U.S. Department of Energy Energy Information Administration	Coal Production and F (Mine O				OMB N	orm Appro o. 1905-0	167
Form EIA-7A (April 2011)	(Wille O Page					es: xx/xx/x en: 1.8 Ho	
		Reporting	For Calendar	Year			
			ISHA #]
	e read the instructions provi						
NOTICE: This report is mandatory un in criminal fines, civil penalties and oth see the provision on sanctions and the criminal offense for any person kn fictitious, or fraudulent statements GENERAL REPORTING INSTRUCTI coal and other coal facilities that work short tons or more during the year m	er sanctions as provided by law provision concerning the discle owingly and willingly to make as to any matter within its jun ONS: Form EIA-7A must be sub red 5,000 hours or more during	. For further information conc sure of information in the inst e to any Agency or Departr isdiction. mitted by all coal mines that the reporting year. All anthra	cerning sancti ructions. Title nent of the U produced 25,0 acite coal min	ons and 18 US Inited S 000 or r es that	d data p C 1001 r States a nore sh produce	rotection makes any fal ort tons ed 10,0	ons it a lse, s of 000
Administration (MSHA) ID. I. Identification. The shaded areas in shown in these areas by drawing a lin	this section are reserved for pre-	eprinted information. Please r	nake any corr	ections	to the ir	nformat	tion
A. Status Change: Did the ownership	o change during the year?						
□ Yes	□ No		_				_
If Yes, give date of change and, as a	oplicable, the name and addres	s of the new owner.					
			-	Month	Day	Year	_
Name of New Owner	Name of New Mining Op	eration					
Address of New Owner (Street)	(City)	(County)	(State)	(Zip Code)]	
New Owner E-mail	New Owner Phone Num	per	New Owner Fa	x Numbe	r		
Please make any corrections to the n envelope provided. B. Preparer Information	nailing label in the area provided	d at the right and return the c	completed for	n in the	busine	ss rep	νly
	Preparer S	Title: Company Name: Street Address: City, State, Zip: Phone #: Fax #:					
C. Company Contact Information. Contact person is a person who has o preparing the response.							
	Contact S	tle: ompany Name: creet Address: ity, State, Zip: none #: ax #:					

U.S. Department of Energy Energy Information Administration Form EIA-7A (April 2011) Page 2					
	Reporting For Calendar Year MSHA #				
D. Name and Location of Mining Operation					
	Mine Name: Mine Location (County): Mine Location (State):				
E. Name and Address of Operating Company					
	Company Name: Company Address: Company City, State, Zip:				
F. Operating Company Contact Information					
	Contact Name: Contact Title: Contact Street Address: Contact City, State, Zip: Contact Phone #: Contact Fax #: Contact E-mail:				
G. Type of Company Operating this Mining Operation 1. Independent Producer Operator 	Check one. (See instructions for definitions of company types). □ 2. Operating Subsidiary □ 3. Contractor				
information about your Parent Company. If you checked	to Section J. If you checked Box 2, please complete Sections H and I with Box 3, please complete Sections H and I with information about the Contractee for n. If there is more than one Parent Company or Contractee, please provide the s sheet of paper.				
H. Parent Company or Contractee					
	Company/Contractee Name: Company/Contractee Address: Company/Contractee City, State, Zip:				
I. Parent Company or Contractee Contact Information					
	Contact Name: Contact Title: Contact Street Address: Contact City, State, Zip: Contact Phone #: Contact Fax #: Contact E-mail:				

U.S. Department of Energy Energy Information Administration Form EIA-7A (April 2011)	Coal Production and Pro (Mine On Page 3		Form Approved OMB No. 1905-0167 Expires: xx/xx/xxxx Burden: 1.8 Hours		
		Reporting For Calendar Year			
		MSHA #			
J. Kind of Mining Operation Underground Mine Surface Mine					
	y Production Method For ground Mines		Type and Share by Production Method For Surface Mines		
Drift	Continuous	Contour Strip	%		
□ Shaft	% Conventional	□ Area	%		
□ Slope	Longwall	Open Pit	%		
	Shortwall	Mountaintop Mining	%		
	% Other	Auger, Highwall Mine or Punch	%		
	100%	Silt, Culm, Refuse bank, Slurry Dam or Dredge	%		
			100%		
K. Union Identification. Che	ck the box that applies for this mining c	pperation and identify the union, if applicable.			
Is this mining operatior	n unionized? 🛛 🗌 Yes	□ No			
If yes, enter union nam	e here:				
•					
L. Mining Location					
1. Longitude and Latitude. F		nat best defines the predominant area of mining			
	ed should represent either the center of change from year to year to reflect the	mining activity or a central point within the predering progress of mining.	ominantly mined area.		
Longitude Degrees	s Minutes Seconds	Latitude Degrees Minutes Seconds			
		rmining the longitude and latitude locations (Plea	se check all boxes that		
 Maps on Us (www.maptic U.S. Census Bureau Tic Global Positioning System U.S. Geological Survey Unknown 	GER Map Service				
If you selected GPS, USGS or	Other, please indicate datum below:				
 NAD27 (North American WGS84 (World Geodet NAD83 (North American Unknown Other 	ic Survey 1984)				

U.S. Department of Energy Energy Information Administration Form EIA-7A (April 2011)	Coal Production and Preparation Report (Mine Only) Page 4	Form Approved OMB No. 1905-0167 Expires: xx/xx/xxxx Burden: 1.8 Hours
	Reporting For Calendar Year MSHA #	
operation could have produced du	city. Report the maximum amount of coal that your mining ring the year with the existing mining equipment in place,	s.t.
assuming that the labor and mater that the market existed for the max	ials sufficient to utilize the equipment were available, and	
III. Coal Beds Mined. Report the c	oal bed name, average thickness, percentage of mined coal and rank for each bed	mined in the reporting

year. Please exclude partings of 1 inch or thicker from reported average coal bed thicknesses. Coal mined from the same bed should be reported on one line. An <u>exception</u> is made if the <u>same bed</u> was mined in different pits or sections <u>and</u> if the average thicknesses in those locations differ by 20% or more. If so, please report separately the average thickness, percentage and rank of the coal bed in the different mining locations. See Section G of the Instructions for Classification Codes. If more space is needed, please use space on page 6.

For EIA Use Only	(1) Name of Coal Bed	(2) Average Thickness (inches)	(3) Share of Production (%)	(4) Coal Classification Code
			100%	
	•			

IV. Recoverable Reserves

A. Recoverable Reserves. Enter the tonnage representing remaining coal reserves at this mine at the end of the reporting year that you estimate can be recovered (mined) in the future. Exclude coal left in place after mining. Report to the level of accuracy known, assuming today's prices and equipment currently owned and operable. *If your recoverable reserves quantity increased or decreased by more than 40% from last year's response, please explain the change in the remarks section.*

s.t.

B. Recovery Percentage. Enter the recovery rate used to estimate reserves at this mine. Report the mining recovery rate to the nearest whole percent. *Minable coal tonnage multiplied by the mining recovery rate should equal the level of recoverable coal reserves.*

%

Coal Production and Preparation Report (Mine Only) Page 5

Form Approved
OMB No. 1905-0167
Expires: xx/xx/xxxx
Burden: 1.8 Hours

Reporting For Calendar Year MSHA #

V. Dispositions of Coal Produced During the Reporting Calendar Year (exclude any purchased coal from other mines)

Quantity	Total Revenue or Value (dollars)
	Quantity (short tons)

U.S. Department of Energy Energy Information Administration Form EIA-7A (April 2011) Page 6 Coal Production and Preparation Report (Mine Only) Page 6								
Reporting For Calen				endar Year				
<i>и</i> 10 и 1	MSHA #							
If coal Open Mark information below		ported in A above, a	are to wholesale or retail	coal deal	ers or brokers, pleas	e provide th	e coal purchasers'	
(1) Contact Name		Pu	(2) Purchaser Contac		(3) ct E-mail Address Conta		(4) act Phone Number	
			on III A from previous pag in both tables equal 1009		ded. If this additional	space is us	ed, please ensure that	
For EIA Use Only	(1) Name	of Coal Bed	(2) Average Thickness (inches)		(3) Share of Production (%)		(4) Coal Classification	
							Code	
VII. Additional Re	emarks. Attac	n another sheet of p	baper if necessary.					
			,					
VIII Point of Con	tact Enter the	name title telenh	one number and e-mail a	ddraes of		sontativo w	ho can answer	
questions regardin	ng information	provided on this for	m.		your company repre	Sentative w		
Name:								
Title:								
E-mail Address:								