

May 24, 2000

EA No. 00-046

Mr. Sander Levin
Acting Director
GPU Nuclear Incorporated
Oyster Creek Nuclear Generating Station
P.O. Box 388
Forked River, New Jersey 08731

SUBJECT: NRC INSPECTION REPORT NO. 05000219/2000-004

Dear Mr. Levin:

On April 14, 2000, the NRC completed a fire protection inspection at your Oyster Creek facility. As we stated at the exit interview, this inspection started under the previous inspection and oversight program. Accordingly, we are applying the policies that existed at that time to this report and findings. The enclosed report presents the results of the inspection.

The inspector observed during the inspection that your conduct of activities at the Oyster Creek facility was generally characterized by safety-conscious operations, sound engineering and maintenance practices. We did find deficiencies in the installation or qualification of certain fire protection equipment as listed below.

Based on the results of this inspection, the NRC determined that two Severity Level IV violations of NRC requirements occurred. These violations are being treated as Non-Cited Violations (NCV) consistent with Section VII.B.1.a of the Enforcement Policy. The first NCV pertained to the Halon system for the A/B Battery Room that was not installed in accordance with the approved fire protection program. The second NCV involved two examples of penetration seals not in compliance with the Oyster Creek fire protection license condition. The first example involved the failure to maintain the required physical condition of fire barriers to ensure that they meet the required fire resistance rating. The second example pertained to the failure to demonstrate that the installed penetration seals were bounded by an approved qualification test. If you contest these violations, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001, with a copies to the Regional Administrator, Region I; the Director, Office of Enforcement, United States Nuclear Regulatory Commission, Washington, DC 20555-0001; and the Resident Inspector at the Oyster Creek facility.

In accordance with 10 CFR 2.790 of the NRC's "Rules of Practice," a copy of this letter and the enclosures will be placed in the NRC Public Document Room (PDR).

Mr. Sander Levin

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Should you have any questions regarding this report, please do not hesitate to contact me at 610-337-5376.

Sincerely,

/RA/

William H. Ruland, Chief
Electrical Branch
Division of Reactor Safety

Docket No. 05000219

Enclosure: NRC Inspection Report No. 05000219/2000-004

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Mr. Sander Levin

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U. S. NUCLEAR REGULATORY COMMISSION
REGION I

Docket No. 05000219

License No. DPR-16

Report No. 05000219/2000-004

Licensee: GPU Nuclear Incorporated
1 Upper Pond Road
Parsippany, New Jersey 07054

Facility Name: Oyster Creek Nuclear Generating Station

Location: Forked River, New Jersey

Inspection Period: February 7, 2000, through April 14, 2000, and May 10, 2000

Inspector: Christopher Cahill, Reactor Inspector

Approved By: William H. Ruland, Chief
Electrical Branch
Division of Reactor Safety

EXECUTIVE SUMMARY

Oyster Creek Nuclear Generating Station Report No. 05000219/2000-004

This inspection included aspects of licensee operations, engineering, maintenance, and plant support related to fire protection and post-fire safe shutdown.

Plant Support

- GPUN had established and implemented appropriate site procedures for controlling and evaluating fire risks and had established appropriate measures to reduce the potential for fire initiation. (Section F1.1)
- The Halon systems were in good material condition and the surveillance were satisfactorily conducted. One non-cited violation was identified in which the Halon system for the A/B Battery Room was not installed in accordance with the approved fire protection program, in that the supplementary equipment necessary for successful performance of the system does not automatically shutdown upon the system actuation. (Section F2.1)
- The condition of most of the inspected seals were satisfactory. However, several penetration seal deficiencies were identified in which the licensee failed to maintain the fire resistance rating of the fire barrier. The failure to maintain the fire resistance rating of the fire barrier penetration seals was an example of a Non-Cited Violation of the fire protection license condition. (Section F2.2)
- Several of the inspected penetration seals did not have the fire resistance ratings that matched the fire resistance rating of the barriers in which they were installed as required by the fire hazard analysis report. This was a second example of a Non-Cited Violation of the fire protection license condition. (Section F2.3)
- The diesel fire pumps were properly tested and in good material condition. (Section F2.4)
- The response of the fire brigade to the drill scenario did not meet the drill objectives and expectations. The fire brigade leader did not execute effective command and control of the brigade. The evaluators properly identified and documented the fire brigade deficiencies. (Section F4.1)
- The sampled fire brigade members had completed the required training courses, drills, respirator training and passed their annual medical physicals. The fire brigade training program complied with requirements of the licensee's fire protection program. (Section F5.1)
- The fire protection audits were adequately conducted. The fire protection audit and assessment findings were appropriately addressed and timely corrective actions were taken for identified deficiencies. (Section F7.1)

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Report Details

F1 Control of Fire Protection Activities (64704)

F1.1 Fire Risk Evolutions

a. Inspection Scope

The inspector interviewed control room supervisors, the fire protection engineer and reviewed the site procedures for controlling and evaluating fire risks to verify that General Public Utilities Nuclear (GPUN) had established appropriate measures to reduce the potential for fire initiation.

b. Observations and Findings

The inspector reviewed the fire impairment log and walked-down 10 of the impairments. The inspector found that the observed impairments were identified and controlled in accordance with procedures 101.2, "Fire Protection Program" and 120.2, "Fire Watch Instructions". The inspector also found, during the walk-downs, that the transient combustibles were properly controlled and tracked in accordance with procedure 120.5, "Control of Combustibles".

During the inspector's walkdowns, there was no hot work activity planned or in progress. The inspector interviewed the on-shift group shift supervisor (GSS) and group operations supervisor (GOS) to evaluate their knowledge about the control of cutting, welding and miscellaneous hot work. The inspector found that the GSS and GOS demonstrated a good understanding of these requirements.

c. Conclusions

The inspector concluded that GPUN had established and implemented appropriate site procedures for controlling and evaluating fire risks and that they had established appropriate measures to reduce the potential for fire initiation.

F2 Status of Fire Protection Facilities and Equipment (64704)

F2.1 Halon Fire Suppression Systems

a. Inspection Scope

The inspector walked-down accessible portions of the Halon systems for the A and B 480v switchgear rooms and the A/B battery room. Additionally, the inspector reviewed system qualification testing data and surveillance tests to verify the operability of the systems.

b. Observations and Findings

The inspector walked-down the systems and found them to be in good material condition. The inspector reviewed surveillance tests 645.6.013, "Fire Suppression System Halon Functional Tests," and 6.45.6.005, "Fire Detection System Alarm Circuitry Test," and found that they were satisfactorily completed.

The inspector reviewed the Halon system test report for the A/B battery room and the A and B 480v switch gear rooms. The licensee, in a letter to the NRC dated August 31, 1979, proposed that the Halon system would comply with the requirements of NFPA 12A and achieve a minimum concentration of 6% for a soak time of 5 minutes. The NFPA 12A edition in effect at that time was the 1977 edition. The NRC, in a letter to the licensee dated November 16, 1979, reviewed and accepted these design specifications.

The Halon system acceptance test conducted on November 11, 1978, showed the Halon concentration falling below the minimum design value after approximately 2.5 minutes. The licensee initiated deviation report (DR) 93-336, dated May 6, 1993, that identified that the Halon system test for the A/B battery room dated November 1, 1978, did not meet the requirements of National Fire Protection Standard (NFPA) 12A, to extinguish a deep-seated fire. The licensee conducted special procedure 94-001, "Halon Fire Suppression System and Room Integrity Door Fan Verification Test in A/B Battery Room" on March 31, 1995, and found, as documented in DR 95-181, that the test was not able to be performed under the normal system lineup. The licensee determined that with the supply and exhaust fans operating, the leakage past the fire dampers would prevent the Halon from reaching and maintaining the required concentration.

The licensee, as described in Engineering Evaluation 106-95, dated March 31, 1995, determined, through a door fan test, that with the fans secured, a 5% concentration of Halon could be maintained for 51.59 minutes and a 6% concentration of Halon could be maintained for 47.55 minutes. In response to this test, the licensee instituted compensatory action that required operator action to secure the A/B battery room ventilation in the event of a fire in this area. In Engineering Evaluation 96-96, dated March 26, 1996, the licensee adopted the compensatory manual operator actions as the permanent corrective action.

Generic Letter (GL) 86-10, section 8.4, Future Changes, provides guidance to licensees on how to make changes to the approved fire protection program. Specifically, GL 86-10 section 8.4 states that, "If a future modification involves a change to a license condition or technical specification, a license amendment request must be submitted. When a modification not involving a technical specification or license condition is planned, the evaluation made in conformance with 10 CFR 50.59 to determine whether an unreviewed safety question is involved must include an assessment of the modification's impact on the existing fire hazard analysis for the area." Section 8.4 goes on to state that "The assessment must include the effects on combustible loading and distribution and the consideration of whether circuits or components, including associated circuits, for a train of equipment needed for safe shutdown are being affected or a new element introduced into the area".

The inspector reviewed Engineering Evaluation 96-96, dated March 26, 1996, and Engineering Evaluation 106-95, dated March 31, 1995, and found that the evaluations were not in conformance with guidance provided in GL 86-10. The evaluations did not include an assessment of the modification's impact on the existing fire hazard analysis for the area. Additionally, the evaluations did not include the effects on combustible loading and distribution and the consideration of whether circuits or components, including associated circuits, for a train of equipment needed for safe shutdown were being affected or a new element introduced into the area.

The Oyster Creek Nuclear Generating Station (OCNGS) Operating License part C (3) states, that "GPU Nuclear, Inc. shall implement and maintain in effect all the provisions of the approved Fire Protection Program as described in the Updated Final Safety Analysis Report for the facility and as approved in the Safety Evaluation Report dated March 3, 1978, and supplements thereto, subject to the following provisions: The licensee may make changes to the approved fire protection program without prior approval of the Commission, only if those changes would not adversely affect the ability to achieve and maintain safe shutdown in the event of a fire."

The licensee's Fire Protection Program states that the Halon system is installed in accordance with NFPA 12A. NFPA 12A, 1977 edition, states in section 1-8.3.1 that "Operating devices include Halon 1301 releasing devices or valves, discharge controls, and shutdown equipment, all of which are necessary for successful performance of the system". NFPA 12A, 1977 edition also states, in section 1-8.3.9, that, "All devices for shutting down supplementary equipment shall be considered integral parts of the system and shall function with the system operation." Additionally, section 2-2.2.4 states that, "For deep-seated fires, forced air ventilation shall be shut down or closed with the start of the agent discharge".

Contrary to the above, on or before March 26, 1996, GPUN made a change to the approved fire protection program and did not demonstrate that the changes would not adversely affect the ability to achieve and maintain safe shutdown in the event of a fire. Specifically, the Halon system design requirements for the A/B Battery Room were changed, such that, supplementary equipment necessary for the successful performance of the system would not automatically shutdown upon the system actuation. The changes to the system design allowed for the manual shutdown of the A/B Battery Room supply and exhaust fans. GPU Nuclear did not demonstrate, through their evaluations, that the changes would not adversely affect the ability to achieve and maintain safe shutdown in the event of a fire. This is a violation of license condition 2.C.3.

On May 5, 2000, GPUN issued Corrective Action Program (CAP) No. 02000-0498. The inspector's review of this document indicated that this document identified the required corrective actions to be accomplished for resolving the deficient condition, including modifications to maintain the halon concentration for 10 minutes without any manual actions (or requesting regulatory relief from the NRC if needed) and revising the FHAR accordingly. This violation is being treated as a Non-Cited Violation (NCV), consistent with Section VII.B.1.a of the NRC Enforcement Policy. **(NCV 05000219/2000-004-01)**

c. Conclusions

The Halon systems were in good material condition and the surveillance tests were satisfactorily conducted. An NCV was identified in which the Halon system for the A/B Battery Room was not installed in accordance with the approved fire protection program, in that the supplementary equipment necessary for successful performance of the system does not automatically shutdown upon the system actuation.

F2.2 Penetration Seals

a. Inspection Scope (64704)

The inspector walked-down and visually inspected accessible fire seals in the upper and lower cable spreading rooms and the A/B battery room for physical damage, shrinkage, and seal separation.

b. Observations and Findings

The inspector walked-down and inspected approximately 50 fire barrier penetration seals and found the condition of most of the seals to be satisfactory. The inspector identified several penetration seal deficiencies. Specifically:

- Penetration No. 128 was missing a conduit box cover and foam was pulled away from the flex conduit;
- Penetration No. 201 required repairs due to shrinkage and the surface being painted;
- Penetrations No.681, 685, 688 and 682 required repairs;
- Penetration No. 1355 required minor surface repairs and removal of tape shimmed along the tray.

The licensee entered these deficiencies into their corrective action program under CAP 2000-0398, CAP 2000-0390, CAP 2000-0413, W/O 782897 and W/R 782865, and took compensatory actions as required by their fire protection program.

The OCNCS Operating License part C (3) states, that “GPU Nuclear, Inc. shall implement all the provisions of the approved Fire Protection Program as described in the Updated Final Safety Analysis Report for the facility and as approved in the Safety Evaluation Report dated March 3, 1978, and supplements thereto.” The approved Fire Protection Program, as described in the Updated Final Safety Analysis Report, states that the Fire Hazards Analysis Report (FHAR) is considered part of the fire protection program. FHAR section 6.1.2 states that “Penetration seals must match the fire resistance rating of the barriers in which they are installed.” This failure to maintain the fire resistance rating of the fire barrier penetration seals is an example of a violation of the license condition part C (3), Fire Protection. The violation is being treated as a Non-Cited Violation, consistent with Section VII.B.1.a of the NRC Enforcement Policy. The identified deficiencies were placed in the licensee’s corrective action program. **(NCV 05000219/2000-004-02)**

c. Conclusion

The inspector concluded that the condition of most of the inspected seals were satisfactory. Several penetration seal deficiencies were identified in which the licensee failed to maintain the fire resistance rating of the fire barrier. The failure to maintain the fire resistance rating of the fire barrier penetration seals was an example of a Non-Cited Violation of the fire protection license condition.

F2.3 Penetration Seals Qualification

a. Inspection Scope (64704)

The inspector reviewed the licensee's penetration seal qualification tests to determine if the installed configurations were properly bounded by the tests.

b. Observations and Findings

The inspector interviewed the fire protection system engineer, reviewed AI 88021.02, "Response to NRC Information Notice (IN) No. 88-04," and walked down penetration seals in the A/B battery room, upper cable spreading room and lower cable spreading room. The inspector identified several examples of penetration seals that were not shown to be bounded by qualification tests or did not have adequate engineering evaluations to demonstrate that the seals were qualified. Additionally, several programmatic penetration seal issues were identified. Specifically:

- There is no readily available process to track a penetration seal from qualification, to the installation work order to the final installation. Also the licensee has credited five penetration tests in AI 88021.02, Attachment A, but did not identify which test or tests qualified a particular penetration seal.
- The licensee's fire barrier penetration seal repair and installation procedure, 759.1.006, is not bounded by the test reports. Specifically, the procedure allows for densities in the range of 15-23 pounds per cubic foot (pcf). However, the test reports listed in AI 88021.02, Attachment A, gave the allowed densities as $18 \pm 2\%$ and 17 - 23 pcf.
- Penetration seal number 129, located in the lower cable spreading room, measures 57 inches x 60 inches. Penetrating the seal are eight 4 inches x 24 inches cable trays, one 3/4 inch conduit, five 1 inch conduits, six 1¼ inch conduits, twelve 2 inch conduits, one 3 inch conduit, eighteen 3/4 inch flex conduits, five 1 inch flex conduits, two 1¼ inch flex conduits, one 1½ inch flex conduit and three 2 inch flex conduits. The licensee does not have a test to demonstrate the qualification of fire seals of this size or with this magnitude of penetrations. Although they conducted an evaluation under AI 88021.02, it does not appear to meet the test deviation guidance as explained in BTP 9.5-1, Generic Letter 86-10 or NUREG 1552.
- The licensee conducted AI 88021.02 in response to Information Notice (IN) 88-04. This task was completed in March 1989. In AI 88021.02, Attachment C, the

licensee performed an evaluation that justified the configuration of the silicone foam seals installed in penetrations 435, 539, 540, 541, 542, 543, 544, 545, 547, and 548. The inspector reviewed the repair history of these penetrations and found that silicone foam was replaced with grout under Work Request 36104 in October 1986. During the inspection the licensee was able to demonstrate that the as-found grout configuration was acceptable. However, the AI 88021.02 evaluation was inadequate in that it documented the qualification of a series of penetration seals for a specific configuration using silicone foam seal material when the actual installed material was grout.

- Job No. C-5-D states that “Preliminary discussions with plant operations and electrical personnel revealed that most penetrations containing cables and conduits were sealed with polyurethane foam. This foam was to be removed prior to installing the new material, however, due to the importance of the cables, to the plant safety systems, and the possibility of damaging the cables, engineering was requested to reevaluate the need for removing the existing barriers. The polyurethane barriers were allowed to be left in place and an alternate solution of pouring the RTV. Foam on the face of the walls was proposed and accepted.” The package presented to the inspector did not provide sufficient detail to identify which specific seals were affected, if the seals were bounded by a qualification test or if the seals met the test deviation guidance as explained in BTP 9.5-1, Generic Letter 86-10 or NUREG 1552. Therefore, the inspector was unable to verify that the penetration seal configurations were properly qualified.

The OCNCS Operating License part C (3) states, that “GPU Nuclear, Inc. shall implement all the provisions of the approved Fire Protection Program as described in the Updated Final Safety Analysis Report for the facility and as approved in the Safety Evaluation Report dated March 3, 1978, and supplements, thereto. The approved Fire Protection Program, as described in the Updated Final Safety Analysis Report, states that the Fire Hazards Analysis Report (FHAR) is considered part of the fire protection program. FHAR section 6.1.2 states that, “Penetration seals must match the fire resistance rating of the barriers in which they are installed.” Contrary to the above, the inspector identified several examples in which the resistance rating of the fire barriers did match the fire resistance rating of the barriers in which they are installed. This constitutes a second example of a violation of the license condition part C(3). The violation is being treated as a Non-Cited Violation, consistent with Section VII.B.1.a of the NRC Enforcement Policy. This matter is in the licensee’s corrective action program under CAP No. 02000-0497. This CAP was written to document the need for further reviews and corrective actions as necessary. **(NCV 05000219/2000-004-02)**

c. Conclusions

The inspector concluded several of the inspected penetration seals did not have resistance ratings that matched the fire resistance rating of the barriers in which they were installed. This is a second example of a Non-Cited Violation of the fire protection license condition.

F2.4 Fire Pump Functional Testing

a. Inspection Scope

The inspector reviewed the last two years' test data of the diesel fire pumps to assess their operability and conducted a walk-down of these pumps to determine their physical condition.

b. Observations and Findings

The inspector found that the tests were consistently performed and demonstrated that the pumps were meeting their design requirements. The inspector also found the material condition of the fire pumps was good.

c. Conclusions

The inspector concluded that the diesel fire pumps were properly tested and in good material condition.

F4 Fire Protection Staff Knowledge and Performance

F4.1 Fire Brigade Drills

a. Inspection Scope (64704)

The inspector observed a fire drill to evaluate the effectiveness of the fire brigade fire fighting ability, command and control and drill evaluation. The inspector monitored the activities of the fire brigade at the fire scene.

b. Observations and Findings

The inspector observed the fire drill on February 10, 2000. The fire was simulated in the A/B battery room. The licensee determined that the fire drill did not meet the expectations for a successful fire response. A summary of the deficiencies, as identified in the "Fire Drill Report," Attachment 101.2-2, included:

- While the brigade was on the scene within the 15 minute time frame, two brigade members were not fully dressed and not ready to participate due to the lack of helmets and having to complete dressing out at the scene.
- The fire brigade leader (FBL) did not consider the use of Halon until 10 minutes

into the fire. The use of hose lines from the third floor as a backup was not correct. This allowed smoke to fill the stair tower. FBL command and control of the entire fire scene was poor.

- Control Room (CR) support was good in the areas of support for de-energizing and ventilation, but was poor in the areas of pre-plan direction.
- Fire extension concerns and exposure protection was not addressed by the FBL and the pre-plan was not used for guidance in these areas.
- The failure to use the pre-plan led to fire attack tactical mistakes.
- The CR did not give pre-plan information to the FBL.

The licensee initiated CAP No. 02000-218 to document the failure to meet the drill expectations and to track the corrective actions. The licensee also identified the required remedial action for the fire brigade "Fire Drill Report," Attachment 101.2-2, section 7.0. The inspector found that the evaluators properly identified and documented the fire brigade deficiencies and that the remedial actions were appropriate to address the observed deficiencies.

The inspector reviewed the fire drill reports dated October 8, December 14, December 16, and December 23, 1999, and found that the drills met all drill expectations. Additionally, the inspector reviewed fire drill reports dated February 16, and February 24, 2000, and found that they met all drill expectations.

c. Conclusion

The response of the observed fire brigade to the drill scenario did not meet the drill objectives and expectations. The fire brigade leader did not execute effective command and control of the brigade. The evaluators properly identified and documented the fire brigade deficiencies and the remedial actions were appropriate to address the observed deficiencies.

F5 Fire Protection Staff Training and Qualification (64704)

F5.1 Fire Brigade Training

a. Inspection Scope

The inspector reviewed a sample of the fire brigade training to verify that the members were trained and qualified in accordance with the OCNCS Fire Protection.

b. Observations and Findings

The inspector found that the fire brigade members had successfully completed the required training courses, drills, respirator training and passed their annual medical physicals as required by procedures 101.2, "Fire Protection Program" and 2612-PGD-2684, "Oyster Creek Fire Protection Training Program". The inspector found that several of the members had passed their scheduled annual date but were within the prescribed extension period. The inspector reviewed the GPU Nuclear Medical Plan, procedure number 1000-PLN-1100.01, and found that the extensions were conducted in accordance with the licensee's requirements.

c. Conclusions

The inspector concluded that the sampled fire brigade members had completed the required training courses, drills, respirator training and passed their annual medical physicals. The inspector concluded that the fire brigade training program complied with requirements of the licensee's fire protection program.

F7 Quality Assurance in Fire Protection Activities (64704)

F7.1 Audits and Surveillance

a. Inspection Scope

The inspector reviewed three fire protection audits S-OC-99-06, S-OC-98-09 and S-OC-97-06, to determine the adequacy of the licensee's self assessment program.

b. Observations and Findings

The inspector verified that the audits adequately evaluated the effectiveness of fire protection measures, equipment, program implementation, and problem identification and resolution.

The inspector verified that proper actions were taken to resolve the identified deficiencies. Corrective actions were found to be implemented in a timely manner.

c. Conclusions

The inspector concluded that the fire protection audits were adequately conducted. The inspector also concluded that the fire protection audit findings were appropriately addressed and timely corrective actions were taken for identified deficiencies.

V. Management Meetings

X1 Exit Meeting Summary

The inspectors presented the results of this inspection to members of the licensee's management on February 29, and April 14, 2000. The licensee stated that they would review their position concerning the violation associated with the actuation of the halon system.

The inspector asked the licensee whether any material reviewed should be considered as proprietary information. No proprietary information was identified.

On May 10, 2000, the NRC amended the exit meeting on a telephone call to Mr. G. Busch of GPUN, stating that the originally cited violation for the Halon system deficiency was changed to an NCV as discussed in Section F2.1, and that the other two NCVs were categorized as one NCV with two examples as discussed in Sections F2.2 and F2.3. The licensee did not disagree with the amended findings.

PARTIAL LIST OF PERSONS CONTACTED

Licensee

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NRC

L. Dudes, Senior Resident Inspector
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 W. Ruland, Chief, Electrical Branch

INSPECTION PROCEDURES USED

IP64704: Fire Protection Program

ITEMS OPENED AND CLOSED

<u>Number</u>	<u>Type</u>	<u>Description</u>
50-219/2000-04-01	NCV	Halon system is not installed in accordance with the approved fire protection program. (Section F2.1)
50-219/2000-04-02	NCV	Fire barrier deficiencies. (Section F2.2) and fire barrier qualification deficiencies. (Section F2.3)

LIST OF ACRONYMS USED

BTP	Branch Technical Position
CAP	Corrective Action Program
CFR	Code of Federal Regulations
CO ₂	Carbon Dioxide

CR	Control Room
DR	Deviation Report
FBL	Fire Brigade Leader
FHAR	Fire Hazard Analysis Report
GL	Generic Letter
GOS	Group Operations Supervisor
GPUN	General Public Utilities Nuclear
GSS	Group Shift Supervisor
NCV	Non-Cited Violation
NFPA	National Fire Protection Association
NRC	Nuclear Regulatory Commission
OCNGS	Oyster Creek Nuclear Generation Station
pcf	Pound per cubic foot
RTV	Room Temperature Vulcanization
UFSAR	Updated Final Safety Analysis Report
W/O	Work Order
W/R	Work Request