

Date of Examination 6/19/14 Time From: \_\_\_\_\_ AM/PM To: \_\_\_\_\_ AM/PM

Section/Area 003 Reported Outside? Yes \_\_\_ No \_\_\_ Time: \_\_\_\_\_ AM/PM

Reported By: \_\_\_\_\_ Received By: \_\_\_\_\_ INITIAL (AUTHORIZED PERSON)

**Preshift required within 3 hours prior to any 8-hour interval.**

Location	Hazardous Condition	CH <sub>4</sub>	Action Taken
Entry #3, XC #2	Pump labeled wrong		Dangered
Entry #3,	Life line backwards		Re-hang
Entry #3 face	Excessive Methane	1.45%	Ventilate
Entry #2, XC 1 to 2	Belt fabric slip hazard		dangered
Entry #2, XC#3	Hot bottom belt roller		Turn off belt and Danger
Entry #2, XC 4	Timbers missing toe of cave		Dangered
Entry #2	Curtain missing		Install check curtain
Entry #2 face		0.7%	None observed
Entry #1, XC 3	Equipment doors not airlock		dangered
Entry #1, XC 3 to 4	Roof bolter energized high methane in cave		De-energized bolter and endangered
Entry #1 face	High methane	2.5%	Installed check curtain
Power Center		0.0%	
Entry #1	Gas reading may be part of other entry above	0.9%	
Entry #2	Gas reading may be part of other entry above	0.0%	
Entry #3	Gas reading may be part of other entry above	0.0%	

**Air Measurements**

Location	CFM	Location	CFM
LOX	29,260		

**Velocities**

Longwall Headgate: \_\_\_\_\_ Longwall Tailgate: \_\_\_\_\_

CH<sub>4</sub>: \_\_\_\_\_ O<sub>2</sub>: \_\_\_\_\_

Remarks:

\_\_\_\_\_  
Signed by Preshift Certified Examiner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Certification Number

\_\_\_\_\_  
Countersigned by Mine Foreman

\_\_\_\_\_  
Date

\_\_\_\_\_  
Certification Number

\_\_\_\_\_  
Countersigned by Operator/Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Certification Number