety and Health Administration

| Section 1 Violation Data  |   |                          |                           |             |
|---|---|--------------------------|---------------------------|-------------|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)           0         8         2         1         0         8 | 0 9 0 0   | 3. Citation<br>Number    |                           | 3 4 5 7     |
| 4. Served To  | 5. Operator   | INUIIO                   | 0 0 0                     | , , , , , , |
| KEN SWIFT, QUARRY FOREMAN   | -   | AGGREGATES               |                           |             |
| 6. Mine   | 7. Mine ID  |                          |                           |             |
| NORTHEAST   | 4   | 7 - 9 9 1 2 3 -          | (contractor)              |             |
| 8. Condition or Practice  |   |                          | 8a. Written Notice (103g) |             |
| Miners were not provided a copy of a certified training record upon   | completion of their new miner training  | Q.                       |                           |             |
|   | 1 · · · ·   |                          |                           |             |
|   |   |                          |                           |             |
|   |   |                          |                           |             |
|   |   |                          |                           |             |
|   |   |                          |                           |             |
|   |   |                          |                           |             |
|   |   | See Continuation Form (M | ISHA Form 7000-3a)        |             |
| 9. Violation A. Health  |   | ,<br>,                   |                           |             |
| Safety B. Section   | C. Part/S   |                          |                           |             |
| Other of Act Section II Inspector's Evaluation  | Title   | 30 CFR 4                 | 6.9d1                     |             |
| 10. Gravity:  |   |                          |                           |             |
|   | Unlikely X Reasonably Like  | ely Highly Li            | kely Occurred             |             |
| B. Injury or Illness could rea-   |   |                          |                           |             |
| sonably be expected to be: No Lost Workdays   | X Lost Workdays or Restric  | ted Duty Per             | manently Disabling        | Fatal       |
| C. Significant and Substantial (See Reverse): Yes   | No X  | D. Number                | of Persons Affected       | 0 0 0       |
| 11. Negligence     (check one)       A. None     B. Low   | C. Moderate X   | D. High                  | E. Reckless Disregard     |             |
| 12. Type of Action  | 13. Type of Issuance (c   |                          | 🗂                         |             |
| 1 0 4 - a ,   | Citation X  | Order Sa                 | feguard Written No        | otice       |
| 14. Initial Action  | D. Written E. Cit   |                          | F. Dated Mo               | Da Yr       |
| A. Citation B. Order C. Safeguard   |   | der<br>Imber             |                           |             |
| 15. Area or Equipment   | IN IN   | milloci                  |                           |             |
|   |   |                          |                           |             |
| 16 Transistion Data   |   |                          |                           |             |
| 16. Termination Due         Mo         Da         Yr           A. Date         0         8         2         8         0         8    | Time (24         0         8         0         0           Hr. Clock)         0         8         0         0 |                          |                           |             |
| Section III Termination Action  |   |                          |                           |             |
| 17. Action to Terminate   |   |                          |                           |             |
|   |   |                          |                           |             |
| 18. Terminated Mo Da Yr   |   |                          |                           |             |
| A. Date B. Time (2  | 24 Hr Clock)  |                          |                           |             |
| Section IV Automated System Data  |   |                          |                           |             |
| 19. Type of Inspection   20. Event Number   | 21. Prima   | ry or Mill               |                           |             |
| (activity code) E 0 1   | 0 9 8 9 3 4 1   |                          |                           |             |
| 22. Signature   |   |                          | 23. AR Number             |             |
| Jay Lowe  |   |                          | C                         | 3 3 3 2     |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |                          |                           |             |
|   |   |                          |                           |             |

104(a) CITATION - PART 46 TRAINING CERTIFICATES NOT PROVIDED

Mine Safety and Health Administration

| Section 1 Violation Data  |  |   |
|---|--|---|
| 1. DateMoDaYr2. Time (24 Hr. Clock) $0$ $8$ $2$ $1$ $0$ $8$       | 0 9 3 0  | 3. Citation/Order         8         8         3         4         5         8 |
| 4. Served To  | 5. Operator  |   |
| KEN SWIFT, QUARRY FOREMAN   | NORTHEAST AGGREGATE                                | S   |
| 6. Mine   | 7. Mine ID   |   |
| NORTHEAST   | 4 7 - 9 9  | 1 2 3 - (contractor)  |
| 8. Condition or Practice  | · · · · · · · ·                                    | 8a. Written Notice (103g)   |
|   |  |   |
| The mine operator was not completing or generating the required n | ecords of training which was being completed in se | gments [30 CFR 46.9b(1-4)].   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   | See Continu  | ation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health  |  |   |
| Safety B. Section<br>Other of Act                                 | C. Part/Section of                                 |   |
| Other of Act Section II Inspector's Evaluation                    | Title 30 CFR                                       | 4 6 . 9 b   |
| 10. Gravity:  |  |   |
| A. Injury or Illness (has) (is): No Likelihood U                  | nlikely X Reasonably Likely                        | Highly Likely Occurred  |
| B. Injury or Illness could rea-                                   |  |   |
| sonably be expected to be: No Lost Workdays                       | X Lost Workdays or Restricted Duty                 | Permanently Disabling Fatal   |
| C. Significant and Substantial (See Reverse): Yes                 | No X   | D. Number of Persons Affected 0 0 0   |
| 11. Negligence (check one)  |  |   |
| A. None B. Low  | C. Moderate X D. High                              | E. Reckless Disregard   |
| 12. Type of Action  | 13. Type of Issuance (check one)                   |   |
| 1 0 4 - a ,   | - Citation X Order                                 | Safeguard Written Notice  |
|   |  |   |
| 14. Initial Action  | D. Written E. Citation/                            | F. Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard                                 | Notice Order                                       |   |
| 15. Area or Equipment   |  |   |
|   |  |   |
| 16. Termination Due Mo Da Yr                                      |  |   |
| A. Date IIIB. Tit   | ne (24   |   |
| 0 8 2 8 0 8 H   | r. Clock) 0 8 0 0                                  |   |
| Section III Termination Action                                    |  |   |
| 17. Action to Terminate   |  |   |
|   |  |   |
| 18. Terminated Mo Da Yr   |  |   |
| 18. Terminated Mo Da Yr<br>A. Date     B. Time (24                | Hr Clock)  |   |
|   |  |   |
| Section IV Automated System Data                                  |  |   |
| 19. Type of Inspection20. Event Number                            | 21. Primary or Mill                                |   |
|   | 0 9 8 9 3 4 1                                      |   |
| 22. Signature   |  | 23. AR Number   |
| Jay Lowe  |  | 0 3 3 3 2   |
| MSHA Form 7000-3 Mar 85 (Revised)                                 |  |   |
|   |  |   |

104(a) CITATION - PART 46 INCOMPLETE TRAINING RECORDS

Mine Safety and Health Administration

| Section 1 Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
| 0         8         2         1         0         8         1         0         0         0           4. Served To         5. Operator         5. Operator  | Number         8         8         8         3         4         5         9 |
| 4. Served To<br>KEN SWIFT, QUARRY FOREMAN 5. Operator<br>NORTHEAST AGGREGA  | TES  |
| 6. Mine 7. Mine ID 7. |  |
| NORTHEAST 4 7 - 9 9   | 1 2 3 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
|   |  |
| The mine operator failed to record and certify that each miner had received the required training.  |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| See Conti   | nuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health  |  |
| Safety B. Section C. Part/Section of  |  |
| Other of Act Title 30 CFR   | 4 6 . 9 a  |
| Section II Inspector's Evaluation<br>10. Gravity:   |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely X Reasonably Likely   | Highly Likely Occurred   |
| B. Injury or Illness could rea-   | Domeson on the Dissibility of Fostal   |
| sonably be expected to be: No Lost Workdays X Lost Workdays or Restricted Duty  | Permanently Disabling Fatal  |
| C. Significant and Substantial (See Reverse): Yes No X  | D. Number of Persons Affected 0 0 0  |
| 11. Negligence       (check one)         A. None       B. Low         C. Moderate       X         D. High   | E. Reckless Disregard  |
| 12. Type of Action 13. Type of Issuance (check one)   |  |
| 1 0 4 - a, $ Citation X$ Order  | Safeguard Written Notice   |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr  |
| A. Citation B. Order C. Safeguard Notice Order  |  |
|   |  |
| 15. Area or Equipment   |  |
|   |  |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24  |  |
| 0 8 2 8 0 8 Hr. Clock) 0 8 0 0  |  |
| Section III Termination Action 17. Action to Terminate  |  |
| 17. Action to Terminate   |  |
|   |  |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill   |  |
| (activity code) E 0 1 0 9 8 9 3 4 1   |  |
| 22. Signature   | 23. AR Number  |
| Jay Lowe  | 0 3 3 3 2  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

104(a) CITATION - PART 46 TRAINING RECORDS NOT PROVIDED

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

| Section 1 Violation Data  |                                     |
|---|-------------------------------------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order                   |
|   | Number 4 4 1 0 1 8 9                |
| 4. Served To 5. Operator  |                                     |
| JAMES DOBSON, PRESIDENT QRS MINING COMPANY  |                                     |
| 6. Mine 10 7. Mine 10   |                                     |
| WMC MINE AND MILL         7         3         -         0         1   | 2 3 6 - (contractor)                |
| 8. Condition or Practice  | 8a. Written Notice (103g)           |
|   |                                     |
| Chad Scott (payroll number 98342), truck driver, had not received the MSHA-required 24-hour new miner t   |                                     |
| after beginning work at the mine. Mr. Scott had no previous mining experience, and he was only provided w<br>The mine operator was aware of the Part 46 training requirements. The mine operator must withdraw Chad |                                     |
| until he receives the required training. The Federal Mine Safety and Health Act of 1977 states that an untrai   |                                     |
| to himself and to others.   |                                     |
|   |                                     |
|   |                                     |
|   |                                     |
| See Continu   | uation Form (MSHA Form 7000-3a)     |
| 9. Violation A. Health  |                                     |
| Safety B. Section C. Part/Section of  |                                     |
| Other of Act Title 30 CFR   | 4 6 . 5 a                           |
| Section II Inspector's Evaluation   |                                     |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely         X  | Highly Likely Occurred              |
|   | Highly Likely Occurred              |
| B. Injury or Illness could rea-   |                                     |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty  | Permanently Disabling Fatal X       |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 1 |
| 11. Negligence (check one)  |                                     |
| A. None B. Low C. Moderate D. High  | X E. Reckless Disregard             |
| 12. Type of Action 13. Type of Issuance (check one)   |                                     |
| $\begin{vmatrix} 1 & 0 & 4 \end{vmatrix} - \begin{vmatrix} g & - & 1 \end{vmatrix}$ , $\begin{vmatrix} - & - & - \end{vmatrix}$ Citation Order X  | Safeguard Written Notice            |
| 14. Initial Action D. Written E. Citation/  | F. Dated Mo Da Yr                   |
| A. Citation B. Order C. Safeguard Notice Order  |                                     |
| Number  |                                     |
| 15. Area or Equipment   |                                     |
| Chad Scott (payroll number 98342)   |                                     |
| 16. Termination Due Mo Da Yr  |                                     |
| A. Date B. Time (24   |                                     |
| Section III Termination Action  |                                     |
| 17. Action to Terminate   |                                     |
|   |                                     |
|   |                                     |
| 18. Terminated Mo Da Yr   |                                     |
| A. Date B. Time (24 Hr Clock)   |                                     |
| Section IV Automated System Data  |                                     |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill   |                                     |
| (activity code) E 0 1 0 9 7 7 5 5 5   |                                     |
| 22. Signature   | 23. AR Number                       |
| John Redwood  | 0 3 3 3 3                           |
| MSHA Form 7000-3 Mar 85 (Revised)   |                                     |
|   |                                     |

104(g)(1) ORDER - PART 46 SINGLE MINER AND A SINGLE VIOLATION

| Section 1 Violation Data   |   |
|--|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         3. Citation/Order         3.   |   |
| 0 8 2 0 0 8 0 8 0 0 Number 4 4 1 0 0 8   | 9 |
| 4. Served To 5. Operator   |   |
| JAMES DOBSON, PRESIDENT QRS MINING COMPANY   |   |
| 6. Mine ORS MINE 7. Mine ID 7. 3 - 0 1 2 3 6 - (contractor)  |   |
| QRS MINE         7         3         -         0         1         2         3         6         -         I         (contractor)           8. Condition or Practice         8a. Written Notice (103g)         6         7 | _ |
| 8. Written Notice (105g)   | _ |
| Twenty-two miners working at the mine have not received annual refresher training within the last twelve months. Refresher   |   |
| training was last provided to these miners on April 11, 2007. The mine operator was aware of the training requirements.  | _ |
| The mine operator must withdraw the 22 miners from the mine until they have received the required training. The  |   |
| Federal Mine Safety and Health Act of 1977 states that an untrained miner is a hazard to himself and to others.  |   |
|  |   |
|  | - |
|  |   |
| See Continuation Form (MSHA Form 7000-3a)  | _ |
| 9. Violation   A. Health   | _ |
| Safety B. Section C. Part/Section of   |   |
| Other         of Act         Title 30 CFR         4         6         8         a  |   |
| Section II Inspector's Evaluation  |   |
| 10. Gravity:         A. Injury or Illness (has) (is):       No Likelihood         Unlikely X       Reasonably Likely         Highly Likely       Occurred  |   |
|  |   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling Fatal  |   |
|  | _ |
| C. Significant and Substantial (See Reverse): Yes No X D. Number of Persons Affected 0 2   | 2 |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High         X       E. Reckless Disregard  |   |
| 12. Type of Action       1       0       4       -       g       -       13. Type of Issuance (check one)         Citation       Order       X       Safeguard       Written Notice  |   |
|  |   |
| 14. Initial Action     D. Written     E. Citation/     F. Dated     Mo     Da     Yn       A. Citation     B. Order     C. Safeguard     Notice     Order     I     I     I     I  | r |
| A. Citation B. Order C. Safeguard Notice Order Number  |   |
| 15. Area or Equipment  |   |
| Joseph Johns, Harry Tee, Mike Mott, Mark Hank, Sam Wright, Harold Moody, et. al.   |   |
|  | _ |
| 16. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24<br>Hr. Clock)     I   |   |
| Section III Termination Action   |   |
| 17. Action to Terminate  |   |
|  |   |
| 18. Terminated Mo Da Yr  |   |
| 18. Terminated       Mo       Da       Yr         A. Date       I       I       B. Time (24 Hr Clock)  |   |
| Section IV Automated System Data   |   |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill  |   |
| (activity code) E 0 1 0 9 7 7 5 5 5  |   |
| 22. Signature 23. AR Number  |   |
| John Redwood 0 3 3 3   | 3 |
| MSHA Form 7000-3 Mar 85 (Revised)  |   |

104(g)(1) ORDER - PART 46 MULTIPLE MINERS AND A SINGLE VIOLATION U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Violation Data  |           |
|---|-----------|
| 1. Date     Mo     Da     Yr     2. Time (24 Hr. Clock)     3. Citation/Order   | $\square$ |
| 0 8 2 0 0 8 0 9 3 0 Number 4 4 1 0 1  | 90        |
| 4. Served To 5. Operator  | <u> </u>  |
| JAMES DOBSON, PRESIDENT QRS MINING COMPANY  |           |
| 6. Mine 7. Mine ID 7. |           |
| QRS MINE         7         3         -         0         1         2         3         6         -         (contractor)   |           |
| 8. Condition or Practice 8a. Written Notice (103g)  |           |
| Bill Porter (payroll number 98340), haul truck driver, had not received the MSHA required task training on the haul truck he was operating prior to assuming his duties   |           |
| on July 6, 2008. [30 CFR Part 46.7a] Mr. Porter indicated that he had not operated any haulage trucks prior to operating this one.  |           |
|   |           |
| Bill Porter last received annual refresher training on February 14, 2007. This is not within MSHA's requirements for annual refresher training. [30 CFR 46.8]   |           |
| The mine operator was aware of the Part 46 training requirements. The Federal Mine Safety and Health Act of 1977 states that an   |           |
| untrained miner is a hazard to himself and to others.   |           |
|   |           |
| Note: The second standard is evaluated for S&S on a mine citation/order continuation form.<br>See Continuation Form (MSHA Form 7000-3a)   |           |
|   | X         |
| 9. Violation A. Health Safety B. Section C. Part/Section of   |           |
| Other of Act Title 30 CFR 4 6 . 7 a   |           |
| Section II Inspector's Evaluation   |           |
| 10. Gravity:  | -         |
| A. Injury or Illness (has) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred  | 1         |
| B. Injury or Illness could rea-   | 37        |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty Permanently Disabling Fatal  | Х         |
| C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0  | 0 1       |
| 11. Negligence     (check one)       A. None     B. Low       C. Moderate     D. High       X     E. Reckless Disregard   | 1         |
|   |           |
| 12. Type of Action       1       0       4       -       g       -       13. Type of Issuance (check one)         Citation       Order       X       Safeguard       Written Notice   |           |
| $1 0 4 - g - 1, \qquad - Citation \qquad Order \qquad X \qquad Safeguard \qquad Written Notice$   |           |
| 14. Initial Action D. Written E. Citation/ F. Dated Mo Da   | Yr        |
| A. Citation B. Order C. Safeguard Notice Order  |           |
| 15. Area or Equipment   |           |
| Bill Porter (payroll number 98340)  |           |
|   |           |
| Id. Termination Due     Mo     Da     Yr       A. Date     I     I     B. Time (24  |           |
| Hr. Clock)  |           |
| Section III Termination Action  |           |
| 17. Action to Terminate   |           |
|   |           |
| 18. Terminated Mo Da Yr   |           |
| A. Date B. Time (24 Hr Clock)   |           |
| Section IV Automated System Data  |           |
| 19. Type of Inspection   20. Event Number   21. Primary or Mill   |           |
| (activity code)         E         0         1         0         9         7         7         5         5   |           |
| 22. Signature 23. AR Number   |           |
| John Redwood 0 3 3  | 3 3       |
| MSHA Form 7000-3 Mar 85 (Revised)   |           |

104(g)(1) ORDER - PART 46 SINGLE MINER AND MULTIPLE VIOLATIONS Mine Citation/Order Continuation

### U.S. Department of Labor

Mine Safety and Health Administration

| Section 1 Subsequent Action/Continuatio   | n Data                 |                |               |                         |             |
|---|------------------------|----------------|---------------|-------------------------|-------------|
| 1. Subsequent Action 1a. Continuation     |                        | Mo Da Yr       |               |                         |             |
| X   | (Original Issue)       | 0 8 2 0 0      | 8 Number      | 4 4 1 0                 | 0 8 9 -     |
| 4. Served To                              |                        | 5. Operato     | r             |                         |             |
| JAMES DOBSON, PRESIDENT                   |                        | QRS M          | IINING        |                         |             |
| 6. Mine                                   |                        | 7. Mine II     |               |                         |             |
| QRS Mine                                  |                        |                | 7 3 - 0 1 2 3 | 6 - (contrac            | tor)        |
| Section II Justification for Action       |                        |                |               |                         |             |
| Continuation of Section II, Inspector's E | valuation, to evaluate | 30 CFR 46.8a   |               |                         |             |
| ITEM 10A - Unlikely                       |                        |                |               |                         |             |
| ITEM 10B - Lost Workdays                  |                        |                |               |                         |             |
| ITEM 10C - Significant and Substantial    |                        |                |               |                         |             |
| ITEM 10D - Number of Persons Affecte      | ed - 001               |                |               |                         |             |
| ITEM 11 - Negligence - High               |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               |                         |             |
|   |                        |                |               | See Continua            | tion Form   |
| Section III Subsequent Action Taken       |                        |                | · · ·         |                         |             |
| 8. Extended To A. Date Da                 | Yr<br>B. Time (24 H    | r. Clock)      | C. Vacated    | D. Terminated           | E. Modified |
| Section IV Inspection Data                |                        |                |               |                         |             |
| 9. Type of Inspection 10. E               | vent Number            |                |               |                         |             |
| E 0 1                                     | 09                     | 7 7 5 5 5      |               |                         |             |
| 11. Signature                             | AR                     | Number 12. Dat | e Mo Da Yr    | 13. Time (24 Hr. Clock) |             |
| JOHN REDWOOD                              | 0 3                    | 3 3 3          | 0 8 2 0 0 8   |                         | 0 9 3 0     |

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

# 104(g)(1) ORDER - PART 46 CONTINUATION SHEET SINGLE MINER AND MULTIPLE VIOLATIONS

# Appendix C Coal Health Violations

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### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V                     | iolation | Data     |       |                        |        |     |                              |             |     |    |    |    |     |     |    |      |      |      |      |         |        |       |     |    |     |      |   |   |
|---------------------------------|----------|----------|-------|------------------------|--------|-----|------------------------------|-------------|-----|----|----|----|-----|-----|----|------|------|------|------|---------|--------|-------|-----|----|-----|------|---|---|
| 1. Date                         | Мо       | Da       | Yr    | 2. Time (24 Hr. Clock) |        |     |                              |             |     |    |    |    |     |     | 3. | Cit  | atio | on/C | Orde | r       |        |       |     |    |     |      |   |   |
|                                 | 0 7      | 1 5      | 0 8   |                        | 1      | 0   | 3                            | )           |     |    |    |    |     |     |    | Νι   | ımb  | er   |      |         |        | 1     | 2   | 3  | 4   | 5    | 7 | 1 |
| 4. Served To                    |          |          |       |                        |        |     |                              | 5. Operator |     |    |    |    |     |     |    |      |      |      |      |         |        |       |     |    |     |      |   |   |
| Alice McGregor, Safety Director |          |          |       |                        |        |     | Beautiful Vista Coal Company |             |     |    |    |    |     |     |    |      |      |      |      |         |        |       |     |    |     |      |   |   |
| 6. Mine                         |          |          |       |                        |        |     |                              | 7. Mine ID  |     |    |    |    |     |     |    |      |      |      |      |         |        |       |     |    |     |      |   |   |
| No. 1                           |          |          |       |                        |        |     |                              |             | 1   | 5  | -  | 1  | 3   | 5   | 2  | 6    | -    |      |      | (       | (conti | racte | or) |    |     |      |   |   |
| 8. Condition                    | or Prac  | tice     |       |                        |        |     |                              |             |     |    |    |    |     |     |    |      |      | 8a   | . Wr | itten l | Notic  | e (*  | 03  | g) |     |      |   |   |
| The dust of                     | llooti   | 010 0110 | tom r | marridad on the Income | 11 Dan | 4 1 | ich                          | 11 dwill (C | /NI | ID | 10 | 12 | -6) | *** |    | h at | off  | 0.01 | in   | in a    | an tw  | -11:- | n   | +h | - d | 1101 |   |   |

The dust collection system provided on the Ingersoll Rand highwall drill (S/N IR-124356) was not effective in controlling the dust produced during the drilling process. Visible dust was observed being emitted from beneath the drill table and a visible dust cloud was observed passing over the blaster, hole loader nearby, and blast foreman. An examination of the collection system revealed that the skirting material provided on the drill table was torn in several places and the bushing material between the drill steel and drill table needed replacement. This highwall drill was observed drilling holes along the #6 highwall bench. The Note: The highwall drill is, typically, only in operation on the day shift.

| See Contir   | nuation Form (MSHA Form 7000-3a)    |
|--|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section C. Part/Section of<br>Other of Act - Title 30 CFR  | 7 2 . 6 2 0                         |
| Section II Inspector's Evaluation  |                                     |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         X         Reasonably Likely                                       | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty  | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes No X   | D. Number of Persons Affected 0 0 3 |
| 11. Negligence (check one)       A. None       B. Low       C. Moderate       X   D. High  | E. Reckless Disregard               |
| 12. Type of Action     1     0     4     -     a     -     -     13. Type of Issuance (check one) Citation   | Order 0 Safeguard                   |
| 14. Initial Action       D. Written       E. Citation/         A. Citation       B. Order       C. Safeguard       Notice         Witten       Number       Order      | F. Dated Mo Da Yr                   |
| 15. Area or Equipment  |                                     |
| 16. Termination Due         Mo         Da         Yr         B. Time (24         1         3         0         0   |                                     |
| Section III Termination Action   |                                     |
| 17. Action to Terminate  |                                     |
| The drill was removed from service and the skirting material replaced. The drill steel bushin  | ng was also replaced                |
| 18. Terminated         Mo         Da         Yr         B. Time (24 Hr Clock)         1         4         0         1  |                                     |
| Section IV Automated System Data   |                                     |
| 19. Type of Inspection<br>(activity code)         20. Event Number         21. Primary or Mill           7         6         5         4         3         2         2 |                                     |
| 22. Signature  | 23. AR Number                       |
| MSHA Form 7000-3 Mar 85 (Revised)  | 2 3 1 9 0                           |

### 104(a) CITATION - 30 CFR 72.620

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V                     | iolation | Data   |         |                          |     |    |      |          |                            |       |       |     |      |     |     |      |      |      |      |       |       |       |       |      |     |     |      |      |     |    |   |
|---------------------------------|----------|--------|---------|--------------------------|-----|----|------|----------|----------------------------|-------|-------|-----|------|-----|-----|------|------|------|------|-------|-------|-------|-------|------|-----|-----|------|------|-----|----|---|
| 1. Date                         | Мо       | Da     | Yr      | 2. Time (24 Hr. Clock)   |     |    |      |          |                            |       |       |     |      |     |     | 3. ( | Cita | atic | n/C  | Orde  | er    |       |       |      |     |     |      |      |     | ĺ  |   |
|                                 | 09       | 1 5    | 0 8     |                          | 1   | 0  | 3    | 0        |                            |       |       |     |      |     |     |      | Nu   | mb   | er   |       |       |       |       | 1    | 2   | 3   | 4    | 5    | 7   | 1  |   |
| 4. Served To                    |          |        |         |                          |     |    |      |          | <ol><li>Operator</li></ol> |       |       |     |      |     |     |      |      |      |      |       |       |       |       |      |     |     |      |      |     |    |   |
| Alice McGregor, Safety Director |          |        |         |                          |     |    |      | Beautifu | ١V                         | ista  | Сс    | bal | Co   | mp  | bar | ١y   |      |      |      |       |       |       |       |      |     |     |      |      |     |    |   |
| 6. Mine                         |          |        |         |                          |     |    |      |          | 7. Mine ID                 |       |       |     |      |     |     |      |      |      |      |       |       |       |       |      |     |     |      |      |     |    |   |
| No. 1                           |          |        |         |                          |     |    |      |          |                            | 1     | 5     | -   | 1    | 3   | 5   | 2    | 6    | -    |      |       |       | (co   | ontra | acto | or) |     |      |      |     |    |   |
| 8. Condition                    | or Prac  | tice   |         |                          |     |    |      |          |                            |       |       |     |      |     |     |      |      |      | 8a   | . W   | ritte | n No  | tice  | (1   | 03  | g)  |      |      |     |    | 2 |
| The results                     | of fiv   | e vali | d sam   | ples collected by MSHA   | Ins | pe | cto  | :(s)     | ) from Augu                | ıst ( | 6, 20 | 008 | , tł | nro | ug  | h A  | ۱u   | gu   | st 2 | 27, 1 | 200   | 8, in | ndia  | cat  | e t | ha  | t th | e ŧ  | ŧ3  |    | Ì |
| Ingersol Ra                     | and Hi   | ighwa  | all Dri | ll operator (Designated) | Wor | kΙ | Posi | itic     | on 002-0-384               | ) is  | ext   | oos | eđ   | to  | an  | av   | era  | age  | e re | espi  | irał  | ole d | lus   | t co | on  | cer | ntra | itic | n d | of |   |

Ingersol Rand Highwall Drill operator (Designated Work Position 002-0-384) is exposed to an average respirable dust concentration of 2.7 mg/m3 which exceeds the allowable exposure of 2.0 mg/m3. These samples were collected on the #3 Ingersol Rand Highwall Drill (S/N 04-12345) which is normally operated on both the day and afternoon shifts. The mine operator must take immediate action to lower the exposure in the environment of the #3 Ingersol Rand Highwall Drill operator to 2.0 mg/m3 or less and then sample each production shift until five valid sample have been collected and submitted to the Pittsburgh Dust Processing Laboratory. A copy of the sample results is attached to this citation.

|   | See Contir                               | nuation Form (MSHA Form 7000-3a)    |
|---|--|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act -   | C. Part/Section of<br>Title 30 CFR       | 7 1 . 1 0 0                         |
| Section II Inspector's Evaluation   |  |                                     |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely X                      | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost W                                     | Vorkdays or Restricted Duty              | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes X No  |  | D. Number of Persons Affected 0 0 2 |
| 11. Negligence (check one)       A. None       B. Low       C. Moderate   | X D. High                                | E. Reckless Disregard               |
| 12. Type of Action 1 0 4 - a - ,  | Type of Issuance (check one)<br>Citation | Order 0 Safeguard                   |
| 14. Initial Action       D. Written         A. Citation       B. Order       C. Safeguard         Notice                  | E. Citation/<br>Order<br>Number          | F. Dated Mo Da Yr                   |
| 15. Area or Equipment   |  |                                     |
|   | 1 3 0 0                                  |                                     |
| Section III Termination Action  | · · · ·                                  |                                     |
| 17. Action to Terminate   |  |                                     |
|   | 1 4 0 1                                  |                                     |
| Section IV Automated System Data  |  |                                     |
| 19. Type of Inspection<br>(activity code)         E         0         1         7         6         5         4         3 | 21. Primary or Mill                      |                                     |
| 22. Signature   | -1 -1                                    | 23. AR Number 2 3 1 9 0             |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |                                     |

### 104(a) CITATION - 30 CFR 71.100 for DWP

# U.S. Department of Labor

Mine Safety and Health Administration

| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         3. Citation/Order   | 3 4 5 7 1 |
|---|-----------|
|   | 3 4 5 7 1 |
| 0 7 1 5 0 8 1 0 3 0 Number 1 2 3  | 1 1 1 1   |
| 4. Served To 5. Operator  |           |
| Mike McGregor, Safety Director Black Rock Coal Company  |           |
| 6. Mine 7. Mine ID 7. |           |
| No. 1         1         5         -         1         3         5         2         6         -         (contractor)  |           |
| 8. Condition or Practice 8a. Written Notice (103g)  |           |

The mine operator did not collect the required bimonthly respirable dust samples in the Designated Area 201-0 as identified in Advisory Number 0001 dated July 3, 2008. The bimonthly cycle missed was April - June. Two miners are normally exposed during each production shift - a belt examiner and a belt shoveler. This belt is in operation during both the day and afternoon shifts.

| 9. Violation A. Health X   |
|--|
| Safety         B. Section         C. Part/Section of         Image: Construction of and the section of and the sect |
| Section II Inspector's Evaluation  |
| 10. Gravity:         A. Injury or Illness (has) (is):       No Likelihood         Unlikely       Reasonably Likely         X       Highly Likely         Occurred       Occurred   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty Permanently Disabling X Fatal  |
| C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0 0   |
| 11. Negligence (check one)     A. None     B. Low     C. Moderate     X     D. High     E. Reckless Disregard  |
| 12. Type of Action       1       0       4       -       a       -       -       13. Type of Issuance (check one)         Citation       X       Order       0       Safeguard   |
| 14. Initial Action       D. Written       E. Citation/       F. Dated       Mo       Da       Yr         A. Citation       B. Order       C. Safeguard       Notice       Order       Number       Image: Construction of the second   |
| 15. Area or Equipment  |
| 16. Termination Due A. Date Mo Da Yr B. Time (24 A. Date Date Date Date Date Date Date Date  |
| 0         7         1         5         0         8         Hr. Clock)         1         3         0         0           Section III Termination Action  |
| 17. Action to Terminate  |
| The drill was removed from service and the skirting material replaced. The drill steel bushing was also replaced   |
| 18. Terminated         Mo         Da         Yr         B. Time (24 Hr Clock)         1         4         0         1  |
| Section IV Automated System Data   |
| 19. Type of Inspection         20. Event Number         20. Event Number         21. Primary or Mill           (activity code)         E         0         1         7         6         5         4         3         2         2   |
| 22. Signature 23. AR Number 2 3 1 9  |
| MSHA Form 7000-3 Mar 85 (Revised)  |

### 104(a) CITATION - 30 CFR 70.208(a)

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V  | iolation | Data    |        |                        |        |      |      |     |              |      |     |     |      |      |    |    |    |           |          |         |      |      |     |   |   |   |   |
|--------------|----------|---------|--------|------------------------|--------|------|------|-----|--------------|------|-----|-----|------|------|----|----|----|-----------|----------|---------|------|------|-----|---|---|---|---|
| 1. Date      | Мо       | Da      | Yr     | 2. Time (24 Hr. Clock) |        |      |      |     |              |      |     |     |      |      |    | 3. | Ci | itation/C | Order    |         |      |      |     |   |   |   |   |
|              | 0 7      | 1 1     | 0 8    |                        | 1      | 0    | 3    | 0   |              |      |     |     |      |      |    |    | N  | umber     |          |         | 1    | 2    | 3   | 4 | 5 | 6 | 8 |
| 4. Served To |          |         |        |                        |        |      |      |     | 5. Operator  |      |     |     |      |      |    |    |    |           |          |         |      |      |     |   |   |   | - |
| Mike Mo      | Grego    | or, Sa  | fety D | irector                |        |      |      |     | Black Ro     | ock  | С   | oal | Сс   | m    | ba | ny |    |           |          |         |      |      |     |   |   |   |   |
| 6. Mine      |          |         |        |                        |        |      |      |     | 7. Mine ID   |      |     |     |      |      |    |    |    |           |          |         |      |      |     |   |   |   |   |
| No. 1        |          |         |        |                        |        |      |      |     |              | 1    | 5   | -   | 0    | 3    | 5  | 3  | 6  | 5 -       |          | (con    | trac | tor) |     |   |   |   |   |
| 8. Condition | or Prac  | tice    |        |                        |        |      |      |     |              |      |     |     |      |      |    |    |    | 8a        | . Writte | en Noti | ce ( | 103  | 3g) |   |   |   |   |
| During the   | on-sh    | ift exa | amina  | tion for MMU 001-0 the | e cert | ifie | ed p | ber | son (section | n fo | rei | nai | 1) f | aile | ed | to | ad | lequate   | ely de   | etermi  | ne f | the  |     |   |   |   |   |

concentrations of carbon monoxide (CO) and nitrogen dioxide ( $NO_2$ ) in the return at a location representing the contribution of all diesel equipment on this section and at the section loading point. The handheld detector the foreman used during this on-shift examination was not equipped with sensors to measure these contaminants and no equivalent means of sampling/evaluation were available at the mine. The handheld detector normally used by the foreman had been returned to the manufacturer for repair two weeks prior to this date. This unit uses 1 EIMCO diesel scoop for clean up and 3 EIMCO diesel ramcars for section haulage in the production process. Eight miners work on this section.

| See   | Continuation Form (MSHA Form 7000-3a) |
|---|---------------------------------------|
| 9. Violation A. Health X B. Section C. Part/Section Title 30 CFR  | of 7 0 . 1 9 0 0 ( a ) ( 1)           |
| Section II Inspector's Evaluation   |                                       |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely  | K Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted D  | Duty X Permanently Disabling Fatal    |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 8   |
| 11. Negligence (check one)       A. None       B. Low       C. Moderate       X   |                                       |
| 12. Type of Action       1       0       4       -       a       -       -       -       13. Type of Issuance (check Citation         X       -       -       -       -       -       Citation       X  | cone)<br>Order 0 Safeguard            |
| 14. Initial Action       D. Written       E. Citation/         A. Citation       B. Order       C. Safeguard       Notice       Order         Number       Number       Notice       Notice       Notice  | F. Dated Mo Da Yr                     |
| 15. Area or Equipment   |                                       |
| 16. Termination Due         A. Date         Mo         Da         Yr         B. Time (24         0         9         0         0           20. final Hills         4. final Hills         4. final Hills         1         2         0         8         Hr. Clock)         0         9         0         0 |                                       |
| Section III Termination Action<br>17. Action to Terminate   |                                       |
|   |                                       |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)   |                                       |
| Section IV Automated System Data  |                                       |
| 19. Type of Inspection<br>(activity code)         20. Event Number         21. Primary or M           7         6         5         4         3         2         1   |                                       |
| 22. Signature   | 23. AR Number 2 3 1 9 0               |
| MSHA Form 7000-3 Mar 85 (Revised)   |                                       |

### 104(a) CITATION - 30 CFR 70.1900(a)(1)

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V  | iolation | Data   |        |                        |   |    |   |             |     |     |     |    |     |     |      |      |      |       |        |          |      |     |     |   |   |   |   |
|--------------|----------|--------|--------|------------------------|---|----|---|-------------|-----|-----|-----|----|-----|-----|------|------|------|-------|--------|----------|------|-----|-----|---|---|---|---|
| 1. Date      | Мо       | Da     | Yr     | 2. Time (24 Hr. Clock) |   |    |   |             |     |     |     |    |     | 3   | 3. ( | Cita | tior | n/Oro | der    |          |      |     |     |   |   |   |   |
|              | 0 7      | 1 1    | 0 8    |                        | 1 | 0  | 3 | D           |     |     |     |    |     |     | I    | Nun  | nbe  | er    |        |          | 1    | 2   | 3   | 4 | 5 | 6 | 7 |
| 4. Served To | 1        |        |        |                        |   |    |   | 5. Operator |     |     |     |    |     |     |      |      |      |       |        |          |      |     |     |   |   |   |   |
| Mike Mo      | Greg     | or, Sa | fety D | Director               |   |    |   | Black R     | ocl | < C | oal | Сс | omp | ban | y    |      |      |       |        |          |      |     |     |   |   |   |   |
| 6. Mine      |          |        |        |                        |   |    |   | 7. Mine ID  |     |     |     |    |     |     |      |      |      |       |        |          |      |     |     |   |   |   |   |
| No. 1        |          |        |        |                        |   |    |   |             | 1   | 5   | -   | 0  | 3   | 5   | 3    | 6    | -    |       |        | (cont    | ract | or) |     |   |   |   |   |
| 8. Condition | or Prac  | tice   |        |                        |   |    |   |             |     |     |     |    |     |     |      |      |      | 8a. \ | Nritte | en Notic | ;е ( | 103 | Bg) |   |   |   |   |
|              |          |        |        |                        |   | 4. |   |             |     |     |     |    |     |     |      |      |      |       |        |          | -    |     |     |   |   |   |   |

During the on-shift examination for MMU 002-0 the certified person (section foreman) failed to adequately determine the concentrations of carbon monoxide (CO) and nitrogen dioxide (NO<sub>2</sub>) in the return at a location representing the contribution of all diesel equipment on this section and at the section loading point. The section foreman failed to take readings at the section loading point as required by 30 CFR 70.1900(a)(2) This unit uses 1 EIMCO diesel scoop for clean up and 3 EIMCO diesel ramcars for section haulage in the production process. There are 5 miners that regularly work or travel in the affected area: unit foreman, scoop operator, and 3 ramcar operators.

|   |                           | See Contir                               | nuation Form (MSHA Form 7000-3a)            |
|---|---------------------------|--|---|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act                 | -                         | C. Part/Section of<br>Title 30 CFR       | 7 0 . 1 9 0 0 ( a )( 2)                     |
| Section II Inspector's Evaluation   |                           |  |   |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood                | Unlikely                  | Reasonably Likely X                      | Highly Likely Occurred                      |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workday | ys 🗌 Lost V               | /orkdays or Restricted Duty              | X Permanently Disabling Fatal               |
| C. Significant and Substantial (See Reverse):                                 | Yes X No                  |  | D. Number of Persons Affected 0 0 5         |
| 11. Negligence (check one)<br>A. None B. Low                                  | C. Moderate               | X D. High                                | E. Reckless Disregard                       |
| 12. Type of Action  |                           | Type of Issuance (check one)<br>Citation | Order 0 Safeguard                           |
| 14. Initial Action<br>A. Citation B. Order C. Safeguard                       | D. Written<br>Notice      | E. Citation/<br>Order<br>Number          | F. Dated Mo Da Yr                           |
| 15. Area or Equipment   |                           |  |   |
| 16. Termination Due A. Date Mo Da Yr<br>A. Date 0 7 1 1 0 8                   | B. Time (24<br>Hr. Clock) | 1 1 0 0                                  |   |
| Section III Termination Action  |                           |  |   |
| 17. Action to Terminate   |                           |  |   |
| The section foreman took readings at the section                              | n loading point an        | d found 16 ppm of carbor                 | n monoxide and 1.0 ppm of nitrogen dioxide. |
| 0 7 1 1 0 8   | ne (24 Hr Clock)          | 1 0 5 2                                  |   |
| Section IV Automated System Data  |                           | 1 1                                      |   |
| 19. Type of Inspection<br>(activity code) E 0 1                               | 76543                     | 21. Primary or Mill                      |   |
| 22. Signature   |                           | + +                                      | 23. AR Number 2 3 1 9 0                     |
| MSHA Form 7000-3 Mar 85 (Revised)   |                           |  |   |

### 104(a) CITATION - 30 CFR 70.1900(a)(2)

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

| 1. Oue       Mo       Da       Y       2. Time (24 Hr. Clock)       9       4       0. ClastoroCoder       1       2       3       4       5       7       0.         4. Serveral       Black Rock Coal Company       Black Rock Coal Company       8. Writen Note (703)       0.       1       5       0       5       3       6       1       0.       4. Writen Note (703)       0.       <   | Section I Vi   | iolation Data       |            |              |                                |        |        |                             |                        |               |
|---|----------------|---------------------|------------|--------------|--------------------------------|--------|--------|-----------------------------|------------------------|---------------|
| 4. Served To'       5. Operator         Mike McCircgor, Safety Director       Black Rock Coal Company         6. Mice       7. Mine ID       1 5 - 0 3 5 3 6       Black Rock Coal Company         6. Mice       7. Mine ID       1 5 - 0 3 5 3 6       Black Rock Coal Company         6. Mice       7. Mine ID       1 5 - 0 3 5 3 6       Black Rock Coal Company         8. Condition or Practice       8. Withen Notice (103a)       During the on-shell examination for MMU 001-0 the certified person (section foreman) failed to decayately determine the concentrations of carbon monoxide (CO) and all director IT his unit uses to EMCO direct Scoop for clean up and 3 EIMCO direct EMCO direct Betweents hould be calibrated were young the revious 30 days and burnt beread black the unit should be calibrated barret between solution and the the calibration technician confirmed this finding. Eight miners work on this section.         9. Violation       A. Heavin       B. Section       C. Part/Section of       T 0       1 9 0 0 (b k/ 2).         9. Violation       A. Heavin       B. Section       -       C. Part/Section of       T 0       1 9 0 0 (b k/ 2).         9. Violation       A. Heavin       B. Section       -       -       C. Part/Section of       T 0       1 9 0 0 (b k/ 2).         9. Violation       A. Heavin       B. Section       -       -       C. Part/Section of       T 0       1 9 0 0 (b k/ 2). <td>1. Date</td> <td>Mo Da Y</td> <td>/r 2.</td> <td>Time (24 Hr.</td> <td>Clock)</td> <td></td> <td></td> <td></td> <td>3. Citation/Order</td> <td></td>   | 1. Date        | Mo Da Y             | /r 2.      | Time (24 Hr. | Clock)                         |        |        |                             | 3. Citation/Order      |               |
| 4. Served To'       5. Operator         Mike McCircgor, Safety Director       Black Rock Coal Company         6. Mice       7. Mine ID       1 5 - 0 3 5 3 6       Black Rock Coal Company         6. Mice       7. Mine ID       1 5 - 0 3 5 3 6       Black Rock Coal Company         6. Mice       7. Mine ID       1 5 - 0 3 5 3 6       Black Rock Coal Company         8. Condition or Practice       8. Withen Notice (103a)       During the on-shell examination for MMU 001-0 the certified person (section foreman) failed to decayately determine the concentrations of carbon monoxide (CO) and all director IT his unit uses to EMCO direct Scoop for clean up and 3 EIMCO direct EMCO direct Betweents hould be calibrated were young the revious 30 days and burnt beread black the unit should be calibrated barret between solution and the the calibration technician confirmed this finding. Eight miners work on this section.         9. Violation       A. Heavin       B. Section       C. Part/Section of       T 0       1 9 0 0 (b k/ 2).         9. Violation       A. Heavin       B. Section       -       C. Part/Section of       T 0       1 9 0 0 (b k/ 2).         9. Violation       A. Heavin       B. Section       -       -       C. Part/Section of       T 0       1 9 0 0 (b k/ 2).         9. Violation       A. Heavin       B. Section       -       -       C. Part/Section of       T 0       1 9 0 0 (b k/ 2). <td></td> <td>0 7 1 1 0</td> <td>8</td> <td></td> <td></td> <td>1 9</td> <td>4 0</td> <td></td> <td>Number</td> <td>1234570</td>  |                | 0 7 1 1 0           | 8          |              |                                | 1 9    | 4 0    |                             | Number                 | 1234570       |
| 6. Mine       7. Mine ID       1       5. Ordination or Practice         3. Condition or Practice       During the on-shift examination for MMU 001-0 the certified person (section foreman) failed to adequately determine the concentrations of carbon monoxide (CO) and nitrogen dioxide (NO2) in the return at a location representing the contribution of all dised equipment on this section and at the section loading point. This unit uses 1 EIMCO dised second carbon was a Solaris multigas detector (S/N 5421). When the detector was check on this inspection date it was found that the instrument had burbe the calibrated during the previous 30 days. Manufacturer's literature inducates the unit should be calibrated every 30 days and bump tested before each shift used. Interviews with the calibration technician confirmed this finding. Eight miners work on this section.         9. Volation       A. Health       See Confinuation Form (MSHA Form 7000-3a)         9. Volation       A. Health       See Confinuation Form (MSHA Form 7000-3a)         9. Volation       A. Health       See Confinuation Form (MSHA Form 7000-3a)         9. Volation       A. Health       See Confinuation Form (MSHA Form 7000-3a)         9. Volation       A. Health       See Confinuation Form (MSHA Form 7000-3a)         9. Volation       A. Health       See Confinuation Form (MSHA Form 7000-3a)         9. Volation       A. Nee IB See Confinuation Form (MSHA Form 7000-3a)       See Confinuation Form (MSHA Form 7000-3a)         9. Volation       A. Nee IB Section of otact       C. Part/Section of Tite Solar Form 7000-10<   | 4. Served To   |                     | 1 1        |              |                                |        |        | 5. Operator                 |                        |               |
| No. 1       1       1       0       3       0       0       Be Written Notice (103g)         During the on-shift examination for MMU 001-0 the certified person (section foreman) failed to adequately determine the concentrations of carbon monoxide (CO) and nitrogen dioxide (NO2) in the return at a location representing the contribution of all disel equipment on this section haulage in the production process. The handheld detector the foreman used during this on-shift examination was a Solaris multipas detector (S/N 5421). When the detector was check on this inspection date it was found in the instrument had not been calibrated during the previous 30 days. Manufacturer's literature indicates the unit should be calibrated every 30 days and turn was a Solaris multipas detector (S/N 5421). When the detector was check on this inspection date it was found in the instrument had not been calibrated during the previous 30 days. Manufacturer's literature indicates the unit should be calibrated every 30 days and turn been expected to be (S/N 5421). When the detector was check on this inspection and at the section.         9. Videton       A Health       B. Section       -       C. Part/Section of T ol. 1 9 0 0 ((b) ((c) b) (  | Mike Mc        | Gregor, Safe        | ty Direc   | ctor         |                                |        |        | Black Rock Coal Comp        | any                    |               |
| B. Condition or Practice       Let the set of th          |                |                     |            |              |                                |        |        |                             |                        |               |
| During the on-shift examination for MMU 001-0 the certificet person (section foreman) failed to adequately determine the concentrations of carbon monoxide (CO) and nitrogen dioxide (NO2) in the return at a location representing the contribution of all direct equipment on this section and at the section adding point. This unit used location representing the contribution of all direct equipment on this section and at the section adding point. This unit used like levels (SOP for Clan up and 3 hINCO direct famcars for section haulage in the production process. The handheld detector the foreman used during the son-shift examination and to the section adding point. This unit used like levels the instrument had not been calibrated during the previous 30 days. Manufacturer's literature indicates the unit should be calibrated every 30 days and bump tested before each shift used. Interviews with the calibration technician confirmed this finding. Eight miners work on this section.         9. Violation       A. Health       K       B. Section       -       C. Part/Section of Tile 30 CFR       T 0 . 1 9 0 0 (/ b )/(2).         9. Violation       A. Health       K       B. Section       -       C. Part/Section of Tile 30 CFR       T 0 . 1 9 0 0 (/ b )/(2).         9. Violation       A. Health       K       B. Section       -       -       C. Part/Section of Tile 30 CFR       T 0 . 1 9 0 0 (/ b )/(2).         9. Violation       M. Interviews with the calibration technician confirmed this finding.       Fight miners work on this section.         10. Gravity:       Network       C. Part/Section of Tile 30 CFR       T 0 . 1 9 0 0 (/ b )/(2).       Se  |                |                     |            |              |                                |        |        | 1 5 - 0 3                   |                        | ,             |
| concentrations of carbon monoxide (CO) and nitrogen dioxide (NO2) in the return at a location representing the contribution of all diesel equipment on this section and at the section loading point. This unit uses 1 EIMCO diesel scoop for clean up and 3 EIMCO diesel rances for section haulage in the production process. The handheld detector the foreman used during this on-shift examination was a Solaris multigas detector (S/N 54231). When the detector was check on this inspection date it was found that the instrument had but been calibrated during the previous 30 days. Manufacturer's literaturer's literature in thickates the unit should be calibrated every 80 days and bump tested before each shift used. Interviews with the calibration technician confirmed this finding. Eight miners work on this section.           9. Violation       A. Health       X       Section       7       0       1       9       0       0       1       1       9       0       0       1       1       9       0       0       1       1       9       0       0       1       1       1       9       0       0       1       1       1       1       9       0       0       1       1       1       9       0       0       1       1       1       1       9       0       0       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1<   |                |                     |            | - () () (T   | 1 001 0 11                     |        | 1      |                             |                        |               |
| diesel equipment on this section and at the section loading point. This unit uses 1 EIMCO diesel rooms of or clean up and 3 EIMCO diesel rooms as chains multigas detector (S/N 5423). When the detector was check on this inspection date it was found that the instrument had not been calibrated during the previous 30 days. Manufacturer's literature indicates the unit should be calibrated every 30 days and bump tested before each shift used. Interviews with the calibration technician confirmed this finding. Eight miners work on this section.         9. Violation       A. Health       X       B. Section       0 <td< td=""><td>0</td><td></td><td></td><td></td><td></td><td></td><td>-</td><td></td><td>1 5</td><td></td></td<>   | 0              |                     |            |              |                                |        | -      |                             | 1 5                    |               |
| diesel ramcars for section haulage in the production process. The handheld detector the foreman used aduring this on-shift examination was a Solaris multigas detector (S/N 5423). When the detector was check on this inspection date it was found that the instrument had not been calibrated during the previous 30 days. Manufacturer's literature indicates the unit should be calibrated every 30 days and bump tested before each shift used. Interviews with the calibration technician confirmed this finding. Eight miners work on this section.         9. violation       A. Health       X       B. Section       - </td <td></td> <td></td> <td></td> <td>. ,</td> <td>0</td> <td></td> <td></td> <td>,</td> <td>- 0</td> <td></td>   |                |                     |            | . ,          | 0                              |        |        | ,                           | - 0                    |               |
| was a Solaris multigas detector (S/N 54231). When the detector was check on this inspection date it was found that the instrument had not been calibrated during the previous 30 days. Manufacturer's literature indicates the unit should be calibrated every 30 days and bump tested before each shift used. Interviews with the calibration technician confirmed this finding. Eight miners work on this section.         See Continuation Form (MSHA Form 7000-3a) <ul> <li>Still before each shift used. Interviews with the calibration technician confirmed this finding. Eight miners work on this section.</li> <li>See Continuation Form (MSHA Form 7000-3a)</li> <li>Violation A. Health</li> <li>Section II - Inspectific Evaluation</li> <li>A Health</li> <li>Section II - Inspectific Evaluation</li> <li>A injury or Illness (has) (is): No Likelihood</li> <li>Unlikely</li> <li>Reasonably Likely</li> <li>Highly Likely</li> <li>Occurred</li> <li>B. injury or Illness could reasonably Likely</li> <li>Section II - Inspectific Alabiantal (see Reverse): Yes</li> <li>No</li> <li>D. Number of Persons Affected Div</li> <li>Permanently Disabling</li> <li>Fatal</li> <li>C. Significant and Substantial (see Reverse): Yes</li> <li>No</li> <li>D. Number of Persons Affected divide and the second seco</li></ul>   |                | -                   |            |              |                                |        |        |                             | -                      | -             |
| not been calibrated arring the previous 30 days. Manufacturer's literature indicates the unit should be calibrated every 30 days and bump tested before each shift used. Interviews with the calibration technician confirmed this finding. Fight miners work on this section.         9. Violation       A. Heath       X       Section       -       C. Part/Section of       7 0 . 1 9 0 0 ( b )/( 2 )         9. Violation       A. Heath       X       Section       -       C. Part/Section of       7 0 . 1 9 0 0 ( b )/( 2 )         10. Gravity:       B. Section       -       C. Part/Section of       7 0 . 1 9 0 0 ( b )/( 2 )         10. Gravity:       No Liskelihood       Unlikely       Reasonably Likely       Highly Likely       Occurred         2. Significant and Substantial (See Reverse):       Yes X       No       D. Number of Persons Atfected       0 0 8         11. Negligence       (check one)       C. Moderate       X       D. High       E. Reckless Disregard         12. Type of Action       1 0 4 - a       -       -       -       13. Type of Issuance (check one)       Creation         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       F. Dated       Mo Da       Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       Hin Clock)       1 0 0 0       Section   |                |                     |            |              |                                |        |        |                             |                        |               |
| See Continuation Form (MSHA Form 7000-3a)         9. Violation       A. Health       X       B. Section       C. Part/Section of<br>Title 30 CFR       T       0 <td< td=""><td></td><td>0</td><td></td><td>• •</td><td>,</td><td></td><td></td><td>-</td><td></td><td></td></td<>  |                | 0                   |            | • •          | ,                              |        |        | -                           |                        |               |
| Section.         Section.         9. Violation       A. Health       X         Safety       B. Section       of Act         of Act       -       Title 30 CFR         7. 0. 1 9 0 0 (( b )( 2))         Section II Inspectors Evaluation         10. Gravity:         A. Injury or Illness (nais) (s): No Likelihood       Unlikely         Reasonably Likely       Highly Likely       Occurred         B. Injury or Illness could reasonably be expected to be:       No Lost Workdays or Restricted Duty       X         Sonight be expected to be:       No Lost Workdays or Restricted Duty       X       Permanently Disabling         11. Negligence (check one)       B. Low       C. Moderate       D. High       E. Recklass Disregard         12. Type of Action       1 0 4 - a - ,       -       -       13. Type of Issuance (check one)       Order       O Safeguard         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       F. Dated       Mo       Da Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1 0 0 0         17. Action to Terminate       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)<  |                |                     |            |              |                                |        |        |                             |                        |               |
| See Continuation Form (MSHA Form 7000-3a)         9. Violation       A. Health         Safety       B. Section         other       of Act         -       Title 30 CFR         7       0       1       9       0  | -              |                     |            |              |                                |        |        |                             | 8.8.8                  |               |
| 9. Violation A. Health X. B. Section of Act C. Part/Section of Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>Section II Inspector's Evaluation of Act Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>10. Gravity:<br>A. Injury or Illness (nas) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred .<br>B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling Fatal .<br>C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0 0 0 8<br>11. Negligence (check one) B. Low C. Moderate X D. High E. Reckless Disregard .<br>12. Type of Action B. Order C. Safeguard D. Vitten X Order Suance (check one) C. Moderate X D. High E. Reckless Disregard .<br>14. Initial Action B. Order C. Safeguard D. Written K. C. Safeguard D. Written K. Cock) 1 0 0 0<br>15. Area or Equipment .<br>16. Termination Due A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate 2.<br>18. Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 2.<br>19. Type of Inspection E. 0 1 20. Event Number T 6 5 4 3 2 1 21. Primary or Mill 2.<br>22. Signature 2. 3 1 9 0  |                |                     |            |              |                                |        |        |                             |                        |               |
| 9. Violation A. Health X. B. Section of Act C. Part/Section of Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>Section II Inspector's Evaluation of Act Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>10. Gravity:<br>A. Injury or Illness (nas) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred .<br>B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling Fatal .<br>C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0 0 0 8<br>11. Negligence (check one) B. Low C. Moderate X D. High E. Reckless Disregard .<br>12. Type of Action B. Order C. Safeguard D. Vitten X Order Suance (check one) C. Moderate X D. High E. Reckless Disregard .<br>14. Initial Action B. Order C. Safeguard D. Written K. C. Safeguard D. Written K. Cock) 1 0 0 0<br>15. Area or Equipment .<br>16. Termination Due A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate 2.<br>18. Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 2.<br>19. Type of Inspection E. 0 1 20. Event Number T 6 5 4 3 2 1 21. Primary or Mill 2.<br>22. Signature 2. 3 1 9 0  |                |                     |            |              |                                |        |        |                             |                        |               |
| 9. Violation A. Health X. B. Section of Act C. Part/Section of Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>Section II Inspector's Evaluation of Act Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>10. Gravity:<br>A. Injury or Illness (nas) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred .<br>B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling Fatal .<br>C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0 0 0 8<br>11. Negligence (check one) B. Low C. Moderate X D. High E. Reckless Disregard .<br>12. Type of Action B. Order C. Safeguard D. Vitten X Order Suance (check one) C. Moderate X D. High E. Reckless Disregard .<br>14. Initial Action B. Order C. Safeguard D. Written K. C. Safeguard D. Written K. Cock) 1 0 0 0<br>15. Area or Equipment .<br>16. Termination Due A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate 2.<br>18. Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 2.<br>19. Type of Inspection E. 0 1 20. Event Number T 6 5 4 3 2 1 21. Primary or Mill 2.<br>22. Signature 2. 3 1 9 0  |                |                     |            |              |                                |        |        |                             |                        |               |
| 9. Violation A. Health X. B. Section of Act C. Part/Section of Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>Section II Inspector's Evaluation of Act Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>10. Gravity:<br>A. Injury or Illness (nas) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred .<br>B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling Fatal .<br>C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0 0 0 8<br>11. Negligence (check one) B. Low C. Moderate X D. High E. Reckless Disregard .<br>12. Type of Action B. Order C. Safeguard D. Vitten X Order Suance (check one) C. Moderate X D. High E. Reckless Disregard .<br>14. Initial Action B. Order C. Safeguard D. Written K. C. Safeguard D. Written K. Cock) 1 0 0 0<br>15. Area or Equipment .<br>16. Termination Due A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate 20. E. Order Automated System Data .<br>19. Type of Inspection E. 0 1 20. Event Number 7 6 5 4 3 2 1 21. Primary or Mill 22. Signature 23. AR Number 2 3 1 9 0  |                |                     |            |              |                                |        |        |                             |                        |               |
| 9. Violation A. Health X. B. Section of Act C. Part/Section of Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>Section II Inspector's Evaluation of Act Title 30 CFR T 0 . 1 9 0 0 ( b )X 2)<br>10. Gravity:<br>A. Injury or Illness (nas) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred .<br>B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty X Permanently Disabling Fatal .<br>C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0 0 0 8<br>11. Negligence (check one) B. Low C. Moderate X D. High E. Reckless Disregard .<br>12. Type of Action B. Order C. Safeguard D. Vitten X Order Suance (check one) C. Moderate X D. High E. Reckless Disregard .<br>14. Initial Action B. Order C. Safeguard D. Written K. C. Safeguard D. Written K. Cock) 1 0 0 0<br>15. Area or Equipment .<br>16. Termination Due A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate A. Date Mo Da Yr B. Time (24 Hr Clock) 1 0 0 0<br>Section II - Terminate 20. E. Order Automated System Data .<br>19. Type of Inspection E. 0 1 20. Event Number 7 6 5 4 3 2 1 21. Primary or Mill 22. Signature 23. AR Number 2 3 1 9 0  |                |                     |            |              |                                |        |        |                             |                        |               |
| Safety       B. Section       of Act       -       C. Part/Section of<br>Title 30 CFR       7       0       1       9       0       (       b       )(       2)         Section II Inspector's Evaluation       10. Gravity:       A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       X       Highly Likely       Occurred       Image: Cocurred       Image: Cocur  | 0.15.1.5       | A 11 141            | 1          |              |                                |        |        | See Contin                  | uation Form (MSHA Form | 7000-3a)      |
| Other         of Act         -         Title 30 CFR         T         0         1         9         0         0         (         b         (         2         )           Section II Inspector's Evaluation         10. Gravity:         A. Injury or Illness (nas) (is): No Likelihood         Unlikely         Reasonably Likely         X         Highly Likely         Occurred         .           B. Injury or Illness could rea-<br>sonably be expected to be:         No Lost Workdays         Lost Workdays or Restricted Duty         X         Permanently Disabling         Fatal           C. Significant and Substantial (See Reverse):         Yes         X         No         D. Number of Persons Affected         0         0         8           11. Negligence (check one)<br>A. None         B. Low         C. Moderate         X         D. High         E. Reckless Disregard         .           12. Type of Action         1         0         4         -         -         -         13. Type of Issuance (check one)<br>Citation         C. Safeguard         D. Written         E. Citation/<br>Notice         Order         O Safeguard         .           14. Initial Action         B. Order         C. Safeguard         D. Written         E. Citation/<br>Number         F. Dated         Mo         Da         Yr   | 9. Violation   |                     | вс         | Section      |                                |        |        | C Part/Section of           |                        |               |
| Section II Inspector's Evaluation       Image: construction in the inspector's Evaluation         10. Gravity:       A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness (has) (is):       No Lost Workdays       Lost Workdays or Restricted Duty       X       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       8         11. Negligence       (Check one)       E. Low       C. Moderate       X       D. High       E. Reckless Disregard         12. Type of Action       1       0       4       -       -       113. Type of Issuance (check one)       Order       0       Safeguard       -         14. Initial Action       B. Order       C. Safeguard       D. Written       Nonber       F. Dated       Mo       Da       Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       B. Time (24       1       0       0       0         Section III Termination Action       T       1       D       No       0       0       0         18. Terminated       A. Date       Mo       Da </td <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td>7 0 . 1 9</td> <td>0 0 ( b )( 2)</td>   |                |                     |            |              | -                              |        |        |                             | 7 0 . 1 9              | 0 0 ( b )( 2) |
| A. Injurý 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       X       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       8         11. Negligence       (check one)       B. Low       C. Moderate       X       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4       a       -       -       13. Type of Issuance (check one)       Order       0       Safeguard         14. Initial Action       B. Order       C. Safeguard       D. Written       Order       O Safeguard       Mo       Da       Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       Hr. Clock)       1       0       0       0         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       0       0       0         18. Terminated       A. Date       No       1       0       0       23. AR Number       23. AR Number   |                | nspector's Evalu    |            |              |                                |        |        |                             |                        |               |
| B. Injury or Illness could reasonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       X       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       8         11. Negligence       (check one)       B. Low       C. Moderate       X       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4       a       -       -       13. Type of Issuance (check one)       Order       0       Safeguard       1         14. Initial Action       B. Order       C. Safeguard       D. Written       E. Citation/<br>Order       Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       Notice       Order       Number       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       Hr. Clock)       1       0       0       0         17. Action to Terminate       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       0       0       0         18. Terminated       A. Date       Mo       Da       Yr <t< td=""><td></td><td>· Illness (has) (is</td><td>): No L</td><td>ikelihood</td><td>Un</td><td>likely</td><td></td><td>Reasonably Likely X</td><td>Highly Likely</td><td>Occurred</td></t<>   |                | · Illness (has) (is | ): No L    | ikelihood    | Un                             | likely |        | Reasonably Likely X         | Highly Likely          | Occurred      |
| sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       X       Permanently Disabling       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       8         11. Negligence       (check one)       B. Low       C. Moderate       X       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4       -       -       -       13. Type of Issuance (check one)       C. Moderate       X       Order       0       Safeguard       -         14. Initial Action       B. Order       C. Safeguard       D. Written       E. Citation/       Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       Da       Yr       B. Time (24       Hr. Clock)       1       0       0       0       Section III Termination Action         17. Action to Terminate       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       0       0       0       Section IV Automated System Data       -       2       3       1       9       0         19. Type of Inspection       i       0       1       2       1 <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>3 7 7 1</td> <td></td>  |                |                     |            |              |                                |        |        |                             | 3 7 7 1                |               |
| 11. Negligence (check one)       B. Low       C. Moderate       X       D. High       E. Reckless Disregard         12. Type of Action       1       0       4 - a       -       -       -       13. Type of Issuance (check one)       Order       0       Safeguard   |                |                     |            | No Lost      | Workdays                       |        | Lost   | Workdays or Restricted Duty | X Permanently Disa     | abling Fatal  |
| 11. Negligence (check one)       B. Low       C. Moderate       X       D. High       E. Reckless Disregard         12. Type of Action       1       0       4 - a       -       -       -       13. Type of Issuance (check one)       Order       0       Safeguard   | C Signif       | icant and Subst     | antial (Se | e Reverse).  | Yes                            | XII    | No     |                             | D Number of Persons Af | ffected 0 0 8 |
| 12. Type of Action       1       0       4       a       -       -       13. Type of Issuance (check one)<br>Citation       Order       0       Safeguard   |                |                     |            |              |                                |        |        |                             |                        |               |
| 1       0       4       -       -       Citation       X       Order       0       Safeguard         14. Initial Action<br>A. Citation<br>A. Citation<br>A. Citation<br>A. Citation<br>A. Citation<br>A. Citation<br>A. Citation<br>C. Safeguard       D. Written<br>Notice       E. Citation/<br>Order<br>Number       F. Dated       Mo       Da       Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       Yr       Notice       Number       Number       Number         16. Termination Due<br>A. Date       A. Date       Mo       Da       Yr       Yr       B. Time (24<br>Hr. Clock)       1       0       0       0         Section III Termination Action<br>17. Action to Terminate       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       0       0       0         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Clock       <  | A. None        |                     | I          | B. Low       |                                | C. Mod | erate  | X D. High                   | E. Reckles             | s Disregard   |
| 14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written       E. Citation/<br>Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       A. Date       0       7       1       2       0       8       Time (24<br>Hr. Clock)       1       0       0       0         16. Termination Due       A. Date       0       7       1       2       0       8       Time (24<br>Hr. Clock)       1       0       0       0         Section III Termination Action       17. Action to Terminate       Terminated       No       Da       Yr       B. Time (24 Hr. Clock)       1       0       0       0         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr. Clock)       Image: Section IV Automated System Data       Image: Section IV Automated System Data <td>12. Type of A</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>13.</td> <td></td> <td>_</td> <td><b>—</b></td>   | 12. Type of A  |                     |            |              |                                |        | 13.    |                             | _                      | <b>—</b>      |
| A. Citation       B. Order       C. Safeguard       Notice       Order       Order       Number         15. Area or Equipment       15. Area or Equipment       Notice       Order       Number       Number         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)       1       0       0         Section III Termination Action       17. Action to Terminate       Notice       1       0       0       0         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       0       0         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       0       0         Section IV Automated System Data       19. Type of Inspection       20. Event Number       7       6       5       4       3       2       1       Primary or Mill         22. Signature       23. AR Number       2       3       1       9       0   |                | 1 C                 | ) 4 - ;    | a - ,        | -                              | -      |        | Citation X                  | Order 0                | Safeguard     |
| Image: Solution of the system of the syst |                |                     |            |              | · · · · ·                      |        |        |                             | F. Dated               | d Mo Da Yr    |
| 16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       Hr. Clock)       1       0       0       0         Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       0       0       0         Section IV Automated System Data         19. Type of Inspection       20. Event Number       7       6       5       4       3       2       1       1       0       0       23. AR Number       2       3       1       9       0   | A. Citati      | on B. C             | order      | C. Sat       | eguard                         |        | Notice |                             |                        |               |
| A. Date       0       7       1       2       0       8       Time (24<br>Hr. Clock)       1       0       0       0         Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Section IV Automated System Data         19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       7       6       5       4       3       2       1       21. Primary or Mill         22. Signature       23. AR Number  | 15. Area or E  | quipment            |            |              |                                |        |        |                             |                        |               |
| A. Date       0       7       1       2       0       8       Time (24<br>Hr. Clock)       1       0       0       0         Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Section IV Automated System Data         19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       7       6       5       4       3       2       1       21. Primary or Mill         22. Signature       23. AR Number  |                |                     |            |              |                                |        |        |                             |                        |               |
| A. Date       0       7       1       2       0       8       Time (24<br>Hr. Clock)       1       0       0       0         Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Section IV Automated System Data         19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       7       6       5       4       3       2       1       21. Primary or Mill         22. Signature       23. AR Number  |                |                     |            |              |                                |        |        |                             |                        |               |
| 0       7       1       2       0       8       Hr. Clock)       1       0       0       0         Section III Termination Action         17. Action to Terminate         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         19. Type of Inspection       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       Image: Section IV Automated System Data       Image: Section IV Automated System Data       Image: Section IV Automated System Data         22. Signature       Image: Section IV Automated System Data         Automate Sys   | 16. Terminati  |                     |            | Da Y         |                                | e (24  |        |                             |                        |               |
| 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       20. Event Number       7       6       5       4       3       2       1       21. Primary or Mill         22. Signature       23. AR Number       2       3       1       9       0  |                | A. Da               |            | 7 1 2 0      |                                |        |        | 1 0 0 0                     |                        |               |
| 18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)         Section IV Automated System Data         19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       7       6       5       4       3       2       1       21. Primary or Mill         22. Signature       23. AR Number         2       3       1       9       0   |                |                     | on         |              |                                |        |        |                             |                        |               |
| A. Date       B. Time (24 Hr Clock)       Description   | TT. ACIION IO  | Terminate           |            |              |                                |        |        |                             |                        |               |
| A. Date       B. Time (24 Hr Clock)       Description   |                |                     |            |              |                                |        |        |                             |                        |               |
| Section IV Automated System Data         19. Type of Inspection<br>(activity code)       20. Event Number       7       6       5       4       3       2       1       21. Primary or Mill         22. Signature       23. AR Number       2       3       1       9       0   | 18. Terminate  |                     | Мо         | Da Yr        | D. Time (24                    |        |        |                             |                        |               |
| 19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       7       6       5       4       3       2       1       21. Primary or Mill       23. AR Number       23. AR Number       2       3       1       9       0  |                | A. Dale             |            |              | <ul> <li>Б. ПШе (24</li> </ul> |        | ;к)    |                             |                        |               |
| (activity code)       E       0       1       7       6       5       4       3       2       1         22. Signature       23. AR Number       2       3       1       9       0   | Section IV /   | Automated Syst      | em Data    |              |                                |        |        |                             |                        |               |
| 22. Signature 23. AR Number 2 3 1 9 0   | 19. Type of Ir |                     |            | 20. Event N  | umber                          |        |        | 21. Primary or Mill         |                        |               |
| 2 3 1 9 0   | (activit       | y code) E           | 0 1        |              | 7                              | 65     | 4 3    | 2 1                         |                        |               |
|   | 22. Signature  |                     |            |              |                                | -      | -      |                             | 23. AR Num             | ber           |
| MSHA Form 7000-3 Mar 85 (Revised)   |                |                     |            |              |                                |        |        |                             |                        | 2 3 1 9 0     |
|   | MSHA Form      | 7000-3 Mar 85 (     | Revised)   | )            |                                |        |        |                             |                        |               |

# 104(a) CITATION - 30 CFR 70.1900(b)(2)

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I Violation Data                               |         |             |     |     |     |     |      |       |       |        |         |      |     |    |   |   |     |   |
|--|---------|-------------|-----|-----|-----|-----|------|-------|-------|--------|---------|------|-----|----|---|---|-----|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)                |         |             |     |     |     | 3.  | Cita | tion/ | /Orde | ər     |         | 1    |     |    |   |   |     |   |
| 0 7 1 1 0 8  | 1 1 4 0 |             |     |     |     |     | Nur  | nber  | -     |        |         | 1    | 2   | 3  | 4 | 5 | 6 9 | Э |
| 4. Served To   |         | 5. Operator |     |     |     |     |      |       |       |        |         |      |     |    |   |   |     |   |
| Mike McGregor, Safety Director Black Rock Coal Company |         |             |     |     |     |     |      |       |       |        |         |      |     |    |   |   |     |   |
| 6. Mine  |         | 7. Mine ID  |     |     |     |     |      |       |       |        |         |      |     |    |   |   |     |   |
| No. 1  |         |             | 1 5 | - 0 | 3 5 | 5 3 | 6    | -     |       |        | (cont   | ract | or) |    |   |   |     |   |
| 8. Condition or Practice                               |         |             |     |     |     |     |      | 8     | la. W | /ritte | n Notic | e (' | 103 | g) |   |   |     | - |
|  |         | 1           | ~   |     | .1  |     |      |       |       | 4      |         |      | -   |    | - |   |     |   |

During the on-shift examination for MMU 003-0 the certified person (section foreman) failed to adequately determine the concentrations of carbon monoxide (CO) and nitrogen dioxide (NO<sub>2</sub>) in the return at a location representing the contribution of all diesel equipment on this section and at the section loading point. This unit uses 1 EIMCO diesel scoop for clean up and 3 EIMCO diesel ramcars for section haulage in the production process. The on-shift examination was performed at 11:30. At this time the diesel scoop and the #2 diesel ramcar were idle during the mid-day lunch break. Title 30 CFR 70.1900(b)(3) requires that the samples be collected during periods of normal operations. Eight miners work on this section.

|  | See Continu                                       | ation Form (MSHA Form 7000-3a)      |  |  |  |  |  |  |  |  |  |  |  |  |
|--|---|-------------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|
| 9. Violation A. Health X B. Section Other of Act Section II Inspector's Evaluation | - C. Part/Section of<br>Title 30 CFR              | 7 0 . 1 9 0 0 ( b )( 3)             |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Inlikely Reasonably Likely X                      | Highly Likely                       |  |  |  |  |  |  |  |  |  |  |  |  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays     |   | X Permanently Disabling Fatal       |  |  |  |  |  |  |  |  |  |  |  |  |
| C. Significant and Substantial (See Reverse): Yes                                  | X No  | D. Number of Persons Affected 0 0 8 |  |  |  |  |  |  |  |  |  |  |  |  |
| 11. Negligence (check one)<br>A. None B. Low                                       | C. Moderate X D. High                             | E. Reckless Disregard               |  |  |  |  |  |  |  |  |  |  |  |  |
| 12. Type of Action 1 0 4 - a - ,   | 13. Type of Issuance (check one)<br>Citation X    | Order 0 Safeguard                   |  |  |  |  |  |  |  |  |  |  |  |  |
| 14. Initial Action<br>A. Citation B. Order C. Safeguard                            | D. Written E. Citation/<br>Notice Order<br>Number | F. Dated Mo Da Yr                   |  |  |  |  |  |  |  |  |  |  |  |  |
| 15. Area or Equipment  |   |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
| 16. Termination Due  |   |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
|  | me (24<br>Ir. Clock) 1 2 3 0                      |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
| Section III Termination Action   |   |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
| 17. Action to Terminate  |   |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
|  |   |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
|  | 24 Hr Clock)                                      |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
| Section IV Automated System Data   |   |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
| 19. Type of Inspection (activity code) E 0 1                                       | 7 6 5 4 3 2 1                                     |                                     |  |  |  |  |  |  |  |  |  |  |  |  |
| 22. Signature  |   | 23. AR Number                       |  |  |  |  |  |  |  |  |  |  |  |  |
|  |   | 2 3 1 9 0                           |  |  |  |  |  |  |  |  |  |  |  |  |
| MSHA Form 7000-3 Mar 85 (Revised)  |   |                                     |  |  |  |  |  |  |  |  |  |  |  |  |

### 104(a) CITATION - 30 CFR 70.1900(b)(3)

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I Vi  | olation | Data   |         |                        |                            |   |   |   |             |   |   |   |   |   |   |    |     |      |      |                |      |      |    |     |   |   |   |   |
|---|---------|--------|---------|------------------------|----------------------------|---|---|---|-------------|---|---|---|---|---|---|----|-----|------|------|----------------|------|------|----|-----|---|---|---|---|
| 1. Date   | Мо      | Da     | Yr      | 2. Time (24 Hr. Clock) |                            |   |   |   |             |   |   |   |   |   |   | 3. | Cit | atic | on/O | Order          |      |      |    |     |   |   |   |   |
|   | 0 7     | 2 1    | 0 8     |                        | 1                          | 4 | 3 | 0 |             |   |   |   |   |   |   |    | Νι  | umb  | er   |                | 1    | 2    | 3  | 3 4 | 5 | 7 | 3 |   |
| 4. Served To  |         |        |         |                        |                            |   |   |   | 5. Operator |   |   |   |   |   |   |    |     |      |      |                |      |      |    |     |   |   |   |   |
| Mike Mc   | Greg    | or, Sa | ifety D | Director               | br Black Rock Coal Company |   |   |   |             |   |   |   |   |   |   |    |     |      |      |                |      |      |    |     |   |   |   |   |
| 6. Mine   |         |        |         |                        |                            |   |   |   | 7. Mine ID  |   |   |   |   |   |   |    |     |      |      |                |      |      |    |     |   |   |   | Ì |
| No. 1   |         |        |         |                        |                            |   |   |   |             | 1 | 5 | - | 0 | 3 | 5 | 3  | 6   | -    |      | (con           | trac | tor) | )  |     |   |   |   |   |
| 8. Condition of   | or Prac | tice   |         |                        |                            |   |   |   |             |   |   |   |   |   |   |    |     |      | 8a   | . Written Noti | се   | (10  | 3g | )   |   |   |   | 2 |
| The dust collection system provided on the L H. Eletcher, dual beam, react helting machine (S/N DDP, 20456) was not maintained as |         |        |         |                        |                            |   |   |   |             |   |   |   |   |   |   |    |     |      |      |                |      |      |    |     |   |   |   |   |

The dust collection system provided on the J. H. Fletcher, dual-boom, roof bolting machine (S/N DDR-20456) was not maintained as approved. Fine dust was observed coming from the exhaust mufflers during drilling. Upon examination of the dust collection boxes fine dust was found on the clean side of the filter media on each side of the roof bolting machine. Examination of the filters revealed small holes and tears in the media resulting from overloading and/or attempts to clean the filters by "tapping" them against the machine. This roof bolting machine installs roof supports on MMU 003-0 and is normally operated on day, afternoon, and midnight shifts. MSHA established this machine as a Designated Area (903-0) on July 3, 2007.

|   | See Continuation Form (MSHA Form 7000-3a)            |
|---|--|
| 9. Violation A. Health X<br>Safety B. Section of Act -  | C. Part/Section of<br>Title 30 CFR 7 2 . 6 3 0 ( b ) |
| Section II Inspector's Evaluation   |  |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reas   | sonably Likely X Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workda  | ys or Restricted Duty Permanently Disabling X Fatal  |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 6                  |
| 11. Negligence (check one)  | X D. High E. Reckless Disregard                      |
| 12. Type of Action 1 0 4 - a - , 13. Type of Citation 13. Type of Citation  | f Issuance (check one)                               |
| 14. Initial Action       D. Written         A. Citation       B. Order       C. Safeguard   | E. Citation/<br>Order<br>Number                      |
| 15. Area or Equipment   |  |
| 16. Termination Due         Mo         Da         Yr         B. Time (24         2         0           4. Date         0         7         2         1         0         8         Hr. Clock)         2         0 | 0 0  |
| 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<br>(activity code)         E         0         1         7         6         5         4         3         2         1   | 21. Primary or Mill                                  |
| 22. Signature   | 23. AR Number  |
| MSHA Form 7000-3 Mar 85 (Revised)   | 2 3 1 9 0  |

### 104(a) CITATION - 30 CFR 72.630(b) Example 1

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I Violation Data                |       |             |     |     |      |     |     |      |       |      |        |          |      |     |     |   |   |   |   |
|---|-------|-------------|-----|-----|------|-----|-----|------|-------|------|--------|----------|------|-----|-----|---|---|---|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock) |       |             |     |     |      |     | 3   | . Ci | tatio | n/Or | der    |          |      |     |     |   |   |   | ļ |
| 0 7 2 1 0 7 1 4                         | 4 3 0 |             |     |     |      |     |     | N    | umb   | er   |        |          | 1    | 2   | 3   | 4 | 5 | 7 | 3 |
| 4. Served To                            | Ę     | 5. Operator |     |     |      |     |     |      |       |      |        |          |      |     |     |   |   |   |   |
| Mike McGregor, Safety Director          |       | Black Ro    | ock | Coa | I Co | omp | any | ,    |       |      |        |          |      |     |     |   |   |   |   |
| 6. Mine                                 | 7     | 7. Mine ID  |     |     |      |     |     |      |       |      |        |          |      |     |     |   |   |   |   |
| No. 1                                   |       |             | 1   | 5 - | 0    | 3   | 5   | 3 6  | -     |      |        | (contr   | acto | or) |     |   |   |   |   |
| 8. Condition or Practice                |       |             |     |     |      |     |     |      |       | 8a.  | Writte | n Notice | ÷ (1 | 103 | lg) |   |   | [ |   |
|   |       |             |     |     |      |     |     |      |       |      |        |          |      |     |     |   |   |   |   |

The dust collection system provided on the J. H. Fletcher, dual-boom, roof bolting machine (S/N DDR-40265) was not maintained as approved. An examination of the dust collection boxes revealed that the rubber door latches on the left (operator's) side of the machine were broken. This condition allows leakage along the door seal compromising the collection efficiency of the dust collector. This roof bolting machine installs roof supports on MMU 003-0. MSHA established this machine as a Designated Area (903-0) on July 3, 2008.

|   | See Contir                                  | nuation Form (MSHA Form 7000-3a)    |
|---|---|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act -   | C. Part/Section of<br>Title 30 CFR          | 7 2 . 6 3 0 ( b )                   |
| Section II Inspector's Evaluation   |   |                                     |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         X              | Reasonably Likely                           | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Los                                  | t Workdays or Restricted Duty               | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes X No  |   | D. Number of Persons Affected 0 0 2 |
| 11. Negligence (check one)     B. Low     C. Moderate   | e X D. High                                 | E. Reckless Disregard               |
| 12. Type of Action 1 0 4 - a - ,  | 3. Type of Issuance (check one)<br>Citation | Order 0 Safeguard                   |
| 14. Initial Action       D. Writt         A. Citation       B. Order       C. Safeguard         Notion       Notion |   | F. Dated Mo Da Yr                   |
| 15. Area or Equipment   | · · · ·                                     |                                     |
| 16. Termination Due     A. Date     Mo     Da     Yr       B. Time (24)       Hr. Clock)                            | 1 5 3 0                                     |                                     |
| Section III Termination Action  |   |                                     |
| 17. Action to Terminate<br>The rubber door latches were replaced.   |   |                                     |
| 18. Terminated         A. Date         Mo         Da         Yr         B. Time (24 Hr Clock)                       | 1 4 5 1                                     |                                     |
| Section IV Automated System Data  |   |                                     |
| 19. Type of Inspection   20. Event Number   | 21. Primary or Mill                         |                                     |
| (activity code) E 0 1 7 6 5 4   | 3 2 1                                       |                                     |
| 22. Signature   |   | 23. AR Number 2 3 1 9 0             |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |                                     |

### 104(a) CITATION - 30 CFR 72.630(b) Example 2

### **U.S. Department of Labor**

Mine Safety and Health Administration

| Section I V  | olation | Data   |         |                        |   |   |     |             |     |     |      |     |     |    |      |      |     |      |            |      |     |    |   |   |   |   |
|--------------|---------|--------|---------|------------------------|---|---|-----|-------------|-----|-----|------|-----|-----|----|------|------|-----|------|------------|------|-----|----|---|---|---|---|
| 1. Date      | Мо      | Da     | Yr      | 2. Time (24 Hr. Clock) |   |   |     |             |     |     |      |     |     | 3. | Cita | atio | n/O | rder |            |      |     |    |   |   |   |   |
|              | 0 7     | 2 1    | 0 8     |                        | 1 | 5 | 3 0 |             |     |     |      |     |     |    | Nur  | mbe  | er  |      |            | 1    | 2   | 3  | 4 | 5 | 7 | 4 |
| 4. Served To | )       |        |         |                        |   |   |     | 5. Operator |     |     |      |     |     |    |      |      |     |      |            |      |     |    |   |   |   |   |
| Mike Mo      | Grego   | or, Sa | ifety D | Director               |   |   |     | Black R     | ock | Coa | al C | Com | pai | ny |      |      |     |      |            |      |     |    |   |   |   |   |
| 6. Mine      |         |        |         |                        |   |   |     | 7. Mine ID  |     |     |      |     |     |    |      |      |     |      |            |      |     |    |   |   |   |   |
| No. 1        |         |        |         |                        |   |   |     |             | 1   | 5 - | - (  | 3 3 | 5   | 3  | 6    | -    |     |      | (contra    | acto | or) |    |   |   |   |   |
| 8. Condition | or Prac | tice   |         |                        |   |   |     |             |     |     |      |     |     |    |      |      | 8a. | Writ | ten Notice | : (1 | 103 | g) |   |   |   | - |
|              |         |        |         |                        |   |   |     |             |     |     |      |     |     |    |      |      |     |      |            |      |     |    | - |   |   | _ |

The dust collection system provided on the J. H. Fletcher, dual-boom, roof bolting machine (S/N DDR-65420) was not maintained as approved. An examination of the dust collection boxes on each side of the machine revealed that the door gaskets provided to separate the coarse and fine dust compartments of the boxes were missing or damaged compromising the collection efficiency of the dust collector. This roof bolting machine installs roof supports on MMU 003-0. MSHA established this machine as a Designated Area (903-0) on July 3, 2008.

|   | See Contir                                  | nuation Form (MSHA Form 7000-3a)    |
|---|---|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act -   | C. Part/Section of<br>Title 30 CFR          | 7 2 . 6 3 0 ( b )                   |
| Section II Inspector's Evaluation   |   |                                     |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         X  | Reasonably Likely                           | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Los  | t Workdays or Restricted Duty               | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes X No  |   | D. Number of Persons Affected 0 0 2 |
| 11. Negligence (check one)<br>A. None B. Low C. Moderate  | e X D. High                                 | E. Reckless Disregard               |
| 12. Type of Action 1 0 4 - a - ,  | 3. Type of Issuance (check one)<br>Citation | Order 0 Safeguard                   |
| 14. Initial Action       D. Writt         A. Citation       B. Order       C. Safeguard         Notic   |   | F. Dated Mo Da Yr                   |
| 15. Area or Equipment   |   |                                     |
| 16. Termination Due     A. Date     Mo     Da     Yr       B. Time (24       Hr. Clock)   | 1 7 3 0                                     |                                     |
| Section III Termination Action<br>17. Action to Terminate   |   |                                     |
| The gaskets werereplaced.   |   |                                     |
| 18. Terminated         A. Date         Mo         Da         Yr         B. Time (24 Hr Clock)           7         2         1         0         0         8 | 1 7 2 1                                     |                                     |
| Section IV Automated System Data  |   |                                     |
| 19. Type of Inspection<br>(activity code)         E         0         1         7         6         5         4         5                                   | 21. Primary or Mill                         |                                     |
| 22. Signature   | + + +                                       | 23. AR Number 2 3 1 9 0             |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |                                     |

### 104(a) CITATION - 30 CFR 72.630(b)

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I Vi    | olation | Data   |        |                            |          |     |     |     |             |      |    |    |     |     |      |     |     |     |      |                |       |     |     |      |     |    |    |   |
|-----------------|---------|--------|--------|----------------------------|----------|-----|-----|-----|-------------|------|----|----|-----|-----|------|-----|-----|-----|------|----------------|-------|-----|-----|------|-----|----|----|---|
| 1. Date         | Мо      | Da     | Yr     | 2. Time (24 Hr. Clock)     |          |     |     |     |             |      |    |    |     |     |      | 3.  | C   | ita | tior | n/Order        |       |     |     |      |     |    |    |   |
|                 | 0 7     | 2 0    | 0 8    |                            | 1        | 0   | 3   | 0   |             |      |    |    |     |     |      |     | Ν   | lun | nbe  | er             | 1     | 1   | 2   | 3    | 4   | 5  | 7  | 2 |
| 4. Served To    |         |        |        |                            |          |     |     |     | 5. Operator |      |    |    |     |     |      |     |     |     |      |                |       |     |     |      |     |    |    |   |
| Mike Mc         | Grego   |        |        |                            | Black Re | ock | С   | oal | С           | om   | ра | ny |     |     |      |     |     |     |      |                |       |     |     |      |     |    |    |   |
| 6. Mine         |         |        |        |                            |          |     |     |     | 7. Mine ID  |      |    |    |     |     |      |     |     |     |      |                |       |     |     |      |     |    |    |   |
| No. 1           |         |        |        |                            |          |     |     |     |             | 1    | 5  | -  | 0   | 3   | 5    | 3   | 6   | 6   | -    | (co            | ontra | ctc | or) |      |     |    |    |   |
| 8. Condition of | r Pract | tice   |        |                            |          |     |     |     |             |      |    |    |     |     |      |     |     |     |      | 8a. Written No | tice  | (1  | 03  | g)   |     |    |    |   |
| The dust co     | llectio | on svs | stem r | provided on the J. H. Flet | cher     | d   | ual | -bo | oom, roof b | olti | ng | m  | acł | nin | e (S | 5/1 | N I | DI  | DR   | R-02465) was   | no    | t n | na  | inta | ain | ed | as |   |

The dust collection system provided on the J. H. Fletcher, dual-boom, root bolting machine (S/N DDR-02465) was not maintained as approved. The static vacuum pressure at the left (operator's) side drill pot indicated 6 inches (Hg). The dust collection system approval plate located in the operators' compartment specifies a minimum static vacuum pressure of 15 inches (Hg). This condition indicates possible leakage somewhere in the collection system or other system defect compromising the collection efficiency of the dust collector. This roof bolting machine installs roof supports on MMU 003-0. MSHA established this machine as a Designated Area (903-0) on July 3, 2008.

|   | See Continu                              | uation Form (MSHA Form 7000-3a)     |
|---|--|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act -   | C. Part/Section of<br>Title 30 CFR       | 7 2 . 6 3 0 ( b))                   |
| Section II Inspector's Evaluation   |  |                                     |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely X                      | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost W                                     | /orkdays or Restricted Duty              | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes X No  |  | D. Number of Persons Affected 0 0 2 |
| 11. Negligence (check one)<br>A. None B. Low C. Moderate  | X D. High                                | E. Reckless Disregard               |
|   | Type of Issuance (check one)<br>Citation | Order 0 Safeguard                   |
| 14. Initial Action       D. Written         A. Citation       B. Order       C. Safeguard         Notice                  | E. Citation/<br>Order<br>Number          | F. Dated Mo Da Yr                   |
| 15. Area or Equipment   |  |                                     |
| 16. Termination Due A. Date Mo Da Yr<br>A. Date 0 7 2 1 0 8 Hr. Clock)  | 0 7 0 0                                  |                                     |
| Section III Termination Action  |  |                                     |
| 17. Action to Terminate   |  |                                     |
|   |  |                                     |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)                                   |  |                                     |
| Section IV Automated System Data  |  |                                     |
| 19. Type of Inspection<br>(activity code)         E         0         1         7         6         5         4         3 | 21. Primary or Mill                      |                                     |
| 22. Signature   | + +                                      | 23. AR Number 2 3 1 9 0             |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |                                     |
|   |  |                                     |

### 104(a) CITATION - 30 CFR 72.630(b) Example 4

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

| Section I Violation Data  |                                  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|----------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3                                | 3. Citation/Order  |  |  |  |  |  |  |  |  |  |  |  |
| 0 9 0 4 0 7 0 7 0   | 0                                | Number         1         2         3         4         5         7         5 |  |  |  |  |  |  |  |  |  |  |  |
| 4. Served To  | 5. Operator                      |  |  |  |  |  |  |  |  |  |  |  |  |
| Mike McGregor, Safety Director  | Black Rock Coal Company          | ý  |  |  |  |  |  |  |  |  |  |  |  |
| 6. Mine   | 7. Mine ID                       |  |  |  |  |  |  |  |  |  |  |  |  |
| No. 1   | 1 5 - 0 3 5                      | 3 6 - (contractor)   |  |  |  |  |  |  |  |  |  |  |  |
| NO. 1         1         5         -         I         (contractor)           8. Condition or Practice         8a. Written Notice (103g)         I |                                  |  |  |  |  |  |  |  |  |  |  |  |  |
| The results of five valid samples collected by MSHA Inspector   | s) from August 6, 2008, through  | n August 27, 2008, indicate that the #5 Joy                                  |  |  |  |  |  |  |  |  |  |  |  |
| shuttle car operator (Occupation Code 050) is exposed to an av  | erage respirable dust concentra  | tion of 2.7 mg/m <sup>3</sup> which exceeds the                              |  |  |  |  |  |  |  |  |  |  |  |
| allowable exposure of $2.0 \text{ mg/m}^3$ . These samples were collected   | d on the #5 Joy shuttle car (S/N | NET-12345) used to haul coal on MMU  |  |  |  |  |  |  |  |  |  |  |  |
| 001-0. Three shuttle cars are used for coal haulage on this unit,   |                                  | · · · · · · · · · · · · · · · · · · ·  |  |  |  |  |  |  |  |  |  |  |  |
| operator must take immediate action to lower the exposure in  | he environments shuttle car op   | erators to 2.0 mg/ $m^3$ or less and then                                    |  |  |  |  |  |  |  |  |  |  |  |
| sample the #5 Joy shuttle car operator each production shift ur   | -                                | 0.   |  |  |  |  |  |  |  |  |  |  |  |

Dust Processing Laboratory. A copy of the sample results is attached to this citation. Information to be coded on the dust data card: Type of Sample = 2, MMU/DA/SA = 001-1, Occupation Code = 050

| Safety       B. Section       -       C. Part/Section of<br>Title 30 CFR       0       7       0       .       1       0       0       a       )         Section II Inspector's Evaluation       III Inspector's Evaluation       0       7       0       .       1       0       0       (a)       )         A. Injury or Illness (has) (is):       No Likelihood       Unlikely       Reasonably Likely       X       Highly Likely       Occurred       .         B. Injury or Illness could reasonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0         11. Negligence (check one)       B. Low       C. Moderate       X       D. High       E. Reckless Disregard       .         12. Type of Action       1       0       4       a       . |               |           |          |                |          |        |          |                 |          |                    |           |       |     |
|---|---------------|-----------|----------|----------------|----------|--------|----------|-----------------|----------|--------------------|-----------|-------|-----|
| Safety B. Se<br>Other o   |               |           | -        |                |          |        |          |                 | 0 7      | 0.100              | ( a )     |       |     |
|   |               |           |          |                |          |        |          |                 |          |                    |           |       |     |
| A. Injury or Illness (has) (is): No Li  | kelihood      |           | Unlike   | ly             | ]        | Rea    | isona    | bly Likely X    | Highly I | Likely             | Occurre   | d 🗌   | ]   |
|   | No Lost Wo    | rkdays    |          | [ L            | .ost W   | /orkda | ays o    | Restricted Duty | Pe       | ermanently Disabl  | ing X     | Fatal |     |
| C. Significant and Substantial (See   | e Reverse):   | Yes       | зΧ       | No             | D        |        |          |                 | D. Numbe | er of Persons Affe | cted      | 0     | 0 6 |
| 11. Negligence (check one)<br>A. None B   | . Low         | ]         | C.       | Moder          | ate      |        | Х        | D. High         |          | E. Reckless        | Disregard |       | ]   |
| 12. Type of Action 1 0 4 - a  | - ,           |           | -        | -              |          |        |          |                 | Order    | 0 Sa               | feguard   |       |     |
|   | C. Safeg      | uard      |          |                |          |        | [        | Order           |          | F. Dated           | Mo        | Da    | Yr  |
| A. Date   |               | B. 1      | Fime (2  | 24             |          |        |          |                 |          |                    |           |       |     |
|   | 9 1 2 0 8     |           | Hr. Cl   | ock)           |          | 0 7    | 0        | D               |          |                    |           |       |     |
|   |               |           |          |                |          |        |          |                 |          |                    |           |       |     |
|   |               |           |          |                |          |        |          |                 |          |                    |           |       |     |
| A. Date   | Da Yr<br>B    | 3. Time ( | 24 Hr    | Clock          | )        |        |          |                 |          |                    |           |       |     |
| Section IV Automated System Data  |               |           |          |                |          |        |          |                 | 1 1      |                    |           |       |     |
| 19. Type of Inspection<br>(activity code) E 0 1   | 20. Event Num | nber      | 76       | 54             | 3        | 2 1    | 21.      | Primary or Mill |          |                    |           |       |     |
| 22. Signature   |               | ļ         | <u> </u> | <u>, , , ,</u> | <u> </u> |        | <u> </u> |                 | Į        | 23. AR Numbe       |           | 3 1   | 9 0 |
| MSHA Form 7000-3 Mar 85 (Revised)   |               |           |          |                |          |        |          |                 |          |                    | 2         | JI    | 90  |

### 104(a) CITATION - 30 CFR 70.100(a) for NDO

### Mine Citation/Order Continuation

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I Subsequent Activ     | on/Continuation Data |                              |         |         |      |         |      |     |     |     |           |               |   |   |    |      |   |   |    |      |      |     |   |   |   |   |     |   |   |
|--------------------------------|----------------------|------------------------------|---------|---------|------|---------|------|-----|-----|-----|-----------|---------------|---|---|----|------|---|---|----|------|------|-----|---|---|---|---|-----|---|---|
| 1. Subsequent Action           | 1a. Continuation     | 2. Dated<br>(Original Issue) | мо<br>0 | Da<br>0 |      | Yr<br>0 | 8    |     |     | 3   | 8. C<br>1 | itatio<br>Num |   |   | ər |      |   | 1 | 4  | 2    | 3    | 4   | 5 | 7 | 5 | - | . ( | 0 | 1 |
| 4. Served To<br>Mike McGregor, |                      | 5. O                         | •       |         | Roc  | ck Co   | al ( | Con | npa | iny |           |               |   |   |    | <br> |   |   |    |      |      |     |   |   |   |   |     |   |   |
| 6. Mine                        |                      |                              |         | 7. M    | line | ID      |      |     |     |     |           |               |   |   |    |      |   |   |    |      |      |     |   |   |   |   |     |   |   |
| No. 1                          |                      |                              |         |         |      |         |      | 1 : | 5   | -   | 0         | 3             | 5 | 3 | 6  | 6    | - |   | (c | onti | acto | or) |   |   |   |   |     |   |   |
| Section II Justification for A |                      |                              |         |         |      |         |      |     |     |     |           |               |   |   |    |      |   |   |    |      |      |     |   |   |   |   |     |   |   |

The results of 5 valid samples collected by the operator from September 5, 2008, through September 7, 2008, indicate that the average concentration of respirable dust that the #5 Joy Shuttle Car Operator is now exposed is 0.9 mg/m<sup>3</sup> which is in compliance with the current applicable standard of 2.0 mg/m<sup>3</sup> for this occupation. This citation is terminated.

|                       |                  |    |         |       |               |         |      |    |   |     |      |   |    |       |       |    |    |              | ŝ         | See C | ontinuati | on Fo | orm | [ |   |
|-----------------------|------------------|----|---------|-------|---------------|---------|------|----|---|-----|------|---|----|-------|-------|----|----|--------------|-----------|-------|-----------|-------|-----|---|---|
| Section III Subsequ   | ent Action Taken |    |         |       |               |         |      |    |   |     |      |   |    |       |       |    |    |              |           |       |           |       |     |   |   |
| 8. Extended To        | A. Date          | Mo | Da      | Yr    | B. Time (24 H | łr. Clo | ock) |    |   |     |      |   |    | C. Va | acate | ed |    | D. Termina   | ated      | Х     | E. Modifi | ed    | [   |   |   |
| Section IV Inspection | on Data          |    |         |       |               |         |      |    |   |     |      |   |    |       |       |    |    |              |           |       |           |       |     |   |   |
| 9. Type of Inspection | E O              |    | Event N | umber |               | 7 (     | 65   | 4  | 3 | 2   | 1    |   |    |       |       |    |    |              |           |       |           |       |     |   |   |
| 11. Signature         |                  |    |         |       |               | AR      | Numb | er |   | 12. | Date | , | Мо |       | Da    |    | Yr | 13. Time (24 | Hr. Clock | <)    |           |       |     |   | r |
| Thomas Mo             | orris            |    |         |       |               | 2       | 3 1  | 9  | 0 |     |      |   | 0  | 9     | 1     | 4  | 0  | 8            |           |       |           | 0     | 8   | 0 | 0 |

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

### 70.100(a) NDO Termination

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V  | iolation | Data   |        |                          |        |        |  |   |
|--------------|----------|--------|--------|--------------------------|--------|--------|--|---|
| 1. Date      | Мо       | Da     | Yr     | 2. Time (24 Hr. Clock)   |        |        | 3. Citation/Order  |   |
|              | 09       | 0 4    | 0 8    |                          | 0 7    | 0 0    | Number 1 2 3 4 5 7 5   | 5 |
| 4. Served To |          |        |        |                          |        |        | 5. Operator  |   |
| Mike Mo      | Greg     | or, Sa | fety D | irector                  |        |        | Black Rock Coal Company  |   |
| 6. Mine      |          |        |        |                          |        |        | 7. Mine ID   |   |
| No. 1        |          |        |        |                          |        |        | 1 5 - 0 3 5 3 6 - (contractor)                                     |   |
| 8. Condition | or Prac  | tice   |        |                          |        |        | 8a. Written Notice (103g)  |   |
| The results  | of fiv   | e vali | d sam  | ples collected by an MSI | IA Ins | specto | or on August 6, 2008, on Northeast Mains (MMU 001-0) indicate that |   |

the average respirable dust conentration in the environments of the miners working on this unis is  $3.5 \text{ mg/m}^3$  which exceeds the allowable concentration of  $2.0 \text{ mg/m}^3$ . The highest concentration ( $4.0 \text{ mg/m}^3$ ) of respirable dust was measured in the environment of the #5 Joy shuttle car operator (Occupation Code 050). The mine operator must take immediate action to lower the exposure in the section environment to  $2.0 \text{ mg/m}^3$  or less and then sample the #5 Joy shuttle car operator each production shift until five valid sample have been collected and submitted to the Pittsburgh Dust Processing Laboratory. A copy of the sample results is attached to this

citation. Information to be coded on the dust data card:

Type of Sample = 2, MMU/DA/SA = 001-1, Occupation Code = 050

|  |                     |                        | See Contir                   | nuation Forr | n (MSHA Form 7000-     | 3a)      |     |
|--|---------------------|------------------------|------------------------------|--------------|------------------------|----------|-----|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act -  |                     |                        | art/Section of<br>tle 30 CFR | -            | 7 0 . 1 0 0 (          | a )      |     |
| Section II Inspector's Evaluation  |                     |                        |                              |              |                        |          |     |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely                                  | F                   | Reasonabl              | y Likely X                   | Highly       | Likely C               | Occurred |     |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays                           | Lost Wor            | rkdays or F            | Restricted Duty              | Pe           | ermanently Disabling   | X Fatal  |     |
| C. Significant and Substantial (See Reverse): Yes X  | No                  |                        |                              | D. Numbe     | er of Persons Affected | 1 0      | 0 8 |
| 11. Negligence (check one)<br>A. None B. Low C. Mo   | oderate             | Х                      | D. High                      |              | E. Reckless Disi       | regard   |     |
| 12. Type of Action 1 0 4 - a - ,   |                     | pe of Issua<br>itation | ance (check one)             | Order        | 0 Safegi               | uard     |     |
| 14. Initial Action       D.         A. Citation       B. Order         C. Safeguard       D.             | . Written<br>Notice | <u></u> Е.             | Citation/<br>Order<br>Number |              | F. Dated               | Mo Da    | Yr  |
| 15. Area or Equipment  |                     |                        |                              |              |                        |          |     |
| 16. Termination Due     A. Date     Mo     Da     Yr       0     9     1     2     0     8     Hr. Clock |                     | 7 0 0                  |                              |              |                        |          |     |
| Section III Termination Action   |                     |                        |                              |              |                        |          |     |
| 17. Action to Terminate  |                     |                        |                              |              |                        |          |     |
| 18. Terminated A. Date Mo Da Yr B. Time (24 Hr Clo   | ock)                |                        |                              |              |                        |          |     |
| Section IV Automated System Data   |                     |                        |                              |              |                        |          |     |
| 19. Type of Inspection   20. Event Number  |                     | 21. P                  | rimary or Mill               |              |                        |          |     |
| (activity code) E 0 1 7 6 5  | 5 4 3 2             | 1                      |                              |              |                        |          |     |
| 22. Signature  |                     | -                      |                              |              | 23. AR Number          | 2 3 1    | 9 0 |
| MSHA Form 7000-3 Mar 85 (Revised)  |                     |                        |                              |              |                        |          |     |

104(a) CITATION - 30 CFR 70.100(a) for NDO Example 2

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

| Section I V     | iolation  | Data    |          |                  |             |          |          |                                |                           |           |          |                  |
|-----------------|-----------|---------|----------|------------------|-------------|----------|----------|--------------------------------|---------------------------|-----------|----------|------------------|
| 1. Date         | Мо        | Da      | Yr       | 2. Time (24 Hr.  | Clock)      |          |          |                                | 3. Citation/Order         |           |          |                  |
|                 | 1 1       | 1 1     | 0 8      |                  |             | 0        | 7 0 0    |                                | Number                    | 1 2 3     | 3 4 5    | 7 5              |
| 4. Served To    |           |         |          |                  |             |          |          | 5. Operator                    |                           |           |          |                  |
| Mike Mo         | Grego     | or, Sa  | fety D   | virector         |             |          |          | Black Rock Coal Compa          | ny                        |           |          |                  |
| 6. Mine         |           |         |          |                  |             |          |          | 7. Mine ID                     |                           |           |          |                  |
| No. 1           |           |         |          |                  |             |          |          | 1 5 - 0 3 5                    |                           | ractor)   |          |                  |
| 8. Condition    |           |         | 1        | 1 11 / 1         |             | <b>T</b> |          |                                | 8a. Written Notic         |           | ,        |                  |
|                 |           |         |          | •                | 5           | -        | • • •    | from October 15, 2008, thro    | 0                         |           |          |                  |
|                 |           |         |          |                  |             |          |          | ) is exposed to an average re  |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          | samples were collected on th   |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          | rk on this section each produ  |                           |           |          |                  |
|                 |           |         |          |                  | -           |          |          | mmediate action to lower th    | -                         |           |          |                  |
|                 |           |         |          |                  |             |          |          | nd then sample each produc     |                           |           |          |                  |
| been collec     | ted ar    | id sub  | mitte    | d to the Pittsbu | urgh Dust   | Proce    | essing   | Laboratory. A copy of the sa   | mple results is attaced   | to this o | citatior | n.               |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          | See Continua                   | ation Form (MSHA Form 70  | 00-3a)    |          |                  |
| 9. Violation    | A. Hea    |         | х        |                  |             |          |          |                                |                           |           |          |                  |
|                 | Saf       | -       |          | B. Section       |             |          |          | C. Part/Section of             | 7 0 . 1 0 0               |           |          |                  |
| Section II I    | Oth       |         | aluation | of Act           |             |          |          | Title 30 CFR                   |                           | ( a )     |          |                  |
| 10. Gravity:    | lopool    |         | liuutioi |                  | _           |          |          |                                |                           |           |          |                  |
| A. Injury o     | r Illness | s (has) | (is): I  | No Likelihood    | Ur          | nlikely  |          | Reasonably Likely X            | Highly Likely             | Occurr    | ed       |                  |
| B. Injury       |           |         |          |                  |             |          |          |                                | —                         |           |          |                  |
| sona            | bly be e  | expecte | ed to be | e: No Lost V     | Vorkdays    |          | Lost     | Workdays or Restricted Duty    | Permanently Disable       | ng X      | Fatal    |                  |
| C. Signif       | icant a   | nd Sub  | stantia  | I (See Reverse): | Yes         | Х        | No       |                                | D. Number of Persons Affe | cted      | 0        | ) 1 6            |
| 11. Negligen    |           | eck on  | e)       | - · · ·          |             |          |          |                                | — <u> </u>                |           | . –      | 7                |
| A. None         | ;         |         |          | B. Low           |             | С. Мо    | oderate  | X D. High                      | E. Reckless               | Disregard | 1        |                  |
| 12. Type of A   | ction     |         |          |                  |             |          | 13       | . Type of Issuance (check one) | _                         |           |          |                  |
|                 |           | 1       | 0 4      | -a-,             | -     -     | -        | -        | Citation X                     | Order 0 Sa                | feguard   |          |                  |
| 14. Initial Act | ion       |         |          |                  |             | D        | . Writte | n E. Citation/                 | F. Dated                  | Мо        | Da       | Yr               |
| A. Citat        | on        | B       | Order    | C. Safe          | eguard      |          | Notice   | e Order<br>Number              |                           |           |          |                  |
| 15. Area or E   | quipme    | ent     |          |                  |             |          |          | Number                         |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
| 16. Terminat    | on Due    | •       |          | Mo Da Yr         |             |          |          |                                |                           |           |          |                  |
|                 |           | Α.      | Date     |                  |             | ne (24   |          |                                |                           |           |          |                  |
| Section III     | Termina   | ation A | ction    | 1 1 2 3 0        | 8 Hr        | . Cloc   | K)       | 0 7 0 0                        |                           |           |          |                  |
| 17. Action to   |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
| 18. Terminat    | od        |         | М        | o Da Yr          |             |          |          |                                |                           |           |          |                  |
|                 |           | A. Dat  |          |                  | B. Time (24 | 4 Hr Cl  | lock)    |                                |                           |           |          |                  |
|                 |           |         |          |                  |             |          |          |                                |                           |           |          |                  |
| Section IV      |           |         | /stem [  |                  |             |          |          |                                |                           |           |          |                  |
| 19. Type of li  | •         |         |          | 20. Event N      |             |          |          | 21. Primary or Mill            |                           |           |          |                  |
|                 | y code    | )       | E 0      | 1                | 7           | 6 5      | 5 4 3    | 2 1                            |                           |           |          |                  |
| 22. Signature   | ;         |         |          |                  |             |          |          |                                | 23. AR Numbe              |           |          |                  |
|                 |           |         | _ /=     |                  |             |          |          |                                |                           | 2         | 2 3 1    | <mark>9</mark> 0 |
| MSHA Form       | 7000-3    | Mar 8   | 5 (Revi  | sed)             |             |          |          |                                |                           |           |          |                  |

### 104(a) CITATION - 30 CFR 70.100(a) for DO

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V  | iolation | n Data |         |                        |         |             |     |      |      |     |     |      |         |          |          |       |      |     |     |    |
|--------------|----------|--------|---------|------------------------|---------|-------------|-----|------|------|-----|-----|------|---------|----------|----------|-------|------|-----|-----|----|
| 1. Date      | Мо       | Da     | Yr      | 2. Time (24 Hr. Clock) |         |             |     |      |      |     | 3.  | Cita | ition/C | Order    |          |       |      |     |     |    |
|              | 1 1      | 1 1    | 0 8     |                        | 0 7 0 0 |             |     |      |      |     |     | Nur  | nber    |          |          | 1     | 2 3  | 3 4 | 5 7 | 75 |
| 4. Served To |          |        |         |                        |         | 5. Operator |     |      |      |     |     |      |         |          |          |       |      |     |     |    |
| Mike Mo      | Greg     | or, Sa | ifety D | Director               |         | Black R     | ock | Coal | l Co | mpa | any |      |         |          |          |       |      |     |     |    |
| 6. Mine      |          |        |         |                        |         | 7. Mine ID  |     |      |      |     |     |      |         |          |          |       |      |     |     |    |
| No. 1        |          |        |         |                        |         |             | 1   | 5 -  | 0    | 3   | 5 3 | 8 6  | -       |          | (cont    | racto | r)   |     |     |    |
| 8. Condition | or Prac  | tice   |         |                        |         |             |     |      |      |     |     |      | 8a      | . Writte | en Notic | ;e (1 | 03g) |     |     |    |
|              |          |        |         |                        |         |             |     |      |      |     |     |      |         |          |          |       |      |     |     |    |

The Part 90 Miner identified in Advisory Number 0012, dated November 8, 2008, was exposed to an average respirable dust concentration of 1.5 mg/m<sup>3</sup>. This finding is based upon the results of five valid samples collected by the operator [or MSHA Insector]. Mine management must take corrective action to lower the respirable dust concentration in the environemt of the affected Part 90 Miner to 1.0 mg/m<sup>3</sup> or less as required by 30 CFR 90.201(d) and collect and submit five valid samples to the Pittsburgh Dust Processing Laboratory by the termination date specified below.

|  | See Conti                                | nuation Form (MSHA Form 7000-3a)    |
|--|--|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act -  | C. Part/Section of<br>Title 30 CFR       | 90.100                              |
| Section II Inspector's Evaluation  |  |                                     |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely  | Reasonably Likely X                      | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost 1  | Norkdays or Restricted Duty              | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes X No   |  | D. Number of Persons Affected 0 0 1 |
| 11. Negligence (check one)     B. Low     C. Moderate  | X D. High                                | E. Reckless Disregard               |
| 12. Type of Action         1         0         4         -         a         -         ,         -         -         13.   | Type of Issuance (check one)<br>Citation | Order 0 Safeguard                   |
| 14. Initial Action       D. Written         A. Citation       0       B. Order       0       C. Safeguard       0       Notice   | E. Citation/<br>Order<br>Number          | F. Dated Mo Da Yr                   |
| 15. Area or Equipment  | · · · ·                                  |                                     |
| 16. Termination Due A. Date Mo Da Yr<br>A. Date B. Time (24<br>1 2 2 3 0 8 Hr. Clock)  | 0 7 0 0                                  |                                     |
| Section III Termination Action   |  |                                     |
| 17. Action to Terminate  |  |                                     |
|  |  |                                     |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     I   B. Time (24 Hr Clock)  |  |                                     |
| Section IV Automated System Data   | 1 1                                      |                                     |
| 19. Type of Inspection<br>(activity code)         E         0         1         20. Event Number         1           (activity code)         E         0         1         7         6         5         4         3 | 21. Primary or Mill                      |                                     |
| 22. Signature  | -1 -1                                    | 23. AR Number                       |
| MSHA Form 7000-3 Mar 85 (Revised)  |  | 2 3 1 9 0                           |

### 104(a) CITATION - 30 CFR 90.100 for Part 90 Miner

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V  | iolation | n Data |         |                        |   |     |     |             |      |      |    |      |    |      |      |      |        |              |      |      |     |   |   |   |   |
|--------------|----------|--------|---------|------------------------|---|-----|-----|-------------|------|------|----|------|----|------|------|------|--------|--------------|------|------|-----|---|---|---|---|
| 1. Date      | Мо       | Da     | Yr      | 2. Time (24 Hr. Clock) |   |     |     |             |      |      |    |      |    | 3.   | Cita | tior | n/Orde | er           |      |      |     |   |   |   |   |
|              | 0 6      | 1 5    | 0 8     |                        | 1 | 0 3 | 3 0 |             |      |      |    |      |    |      | Nur  | nbe  | er     |              | 1    | 2    | 3   | 4 | 5 | 5 | 9 |
| 4. Served To |          |        |         |                        |   |     |     | 5. Operator |      |      |    |      |    |      |      |      |        |              |      |      |     |   |   |   |   |
| Alice Mo     | Greg     | or, Sa | afety D | Director               |   |     |     | Beautifu    | il V | ïsta | Со | al C | om | ipai | ny   |      |        |              |      |      |     |   |   |   |   |
| 6. Mine      |          |        |         |                        |   |     |     | 7. Mine ID  |      |      |    |      |    |      |      |      |        |              |      |      |     |   |   |   |   |
| No. 1        |          |        |         |                        |   |     |     |             | 1    | 5    | -  | 1 3  | 5  | 2    | 6    | -    |        | (con         | trac | tor) |     |   |   |   |   |
| 8. Condition | or Prac  | tice   |         |                        |   |     |     |             |      |      |    |      |    |      |      |      | 8a. W  | /ritten Noti | ce ( | (103 | 3g) |   |   |   |   |
|              |          |        |         |                        |   |     |     | 4           |      |      |    |      |    |      |      |      |        |              | -    | -    |     |   | - |   |   |

The mine operator failed to comply with the requirements of the approved respirable dust control plan provide for the Caterpillar bulldozer (S/N 12W3081). The air conditioning unit used to pressurize and maintain the comfort of the operators' cab was not maintained in operating condition as required by the approved plan. This piece of equipment was observed moving material in the #2 pit and was being operated with the doors and windows open. This bulldozer is used on both the day and afternoon production shifts. This piece of equipment was established as a Designated Work Position and cited for non-compliance with the respirable dust standard on May 1, 2008.

| See Co  | ntinuation Form (MSHA Form 7000-3a) |
|---|-------------------------------------|
| 9. Violation A. Health X B. Section C. Part/Section of Other of Act - Title 30 CFR  | 7 1 . 3 0 1 ( c )                   |
| 10. Gravity:  |                                     |
| A. Injury or Illness (has) (is): No Likelihood Unlikely Reasonably Likely X   | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty   | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 2 |
| 11. Negligence (check one)  |                                     |
| A. None B. Low C. Moderate X D. High  | E. Reckless Disregard               |
| 12. Type of Action       1       0       4       -       a       -       -       13. Type of Issuance (check one Citation         12. Type of Action       X       -       -       -       Citation       X   | e)<br>Order 0 Safeguard             |
| 14. Initial Action       D. Written       E. Citation/         A. Citation       B. Order       C. Safeguard       Notice         Witten       Number       Order   | F. Dated Mo Da Yr                   |
| 15. Area or Equipment   |                                     |
| 16. Termination Due A. Date Mo Da Yr B. Time (24  |                                     |
| 0 6 1 5 0 8 Hr. Clock) 1 4 0 0  |                                     |
| Section III Termination Action<br>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<br>(activity code)         20. Event Number         20. Event Number |                                     |
| 22. Signature   | 23. AR Number                       |
|   | 2 3 1 9 0                           |
| MSHA Form 7000-3 Mar 85 (Revised)   |                                     |

### 104(a) CITATION - 30 CFR 71.301(c)

# U.S. Department of Labor

Mine Safety and Health Administration

| Section I Vi                   | olation   | Data  |        |                             |      |                              |             |      |        |      |      |     |       |       |       |        |        |      |      |     |      |    |     |   |
|--------------------------------|---|-------|--------|-----------------------------|------|------------------------------|-------------|------|--------|------|------|-----|-------|-------|-------|--------|--------|------|------|-----|------|----|-----|---|
| 1. Date                        | Мо  | Da    | Yr     | 2. Time (24 Hr. Clock)      |      |                              |             |      |        |      |      | 3.  | . Cit | ation | /Orde | ər     |        |      |      |     |      |    |     |   |
|                                | 0 9   | 1 5   | 0 8    |                             | 0 7  | 3 0                          |             |      |        |      |      |     | Nu    | mbe   | r     |        |        | 1    | 2    | 3   | 4    | 5  | 8   | 0 |
| 4. Served To                   |   |       |        |                             |      |                              | 5. Operator |      |        |      |      |     |       |       |       |        |        |      |      |     |      |    |     |   |
| Mike McGregor, Safety Director |   |       |        |                             |      | Beautiful Vista Coal Company |             |      |        |      |      |     |       |       |       |        |        |      |      |     |      |    |     |   |
| 6. Mine                        |   |       |        |                             |      |                              | 7. Mine ID  |      |        |      |      |     |       |       |       |        |        |      |      |     |      |    |     |   |
| No. 1                          |   |       |        |                             |      |                              |             | 1    | 5 -    | 0    | 3 5  | 5 3 | 3 6   | -     |       |        | (con   | trac | tor) |     |      |    |     |   |
| 8. Condition of                | or Prac   | tice  |        |                             |      |                              |             |      |        |      |      |     |       | 8     | Ba. W | ritter | n Noti | ce ( | (10  | 3g) |      |    |     |   |
| The air qua                    | ntity   | provi | ded fo | or the J. H. Fletcher, dual | boom | , roof                       | bolting mad | hine | e to c | ontr | ol 1 | res | pira  | ble v | vas   | not    | in co  | mp   | lia  | nce | e wi | th | the | ! |
| approved v                     | approved ventilation plan. Only 1,950 CFM of air was measured with a properly calibrated anemometer at the inby end of the line |       |        |                             |      |                              |             |      |        |      |      |     |       |       |       |        |        |      |      |     |      |    |     |   |

approved ventilation plan. Only 1,950 CFM of air was measured with a properly calibrated anemometer at the inby end of the line curtain. The approved ventilation plan requires a minimum air quantity of 3,600 CFM at the inby end of the line curtain where roof bolts are being installed. This condition was observed on MMU 007-0 in the #5 entry where the roof bolting machine operators were installing their 3rd row of permanent supports. This machine was established as a roof bolting machine designated area (907-0) on January 15, 2008, and is currently on a reduced standard of  $0.7 \text{ mg/m}^3$  due to quartz. Insufficient air quantity for this particular machine was also found during this inspection event on September 4, 2008.

| See Co  | ntinuation Form (MSHA Form 7000-3a)     |
|---|---|
| 9. Violation A. Health X B. Section C. Part/Section of Other of Act - Title 30 CFR  | 7 5 . 3 7 0 ( a ) ( 1)                  |
| Section II Inspector's Evaluation   |   |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         Reasonably Likely         X                      | Highly Likely Occurred                  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty                                       | Permanently Disabling X Fatal           |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 2     |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       X         D. High   | E. Reckless Disregard                   |
| 12. Type of Action       1     0     4     -     a     -     -     13. Type of Issuance (check on Citation  | e)<br>Order 0 Safeguard                 |
| 14. Initial Action       D. Written       E. Citation/         A. Citation       B. Order       C. Safeguard       Notice         Number       Number | F. Dated Mo Da Yr                       |
| 15. Area or Equipment   |   |
| 16. Termination Due         Mo         Da         Yr         B. Time (24         0         7         4         5                                      |   |
| Section III Termination Action  |   |
| The line curtain and box check curtains were tightened. The foreman measured 3,927 C  | FM at the inby end of the line curtain. |
| 18. Terminated         A. Date         Mo         Da         Yr         B. Time (24 Hr Clock)         0         7         4         0                 |   |
| Section IV Automated System Data  |   |
| 19. Type of Inspection<br>(activity code)         E         0         1         7         6         5         4         3         2         2         |   |
| 22. Signature   | 23. AR Number 2 3 1 9 0                 |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |

### 104(a) CITATION - 30 CFR 75.370(a)(1)

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I V  | /iolatior | n Data |         |                        |   |   |   |   |             |      |      |   |     |    |    |      |          |      |      |        |          |       |     |    |   |   |   |   |
|--------------|-----------|--------|---------|------------------------|---|---|---|---|-------------|------|------|---|-----|----|----|------|----------|------|------|--------|----------|-------|-----|----|---|---|---|---|
| 1. Date      | Мо        | Da     | Yr      | 2. Time (24 Hr. Clock) |   |   |   |   |             |      |      |   |     |    | 3  | 3. ( | Citati   | ion/ | 'Ord | er     |          |       |     |    |   |   |   |   |
|              | 09        | 2 5    | 0 8     |                        | 0 | 8 | 3 | 0 |             |      |      |   |     |    |    | 1    | Num      | ber  |      |        |          | 1     | 2   | 3  | 4 | 7 | 8 | 2 |
| 4. Served To | )         |        |         |                        |   |   |   |   | 5. Operator |      |      |   |     |    |    |      |          |      |      |        |          |       |     |    |   |   |   |   |
| Mike M       | cGreg     | or, Sa | ifety D | Director               |   |   |   |   | Beautifu    | il V | ista | С | oal | Сс | mp | ban  | y        |      |      |        |          |       |     |    |   |   |   |   |
| 6. Mine      |           |        |         |                        |   |   |   |   | 7. Mine ID  |      |      |   |     |    |    |      |          |      |      |        |          |       |     |    |   |   |   |   |
| No. 1        |           |        |         |                        |   |   |   |   |             | 1    | 5    | - | 0   | 3  | 5  | 3    | <b>6</b> | -    |      |        | (cont    | ract  | or) |    |   |   |   |   |
| 8. Condition | or Prac   | tice   |         |                        |   |   |   |   |             |      |      |   |     |    |    |      |          | 8    | a. V | Vritte | en Notio | ce (* | 103 | g) |   |   |   |   |
|              |           |        |         |                        |   |   |   | - |             |      |      |   |     |    |    |      |          |      |      |        |          |       |     |    |   |   |   |   |

The mine operator failed to replace missing labels on five 55-gallon drums of perchloroethylene stored on the ground floor of the preparation plant. The material data safety sheet (MSDS) provided by the manufacturer indicates that perchloroethylene is a health hazard. The drums were sealed, stored in a protected area, and there was no evidence of material leakage. This violation was observed during a normal production shift when 5 miners are frequently working or traveling in the area. The plant normally operates two 10-hour production shifts per day.

|   | See Conti                                    | nuation Form (MSHA Form 7000-3a)    |
|---|--|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section<br>Other of Act -   | C. Part/Section of<br>Title 30 CFR           | 4 7 . 4 1 ( a ) ( 1)                |
| Section II Inspector's Evaluation   |  |                                     |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely X                          | Highly Likely Occurred              |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays  | st Workdays or Restricted Duty               | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes No  | x  | D. Number of Persons Affected 0 1 0 |
| 11. Negligence (check one)  | ^  |                                     |
| A. None B. Low C. Modera  | e X D. High                                  | E. Reckless Disregard               |
| 12. Type of Action  | 13. Type of Issuance (check one)<br>Citation | Order 0 Safeguard                   |
| 14. Initial Action       D. Wri         A. Citation       B. Order       C. Safeguard   |  | F. Dated Mo Da Yr                   |
| 15. Area or Equipment   |  |                                     |
| 16. Termination Due         Mo         Da         Yr           A. Date         0         9         2         6         0         8         Hr. Clock) | 0 7 0 0                                      |                                     |
| 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<br>(activity code)         E         0         1         7         6         5         4                                       | 3 2 2  |                                     |
| 22. Signature   | <u>~  -  - </u>                              | 23. AR Number 2 3 1 9 0             |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |                                     |

### 104(a) CITATION - HazCom

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

| Section I Violation Data                                     |        |        |      |  |
|--|--------|--------|------|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)                      |        |        |      | 3. Citation/Order  |
| 0 7 2 1 0 8  | 0      | 8 4    | 5    |  |
| 4. Served To   | •      | •      | -    | 5. Operator  |
| John Smith, Assistant Foreman                                |        |        |      | J & S Coal Company   |
| 6. Mine  |        |        |      | 7. Mine ID   |
| No. 1  |        |        |      | 4 4 - 0 3 5 3 6 - (contractor)   |
| 8. Condition or Practice                                     |        |        |      | 8a. Written Notice (103g)  |
| The biskyrall drill energy to react protocted from the inhal | tion   | of ros |      | rable drill dust. Visual observation indicated an excessive amount of dust         |
|  |        |        |      | environmental cab, and the water-holding tank was empty. DWP is on a               |
| reduced dust standard of 1.0 mg/m3. The drill operator was   |        |        |      |  |
|  |        |        |      |  |
| Drill operator: DWP 001-0, occupational code 384             |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health                                       |        |        |      |  |
| Safety B. Section  |        |        |      | C. Part/Section of   |
| Other of Act -   |        |        |      | Title 30 CFR         7         2         6         2         0         1         1 |
| Section II Inspector's Evaluation<br>10. Gravity:            |        |        |      |  |
| ,  | likely |        |      | Reasonably Likely X Highly Likely Occurred   |
| B. Injury or Illness could rea-                              |        |        |      |  |
| sonably be expected to be: No Lost Workdays                  |        | Lo     | ost  | Workdays or Restricted Duty Permanently Disabling X Fatal                          |
| C. Significant and Substantial (See Reverse): Yes            | Х      | No     |      | D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)                                   |        |        |      |  |
| A. None B. Low   | С. М   | odera  | te   | X D. High E. Reckless Disregard  |
| 12. Type of Action   |        |        | 13.  | . Type of Issuance (check one)   |
| 1 0 4 - a - ,  |        | -      |      | Citation X Order Safeguard   |
| 14. Initial Action   |        | ). Wri | itto | n E. Citation/ F. Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard                            |        | Not    |      |  |
| 15. Area or Equipment  |        |        |      |  |
| T5. Area or Equipment  |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
| 16. Termination Due Mo Da Yr<br>A. Date       B. Tim         | e (24  | ŀ      |      |  |
| 0 7 2 2 0 8 Hr.  | Cloc   |        |      | 0 8 0 0  |
| Section III Termination Action<br>17. Action to Terminate    |        |        |      |  |
|  |        |        |      |  |
|  |        |        |      |  |
| 18. Terminated Mo Da Yr                                      |        |        |      |  |
| A. Date B. Time (24  | HrU    | IOCK)  |      |  |
| Section IV Automated System Data                             |        |        |      |  |
| 19. Type of Inspection 20. Event Number                      |        |        |      | 21. Primary or Mill  |
| (activity code) E 0 1 0                                      | 8      | 8 8    | 8    | 0 0  |
| 22. Signature  |        |        |      | 23. AR Number  |
| James Lee  |        |        |      | 2 0 7 7 7  |
| MSHA Form 7000-3 Mar 85 (Revised)                            |        |        |      |  |

104(a) CITATION - DRILL DUST VIOLATION

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

| Section I Violation Data  |  |   |
|---|--|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   |  | 3. Citation/Order   |
|   | 2 0 0                                  | Number 9 0 7 1 0 0 6  |
| 4. Served To  |  | 5. Operator   |
| Ralph Bunny, Safety Director  |  | Bambu Company   |
| 6. Mine   |  | 7. Mine ID  |
| No. 300   |  | 4 5 - 0 0 0 2 0 - (contractor)                                    |
| 8. Condition or Practice  |  | 8a. Written Notice (103g)   |
| The operator failed to submit for approval a written respirable dus             | t contol r                             | plan for the Part 90 miner identified in Advisory No. 0012, dated |
| 07/15/08. Citation No. 9071004, based on this Advisory, was issu                |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  |   |
|   |  | See Continuation Form (MSHA Form 7000-3a)                         |
| 9. Violation A. Health Safety B. Section  |  | C. Part/Section of  |
| Other of Act -  |  | Title 30 CFR 9 0 . 3 0 0 - a                                      |
| Section II Inspector's Evaluation   | 1 1                                    |   |
| 10. Gravity:  |  |   |
| A. Injury or Illness (has) (is): No Likelihood Unlikely                         |  | Reasonably Likely Highly Likely Occurred                          |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays  | Lost                                   | Workdays or Restricted Duty X Permanently Disabling Fatal         |
|   |  |   |
| C. Significant and Substantial (See Reverse): Yes<br>11. Negligence (check one) | No                                     | X D. Number of Persons Affected                                   |
|   | loderate                               | X D. High E. Reckless Disregard                                   |
| 12. Type of Action  | 12                                     | . Type of Issuance (check one)                                    |
|   | -                                      | Citation X Order Safeguard  |
|   |  |   |
| 14. Initial Action E<br>A. Citation B. Order C. Safeguard                       | <ol> <li>Written<br/>Notice</li> </ol> |   |
|   | NOLICE                                 |   |
| 15. Area or Equipment   |  |   |
|   |  |   |
|   |  |   |
| 16. Termination Due   Mo Da Yr  <br>A. Date     B. Time (24                     | 1                                      |   |
| 0 9 0 4 0 8 Hr. Cloc  |  | 0 8 0 0   |
| Section III Termination Action  | -                                      |   |
| 17. Action to Terminate   |  |   |
|   |  |   |
| 18. Terminated Mo Da Yr   |  |   |
| A. Date B. Time (24 Hr C  | IOCK)                                  |   |
| Section IV Automated System Data  |  |   |
| 19. Type of Inspection 20. Event Number   |  | 21. Primary or Mill   |
| (activity code) E 2 2 5 0   | 3 2 4                                  | 2 6   |
| 22. Signature   |  | 23. AR Number   |
| Thomas Morris   |  | 0 2 4 2 0   |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |   |

### 104(a) CITATION - FAILURE TO SUBMIT RESPIRABLE DUST CONTROL PLAN

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

| Section I Violation Data   |        |        |  |
|--|--------|--------|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |        |        | 3. Citation/Order  |
|  | 1 4    | 0 0    | Number 9 0 7 1 0 0 5   |
| 4. Served To   |        |        | 5. Operator  |
| Ralph Bunny, Safety Director   |        |        | Bambu Company  |
| 6. Mine  |        |        | 7. Mine ID   |
| No. 300  |        |        | 4 5 - 0 0 0 2 0 - (contractor)   |
| 8. Condition or Practice   |        |        | 8a. Written Notice (103g)  |
| The Part 90 miner identified in Advisory No. 0012 dated 07/15                                  | 5/08   | wase   | exposed to an average respirable dust concentration of $1.4 \text{ mg/m}^3$ .                |
|  |        |        | by the operator [or inspector]. 30 CFR 90.201(d) requires management                         |
| to take corrective action, and to collect five valid respirable due                            | ist sa | mples  | in the Part 90 miner's work position. These samples must be                                  |
| submitted to the Pittsburgh Respirable Dust Processing Labora                                  | atory  | by the | e date of termination.   |
|  |        | :      | ditional consulta  |
| The operator failed to take corrective actions, and also failed to                             | subi   | mit ad | ditional samples.  |
|  |        |        |  |
|  |        |        |  |
|  |        |        |  |
|  |        |        |  |
|  |        |        |  |
|  |        |        |  |
|  |        |        | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health   |        |        |  |
| Safety B. Section  |        |        | C. Part/Section of   |
| Other         of Act         -           Section II Inspector's Evaluation         -         - |        |        | Title 30 CFR         9         0         .         1         0         0         1         1 |
| 10. Gravity:   |        |        |  |
| A. Injury or Illness (has) (is): No Likelihood Unlike  | ely    |        | Reasonably Likely Highly Likely Occurred   |
| B. Injury or Illness could rea-  |        |        |  |
| sonably be expected to be: No Lost Workdays  |        | Lost   | Workdays or Restricted Duty Permanently Disabling Fatal                                      |
| C. Significant and Substantial (See Reverse): Yes  |        | No     | D. Number of Persons Affected  |
| 11. Negligence (check one)   |        |        |  |
| A. None B. Low C.  | . Mo   | derate | D. High E. Reckless Disregard  |
| 12. Type of Action   |        | 13     | B. Type of Issuance (check one)  |
| 1 0 4 - b - ,     -  | -      |        | Citation Order X Safeguard   |
| 14. Initial Action   | D.     | Writte | en E. Citation/ F. Dated Mo Da Yr  |
| A. Citation X B. Order C. Safeguard  |        | Notic  | e Order 9 0 7 1 0 0 4 0 7 1 5 0 8  |
|  |        |        | Number Number  |
| 15. Area or Equipment<br>The Part 90 miner identified in the attached Advisory No.             | . 11   |        |  |
|  |        |        |  |
|  |        |        |  |
| 16. Termination Due Mo Da Yr<br>A. Date J J B. Time  | (24    |        |  |
| Hr. C  | •      | )      |  |
| Section III Termination Action   |        |        |  |
| 17. Action to Terminate  |        |        |  |
|  |        |        |  |
| 18. Terminated Mo Da Yr  |        |        |  |
| A. Date B. Time (24 H  | Ir Clo | ock)   |  |
| Section IV Automated System Data   |        |        |  |
| 19. Type of Inspection 20. Event Number  |        |        | 21. Primary or Mill  |
| (activity code) E 2 2 5 0  | 0 3    | 24     |  |
| 22. Signature  |        |        | 23. AR Number  |
| Thomas Morris  |        |        | 0 2 4 2 0  |
| MSHA Form 7000-3 Mar 85 (Revised)  |        |        |  |

### 104(b) ORDER - FAILURE TO COMPLY WITH PART 90 RESPIRABLE DUST STANDARD

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

| Section I Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
| 0 7 1 5 0 8 0 9 2 0   |  |
| 4. Served To  | 5. Operator  |
| Ralph Bunny, Safety Director  | Bambu Company  |
| 6. Mine   | 7. Mine ID   |
| No. 300   | 4 5 - 0 0 0 2 0 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
|   |  |
| The Part 90 miner identified in Advisory No. 0012, dated 07/15/08, was e  |  |
| This finding was based on the results of five valid dust samples collected to take corrective action, and to collect five valid respirable dust samples   |  |
| submitted to the Pittsburgh Respirable Dust Processing Laboratory by the  |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health  |  |
| Safety B. Section   | C. Part/Section of   |
| Other         of Act         -         -           Section II Inspector's Evaluation         - </td <td>Title 30 CFR         9         0         1         0         0         1         <th1< th="">         1         <th1< th="">         1         <th1< th=""> <th1< th=""> <th1< th=""> <th1< t<="" td=""></th1<></th1<></th1<></th1<></th1<></th1<></td> | Title 30 CFR         9         0         1         0         0         1 <th1< th="">         1         <th1< th="">         1         <th1< th=""> <th1< th=""> <th1< th=""> <th1< t<="" td=""></th1<></th1<></th1<></th1<></th1<></th1<> |
| 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely Highly Likely X Occurred   |
| B. Injury or Illness could rea-   |  |
| sonably be expected to be: No Lost Workdays Lost  | Workdays or Restricted Duty Permanently Disabling X Fatal  |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)  |  |
| A. None B. Low C. Moderate  | X D. High E. Reckless Disregard  |
| 12. Type of Action  | B. Type of Issuance (check one)  |
| 1 0 4 - a - ,   .   -   -   | Citation X Order Safeguard   |
|   |  |
| 14. Initial Action D. Writte<br>A. Citation B. Order C. Safeguard Notic   |  |
|   |  |
| 15. Area or Equipment   |  |
|   |  |
|   |  |
| 16. Termination Due Mo Da Yr  |  |
| A. Date 0 8 0 5 0 8 Hr. Clock)  | 0 8 0 0  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
|   |  |
| 18. Terminated Mo Da Yr   |  |
| A. Date B. Time (24 Hr Clock)   |  |
|   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection 20. Event Number   | 21. Primary or Mill  |
|   |  |
| 22. Signature   | 23. AR Number  |
| Thomas Morris   | 0 2 4 2 0  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

104(a) CITATION - PART 90 RESPIRABLE DUST STANDARD

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

| Section I Violation Data   |       |        |        |  |
|--|-------|--------|--------|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |       |        |        | 3. Citation/Order  |
| 0 7 0 7 0 8  | 1     | 6 0    |        | Number         2         0         7         1         0         0         1       |
| 4. Served To   |       |        | 1      | 5. Operator  |
| John Brown, Superintendent   |       |        |        | XYZ Company  |
| 6. Mine  |       |        |        | 7. Mine ID   |
| No. 2  |       |        |        | 4 4 - 0 1 7 0 1 - (contractor)   |
| 8. Condition or Practice   |       |        |        | 8a. Written Notice (103g)  |
| The average concentration of respirable dust in the working e                  | envii | ronme  | ent    | of the designated work position was 13.0 mg/m <sup>3</sup> , which exceeds the     |
|  |       |        |        | ust samples collected by the operator [or inspector]. Management                   |
|  |       |        |        | each production shift until five valid samples are taken. The samples              |
| must be submitted to the Pittsburgh Respirable Dust Process                    | sing  | Labo   | rato   | Dry.   |
| Designated work position: 001-0 368  |       |        |        |  |
| Advisory No. 0001 dated 7/6/08   |       |        |        |  |
|  |       |        |        |  |
|  |       |        |        |  |
|  |       |        |        |  |
|  |       |        |        |  |
|  |       |        |        |  |
|  |       |        |        |  |
|  |       | -      | T      | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health B. Section  |       |        |        | C. Part/Section of   |
| Other of Act -   |       |        |        | Title 30 CFR         7         1         1         0         0         1         1 |
| Section II Inspector's Evaluation  |       |        |        |  |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unl             | likel |        | ٦      | Reasonably Likely Highly Likely X Occurred   |
|  | IKCI  | у      |        |  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays |       | L      | ost    | t Workdays or Restricted Duty Permanently Disabling X Fatal                        |
| C. Significant and Substantial (See Reverse): Yes                              | Х     | N      | 2      | D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)   |       |        | -      |  |
| A. None B. Low   | C. N  | /lodei | ate    | E. Reckless Disregard  |
| 12. Type of Action   |       |        | 13     | 3. Type of Issuance (check one)  |
| 1   0   4   -  a   -   ,         -   |       | -      |        | Citation X Order Safeguard   |
| 14. Initial Action   |       | D. W   | 'ritte | en E. Citation/ F. Dated Mo Da Yr  |
| A. Citation B. Order C. Safeguard  |       | N      | otic   | e  Order Numper  |
| 15. Area or Equipment  |       |        |        |  |
|  |       |        |        |  |
|  |       |        |        |  |
| 16. Termination Due Mo Da Yr   |       |        |        |  |
| A. Date   B. Tim<br>0 7 2 7 0 8 Hr.  | •     |        |        |  |
| Section III Termination Action   | Clo   | СК)    |        | 0 8 0 0  |
| 17. Action to Terminate  |       |        |        |  |
|  |       |        |        |  |
| 18. Terminated Mo Da Yr  |       |        |        |  |
| A. Date       B. Time (24  | Hr (  | Clock  | )      |  |
|  |       |        |        |  |
| Section IV Automated System Data 19. Type of Inspection 20. Event Number       |       |        | Т      | 21 Primany or Mill   |
|  | 0     | 3 2    |        | 21. Primary or Mill  |
| (activity code) E 1 6 5<br>22. Signature                                       | U     | 5 2    | -14    | 23. AR Number  |
| •  |       |        |        |  |
| Thomas Morris  |       |        |        | 0 2 4 2 0  |

MSHA Form 7000-3 Mar 85 (Revised)

### 104(a) CITATION BASED ON MSHA OR MINE OPERATOR SAMPLES

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

| Section I Violation Data   |   |
|--|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order   |
|  |   |
|  |   |
| 4. Served To   | 5. Operator   |
| John Brown, Superintendent<br>6. Mine  | XYZ Company 7. Mine ID  |
| No. 3  | 4 4 - 0 1 7 0 2 - (contractor)  |
| 8. Condition or Practice   | 8a. Written Notice (103g)   |
|  |   |
|  | of the designated occupation was 3.0 mg/m3, which exceeded the 1.2 mg/m3  |
| applicable limit. This finding was based on the results of five valid dust sa  |   |
| take corrective action to lower the respirable dust, and then sample each  | production shift until five valid samples are taken. The samples must be  |
| submitted to the Pittsburgh Respirable Dust Processing Laboratory.   |   |
| Designated occupation: continuous miner operator -036  |   |
| Location: MMU 001-0  |   |
| Advisory No. 0001 dated 7/6/08   |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  | See Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health   |   |
| Safety B. Section  | C. Part/Section of  |
| Other         of Act         -         -           Section II Inspector's Evaluation         - </td <td>Title 30 CFR         7         0         .         1         0         1         .          .         <t< td=""></t<></td> | Title 30 CFR         7         0         .         1         0         1         .          . <t< td=""></t<> |
| 10. Gravity:   |   |
| A. Injury or Illness (has) (is): No Likelihood Unlikely  | Reasonably Likely X Highly Likely Occurred  |
| B. Injury or Illness could rea-  |   |
| sonably be expected to be: No Lost Workdays Lost   | Workdays or Restricted Duty Permanently Disabling X Fatal   |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 2   |
| 11. Negligence (check one)   |   |
| A. None B. Low C. Moderate   | X D. High E. Reckless Disregard   |
|  | . Type of Issuance (check one)  |
| 1 0 4 - a - ,     -   -  | Citation X Order Safeguard  |
|  |   |
| 14. Initial Action D. Writte<br>A. Citation B. Order C. Safeguard Notice   |   |
|  |   |
| 15. Area or Equipment  |   |
|  |   |
|  |   |
| 16. Termination Due   Mo Da Yr  <br>A. Date     B. Time (24  |   |
| 0 7 2 7 0 8 Hr. Clock)   | 0 8 0 0   |
| Section III Termination Action   |   |
| 17. Action to Terminate  |   |
|  |   |
| 18. Terminated Mo Da Yr  |   |
| A. Date B. Time (24 Hr Clock)  |   |
|  |   |
| Section IV Automated System Data 19. Type of Inspection 20. Event Number   | 21. Primary or Mill   |
|  |   |
| (activity code)   E   1   6   5   0   3   2   4<br>22. Signature   | 23. AR Number   |
| 5  |   |
| Thomas Morris  | 0 2 4 2 0   |

MSHA Form 7000-3 Mar 85 (Revised)

### 104(a) CITATION BASED ON REDUCED DUST STANDARDS

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

| Section I Violation Data   |             |        |  |
|--|-------------|--------|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |             |        | 3. Citation/Order  |
| 1 0 0 5 0 8  | 0 9 0       | 0      | Number 9 0 0 0 0 1   |
| 4. Served To   |             |        | 5. Operator  |
| John Brown, Superintendent   |             |        | TR Company   |
| 6. Mine  |             | 7      | 7. Mine ID   |
| No. 40   |             |        | 4 5 - 5 1 2 3 2 - (contractor)   |
| 8. Condition or Practice   |             |        | 8a. Written Notice (103g)  |
| The mine operator did not collect the required himenthy valid                                  | roopirabl   | lo dur | st samples in the designated area, as identified in Advisory No. 0001,   |
| dated October 5, 2008.   | Tespirabi   |        | si samples in the designated area, as identified in Advisory No. 0001,   |
| Bimonthly cycle missed: August - September   |             |        |  |
| Designated area: 212-0   |             |        |  |
|  |             |        |  |
|  |             |        |  |
|  |             |        |  |
|  |             |        |  |
|  |             |        |  |
|  |             |        |  |
|  |             |        |  |
|  |             |        |  |
|  |             |        | See Continuation Form (MSHA Form 7000-3a)                                |
| 9. Violation A. Health   |             |        |  |
| Safety B. Section  |             |        | C. Part/Section of   |
| Other of Act -   |             |        | Title 30 CFR         7         0         .         2         0         8 |
| Section II Inspector's Evaluation<br>10. Gravity:  |             |        |  |
|  | ikely X     |        | Reasonably Likely Highly Likely Occurred                                 |
| B. Injury or Illness could rea-  |             | _      |  |
| sonably be expected to be: No Lost Workdays  | X L         | ost W  | Vorkdays or Restricted Duty Permanently Disabling Fatal                  |
| C. Significant and Substantial (See Reverse): Yes  | No          | b )    | X D. Number of Persons Affected 0 0 1                                    |
| 11. Negligence (ch <u>eck</u> one)   |             |        | + + + +  |
| A. None B. Low   | C. Modera   | ate    | X D. High E. Reckless Disregard  |
| 12. Type of Action   |             | 13.    | Type of Issuance (check one)   |
| 1 0 4 - a - ,   ,   -  | -           |        | Citation X Order Safeguard   |
| 14. Initial Action   | D. Wi       | ritton | E. Citation/ F. Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard  |             | otice  | Order  |
|  |             |        |  |
| 15. Area or Equipment  |             |        |  |
|  |             |        |  |
|  |             |        |  |
| 16. Termination Due Mo Da Yr<br>A. Date B. Time  | e (24       |        |  |
| 1 0 0 5 0 8 Hr.  | Clock)      |        | 0 9 1 0  |
| Section III Termination Action   |             |        |  |
| 17. Action to Terminate<br>No action required because bimonthly sampling requirements          | can only    | / be s | atisfied during the established bimonthly period.                        |
|  | , earr erny | 200    | anona danig na odaonana binaniny panadi                                  |
| 18. Terminated Mo Da Yr  |             |        |  |
| A. Date B. Time (24  | Hr Clock)   |        |  |
| 1         0         0         5         0         8           Section IV Automated System Data |             |        | 0 9 1 0  |
| 19. Type of Inspection 20. Event Number  |             |        | 21. Primary or Mill  |
| (activity code) E 2 6 5  | 1 2 3       | 4      | 5 6  |
| 22. Signature  |             |        | 23. AR Number  |
| Thomas Morris  |             |        | 0 2 4 2 0  |
|  |             |        |  |

MSHA Form 7000-3 Mar 85 (Revised)

### 104(a) CITATION BASED ON FAILURE TO TAKE RESPIRABLE DUST SAMPLES

### Mine Citation/Order Continuation

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

| Section I Subsequent                     | Action/Co   | ntinuati | on Da  | ata       |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|--|-------------|----------|--------|-----------|-----------------------|----------------|--------|---------|---------|---------|---------|------|-------|-------|-----------|----------------|------|------|--------|--------|-------|------|--------|--------|-------|--------|-------|-----|---|
| 1. Subsequent Action                     |             | 1a. Cor  | ntinua | ition     | 2. Dated<br>(Original | Issue)         | м<br>0 | °<br>7  | Da<br>0 | 7       | Yr<br>0 | 8    |       |       | 3. C<br>N | itatio<br>Numl |      | der  |        |        |       | 2    | 0      | 7      | 1 0   | 0      | 2     | - 0 | 1 |
| 4. Served To                             |             |          |        |           |                       |                |        | I       | 5 0     | pera    | tor     |      |       |       |           |                |      |      |        |        |       |      |        |        |       | 11     |       |     |   |
|  | norintor    | ndent    |        |           |                       |                |        |         |         |         |         | omn  | any   |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| John Brown, Superintendent<br>6. Mine    |             |          |        |           |                       |                |        |         |         | line II |         | omp  |       |       |           |                |      |      | Т      |        |       |      |        |        |       |        |       |     |   |
| No. 3                                    |             |          |        |           |                       |                |        |         | 7.10    |         | D       |      | 4 4   | 1 _   | 0         | 1              | -    |      | 2      |        |       |      | loont  | raata  | -)    |        |       |     |   |
| Section II Justification                 | for Action  |          |        |           |                       |                |        |         |         |         |         |      |       | - T   | U         | '              | /    |      |        |        |       |      | (conti | ractor | )     |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| MMU - 001 was                            | idle for    | a peri   | od o   | f 10 days | during the            | period for al  | bate   | mer     | nt. S   | Sam     | ples    | s ha | ave b | een   | colle     | ected          | d du | ring | l ea   | ch w   | orkir | ng s | shift, | and    |       |        |       |     |   |
| MSHA has rece                            |             | o samp   | oles.  | Addition  | nal time is gr        | ranted to all  | ow n   | nore    | e sai   | mple    | es to   | o be | e sen | nt to | MSH       | A s            | o co | mpl  | ian    | ce or  | non   | cor  | nplia  | ance   | •     |        |       |     |   |
| can be determin                          | ned.        |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| -  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| -  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      | See    | Cor    | ntinu | atior  | n For | m   |   |
|  |             |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| Section III Subsequent<br>8. Extended To | t Action Ta | aken     | Мо     | Da        | Yr                    |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| 0. Extended To                           | A. Date     |          |        | 8 0 5     |                       | me (24 Hr. Clo | ick)   |         |         |         | 0       | 9    | 0     | ) c.  | Vacate    | ed             |      |      | D. T   | ermina | ated  |      | Γ      | _ F    | E. Mo | dified |       |     | ] |
| Section IV Inspection                    | Data        |          |        |           |                       |                |        |         |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| 9. Type of Inspection                    |             |          |        | 10. Eve   | ent Number            |                | _      | _       |         |         |         |      |       |       |           |                |      |      |        |        |       |      |        | _      |       | _      |       |     |   |
|  |             | E 2      | 6      |           |                       | 5 0            | ) 3    | 2       | 4       | 1       | 9       |      |       |       |           |                |      |      |        |        |       |      |        |        |       |        |       |     |   |
| 11. Signature                            |             |          | 1      |           |                       | AR             | Jumb   | ı<br>er | Ч       | 12. Г   | Date    |      | N     | Мо    | Da        | Т              | Yr   | 13   | 3. Tir | ne (24 | Hr. ( | Clor | :k)    |        |       |        |       |     | Τ |
|  |             |          |        |           |                       |                |        |         |         | · · L   |         |      |       |       |           |                |      |      |        |        |       | 2.00 | ,      |        |       |        |       |     |   |
| Thomas Morris                            |             |          |        |           |                       | 0 2            | 2 4    | 2       | 0       |         |         |      | (     | ) 7   | 2         | 7              | 0    | 8    |        |        |       |      |        |        |       |        | 1     | 0 0 | 0 |

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

EXTENSION OF ABATEMENT TIME

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

| Section I Violation Data  |          |         |   |         |
|---|----------|---------|---|---------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock) 3. Citation/Order   |          |         |   |         |
| 0 7 2 7 0 8 1 8 0 0 Number  | 2        | 0 7     | 1 0   | 0 3     |
| 4. Served To 5. Operator  |          |         |   |         |
| John Brown, Superintendent XYZ Company  |          |         |   |         |
| 6. Mine ID 7. Mine ID 7. Mine ID  |          |         |   |         |
|   | contrac  | /       |   |         |
| 8. Condition or Practice 8a. Written N  | Votice   | (103g)  |   |         |
| MSHA's analysis of the five most recent respirable dust samples collected from the working environment of the designated occupati   | ion sho  | ws an   |   |         |
| average concentration of 5.7 mg/m3. Due to the obvious lack of effort by the operator to control respirable dust, the reasonable time   |          |         |   |         |
| for the abatement of the original violation will not be further extended. All miners working on this section must be withdrawn until the  |          |         |   |         |
| corrected.  |          |         |   |         |
| Designated occupation: continuous miner operator -036 in mechanized mining unit 001-0   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
| See Continuation Form (MSHA Form  | n 7000-  | ·3a)    |   |         |
| 9. Violation A. Health  |          |         |   |         |
| Safety B. Section C. Part/Section of  |          |         |   |         |
| Other         of Act         -         Title 30 CFR         7         0         1         0           Section II Inspector's Evaluation         -         -         -         -         1         0 | ) 1      |         |   |         |
| 10. Gravity:  |          |         |   |         |
| A. Injury or Illness (has) (is): No Likelihood Unlikely Highly Likely Highly Likely   | (        | Occurre | d   |         |
| B. Injury or Illness could rea-   |          |         | 1   |         |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty Permanently Dis  | sabling  |         | Fata  |         |
| C. Significant and Substantial (See Reverse): Yes No D. Number of Persons A   | Affected | k       |   |         |
| 11. Negligence (check one)         A. None         B. Low         C. Moderate         D. High         E. Reckle   | əss Dis  | regard  |   | ]       |
| 12. Type of Action 13. Type of Issuance (check one)   |          |         |   |         |
| 1 0 4 - b - ,   | Safeg    | uard    |   |         |
| 14. Initial Action D. Written E. Citation/  | od       | Мо      | Da  | Yr      |
| A. Citation X B. Order C. Safeguard Notice Order  | Su       | IVIO    |   | l'ï     |
| Number         2         0         7         1         0         0         2  |          | 0 7     | 07  | 7 0 8   |
| 15. Area or Equipment<br>The mechanized mining unit 001-0   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
| 16. Termination Due Mo Da Yr<br>A. Date J J B. Time (24   |          |         |   |         |
| Hr. Clock)  |          |         |   |         |
| Section III Termination Action<br>17. Action to Terminate   |          |         |   |         |
|   |          |         |   |         |
|   |          |         |   |         |
| 18. Terminated A. Date A. Date B. Time (24 Hr Clock)  |          |         |   |         |
| Section IV Automated System Data  |          |         |   |         |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill   |          |         |   |         |
| (activity code) E 1 6 5 0 3 2 4 1 0   |          |         |   |         |
| 22. Signature 23. AR Nun  | nber     |         |   |         |
| Thomas Morris   |          | 0       | 2 4   | 4 2 0   |
| MSHA Form 7000-3 Mar 85 (Revised)   |          |         | <u>.                                     </u> | <u></u> |

### Mine Citation/Order Continuation

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

| Section I Subsequent A     | Action/Cont                | tinuatio | on Data     |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|----------------------------|----------------------------|----------|-------------|---------|---------------------------|--------|-------|------------|---------|--------|---------|-----|-------|--------|------|---------------|--------|-------|-------|------|--------|--------|----------|-------|-------|---------|-------|-----|-----|
| 1. Subsequent Action       | 1a                         | a. Con   | tinuation   | 2.      | Dated<br>(Original Issue) |        |       | ^₀<br>)  7 | Da<br>2 |        | Yr<br>0 |     |       |        | 3.   | Citati<br>Nun |        | Order |       |      |        | 2      | 0        | 7     | 1 (   | 0 0     | 3     | - 0 | ) 1 |
| 4. Served To               |                            |          |             |         |                           |        |       |            | 5 0     | Dpera  | ator    |     |       |        |      |               |        |       |       |      |        | -      |          |       |       |         |       |     |     |
|                            | John Brown, Superintendent |          |             |         |                           |        |       |            |         |        |         | omi | pany  | ,      |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
| 6. Mine                    |                            |          |             |         |                           |        |       |            |         | /ine l |         |     | pany  |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
| No. 3                      |                            |          |             |         |                           |        |       |            |         |        |         |     | 4     | 4 -    | 0    | 1             | 7      | 0     | 2     | -    |        |        | (con     | tract | or)   |         |       |     |     |
| Section II Justification f | or Action                  |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        | -     |       |      |        | -      | <b>V</b> |       | - /   |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
| The operator has           |                            |          |             |         |                           |        |       |            |         | ol pla | an.     | The | erefo | ore, t | he o | order         | r is i | moc   | lifie | d to | pern   | nit N  | /ISH/    | 7     |       |         |       |     |     |
| to collect respira         | DIE GUSI                   | samp     | Dies on IVI |         |                           | ne co  | mpila | ance       | e.      |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
| -                          |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        | ~        |       |       |         | -     |     |     |
|                            |                            |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        | See      | 3 00  | ontin | uatio   | on Fo | rm  |     |
| Section III Subsequent     | Action Tak                 | en       |             |         | <i>i</i> .                |        |       |            |         |        |         | 1   |       | -      |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
| 8. Extended To             | A. Date                    |          | Mo [        | Da '    | Yr<br>B. Time (24         | Hr. Cl | lock) |            |         |        |         |     |       | C.     | Vaca | ated          | [      |       | D.    | Terr | ninate | d      | [        |       | E. M  | lodifie | d     | Х   | ]   |
| Section IV Inspection D    | Data                       |          |             |         |                           |        |       |            |         |        |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
| 9. Type of Inspection      | _                          |          |             | ent Num | iber                      |        |       | , _        |         | 2      |         |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
|                            | E                          | -   2    | 6           |         |                           | 5      | 0 3   | 3 2        | 2 4     | 2      | 0       |     |       |        |      |               |        |       |       |      |        |        |          |       |       |         |       |     |     |
| 11. Signature              | 1                          |          | <u> </u>    |         |                           |        | Numt  | ber        |         | 12. 1  | Date    |     |       | Mo     | Da   | a             | Yr     |       | 13    | Time | (24 H  | r. Clo | ock)     |       |       |         |       |     | Τ   |
| Thomas Morri               | is                         |          |             |         |                           | 0      | 2 4   | 1 2        | 0       |        |         |     |       | 0 7    | 2    | 8             | 0      | 8     |       |      |        |        |          |       |       |         | 0     | 8 ( | ) 0 |

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

104(b) ORDER - MODIFICATION

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

| Section I Subsequent A     | Action/Cont | tinuatio | on Data     | -                                      |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|----------------------------|-------------|----------|-------------|--|---------|---------|--------|---------|---------|------|-------------|-------|--------|-----------------|-----|-----|--------|--------|-------|------|--------------------|---------|--------|--------|-----|-----|
| 1. Subsequent Action       | 1:          | a. Con   | tinuation   | 2. Dated<br>(Original Issue)           |         | мо<br>0 | ,<br>7 | Da<br>2 | 7 0     |      |             |       |        | itatior<br>Numb |     | der |        |        |       | 2    | 0                  | 7 1     | 0      | 0 3    | -   | 0 2 |
| 4. Served To               |             |          |             |  |         | 11      |        | 5 Or    | perator |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
| John Brown, Sup            | perintenc   | lent     |             |  |         |         |        |         |         |      | npany       |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
| 6. Mine                    |             |          |             |  |         |         |        |         | ine ID  | 2011 |             |       |        |                 |     | Τ   |        |        |       |      |                    |         |        |        |     |     |
| No. 3                      |             |          |             |  |         |         |        |         |         |      | 4 4         | 1 - I | 0      | 1               | 7   | 0 2 | 2 -    |        |       |      | (cont <sup>r</sup> | ractor) | )      |        |     |     |
| Section II Justification f | or Action   |          |             |  |         |         |        |         |         |      | 1 1         |       | -      |                 |     | -   |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             | ust in the working<br>was based on the |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    | n the   | ,      |        |     |     |
|                            | n 1.2 mg    | /111.    |             | was based on the                       | result  | 5 01 1  | ive    | valic   | uusi    | 50   | mpies       | colle | cieu   | uur             | ing | ann | 101    |        | ispe  | Clic | <u>,</u>           |         |        |        |     |     |
| Designate                  | ed occup    | ation    | continuous  | miner operator -0                      | 036     |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
| Location:                  |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
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|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
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|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
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|                            |             |          |             |  |         |         |        |         |         |      |             |       |        |                 |     |     |        |        |       |      | See                | Con     | tinua  | tion F | orm |     |
| Section III Subsequent     | Action Tak  | en       |             |  |         |         |        |         |         | 1    | <del></del> | -     |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
| 8. Extended To             | A. Date     |          | Mo Da       | Yr<br>B. Time (24                      | Hr. Clo | ck)     |        |         |         |      |             | C. V  | 'acate | ed              |     | ] [ | D. Te  | ermina | ated  |      | )                  | ΚE      | . Modi | fied   |     |     |
| Section IV Inspection D    | Data        | -        |             |  |         |         |        |         |         |      | •           |       |        |                 |     | -   |        |        |       |      |                    |         |        |        |     |     |
| 9. Type of Inspection      | E           | 2        | 10. Event i | Number                                 | 5 0     | ) 3     | 2      | 4       | 2 3     |      |             |       |        |                 |     |     |        |        |       |      |                    |         |        |        |     |     |
| 11. Signature              | I           |          |             |  | AR N    | lumbe   | er     |         | 12. Dat | e    | Ν           | 1o    | Da     | 1               | Yr  | 13  | 3. Tin | ne (24 | Hr. ( | Cloc | k)                 |         |        |        |     |     |
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**U.S. Department of Labor** Mine Safety and Health Administration

| Section I Subsequent                 | Action/Cor | itinuatio | on Data   |          |                          |            |         |     |               |         |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
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| 1. Subsequent Action                 | 1          | a. Con    | tinuation | 2.       | Dated<br>(Original Issue | e)         | мо<br>0 |     | <sup>Da</sup> | 7 0     | 1   |       |         |       | itatio<br>Numb |      | der |        |        |       | 2    | 07     | 7 1   | 0       | 03     | 3 -  | 0 2 |
| 4. Served To                         |            |           |           |          |                          |            |         |     | 5. Ope        | erator  |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
| John Brown, Su                       | perinten   | dent      |           |          |                          |            |         |     |               | (YZ C   | om  | nnanı |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
| 6. Mine                              | pormon     | aom       |           |          |                          |            |         |     | 7. Min        |         |     |       | ,       |       |                |      |     |        |        |       | Т    |        |       |         |        |      |     |
| No. 3                                |            |           |           |          |                          |            |         |     |               |         |     | 4     | 4 -     | 0     | 1              | 7    | 0 2 | > -    |        |       |      | (contr | actor | )       |        |      |     |
| Section II Justification             | for Action |           |           |          |                          |            |         |     |               |         |     |       |         | Ū     |                |      | -   | _      |        |       |      |        | aotor | <u></u> |        |      |     |
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| applicable limit of The order is now |            |           |           |          |                          | e result   | IS OF T | ive | valid         | dust    | sar | mple  | s colle | ected | a aur          | ring | anı | VI31   | 1A In  | spe   | Stio | n.     |       |         |        |      |     |
|                                      | v in enec  | 1 43 0    | nginany   | 133060.  |                          |            |         |     |               |         |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
| Designate                            | ed occup   | ation     | : continu | uous mi  | ner operator             | -036       |         |     |               |         |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
| Location:                            | MMU 0      | 01-0      |           |          |                          |            |         |     |               |         |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
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|                                      |            |           |           |          |                          |            |         |     |               |         |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
|                                      |            |           |           |          |                          |            |         |     |               |         |     |       |         |       |                |      |     |        |        |       |      | See    | Con   | itinua  | ation  | Form |     |
| Section III Subsequent               | Action Ta  | ken       |           |          |                          |            |         |     |               |         |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
| 8. Extended To                       | A. Date    |           | Mo        | Da \     | r<br>B. Time (2          | 24 Hr. Clo | ock)    |     |               |         |     |       | C. '    | Vacat | ed             |      | ] ' | D. Te  | ermina | ited  |      |        | _ E   | . Mod   | lified |      | Х   |
| Section IV Inspection I              | Data       |           |           |          |                          | -<br>      |         |     |               | -       |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
| 9. Type of Inspection                | E          | 2         |           | vent Num | ber                      | 5          | 03      | 2   | 4             | 2 1     |     |       |         |       |                |      |     |        |        |       |      |        |       |         |        |      |     |
| 11. Signature                        |            |           |           |          |                          | AR         | Numbe   | er  | 1:            | 2. Date | )   |       | Mo      | Da    |                | Yr   | 13  | 3. Tin | ne (24 | Hr. C | Cloc | k)     |       |         | Τ      |      |     |
| Thomas Morr                          | is         |           |           |          |                          | 0          | 2 4     | 2   | 0             |         |     |       | 0 8     | 2     | 0              | 0    | 8   |        |        |       |      |        |       |         | (      | 0 8  | 0 0 |

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MODIFICATION (REINSTATING) 104(b) ORDER AS ORIGINALLY ISSUED.

# Appendix D

# Metal and Nonmetal Health Violations

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

| Section I Violation Data   |                    |   |
|--|--------------------|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |                    | 3. Citation/Order   |
| 0 7 1 8 0 8  | 1600               | Number 4 4 1 0 1 8 8  |
| 4. Served To   |                    | 5. Operator   |
| SYDNEY JONES, PRESIDENT  |                    | TMC MINING COMPANY  |
| 6. Mine  |                    | 7. Mine ID  |
| TRIANGLE MINE  |                    | 7 2 - 0 0 0 1 2 - (contractor)  |
| 8. Condition or Practice   |                    | 8a. Written Notice (103g)   |
| The repair shop welder was exposed to a shift-weighted a                       | werage of 2.       | 35 mg/m <sup>3</sup> of nickel welding fumes when sampled on July 1,  |
|  |                    | ) mg/m3 times the error factor (1.10*) for welding fume sampling  |
|  |                    | ir shop and visible fumes were produced during this process.  |
| The engineering control in use was one 24-inch exhaust f                       | an in the sho      | p roof. The welder was not wearing a respirator and a   |
|  |                    | s not in place. The original abatement date is for the institution<br>I Z88.2-1969. When a respiratory protection program meeting |
| the minimum requirements is established, the abatement                         |                    |   |
| additional engineering controls.   |                    | satellated to allow the linite operator time to histan  |
|  |                    |   |
| * Note: The error factor for metal dust and fum                                | ne sampling i      | s determined by, and will be supplied by, the Pittsburgh lab.   |
|  |                    |   |
|  |                    |   |
|  |                    |   |
|  |                    |   |
|  |                    | See Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health   |                    |   |
| Safety B. Section  |                    | C. Part/Section of  |
| Other of Act -   |                    | Title 30 CFR 5 6 . 5 0 0 1 a /. 5 0 0 5   |
| Section II Inspector's Evaluation  |                    |   |
| 10. Gravity:   | BL - L - 🗖         | Decementary III Usetary Comment   |
|  | likely             | Reasonably Likely K Highly Likely Cccurred  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays |                    | Workdays or Restricted Duty Permanently Disabling X Fatal   |
|  | LUSI               |   |
| C. Significant and Substantial (See Reverse): Yes                              | X No               | D. Number of Persons Affected 0 0 1   |
| 11. Negligence (check one)   | O Madanata         | X D. High E. Reckless Disregard   |
| A. None B. Low   | C. Moderate        |   |
| 12. Type of Action   | 13                 | . Type of Issuance (check one)  |
| 1 0 4 - a - , , , <b>-</b>   | -                  | Citation X Order Safeguard  |
| 14. Initial Action   | D. Writte          | en E. Citation/ F. Dated Mo Da Yr   |
| A. Citation B. Order C. Safeguard  | Notice             | e 🗍   Order   |
| 15. Area or Equipment  | -                  |   |
|  |                    |   |
|  |                    |   |
| 16. Termination Due Mo Da Yr   | - (04              |   |
| A. Date 0 7 2 0 0 8 Hr.  | ne (24<br>. Clock) | 0 8 0 0   |
| Section III Termination Action   |                    |   |
| 17. Action to Terminate  |                    |   |
|  |                    |   |
| 18. Terminated Mo Da Yr  |                    |   |
| 18. Terminated Mo Da Yr<br>A. Date       B. Time (24                           | 4 Hr Clock)        |   |
|  | ,                  |   |
| Section IV Automated System Data   |                    |   |
| 19. Type of Inspection 20. Event Number  |                    | 21. Primary or Mill   |
|  | 7689               |   |
| 22. Signature  |                    | 23. AR Number   |
| TED JOHNSON  |                    | 0 4 7 8 9   |
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104(a) CITATION - "S&S" OVEREXPOSURE TO WELDING FUMES

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

| Section I Subsequent Action/Continuation | Data                         |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
|--|------------------------------|-----------|-----------|-------------|--------|----------------------|-------------|---------|------|-------|----------------|-------|----------|--------|-----|
| 1. Subsequent Action 1a. Continuation    | 2. Dated<br>(Original Issue) | Mo<br>0 7 | Da<br>1 8 | Yr<br>8 0 8 |        | 3. Citation<br>Numbe |             |         | 4    | 4     | 1              | ) 1   | 8 8      | 3 -    | 01  |
| 4. Served To                             | 1                            |           | 5. Op     | perator     |        |                      |             |         |      |       |                | -     |          |        |     |
| SYDNEY JONES, PRESIDENT                  |                              |           | т         |             | NING ( | COMPANY              |             |         |      |       |                |       |          |        |     |
| 6. Mine                                  |                              |           | 7. Mi     | ne ID       |        |                      |             |         |      |       |                |       |          |        |     |
| TRIANGLE MINE                            |                              |           |           |             | 72     | - 0 0 0              | 1 2 -       |         |      | (con  | trac           | ctor) |          |        |     |
| Section II Justification for Action      |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
| A respiratory protection program meeting | - 4h                         | ANGL      | 700 2     | 10(0)       |        |                      | · · · · · · |         |      |       | <b>. . . .</b> | 1     |          |        |     |
| and approved respirator (Wilson Model 1  |                              |           |           |             |        |                      |             |         |      |       |                |       | 18       |        |     |
| for the implementation of additional eng |                              |           |           |             |        |                      |             |         |      |       |                | , 200 | <i>,</i> |        |     |
| adequate engineering controls have been  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
| the permissible exposure limit times the |                              |           | 1 0       |             |        |                      |             |         |      |       |                |       |          |        |     |
|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
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|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
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|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
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|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
|  |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
|  |                              |           |           |             |        |                      |             | Se      | e C  | ontin | nuat           | ion F | orm      |        |     |
| Section III Subsequent Action Taken      |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |
| 8. Extended To<br>A. Date<br>0 8 1 5     | Yr<br>B. Time (24 H          | Ir. Clock | )         | 1 2         | 0 0    | C. Vacated           |             | D. Tern | nina | ated  | C              | ] E   | . Moo    | difiec |     |
| Section IV Inspection Data               | ····                         |           |           |             |        | •                    |             |         |      |       |                |       |          |        |     |
| 9. Type of Inspection E 1 5              | vent Number 0                | 7 6 8     | 99        | ) 1         |        |                      |             |         |      |       |                |       |          |        |     |
| 11. Signature                            | AF                           | R Numb    |           | 2. Date     | Ν      | /lo Da Yr            | 13. T       | ïme (24 | 4 Hr | . Clo | ck)            |       |          |        |     |
| TED JOHNSON                              | 0                            | 4 7 8     | 9         |             | 0      | 7210                 | 8           |         |      |       |                |       | •        | 1 5    | 3 0 |
| MSHA Form 7000-3a, Mar 85 (Revised)      |                              |           |           |             |        |                      |             |         |      |       |                |       |          |        |     |

104(a) CITATION - EXTENSION AFTER RESPIRATORY PROTECTION PROVIDED

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

| 1. SUbsequent Action       1a. Continuation       2. Dated<br>(Original Issue)       Mo       Da       Y       18.0       3. Clatton/Order<br>Mumber       4.4       10       1       8.8       -0       2         4. Surved To<br>SYONEY JONES, PRESIDENT       5. Operator  | Section I Subsequent  | Action/Continuation   | Data                                  |         |          |          |                 |                 |                      |           |
|---|-----------------------|-----------------------|---------------------------------------|---------|----------|----------|-----------------|-----------------|----------------------|-----------|
| SYDNEY JONES, PRESIDENT       TMC MINING COMPANY         6. Mine       7. Mine ID       7       2       0       0       1       2   |                       | 1a. Continuation      |                                       |         |          |          |                 |                 | 4 4 1 0 1 8          | 8 - 0 2   |
| SYDNEY JONES, PRESIDENT       TMC MINING COMPANY         6. Mine       7. Mine ID       7       2       0       0       1       2   | 4. Served To          |                       | •                                     |         | 5. Op    | erator   |                 |                 |                      |           |
| 6. Mne       7. Mne ID       7. 2       0       0       1       2   | SYDNEY JONES. PF      | RESIDENT              |                                       |         |          |          | ING COMPAN      | IY              |                      |           |
| TRIANGLE MINE       7       2       0       0       1       2   |                       | -                     |                                       |         | 1        |          |                 |                 |                      |           |
| Section II - Justification for Action         The mine operator purchased and installed a local exhaust fume collection system that can be moved close to welding and cutting operators. The welder in the repair shop was exposed to a shift-weighted average of 0.13 mg/m3 of nickel welding tumes after a resample was conducted by M84 An August 22.006. This average of 0.13 mg/m3 of nickel welding tumes after a resample was conducted by M84 An August 22.006. This average of 0.13 mg/m3 of nickel welding tumes after a resample was conducted by M84 An August 22.006. This average is less than that Threshold Limb Tureshold Limb.         September 1.2008.       September 1.2008.         September 2.2008.       September 2.2008.         September 2.2008.       September 2.2008.         September 2.2008.       September 2.2008.         September 2.2008.       September 2.2008.  |                       |                       |                                       |         |          |          | 72-00           | 0 0 1 2 -       | (contractor)         |           |
| The mine operator purchased and installed a local exhaust fume collection system that can be moved close to velding and cutting<br>operations. The welder in the repair shop was exposed to a shill-weighted average of 0.13 mg/m3 of nickel welding fumes after a<br>resemple was conducted by MSHA on August 22, 2006. This average is less than the Threshold Limit Value (TLV) times the error<br>factor (1.10) for welding fume sampling and elemental analysis. The analytical results were received and the termination issued on<br>September 1, 2008.  |                       | for Action            |                                       |         |          |          |                 |                 |                      |           |
| operations: The weider in the repair stop was exposed to a shift-weighted average of 0.13 mg/m3 of nicket weiding fumes after a resample was conducted by MSHA on August 22, 2008. This average is less than the Threshold Limit Value (TLV) times the error tactor (1:0) for weiding fume sampling and elemental analysis. The analytical results were received and the termination issued on September 1, 2008.         September 1, 2008.  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| resample was conducted by MSHA on August 22, 2008. This average is less than the Threshold Limit Value (TLV) times the error<br>factor (1.10) for welding tume sampling and elemental analysis. The analytical results were received and the termination issued on<br>September 1, 2008.         September 1, 2008.         Nor Da <td>The mine operator pu</td> <td>urchased and installe</td> <td>ed a local exhaust fum</td> <td>e colle</td> <td>ection s</td> <td>ystem t</td> <td>hat can be mo</td> <td>ved close to v</td> <td>velding and cutting</td> <td></td>  | The mine operator pu  | urchased and installe | ed a local exhaust fum                | e colle | ection s | ystem t  | hat can be mo   | ved close to v  | velding and cutting  |           |
| Factor (1.10) for welding tume sampling and elemental analysis. The analytical results were received and the termination issued on<br>September 1, 2008.         September 1, 2008.         Settember 1, 2008.   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| September 1, 2008.  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken           8. Extended To         A. Date           Mo         Da           Yr         B. Time (24 Hr. Clock)           Section IV Inspection Data         9. Type of Inspection           9. Type of Inspection         10. Event Number           11. Signature         A. Number  |                       | ng fume sampling a    | and elemental analysis.               | The     | analytic | cal resu | Its were receiv | red and the ter | rmination issued on  |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   | September 1, 2008.    |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  | -                     |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X       E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock terror   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| Section III Subsequent Action Taken         8. Extended To       Mo       Da       Yr         8. Extended To       A. Date       Mo       Da       Yr         B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X         Section IV Inspection Data       9. Type of Inspection       E       1       5         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)  |                       |                       |                                       |         |          |          |                 |                 |                      |           |
| 8. Extended To       A. Date       Mo       Da       Yr       B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X E. Modified         Section IV Inspection Data         9. Type of Inspection       E       1       5       10. Event Number       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)       Image: Clock to the term of the term of te  |                       |                       |                                       |         |          |          |                 |                 | See Continuation Fo  | rm        |
| A. Date       B. Time (24 Hr. Clock)       C. Vacated       D. Terminated       X E. Modified         Section IV Inspection Data         9. Type of Inspection         E       10. Event Number       0       7       6       8       9       9         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)   |                       |                       | , , , , , , , , , , , , , , , , , , , |         |          |          |                 |                 |                      |           |
| 9. Type of Inspection         E         1         5         10. Event Number         0         7         6         8         9         9         4           11. Signature         AR Number         12. Date         Mo         Da         Yr         13. Time (24 Hr. Clock)         Image: Clock transmitted trandom trandom transmitted transmitted transmitted trandom transmi |                       |                       |                                       | . Clocł | <)       |          | C. Vaca         | ated            | D. Terminated X E. N | /lodified |
| E       1       5       0       7       6       8       9       9       4         11. Signature       AR Number       12. Date       Mo       Da       Yr       13. Time (24 Hr. Clock)   |                       |                       |                                       |         |          |          |                 |                 |                      |           |
|   | 9. Type of Inspection |                       |                                       | 68      | 3 9 9    | 4        |                 |                 |                      |           |
|   | 11. Signature         |                       | AR                                    | Numb    | er 12    | . Date   | Mo Da           | Yr 13. T        | ime (24 Hr. Clock)   |           |
|   | Ū                     |                       |                                       |         | П        |          |                 |                 | · · · /              | 0915      |

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

104(a) CITATION - TERMINATION AFTER RESAMPLING

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

| Section I Violation Data   |  |
|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order  |
| 0 7 1 8 0 8 1 6 0 0  | Number 4 4 1 0 1 8 9   |
| 4. Served To   | 5. Operator  |
| J.B. SMITH, PRESIDENT  | S&S MINING COMPANY   |
| 6. Mine  | 7. Mine ID   |
| S&S MINE   | 7 1 - 0 3 7 9 8 - (contractor)   |
| 8. Condition or Practice   | 8a. Written Notice (103g)  |
| The primary crusher operator was exposed to a shift-weighted average   | e of 3.30 mg/m <sup>3</sup> of respirable silica-bearing dust on 07/02/08. This  |
| exceeded the Threshold Limit Value (TLV) of 1.25 mg/m3 times the   |  |
| Respiratory protection was not being used and a respiratory protection   |  |
| in place. All feasible engineering controls were not in use to control   |  |
| but a window was broken and a ventilation system had not been provi  |  |
| of a Respiratory Protection Program. When a Respiratory Protection<br>is in place, the abatement date will be extended to allow the mine one | rator time to install additional and repair existing engineering controls.   |
| is in place, the abatement date will be excended to allow the nime ope   | and time to instan additional and repair existing engineering controls.  |
|  |  |
|  |  |
|  |  |
|  |  |
|  | See Continuation Form (MSHA Form 7000-3a)  |
| 9. Violation A. Health   |  |
| Safety B. Section  | C. Part/Section of   |
| Other of Act -   | Title 30 CFR 5 6 . 5 0 0 1 a /. 5 0 0 5  |
| Section II Inspector's Evaluation<br>10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely  | Reasonably Likely X Highly Likely Occurred   |
| B. Injury or Illness could rea-  |  |
| sonably be expected to be: No Lost Workdays Lost   | Workdays or Restricted Duty Permanently Disabling X Fatal  |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 1  |
| 11. Negligence (check one)<br>A. None B. Low C. Moderate   | X D. High E. Reckless Disregard  |
|  |  |
| 12. Type of Action 1 0 4 - a - , 1 13  | Type of Issuance (check one)<br>Citation X Order Safeguard   |
| 14. Initial Action D. Writte   | en E. Citation/ E. |
| 14. Initial Action D. Writte<br>A. Citation B. Order C. Safeguard Notice   | 9 🗍 Order  |
| 15. Area or Equipment  |  |
|  |  |
|  |  |
| 16. Termination Due Mo Da Yr<br>A. Date     B. Time (24  |  |
| 0 7 2 0 0 8 Hr. Clock)   | 0 9 0 0  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
|  |  |
| 18. Terminated A. Date A. Date B. Time (24 Hr Clock)   |  |
|  |  |
| Section IV Automated System Data 19. Type of Inspection 20. Event Number   | 21 Primony or Mill   |
|  | 21. Primary or Mill<br>8 9   |
| (activity code)   E   0   1   3   8   5   0   1<br>22. Signature   | 23. AR Number  |
| -  |  |
| TED JOHNSON  | 0 4 7 8 9  |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |

104(a) CITATION - "S&S" OVEREXPOSURE TO SILICA-BEARING DUST

12/05/95

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

| Section I Subsequent A     | Action/Continuation | Data  |           |               |             |                             |                       |           |
|----------------------------|---------------------|---|-----------|---------------|-------------|-----------------------------|-----------------------|-----------|
| 1. Subsequent Action       | 1a. Continuation    | 2. Dated<br>(Original Issue)                        | Мо<br>0 7 | Da Y<br>1 8 0 |             | 3. Citation/Order<br>Number | 4 4 1 0 1 8 9 -       | 01        |
| 4. Served To               |                     | 1   | 1 1       | 5. Operat     | or          | •                           |                       |           |
| J.B. SMITH, PRESID         | ENT                 |   |           | · ·           | INING CO    | MPANY                       |                       |           |
| 6. Mine                    |                     |   |           | 7. Mine II    |             |                             |                       |           |
| S&S MINE                   |                     |   |           |               | 7 1         | 03798-                      | (contractor)          |           |
| Section II Justification f | for Action          |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
| A Respiratory Protect      | ion Program meetir  | g the requirements of                               | ANSI Z    | 288.2-1969    | is in place | . The primary crusher       | operator is wearing a |           |
|                            |                     | ISA COMFO II, Approv                                |           |               |             |                             |                       |           |
|                            |                     | of additional engineering                           |           |               |             |                             |                       |           |
|                            |                     | il engineering controls<br>Id Limit Value (TLV) tir |           |               |             | d further sampling by r     | VISHA confirms        |           |
|                            |                     |   |           |               | .01.        |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
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|                            |                     |   |           |               |             |                             |                       |           |
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|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             |                       | <u> </u>  |
|                            |                     |   |           |               |             |                             |                       |           |
|                            |                     |   |           |               |             |                             | See Continuation Form |           |
| Section III Subsequent     |                     | 1 1   |           |               |             |                             |                       |           |
| 8. Extended To<br>A. Da    | te 0 8 1 5          | Yr<br>B. Time (24 Hr.<br>0 8                        | . Clock   | ) 1           | 2 0 0       | . Vacated D                 | Terminated E. Modifie | d 🗌       |
| Section IV Inspection I    |                     |   |           |               |             |                             |                       |           |
| 9. Type of Inspection      | E 1 5               | vent Number 3 8                                     | 50        | 196           |             |                             |                       |           |
| 11. Signature              |                     | AR  | Numbe     | er 12. Da     | te Mo       | Da Yr 13. Tim               | ne (24 Hr. Clock)     | $\square$ |
| TED JOHNSON                |                     | 0 4   |           | 9             |             |                             |                       | 530       |
|                            |                     |   |           |               |             |                             |                       |           |

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

104(a) CITATION - EXTENSION AFTER RESPIRATORY PROTECTION PROVIDED FOR SILICA-BEARING DUST

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

| Section I Subsequent     | Action/Continuation   | Data                         |           |          |          |             |   |                        |
|--------------------------|-----------------------|------------------------------|-----------|----------|----------|-------------|---|------------------------|
| 1. Subsequent Action     | 1a. Continuation      | 2. Dated<br>(Original Issue) | Мо<br>0 7 | Da<br>1  | Y<br>8 0 |             | <ol> <li>Citation/Order<br/>Number</li> </ol> | 4 4 1 0 1 8 9 - 0 2    |
| 4. Served To             |                       |                              |           | 5. O     | perat    | or          |   |                        |
| J.B. SMITH, PRESID       | ENT                   |                              |           |          | -        | uning Co    | MPANY   |                        |
| 6. Mine                  |                       |                              |           |          | line IE  |             |   |                        |
| S&S MINE                 |                       |                              |           | 1.101    |          | 7 1         | - 0 3 7 9 8 -                                 | (contractor)           |
| Section II Justification | for Action            |                              |           |          |          | '           |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
| The mine operator re     | placed the control b  | ooth's broken window a       | and ins   | stalled  | d a he   | ating and   | cooling unit in the booth o                   | f the primary          |
|                          |                       |                              |           |          |          |             | s. The primary crusher                        |                        |
| operator was expose      | d to a shift-weighted | l average of 0.82 mg/m       | 3 of re   | espira   | ıble si  | lica-bearir | ng dust during a resample                     | conducted              |
| on August 22, 2008.      | This shift-weighted   | average is less than the     | e Thre    | shold    | d Limi   | t Value (T  | LV) of 1.11 mg/m3.                            |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   |                        |
|                          |                       |                              |           |          |          |             |   | See Continuation Form  |
| Section III Subsequent   | Action Taken          |                              |           |          |          |             |   |                        |
| 8. Extended To           | Mo Da                 | Yr                           |           |          |          |             |   |                        |
| A. Da                    |                       | B. Time (24 Hr.              | Clock     | )        |          |             | C. Vacated 🛛 D. Te                            | rminated X E. Modified |
|                          |                       |                              |           |          |          |             |   |                        |
| Section IV Inspection I  |                       |                              |           | <u> </u> |          |             |   |                        |
| 9. Type of Inspection    | E 1 5                 | vent Number                  | 50        | 2        |          |             |   |                        |
|                          |                       |                              |           | [        |          |             |   |                        |
| 11. Signature            |                       | AR                           | Numbe     | er 1     | 2. Da    | ite M       | o Da Yr 13. Time (                            | 24 Hr. Clock)          |
| TED IOUNICON             |                       |                              |           |          |          |             |   |                        |
| TED JOHNSON              |                       | 0 4                          | 78        | 9        |          | 0           | 9 0 1 0 8                                     | 1 1 3 0                |
| MSHA Form 7000-3a, M     | ar 85 (Revised)       |                              |           |          |          |             |   |                        |

104(a) CITATION - TERMINATION AFTER RESAMPLING FOR SILICA-BEARING DUST

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

| Section I Violation Data   |          |                |            |                       |                |                      |                    |           |           |
|--|----------|----------------|------------|-----------------------|----------------|----------------------|--------------------|-----------|-----------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)                          |          |                |            |                       | 3. C           | itation/Order        |                    |           |           |
| 0 7 2 3 0 8  | 0        | 0              | 0          |                       | N              | umber                | 4 4 1              | 0 1       | 90        |
| 4. Served To   | 03       | 0              | 5. Oper    | ator                  |                | umber                | <u>           </u> |           | 50        |
| J.B. SMITH, PRESIDENT  |          |                |            | MINING COM            |                |                      |                    |           |           |
| 6. Mine  |          |                | 7. Mine    |                       |                |                      |                    |           |           |
| S&S MINE   |          |                | 7.1000     | 7 1 -                 | 03798          | 3 - (cor             | tractor)           |           |           |
| 8. Condition or Practice   |          |                |            | 1 . 1 . 1             |                | 8a. Written Not      | ,                  | )         |           |
|  |          |                |            |                       |                |                      |                    |           |           |
| The primary crusher operator was not using a respirator a        | is req   | uired          | by Citatio | n No. 4410189         | issued on 07/1 | 8/08. An approved    |                    |           |           |
| respirator was in its original container at the crusher and the  | he cr    | usher          | operator   | admitted that he      | e seldom used  | it. The primary crus | sher               |           |           |
| shall be taken out of service until the crusher operator has     |          |                |            |                       |                |                      |                    |           |           |
| shall ensure that the crusher operator will wear the respira     |          |                |            |                       |                |                      | has                |           |           |
| been fulfilled, MSHA will modify this order to allow work to     |          |                |            |                       |                |                      |                    |           |           |
|  |          |                |            |                       |                |                      |                    |           |           |
| average exposure of 5.50 mg/m5 of respirable sinca-beam          | ing ut   |                |            | ble exposure w        | /as 1.25 mg/m  | •                    |                    |           |           |
|  |          |                |            |                       |                |                      |                    |           |           |
|  |          |                |            |                       |                |                      |                    |           |           |
|  |          |                |            |                       |                |                      |                    |           |           |
|  |          |                |            |                       |                |                      |                    |           |           |
|  |          |                |            | 0                     |                |                      | 7000.0-)           |           |           |
|  | <u> </u> |                |            | 566                   | e Continuation | Form (MSHA Form      | 7000-3a)           | _         |           |
| 9. Violation A. Health B. Section                                |          |                |            | C. Part/Section       | n of           |                      |                    |           |           |
| Safety B. Section<br>Other of Act -                              |          |                |            | Title 30 CFF          |                | 56.500               | 1 a/.              | 50        | 05        |
| Section II Inspector's Evaluation                                |          | 11             |            |                       | IX             |                      | η αγ.              | 5 0       | 0 0       |
| 10. Gravity:   |          | _              |            | F                     |                |                      |                    | _         |           |
| A. Injury or Illness (has) (is): No Likelihood Un                | likely   | Ш              | Reas       | sonably Likely        | Hig            | hly Likely           | Occurre            | d         |           |
| B. Injury or Illness could rea-                                  |          |                |            |                       |                |                      |                    |           |           |
| sonably be expected to be: No Lost Workdays                      |          | Los            | st Workda  | ays or Restricted     | d Duty         | Permanently Disal    | oling              | Fatal     |           |
| C. Significant and Substantial (See Reverse): Yes                |          | No             |            |                       | D. Nu          | mber of Persons Af   | fected             |           |           |
| 11. Negligence (check one)                                       |          |                |            |                       |                |                      |                    |           |           |
| A. None B. Low   | C. M     | odera          | te         | D. H                  | ligh           | E. Reckless          | s Disregaro        | 4 🗌       |           |
| 12. Type of Action   |          | 1              | 3. Type c  | f Issuance (che       | eck one)       |                      |                    |           |           |
| 1 0 4 - b - ,     -  | -        | -              | Citatio    |                       | Óro            | der X Sa             | afeguard           |           |           |
|  |          |                |            |                       |                |                      | -                  | _         |           |
| 14. Initial Action<br>A. Citation X B. Order C. Safeguard        | U D      | . Writ<br>Noti |            | E. Citation/<br>Order | 4 4 1 0 1      | F. Dated             | Мо<br>0 7          | Da<br>1 8 | Yr<br>0 8 |
|  |          | INOU           |            | Number                | 4 4 10         | 0 9                  | 0 1                | 10        | 00        |
| 15. Area or Equipment  |          |                |            |                       |                |                      |                    |           |           |
| PRIMARY CRUSHER  |          |                |            |                       |                |                      |                    |           |           |
| 16. Termination Due Mo Da Yr                                     |          |                |            | ТТ                    |                |                      |                    |           |           |
| A. Date B. Tim   |          |                |            |                       |                |                      |                    |           |           |
|  | . Cloc   | :k)            |            |                       |                |                      |                    |           |           |
| Section III Termination Action           17. Action to Terminate |          |                |            |                       |                |                      |                    |           |           |
|  |          |                |            |                       |                |                      |                    |           |           |
|  |          |                |            |                       |                |                      |                    |           |           |
| 18. Terminated Mo Da Yr A. Date B. Time (24                      | 1 Ur C   |                |            |                       |                |                      |                    |           |           |
| A. Date  | + 1 11 C | JUCK)          |            |                       |                |                      |                    |           |           |
| Section IV Automated System Data                                 |          |                |            |                       |                |                      |                    |           |           |
| 19. Type of Inspection   20. Event Number                        |          |                |            | 21. Primary or        | Mill           |                      |                    |           |           |
| (activity code) E 1 5 0  | 1 2      | 2 3            | 4 5 6      |                       |                |                      |                    |           |           |
| 22. Signature  |          |                |            |                       |                | 23. AR Numb          | er                 |           | ]         |
| TED SMITH  |          |                |            |                       |                |                      | 0                  | 29        | 33        |
| MSHA Form 7000-3 Mar 85 (Revised)                                |          |                |            |                       |                |                      |                    |           |           |

104(b) ORDER OF WITHDRAWAL FOR SILICA-BEARING DUST

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

| Section I Subse    | quent Action | on/Conti  | nuation  | Data  |           |          |          |            |  |                 |               |           |         |           |
|--------------------|--------------|-----------|----------|---|-----------|----------|----------|------------|--|-----------------|---------------|-----------|---------|-----------|
| 1. Subsequent Ac   | tion 1a      | . Continu | uation   | 2. Dated<br>(Original Issue)                | Mo<br>0   |          | 3 0 8    |            | <ol> <li>Citation</li> <li>Numbrand</li> </ol> |                 | 4 4 1         | 0 1 9     | 0 -     | 0 1       |
| 4. Served To       |              |           |          |   |           | 5. O     | perator  |            |  |                 |               |           |         |           |
| J.B. SMITH, PI     | RESIDENT     | г         |          |   |           |          |          | IING COI   |  |                 |               |           |         |           |
| 6. Mine            | LOIDEN       |           |          |   |           |          | ne ID    |            |  |                 |               |           |         |           |
| S&S MINE           |              |           |          |   |           |          |          | 7 1 -      | 037  | 98-             | (contra       | actor)    |         |           |
| Section II Justifi | cation for A | Action    |          |   |           |          |          |            |  |                 | (oona)        |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
| The primary cr     | usher opei   | rator has | been r   | einstructed and retra                       | ined in   | the use  | e of his | fit-tested | respirator.                                    | He will use th  | e respirator  |           |         |           |
| whenever the c     | crusher is i | n operat  | ion. Th  | e foreman and the p                         | lant ma   | inager   | will che | ck period  | ically throu                                   | gh the shift to | ensure that   |           |         |           |
|                    |              |           |          | NSI Z88.2-1969 will                         |           |          |          |            |  |                 |               | ols       |         |           |
|                    |              |           |          | and will notify MSHA                        |           |          |          |            |  |                 |               | 10        |         |           |
|                    |              |           |          | alysis indicates that                       |           |          |          |            |  |                 |               | LV).      |         |           |
|                    |              |           |          | nclude the above pro<br>posure has been ful |           |          | allow c  | rusning o  | perations                                      | to resume. The  |               |           |         |           |
| be terminated      | when the e   |           | t overe. |   | iy abatt  |          |          |            |  |                 |               |           |         |           |
| Note               | In this ex   | ample, t  | he 104   | b) Order of Withdraw                        | val is no | ot termi | nated b  | out modifi | ed to allow                                    | crushing oper   | ations to res | sume      |         |           |
|                    |              |           |          | ure is brought to with                      |           |          |          |            |  | 9 1             |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
| -                  |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 |               |           |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 | Can Cantin    | inting To |         |           |
|                    |              |           |          |   |           |          |          |            |  |                 | See Continu   | Jalion FO | m       |           |
| Section III Subse  | equent Act   |           | _        |   |           |          |          |            |  |                 |               |           |         |           |
| 8. Extended To     | A. Date      | Mo        | Da       | Yr<br>B. Time (24 H                         | Hr. Cloc  | :k)      |          | с          | . Vacated                                      | D. Te           | rminated      | E. M      | odified | Х         |
| Section IV Inspe   | ection Data  | <u> </u>  |          |   |           |          |          |            |  |                 |               |           |         |           |
| 9. Type of Inspect | ion<br>E     | 1 5       | 10. E    | vent Number 0                               | 1 2       | 3 4 5    | 5 6      |            |  |                 |               |           |         |           |
| 11. Signature      | I            |           |          | A   | R Num     | ber 1    | 2. Date  | Mo         | Da Y   | ′r 13. Time (2  | 24 Hr. Clock  | .)        |         | $\square$ |
| TED SMITH          |              |           |          | 0   | 2 9 3     | 3 3      |          | 0 7        | 240  | 8               |               |           | 08      | 0 0       |
| MSHA Form 7000     | -3a, Mar 8   | 5 (Revis  | ed)      |   |           |          |          |            |  |                 |               |           |         |           |

104(b) ORDER MODIFICATION - ALLOWING MINING OPERATIONS TO RESUME

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

| Section I Violation Data   |   |
|--|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order   |
|  |   |
| 0 7 2 4 0 1 0 8 0 0  |   |
|  | 5. Operator<br>S&S MINING COMPANY                         |
| J.B. SMITH, PRESIDENT<br>6. Mine   |   |
| S&S MINE   | 7 1 - 0 3 7 9 8 - (contractor)                            |
| 8. Condition or Practice   | 8a. Written Notice (103g)                                 |
|  |   |
| Section 104(b) Order No. 4410190, issued 07/23/01, required that the   | primary crusher be shut down and not started until the    |
| crusher operator was using a respirator for which he had been fit-test   |   |
| The primary crusher is in full operation, the crusher operator is not we   |   |
| installed to control the dust. The crusher operator is working in visible<br>as "significant and substantial" because the conduct violated a provisi | <u> </u>  |
| standard.  |   |
| Note: Section I, Item 9B, is completed with 104(b).  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  | See Continuation Form (MSHA Form 7000-3a)                 |
| 9. Violation A. Health   |   |
| Safety B. Section  | C. Part/Section of  |
| Other of Act 1 0 4 - b   | Title 30 CFR  |
| Section II Inspector's Evaluation  |   |
| 10. Gravity:<br>A. Injury or Illness (has) (is): No Likelihood Unlikely  | Reasonably Likely Highly Likely Occurred                  |
|  |   |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Los   | t Workdays or Restricted Duty Permanently Disabling Fatal |
|  |   |
| C. Significant and Substantial (See Reverse): Yes No   | X   D. Number of Persons Affected   0   0   1             |
| 11. Negligence (check one)<br>A. None B. Low C. Moderat  | e X D. High E. Reckless Disregard                         |
|  |   |
|  | 3. Type of Issuance (check one)                           |
| 1 0 4 - a - , ,     -   -  | Citation X Order Safeguard                                |
| 14. Initial Action D. Writt  | en E. Citation/ F. Dated Mo Da Yr                         |
| A. Citation B. Order X C. Safeguard Notic  | e 🗍 🛛 Order 🛛 4 🔄 1 0 1 9 0 👘 0 7 2 3 0 1                 |
| 15. Area or Equipment  |   |
|  |   |
|  |   |
| 16. Termination Due Mo Da Yr<br>A. Date B. Time (24  |   |
| A. Date 0 7 2 4 0 1 B. Time (24<br>0 7 2 4 0 1 Hr. Clock)  | 0 9 0 0   |
| Section III Termination Action   |   |
| 17. Action to Terminate  |   |
|  |   |
| 18. Terminated Mo Da Yr  |   |
| A. Date B. Time (24 Hr Clock)  |   |
| Section IV Automated System Data   |   |
| 19. Type of Inspection 20. Event Number  | 21. Primary or Mill                                       |
|  |   |
| (activity code)   E   0   1   0   1   2   3   4<br>22. Signature   | 23. AR Number   |
| <b>C</b>   |   |
| TED SMITH<br>MSHA Form 7000-3 Mar 85 (Revised)   | 0 2 9 3 3   |
|  | ATION - FAILURE TO  |
|  |   |

COMPLY WITH 104(b) ORDER

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

| Section I V               | Violation Dat                 | а         |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|---------------------------|-------------------------------|-----------|-------------------|---------------|----------|-----------------|----------|-----------|----------------------|------------|----------|----------------|---------|--------|--------------|----------|
| 1. Date                   | Mo Da                         | Yr        | 2. Time (24 Hr    | . Clock)      |          |                 |          |           |                      |            | 3. Cita  | ation/Order    |         |        |              |          |
|                           | 0 7 1 6                       | 8 0 8     |                   |               | 110      | 6 0             | 0        |           |                      |            | Nur      | nber           |         | 44     | 10           | 192      |
| 4. Served T               |                               |           |                   |               | 1 1 1    |                 | _        | perator   |                      |            | INUI     |                |         |        | 101          | 1912     |
|                           |                               | AFETY     | DIRECTOR          |               |          |                 |          |           | TIONAL CE            | -MENT      | CORP     | ORATION        |         |        |              |          |
| 6. Mine                   | 2 001120, 0                   |           | 2                 |               |          |                 | _        | ine ID    |                      |            |          |                |         |        |              |          |
| ICC MIL                   | L                             |           |                   |               |          |                 |          |           | 75-0                 | 0 0        | 2 4      | -              | (contr  | actor) |              |          |
| 8. Condition              | or Practice                   |           |                   |               |          |                 |          |           |                      |            |          | 8a. Writte     | n Notic | e (103 | 3g)          |          |
|                           |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
| -                         |                               |           | erator was expos  |               |          |                 |          |           | -                    |            |          | -              |         |        |              |          |
|                           |                               |           | /03/08. This exc  |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           | pling and analys  |               |          |                 |          |           | oved fit-teste       | ed respi   | rator a  | nd a respirate | ory     |        |              |          |
| protectio                 | n program n                   | ieeting   | the requirements  | S OF AINSI ZE | 38.2-1   | 969 Wa          | as in pi | ace.      |                      |            |          |                |         |        |              |          |
| All feasik                | ole engineeri                 | na cont   | rols were not use | ed to reduce  | the h    | anner           | operat   | or's exp  | osure Adu            | ist collec | tion sv  | stem was he    | ina use | h      |              |          |
|                           |                               |           | s in the duct wo  |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           | done with shove   |               |          |                 |          |           |                      |            | ,        |                |         |        |              |          |
|                           |                               |           |                   |               |          | 0               |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           |                   |               |          |                 |          |           | See (                | Continua   | ation Fr | orm (MSHA F    | form 7  | 000-32 | 0            |          |
| 9. Violation              | A. Health                     | ТТ        |                   |               |          |                 |          |           | 0000                 | Continue   |          |                |         |        | <u>,</u><br> |          |
| 9. VIOIA11011             | Safety                        |           | B. Section        |               |          |                 |          | C F       | art/Section of       | of         |          |                |         |        |              |          |
|                           | Other                         |           | of Act            |               |          |                 |          |           | itle 30 CFR          | 01         |          | 56.5           | 0 0     | 1 a/   | . 5          | 0 0 5    |
| Section II                | Inspector's                   | Evaluati  |                   |               |          |                 |          | -         |                      |            |          |                |         | 1.51   |              |          |
| 10. Gravity:              |                               |           |                   | <b>—</b>      |          |                 | -        |           | 👝                    | -          |          |                |         |        | . r          | _        |
| A. Injury o               | or Illness (ha                | is) (is): | No Likelihood     |               | nlikely  |                 | Re       | easonat   | ly Likely            | 1          | Highl    | y Likely       |         | Occu   | rred         |          |
|                           | ry or Illness                 |           |                   |               | _        |                 |          |           |                      |            |          |                |         |        |              |          |
| sona                      | ably be expe                  | cted to I | be: No Lost       | Workdays      | Ш        | Lost            | Worko    | lays or l | Restricted D         | uty        | Pe       | rmanently Dis  | sabling | Х      | Fat          | ial      |
| C. Sign                   | ificant and S                 | ubstant   | ial (See Reverse  | e): Yes       |          | No              | X        |           |                      |            | D. Num   | ber of Perso   | ns Affe | cted   |              | 0 0 1    |
| 11. Negliger              | nce (ch <u>eck</u> d          | one)      |                   |               |          |                 |          |           |                      | _          |          |                |         |        |              |          |
| A. Non                    | e                             |           | B. Low            |               | C. M     | lodera          | te       | Х         | D. Higl              | h          |          | E. Red         | kless   | Disreg | ard          |          |
| 12. Type of               | Action                        |           |                   |               | П        | 1               | 3. Type  | e of Issu | ance (check          | k one)     |          |                |         |        |              |          |
|                           |                               | 04        | - a - ,           | -             |          | -               |          | ation     | X                    | ,          | Orde     | r              | Saf     | eguard |              |          |
|                           |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              | <u> </u> |
| 14. Initial Ac<br>A. Cita |                               | B. Orde   |                   | equard        | ם ר      | 0. Writ<br>Noti | _        | ┑┃╘       | . Citation/<br>Order |            |          | F. D           | ated    | Mo     | Da           | a Yr     |
| A. Olla                   |                               | b. Orde   |                   | eguaru        |          | NOU             |          | -         | Number               |            |          |                |         |        |              |          |
| 15. Area or               | Equipment                     |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
| 16. Termina               | tion Due                      |           | Mo Da Y           | r             |          |                 | <u> </u> |           |                      |            |          |                |         |        |              |          |
|                           |                               | . Date    |                   |               | me (24   | 4               |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           | 08030             | 8 н           | r. Cloo  | ck)             | 0 8      | 300       |                      |            |          |                |         |        |              |          |
|                           | - Termination                 | n Action  |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
| 17. Action to             | 5 Terminate                   |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
| 18. Termina               | ted                           | M         | lo Da Yr          |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           | A. Da                         |           |                   | B. Time (2    | 4 Hr 0   | Clock)          |          |           |                      |            |          |                |         |        |              |          |
| <u> </u>                  |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           | <ul> <li>Automated</li> </ul> | System    |                   |               | <u> </u> | <u> </u>        |          | -         |                      |            |          |                |         |        |              |          |
| 19. Type of               | Inspection                    |           | 20. Event N       |               |          |                 |          |           | rimary or Mi         | ill        |          |                |         |        |              |          |
|                           | ity code)                     | E 0       | 1                 | C             | 0 0      | 8 8 3           | 3 0 ′    | 1         |                      |            |          |                |         |        |              |          |
| 22. Signatur              | re                            |           |                   |               |          |                 |          |           |                      |            |          | 23. AR N       | lumbei  |        |              |          |
| JOHN R                    | EDWOOD                        |           |                   |               |          |                 |          |           |                      |            |          |                |         |        | 03           | 3 3 3    |
| MSHA Form                 | n 7000-3 Ma                   | r 85 (Re  | vised)            |               |          |                 |          |           |                      |            |          |                |         |        |              |          |
|                           |                               |           |                   |               |          |                 |          |           |                      |            |          |                |         |        |              |          |

104(a) CITATION - "NON-S&S" OVEREXPOSURE TO SILICA-BEARING DUST

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

| Section I Subsequent                     | Action/Continuation   | Data                         |           |          |           |     |  |  |
|--|-----------------------|------------------------------|-----------|----------|-----------|-----|--|--|
| 1. Subsequent Action                     | 1a. Continuation      | 2. Dated<br>(Original Issue) | Мо<br>0 7 | Da<br>16 | Yr<br>0 8 |     | 3. Citation/Order<br>Number                          | 4 4 1 0 1 9 2 - 0 1                        |
| 4. Served To                             |                       |                              |           | 5. Op    | erator    |     |  |  |
| RICHARD JONES, S                         | AFETY DIRECTOR        |                              |           |          |           |     | CEMENT CORPORAT                                      | ION  |
| 6. Mine                                  |                       |                              |           | 7. Mir   | ie ID     |     |  |  |
| ICC MILL                                 |                       |                              |           |          |           | 75- | 00024-   | (contractor)                               |
| Section II Justification                 | for Action            |                              |           |          |           |     |  |  |
|  |                       |                              |           |          |           |     |  |  |
|  |                       |                              |           |          |           |     | the #2 bagging machine the machine operator was four |  |
|  |                       |                              |           |          |           |     | a resample conducted or                              |  |
|  |                       | he Threshold Limit Va        |           |          |           |     | a resample conducted of                              | 1 August 7, 2000.                          |
|  |                       |                              |           |          |           |     |  |  |
|  |                       |                              |           |          |           |     |  |  |
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|  |                       |                              |           |          |           |     |  |  |
|  |                       |                              |           |          |           |     |  | See Continuation Form                      |
|  | Astian Talan          |                              |           |          |           |     |  |  |
| Section III Subsequent<br>8. Extended To | Action Taken<br>Mo Da | Yr                           |           |          |           |     |  |  |
| A. Da                                    |                       | B. Time (24 Hr.              | Clock     | ()       |           | c   | . Vacated D. Te                                      | erminated X E. Modified                    |
|  |                       |                              |           | ,        |           |     |  |  |
| Section IV Inspection I                  |                       |                              |           |          |           |     |  |  |
| 9. Type of Inspection                    | E 1 5                 | vent Number 0 0              | 88        | 3 1      | 2         |     |  |  |
| 11. Signature                            |                       | AR                           | Numb      | er 12    | . Date    | Мо  | Da Yr 13. Time                                       | (24 Hr. Clock)                             |
| TED SMITH                                |                       |                              | 93        |          |           |     | 1908   | 1 2 3 (                                    |
| MSHA Form 7000 20 M                      |                       |                              |           |          |           |     |  | <u>· · · · · · · · · · · · · · · · · ·</u> |

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

104(a) CITATION - TERMINATION AFTER RESAMPLING

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

| Section I Subsequen     | t Action/Continuation | Data                         |        |              |                          |  |          |
|-------------------------|-----------------------|------------------------------|--------|--------------|--------------------------|--|----------|
| 1. Subsequent Action    | 1a. Continuation      | 2. Dated<br>(Original Issue) |        | Da Yr<br>608 | 3. Citation/Or<br>Number |  | 92-02    |
| 4. Served To            |                       |                              | 5.     | Operator     |                          |  |          |
| RICHARD JONES,          | SAFETY DIRECTOR       |                              |        | INTERNAT     | IONAL CEMENT COR         | RPORATION  |          |
| 6. Mine                 |                       |                              | 7.     | Mine ID      |                          |  |          |
| ICC MILL                |                       |                              |        | 7            | 7 5 - 0 0 0 2 4          | 4 - (contractor)                                     |          |
| Section II Justificatio | n for Action          |                              |        |              |                          |  |          |
|                         |                       |                              |        |              |                          |  |          |
|                         |                       |                              |        |              |                          | machine and wrapping it in being installed. The mine |          |
|                         |                       |                              |        |              |                          | Prior to the resumption of                           |          |
|                         |                       |                              |        |              |                          | will be considered by MSH.                           | A        |
|                         |                       | ore than ordinary negli      |        | ented standa | far Fanare to comply     |  |          |
|                         | 6                     |                              | 0      |              |                          |  |          |
|                         |                       |                              |        |              |                          |  |          |
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|                         |                       |                              |        |              |                          |  |          |
|                         |                       |                              |        |              |                          |  |          |
|                         |                       |                              |        |              |                          | See Continuation Fo                                  | orm      |
| Section III Subseque    |                       |                              |        |              | 1 1                      |  |          |
| 8. Extended To<br>A. I  | Date Mo Da            | Yr<br>B. Time (24 Hr         | Clock) |              | C. Vacated               | D. Terminated X E.                                   | Modified |
| Section IV Inspection   |                       |                              |        |              |                          |  |          |
| 9. Type of Inspection   |                       | vent Number                  |        |              |                          |  |          |
|                         | E 1 5                 |                              | 883    | 1 2          |                          |  |          |
| 11. Signature           |                       | AR                           | Number | 12. Date     | Mo Da Yr 1               | 3. Time (24 Hr. Clock)                               |          |
| TED SMITH               |                       |                              | 933    |              | 081908                   | . ,  | 1230     |
|                         |                       | 312                          |        | •            |                          |  |          |

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

104(a) CITATION - TERMINATION AFTER REMOVAL OF EQUIPMENT FROM SERVICE

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

| Section I Violation Data   |             |             |                               |                      |                   |
|--|-------------|-------------|-------------------------------|----------------------|-------------------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |             | TT          |                               | 3. Citation/Order    |                   |
| 0 7 0 6 0 8  | 1           | 6 0 0       |                               | Number               | 4410194           |
| 4. Served To   |             |             | 5. Operator                   |                      |                   |
| SAMUEL ADAMS, LEVEL FOREMAN  |             |             | ABLE MINING, INC.             |                      |                   |
| 6. Mine  |             |             | 7. Mine ID                    |                      |                   |
| THE DOUBLE M MINE  |             |             | 57-06                         | 7 8 9 -              | (contractor)      |
| 8. Condition or Practice   |             |             |                               | 8a. Writte           | en Notice (103g)  |
| The 1402 stope driller was exposed to air containing 1.90  | WL          | of rador    | daughters on July 6, 2008. T  | his exceeded the max | imum permissible  |
| exposure limit of 1.00 WL times the error factor (1.20) for  |             |             |                               |                      |                   |
| and the 1402 stope regulator door was damaged. The dr  | iller w     | vas not     | wearing a respirator.         |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             | See Conti                     | nuation Form (MSHA   | Form 7000-3a)     |
| 9. Violation A. Health   |             | ТГ          |                               |                      |                   |
| Safety B. Section  |             |             | C. Part/Section of            |                      |                   |
| Other of Act -   |             |             | Title 30 CFR                  | 57.5                 | 039               |
| Section II Inspector's Evaluation<br>10. Gravity:  |             |             |                               |                      |                   |
| A. Injury or Illness (has) (is): No Likelihood 🗌 Un  | nlikely     | ′ 🗖         | Reasonably Likely X           | Highly Likely        | Occurred          |
| B. Injury or Illness could rea-  |             |             |                               |                      |                   |
| sonably be expected to be: No Lost Workdays  |             | Lost        | Workdays or Restricted Duty   | Permanently          | Disabling Fatal X |
| C. Significant and Substantial (See Reverse): Yes  | X           | No          |                               | D. Number of Perso   | ns Affected 0 0 1 |
| 11. Negligence (check one)   |             |             |                               | _                    |                   |
| A. None B. Low   | С. М        | loderate    | e X D. High                   | E. Re                | ckless Disregard  |
| 12. Type of Action   |             | 13          | . Type of Issuance (check one | <sup>e)</sup>        | _                 |
| 1 0 4 - a - ,     -  | '           | -           | Citation X                    | Order                | Safeguard         |
| 14. Initial Action   |             | ). Writt    | en E. Citation/               | F.C                  | Dated Mo Da Yr    |
| A. Citation B. Order C. Safeguard  | ]           | Notic       |                               |                      |                   |
| 15. Area or Equipment  |             |             | Number                        |                      |                   |
|  |             |             |                               |                      |                   |
| 16. Termination Due Mo Da Yr   |             |             |                               |                      |                   |
| A. Date       B. Tim   | ne (24      | 4           |                               |                      |                   |
|  | . Cloc      | ck)         | 1 6 0 0                       |                      |                   |
| Section III Termination Action<br>17. Action to Terminate  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
|  |             |             |                               |                      |                   |
| 18. Terminated         Mo         Da         Yr           A. Date         I         I         B. Time (24) | 4 Hr (      | Clock)      |                               |                      |                   |
|  |             | ,           |                               |                      |                   |
| Section IV Automated System Data   | <del></del> | <del></del> |                               |                      |                   |
| 19. Type of Inspection   20. Event Number  |             |             | 21. Primary or Mill           |                      |                   |
|  |             |             |                               |                      |                   |
|  | 34          | 4 5 6       | 7 8                           |                      |                   |
| 22. Signature  | 3 4         | 4 5 6       | 7 8                           | 23. AR 1             |                   |
|  | 34          | 4 5 6       | 7 8                           | 23. AR 1             | Number 0 2 5 5 5  |

104(a) CITATION - "S&S" OVEREXPOSURE TO RADON DAUGHTERS

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

| Section I Subsequent Act     | tion/Continuation | Data                         |           |           |           |  |            |
|------------------------------|-------------------|------------------------------|-----------|-----------|-----------|--|------------|
| 1. Subsequent Action 1       | a. Continuation   | 2. Dated<br>(Original Issue) | Мо<br>0 7 | Da<br>0 6 | Yr<br>0 8 | 3. Citation/Order<br>Number 4 4 1 0 1  | 94-01      |
| 4. Served To                 |                   |                              |           | 5. Ope    | erator    | · · · · · · · · · · · · · · · · · · ·  |            |
| SAMUEL ADAMS, LEV            | EL FOREMAN        |                              |           | AB        | BLE MI    | NING, INC.   |            |
| 6. Mine                      |                   |                              |           | 7. Min    | ie ID     |  |            |
| THE DOUBLE M MINE            |                   |                              |           |           |           | 5 7 - 0 6 7 8 9 - (contractor)   |            |
| Section II Justification for | Action            |                              |           |           |           |  |            |
|                              |                   |                              |           |           |           | ntration of radon daughters under the exposure lim<br>hen resampled on July 7, 2008. During resampling |            |
|                              |                   |                              |           |           |           | n the maximum permissible exposure limit of 1.00 \   |            |
| times the error factor (1    |                   |                              |           |           |           |  |            |
|                              |                   |                              |           |           |           |  |            |
|                              |                   |                              |           |           |           |  |            |
|                              |                   |                              |           |           |           |  |            |
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|                              |                   |                              |           |           |           | See Continuation I   | Form       |
| Section III Subsequent A     |                   |                              |           |           |           |  |            |
| 8. Extended To<br>A. Date    | Mo Da             | Yr<br>B. Time (24 Hr.        | Clock)    |           |           | C. Vacated D. Terminated X E   | . Modified |
| Section IV Inspection Date   |                   |                              |           |           |           |  |            |
| 9. Type of Inspection<br>E   |                   | vent Number 0 3              | 4 5       | 6 7       | 8         |  |            |
| 11. Signature                |                   |                              | Numbe     |           | . Date    | Mo Da Yr 13. Time (24 Hr. Clock)   |            |
| BILL WILLIAMS                |                   | 0 2                          | 55        | 5         |           | 0 7 0 7 0 8  | 1600       |

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

104(a) CITATION - TERMINATION AFTER RESAMPLING

### U.S. Department of Labor

Mine Safety and Health Administration

| Section I Vi    | olation | Data   |         |                        |   |   |     |   |   |             |     |      |     |     |     |    |     |     |      |     |      |     |      |         |      |      |     |     |   |     |     |   |
|-----------------|---------|--------|---------|------------------------|---|---|-----|---|---|-------------|-----|------|-----|-----|-----|----|-----|-----|------|-----|------|-----|------|---------|------|------|-----|-----|---|-----|-----|---|
| 1. Date         | Мо      | Da     | Yr      | 2. Time (24 Hr. Clock) | Τ |   |     |   |   |             |     |      |     |     |     |    | 3.  | Cit | atio | on/ | Ord  | der |      |         |      |      |     |     |   |     |     |   |
|                 | 09      | 2 5    | 08      |                        | 0 | 8 | 3 3 | 3 | 0 |             |     |      |     |     |     |    |     | Νι  | umb  | ber |      |     |      |         | 1    | 2    | 3   | 3 4 | 7 | ' 8 | 3 2 | 2 |
| 4. Served To    |         |        |         | •                      |   | - |     |   |   | 5. Operator |     |      |     |     |     |    |     |     |      |     |      |     |      |         |      |      |     |     |   |     |     |   |
| Mike Mo         | Greg    | or, Sa | afety [ | Director               |   |   |     |   | I | Beautifu    | I V | ista | a C | Coa | l C | on | npa | any |      |     |      |     |      |         |      |      |     |     |   |     |     |   |
| 6. Mine         |         |        |         |                        |   |   |     | _ |   | 7. Mine ID  |     |      |     |     |     |    |     |     |      |     |      |     |      |         |      |      |     |     |   |     |     |   |
| No. 1           |         |        |         |                        |   |   |     |   | l |             | 1   | 5    | -   | 0   | 3   | 5  | 3   | 6   | -    |     |      |     |      | (cont   | ract | tor) | )   |     |   |     |     |   |
| 8. Condition of | or Prac | tice   |         |                        |   |   |     |   |   |             |     |      |     |     |     |    |     |     |      | 8   | a. \ | Wri | tter | n Notio | ce ( | 10   | 3q) | ,   |   |     | Т   | _ |

The mine operator failed to replace missing labels on five 55-gallon drums of perchloroethylene stored on the ground floor of the preparation plant. The material data safety sheet (MSDS) provided by the manufacturer indicates that perchloroethylene is a health hazard. The drums were sealed, stored in a protected area, and there was no evidence of material leakage. This condition was observed during a normal production shift and 5 miners are frequently working or traveling in the area. The plant normally operates two 10-hour production shifts per day.

| See Co   | ntinuation Form (MSHA Form 7000-3a) |
|--|-------------------------------------|
| 9. Violation A. Health X<br>Safety B. Section C. Part/Section of<br>Other of Act - Title 30 CFR  | 4 7 . 4 1 a 1                       |
| Section II Inspector's Evaluation  |                                     |
| 10. Gravity:         A. Injury or Illness (has) (is):         No Likelihood         Unlikely         X         Reasonably Likely   | Highly Likely                       |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty  | Permanently Disabling X Fatal       |
| C. Significant and Substantial (See Reverse): Yes No X   | D. Number of Persons Affected 0 1 0 |
| 11. Negligence (check one)<br>A. None B. Low C. Moderate X D. High   | E. Reckless Disregard               |
| 12. Type of Action       1     0     4     -     a     -     -     13. Type of Issuance (check on Citation X)  | e)<br>Order 0 Safeguard             |
| 14. Initial Action     D. Written     E. Citation/       A. Citation     B. Order     C. Safeguard     Notice  | F. Dated Mo Da Yr                   |
| 15. Area or Equipment  |                                     |
| 16. Termination Due Mo Da Yr<br>A. Date B. Time (24  |                                     |
| 0 9 2 6 0 8 Hr. Clock) 0 7 0 0   |                                     |
| Section III Termination Action   |                                     |
| 17. Action to Terminate  |                                     |
|  |                                     |
| 18. Terminated A. Date A. Date B. Time (24 Hr Clock)   |                                     |
| Section IV Automated System Data   |                                     |
| 19. Type of Inspection<br>(activity code)         E         0         1         20. Event Number         7         6         5         4         3         2         21. Primary or Mill |                                     |
| 22. Signature  | 23. AR Number 2 3 1 9 0             |
| MSHA Form 7000-3 Mar 85 (Revised)  |                                     |
|  |                                     |

### 104(a) CITATION - "NON S&S" HAZCOM

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

| Section I Violation Data   |                    |         |                  |                            |                          |                |           |             |       |
|--|--------------------|---------|------------------|----------------------------|--------------------------|----------------|-----------|-------------|-------|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |                    |         |                  |                            | <ol><li>Citati</li></ol> | on/Order       |           |             |       |
| 0 7 1 6 0 8  | 160                |         |                  |                            | Num                      | her            | 4         | 4 1 0       | 196   |
| 4. Served To   |                    |         | . Operator       |                            |                          | 501            | ! ·       | .1.1.       |       |
| RICHARD JONES, SAFETY DIRECTOR   |                    |         | INTERNATIC       | ONAL CEMEN                 | IT CORPO                 | RATION         |           |             |       |
| 6. Mine  |                    | 7.      | . Mine ID        |                            |                          | ПП             |           |             |       |
| ICC MILL   |                    |         | 7                | 5 - 0 0                    | 024-                     | •              | contrac   | tor)        |       |
| 8. Condition or Practice   |                    |         |                  |                            |                          | 8a. Written    | Notice    | (103g)      |       |
| The #2 bagging machine operator was exposed to a shift-  | weighter           | lavera  | race of 1.56 mg/ | m <sup>3</sup> of respiral | hle silica-h             | earing dust y  | vhen      |             |       |
| sampled for a full shift on 07/03/08. This amount exceed   | -                  |         | <u> </u>         |                            |                          |                |           | (1.20)      |       |
| for respirable free silica sampling and analysis. The oper   |                    |         |                  |                            |                          |                |           |             |       |
| respiratory protection program meeting the requirements  |                    |         |                  |                            |                          |                | ols were  | e           |       |
| not used to reduce the bagger operator's exposure. A dust collection system was being used but numerous holes and leaks  |                    |         |                  |                            |                          |                |           |             |       |
| in the ductwork reduced the system's efficiency. Accumulations of dust, 5 to 6 inches deep in the area, were indicative of these leaks and the poor cleanup methods. Cleanup was done sporadically, when production permitted, with shovels and brooms causing |                    |         |                  |                            |                          |                |           |             |       |
|  | <u>^</u>           | •       | <u>^</u>         | <u>^</u>                   |                          |                |           |             |       |
| more dust to become airborne. The workplace safety rep<br>dust collection system had been noted and reported to the  |                    |         |                  |                            |                          |                |           |             |       |
| that when customer orders slowed down he might get the   |                    |         |                  | ,                          |                          | •              |           |             |       |
| respirators for the employees because they were too expe   | ensive. T          | his co  | mpany has rece   | eived four pre             | vious viola              | ations for ove | er-       |             |       |
| exposure to silica-bearing dust at the bagging plant within  |                    |         |                  |                            |                          |                |           | - 11        |       |
| more than ordinary negligence by deeming production me<br>to comply with a mandatory standard.   | ore impo           | rtant t | nan the miner's  | nealth. This               | violation                | s an unwarra   | ntable i  | allure      |       |
|  |                    |         |                  |                            |                          |                |           |             |       |
|  |                    |         |                  |                            |                          |                |           |             |       |
| 9. Violation A. Health   |                    |         |                  |                            |                          |                |           |             |       |
| Safety B. Section  |                    |         |                  | Section of                 | 5                        | 56.50          |           | a/. 5       | 005   |
| Other of Act - Section II Inspector's Evaluation   |                    |         | l itle 3         | 30 CFR                     | 0                        | 6.50           | 0 1       | a/. 5       | 5005  |
| 10. Gravity:   |                    |         |                  |                            |                          |                |           |             |       |
| A. Injury or Illness (has) (is): No Likelihood   | likely             |         | Reasonably Li    | ikely X                    | Highly                   | Likely         | C         | ccurred     |       |
| B. Injury or Illness could rea-  |                    |         |                  |                            |                          |                |           |             |       |
| sonably be expected to be: No Lost Workdays  | Los                | t Work  | days or Restric  | cted Duty                  | P P                      | ermanently D   | isabling  | ΧF          | atal  |
| C. Significant and Substantial (See Reverse): Yes  | ХN                 | 0       |                  |                            | D. Numb                  | er of Person   | s Affecte | ed          | 001   |
| 11. Negligence (check one)   | • •                | •       | ·                |                            | _                        |                |           |             |       |
| A. None B. Low   | C. Mode            | erate   |                  | D. High                    | Х                        | E. Reck        | less Dis  | regard      |       |
| 12. Type of Action   |                    | 13. T   | ype of Issuanc   | e (check one)              | )                        |                |           |             | _     |
| 1   0   4   -   d   -   1   ,         -  | -                  |         | Citation         | Х                          | Order                    |                | Safeg     | Jard        |       |
| 14. Initial Action   |                    | /ritten | E Cit            | tation/                    |                          | F. Da          | tod       | Mol         | Da Yr |
| A. Citation B. Order C. Safeguard  |                    | otice   |                  | der                        |                          | 1.00           | ieu       |             |       |
| 15. Area or Equipment  | _                  |         | Nu               | mber                       |                          |                |           |             |       |
|  |                    |         |                  |                            |                          |                |           |             |       |
| 16. Termination Due Mo Da Yr   | (04                |         |                  |                            |                          |                |           |             |       |
| A. Date   B. Tim<br>0 7 1 8 0 8 Hr.  | ne (24<br>. Clock) |         | 1600             |                            |                          |                |           |             |       |
| Section III Termination Action   | . CIOCK)           |         |                  |                            |                          |                |           |             |       |
| 17. Action to Terminate  |                    |         |                  |                            |                          |                |           |             |       |
| 18. Terminated Mo Da Yr  |                    |         | 1 1 1 1          |                            |                          |                |           |             |       |
| A. Date       B. Time (24  | 4 Hr Cloc          | k)      |                  |                            |                          |                |           |             |       |
|  |                    |         |                  |                            |                          |                |           |             |       |
| Section IV Automated System Data   | пт                 | тт      |                  |                            |                          |                |           |             |       |
| 19. Type of Inspection 20. Event Number  |                    |         | 1 1              | ary or Mill                |                          |                |           |             |       |
|  | 088                | 3 3 0   | 0 1              |                            |                          |                |           | <del></del> |       |
| 22. Signature  |                    |         |                  |                            |                          | 23. AR Nu      | Imber     |             |       |
| JOHN REDWOOD   |                    |         |                  |                            |                          |                |           | 03          | 3333  |
| MSHA Form 7000-3 Mar 85 (Revised)  |                    |         |                  |                            |                          |                |           |             |       |

104(d)(1) CITATION - "S&S" OVEREXPOSURE TO SILICA-BEARING DUST

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

| Section I Violation Data  |   |
|---|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock) 3. Citation/Order   |   |
| 0 7 0 6 0 8 1 6 0 5 Number 4 4 1 0 1 9  | 7 |
| 4. Served To 5. Operator  |   |
| SAMUEL ADAMS, LEVEL FOREMAN ABLE MINING, INC.   |   |
| 6. Mine ID  |   |
| THE DOUBLE M MINE         5         7         -         0         6         7         8         9         -         (contractor)           0. Or of the are Deputies         0. <td>_</td>  | _ |
| 8. Condition or Practice 8a. Written Notice (103g)  |   |
| The 1402 stope driller was exposed to air containing 1.90 WL of radon daughters on July 6, 2008. This amount exceeded the maximum   |   |
| permissible concentration (exposure limit) of 1.00 WL times the error factor (1.20) for radon daughter sampling. Several sections   | _ |
| of ventilation tubing had large holes and the 1402 stope regulator door was damaged. The driller was not wearing a respirator.  |   |
| The damaged regulator door and the malfunctioning ventilation tubing had been noted and turned in to the foreman, Joe Jones, two  |   |
| weeks preceding this sampling. Additionally, company samples taken for the week preceding the MSHA samples indicated over-<br>exposure to radon daughters in this area. Foreman Jones stated that it was too expensive to repair the defective items. Management  | — |
| engaged in aggravated conduct constituting more than ordinary negligence in deeming production more important than a miner's  |   |
| health. This violation is an unwarrantable failure to comply with a mandatory standard.   |   |
|   |   |
|   |   |
|   | — |
| See Continuation Form (MSHA Form 7000-3a)   | - |
| 9. Violation A. Health  |   |
| Safety B. Section C. Part/Section of  |   |
| Other         of Act         -         Title 30 CFR         5         7         .         5         0         3         9         1         1           Section II Inspector's Evaluation         -          -  |   |
| 10. Gravity:  | - |
| A. Injury or Illness (has) (is): No Likelihood Unlikely Reasonably Likely X Highly Likely Occurred  |   |
| B. Injury or Illness could rea-   | _ |
| sonably be expected to be: No Lost Workdays Lost Workdays or Restricted Duty Permanently Disabling Fatal  | Х |
| C. Significant and Substantial (See Reverse): Yes X No D. Number of Persons Affected 0 0  | 1 |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate       D. High         E. Reckless Disregard       X   |   |
| 12. Type of Action  |   |
| 1 0 4 - d - 1 , Citation Order X Safeguard  |   |
| 14. Initial Action<br>A. Citation X B. Order C. Safeguard Notice Order 4 4 1 0 1 1 1 F. Dated Mo Da Yr  | 8 |
|   | Ũ |
| 15. Area or Equipment<br>1402 STOPE DRILLER   |   |
|   |   |
| 16. Termination Due Mo Da Yr<br>A. Date J J B. Time (24   |   |
| Hr. Clock   |   |
| Section III Termination Action  | _ |
| 17. Action to Terminate   |   |
|   | _ |
| 18. Terminated         Mo         Da         Yr           A. Date         B. Time (24 Hr Clock)         Image: Clock description of the second description of |   |
| Section IV Automated System Data  |   |
| 19. Type of Inspection 20. Event Number 21. Primary or Mill   |   |
| (activity code) E 0 1 0 3 4 5 6 7 8   |   |
| 22. Signature 23. AR Number   |   |
| BILL WILLIAMS   | 5 |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |
|   |   |

104(d)(1) ORDER - "S&S" OVEREXPOSURE TO RADON DAUGHTERS

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

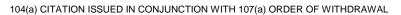
| vine Safety and Health Administra | ation |  |
|-----------------------------------|-------|--|
|                                   |       |  |

| Section I Violation Data  |   |
|---|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         0         8         3         0 | 3. Citation/Order         4         4         1         0         1         9         8 |
|   | Operator  |
|   |   |
| J.R. JOHNSON, SAFETY DIRECTOR<br>6. Mine 7.   |   |
|   |   |
| ABC MINE AND MILL 8. Condition or Practice  | 7   5   -   0   9   1   3   3   -       (contractor)<br>8a. Written Notice (103g)       |
|   |   |
| An underground tram operator is working in area nine east where the mea   | peured earbon monovide lovel was 800 ppm (parts por                                     |
| million). The operator has been in the area for over two hours and has the                                      |   |
| and some mental confusion. Sampling was conducted in the operator's w   |   |
| not wearing respiratory protection. The TLV for a full shift is 50 ppm, and                                     |   |
| this length of time can result in death. An oral imminent danger order was                                      |   |
| hours this date.  |   |
|   |   |
| Citation No. 4410199 is being issued in conjunction with this order.  |   |
|   |   |
|   |   |
|   |   |
|   | See Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health  |   |
| Safety B. Section   | C. Part/Section of  |
| Other of Act  | Title 30 CFR  |
| Section II Inspector's Evaluation   |   |
| 10. Gravity:  |   |
| A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely Occurred  |
| B. Injury or Illness could rea-   |   |
| sonably be expected to be: No Lost Workdays 🗌 Lost Workd  | days or Restricted Duty Permanently Disabling Fatal                                     |
|   |   |
| C. Significant and Substantial (See Reverse): Yes No  | D. Number of Persons Affected   |
| 11. Negligence (check one)         A. None       B. Low         C. Moderate                                     | D. High E. Reckless Disregard   |
| 12. Type of Action 13. Ty   | pe of Issuance (check one)  |
| 1 0 7 - a - ,     -   - C   | itation Order X Safeguard   |
| 14. Initial Action D. Written   | E. Citation/ F. Dated Mo Da Yr  |
| A. Citation B. Order C. Safeguard Notice  |   |
| 15. Area or Equipment   |   |
| TRAM OPERATOR (NINE EAST)   |   |
|   |   |
| 16. Termination Due Mo Da Yr<br>A. Date I I B. Time (24   |   |
| Hr. Clock   |   |
| Section III Termination Action  |   |
| 17. Action to Terminate   |   |
|   |   |
|   |   |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     I   B. Time (24 Hr Clock)                     |   |
| Section IV Automated System Data  |   |
| 19. Type of Inspection 20. Event Number   | 21. Primary or Mill   |
| (activity code) E 0 1 0 7 3 5 1 1   |   |
| 22. Signature   | 23. AR Number   |
| -   |   |
| JOHN SMITH  | 0 1 9 9 9   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |

107(a) ORDER - "S&S" OVEREXPOSURE TO CARBON MONOXIDE

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

| Section I Violation Data   |          |  |
|--|----------|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  |          | 3. Citation/Order  |
| 0 7 0 4 0 8 0 8  | 3 0      | Number 4 4 1 0 1 9 9                                     |
| 4. Served To   |          | 5. Operator  |
| J.R. JOHNSON, SAFETY DIRECTOR  |          | ABC MINING COMPANY                                       |
| 6. Mine  |          | 7. Mine ID   |
| ABC MINE AND MILL  |          | 7 5 - 0 9 1 3 3 - (contractor)                           |
| 8. Condition or Practice   |          | 8a. Written Notice (103g)                                |
| A 1 1/ / 1/ 1/ / 1   | .1       |  |
| An underground tram operator is working in area nine east where  |          |  |
| million). The operator has been in the area for over two hours ar<br>and some mental confusion. Sampling was conducted in the oper |          |  |
| not wearing respiratory protection. The TLV for a full shift is 50   |          |  |
| this length of time can result in death. An oral imminent danger   |          |  |
| hours this date.   |          |  |
|  |          |  |
| This violation is a factor cited in imminent danger order No. 44107  | 198      |  |
|  |          |  |
|  |          |  |
|  |          | See Continuation Form (MSHA Form 7000-3a)                |
| 9. Violation A. Health   | <u> </u> |  |
| Safety B. Section  |          | C. Part/Section of                                       |
| Other of Act -   |          | Title 30 CFR 5 7. 5 0 0 1 a /. 5 0 0 5                   |
| 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 rea-  |          |  |
| sonably be expected to be: No Lost Workdays  | ost Wo   | orkdays or Restricted Duty Permanently Disabling Fatal X |
| C. Significant and Substantial (See Reverse): Yes X  | No       | D. Number of Persons Affected 0 0 1                      |
| 11. Negligence (check one)   |          |  |
| A. None B. Low C. Mod  | derate   | E. Reckless Disregard                                    |
| 12. Type of Action   | 13.      | . Type of Issuance (check one)                           |
| 1 0 4 - a - ,     -   -  |          | Citation X Order Safeguard                               |
| 14. Initial Action D. \  | Writte   | en E. Citation/ F. Dated Mo Da Yr                        |
|  | Notice   | e 🗖   Order  |
| 15. Area or Equipment  |          |  |
|  |          |  |
|  |          |  |
| 16. Termination Due Mo Da Yr   |          |  |
| A. Date B. Time (24<br>Hr. Clock)  |          |  |
| Section III Termination Action   | ,        |  |
| 17. Action to Terminate  |          |  |
|  |          |  |
| 18. Terminated Mo Da Yr  |          |  |
| 18. Terminated         Mo         Da         Yr           A. Date         I         I         B. Time (24 Hr Clo                   | ock)     |  |
| Section IV Automated System Data   |          |  |
| 19. Type of Inspection 20. Event Number  |          | 21. Primary or Mill                                      |
|  | 5 1      |  |
| 22. Signature  |          | 23. AR Number  |
|  |          | 0 1 9 9 9  |
| JOHN SMITH<br>MSHA Form 7000-3 Mar 85 (Revised)  |          |  |
| menter entre too o mar oo (revised)  |          |  |



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

| Section I Violation Data  |   |
|---|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)                                   | 3. Citation/Order   |
|   |   |
| 0 7 0 4 0 8 1 1 1 0 0   |   |
| 4. Served To  | 5. Operator   |
| J.R. JOHNSON, SAFETY DIRECTOR   | ABC MINING COMPANY  |
| 6. Mine   | 7. Mine ID  |
| ABC MINE AND MILL   | 7 5 - 0 9 1 3 3 - (contractor)                                    |
| 8. Condition or Practice  | 8a. Written Notice (103g)   |
|   |   |
| A laboratory technician was handling hot acid in the assay laboratory w   | where the measured hydrogen chloride levels were 35 ppm           |
| (parts per million), which is almost at the immediately dangerous to life | and health (IDLH) level of 50 ppm. A sample was taken in the      |
| operator's work area for an hour with a Drager diffusion tube. The me     | asured exposures are almost at levels that are fatal. The         |
| ceiling limit for hydrogen chloride is 5 ppm. The technician was remov    | red from the lab when levels exceeded the ceiling limit of 5 ppm, |
| and an oral imminent danger order was issued to Becky Mills, laborate     | bry supervisor, at 1045 hours this date. The technician was       |
| not wearing respiratory protection and complained of eye and throat irr   | ritation.   |
|   |   |
| Citation No. 4410201 is being issued in conjunction with this order.      |   |
|   |   |
|   |   |
|   | See Continuation Form (MSHA Form 7000-3a)                         |
| 9. Violation A. Health  |   |
| Safety B. Section   | C. Part/Section of  |
| Other of Act -  | Title 30 CFR  |
| 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 rea-   |   |
| sonably be expected to be: No Lost Workdays 🗌 Lost Wo                     | orkdays or Restricted Duty Permanently Disabling Fatal            |
| C. Significant and Substantial (See Deverse): Ves No.                     | D. Number of Dereans Affected                                     |
| C. Significant and Substantial (See Reverse): Yes No                      | D. Number of Persons Affected                                     |
| 11. Negligence (check one)<br>A. None B. Low C. Moderate                  |   |
|   |   |
|   | . Type of Issuance (check one)                                    |
| 1  0  7  -   a  -     ,         -     -                                   | Citation Order X Safeguard  |
|   |   |
| 14. Initial Action D. Writte<br>A. Citation B. Order C. Safeguard Notice  |   |
|   |   |
| 15. Area or Equipment   |   |
| THE ASSAY LABORATORY  |   |
|   |   |
| 16. Termination Due Mo Da Yr<br>A. Date J J B. Time (24                   |   |
| A. Date B. Time (24<br>Hr. Clock)   |   |
| Section III Termination Action  |   |
| 17. Action to Terminate   |   |
|   |   |
|   |   |
| 18. Terminated Mo Da Yr   |   |
| A. Date B. Time (24 Hr Clock)   |   |
| Section IV Automated System Data  |   |
| Section IV Automated System Data 19. Type of Inspection 20. Event Number  | 21. Primary or Mill   |
|   |   |
| (activity code) E 0 1 0 7 3 5 1   |   |
| 22. Signature   | 23. AR Number   |
| JOHN SMITH  | 0 1 9 9 9   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |
| · · · /   |   |

107(a) ORDER - "S&S" OVEREXPOSURE TO HYDROGEN CHLORIDE

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

| Section I Violation Data  |   |
|---|---|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order   |
|   |   |
|   |   |
| 4. Served To  | 5. Operator   |
| J.R. JOHNSON, SAFETY DIRECTOR   | ABC MINING COMPANY  |
| 6. Mine   | 7. Mine ID  |
| ABC MINE AND MILL   | 7 5 - 0 9 1 3 3 - (contractor)                                      |
| 8. Condition or Practice  | 8a. Written Notice (103g)   |
|   |   |
| A laboratory technician was handling hot acid in the assay laboratory   |   |
| (parts per million), which is almost at the immediately dangerous to  |   |
| operator's work area for an hour with a Drager diffusion tube. The  |   |
|   | moved from the lab when levels exceeded the ceiling limit of 5 ppm, |
| and an oral imminent danger order was issued to Becky Mills, labor  |   |
| not wearing respiratory protection and complained of eye and throa  | t irritation.   |
|   |   |
| This violation is a factor cited in imminent danger order No. 441020  | 00.   |
|   |   |
|   |   |
|   | See Continuation Form (MSHA Form 7000-3a)                           |
| 9. Violation A. Health  |   |
| Safety B. Section   | C. Part/Section of  |
| Other of Act -  | Title 30 CFR 5 7. 5 0 0 1 a /. 5 0 0 5                              |
| Section II Inspector's Evaluation<br>10. Gravity:   |   |
| A. Injury or Illness (has) (is): No Likelihood Unlikely   | Reasonably Likely Highly Likely X Occurred                          |
|   |   |
| B. Injury or Illness could rea-   |   |
| sonably be expected to be: No Lost Workdays Lost  | Norkdays or Restricted Duty Permanently Disabling Fatal X           |
| C. Significant and Substantial (See Reverse): Yes X No  | D. Number of Persons Affected 0 0 1                                 |
| 11. Negligence (check one)  |   |
| A. None B. Low C. Modera  | te X D. High E. Reckless Disregard                                  |
|   |   |
|   | 13. Type of Issuance (check one)<br>Citation X Order Safeguard      |
| 1 0 4 - a - ,     -   -   | Citation X Order Safeguard  |
| 14. Initial Action D. Wr  | itten E. Citation/ F. Dated Mo Da Yr                                |
| A. Citation B. Order C. Safeguard Not   |   |
|   |   |
| 15. Area or Equipment   |   |
|   |   |
| 16. Termination Due Mo Da Yr  |   |
| A. Date       B. Time (24   |   |
| Hr. Clock)  |   |
| Section III Termination Action  |   |
| 17. Action to Terminate   |   |
|   |   |
| 19 Terminated Ma Da Vr  |   |
| 18. Terminated         Mo         Da         Yr           A. Date         I         I         B. Time (24 Hr Clock) |   |
|   |   |
| Section IV Automated System Data  | ····  |
| 19. Type of Inspection 20. Event Number   | 21. Primary or Mill   |
| (activity code) E 0 1 0 7 3 5   | 1 1 4   |
| 22. Signature   | 23. AR Number   |
| ů –   |   |
| JOHN SMITH  | 0 1 9 9 9   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |

104(a) CITATION ISSUED IN CONJUNCTION WITH A 107(a) ORDER OF WITHDRAWAL

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

| 1. Date       M0       Da       Yr       2. Time (24 Hr. Clock)       1 0 0 0       3. Citation/Order       Number       6 6 6 6 6 6 7         4. Served To       S. Operator       ABC ROCK COMPANY       5. Operator       ABC ROCK COMPANY         6. Mine       S. Operator       ABC ROCK COMPANY       5. Operator       ABC ROCK COMPANY         6. Mine       Constant or Practice       Se. Written Notice (105g)       5. Operator       5. Operator         2. Constant or Practice       Se. Written Notice (105g)       5. Operator       5. Operator       5. Operator         2. Constant or Practice       Se. Written Notice (105g)       5. Operator       5. Operator       5. Operator         2. Constant or Practice       Section and the dust control system on the drill was not bring used. The system functioned by water resting trongs a holitow drill state and on the drill bits. The water such for the system functioned by water resting trongs a holitow drill state and on the drill bits. The water water drilling in non-water-soluble material.         A respiratory protection program meeting all requirements of ANSI 25X.2 - 1999 was not in place.       Section of Title 30 CFR.       Set 9 . 6 .6 .2 .0         9. Volation       Network       Section of Title 30 CFR.       Set 9 . 6 .6 .2 .0       Section of Title 30 CFR.       Set 9 . 6 .2 .0         9. Volation       Network       Section of Act       Section of Title 3   | Section I Violation Data  |              |  |                                     |
|--|---|--------------|--|-------------------------------------|
| 1       1       0       0       Number       6 <td>1. Date Mo Da Yr 2. Time (24 Hr. Clock)</td> <td></td> <td></td> <td>3. Citation/Order</td>   | 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   |              |  | 3. Citation/Order                   |
| 4. Served To       JANE DOC. SAFETY DIRECTOR       ACC ROCK COMPANY         6. Mine       7. Mine ID       7 0 - 2 7 7 7 - 2 7 7 - 4 (contractor)         8. Condition or Practice       8a. Written Notice (103g)       Contractor)         8. Condition or Practice       8a. Written Notice (103g)       Contractor)         8. Condition or Practice       8a. Written Notice (103g)       Contractor)         8. Condition or Practice       8a. Written Notice (103g)       Contractor)         9. Cloak of dust were being produced by the No. 4 Ingersoll Rand air track drill when it was being used to drill blat. The drill was not being used. The system was entry. No other dust control was being used. The drill operator was not waiter sequents and the drill blat. The water task for the system was entry. No other dust control was being used. The drill blat. The water task for the system was entry. No other dust control was being used. The drill blat. The water task for the system was entry. No other dust for the water task for the system was entry. No other dust for the water task for the system was entry was not in place.         9. Violation A. Health       B. Section       C. Part/Section of Title 30 CFR       See Continuation Form (MSHA Form 7000-3a)         9. Violation A. Health       B. Section       C. Part/Section of Title 30 CFR       See Section to in system on the drill blat of the drill blat in the system was entry of the system was entry of the system vas trace drill blat in the system was entry of the system vas trace drill blat in the system vas trace drill blat in the system vas trace drill blat in the system vas trac  |   |              |  |                                     |
| JANE DOE, SAFETY DIRECTOR       ABC ROCK COMPANY         6. Mine       7. Mine 10       7. 0       7. 7       7 <t< td=""><td></td><td></td><td></td><td></td></t<>  |   |              |  |                                     |
| 6. Mne       7. Mne ID       7   |   |              | · ·  |                                     |
| AC MINE       Image: Total of the second secon |   |              |  |                                     |
| 8. Condition of Practice       84. Written Noice (103g)         Clouds of dust were being produced by the No. 4 Ingersoll Rand air track drill when it was being used to drill blast holes in the south<br>end of the guary. The dust control system on the drill was not being used. The system functioned by water feeding through a<br>hollow drill steel and out the drill bit. The water tank for the system was empty. No other dust control was being used. The<br>drill operator was not warring respirator. and his obling was covered with dust. He was drilling in on-water-soluble material.<br>A respiratory protection program meeting all requirements of ANSI 288.2 - 1969 was not in place.         9. Violation   A. Heath<br>Safety   B. Section<br>of Act       See Continuation Form (MSHA Form 7000-3a)         9. Violation   A. Heath<br>Safety   B. Section<br>of Act       C. Part/Section of<br>Title 30 CFR       See Lon III - trapector's Evaluation         10. Gravity:       A. Heath<br>of Act       Unlikely   Reasonably Likely   Mighty Likely   Cocurred         Cocurred           11. Inggigence (check one)       No Lost Workdays       Lost Workdays or Restricted Duty   Permanently Disabiling   Fatal       I. Singrif Cont and Substanial (See Reverse): Yes   X. No       D. Number of Persons Affected       III   1. Neigleprice (check one)         12. Type of Action   B. Order   C. Safeguard   D. Written   Noice   Claution   Noice  | ABC MINE  |              |  | 7 7 7 - (contractor)                |
| end of the guarry. The dust control system on the drill was not being used. The system functioned by water feeding through a bollow drill bit. The water tank for the system water system out on the stering water system water system water system water system out water soluble material. A respiratory protection program meeting all requirements of ANSI Z88.2 - 1969 was not in place.         See Continuation Form (MSHA Form 7000-3a)  | 8. Condition or Practice  |              |  | 8a. Written Notice (103g)           |
| end of the guarry. The dust control system on the drill was not being used. The system functioned by water feeding through a bollow drill bit. The water tank for the system water system out on the stering water system water system water system water system out water soluble material. A respiratory protection program meeting all requirements of ANSI Z88.2 - 1969 was not in place.         See Continuation Form (MSHA Form 7000-3a)  |   |              |  |                                     |
| bollow drill steel and out the drill bit. The water tank for the system was empty. No other dust control was being used. The drill optic was not waren are respiratory protection program meeting all requirements of ANSI 288.2 - 1969 was not in place.         A respiratory protection program meeting all requirements of ANSI 288.2 - 1969 was not in place.         See Continuation Form (MSHA Form 7000-3a)         9. Violation       A. Health         Safety       B. Section         0 ther       of Act         10. Gravity:       A. Injury or Illness (has) (b): No Likelihood         10. Gravity:       A. Injury or Illness (has) (b): No Likelihood         11. Nepsteering these could reasonably be expected to be:       No Lost Workdays         12. Significant and Substantial (See Reverse):       Yes IX         13. Type of Issuance (check one)       1 0 0 4 + 0 1 1 1 0 7 0 8 B. Time (24 1 1 2 0 0         2. Section       1 0 0 4 + 0 1 1 1 0 7 0 8 B. Time (24 Hr Clock)       1 2 0 0         3. Type of Action of B. Order       C. Safeguard       D. Written Mumber of Persons affected         13. Type of Action of B. Order       C. Safeguard       D. Written Mumber of System was activated. After the dust control system was activated. There was no visible dust when the drill was operated.         13. Type of Issuance (check one)       1 0 0 7 0 8 B. Time (24 Hr Clock)       1 2 0 0         3. Section III - Termination Due       A. Date       Mo  |   |              | *  |                                     |
| drill operator was not wearing a respirator, and his clothing was covered with dust. He was drilling in non-water-soluble material.         A respiratory protection program meeting all requirements of ANSI Z88.2 - 1969 was not in place.         See Continuation Form (MSHA Form 7000-3a)         9. Violation       A. Health         See Continuation Form (MSHA Form 7000-3a)         9. Violation       A. Health         Sector II - Inspector's Evaluation         10. Gravity:         A. Injury or Illness (has) (is): No Likelihood       Unlikely         B. Injury or Illness (has) (is): No Likelihood       Unlikely         R. Injury or Illness (has) (is): No Likelihood       Unlikely         R. Injury or Illness (has) (is): No Likelihood       Unlikely         R. Injury or Illness (has) (is): No Likelihood       Unlikely         R. Injury or Illness (has) (is): No Likelihood       Unlikely         R. Injury or Illness (has) (is): No Likelihood       Unlikely         B. Injury or Illness (has) (is): No Likelihood       Unlikely         None       B. Low       C. Moderate         X. No       D. Number of Persons Affrected       0 0 1         A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         11. Negligence (check one)       I. Low       C. Moderate       D. High       F. Dat  |   |              |  |                                     |
| A respiratory protection program meeting all requirements of ANSI Z88.2 - 1969 was not in place.         See Continuation Form (MSHA Form 7000-Sa)         9. Violation       A. Health         Safety       B. Section         of Arct       C. Part/Section of         Title 30 CFR       5 8 . 6 2 0         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 (char) (is): No Likelihood         11. Negligence (check one)       No Lost Workdays         A. None       B. Low         C. Significant and Substantial (See Reverse):       Yes IX         None       B. Low         12. Type of Action       1 0 0 4 - a - 1         14. Initial Action       B. Order       C. Safeguard         15. Area or Equipment       F. Dated       Mo         The water take on an it rate was filled and the dust control system was activated.       After the dust control system was activated.         17. Action to Termination       B. Time (24 Hr Clock)       1 1 2 0       0         Section III Fermination Action       B. Time (24 Hr Clock)       1 1 3 0       0         Section IV Automated System Data  | hollow drill steel and out the drill bit. The water tank for<br>drill operator was not wearing a respirator, and his clothi | r the system | was empty. No other dust contri<br>red with dust He was drilling i | ol was being used. The              |
| See Continuation Form (MSHA Form 7000-3a)         9. Violation       A. Health         Stepty       B. Section         of Act       -         10. Gravity:       A. Injury or Illness (tas) (s): No Likelihood         10. Gravity:       A. Injury or Illness (tas) (s): No Likelihood         B. Injury or Illness (tas) (s): No Likelihood       Unlikely         R. Significant and Substantial (See Reverse):       Yes         Yes       No         C. Significant and Substantial (See Reverse):       Yes         Yes       No         11. Negligence (Deck one)       B. Low         C. Norderate       D. High         E. Caluor       C. Moderate         Yape of Action       1         12. Type of Action       B. Order         C. Safeguard       D. Written         A. Initial Action       B. Order         A. Date       Mo         Date       Yr         B. Time (24       Hr. Clock)         11. J. of J       J         12. Type of the was no visible dust when the dust control system was activated.         Actiation       B. Order         C. Safeguard       D. Written         13. Type of the was nilled and the dust control system was activated.      <   | A respiratory protection program meeting all requiremen   | ts of ANSL   | 788 2 - 1969 was not in place                                      | ii iloii-watei-soluble materiai.    |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   | respiratory protection program meeting an requirement   |              | 100.2 1707 was not in place.                                       |                                     |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   |   |              |  |                                     |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   |   |              |  |                                     |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   |   |              |  |                                     |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   |   |              |  |                                     |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   |   |              |  |                                     |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   |   |              |  |                                     |
| 9. Violation       A. Health<br>Safety       B. Section<br>of Act       -       C. Part/Section of<br>Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Title 30 CFR       5       8       . 6       2       0         10. Gravity:       -       -       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. Kone       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4 - a       -       -       13. Type of Issuance (check one)       F. Dated       Mo       Da       Yr         14. Initial Action       A. Date       Mo       Da       Yr       Yr       Notice       E. Citation       C. Safeguard       Hr. Clock,       1       2       0       Intervint and the dust control system was activated. After the dust control system was activated, there was no visible dust when the   |   |              | See Contin   | uation Form (MSHA Form 7000-3a)     |
| Safety       B. Section       of Act       -       C. Part/Section of       5       8       6       2       0         Section II Inspector's Evaluation       10. Gravity:       A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       X       Highly Likely       Occurred       Image: Cocurred       Im   | 0 Violation A Haalth  |              |  |                                     |
| Other       of Act       -       Title 30 CFR       5       8       6       2       0         Section II Inspector's Evaluation       10. Gravity:       A. Injury or Illness could reasonably Likely       Highly Likely       Occurred       0         B. Injury or Illness could reasonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence       Check one)       B. Low       C. Moderate       X       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4       a       ,       -       -       Citation       X       Order       Safeguard       1         14. Initial Action       B. Order       C. Safeguard       D. Written       Notice       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       1       0       7       0       8       Time (24       Hr. Clock)       1       2       0       0         16. Terminated       Mo       Da       Yr       No       8  |   |              | C. Part/Section of   |                                     |
| Section II - Inspector's Evaluation       Image: Construction II - Inspector's Evaluation       Image: Construction II - Inspector's Evaluation         10. Gravity:       A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       Mighty Likely       Occurred         B. Injury or Illness could reasonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0 0 1         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4       a       -       -       13. Type of Issuance (check one)       Safeguard       0       Date         14. Initial Action       B. Order       C. Safeguard       D. Written       E. Citation       F. Dated       Mo       Da       Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       H. Cicck)       1 2 0 0       0         Section III Termination Action       I       I       I       I       I       I       I       I       I       I       I       I       I   |   |              |  | 58.620                              |
| A. Injury or Illness (has) (is): No Likelihood       Unlikely       Reasonably Likely       X       Highly Likely       Occurred         B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4       -       -       -       13. Type of Issuance (check one)         Citation       B. Order       C. Safeguard       D. Written       Order       Safeguard       Mo         14. Initial Action       B. Order       C. Safeguard       D. Written       F. Dated       Mo       Da       Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       Hr. Clock)       1       2       0       0         16. Termination Due       A. Date       Mo       Da       Yr       Yr       B. Time (24       Hr. Clock)       1       2       0       0         17. Action to airract       Re   |   |              |  |                                     |
| B. Injury or Illness could reasonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. None       B. Low       C. Moderate       X       D. High       E. Reckless Disregard       1         12. Type of Action       1       0       4       -       -       -       13. Type of Issuance (check one)         A. None       B. Order       C. Safeguard       D. Written       Station       Order       Safeguard         14. Initial Action       A. Otate       C. Safeguard       D. Written       E. Citation/<br>Order       Order       Safeguard         15. Area or Equipment       O. Otat       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       None (24 Hr. Clock)       1       2       0       0         Section III Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated.       It no       7       0       8       Ti clock)       1       1       3       0 <td></td> <td>_</td> <td></td> <td></td>   |   | _            |  |                                     |
| sonably be expected to be:       No Lost Workdays       Lost Workdays or Restricted Duty       Permanently Disabling       X       Fatal         C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. None       B. Low       C. Moderate       X       D. High       E. Reckless Disregard       Image: Comparison of the com   | A. Injury or Illness (has) (is): No Likelihood  | nlikely      | Reasonably Likely X  | Highly Likely Occurred              |
| C. Significant and Substantial (See Reverse):       Yes       X       No       D. Number of Persons Affected       0       0       1         11. Negligence (check one)       A. None       B. Low       C. Moderate       X       D. High       E. Reckless Disregard         12. Type of Action       1       0       4       a       ,       -       -       13. Type of Issuance (check one)         14. Initial Action       B. Order       C. Safeguard       D. Written       E. Citation       Order       Safeguard         15. Area or Equipment       B. Order       C. Safeguard       D. Written       E. Citation       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       Hr. Clock)       1       2       0       0         Section III Termination Action         17. Action to Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.       1       1       3       0         Section IV Automated System Data       1       2       4       5       6       9       21. Primary or Mill       23. AR Number       9       9       9       9   |   | _            |  |                                     |
| 1. Negligence (check one)       A. None       B. Low       C. Moderate       D. High       E. Reckless Disregard         12. Type of Action       1       0       4       a       -       -       13. Type of Issuance (check one)<br>Citation       Order       Safeguard       -         14. Initial Action<br>A. Citation       B. Order       C. Safeguard       D. Written<br>Notice       E. Citation       Order       Safeguard       -         15. Area or Equipment       O. Da       Yr       Notice       E. Citation       F. Dated       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       Notice       E. Citation       Order       Safeguard       -  | sonably be expected to be: No Lost Workdays   | Lost         | Workdays or Restricted Duty  | Permanently Disabling X Fatal       |
| 11. Negligence (check one)       A. None       B. Low       C. Moderate       X       D. High       E. Reckless Disregard         12. Type of Action       1       0       4       a       -       -       13. Type of Issuance (check one)         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written       Order       Safeguard         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written       F. Dated       Mo       Da       Yr         15. Area or Equipment       A. Date       1       0       7       0       8       Time (24       1       2       0       0         Section III - Termination Action         17. Action to Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.       1       1       3       0         Section IV - Automated System Data       1       1       0       7       0       8       Time (24 Hr Clock)       1       1       3       0         Section IV - Automated System Data         19. Type of Inspection       20. Event Number       1       2       3       4       5  | C. Significant and Substantial (See Reverse): Yes   | X No         |  | D. Number of Persons Affected 0 0 1 |
| 12. Type of Action       1       0       4       -       a       -       -       13. Type of Issuance (check one)<br>Citation       Order       Safeguard         14. Initial Action<br>A. Citation       B. Order       C. Safeguard       D. Written<br>Notice       E. Citation/<br>Order       Order       F. Dated       Mo       Da       Yr         15. Area or Equipment       A. Date       Mo       Da       Yr       Yr       Notice       B. Time (24       1 2 0 0       D.         Section III Termination Action         17. Action to Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated,<br>there was no visible dust when the drill was operated.       B. Time (24 Hr Clock)       1 1 3 0       Section IV Automated System Data         19. Type of Inspection<br>(activity code)       Z0. Event Number       1 2 3 4 5 6 9       21. Primary or Mill       Z3. AR Number       9 9 9 9 9       9  |   |              |  |                                     |
| 1       0       4       -       -       Citation       X       Order       Safeguard         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written       Notice       Citation       F. Dated       Mo       Da       Yr         15. Area or Equipment       Termination Due       A. Date       Mo       Da       Yr       Yr       Number         16. Termination Due       A. Date       Mo       Da       Yr       Hr. Clock)       1 2 0 0       Section III Termination Action         17. Action to Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.       It is one interminated   | A. None B. Low  | C. Moderat   | e X D. High  | E. Reckless Disregard               |
| 1       0       4       -       -       Citation       X       Order       Safeguard         14. Initial Action       A. Citation       B. Order       C. Safeguard       D. Written       Notice       Citation       F. Dated       Mo       Da       Yr         15. Area or Equipment       Termination Due       A. Date       Mo       Da       Yr       Yr       Number         16. Termination Due       A. Date       Mo       Da       Yr       Hr. Clock)       1 2 0 0       Section III Termination Action         17. Action to Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.       It is one interminated   | 12. Type of Action  | 1            | 3. Type of Issuance (check one)                                    |                                     |
| 14. Initial Action       B. Order       C. Safeguard       D. Written       C. Citation       F. Dated       Mo       Da       Yr         15. Area or Equipment       Termination Due       A. Date       Mo       Da       Yr       Notice       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr       Hr. Clock)       1 2 0 0       Section III Termination Action         17. Action to Terminate       The was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.       Hr. Clock)       1 1 1 0       The (24 Hr Clock)       1 1 1 3 0         Section IV Automated System Data       No       Da       Yr       Hr. Clock)       1 1 1 3 0         Section IV Automated System Data       20. Event Number       1 2 3 4 5 6 9       21. Primary or Mill       23. AR Number       9 9 9 9 9       9 9 9 9       9  |   |              |  | Order Safeguard                     |
| A. Citation       B. Order       C. Safeguard       Notice       Order       Order         15. Area or Equipment         16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       1       2       0       0         Section III Termination Action         17. Action to Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.       Image: Section IV Automated System Data         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data         19. Type of Inspection       a       0       1       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature       23. AR Number       9 <td></td> <td></td> <td></td> <td></td>   |   |              |  |                                     |
| 15. Area or Equipment         16. Termination Due       A. Date       Mo       Da       Yr         16. Termination Due       A. Date       Mo       Da       Yr         17. Action to Terminate       The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.       11       13. Terminated         18. Terminated       A. Date       Mo       Da       Yr         19. Type of Inspection (activity code)       E       0       1       20. Event Number       1       2       3       4       5       6       9   |   | -            |  | F. Dated Mo Da Yr                   |
| 16. Termination Due       A. Date       Mo       Da       Yr       B. Time (24       1       2       0       0         Section III Termination Action         17. Action to Terminate         The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.         18. Terminated       A. Date       Mo       Da       Yr         1       1       0       7       0       8       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data         19. Type of Inspection       a       1       2       3       4       5       6       9       21. Primary or Mill       23. AR Number       9 </td <td></td> <td>Notic</td> <td></td> <td></td>   |   | Notic        |  |                                     |
| A. Date       1       1       0       7       0       8       B. Time (24<br>Hr. Clock)       1       2       0       0         Section III Termination Action         17. Action to Terminate         The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data         19. Type of Inspection (activity code)       E       0       1       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature         TED OLSON       9   | 15. Area or Equipment   |              |  |                                     |
| A. Date       1       1       0       7       0       8       B. Time (24<br>Hr. Clock)       1       2       0       0         Section III Termination Action         17. Action to Terminate         The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data         19. Type of Inspection (activity code)       E       0       1       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature         TED OLSON       9   |   |              |  |                                     |
| A. Date       1       1       0       7       0       8       B. Time (24<br>Hr. Clock)       1       2       0       0         Section III Termination Action         17. Action to Terminate         The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data         19. Type of Inspection (activity code)       E       0       1       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature         TED OLSON       9   | 16 Termination Due Mo Da Yr   |              |  |                                     |
| Section III Termination Action       Image: constrained of the section of the sectin of the section of the section of the sectin    | A. Date   | ne (24       |  |                                     |
| 17. Action to Terminate         The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.         18. Terminated       A. Date       Mo       Da       Yr         18. Terminated       A. Date       Mo       Da       Yr         19. Type of Inspection (activity code)       E       0       1       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature       23. AR Number       9   |   | : Clock)     | 1 2 0 0  |                                     |
| The water tank on air trac was filled and the dust control system was activated. After the dust control system was activated, there was no visible dust when the drill was operated.         18. Terminated       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data       A. Date       Mo       Da       Yr       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature       23. AR Number       9 <t< td=""><td></td><td></td><td></td><td></td></t<>   |   |              |  |                                     |
| 18. Terminated       A. Date       Mo       Da       Yr       Image: Section IV Automated System Data         19. Type of Inspection (activity code)       E       0       1       0       7       0       8       B. Time (24 Hr Clock)       1       1       3       0         22. Signature       23. AR Number       1       2       3       4       5       6       9       23. AR Number       9<  |   | system was   | activated. After the dust control                                  | l system was activated,             |
| A. Date       1       1       0       7       0       8       B. Time (24 Hr Clock)       1       1       3       0         Section IV Automated System Data         19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature<br>TED OLSON       TED OLSON       9   | there was no visible dust when the drill was operated.  |              |  | •                                   |
| I        |   |              |  |                                     |
| Section IV Automated System Data         20. Event Number         21. Primary or Mill           19. Type of Inspection<br>(activity code)         E         0         1         20. Event Number         21. Primary or Mill           22. Signature         23. AR Number         9   |   | 4 Hr Clock)  | 1 1 2 0  |                                     |
| 19. Type of Inspection<br>(activity code)       E       0       1       20. Event Number       1       2       3       4       5       6       9       21. Primary or Mill         22. Signature<br>TED OLSON       TED OLSON       9  |   |              | 1 1 3 0  |                                     |
| (activity code)       E       0       1       2       3       4       5       6       9         22. Signature       23. AR Number       23. AR Number         TED OLSON       9       9       9       9       9       9       9       9       9       9       9  |   |              | 21. Primary or Mill  |                                     |
| 22. Signature         23. AR Number         9 <td></td> <td>2 3 4 5</td> <td></td> <td></td>   |   | 2 3 4 5      |  |                                     |
| TED OLSON 9 9 9 9 9 9  |   | <u></u> .    |  | 23. AR Number                       |
|  | C C C C C C C C C C C C C C C C C C C   |              |  |                                     |
|  | MSHA Form 7000-3 Mar 85 (Revised)   |              |  |                                     |

104(a) CITATION - "S&S" OVEREXPOSURE TO DRILL DUST

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

| Section I Violation Data  |  |
|---|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)   | 3. Citation/Order  |
|   |  |
| 1 1 0 7 0 8 1 7 0 0<br>4. Served To   |  |
|   | 5. Operator  |
| SYDNEY JONES, PRESIDENT<br>6. Mine  | TMC MINING COMPANY           7. Mine ID         1                        |
| TRIANGLE MINE   | 7 2 - 0 0 0 1 2 - (contractor)   |
| 8. Condition or Practice  | 8a. Written Notice (103g)  |
|   |  |
| The results of an MSHA full shift noise sample taken on 11/07/08 sh   | owed the driver of the No. 31 Euclid Haul truck received an action level |
| noise dose of 76%. This exceeds the action level dose or 50% plus the   | he error factor (or 66%). The miner was not enrolled in a hearing        |
| conservation program as required by 30 CFR 62.120.  |  |
| The electroment date for this situation is to allow the mine encounter time   | a to annull the minor into a formal bearing concernation program         |
| The abatement date for this citation is to allow the mine operator tim which meets all the requirements of 30 CFR 62.150. | e to enroll the miner into a formal hearing conservation program         |
| which meets an the requirements of 50 Cr R 02.150.  |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   | See Continuation Form (MSHA Form 7000-3a)                                |
|   |  |
| 9. Violation A. Health B. Section   | C. Part/Section of   |
| Other of Act -  | Title 30 CFR 6 2 . 1 2 0   |
| Section II Inspector's Evaluation   |  |
| 10. Gravity:  |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely X   | Reasonably Likely Highly Likely Occurred                                 |
| B. Injury or Illness could rea-   |  |
| sonably be expected to be: No Lost Workdays Lost  | Workdays or Restricted Duty Permanently Disabling X Fatal                |
| C. Significant and Substantial (See Reverse): Yes No  | X   D. Number of Persons Affected   0   0   1                            |
| 11. Negligence (check one)  |  |
| A. None B. Low C. Moderate  | e X D. High E. Reckless Disregard  |
| 12. Type of Action 11   | 3. Type of Issuance (check one)  |
| 1   0   4   -   a   -     ,         -     -     -   | Citation X Order Safeguard   |
| A hisial Astian   |  |
| 14. Initial Action D. Writt<br>A. Citation B. Order C. Safeguard Notic  |  |
|   | Number   |
| 15. Area or Equipment   |  |
|   |  |
| 16. Termination Due Mo Da Yr  |  |
| A. Date B. Time (24<br>1 1 2 9 0 8 Hr. Clock)   |  |
| Section III Termination Action  |  |
| 17. Action to Terminate   |  |
|   |  |
| 19 Terminated Ma Da Va  |  |
| 18. Terminated Mo Da Yr<br>A. Date       B. Time (24 Hr Clock)  |  |
|   |  |
| Section IV Automated System Data  |  |
| 19. Type of Inspection 20. Event Number   | 21. Primary or Mill  |
| (activity code) E 0 1 1 2 3 4 5   |  |
| 22. Signature   | 23. AR Number  |
| TED JOHNSON   | 0 5 5 5 5  |
| MSHA Form 7000-3 Mar 85 (Revised)   |  |

104(a) CITATION - "NON S&S" HEARING CONSERVATION PROGRAM

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

| Section I Subsequent /   | Action/Continuation | Data                         |           |           |           |   |   |
|--------------------------|---------------------|------------------------------|-----------|-----------|-----------|---|---|
| 1. Subsequent Action     | 1a. Continuation    | 2. Dated<br>(Original Issue) | Мо<br>1 1 | Da<br>0 7 | Yr<br>0 8 | 3. Citation/Order<br>Number 4 4 4 4 4 4 4 4 - 0 | 1 |
| 4. Served To             |                     |                              |           | 5. Op     | erator    |   |   |
| SYDNEY JONES, PR         | ESIDENT             |                              |           | TN        |           | NING COMPANY                                    |   |
| 6. Mine                  |                     |                              |           | 7. Min    | ie ID     |   |   |
| TRIANGLE MINE            |                     |                              |           |           |           | 7 2 - 0 0 1 2 - (contractor)                    |   |
| Section II Justification | for Action          |                              |           |           |           |   |   |
| The driver of the Ne     | 21 English handa as |                              |           |           |           |   |   |
| of 30 CFR 62.150.        | 51 Euclid naulage   | ruck has been enrolled       | mai       | ormai     | nearing   | g conservation program meeting all provisions   |   |
| 0150 CI K 02.150.        |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
| -                        |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   | — |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   |   |
|                          |                     |                              |           |           |           |   | _ |
|                          |                     |                              |           |           |           | See Continuation Form                           |   |
| Section III Subsequent   | Action Taken        |                              |           |           |           |   |   |
| 8. Extended To<br>A. Da  | te Mo Da            | Yr B. Time (24 Hr.           | Clock     | )         |           | C. Vacated D. Terminated X E. Modified          |   |
| Section IV Inspection I  |                     |                              |           |           |           |   |   |
| 9. Type of Inspection    | E 0 1               | vent Number                  | 3 4       | 56        | 7         |   |   |
| 11. Signature            |                     | AR                           | Numb      | er 12     | . Date    | Mo Da Yr 13. Time (24 Hr. Clock)                | Π |
| TED JOHNSON              |                     | 0 5                          | 5 5       | 5         |           | 1 1 2 9 0 8 1 1 0                               | 0 |

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

104(A) CITATION - TERMINATION AFTER ENROLLMENT IN HEARING PROGRAM

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

| Section I Violation Data  |   |
|---|---|
| 1. Date         Mo         Da         Yr         2. Time (24 Hr. Clock)         I <thi< th="">         I         <thi< th="">         I         <thi< td=""><td>3. Citation/Order         4         4         4         4         4         4         5</td></thi<></thi<></thi<> | 3. Citation/Order         4         4         4         4         4         4         5 |
| 4. Served To  | 5. Operator   |
| GEORGE JONES, SAFETY DIRECTOR   | XYZ MINING COMPANY  |
| 6. Mine   | 7. Mine ID  |
| XYZ MINE  | 8 1 - 1 2 3 4 5 - (contractor)  |
| 8. Condition or Practice  | 8a. Written Notice (103g)   |
|   |   |
| The results of an MSHA full shift noise sample taken on 12/03/08 s  |   |
| permissible exposure level noise dose of 152%. This exceeds the   |   |
| error factor (or 132%). The end loader operator was wearing a hea   |   |
| The abatement date for this citation is to allow time for the mine op   | erator to install all feasible engineering and administrative controls.                 |
| The mine operator must ensure continued use of a hearing protector  | or until the noise dose is reduced to or below the permissible                          |
| exposure level.   |   |
|   |   |
| Equipment: Caterpillar 880 front-end loader, S/N 00764762   |   |
|   |   |
|   |   |
|   | See Continuation Form (MSHA Form 7000-3a)   |
| 9. Violation A. Health  |   |
| Safety B. Section   | C. Part/Section of  |
| Other of Act -  | Title 30 CFR 6 2 . 1 3 0 a  |
| Section II Inspector's Evaluation   |   |
| 10. Gravity:  |   |
| A. Injury or Illness (has) (is): No Likelihood Unlikely X   | Reasonably Likely Highly Likely Occurred  |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lo   | st Workdays or Restricted Duty Permanently Disabling X Fatal                            |
| C. Significant and Substantial (See Reverse): Yes No  | X     D. Number of Persons Affected     0     0     1                                   |
| 11. Negligence (check one)<br>A. None B. Low C. Moder   |   |
| 12. Type of Action  | 13. Type of Issuance (check one)  |
|   | Citation X Order Safeguard  |
|   |   |
| 14. Initial Action<br>A. Citation B. Order C. Safeguard No  | ritten E. Citation/ F. Dated Mo Da Yr   |
| 15. Area or Equipment   |   |
|   |   |
| 16. Termination Due Mo Da Yr  |   |
| 16. Termination Due         Mo         Da         Yr           A. Date         I         I         B. Time (24)           1         2         1         6         0         8         Hr. Clock)  | 1 2 0 0   |
| 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 20. Event Number   | 21. Primary or Mill   |
| (activity code) E 0 1 7 6 5 4   | 3 2 1   |
| 22. Signature   | 23. AR Number   |
| JOE SOUTH   | 0 5 5 5 6   |
| MSHA Form 7000-3 Mar 85 (Revised)   |   |
|   |   |

104(a) CITATION - "NON S&S" OVEREXPOSURE TO NOISE

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

| Section I Subsec    | quent Action   | /Continuatior  | Data                                     |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|---------------------|----------------|----------------|--|--------------------|-------------|-----------|------------|--|----------|----------|------|--------|--------|----------|--------|-----|
| 1. Subsequent Act   |                | Continuation   | 2. Dated<br>(Original Issue              | e) 12              | Da<br>2 0 3 | Yr<br>0 8 |            | <ol> <li>Citation</li> <li>Numbrand</li> </ol> |          | er       | 4    | 4 4    | 4      | 4 4 5    | 5 -    | 0 1 |
| 4. Served To        |                |                |  |                    | 5. Op       | erator    |            |  |          |          |      |        |        |          |        |     |
| GEORGE JON          | ES, SAFET      | Y DIRECTOR     | R  |                    | X           | YZ MIN    | ING CO     | MPANY  |          |          |      |        |        |          |        |     |
| 6. Mine             |                |                |  |                    | 7. Mir      | ne ID     |            |  |          |          |      |        |        |          |        |     |
| XYZ MINE            |                |                |  |                    |             |           | 81-        | 123  | 4 5      | -        |      | (cont  | racto  | ·)       |        |     |
| Section II Justific | cation for Ac  | tion           |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
| The mine oper       | otor installed |                | er, put in a noise ins                   | sulating flo       | or mot      | and n     | luggod a   | ll oponings                                    | botwo    | on tha a | norc | tor's  |        |          |        |     |
|                     |                |                | ent with noise atten                     | ×                  |             |           | 00         |  |          |          | pera | 1015   |        |          |        |     |
|                     | ind the origin | ie eenparan    |  | adding mat         |             | 1 110 0   | atorpinar  |  |          |          |      |        |        |          |        |     |
| Based on an M       | SHA full shit  | ft noise samp  | le taken on 12/16/0                      | 8, the ope         | rator o     | f the fr  | ont-end l  | oader rece                                     | eived    |          |      |        |        |          |        |     |
|                     | xposure leve   | el noise dose  | of 76%. This dose                        | is less that       | an the      | permis    | sible exp  | osure leve                                     | l of 100 | % plus   | erro | facto  | r      |          |        |     |
| (or 132%).          |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
| The frent and k     | andar anara    | tor identified |  | oprolled in        |             | ring of   | nooniotii  | on program                                     | o which  | aamalia  |      | th the |        |          |        |     |
|                     |                |                | above must remain<br>ise dose is reduced |                    |             |           | onservatio | on program                                     | 1 Which  | complie  | es w | th the |        |          |        |     |
|                     | 0111 02.10     |                |  |                    | 200101      | 110 001.  |            |  |          |          |      |        |        |          |        |     |
| Equipment: Ca       | aterpillar 880 | front-end loa  | ader, S/N 00764762                       | 2                  |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
|                     |                |                |  |                    |             |           |            |  |          |          |      |        |        |          |        | _   |
|                     |                |                |  |                    |             |           |            |  |          | 5        | See  | Contir | nuatio | n Form   | ı      |     |
| Section III Subse   | equent Action  | n Taken        |  |                    |             |           |            |  |          |          |      |        |        |          |        |     |
| 8. Extended To      | A. Date        | Mo Da          | Yr<br>B. Time (24                        | 4 Hr. Clock        | ()          |           | с          | . Vacated                                      |          | D. Te    | rmin | ated   | Х      | E. Mo    | dified |     |
| Section IV Inspe    | ction Data     |                |  |                    |             | 1         |            |  |          |          |      |        |        |          |        |     |
| 9. Type of Inspecti |                |                | Event Number                             | 7 6 5 4            | 4 3 2       |           |            |  |          |          |      |        |        |          |        |     |
| 11. Signature       |                | <u>, 1</u>     |  | 7 6 5 4<br>AR Numb |             | 2. Date   | Мо         | Da Y   | ′r 13.   | Time (2  | 24 H | r. Clo | ck)    |          | Π      | Π   |
| JOE SOUTH           |                |                | (  | 5 5 5              | 6           |           | 1 2        | 2 1 6 0  | 8        |          |      |        |        |          | 1 7    | 3 0 |
| MSHA Form 7000      | -3a, Mar 85    | (Revised)      |  |                    | •           |           |            |  |          |          |      |        |        | <b>!</b> |        |     |

104(a) CITATION - TERMINATION AFTER RESAMPLING

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

| Section I Violation Data   |  |
|--|--|
| 1. Date Mo Da Yr 2. Time (24 Hr. Clock)  | 3. Citation/Order  |
|  | Number 4444476   |
| 4. Served To   | 5. Operator  |
| JOHN MILTON, PRESIDENT   | ONLY THE BEST ROCK   |
| 6. Mine  | 7. Mine ID   |
| HARD ROCK MINE   | 9 0 - 8 8 8 8 8 - (contractor)                                   |
| 8. Condition or Practice   | 8a. Written Notice (103g)  |
|  |  |
| The results of an MSHA full shift noise sample taken on 01/03/08 sho                           | wed the operator using the jack leg drill received               |
| a noise dose of 1230%. This exceeds the dual hearing protection level                          | el of 800% plus error factor (or 1056%). The miner was not       |
| wearing dual hearing protection, but was just using a muff-type hearin                         | g protector. Further, no muffler was installed on the drill.     |
|  |  |
| The initial abatement period is to allow time for the mine operator to p                       | rovide and ensure the concurrent use of dual hearing protectors. |
| The abatement date may be extended to allow the mine operator time                             | to install and implement all feasible engineering and            |
| administrative noise controls.   |  |
|  | · · · · · · · · · · · ·  |
| Dual hearing protection must be worn by the affected miner until the n                         | ÷  |
| protection level. After the dual hearing protection requirement is met,                        | actions specified under 30 CFR 62.130 apply for                  |
| exposures that exceed the permissible exposure level.  |  |
| Equipment: Model 2 B-Barber jack leg drill, Company # 10<br>Location: 9 East Section, 12 Right |  |
| Elocation: 5 East Occition, 12 Night   |  |
|  | See Continuation Form (MSHA Form 7000-3a)                        |
| 9. Violation A. Health   |  |
| Safety B. Section  | C. Part/Section of<br>Title 30 CFR 6 2 . 1 4 0 a                 |
| Other of Act   | Title 30 CFR 6 2 . 1 4 0 a 1                                     |
| 10. Gravity:   |  |
| A. Injury or Illness (has) (is): No Likelihood Unlikely  | Reasonably Likely Highly Likely X Occurred                       |
| B. Injury or Illness could rea-<br>sonably be expected to be: No Lost Workdays Lost            | Workdays or Restricted Duty Permanently Disabling X Fatal        |
|  |  |
| C. Significant and Substantial (See Reverse): Yes X No   | D. Number of Persons Affected 0 0 1                              |
| 11. Negligence (check one)<br>A. None B. Low C. Moderate                                       | e X D. High E. Reckless Disregard                                |
|  |  |
| 12. Type of Action 1 0 4 - a - , 11  | Type of Issuance (check one)     Citation X Order Safeguard      |
| 14. Initial Action D. Writt  | en E. Citation/ F. Dated Mo Da Yr                                |
| A. Citation B. Order C. Safeguard Notic  | e 🗖   Order  |
| 15. Area or Equipment  |  |
|  |  |
|  |  |
| 16. Termination Due Mo Da Yr<br>A. Date B. Time (24  |  |
| A. Date 0 1 1 0 0 8 Hr. Clock)   |  |
| Section III Termination Action   |  |
| 17. Action to Terminate  |  |
|  |  |
|  |  |
| 18. Terminated     Mo     Da     Yr       A. Date     I     I     B. Time (24 Hr Clock)        |  |
| Section IV Automated System Data   |  |
| 19. Type of Inspection 20. Event Number  | 21. Primary or Mill  |
| (activity code) E 0 1 1 2 3 4 5  | 6 8  |
| 22. Signature  | 23. AR Number  |
| HORATIO ALGER  | 6 0 0 0 0  |
| MSHA Form 7000-3 Mar 85 (Revised)  |  |
|  |  |

104(a) CITATION - OVEREXPOSURE TO NOISE

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

| Section I Subsequent A   | Action/Continuation   | Data                         |           |                |           |           |   |                       |
|--------------------------|-----------------------|------------------------------|-----------|----------------|-----------|-----------|---|-----------------------|
| 1. Subsequent Action     | 1a. Continuation      | 2. Dated<br>(Original Issue) | Мо<br>0 1 | Da<br>0 3      | Yr<br>0 8 |           | <ol> <li>Citation/Order<br/>Number</li> </ol> | 4 4 4 4 7 6 - 0 1     |
| 4. Served To             |                       |                              |           | 5. Op          | erator    |           |   |                       |
|                          | RIDENT                |                              |           |                |           |           | POCK  |                       |
| JOHN MILTON, PRE         | SIDENT                |                              |           |                |           |           |   |                       |
| 6. Mine                  |                       |                              |           | 7. Min         | ie ID     |           |   |                       |
| HARD ROCK MINE           | ion Action            |                              |           |                |           | 90-       | 88888-  | (contractor)          |
| Section II Justification | or Action             |                              |           |                |           |           |   |                       |
| The mine operator ba     | s provided the mine   | ar with both a muff and      |           | utvna h        | oaring    | protecto  | r of the miner's choosing                     |                       |
|                          |                       |                              |           |                |           |           | ed that they are being us                     |                       |
| concurrently.            |                       |                              |           | <i>p</i> :0:00 |           |           | od andt anoy are being a                      | , ou                  |
|                          |                       |                              |           |                |           |           |   | -                     |
| The mine operator ha     | s ordered a manufa    | acturer's muffler for the    | jack le   | eg drill.      | The r     | miner ope | rating the jack leg drill n                   | iust continue         |
|                          |                       |                              |           |                |           |           | al hearing protection lev                     |                       |
|                          |                       |                              |           |                |           |           |   |                       |
| This citation is being   | extended to allow tir | me for the mine operate      | or to ir  | nstall ar      | nd imp    | lement al | l feasible engineering ar                     | ıd                    |
| administrative control   | S.                    |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
| Equipment: Model 2       | B-Barber Jack Leg     | Drill, No. 10                |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   |                       |
|                          |                       |                              |           |                |           |           |   | See Continuation Form |
| Section III Subsequent   | Action Tokon          |                              |           |                |           |           |   |                       |
| 8. Extended To<br>A. Da  | Mo Da                 | Yr<br>B. Time (24 Hr.        | Clock     | :)             | 1 2       |           | Vacated D. Te                                 | erminated E. Modified |
| Section IV Inspection I  | Data                  |                              |           |                |           |           |   |                       |
| 9. Type of Inspection    |                       | vent Number                  |           |                |           |           |   |                       |
|                          | E 0 1                 |                              | 34        |                | 8         |           |   |                       |
| 11. Signature            |                       |                              | Numb      |                | . Date    | Mo        |   | (24 Hr. Clock)        |
| HORATIO ALGER            |                       | 60                           | 0 0       | 0              |           | 0 1       | 1 1 0 8                                       | 1 3 0 0               |

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

104(a) CITATION - EXTENSION OF NOISE CITATION

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

| Section I Subsection                | quent Action/   | Continuatior | Data           |                     |           |           |             |           |   |             |               |            |         |           |
|-------------------------------------|-----------------|--------------|----------------|---------------------|-----------|-----------|-------------|-----------|---|-------------|---------------|------------|---------|-----------|
| 1. Subsequent Act                   | tion 1a. C      | ontinuation  | 2. Date<br>(Or | ed<br>iginal Issue) | Мо<br>0 1 | Da<br>0 3 | Yr<br>3 0 8 |           | <ol> <li>Citation<br/>Number</li> </ol> |             | 4 4 4         | 4 4 7      | 6 - 0   | ) 4       |
| 4. Served To                        |                 |              |                |                     |           | 5. Op     | perator     |           |   |             |               |            |         |           |
| JOHN MILTON                         | I, PRESIDEN     | т            |                |                     |           | 0         | NLY TH      | IE BEST   | ROCK                                    |             |               |            |         |           |
| 6. Mine                             |                 |              |                |                     |           | 7. Mi     | ne ID       |           |   |             |               |            |         |           |
| HARD ROCK N                         |                 |              |                |                     |           |           |             | 90-       | 888                                     | 88-         | (contra       | actor)     |         |           |
| Section II Justific                 | cation for Acti | on           |                |                     |           |           |             |           |   |             |               |            |         |           |
| A "P" code for                      | the occupation  | on operating | the No.        | 10, Model 2B        | Barbe     | r jack    | leg dril    | l has bee | n assigned a                            | as number X | XXX.          |            |         | _         |
| All feasible en<br>leg drill. In ad |                 |              |                |                     |           |           |             |           |   |             |               | jack       |         | _         |
| The mine operation                  | ator must con   | tinue to me  | et require     | ements of 30 C      | FR Pa     | rt 62.    |             |           |   |             |               |            |         |           |
| This citation is                    | terminated.     |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         | _         |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         |           |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         | _         |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         | _         |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         | _         |
|                                     |                 |              |                |                     |           |           |             |           |   |             |               |            |         | _         |
| Section III Subse                   | august Action   | Takan        |                |                     |           |           |             |           |   |             | See Continu   | ation Form | n       |           |
| 8. Extended To                      | A. Date         | Mo Da        | Yr             | B. Time (24 Hr.     | . Clock   | ()        |             | C         | Vacated                                 | D. T        | erminated     | X E. Mo    | odified |           |
| Section IV Inspe                    |                 |              |                |                     |           |           |             |           |   |             |               |            |         | _         |
| 9. Type of Inspect                  | ion<br>E 0      |              | Event Nu       |                     | 3 4       | 56        | 6 8         |           |   |             |               |            |         |           |
| 11. Signature                       |                 | • • •        |                | AR                  | Numb      | er 12     | 2. Date     | Mo        | Da Yr                                   |             | (24 Hr. Clock |            |         | $\square$ |
| HORATIO ALG                         |                 |              |                | 60                  | 0 0       | 0         |             | 03        | 050                                     | 8           |               |            | 1 3 0   | ) 0       |
| MSHA Form 7000                      | -3a, Mar 85 (   | Revised)     |                |                     |           |           |             |           |   |             |               |            |         |           |

104(a) CITATION - TERMINATION OF NOISE VIOLATION WITH "P" CODE

Appendix E Miscellaneous Forms And Codes

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### **Special Assessment** . Review Form

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

| 1. MSHA District Office  |                     | 2. Field Office                              |                               |  |  |  |  |
|--|---------------------|--|-------------------------------|--|--|--|--|
| 3. Mine ID/Contractor ID   |                     | 4. Mine Name                                 |                               |  |  |  |  |
| 5. Operator Name   |                     | 6. Citation/Order Number                     | 7. Citation/Order Issue Date  |  |  |  |  |
| 8. Accident Related Violation?   | If yes, all viola   | ations must be submitted together with any a | ccident report or memorandum. |  |  |  |  |
| 9. A. Operator Notified of Special Assessment?   | Yes No              |  |                               |  |  |  |  |
| 10. Inspector's Recommendation Is  | this a flagrant vio | lation?                                      | No                            |  |  |  |  |
| pecial Assessment? Yes No If yes, explain below the serious or aggravating circumstances involved. |                     |  |                               |  |  |  |  |

| See Continuation Seet                   | Signature                     |     |    | Date |
|---|-------------------------------|-----|----|------|
| 11. Supervisor's Review                 | Is this a flagrant violation? | Yes | No |      |
| Special Assessment? Yes No              |                               |     |    |      |
| Comments:                               |                               |     |    |      |
|   |                               |     |    |      |
|   |                               |     |    |      |
| _                                       |                               |     |    |      |
| See Continuation Seet                   | Signature                     |     |    | Date |
| 12. Assistant District Manager's Review | Is this a flagrant violation? | Yes | No |      |
| Special Assessment? Yes No              |                               |     |    |      |
| Comments:                               |                               |     |    |      |
|   |                               |     |    |      |
|   |                               |     |    |      |
|   | <u>Oises stress</u>           |     |    | Date |
| See Continuation Seet                   | Signature                     |     |    | Date |
| 13. District Manager's Review           | Is this a flagrant violation? | Yes | No |      |
| Special Assessment? Yes No              |                               |     |    |      |
| Comments:                               |                               |     |    |      |
|   |                               |     |    |      |
|   |                               |     |    |      |
|   |                               |     |    |      |
| See Continuation Seet                   | Signature                     |     |    | Date |
| MSHA Form 7000-32, Revised August 2006  |                               |     |    |      |

## POSSIBLE KNOWING/WILLFUL VIOLATION REVIEW FORM

| U.S. De | epartment | of Lab | or |
|---------|-----------|--------|----|
|         |           |        |    |

(Confidential, Pre-decisional Information)

| -               |                       |
|-----------------|-----------------------|
| Mine Sefety and | Health Administration |
| wine Salety and | Health Administration |
|                 |                       |

| MINE ID  | MSHA OFFICE  |
|--|--|
|  |  |
|  |  |
| Citation/Order Number  | Date   |
| ACCIDENT INFORMATION<br>Was this violation associated with an accident which caused an injury?   | Yes No If yes: Fatal? Non-fatal?   |
| <ul><li><b>REVIEW CRITERIA</b> (Attach supplemental information if needed)</li><li>1. Did the condition or practice cited create the presence of a high degree<br/>a) Who was exposed to the hazard? (Name and Occupation)</li></ul>   | e of risk to the health and safety of miners? Yes No                               |
| b) How were they exposed to the hazard?  |  |
| c) When and over what period of time did the exposure occur?   |  |
| <ul> <li>d) Is this first hand information?</li> <li>If not, who provided the information? (Name and Occupation)</li> <li>2. Did the operator or agent have actual knowledge, or reason to know, o</li> <li>a) Who had this knowledge? (Name and Title)</li> <li>b) How was this knowledge evidenced?</li> </ul> | -  |
| <ul> <li>c) Is this first hand information? Yes No</li> <li>If not, who provided the information? (Name and Occupation)</li> <li>3. Any other pertinent information:</li> </ul>  |  |
|  | nd/or willful violaton of the Act or mandatory health or safety standard?<br>Date: |
| Supervisor: Do you agree with the inspector's conclusion? Yes Signature:   |  |
| POSSIBLE RECOMMENDED ACTIONS:  A. Conduct a special investigation.  Assistant District Manager: Recommendation Signature:  | C. No further action.  |
| Supervisory Special Investigator: Recommendation:  | (A or C from the list above) Date:   |
| District Manager: Action Decision: (A or C from the signature:   |  |
| ADDITIONAL COMMENTS OR REMARKS   |  |
|  |  |
| CASE ASSIGNMENT INFORMATION:<br>Investigation Case No.   | Date Assigned  |
|  | ID No  |
| MSHA Form 7000-20, June 97 (revised)   | WHITE: SPECIAL INVESTIGATOR  |

## **Enforcement Activity Codes**

| MSIS<br>Code           | Activity   | Description  |
|------------------------|--|--|
| E01                    | Regular Safety and<br>Health Inspection                            | Mandatory Safety and Health Inspections of a mine, surface facility, or other entity having a mine I.D. number in its entirety.  |
| E02                    | 103(i) Spot Inspections  | Mandatory spot inspections of mines that qualify under 103(i) of the Act<br>and are inspected for gases liberation, serious ignition or explosions<br>hazards, or other especially hazardous conditions or problems.   |
| E03                    | 103(g) Written<br>Notification Hazard<br>Complaint Inspection      | Special inspections that respond to a written notice filed pursuant to 103(g) of the Act alleging a violation or imminent danger exists at a mine.   |
| E04                    | Verbal Hazard Complaint<br>Inspections                             | Special inspections that result from a verbal or otherwise written<br>complaint where a violation or hazardous condition is alleged and is not a<br>103(g) request or a code-a-phone complaint.  |
| E05                    | 108 Injunctive Actions or<br>Other SI Activities                   | All investigative activities conducted pursuant to 108 of the Act regarding injunctions or any other Special Investigation activities.   |
| E06                    | Fatal Accident<br>Investigation                                    | Investigation of a death of an individual at a mine.   |
| E07                    | Non-Fatal Accident<br>Investigation                                | Investigation of a serious non-fatal injury accident at a mine.  |
| E08                    | Non-Injury Accident<br>Investigation                               | Investigation of non-injury accidents as defined in 30 CFR, Part 50.2  |
| E09                    | Mine Emergency<br>Operations                                       | Includes all rescue and recovery operations during a mine emergency. No citations or orders should be issued against this type of activity. Also, includes time monitoring the mine environment during mine fires determined to be mine emergencies.                     |
| E10                    | Petition for Modification<br>Investigation                         | All investigative activities conducted pursuant to 101 (c) and 101 (d) of the Act.   |
| E11                    | 105(c) Investigation<br>(Discrimination)                           | All investigative activities conducted pursuant to 105 (c) of the Act where a complaint of discrimination is alleged.  |
| E12                    | 110(c), 110(d)<br>Investigation (Willful or<br>Knowing Violations) | All investigative activities conducted pursuant to 110 of the Act regarding citations and orders where there is possible knowing and willful intent.   |
| E13<br>(Coal<br>Only)  | Re-opening Inspection  | This is a non-penalty inspection of an entire mine after having been<br>abandoned or declared inactive.<br>This code is restricted to Coal Mine program area use only.   |
| E14<br>(Metal<br>Only) | Compliance Assistance<br>Visit                                     | A visit to a new mine, a visit prior to re-opening a mine, a visit to inspect<br>new facilities at an operating mine, or the installation of new equipment<br>at an operating mine to point out potential violations without monetary<br>civil penalties being proposed. |
| E15                    | Compliance Follow-up<br>Inspection                                 | An inspection conducted for the primary purpose of ascertaining the abatement status of previously cited violations.   |
| E16                    | Spot Inspection  | The inspection of a mine or part(s) of a mine to determine whether there is compliance with safety and health standards  |
| E17                    | Special Emphasis<br>Programs                                       | Activity for a specialized purpose that may be unique for the agency, coal or metal. An example would be the "Focus on Safe Work" outreach.  |

| MSIS<br>Code | Activity  | Description  |
|--------------|---|--|
|              |   | Each activity may be assigned a unique identifier.   |
| E18          | Shaft, Slope or Major<br>Construction Spot<br>Inspection        | An inspection of a shaft, slope, or major construction site to determine<br>whether an imminent danger exists and whether there is compliance with<br>safety and health standards or any issued violations.  |
| E19          | Electrical Technical<br>Investigation                           | An investigation of all or part of a mine's electrical components and systems. Includes field changes on electrical face equipment, trolley surveys, circuit breaker studies, ground monitor checks and other special electrical inspections/investigations.   |
| E20          | Roof Control Technical<br>Investigation                         | An investigation of a mine's roof conditions that may include engineering<br>and in-depth studies of roof problems or potential problems, roof control<br>surveys, and pull tests.   |
| E21          | Ventilation Technical<br>Investigation                          | An investigation of a mine's ventilation system that may include detailed<br>engineering studies of current or potential problems, surveys, and waiver<br>requests.  |
| E22          | Health Technical<br>Investigation                               | Includes a toxic substance or harmful physical agent investigation of a<br>reported problem or potential problem with any toxic substance or<br>harmful physical agent. An investigation of an operator's sampling<br>program where samples may or may not be collected and investigations<br>of Part 90 miners and their occupations (Coal). Includes free silica<br>technical investigations dictating additional respirable dust samples for<br>further analysis. |
| E23          | Impoundment Spot<br>Inspection                                  | An inspection of an impoundment of determine whether an imminent<br>danger exists and whether there is compliance with approved plans and<br>safety and health standards.  |
| E24          | Other Technical<br>Compliance<br>Investigations                 | Other technical investigations not described by any other code.  |
| E25          | Part 50 Audit   | Part 50 Audit of a mine's accident, injury, illness, and employment records. Includes all activity in pursuit of the audit.  |
| E26          | Other Contacts  | Includes industry assistance, technical assistance visits for plan<br>evaluations, and other contacts not classified by one of the other codes.<br>Although this is a visit to a mine, these are <i>not</i> mine inspections or<br>investigations.   |
| E27          | Attempted Inspection<br>(Denial of Entry)                       | A mine visit specifically for the purpose of conducting an enforcement<br>activity, but the activity could not be accomplished because of direct or<br>indirect denial of entry.   |
| E28          | Mine Idle Activity  | A mine visit specifically for the purpose of conducting an enforcement activity, but the activity could not be accomplished because the mine was not operating.  |
| E29          | Program in Accident<br>Reduction/Compliance<br>Analysis Program | A program aimed at injury reduction in selected mines with high accident<br>and injury levels. This includes accident reduction surveys conducted by<br>teams. In Coal, includes all time working in a non-AR capacity.  |
| E30          | Accident Reduction<br>Program                                   | All activities in the field related to the accident reduction and prevention programs, and formal walk and talk activities. These are activities not conducted as part of any other event.   |
| E31          | Training Plan Approval<br>and Revisions (Field)                 | All field activities regarding the initial approval or revision of training plans.   |

| MSIS<br>Code          | Activity   | Description  |
|-----------------------|--|--|
| E32                   | On-site Training Program<br>Evaluation (Field)                               | All field activities related to evaluating MSHA approved instructors, training plans, course content, task outline, 5000-23 forms, records of certified and qualified persons, learning environment, etc., not conducted as part of another event.   |
| E33                   | Non-Chargeable<br>Accident Investigation                                     | Investigation of any death, serious non-fatal injury, or non-injury<br>accident at a mine that is not charged to the mine, contractor, or the<br>mining industry. NOTE: If the accident is subsequently deemed<br>chargeable, the activity may be changed to another event type. Issuances<br>can be issued during an E33 event. |
| T01                   | Investigative Case<br>Review   | Time spent in an MSHA office reviewing reports of investigations.  |
| T02<br>(Coal<br>only) | Office Generated<br>Violation Activity                                       | All time associated with office generated violations not coded under another code.   |
| Т03                   | Legal Hearing/Document   | Time involved in legal hearings, MSHA hearings, or testifying in court, including the prep time for these activities unless covered by another activity code. Does not include time spent by the CLRs.   |
| T04                   | Safety and Health<br>Conference  | All time spent on operator / miners' representative requested conferences related to cited violations of the Act or regulations and the subsequent assessment of civil penalties. These are not inspectors' closeout conferences.  |
| Т05                   | Contested Case Activities  | All CLR activities (office, mine site, hearings, etc.) relating to ACRI case resolutions.  |
| Т06                   | Plan Approvals and<br>Reviews  | Time spent in an MSHA office reviewing and approving plans   |
| <b>T07</b>            | Technical Assistance to<br>Industry/Union Personnel<br>or Interested Parties | All time associated with providing technical assistance to company or<br>union personnel or other interested parties. This includes groups requiring<br>our technical expertise but that are not specifically under MSHA<br>jurisdiction.  |
| Т08                   | Instructor Approval  | All activities, other than training instructors, required to produce approved instructors.   |
| Т09                   | Evaluating Cooperative<br>Instructors  | All time evaluating cooperative instructors in the office or field.  |
| T10                   | Qualification and<br>Certification   | All activities related to qualifying and certifying people. Includes noise,<br>dust, methane, oxygen deficiency, impoundments, electrical, mine rescue<br>and first aid instructors, and so forth.   |
| T11                   | Holmes Safety<br>Association (Assistance<br>to Chapters/Councils)            | All activities of HSA chapters. Include all time spent in forming and operating HSA chapters or councils, preparing for and making presentations at meetings, and time involving Joseph A. Holmes Awards.  |
| T12                   | State Grants Assistance<br>and State Plans                                   | Includes time spent attending State Grants meetings, as well as meetings<br>with state and headquarters personnel regarding State Grant assistance<br>and plans.   |
| T13                   | Other Education and  | Includes work on accident reduction and prevention programs that are not   |

| MSIS<br>Code | Activity   | Description  |
|--------------|--|--|
|              | Training Field Activities  | mine specific, as well as other activities providing assistance to the<br>mining community that are not coded as an education and training event<br>or that are not covered by another activity code. These activities are at<br>locations other than the MSHA office.                                 |
| T14          | Informational Meetings,<br>Seminars, and Training<br>Classes Given to Industry | All activities relating to training, demonstrations, meetings, seminars, conferences, association meetings and informational meetings for industry (off-site meetings, excluding Holmes Safety).   |
| T15          | Instructing Mine Rescue<br>and First Aid (non-<br>MSHA)                        | All activities, excluding mine-rescue and first-aid-instructor training, related to mine rescue and first aid training, including team training, judges training, and so forth.  |
| T16          | Supervisory Duties<br>(Office)   | All supervisory-related duties in an MSHA Office.  |
| T17          | National Committee<br>Meetings and<br>Assignments                              | Includes time spent attending committee meetings at the national level<br>and assignments from headquarters, such as the development or revision<br>of standards and /or regulations.  |
| T18          | Review of<br>Documents/Laboratory<br>Duties / Vehicle<br>Maintenance           | Time spent reviewing such documents as regulations, policy, accident<br>investigations, conducting laboratory duties (not associated with an<br>event), and vehicle maintenance.   |
| T19          | Official Union Duties  | Personnel participating in official union duties.  |
| T20          | Staff Meetings   | Personnel participating in staff or safety meetings in or outside MSHA offices.  |
| T21          | Instructing MSHA<br>Personnel in Training<br>Classes                           | Time of MSHA personnel instructing classes, in information meetings, seminars, and so forth.   |
| T22          | Informational Meetings,<br>Seminars and Training<br>Classes Received           | Personnel receiving training other than Mine Rescue and First Aid from<br>both MSHA and outside sources.   |
| T23          | Mine Rescue/MERD<br>Activities   | Includes time spent training and preparing for or participating in the National or regional contests. Also includes time spent preparing for or participating in MERD exercises.   |
| T24          | FOIA<br>Request/Congressional<br>Inquiries                                     | Includes all time spent researching and responding to the request.   |
| T25          | Medical Accommodation<br>On- the-Job Injury                                    | Include all time charged by the individuals who were injured or<br>incapacitated on the job and who are performing meaningful work for<br>MSHA in a capacity that meets their physician's prescribed limitations or<br>restrictions. These assignments must be of limited duration.                    |
| T26          | Medical<br>Accommodation—<br>Personal Injury                                   | Include all time charged by the individuals who were injured or<br>incapacitated outside of Government time and who are performing<br>meaningful work for MSHA in a capacity that meets their physician's<br>prescribed limitations or restrictions. These assignments must be of<br>limited duration. |
| T27          | Special and<br>Miscellaneous<br>Assignments                                    | Duties of a temporary nature outside of regularly assigned job-related<br>duties and any other activity not covered by other codes.  |

| MSIS<br>Code | Activity                  | Description           |
|--------------|---------------------------|-----------------------|
| T28          | Annual Leave              | Self explanatory      |
| T29          | Administrative Leave      | Self explanatory      |
| Т30          | Compensatory Leave        | Self explanatory      |
| T31          | Holiday                   | Self explanatory      |
| T32          | LWOP                      | Leave Without Pay     |
| Т33          | AWOL                      | Absent Without Leave  |
| T34          | Military Leave            | Self explanatory      |
| T35          | Sick Leave                | Self explanatory      |
| T36          | OWCP                      | Worker's Compensation |
| T37          | Jury Duty                 | Self explanatory      |
| T38          | Furlough (non-pay status) | Self explanatory      |
| Т39          | Suspension Without Pay    | Self explanatory      |

## **New Enforcement Task Codes**

| Task<br>Code | Task Title   |  |
|--------------|--|--|
| Ι            | General Inspection Activity  |  |
| S            | Supervisory Duties (Field)   |  |
| Т            | Inspector <b>T</b> rainee  |  |
| R            | Roof Control (on-site and plans)(Specialists only)   |  |
| V            | Ventilation (on-site and plans)(Specialists only)  |  |
| Н            | Health (on-site and plans)(Specialists only)   |  |
| W            | Impoundments / $\mathbf{W}$ aste Piles (on-site and plans)(Specialists only)                 |  |
| Ε            | Electrical (on-site)   |  |
| L            | Hau $L$ age Technical (special activities; does not include routine checks)                  |  |
| С            | Self-Contained Self-Rescuers Evaluation (Field)  |  |
| U            | Ed $\mathbf{U}$ cation and Training (including walk & talk activities)                       |  |
| Α            | Compliance Assistance  |  |
| D            | Respirable <b>D</b> ust Sampling   |  |
| Ν            | Noise Sampling   |  |
| Y            | Industrial H $\mathbf{Y}$ giene  |  |
| Μ            | Diesel E <b>M</b> issions Work (does not include routine gas checks and ventilations checks) |  |
| Ζ            | HaZard Communication   |  |