

Use Indelible Pencil or Ink

PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-2 2006 Section or Area Examined 2 Left
 Time of Examination: from 4:00 a.m. or p.m. to 4:25 a.m. or p.m.
 Was this report phoned to outside: Yes no
 By whom brought out Time 5:30 A.M. _____ P.M.
 Report received by J. Lulu (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. <u>Entry</u>	<u>Clear</u> ↓	
2. <u>Entry</u>		
3. <u>Entry</u>		
4. <u>Entry</u>		
5. <u>Entry</u>		
6. <u>Entry</u>		
7. <u>Entry</u>		
8. <u>Entry</u>		
9. _____		
10. _____		

Air Measurements

Location	CFM	Location	CFM
<u>Last open Bk</u>	<u>11,241</u>		
<u>Return 02</u>	<u>20.9</u>		
<u>Return ch4</u>	<u>0.0%</u>		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Remarks: 1-2-06
J. b. John Lulu

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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 F. Lulu 33073 Martin Lulu 28298
Preshift-Mine Examiner Certificate No. Assistant Foreman Certificate No.
 Countersigned _____
Mine Manager Mine Foreman Assistant Foreman Superintendent or Assistant

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PRESHIFT-MINE EXAMINER'S REPORT

Report shall be signed when made

Date of Examination 1-2-08 20 Section or Area Examined 1-Left
 Time of Examination: from 4:20 a.m. or p.m. to 4:50 a.m. or p.m.
 'as this report phoned to outside: Yes no
 by whom Kerry Helmes Time A.M. P.M.
 Report received by Owen Jones (Signed)

Violations and other Hazardous Conditions Observed and Reported

Location	Violation or Hazardous Condition	Action Taken
1. entry	none obs	
2. entry	none	
3. entry	none	
4. entry	none	
5. entry	none	
6. entry	none	
7. entry	none	
8. entry	none	
9. _____		
10. _____		

Air Measurements

Location	CFM	Location	CFM
L/O/B	14,510		
Ret CH ₄	.0%		
Ret O ₂	20.9%		

1-2-08
J.B.

Remarks: 2-N/B 4-N/B
5, 6, 7, needs cleaned
Section and charger safe at Exam time

This is to certify that: (a) This section of the mine was properly examined by me, (b) all violations of the W. Va. Mining Laws and 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. _____ Assistant Foreman Certificate No. _____
 Countersigned _____ Mine Manager Mine Foreman _____
Owen Jones Assistant Foreman Certificate No. 36860 Superintendent or Assistant _____