

From: William Raymond
To: Pete Eselgroth
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Subject: April 28 Dodd Debrief

Per the attached.

CC: David Lew, Leanne Harrison, Peter Habighorst, Scott Barber

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April 28, 2000
9:00 am

Ciaus Dodd Debrief

1. Quality of inspection improved since initial visits. There is still a need to upgrade the guidelines to facilitate analyst qualification.
2. Inspections in u-bend area is much improved with the use of the new probes and higher frequencies. The upgrade in the analyst training as the program developed helped. The inspections can now see indications when they are 40-50% through-wall.
3. The inspections in the sludge pile area are as good as can be expected with the present state of technology (100% RPC exams). The use of UT was good. ConEd (and the industry) needs to develop better techniques to size the depth of pits. ConEd is likely plugging good tubes because of the uncertainties in the depth sizing. There is a need to improve the signal to noise ratio in the sludge pile.
4. Caius' overall impression: ConEd was in a difficult circumstance - cannot see anything else that can be done in the short term to improve the inspections. The crack in the tube (February 15) showed how crud deposits could mask defects and provided a lesson on the need to use higher frequency probes to better see the indications. Groth: These lessons will be shared with the industry.

The following (minor?) topic was not presented at the exit, but was discussed with the resident during the inspection.

5. Three training/qualification issues for eddy current analysts were presented to Con Edison (Parry): (i) remediation and retest of analysts (10% of total who failed initial tests were given the same test on retest); (ii) quality of the format/presentation of analysis guidelines; (iii) single analyst calls on 3 of 8 tests that were in error (missed defects - caught by second analyst). These problems occurred early in the current ECT program and improved as the outage continued. The issues will be discussed with NRR (Emmett and Stephanie). Con Ed will consider the need to reanalyze some of the early ECT data.