Certificate of Training

U.S. Department of Labor
Mine Safety and Health Administration

Approved OMB Number 1219-0009, Expires April 30, 2018.

This certificate is required under Public Law 91-173 as amended by Public Law 95-164. Failure to comply may result in penalties and other sanctions as provided by sections 108 and 110, Public Law 91-173 as amended by Public Law 95-164.

→ Issue Certificate Immediately Upon Completion of Training

Serial Number (for operator's use)

1. Print Full Name of Person Trained (first, middle, last)
   Billy Richards

2. Check Type of Approved Training Received:

- [ ] Annual Refresher
- [ ] Experienced Miner
- [ ] Hazard Training
- [x] New Task (specify below)
- [ ] New Miner
- [ ] Other (specify)

Date	Task	Initials	Date	Task	Initials
	Workplace	Inst KMB / Studt			Instr / Studt
	Exam				

3. Check Type of Operation and Related Industry:

A. [x] Surface [ ] Construction [ ] Underground [ ] Shaft & Slope
B. [ ] Coal [x] Metal [x] Nonmetal

4. Date Training Requirements Completed
   12/15/17
   → If completed, go to item 6, below.
   [ ] Check if not completed and go to item 5, below.

5. Check Subjects Completed (Use only for partially completed training):

- [ ] Introduction to Work Environment
- [ ] Hazard Recognition
- [ ] Emergency Medical Procedures
- [ ] H&S Aspects of Tasks Assigned
- [ ] Statutory Rights of Miners
- [ ] Self-Rescue & Respiratory Devices
- [ ] Transport & Communications Systems
- [ ] Roof/Ground Control & Ventilation
- [ ] Mine Map; Escapeways; Emergency Evacuation; Barricading
- [ ] Cleanup; Rock Dusting
- [ ] Mandatory Health & Safety Standards
- [ ] Authority & Responsibility of Supervisors & Miners Representatives
- [ ] Health
- [ ] ElectricalHazards
- [ ] First Aid
- [ ] Mine Gases
- [ ] Explosives
- [ ] Prevention of Accidents
- [ ] Other (specify)

6. **False certification is punishable under section 110 (a) and (f) of the Federal Mine Safety & Health Act (P. L. 91-173 as amended by P. L. 95-164).**

   I certify that the above training has been completed
   (signature of person responsible for training)

7. Mine Name, ID, & Location of Training (if institution, give name & address)
   General Drilling, Inc. (MSHA ID Y68)
   Training - Drury Inn, 8180 Shadeland Ave, Inianapolis, IN 46250
   Records - General Drilling 16565 River Rd Noblesville, IN 46062

8. Date
   12/15/17

   I verify that I have completed the above training
   (signature of person trained)
   X Billy E Richards

MSHA Form 5000-23, May, 2013 (revised)