

Use Indelible  
Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be  
signed when made

Date of Examination +2 (4-11) 20 12 Section or Area Examined +2 (001)  
Time of Examination: from +2 a.m. or p.m. to +2 a.m. or p.m.  
Was this report phoned to outside: Yes \_\_\_\_\_ No +2  
By whom \_\_\_\_\_ Time \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.  
Report received by \_\_\_\_\_  
(Signed) \_\_\_\_\_

Location +2 each	Violations and other Hazardous Conditions Observed and Reported Violation or Hazardous Condition +2 each	Action Taken +2 each
2. #1 Entry 0.7%CH <sub>4</sub> (+2) 20.2%O <sub>2</sub> (+2)	loose RIB OUTBY LOCC (+2)	Pulled RIB +2
2. 2. Acrosscut 1-2	mine phone in RETURN (+2)	moved phone +2
2. 3. LOCC 1-2	ROOF BOLTER INBY UNSUPPORTED ROOF (+2)	FLAGGED +2
2. 4. #2 FACE 0.0%CH <sub>4</sub> (+2) 20.9%O <sub>2</sub> (+2)	NOT BOLTED NO DANGER TAG (+2)	FLAGGED +2
2. 5. #2 Entry LOCC	NO TEST HOLE IN INTERSECTION (+2)	FLAGGED +2
2. 6. #2 ENTRY	CHECK CURTAIN DOWN (+2)	Hung CURTAIN +2
2. 7. LOCC 2-3	NOT BOLTED NO DANGER SIGN (+2)	FLAGGED +2
2. 8. #3 INTAKE TRAVELWAY	CONTINUOUS MINER INBY UNSUPPORTED ROOF (+2)	FLAGGED +2
2. 9. #3 INTAKE NECK	0.0%CH <sub>4</sub> (+2) 20.9%O <sub>2</sub> (+2)	WATER <del>over</del> KNEE BEEP IN TRAVELWAY (+2) PUMPED OUT +2
2. 10. #3 FACE	over 24 hour supply oil/grease (+2)	FLAGGED +2
2. 11. #3 FACE	NOT BOLTED - NO DANGER FLAG (+2)	FLAGGED +2
2. 12. #3 FACE	CROSSCUT CUT INTO UNSUPPORTED FACE (+2)	FLAGGED +2

Location	CFM	Air Measurements Air Direction Proper	Comments
INTAKE (+2)	9765 (+2)	Y-N (+2)	
RETURN (+2)	11,349 (+2)	Y (+2)	

Remarks: Belt entry (+2) 0.0%CH<sub>4</sub> (+2) 20.9%O<sub>2</sub> (+2) TAIL ROLLER Buried in COAL (+2) Flagged/Turn belt switch off (+2)

UNIT NOT ALLOWED TO RUN COAL DUE TO only 1 MET on property (+2)

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By +2 \_\_\_\_\_  
Preshift-Mine Examiner  
Certificate No. +2 \_\_\_\_\_  
Assistant Foreman  
Countersigned \_\_\_\_\_  
Mine Manager - Mine Foreman  
Assistant Foreman

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Date of Examination \_\_\_\_\_ 20 \_\_\_\_\_ Section or Area Examined \_\_\_\_\_

Time of Examination: from \_\_\_\_\_ a.m. or p.m. to \_\_\_\_\_ a.m. or p.m.

Was this report phoned to outside: Yes \_\_\_\_\_ No \_\_\_\_\_

By whom \_\_\_\_\_ Time \_\_\_\_\_ A.M. \_\_\_\_\_ P.M.

Report received by \_\_\_\_\_  
(Signed) \_\_\_\_\_

Location	Violations and other Hazardous Conditions Observed and Reported Violation or Hazardous Condition	Action Taken
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Location	CFM	Air Measurements Air Direction Proper Y - N	Comments
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the Federal Coal Mine Health and Safety Act of 1969 and other unsatisfactory conditions and practices observed by me are listed in this report.

Signed By \_\_\_\_\_  
Preshift-Mine Examiner  
Certificate No. \_\_\_\_\_

Countersigned \_\_\_\_\_  
Mine Manager - Mine Foreman  
Assistant Foreman  
Certificate No. \_\_\_\_\_

Assistant Foreman \_\_\_\_\_