U.S. Department of Labor

Mine Safety and Health Administration 1100 Wilson Boulevard



Arlington, Virginia 22209-3939 MEMORANDUM FOR MICHAEL A. DAVIS Deputy Assistant Secretary for Operations Mine Safety and Health PETER J. MONTALI THROUGH: Acing Director of Accountability for Mine Safety and Health ARLIE A. WEBB FROM: Accountability Specialist SUBJECT: MSHA Office of Accountability Audit, Summersville, West Virginia, Field Office, and Introduction This memorandum summarizes the Office of Accountability audit of the subject mine and field office. Audit subjects included MSHA supervisory and managerial oversight, MSHA field activities, level of enforcement, Field Activity Reviews (FARs), Accompanied Activities, the Uniform Mine File, mine plans, and the conditions and practices at the mine. The audit was conducted during the week of by Arlie A. Webb. Peter J. Montali, Acting Director for the Office of Accountability, also participated in this audit. Positive findings and issues requiring attention are included in this audit report. **Overview** The accountability specialists traveled to the Summersville, West Virginia Field Office and to o observe and evaluate enforcement activities, supervisory oversight, and mine conditions. Accompanying the accountability specialists were Coal Mine During the audit, Robert

Hardman - District Manager, also visited Areas examined during this audit included the office, record books and required postings, facility, stacker belts and transfer belts, elevated walkways, firethe fighting equipment and materials, the master control room, crusher house, stockpiles, escape tunnels, raw coal screening house, refuse bin, static thickener, shop area, supply house, and surface equipment such as trucks, front end loaders, and bulldozers.

S&S Rate Comparison

Overall, the Significant and Substantial (S&S) rates for the Summersville field office are comparable to the national average. The S&S rate for District 4 as a whole is slightly higher than the national average.

Fiscal Year	Field Office	Coal District 4	National Avg.
2008	32.9%	39.8%	35%
2009	35.0%	38.0%	35%

However, a close examination of the current enforcement actions at this field office indicates that gravity, negligence and S&S determinations are not always consistent with the seriousness of the violations observed.

Time and Activity Comparison

A review of time distribution for the Summersville field office indicates excellent time distribution and commendable on-site time.

	Surface Facilities – E01 Inspections					
	Travel	Other	Total	Citations	Citations	Total
	Time	Time	On-Site	Written	Written	Percent
				On-Site	Off-Site	
% in FY 2008	16.6%	17.0%	66.2%	4.9%	<1.0%	100%
% in FY 2009	17.1%	16.8%	65.9%	3.8%	<1.0%	100%

	Surface Mines – E01 Inspections					
	Travel	Other	Total	Citations	Citations	Total
	Time	Time	On-Site	Written	Written	Percent
				On-Site	Off-Site	
% in FY 2008	15.6%	8.5%	75.9%	8.9%	<1.0%	100%
% in FY 2009	16.7%	6.7%	76.6%	7.5%	0%	100%

	Underground Mines – E01 Inspections					
	Travel	Other	Total	Citations	Citations	Total
	Time	Time	On-Site	Written	Written	Percent
	ļ			On-Site	Off-Site	
% in FY 2008	18.1%	14.4%	67.3%	4.7%	<1.0%	100%
% in FY 2009	17.1%	16.6%	66.2%	3.9%	<1.0%	100%

Audit Results

The audit revealed positive findings in several categories, including the following:

1. Conference Litigation Representative (CLR) decisions do not appear to be "conditioning" inspectors.

- 2. Field Office Supervisors and district supervisors and managers are conducting mine visits on a regular basis.
- 3. Time spent on off-shifts improved dramatically.
- 4. The audit team observed two different inspectors conducting quality imminent danger examinations and inspections.

The audit also revealed issues in several categories that require corrective actions, including the following:

- 1. The level of enforcement does not always reflect repeat violations. (FO)
- 2. Evaluations of S&S, gravity, negligence, and number of persons affected do not always appear commensurate with the type of violations cited. (FO)
- 3. Multiple violations were sometimes listed on a single citation. (FO)
- 4. Peer Reviews were not thorough and did not contain means for follow-up. (HQ)(District)
- 5. The absence of a set of general guidelines to address injection of slurry into abandoned underground mines. (HQ)

The attached checklist addresses the findings of the audit. Positive issues as well as issues requiring action are covered in detail in the checklist.

Attachments:

- A. Audit Checklist
- B. Citations/Orders issued during audit
- C. Selected citations with apparent inconsistent S&S evaluations
- D. Selected citations with apparent low level of enforcement

District Coal Dist 4 Field Office Summersville, WV Mine ID Date
1. Evaluate supervisory review of inspection reports and documentation for completeness.
Adequate X Inadequate Not Applicable Comments Below
Recommendation – Additional attention should be given to comparing IPAL, Time and Activity Sheets, and the Inspection Event Calendar for inspection dates and shifts worked.
2. Determine if supervisors address report deficiencies immediately
Adequate X Inadequate Not Applicable Comments Below
Report deficiencies are immediately addressed, although better documentation is needed.
3. Determine if supervisors are visiting each assigned mine at least annually
Adequate X Inadequate Not Applicable Comments Below
Evaluate the quality of Field Activity Review reports (FARs)
Adequate X Inadequate Not Applicable Comments Below
During the time period audited, eighteen Field Activity Reviews were conducted. Positive comments were made in 14 of these. Most of these comments indicated the inspector conducted a complete and thorough inspection, or performed his duties efficiently.
However, 4 FARs contained excellent comments on areas where the inspector needs to improve.
Recommendation – Field Activity Reviews should include documentation of an inspector's extraordinary efforts or accomplishments, as well as areas where improvement is needed. Simply completing a thorough inspection is not extraordinary.
Reference - Coal Mine Safety and Health Supervisor's Handbook (AH-08-III-1(2)), Chapter 1, Section IV, Items E &F, and Chapter 1, Section X, Item A.

District Coal Dist 4 Field Office Summersville, WV Mine ID Date
Determine if supervisors/managers are identifying and addressing performance or
5. behavior based issues during and after accompanied inspections are conducted
Adequate X Inadequate Not Applicable Comments Below
6. Evaluate the quality of Accompanied Inspections
Adagyata V Inadagyata Dalay
Adequate X Inadequate Not Applicable Comments Below
Interviews with inspectors and supervisors indicate that quality AAs are being conducted in the field. However, the documentation for AAs needs to be improved.
During the time period audited twenty one Assembanied Activities were conducted. Resitive
During the time period audited, twenty-one Accompanied Activities were conducted. Positive comments were made in 10 of these. Most of these comments indicated the inspector conducted
a complete and thorough inspection, or performed his duties efficiently. Only one Accompanied
Activity indicated an area where the inspector needed to improve.
Recommendation – Accompanied Activity Reports should include documentation of an
inspector's extraordinary efforts or accomplishments, as well as areas where improvement is needed. Simply completing a thorough inspection is not extraordinary.
needed. Simply completing a thorough inspection is not extraordinary.
Reference - Coal Mine Safety and Health Supervisor's Handbook (AH-08-III-1(2)), Chapter 1,
Section IV, Items E &F, and Chapter 1, Section X, Item B.
7. Determine if supervisors are thoroughly reviewing mine files at least annually
Adequate X Inadequate Not Applicable Comments Below
Adequate X Inadequate Not Applicable Comments Below
D. 4
Determine if Assistant District Manager is holding supervisor accountable for general mine visits, FARs, and accompanied activities
Adequate X Inadequate Not Applicable Comments Below

District Coal Dist 4 Field Office Summersville, WV Mine ID Date
Determine if ADMs and DMs are visiting mines with poor compliance at least 11. monthly
Adequate X Inadequate Not Applicable Comments Below
Determine if supervisors are monitoring inspector time and activity documentation to ensure proper use of time by inspector
Adequate X Inadequate Not Applicable Comments Below
Determine if supervisors are adequately evaluating the level of enforcement by
20. visiting each producing mine
Adequate X Inadequate Not Applicable Comments Below
Supervisory mine visits were being conducted. However, see Item No. 37 below.
Determine if District Manager is monitoring the ACRI program and using the 21. Performance Management System to ensure that CLRs justify changes
Adequate Inadequate X Not Applicable Comments Below
The district's ACRI program appears to be functioning properly. However, interviews with
inspectors, supervisors, and district-level personnel indicate issues within the MSHA/SOL Alternative Case Resolution procedures that cannot be resolved at the district level. Some (but
not all) of those issues are as follows:
a. The currently approved Memorandum of Understanding between MSHA and SOL is not compatible with the currently approved ACRI Handbook. The ACRI Handbook has been
revised and is currently awaiting approval.
b. The current process requires that approximately 96% of all contested cases be handled by
CLRs. This is already creating a backlog of cases. Only approximately 4% of contested cases will be handled by SOL, regardless of the actual number of contested cases.
tubes will be mailable by 2013, regulated by mile defined of controlled eases.

District C	Coal Dist 4 Field Office Summersville, WV Mine ID Date
	Determine if second level reviews and Peer Reviews are used to assess supervisory
23.	review of enforcement actions
Adequate	X Inadequate Not Applicable Comments Below
L	
25.	Evaluate inspector/specialist knowledge of documentation required and process for completing PKW Forms.
Adequate	X Inadequate Not Applicable Comments Below
26.	Evaluate the district's process for performing Possible Knowing/Willful (PKW) reviews and initiating or denying special investigations
}	
Adequate	X Inadequate Not Applicable Comments Below
29.	Determine if complete and thorough inspections are being conducted and adequately documented
Adequate	X Inadequate Not Applicable Comments Below
30.	Determine if inspection notes, air samples, rock dust samples, and tracking map/diagram support the inspector's assertion that the mine was inspected in its entirety
Adequate	X Inadequate Not Applicable Comments Below

District Coal Dist 4 Field Office Summersville, WV Mine ID Date
Determine that the inspector spent sufficient time on off-shifts and on weekends
Adequate X Inadequate Not Applicable Comments Below
An analysis of the first of two E01 inspections reviewed indicated that only 3% of the total time was spent on off-shifts, and almost 9% of the total time was spent in the office.
However, the most recent E01 inspection showed a commendable improvement in time distribution. Approximately 25% of the total inspection time was spent on off-shifts, and less than 5% of the total time was spent in the office. Time spent in the "other" category decreased significantly as well.
Determine if all mine record books, postings, and other required materials are examined during the inspection
Adequate X Inadequate Not Applicable Comments Below
Determine if the amount of time expended on each inspection activity and area of the mine is sufficient to accomplish inspection goals
Adequate X Inadequate Not Applicable Comments Below

District Coal Dist 4 Field Office Summersville, WV Mine ID Date
Evaluate each citation/order/safeguard for inspector's determination of gravity, negligence, number of persons affected, and the level of enforcement
Adequate Inadequate X Not Applicable Comments Below
evaluations regarding S&S determinations are not consistent with the type of violation, the wording of the citation or the inspector's notes.
 Citation Lescribes accumulations in separate locations in the that should have been cited individually.
• Citation describes inoperative stop devices on four separate conveyor belts that should have been cited individually.
 Citation describes tripping and stumbling hazards on two elevated walkways that should have been cited separately.
 Citation describes accumulations of combustible materials at two different Stamler feeders that should have been cited individually.

In a 22-day period during an E01 inspection, 16 citations were issued on 30 CFR, §77.1104 with no elevation in the level of enforcement. During the following E01 inspection, 9 additional citations were issued on the same section of 30 CFR within a 27-day period. The level of enforcement was not elevated to a 104(d) citation until the last of these 25 citations.

Attachments C and D contain examples relative to the above items.

Citations issued during the audit exhibited the same lack of thorough documentation. More information is needed in the body of the citations to describe:

- How long a violation has existed
- Precisely where the violation is located
- The extent of the violation, such as length, depth, width
- Supporting information such as voltage, amperage
- The number of persons affected by the violation
- The length of time elapsed since an examination of that area was conducted

A descriptive narrative in the body of citations helps to ensure the mine operator is fully aware of the conditions or practices that need to be corrected.

Recommendation – Repeat violations should be considered for elevation in the level of enforcement at a much earlier time. Elevated enforcement should be considered when there are violations as a result of aggravated conduct constituting more than ordinary negligence.

Recommendation —Citations should describe the violation with specificity. The narrative portion of citations should be complete and informative so the mine operator understands what

District Coal Dist 4 Field Office Summersville, WV Mine ID Date				
conditions or practices need to be corrected.				
Reference – 1977 Mine Act, Section 104(d), and Citation and Order Writing Handbook for Coal Mines and Metal and Non Metal Mines (PH08-I-1), Chapter 4, Section XIII, Items A and B.				
38. Accompany and evaluate inspector's imminent danger run				
Adequate X Inadequate Not Applicable Comments Below				
Evaluate operator's workplace examinations				
Adequate Inadequate X Not Applicable Comments Below				
Adequate examinations and corrective actions would have revealed the violations listed elsewhere in this report.				
Determine if all required record books are adequately completed and in compliance with applicable standards				
Adequate X Inadequate Not Applicable Comments Below				
Examine mine bulletin board and evaluate adequacy of all required postings				
Adequate X Inadequate Not Applicable Comments Below				

District Coal Dist 4 Field Office Summersville, WV Mine ID Date
Determine if approved plans address and are compatible with mining conditions and equipment
Adequate X Inadequate Not Applicable Comments Below
Approved plans allow injection of slurry into abandoned underground mines. These mines have areas above and below drainage. Some of the plans were approved between 2001 and 2002. The most recent update in the UMF is a permit renewal letter issued in 2007.
Interviews with inspectors, supervisors, District 4 personnel, and personnel from other districts as well, indicate that currently there are no guidelines for plan approval or subsequent monitoring where slurry is being pumped into abandoned underground mines. Guidelines are needed as a proactive measure to assist districts in the prevention of blow-outs, contamination of ground water, etc.
Recommendation – The Office of Accountability recommend that MSHA headquarters solicit information from the districts and Technical Support and issue a set of general guidelines for the approval/disapproval of plans for the injection of slurry into abandoned underground mines. The guidelines should include provisions for minimum plan requirements and periodic reporting of slurry/water levels within the abandoned mines.
Determine if Peer Reviews identify root causes of deficiencies, corrective actions, set time lines for corrections, and identify a method for accurately measuring the success or failure of corrective actions.
Adequate Inadequate X Not Applicable Comments Below
District-level reviews and headquarters-level reviews do not adequately address follow-up, evaluation, or methods for measuring the success or failure of corrective actions.
Recommendation – Follow-up, evaluation, and measurement of corrective actions is an important part of the review process, and should always be a part of the review report.
Reference – Accountability Program Handbook (AH08-III-4), Page 8
Determine if Peer Reviews include a visit to the mine, and include observation of the producing section, conveyor belt entries, escapeways and the ERP provisions
Adequate X Inadequate Not Applicable Comments Below
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District Coal Dist 4 Field Office Summersville, WV Mine ID Date
Determine if Peer Reviews accurately reflect and evaluate MSHA activities at all ty
71. of mining (underground/surface/surface facilities) within the district
Adequate X Inadequate Not Applicable Comments Below
Reviews listed on the district's spreadsheet indicate that both surface and underground mining
included in the review process.
Determine if approved plans and the Uniform Mine File healts are addressed during
Determine if approved plans and the Uniform Mine File books are addressed during each Peer Review
Adequate X Inadequate Not Applicable Comments Below
75. Evaluate approved training plan after discussion with miners
Adequate X Inadequate Not Applicable Comments Below
Adequate X Inadequate Not Applicable Comments Below
Evaluate the two most current completed E01 (regular) inspection reports (two
77. quarters)
Adequate X Inadequate Not Applicable Comments Below
The inspections appeared to be complete and thorough. However, issues as identified in Items
31 and 37 need to be addressed.
Determine if 104(d) tracking system is in place at the office being audited, and is being kept up to date
Adequate X Inadequate Not Applicable Comments Below

District Coal Dist 4 Field Office Summersville, WV Mine ID Date	
Determine if plan review and approval process provides reasonable assurance	that
83. miners are protected	
Adequate X Inadequate Not Applicable Comments Be	low
Determine if miners are adequately trained in the provisions of any new plan its implementation	prior to
Adequate X Inadequate Not Applicable Comments Be	low
As per discussion with several miners	
Determine if the uniform mine file is reviewed for information related to plan adequacy	1
Adequate X Inadequate Not Applicable Comments Be	low
Determine if input is solicited from field office inspectors/supervisors, and	
102. recommendations are addressed prior to approval	
Adequate X Inadequate Not Applicable Comments Be	elow
Determine if spreadsheets and/or databases provided for tracking of mine vi	
supervisors and managers is kept up to date	sits by
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supervisors and managers is kept up to date Adequate X Inadequate Not Applicable Comments Be Evaluate the effectiveness of management's support of, and communication	with,

District C	oal Dist 4 Field Office Summersville, WV Mine ID Date
116.	Review documentation of staff meetings/safety meetings to determine their effectiveness and relevance to the Agency's mission and current issues
Adequate	X Inadequate Not Applicable Comments Below
117.	Are MSHA Forms 7000-1 accurately reviewed for proper information and potential violations, unsafe practices, or conditions?
Adequate	X Inadequate Not Applicable Comments Below
119.	Determine if adequate close-out conferences are being conducted at the end of each inspection.
Adequate	X Inadequate Not Applicable Comments Below
121.	Determine if manpower at the field office is sufficient to ensure adequate, complete inspections, investigations, and other activities.
Adequate	X Inadequate Not Applicable Comments Below

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MSHA Form 7000-3, Apr 06 (revised) infaccordance with the provisions of the Small Business Regulatory Enforcement Fairness Act of 1996, the Small Business Administration, Office of the National Ombudeman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Cmbudeman at a small Business Administration, Office of the National Ombudeman, 409 3rd Street, SW MC 2120, Washington, DC 20416. Please note, however, that your right to file a comment with the Cmbudeman is in addition to any other rights you may have, including the right to contest oltations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Mine Citat		r					S. Depart ne Safety		Labor Ith Adminis	tration		
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8. Condition o	r Practice									8a. Writte	n Notice (103
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9. Violation	A. Health	B. Section			C. Part/Se	-Non-S		See C	ontinuatio	on Form (MS	HA Form 7000-
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Mine Citation/Order				artment of L ety and Healtl		ation	«
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8. Condition or Practice	<u> </u>					00 14/dtton	(Contracte Notice (103g)
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9. Violation A. Health Safety Other Section II—Impactor's Evaluation	B. Section of Act		Part/Section of Title 30 CFR		See Cont.	inuation Form (MSH	A Form 7000-3a)
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MSHA Form 7000-3, Apr 06 (revised) In accordance with the provisions of the Small Business Regulatory Enforcement Falmess Act of 1996, the Small Business Administration has established a National Small Business and Agriculture Regulatory Ombudaman and 10 Regional Falmess Boards to receive comments from small businesses about federal agency enforcement actions. The Ombudaman annually evaluates enforcement activities and rates each agency responsiveness to small business. If you wish to comment on the enforcement actions of MSHA, you may call 1-888-REG-FAIR (1-884-734-3247), or write the Ombudaman at Small Business Administration, Office of the National Ombudaman, 409 3rd Street, SW MC 2120, Washington, DC 20418. Please note, however, that your right to file a comment with the Ombudaman is in addition to any other rights you may have, including the right to contest obtations and proposed penalties and obtain a hearing before the Federal Mine Safety and Health Review Commission.

Attachment B

19. Type of inspection (activity code)

20. Event Number

E16

United States Department of Labor Mine Safety and Health Administration Office of Accountability

			Office							
ct Coal	Dist 4	Field Office	Summersv	ille, WV	Mine ID			Date		
Mine Citation	on/Order				S. Departme ne Safety ar			ation		4
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9. Violation	A. Health Safety V				Section of 0 CFR			tinustion Form	(MSHA Form 7000	-3a)
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21. Primary or Mill

23, AR Number

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trict Coal Dist 4 Field Office Summersvill	e, WV Mine II	D		Date	
Mine Citation/Order	U.S. Departr Mine Safety			tion	&
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8. Condition or Practice FOUR OF THE CIRCUIT BREAKERS, LOCAT					Notice (103g)
CONTROL ROOM, WERE NOT LABELED TO S	SHOW WHICH CI	RCUITS	THE BRE	AKERS CC	ONTROLLEI
			See Contin		A 57 7005 6-X
9. Violation A. Health B. Section	C. Part/Section of		See Conun	uation Form (MSH	A rom /000-38)
Safety ✓ of Act	Title 30 CFR		77.9	04	
Other Section 8—Inspector's Evaluation	<u></u>				
10. Gravity: A. injury or liliness (has) (ls): No Likelihood ☐ Unlikely ▼	Reasonably Like	skr □ i	Highly Likely [7 000	red []
]	-v LJ .			
B. Injury or liness could responsible be expected to be. No Lost Workdays Los	at Workdays Or Restricted	Duty 🗌	Permanently	Disabling	Fatal 🗹
B. Injury or illness could reasonably be expected to be: No Lost Workdays Los C. Significant and Substantial: Yes No 🗹	st Worlddays Or Restricted			Disabling	Fatal ₩
sonably be expected to be: No Lost Workdays Los	st Workdays Or Restricted C. Moderate). Number of P		001
sonably be expected to be: No Lost Workdays L Los C. Significant and Substantial: Yes No 🗹 11. Negligence (check one) A, None B, Low	C. Moderate	[). Number of P	ersons Affected:	001
sonebly be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of iss	C. Moderate 2	D. High). Number of P	ersons Affected: Reckless Disrega	001 and Written Notice
sonably be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice	C. Moderate 2	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonebly be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of iss	C. Moderate 2	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonebly be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of iss 14. initial Action A. Citation B. Order C. Safeguard D. Written Notice	C. Moderate 2	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonably be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice	C. Moderate suance (check one) E. Citation/ Order Number	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonebly be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of isa 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment	C. Moderate suance (check one) E. Citation/ Order Number	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonably be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment 16. Termination Due A. Date B. Time (24 Hr. Citation D. Company)	C. Moderate suance (check one) E. Citation/ Order Number	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonably be expected to be: C. Significant and Substantial: Yes No 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment 16. Termination Due A. Date B. Time (24 Hr. Citation IIII-Termination Action	C. Moderate suance (check one) E. Citation/ Order Number	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonebly be expected to be: C. Significant and Substantial: Yes No 2 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment 16. Termination Due A. Date B. Time (24 Hr. Citation IIII-Termination Action IIII-Termination Action IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	C. Moderate suance (check one) E. Citation/ Order Number	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonably be expected to be: No Lost Workdays L. Los C. Significant and Substantial: Yes No 🗹 11. Negligence (check one) A. None B. Low 12. Type of Action 104(a) 13. Type of les 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment 16. Termination Due A. Date B. Time (24 Hr. Citation III-Termination Action III-Termination II-Termination II-	C. Moderate suance (check one) E. Citation/ Order Number	D. High). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonebly be expected to be: C. Significant and Substantisi: Yes No 2 11. Negligence (check one) A. None B. Low 1 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment 16. Termination Due A. Date B. Time (24 Hr. Citation IIII-Termination Action IIII-Termination Action IIII-Termination Action IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	C. Moderate suance (check one) E. Citation/ Order Number	D. High Catation). Number of P	ersons Affected: Reckless Disregal Safeguard	001 and Written Notice
sonebly be expected to be: C. Significant and Substantial: Yes No 2 11. Negligence (check one) A. None B. Low 1 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment 16. Termination Due A. Date B. Time (24 Hr. Citation III-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 (activity combined in the property of Inspection (activity com	C. Moderate 🗹 suance (check one) E. Citation/ Order Number	D. High Catation). Number of P	ersons Affected: Reckless Disregal Safeguard	001
sonebly be expected to be: C. Significant and Substantial: Yes No 2 11. Negligence (check one) A. None B. Low 1 12. Type of Action 104(a) 13. Type of iss 14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice 15. Area or Equipment 16. Termination Due A. Date B. Time (24 Hr. Citation III-Terminate) 17. Action to Terminate A. Date Mo Da Yr B. Time (24 Hr. Citation IV-Automated System Data 19. Type of Inspection 20. Event Number	C. Moderate 🗹 suance (check one) E. Citation/ Order Number	D. High Catation). Number of P	ersons Affected: Reckless Disregal Safeguard F. Dated	001 and Written Notice

Mine Citat	tion/Order			U.S. Depar Mine Safety		_abor th Administrati	on	
Section I-Viol			·				_	
1. Date	MoDaYr	2 Time (24 Hr Cl	inck)			3. Citation/ Order Numb	er	
4. Served To				5 Operator				
								
				7. Mine ID				(Cont
8. Condition	or Practice						8a. Written	Notice (103
		O OIL STORA						, 5
NOT PR	OVIDED WIT	TH 2 PORTAB	LE FIRE EX	TINGUISHER	S OR TH	HE EQUIVAL	LENT.	
				•				
						See Continua	ation Form (MSH	A Form 7000-
9. Violation	A. Health	B. Section		C. Part/Section of		77.1100/	\/1\	
	Safety 🗸	of Act		Title 30 CFR		77.1109(e)(1)	
Section II-Insp	pector's Evaluation	·						
10. Gravity:		41			n		1	
	or illness (has) (is): or illness could rec-	No Likelihood	Unlikely 🗸	Reasonably Li	Kely	Highly Likely) Occui	red 🗌
	be expected to be:	No Lost Works	iays 🗌 Lost \	Workdays Or Restricts	ed Duty 🗹	Permanently (Disabling [Fatal
C. Signific	cent and Substantial	: Yes 🗌	No 🗹			D. Number of Per	sons Affected:	004
11. Negligeno	ce (check one)	A. None	B. Low 🗹	C. Moderate	D. High	E. R	eckless Disrega	ard []
12. Type of A	ction 104(a)		13. Type of Issue	ance (check one)	Citation 🗹	Order S	afeguard [Written No
14. Initial Acti A. Citation		C. Safeguard	D. Written Notice	E. Citation/	er		F. Dated	Mo Da
15. Area or Ed	,		<u> </u>				1	
16. Terminatio	on Due	Ma Do Ve			-			
	A. Date	<u>'</u>	B. Time (24 Hr. Cloc	*()				
	mination Action					····		
	reminate THE	OIL STORA	GE STATION	WAS PROVII	DED WIT	H 2 FIRE	EXTINGU	ISHERS
17. Action to 1								
17. Action to		Da Yr						
, Varadagera	4 1/0	DE 11 D Time	(24 Hr. Clock)					
17. Action to	A. Date Mo	o. rime						
18. Terminate	A. Date Mo	B. Time						
18. Terminate Section IV—Aut 19. Type of In	A. Date cometed System Data respection	20. Event Number		21. Prima	ary or Milit			
18. Terminate Section IV—Auto 19. Type of In (activity oc	A. Date cometed System Data respection	20. Event Number		21. Prima	ary or Milit	lm ADV	nhar	
18. Terminate Section IV—Aut 19. Type of In	A. Date cometed System Data respection	20. Event Number		21. Prime	ary or Mili	23. AR Nun	nber	

Mine Citation/Order	IIS Dens	artment of Labo	ne.	
		ty and Health A		<u> </u>
Section I–Violation Data 1. Date		l3	. Citation/	
			Order Number	
4. Served To	5 Operator			
5 Mine	7. Mine ID			
S. Condition of Practice		, , , ,	Ra Writt	(Contract en Notice (103g)
Toeboards were not provided the Al Refuse Screen, In tha				
•				
9. Violation A. Health B. Section	C. Part/Section of		See Continuation Form (MS	HA Form 7000-3a)
Safety of Act	Title 30 CFR		77.205(e)	
Section II-Inspector's Evaluation				
O. Gravity: A. Injury or Illness (has) (is): No Likelihood	Unlikely 📝 Reasonably	Likelv □ Hia	hly Likely 🗍 Occ	urred 🗍
B. Injury or illness could rea-			Permanently Disabling	Fatal [
C Significant and Substantial:	₩ EDSK VYORKDBYS OF RESURE		Number of Persons Affects	
	ow ☐ C. Moderate 🔽	D. High 📋	E. Reckless Disre	gerd 🗌
2. Type of Action 104(a)	3. Type of Issuance (check one)	Citation 🗸 O	rder Safeguard	Written Notice
4. Initial Action	ritten Notice	nber	F. Dated	Mo Da Y
5. Area or Equipment	·			
6. Termination Due A. Date Mo Da Yr B. T	me (24 Hr. Clock)			
ection III-Termination Action				
7. Action to Terminate				
8. Terminated A. Date Mo Da Yr B. Time (24	ir. Clock)			
ection IV-Automated System Data				
the state of the s	21. Pri	mary or Mill		
9. Type of Inspection (activity code) E16 20. Event Number				
9. Type of inspection (activity code) E16 20. Event Number 2. Sign		1	23. AR Number	

Mine Citati	ion/Orde	er		·		Departme Safety and		abor n Administ	ration	«
Section I-Viola										
1. Date	Mo Da	Yr	2. Time (24 Hr	: Clock)				3. Citation Order N		
4. Served To					5 One	rator				
6 Mine					7. Mine	ID				
8. Condition of	or Practice								8a W	(Contractition Notice (103g)
extingu	uishe: of th	rs pr ne re	ovided or fuse bin	d at least the 7th, were not b	and 4th	floor	of t	he	and a	at the g attached
								See Co	ntinuation Form (MSHA Form 7000-3a)
9. Violation	A. Healt Safet	yZ	B. Section of Act		C. Part/Sect Title 30 C				ntinuation Form (MSHA Form 7000-3a)
Section II-Inspe	Safe! Othe	y 🗸								MSHA Form 7000-3a)
Section II-Inspe	Safet Othe ector's Eval	ty 🗹 er 🗌 uation	of Act	Unlikely 5	Title 30 C	-R		77.	1110	
Section II-Inspe 10. Gravity: A. Injury of B. Injury of	Safet Othe ector's Evaluar Filiness (h	pation nas) (is):	of Act No Likelihood		Title 30 C	abiy Likely		77. Highly Llkel	1110	Occurred
Section II-Inspe 10. Gravity: A. Injury of B. Injury of sonably	Safet Othe ector's Evaluation r Illness (h r Illness co be expect	by valuation ustion ustion ustion ustion ustion ustion ustion ustion	of Act No Likelihood [No Lost Wor	rkdays Los	Title 30 C	abiy Likely	rty 🗹	77. Highly Likely Permaner	1110	Occurred Fatal
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Section II-Inspe 10. Gravity: A. Injury of B. Injury of sonably C. Signific 11. Negligeno	Safet Other sctor's Evaluation of Illness (In r Illness or be expect ant and Su se (check of	pation pation	of Act No Likelihood [No Lost Wor	No 🗹 B. Low 🗌	Title 30 C	ably Likely estricted Du	oty 🗹	77. Highly Likely Permaner D. Number o	1110 Contity Disabling If Persons Affe	Docurred
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Section III-Inspiration III-In	Safet Other Street of the Safet Other Illness (her illness come expect of the Safet	pation pation	No Likelihood [No Lost Wor Yes	No 🗹 B. Low 🗌	Reasor t Workdays Or R C. Moderate suance (check c	ably Likely estricted Du	oty 🗹	77. Highly Likely Permaner D. Number o	1110 Contity Disabling If Persons Affe	Occurred
Section II—Insport 10. Gravity: A. Injury on B. Injury on sonably C. Signific 11. Negligenc 12. Type of Ar 14. Initial Actio A. Citation 15. Area or Ec	Safet Other Communication of the Communication of t	by vertice in the state of the	No Likelihood [No Lost Word: Yes A. None	No 🗹 B. Low 🗌 13. Type of Is	Reason t Workdays Or R C. Moderate suance (check c	ably Likely estricted Du Cita on/	oty 🗹	77. Highly Likely Permaner D. Number o	1110 Cutty Disabling If Persons Affe E. Reckless Dis	Documed
Section III-Inspo 10. Gravity: A. Injury or B. Injury or sonably C. Signific 11. Negligenc 12. Type of A. 14. Initial Action A. Citation 15. Area or Ec	Safet Other Communications (In the Safet Other Evaluation of the Communication of the Communi	ty v value of the second of th	No Likelihood [No Lost Wor Yes A. None C. Safeguard	Rkdays Los No B. Low 13. Type of Is D. Written Notice	Reason t Workdays Or R C. Moderate suance (check c	ably Likely estricted Du Cita on/	oty 🗹	77. Highly Likely Permaner D. Number o	1110 Cutty Disabling If Persons Affe E. Reckless Dis	Documed
Section II-Inspiration 10. Gravity: A. Injury or Sonably C. Significant 11. Negligence 12. Type of Art 14. Initial Action A. Citation 15. Area or Ection 16. Termination 17. Action to 1	Safet Other Strain of the score Evaluation of the score (check of the score). B. Or quipment on Due	by vertical states of the stat	No Likelihood [No Lost Wor : Yes A. None C. Safeguard Mo Da Yr	No B. Low 13. Type of Is D. Written Notice B. Tirne (24 Hr. Coshers were	Reasor Reasor C. Moderate suance (check c Check Order	ably Likely estricted Du ne) Cita non/ Number	nty ☑	Highly Likely Permaner D. Number of	1110 Cutty Disabling [If Persons Affe E. Reckless Di Safeguard [F. Date	Poccurred
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Section II-Inspection II-Inspection II-Inspection II-Inspection III-Inspection II	Safet Other Communication Action Due on Due	A Date A Date Mo I	No Likelihood [No Lost Work Yes A None C. Safeguard Mo Da Yr extinguis	No M B. Low 13. Type of Is D. Written Notice B. Time (24 Hr. Coshers were her	Reasor Reasor C. Moderate suance (check c Check Order	ably Likely estricted Du ne) Cita non/ Number	nty ☑	Highly Likely Permaner D. Number of	1110 Cutty Disabling [If Persons Affe E. Reckless Di Safeguard [F. Date	Poccurred
Section III-Inspot 10. Gravity: A. Injury of B. Injury of sonably C. Significa 11. Negligence 12. Type of Ar 14. Initial Action 15. Area or Ect 16. Termination 17. Action to 1 attache 18. Terminate Section IV-Auto	Safet Other Communication of the Communication Acts of the Communicati	A Date A Date Mo I	No Likelihood [No Lost Work Yes A None C. Safeguard Mo Da Yr extinguis	B. Low D. Written Notice B. Time (24 Hr. Cosher were her	Reason t Workdays Or R C. Moderate suance (check c Druger Check c Check c Check c Check c Check c Check c	ably Likely estricted Du ne) Cita non/ Number	D. High (Highly Likely Permaner D. Number of	1110 Cutty Disabling [If Persons Affe E. Reckless Di Safeguard [F. Date	Poccurred
Section III-Insport 10. Gravity: A. Injury or Sonably C. Significa 11. Negligence 12. Type of Ar. 14. Initial Action 15. Area or Ed. 16. Termination 17. Action to Transaction 18. Terminated 18. Terminated Section IV-Auto 19. Type of Institute Section IV-Auto Section	Safet Other Communication of the Communication Acts of the Communicati	A Date on The the Mot	No Likelihood [No Lost Wor Yes A None C. Safeguard Mo Da Yr extinguis extinguis Da Yr B. Tin	B. Low D. Written Notice B. Time (24 Hr. Cosher were her	Reason t Workdays Or R C. Moderate suance (check c Druger Check c Check c Check c Check c Check c Check c	ably Likely estricted Du Cita on/ Number d and	D. High (Highly Likely Permaner D. Number of Order	1110 Cutty Disabling [If Persons Affe E. Reckless Di Safeguard [F. Date	Poccurred

strict C	oal Dist 4] 1	Field Office	Summers	ville, WV	Mine ID		Date	
	tion/Order					epartment of Safety and Hea	Labor alth Administrat	tion	<u> </u>
Section I-Viol	_Mo Da	Yr	2. Time (24 Hr.	Clock)			3. Citation/		
							Order Nun	nber	
4 Served To					5 Oper	atornote			
6 Migo					7. Mine	(D			
8. Condition					<u> </u>				(Contractor Notice (103g)
places	, in th	nat	the emerg	s not bei gency acce in the tr	ss off th			to all w	vorking
							See Contin	uation Form (MSH	A Form 7000-3a)
9. Violation	A. Health Safety Other Dector's Evaluat	Z	B. Section of Act		C. Part/Section Title 30 CF		77.20	5(a)	
10. Gravity:	<u>~</u>	······		·····			······································		
	or Iliness (has		No Likelihood	_ Unlikely [Reasons	ibly Likely	Highly Likely	Occu	med [
	or illness coul y be expected		No Lost Wor	kdays 🗌 Los	st Workdays Or Re	estricted Duty	Permanently	Disabling [Fatal [
C. Signific	cant and Subs	stantial	: Yes 🗌	No 🗹			D. Number of F	Persons Affected	^{t:} 001
11. Negligen	ce (check one	9)	A. None	B. Low	C. Moderate	D. High	E. I	Reckless Disreg	ard 🗌
12. Type of A	Action 10	4(a)		13. Type of I	Issuance (check or	re) Citation 🗸	Order 🗌	Safeguard 🗌	Written Notice
14. Initial Act A. Citation		or 🗀	C. Safeguard [D. Written Notice	E. Citatio Order	n/ Number		F. Dated	Mo Da Yr
15. Area or E	iquipment:								
	Bus T		Mo Da Yr	B. Time (24 Hr.	Clock)				
16. Terminati	A A	. Date							
Section III-Tem	mination Action						1		
Section III-Tem	mination Action		water lin	ne was cle	eared from	n the wal	k way.		
Section III—Terr 17. Action to 18. Terminate	mination Action Terminate	The	Da Yr	ne was cle	eared from	n the wal	k way.		
Section III—Tem 17. Action to 18. Terminate Section IV—Auto	mination Action Terminate ad A. Date comated System respection	The	Da Yr	ne (24 Hr. Cłock)		n the wal	k way.		
17. Action to 18. Terminate Section IV—Auto 19. Type of In	mination Action Terminate ed A. Date consted System respection code)	The Moi	Da Yr B. Tirri	ne (24 Hr. Cłock)			k way.	umber	

Mine Citation/Order				partment of ety and Hea	Labor Ith Administra	tion	•
Section I-Violation Data	74						
1. Date Mo Da Yr	2. Time (24 Hr.	Clock)	•		3. Citation/ Order Nur	nber	
4 Septed To			5. Operato	r			
E Mana			7. Mine ID				
			/ . Mille ID				(Contrac
8. Condition or Practice The ground wire p							n Notice (103g)
					See Conti	nuation Form (MSI	IA Form 7000-3a)
Safety ✓ Other	B. Section of Act		C. Part/Section of Title 30 CFR	of	77.7	01	
Section II-Inspector's Evaluation 10. Gravity:							
	No Likelihood 🗌	Unlikely 🗹	Reasonably	Likely 🗌	Highly Likely	Occu	rred 🗌
B. Injury or illness could rea- sonably be expected to be:	No Lost Work	days 🗌 Lost \	Norkdays Or Restr	icted Duty 🗹	Permanently	Disabling [Fatal 🔲
O OL STANDARD OF BARANTA		No 🗸			D. Number of I	Persons Affected	d: 001
C. Significant and Substantial:	Yes 🔲						
· · · · · · · · · · · · · · · · · · ·	Yes [_]	B. Low	C. Moderate 🗹	D. High	E.1	Reckless Disreg	ard 🗌
11. Negligence (check one)			C. Moderate 🗹	D. High Citation ₩	Order	Reckless Disreg	written Notice
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action	A. None	13. Type of issu	uance (check one)	Citation 🕢			Written Notic
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action A. Citation B. Order (uance (check one)	Citation 🕢		Safeguard [Written Notic
11. Negligence (check one) 4. Type of Action 104(a) 14. Initial Action A. Citation B. Order C. 15. Area or Equipment	A. None	13. Type of issu	uance (check one) E. Citation/ Order Nu	Citation 🕢		Safeguard [Written Notic
11. Negligence (check one) 12. Type of Action 1()4(a) 14. Initial Action A. Citation B. Order 5. Area or Equipment 16. Termination Due A. Date	A. None C. Safeguard	13. Type of Issu D. Written Notice [uance (check one) E. Citation/ Order Nu	Citation 🕢		Safeguard [Written Notic
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action A. Citation B. Order C. 15. Area or Equipment 16. Termination Due A. Datument	A. None C. Safeguard	13. Type of Issu D. Written Notice [uance (check one) E. Citation/ Order Nu	Citation 🕢		Safeguard [Written Notic
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action A. Citation B. Order C. 15. Area or Equipment 16. Termination Due A. Date 36. Date 37. Action to Terminate	A. None C. Safeguard Mo Da Yr	13. Type of Issu D. Written Notice [uance (check one) E. Citation/ Order Nu	Citation 🕢		Safeguard [Written Notic
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action A. Citation B. Order C. 15. Area or Equipment 16. Termination Due A. Datument 16. Termination Action T. Action to Terminate Mo Datument Mo Datument A. Date	A. None C. Safeguard Mo Da Yr	D. Written Notice [B. Time (24 Hr. Ck	uance (check one) E. Citation/ Order Nu	Citation 🕢		Safeguard [Written Notic
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action B. Order C. 15. Area or Equipment 16. Termination Due A. Date Section III—Termination Action 17. Action to Terminate 18. Terminated A. Date Section IV—Automated System Data 19. Type of Inspection	A. None C. Safeguard Mo Da Yr	D. Written Notice [B. Time (24 Hr. Clc	uance (check one) E. Citation/ Order Nu	Citation 🕢		Safeguard [
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action A. Citation B. Order C. 15. Area or Equipment 16. Termination Due A. Datum 17. Action to Terminate 18. Terminated A. Date Mo Date Section IV—Automated System Data	A. None C. Safeguard Mo Da Yr B. Time	D. Written Notice [B. Time (24 Hr. Clc	uance (check one) E. Citation/ Order Nu	Citation 🗹		Safeguard F. Dated	Written Notice

Mine Citati	ion/Order			U.S. Departme			
Section I-Viola	tion Data			Mine Safety an	d Health Administration	on	
1. Date	Mo Da Yr	2. Time (24 Hr. C	Clock)		3. Citation/		
4 Connd To	<u></u>			5. Operator	Order Numb	er————	
t flee				7. Mine ID			(Contractor)
8. Condition of	or Practice					8a. Written N	
		: in place v side of t		of the opened	machinery do	or on the	second
					San Continu	ation Form (MSHA f	Farm 7000 2m) [7]
. Violation	A. Health	B. Section		C. Part/Section of			-Dill 7000-38)
	Safety ✓ Other	of Act		Title 30 CFR	77.205	(e)	
	ctor's Evaluation						
Gravity: A. tolury or	r liiness (has) (is):	No Likelihood	Unlikely 🗸	Reasonably Likely	Highty Likely	Occurre	d 🗀
B. Injury or	illness could rea-	31.4.4.43.1.					
	be expected to be ant and Substantia		No ☑	Vorkdays Or Restricted D	D. Number of Pe		Fatal []
1 Negligeno	e (check one)	A. None		C. Moderate	D. High 🔲 E. Ro	eckless Disregard	<u> </u>
1. Hogispono							Written Notice
	ction 104(a)		1	E. Citation/		F. Dated	Mo Da Yr
2. Type of Ac	on	C. Safeguard	D. Written Notice	☐ Order Number			
2. Type of Action 4. Initial Action	on B. Order	C. Safeguard [D. Written Notice	Order Number			
2. Type of Action 4. Initial Action	on B. Order	C. Safeguard	D. Written Notice	Order Number		•	
2. Type of Ad 4. Initial Action A. Citation 5. Area or Eq	on B. Order puipment	C. Safeguard Mo Da Yr	D. Written Notice				
2. Type of Act 4. Initial Action A. Citation 5. Area or Eq. 8. Termination sction III—Term	B. Order Dupment A. Date ination Action	Mo Da Yr	B. Time (24 Hr. Clov	ck)			
2. Type of Act 4. Initial Action A. Citation 5. Area or Eq. 8. Termination sction III—Term	B. Order Dupment A. Date ination Action		B. Time (24 Hr. Clov	ck)			
Type of Ad Initial Action A. Citation Area or Eq. Termination Section III—Term Action to T	B. Order Dupment A. Date A. Date The	Mo Da Yr toeboard	B. Time (24 Hr. Clov	ck)			
2. Type of Ad 4. Initial Action 4. Initial Action 5. Area or Eq 6. Termination 6. Termination 7. Action to T 8. Terminated 8. Terminated 8. Terminated 8. Terminated 8. Terminated	B. Order Dupment A. Date A. Date A. Date A. Date Manual A. Date	Mo Da Yr toeboard	B. Time (24 Hr. Clowwas put in	place.			
2. Type of Ad 4. Initial Action 6. Area or Eq 6. Terminatio ection III—Term 7. Action to T	B. Order Dulpment In Due A. Date Institution Action The A. Date Mo Material A. Date Mo Mo Mo Mo Mo Mo Mo Mo Mo M	Mo Da Yr toeboard	B. Time (24 Hr. Clowwas put in	ck)	or Mill		
2. Type of Ad 4. Initial Action A. Citation 5. Area or Eq 6. Termination ection III—Term 7. Action to T 8. Terminated ection IV—Auton 9. Type of Ins	B. Order Dulpment In Due A. Date Institution Action The A. Date Mo Material A. Date Mo Mo Mo Mo Mo Mo Mo Mo Mo M	Mo Da Yr toeboard	B. Time (24 Hr. Clowwas put in	place.	or Mill 23. AR Nur	nber	

trict Co	al Dist 4	Field Office	Summersville	, WV Min	ne ID		Date	
Mine Citati					ertment of L ty and Healt	_abor th Administr	ation	
Section I-Viola 1. Date	Mo Da Yr	2. Time (24 Hr. (Clock)			3. Citation/ Order No		
4. Served To				5 Operator				
6 Nine				7. Mine ID				(Contrac
8. Condition of			s not being					n Notice (103g)
			s leading to s lying on		3.		was	s obscur
9: Violation	A. Health Safety V	B. Section of Act		C. Part/Section of Title 30 CFR			itinustion Form (MS)	iA Form 7000-3a)
Section II—Inspe	ctor's Evaluation							
A. Injury or	r Iliness (has) (is):	No Likelihood	Untikely [Reasonably I	Likely 🔽	Highly Likely		med [
	riliness could rea- be expected to be:	No Last Work	days Lost W	orkdays Or Restric	ted Duty 🗹	Permanen	tly Disabling 🗌	Fatal 🗌
C. Significa	ant and Substantia	: Yes 🗹	No 🗌			D. Number of	f Persons Affected	^{d:} 001
11. Negligeno	e (check one)	A. None	B. Low 🗍 C	C. Moderate 🗹	D. High	□ E	. Reckless Disreg	jard 🗌
12. Type of A	ction 104(a)		13. Type of Issue	ance (check one)	Citation 🗹	Order 🗌	Safeguard	Written Notic
14. Initial Action A. Citation		C. Safeguard	D. Written Notice	E. Citation/	iber		F. Dated	Mo Da 1
15. Area or Ed		Mo Da Yr	B. Time (24 Hr. Cloc	*)				
Section III-Term								
17. Action to T	erminate							
18. Terminated	A. Date Mol	Da Yr B. Time	e (24 Hr. Clock)				······································	
Section IV-Auto	mated System Data							
19. Type of Ins (activity co		20. Event Numbe	ir .	21. Prir	mary or Mill			
22. Sign						23. AR	Number	
MSHA Fo		and Adriculture Requi	provisions of the Sm atory Ombudsman and 10	all Business Regulato 0 Regional Fairness B				

Mine Citation/Order	Mine Safety and Health Administration
Section IViolation Data 1. Date Mo Do V/ 12 Time (24 Hr. Clock)	3. Citation/
A Served To	Order Number
	Lo. Underator
6. Mina	7. Mine ID (Contra
8. Condition or Practice	8a. Written Notice (103g)
in the plant at the bottom of the	·
9. V/lolation A. Health ☐ B. Section of Act	See Continuation Form (MSHA Form 7000-3a) C. Part/Section of Title 30 CFR 77.1103(a)
Other Section II—Inspector's Evaluation	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
A. Injury or Iliness (has) (is): No Likelihood Unlikely U	Reasonably Likely Highly Likely Occurred t Workdays Or Restricted Duty Permanently Disabling Fatal D. Number of Persons Affected: 001
11. Negligence (check one) A. None B. Low	C. Moderate 🗹 D. High 🗌 E. Reckless Disregard 🗌
12. Type of Action 104(a) 13. Type of is	ssuance (check one) Citation 🗹 Order 🗌 Safeguard 🗌 Written Notic
14. Initial Action A. Citation B. Order C. Safeguard D. Written Notice	E. Citation/ Order Number
18 Termination Due Mo Da Yr	
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. C	
16. Termination Due A. Date Mo Da Yr B. Time (24 Hr. Container was remo	oved from the plant and the flammable iner.
Section III—Termination Action	
A. Date Mo Da Yr B. Time (24 Hr. Container was remoliquid was placed in a proper container was remolated A. Date Mo Da Yr B. Time (24 Hr. Cock) B. Time (24 Hr. Cock)	iner.
18. Termination Due A. Date Mo Da Yr B. Time (24 Hr. C. Section III-Termination Action 17. Action to Terminate The container was remoliquid was placed in a proper container. Mo Da Yr	

	oal Dist 4	Field Offic			V Mine II			Date	
Mine Citati	ion/Order				U.S. Departm Mine Safety as			ion	
Section I-Viola		lo =	. W. A IV		·····		lo on and		
1. Date	Mo Da Yr	2. Time (24	Hr. Clock)				3. Citation/ Order Num	ber	
4. Served To					5. Operator				
6 Mina					7. Mine ID				
					V. Williams				(Contra
8. Condition of			the Refu		. ,				n Notice (103g
Refuse This is	Belt up t s approxim	to 2 fee nately 7	to accumu t thick o tons of gineering	ver an materia	area of 8	feet of the	wide by	8 feet	long.
9. Violetion	A. Health	B. Section		C. Pi	art/Section of		See Contin	uation Form (MS)	IA Form 7000-3e
	Safety 🗸	of Act		Ti	tle 30 CFR		11.20	00	
	Safety V Other ector's Evaluation	of Act		Til	tle 30 CFR		11.20		
10. Gravity:	Other	<u> </u>	nd [] Unlike		Reasonably Likely	y []	Highly Likely [rred 🗌
10. Gravity: A. Injury or B. Injury or	Other octor's Evaluation or Iliness (has) (is): or iliness could rea-	No Likelihoo		ely 🗹	Reasonably Likely		Highly Likely [Occu	
10. Gravity: A. Injury or B. Injury or sonably	Other	No Likelihoo	Workdays	ely 🗹		Duty 🗹	Highly Likely [Fatal 🗍
10. Gravity: A. Injury or B. Injury or sonably C. Significa	Other ector's Evaluation or Illness (has) (is): or Illness could rea- or be expected to be	No Likelihoo No Lost Yes	Workdays	ely 🔽 Lost Workda	Reasonably Likely ays Or Restricted I	Duty 🗹	Permanently D. Number of P	Occu	Fatal Di: 001
10. Gravity: A. Injury of B. Injury of sonably C. Signification.	Other Other or liness (has) (is): or liness could rea- r be expected to be cant and Substantia ce (check one)	No Likelihoo	Workdays No B. Low	ly 🛂 Lost Workda C. Mod	Reasonably Likely ays Or Restricted [Duty 🗹	Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affected Reckless Disreg	Fatal : 001
10. Gravity: A. Injury of B. Injury of sonably C. Significa 11. Negligenc 12. Type of Ad	Other Other of Colors Evaluation or liness (has) (is): or liness could rea- or be expected to be ant and Substantia ce (check one) color 104(a)	No Likelihoo No Lost Yes	Workdays No 📝 B. Low 🗍 13. Type	Lost Workds C. Mod	Reasonably Likely ays Or Restricted [Duty 🗹	Highly Likely [Permanently D. Number of P	Occu Disabling	Fatal i: 001 and Written Noti
10. Gravity: A. Injury of B. Injury of sonably C. Significa 11. Negligeno 12. Type of Ac 14. Initial Acti A. Citation 15. Area or Ec	Other	No Likelihoo No Lost No Lost A. None C. Safeguard	Workdays No @ B. Low 13. Type	C. Mode of Issuance (Reasonably Likely ays Or Restricted I derate (check one) Ci E. Citation/	Duty 🗹	Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affecter Reckless Disreg Safeguard	Fatal i: 001 and Written Noti
10. Gravity: A. Injury of B. Injury of sonably C. Significa 11. Negligeno 12. Type of Ac 14. Initial Acti A. Citation 15. Area or Ec	Other	No Likelihoo No Lost No Lost A. None C. Safeguard	Workdays No 🗹 B. Low 13. Type	C. Mode of Issuance (Reasonably Likely ays Or Restricted I derate (check one) Ci E. Citation/	Duty 🗹	Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affecter Reckless Disreg Safeguard	Fatal i: 001 and Written Noti
10. Gravity: A. Injury of B. Injury of Sonably C. Significa 11. Negligenc 12. Type of Ad 14. Initial Action 15. Area or Ed 16. Termination Section III—Termination	other	No Likelihoo No Lost No Lost A. None C. Safeguard	Workdays No @ B. Low 13. Type	C. Mode of Issuance (Reasonably Likely ays Or Restricted I derate (check one) Ci E. Citation/	Duty 🗹	Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affecter Reckless Disreg Safeguard	Fatal i: 001 and Written Noti
10. Gravity: A. Injury of B. Injury of Sonably C. Significa 11. Negligenc 12. Type of Ad 14. Initial Action 15. Area or Ed 16. Termination Section III—Termination	other	No Likelihoo No Lost No Lost A. None C. Safeguard	Workdays No @ B. Low 13. Type	C. Mode of Issuance (Reasonably Likely ays Or Restricted I derate (check one) Ci E. Citation/	Duty 🗹	Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affecter Reckless Disreg Safeguard	Fatal i: 001 and Written Noti
10. Gravity: A. Injury or B. Injury or sonably C. Significa 11. Negligenc 12. Type of Ad 14. Initial Action 15. Area or Ed 16. Terminatio Section III—Term 17. Action to 1	Other	No Likelihoo No Lost ' A. None C. Safeguard Mo Da Yr	Workdays No @ B. Low 13. Type	C. Mode of Issuance (of Issuance)	Reasonably Likely ays Or Restricted I derate (check one) Ci E. Citation/	Duty 🗹	Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affecter Reckless Disreg Safeguard	Fatal i: 001 and Written Noti
10. Gravity: A. Injury of B. Injury of Sonably C. Signification: 11. Negligence 12. Type of Act 14. Initial Action 15. Area or Ect 16. Termination 17. Action to 1 18. Terminate 18. Terminate 18. Terminate	Other	No Likelihoo No Lost y al: Yes A. None C. Safeguard Mo Da Yr	Workdays No B. Low 13. Type D. Written N B. Time (24	C. Mode of Issuance (of Issuance)	Reasonably Likely ays Or Restricted I derate (check one) Ci E. Citation/ Order Number	Duty Duty D. High [Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affecter Reckless Disreg Safeguard	Fatal i: 001 and Written Noti
10. Gravity: A. Injury of B. Injury of Sonably C. Signification: 11. Negligence 12. Type of Act 14. Initial Action 15. Area or Ect 16. Termination 17. Action to 1 18. Terminate 18. Terminate 18. Terminate	Other	No Likelihoo No Lost 'Yes A. None C. Safeguard C. Safeguard Da Yr B.	Workdays No B. Low 13. Type D. Written N B. Time (24	C. Mode of Issuance (of Issuance)	Reasonably Likely ays Or Restricted I derate (check one) Ci E. Citation/	Duty Duty D. High [Highly Likely [Permanently D. Number of P	Occu Disabling Persons Affecter Reckless Disreg Safeguard	Fatal i: 001 and Written Noti
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Mine Citation/Order			U.S. Departn	nent of Lah	oor	//-
					Administration	
Section IViolation Data 1. DateMo_Da_Yr	2. Time (24	Hr. Clock)			3. Citation/	
A Second To					Order Number	
4. Served To			5 Operator			
K SAUDO			7. Mine ID			
8. Condition or Practice		·,			8a. Writter	(Contractor)
existed for se	veral shi	fts. This cond:	ition has 1	been ci	nd obvious and ted 10 times ir datory standard	n 2009 and
9. Violation A. Health Safety V	B. Section of Act	c	. Part/Section of Title 30 CFR		See Confinuation Form (MSH 77.1104	A Form 7000-3a)
ection II-Inspector's Evaluation						
 Gravity: A. Injury or Illness (has) (is): No Likelihood	1 Unlikely	Reasonably Like	ty 🗹 H	ighly Likely 🗌 Occu	med [
B. Injury or illness could re sonably be expected to		Vorkdays Lost Work	kdays Or Restricted	Duty 🗹	Permanently Disabling	Fatal
C. Significant and Substa		/ No □		D	Number of Persons Affected	l: 004
C. C.B						
	A. None	B. Low 🗀 C. (Moderate	D. High 🕢	E. Reckless Disreg	ard 🗌
1. Negligence (check one)	A. None	B. Low C. I			E. Reckless Disreg Order Safeguard □	Written Notice
Negligence (check one) Type of Action 104(a)	A. None 1)(1)	13. Type of Issuance		itation		
1. Negligence (check one) 2. Type of Action 104(d 4. Initial Action A. Citation B. Order 5. Area or Equipment T	A. None : i(1) C. Safeguard he platfo:	13. Type of Issuance D. Written Notice	E. Citation/ Order Number	Screen:	Order 🗹 Safeguard 🗌	Written Notice Mo Da Yr
1. Negligence (check one) 2. Type of Action 104(a 4. Initial Action A. Citation 2 B. Order 5. Area or Equipment 2 areas beneath	A. None id(1) C. Safeguard the platfor the platfor	13. Type of Issuand D. Written Notice cms outside the	E. Citation/ Order Number	Screen:	Order Safeguard F. Dated	Written Notice Mo Da Yr
11. Negligence (check one) 12. Type of Action 104(a) 14. Initial Action A. Citation ☑ B. Order 15. Area or Equipment 15. Area beneath 16. Termination Due A. Citation Iš—Termination Action	A. None id(1) C. Safeguard the platfor the platfor	13. Type of Issuand D. Written Notice cms outside the orms where mate	E. Citation/ Order Number	Screen:	Order Safeguard F. Dated	Written Notice Mo Da Yr
1. Negligence (check one) 2. Type of Action 104(a 4. Initial Action A. Citation ☑ B. Order 5. Area or Equipment a reas beneath 6. Termination Due A. C	A. None id(1) C. Safeguard the platfor the platfor	13. Type of Issuand D. Written Notice cms outside the orms where mate	E. Citation/ Order Number	Screen:	Order Safeguard F. Dated	Written Notice Mo Da Yr
1. Negligence (check one) 2. Type of Action 104(a 4. Initial Action A. Citation B. B. Order 5. Area or Equipment a reas beneath 6. Termination Due A. Citation IB—Termination Action 7. Action to Terminate	A. None A. None A. None A. None A. None Mo Da Yr Mo Da Yr	13. Type of Issuand D. Written Notice cms outside the orms where mate	E. Citation/ Order Number	Screen:	Order Safeguard F. Dated	Written Notice Mo Da Yr
1. Negligence (check one) 2. Type of Action 104(a 4. Initial Action A. Citation ☑ B. Order 5. Area or Equipment T. Areas beneath 6. Termination Due A. C 6. Termination Action 7. Action to Terminate 8. Terminated A. Dete	A. None A. None A. None A. None A. None B. Mo Da Yr Mo Da Yr Mo Da Yr B. Mata	13. Type of Issuand D. Written Notice Time (24 Hr. Clock)	E. Citation/ Order Number Raw Coal erial may i	Screen.	Order Safeguard F. Dated	Written Notice Mo Da Yr
1. Negligence (check one) 2. Type of Action 104(a 4. Initial Action B. Order 5. Area or Equipment T areas beneath 6. Termination Due A. D action III—Termination Action 7. Action to Terminate 8. Terminated A. Date action IV—Automated System Di 9. Type of Inspection	A. None A.	13. Type of Issuand D. Written Notice Time (24 Hr. Clock)	E. Citation/ Order Number	Screen.	Order Safeguard F. Dated	Written Notice Mo Da Yr

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District	Coal Dist 4	Field Office	Summersville, WV	Mine ID		Date	
					L		

Issuances with Questionable S&S Evaluation

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.202	Non S&S
	consisting of loose coal and on coal load out facility, beging the 1st floor.		n depth was allowed to floor and extending

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.1104	Non S&S

Accumulations of combustible materials consisting of hydraulic oil and coal float dust, up to 1/8 inch in depth, was allowed to accumulate on the hydraulic tank and final drive on the D10R Caterpillar dozer (Co number 617) in service at the raw coal storage area.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.1607(cc)	Non S&S

The pull cord provide for the length of the unguarded No. 360 Raw coal reclaim conveyor belt, was not being maintained along the elevated walkway. The cord was loose and lying on the elevated travel way for a distance of 25 feet near the entrance to the screening building.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.204	Non S&S

An opening measuring 66 inches in height and 32 inches in width is located on the backside of the first floor of the refuse bin building with no protective railing provided.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.502	Non S&S

The emergency stop devices along with the corresponding jog stations provided for the Number 322,316,149, and 360 conveyor beltlines were not being properly maintained. When tested with the emergency stop device pulled, the belt could be energized from the jog switch. The emergency stop will de-energize the belt when running.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.1104	Non S&S

Combustible material, consisting of coal, coal fines, and grease, up to 12 inches in depth, was allowed to accumulate around the operating pick breaker shaft and bearing of the Number 325 coal feeder in service in the building.

District	Coal Dist 4	Field Office	Summersville, WV	Mine ID		Date		
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Issuances with Questionable S&S Evaluation

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.205(b)	Non S&S

The travelway and platform around the columns, located on the 3rd floor of the were not being kept clear or extraneous materials to prevent stumbling and tripping hazards. The travelways were covered with Magnetite, float dust, and promoter oil.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.1607(cc)	Non S&S

The pull cord, provided for the unguarded, elevated, refuse belt, in service at the would not stop the belt when activated near the platform at the top of the refuse bin.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation	
	104(a) Citation	77.400(d)	Non S&S	

The guard provided for the tail roller, on the clean coal tunnel belt, to prevent a person from becoming caught between the conveyor belt tail roller and the conveyor belt, was not being kept securely in place while the belt was in operation. The clamps securing the guard at the bottom were broken and the guard could be raised up, exposing the operating tail roller and belt.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation	
	104(a) Citation	77.1104	Non S&S	

Combustible materials, consisting of dry dust and float dust, up to 4 inches in depth, was allowed to accumulate on the eclectic circuits and in the bottom of the circuit cabinet, located near the control room of the

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation	
	104(a) Citation	77.205(a)	Non S&S	

A safe means of access was not being maintained from the escape tube of the mag tunnel to the surface. The metal lid and hinges, covering the top of the tube at ground level, had deteriorated (Rusted) from the tube and when the door was opened it would fall back into the tube.

					-	
District	Coal Dist 4	Field Office	Summersville, WV	Mine ID	Date	

Issuances with Questionable S&S Evaluation

Violation No.	Violation No. Type of Issuance		Inspector's S&S Evaluation	
	104(a) Citation	77.205(b)	Non S&S	

The elevated walkway, along the number 318 and 324 conveyor belts, in service at the raw coal stockpile, was not being kept clean of all extraneous material. The walkway contained a 4-inch waterline running the length of the belt and a piece of top belt structure. The platform of the belt was littered with old lighting fixtures, a shovel, several pieces of scrap metal and an old belt scraper.

Violation No. Type of Issuance		30 CFR	Inspector's S&S Evaluation	
	104(a) Citation	77.205(a)	Non S&S	

A safe means of access was not provided beneath the Number 306 elevated conveyor belt near the the state of the guard installed beneath the belt did not extend a distance sufficient to protect persons traveling in the roadway beneath the belt. The roadway is used by vehicles and people on foot to access the tunnel and raw coal belt areas.

Violation No.	Violation No. Type of Issuance		Inspector's S&S Evaluation	
	104(a) Citation	77.205(b)	Non S&S	

Slippery Material, consisting of loose coal fines and water, up to 6 inches in depth, was allowed to accumulate in the work and travel areas around the Primary Clean Coal Spirals.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation	
	104(a) Citation	77.205(b)	Non S&S	

Slippery Material, consisting of loose raw coal fines, up to 8 inches in depth, was allowed to accumulate on the catwalk beside the raw coal screen.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation	
	104(a) Citation	<i>7</i> 7.1104	Non S&S	

Combustible material up to 8 inches in depth, in the form of clean coal, was allowed to build up around the electric drive motor on the sampler crusher.

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation	
	104(a) Citation	77.205(a)	Non S&S	

A safe means of access was not being maintained on the off side of the Clean Coal #2 Belt. Material had fallen from the adjacent wall and accumulated between the wall and belt line in depth up to and over the belt rails.

	r 		<i>p</i>				
District	Coal Dist 4	Field Office	Summersville, WV	Mine ID	1 1	Date	
District		Tield Office	Summer vine, iii	171111111111111111111111111111111111111	L	Dute	L

Issuances with Questionable S&S Evaluation

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.205(a)	Non S&S
A safe means of access around the sides of the elevated pla			in that the walk way over the toeboard on all

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.1104	Non S&S
Accumulations of comalong the wall behind to area of 15'by 3'. Also the		material was 1"to 7"ii	llowed to accumulate n depth and covered an floor over an area of 9'by

Violation No.	Type of Issuance	30 CFR	Inspector's S&S Evaluation
	104(a) Citation	77.400(a)	Non S&S

The head roller of the 324 belt (in operation) was not being guarded from contact by persons, in that the guard on the belt scraper adjustment was left off, exposing a hole 10"by 12"in the head chute, just 2"from the rotating head roller.

District Coal Dist 4 Field Office Summersville, WV Mine ID Date Date

Example of lack of increase in the level of enforcement

Event No.	Violation	Date Issued		Action	Issuar	ice 30 CFR	S&S
				104(a)	Citatio	n 77.1104	N
				104(a)	Citatio	n 77.1104	N
				104(a)	Citatio	n 77.1104	N
				104(a)	Citatio	n 77.1104	N
				104(a)	Citatio	n 77.1104	N
			1	104(a)	Citatio	n 77.1104	N
			←22-day period→	104(a)	Citatio	n 77.1104	N
			lay	104(a)	Citatio	n 77.1104	N
			pe	104(a)	Citatio	n 77.1104	N
			rio	104(a)	Citatio	n 77.1104	N
			d ↓	104(a)	Citatio	n 77.1104	N
			,	104(a)	Citatio		Y
				104(a)	Citatio		N
				104(a)	Citatio		N
				104(a)	Citatio	n 77.1104	Y
				104(a)	Citatio		Y
				104(a)	Citatio		Y
			1	104(a)	Citatio	n 77.1104	Y
			-27.	104(a)	Citatio		N
			-da	104(a)	Citatio	n 77.1104	N
			Уþ	104(a)	Citatio	n 77.1104	N
			eri	104(a)	Citatio	n 77.1104	N
			.27-day period→	104(a)	Citatio	on 77.1104	Y
			↓	104(a)	Citatio	on 77.1104	N
				104(d)(1)	Citatio	on 77.1104	Y