Quarterly Mine Employment and Coal Production Report

(SEE INSTRUCTIONS ON REVERSE SIDE OF COPY 2)

1. Persons Working, Employee-Hours, and Coal Production

DOL - MSHA - PEIR - OIEI P.O. Box 25367 Denver, Colorado 80225 - 0367

or	Quarter	Year	_	Mo.	Day	Yr.
UI	Quarter	1001		Mail Before		
Check	here if this rep	ort is being su	ıbmitted by	a contra	actor	
If any	information be	low is incorrec	t, please e	nter corr	ect info	mation h
County						
Opera	tion Name:					
Opera	ting Company	Name and Mai	iling Addre	ess:		
Count	v					
Oount	y					
МСПУ	ID Number		Con	tractor II	`	
WISTIA	ID Number		Con	liacioi il	,	
		Operation	Name			
		•				
	Operating (Company Nam	e and Mail	ling Add	ress	

Copy 1 - Return to MSHA (Denver)

Date Report Completed

(1) Operation Sub Unit Code(s) previously reported:		Code	(2)Average number of persons working during quarter	(3) Total employee hours worked during the quarter	(4) Production of clean coa during quarter, (short tons)	
Undergroun Mine	d Underground	01				
-	Surface Shops, Yards, etc.	02				
Surface Mine	Strip, Open Pit, or Quarry	03				
(including associated shops and yards)	Auger (Coal Mine Only)	04				
	Culm Bank or Refuse Pile (Coal Mine Only)	05				
	Dredge	06				
	Other Surface Mining (Metal/Nonmetal Only)	12				
Independent Shops or Yards		17				
Mill Operations, Preparation Plants, or Breakers (include associated shops and yards)		30				
Office (professional and clerical employees at the mine or plant working in an office)		99				
2. Other Rep	ortable Data					
How many M	SHA reportable injur	ies or	illnesses did you have	this quarter?		
Person to be contacted Name regarding this report:		Tel. No. () -				
	Title			area code		
MSHA Form 7000-	2, July 97, (revised)			OMB Number 1219-0006:	Approval Expires September 30, 20	

This report is required by law (30 U.S.C. subsection 813; 30 C.F.R. Part 50). Failure to report may result in the issuance of a citation or order under 30 U.S.C. subsection 814 to an operator of a coal or other mine, the assessment of a civil penalty against an operator of a coal or other mine under 30 U.S.C. subsection 820(a), and the institution of a civil action under 30 U.S.C. subsection 818. An individual who knowingly makes a false statement in any report shall, upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment for not more than 5 years, or both, under 30 U.S.C. subsection 820(f). Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies,

conceals or covers up by any trick scheme, or device, a material fact, or makes or uses any false writing or document knowing

the same to contain any false, fictitous or fraudulent statement or entry, shall be fined under 18 U. S. C. or imprisioned not more than five years, or both, under 18 U. S. C. subsection 1001.

Important:

(INSTRUCTIONS)

OBM Control Number 1219-0006; Approval Expires September 30, 2002

This form must be completed and mailed or faxed within 15 days after the end of each calendar quarter.

 Fill out this form as completely as possible and return Copy 1 of this report to: MSHA

PEIR - Office of Injury and Employment Information **OR** You may FAX Copy 1 to Fax # 1- 888 - 231 - 5515 P.O. BOX 25367

Denver, CO 80225-0367

- 2. If it is necessary to make any address changes, indicate correct information on this form.
- 3. When pre-addressed, this form is only for the operation with I. D. number as shown. Do not use for any other operation.
- Sand and Gravel operators report employment data under code 03 or 06 as appropriate, except for data on office workers which should be reported under code 99.
- 5. All mine operators and independent contractors reporting as required by 30 C.F.R. Part 50, should show persons working and employee hours worked; those producing coal should also show production date.
- 6. *Independent Contractors* should complete quarterly only <u>one</u> form for activities at all coal locations, and one form for activities at metal and nonmetal locations.

The public reporting burden for this collection of Information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing date sources, gathering and maintaining the date needed, and completing and reviewing the collection of Information. Send comments regarding this estimated response time or any other aspect of this collection of information, including suggestions for reducing this burden, to Mine Safety and Health Administration, U.S. Department of Labor, Room 715, 4015 Wilson Boulevard, Arlington, VA 22203.

Persons are not required to respond to this collection of information unless this form displays a currently valid OMB control number.

MSHA Form 7000-2, July 97 (revised)