

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-101

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, 1967, Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402195</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-220		1-CCRH-67	1969	Removed	No
Snubber	Basic Engineers	PI-282		1-CCRH-67	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-101

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN 039600-CO  
National Board, Province and Endorsements

Date 1/14/03

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**

**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-102

<b>1. Owner</b> <u>Nuclear Management Company, LLC</u> <div style="text-align: center;">Name</div> <b>2. Plant</b> <u>Praire Island Nuclear Generating Plant</u> <div style="text-align: center;">Name</div> <u>1717 Wakonade Dr. E, Welch Minnesota 55089</u> <div style="text-align: center;">Address</div> <b>3. Work Performed by</b> <u>Owner</u> <div style="text-align: center;">Name</div> <u>Same</u> <div style="text-align: center;">Address</div> <b>4. Identification of System</b> <u>SN</u>	<b>Date</b> <u>11/26/2002</u> <b>Sheet</b> <u>1</u> <b>of</b> <u>2</u> <u>9402193</u> <b>Repair Organization P.O. No , Job No , etc</b> <b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u> <b>Code Class</b> <u>2</u> <b>1967</b> <b>Edition</b> <b>Code Case</b> <u>n/a</u> <b>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity</b> <u>1989 With No Addenda</u> <b>(c) Applicable Section XI Code Cases</b> <u>None</u>
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**6. Identification of Components**

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-176		1-CCRH-72A	1969	Removed	No
Snubber	Basic Engineers	PI-352		1-CCRH-72A	1969	Installed	No

**7. Description of Work** Replaced snubber with pre-tested spare of same model/manufacturer.

**8. Tests conducted.**      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

                                 Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ ° F

**Other:** Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in , (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-102

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABWE, MN 039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03



**NOTE.** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-103

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R. B. Williams  
Inspector's Signature

Commissions NB11872 ABNF, MN039600-C0  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-104

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>94021788</u> <i>FD 1-6-03</i></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2-1</u></p> <p><u>1967</u> <i>RC 11/4/03</i> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-306		1-RHCH-15	1969	Removed	No
Snubber	Basic Engineers	PI-554		1-RHCH-15	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313.

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

9. Remarks

ITEM 1-16-104

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN 039600-CO  
National Board, Province and Endorsements

Date 1/14/03

**ITEM 1-16-105**

**Date** 11/26/2002

Name \_\_\_\_\_

Sheet 1 of 2

**2. Plant**      **Prairie Island Nuclear Generating Plant**

Name
1717 Wakonade Dr E, Welch Minnesota 55089

3694  
9402197 *rw*  
1-6-03

Address

Repair Organization P.O. No., Job No., etc

### 3. Work Performed by Owner

Type Code Symbol Stamp N/A

Name \_\_\_\_\_

Authorization	N/A
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Same

Expiration Date	N/A
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Address

Code Class 2

#### 4. Identification of System SN

5. (a) Applicable Construction Code B31.1

1967 Edition

**Addenda** n/a

**Code Case** n/a

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity	1989 With No Addenda

(c) Applicable Section XI Code Cases None

## 6. Identification of Components

[illegible]

7. Description of Work	Replaced snubber with pre-tested spare of same model/manufacturer
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8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒ Pressure      psi      Test Temp.      ° F

**Other:** Snubber was visually inspected the next outage after replacement per WO9509313

**NOTE** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-105

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Wellish, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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[Signature] Commissions NB 11872 ABNE, MN039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-106

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402201</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-181		1-RCVCH-1285	1969	Removed	No
Snubber	Basic Engineers	PI-109		1-RCVCH-1285	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-106

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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[Signature] Commissions NB 11872 ABNE, MN039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-107

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3 Work Performed by Owner <u>Same</u></p> <p style="text-align: center;">Name</p> <p style="text-align: center;">Address</p> <p>4 Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402200</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-120		1-RCVCH-917	1969	Removed	No
Snubber	Basic Engineers	PI-180		1-RCVCH-917	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ ° F

Other: Snubber was visually inspected the next outage after replacement per WO9509313.

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-107

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

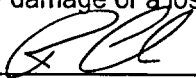
Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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Inspector's Signature

Commissions NB 11872 ABNI, MN039600-CO  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-108

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by Owner <u>Same</u></p> <p style="text-align: center;">Name</p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402177</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-348		1-WDRH-29A	1969	Removed	No
Snubber	Basic Engineers	PI-94		1-WDRH-29A	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ ° F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-108

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN 039600-CO  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-109

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402173</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No , etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-16		1-CWRH-81	1969	Removed	No
Snubber	Basic Engineers	PI-512		1-CWRH-81	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ ° F

Other: Snubber was visually inspected the next outage after replacement per WO9509313.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in , (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-109

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R.B. Williams  
Inspector's Signature

Commissions NB 11872 ABWZ, MN 039600-60  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-110

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403435</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-322		1-CWH-623	1969	Removed	No
Snubber	Basic Engineers	PI-102		1-CWH-623	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-110

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willard, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB11872 ABSE, MN039600-C0  
National Board, Province and Endorsements

Date 1/14/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-111

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, 1967 Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p>9402169</p> <p>Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-29		1-WDRH-30	1969	Removed	No
Snubber	Basic Engineers	PI-351		1-WDRH-30	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

9. Remarks

ITEM 1-16-111

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 1872 ABNT, MN 035600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-112

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u></p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402179</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-26		1-WDRH-32B	1969	Removed	No
Snubber	Basic Engineers	PI-309		1-WDRH-32B	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313.

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-112

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Wells, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/02 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R.B. Wells Commissions NB 11872 ABNI, MN039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-113

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402210</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-130		1-RBDH-414	1969	Removed	No
Snubber	Basic Engineers	PI-334		1-RBDH-414	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufactur.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-113

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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R.B. Willis

Inspector's Signature

Commissions NB 11872 ABNT, MA 035600-CO  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-114

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402181</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-27		1-WDRH-32A	1969	Removed	No
Snubber	Basic Engineers	PI-60		1-WDRH-32A	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-114

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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R.B. Willis  
Inspector's Signature

Commissions NB 11872 AB-UE, MN039600-CO  
National Board, Province and Endorsements

Date 1/14/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-115

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by Owner <u>Same</u></p> <p style="text-align: center;">Name</p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402184</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-236		1-CCRH-63	1969	Removed	No
Snubber	Basic Engineers	PI-377		1-CCRH-63	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313.

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-115

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed P.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

QCL

Inspector's Signature

Commissions NB 11872 AB N.I. MN 039600-CD  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-116

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, 1967 Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p>9402191</p> <p>Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-16		1-CCRH-62	1969	Removed	No
Snubber	Basic Engineers	PI-448		1-CCRH-62	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-116

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB-CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB11872 ABNE, MN 035600-CO  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-117

1. Owner Nuclear Management Company, LLC Date 11/26/2002

Name \_\_\_\_\_

2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2

Name \_\_\_\_\_

1717 Wakonade Dr. E, Welch Minnesota 55089

Address \_\_\_\_\_

3. Work Performed by Owner Repair Organization P.O. No., Job No., etc \_\_\_\_\_

Name \_\_\_\_\_

Same \_\_\_\_\_

Address \_\_\_\_\_

4. Identification of System SN Type Code Symbol Stamp N/A

SN \_\_\_\_\_

Authorization N/A

Expiration Date N/A

Code Class 2

5. (a) Applicable Construction Code B31 1, 1967 Edition \_\_\_\_\_

Addenda n/a Code Case n/a

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda

(c) Applicable Section XI Code Cases None

### 6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-346		1-CCRH-75	1969	Removed	No
Snubber	Basic Engineers	PI-534		1-CCRH-75	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-117

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Wiland, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB/1872 ABNT, MNA39600-CO  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-118

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by Owner <u>Same</u></p> <p style="text-align: center;">Name</p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p style="text-align: right;">(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p style="text-align: right;">(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402189</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-67		1-CCRH-65	1969	Removed	No
Snubber	Basic Engineers	PI-239		1-CCRH-65	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-118

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB11872 ABWE, MN039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-119

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402204</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-123		1-RBDH-415	1969	Removed	No
Snubber	Basic Engineers	PI-345		1-RBDH-415	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-119

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB11872 ABNT, MNO39600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-120

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p>9402182</p> <p>Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2-1</u> <u>RC 1114/63</u> Edition</p> <p>1967</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-299		1-RSIH-92	1969	Removed	No
Snubber	Basic Engineers	PI-350		1-RSIH-92	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-120

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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[Signature]  
Inspector's Signature

Commissions NB 11872 AB WE, MN039600-CO  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-121

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402926</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber block valve	Bergan Patterson	SG10		11S/G02	1969	Removed	No
Snubber block valve	Bergan Patterson	SG19		11S/G02	1969	Installed	No

7. Description of Work Replaced snubber block valve with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber vlv blk was functionally tested after reassembly Insp results attached to work order 9406764

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-121

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Wilks, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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[Signature] Commissions NB 11872 ABWE, MW039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-122

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/26/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402928</u></p> <p>Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber block valve	Bergan Patterson	SG11		11S/G03	1969	Removed	No
Snubber block valve	Bergan Patterson	SG10		11S/G03	1969	Installed	No

7. Description of Work Replaced snubber block valve with pre-tested spare of same model/manufacture

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber vlv blk was functionally tested after reassembly Insp results attached to work order 9406764

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

9. Remarks

ITEM 1-16-122

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MN 039600-CO  
National Board, Province and Endorsements

Date 1/14/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-123

1. Owner Nuclear Management Company, LLC Date 11/26/2002

Name \_\_\_\_\_

2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2

Name \_\_\_\_\_

1717 Wakonade Dr. E, Welch Minnesota 55089

Address \_\_\_\_\_

3. Work Performed by Owner \_\_\_\_\_ Repair Organization P.O. No , Job No., etc \_\_\_\_\_

Name \_\_\_\_\_

Same \_\_\_\_\_

Address \_\_\_\_\_

4. Identification of System SN \_\_\_\_\_

5. (a) Applicable Construction Code B31 1, 1967 Edition

Addenda n/a Code Case n/a

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda

(c) Applicable Section XI Code Cases None

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber block valve	Bergan Patterson	SG14		12S/G02	1969	Removed	No
Snubber block valve	Bergan Patterson	SG11		12S/G02	1969	Installed	No

7. Description of Work Replaced snubber block valve with pre-tested spare of same model/manufacture

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ ° F

Other: Snubber vlv blk was functionally tested after reassembly. Insp results attached to work order 9406764

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in , (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-123

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R. B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions NB 11872 ASME, MN 035600-C0  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-125

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/28/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>U0744-SN-Q</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-493	1969	Corrected	No

7. Description of Work Replaced rod bushing and cylinder

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9401803.

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-125

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

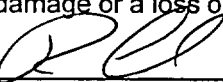
Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions NB 11872 AB-1, MN039600-00

National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-126

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <hr/> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/28/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402154</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2-1</u> <u>Ra 1/1/03</u> Edition</p> <p>1967</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-164		1-RCRH-27B	1969	Removed	No
Snubber	Basic Engineers	PI-493		1-RCRH-27B	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected the next outage after replacement per WO9509313.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-126

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

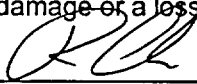
Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection



Inspector's Signature

Commissions NB 11872 AB NE, MN035600-C0  
National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-127

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/6/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9400407</u></p> <p>Repair Organization P.O. No , Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-432	1969	Corrected	No

7. Description of Work Replaced piston and piston rod

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9401803

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-127

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MN 039600-00  
National Board, Province and Endorsements

Date 1/14/03



**ITEM 1-16-128**

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-128

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed P.B. Willis, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 AB-1, MN039600-C0  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-129

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/7/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>U0739-SN-Q</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-66	1969	Corrected	No

7. Description of Work Replaced piston.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-16-129

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-6, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/14/03 to 1/14/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABWI, MN039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/14/03

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/**  
**REPLACEMENT ACTIVITY**

ITEM 1-16-004 <sup>1001</sup>

1. Owner Nuclear Management Company, LLC

Date 1/10/2002

2. Plant Praire Island Nuclear Generating Plant

Sheet 1 of 2

1717 Wakonade Dr. E, Welch Minnesota 55089  
 Address

9404265, 9404149

3. Work Performed by Owner

Repair Organization P.O. No., Job No., etc

Same Name

Type Code Symbol Stamp N/A

Authorization N/A

Expiration Date N/A

4. Identification of System AUXILIARY FEEDWATER

Code Class 3

5. (a) Applicable Construction Code B31.1

1967 Edition

Addenda N/A

Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
11 AFW PUMP	PACIFIC	46580	N/A	145-201	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REPAIRED WELD

8. Tests conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☐ Pressure 170 psi Test Temp. ambient °F

Other: PRESSURE TEST PERFORMED IN SP-1174 6 TEST WAS WITNESSED BY ANII IN STEP 8 8 OF THE SP. TEST TIME WAS 10 MIN.

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1001  
1-16-00+ 7-27-02

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 4/8/02 to 4/8/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNI, MN 035600-C0  
Inspector's Signature National Board, Province and Endorsements

Date 4/8/02

ITEM 1-16-002 <sup>1002</sup> 7-7-03

**Date** 1/10/2002

Sheet 1 of 2

9404124

Repair Organization P.O. No., Job No., etc

Type Code Symbol Stamp N/A

Authorization	N/A
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Expiration Date	N/A
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<b>Code Class</b>	<b>3</b>
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1967 Edition

Addenda N/A

Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA

(c) Applicable Section XI Code Cases N/A

## 6. Identification of Components

[illegible]

7. Description of Work	REPAIR WELDED
------------------------	---------------

8. Tests conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☐ Pressure 170 psi Test Temp. ambient ° F

Other: PRESSURE TEST PERFORMED AT 165-170 IN SP-1174.6 TEST WAS WITNESSED BY ANII IN STEP 8 8 OF THE SP. TEST TIME WAS 10 MIN.

**NOTE** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1002  
1-16-002 27-27-03

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 4/8/02 to 4/8/02 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNI, MN039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 4/8/02



ITEM 1-16-003 <sup>1003</sup> ~~7-21-03~~

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1003  
1-16-003 722  
1-21-03

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A  
Certificate of Authorization No. N/A Expiration Date N/A  
Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 4/8/02 to 4/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 AB N.E., MN 039600-00  
Inspector's Signature National Board, Province and Endorsements  
Date 4/8/02

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-005 <sup>1005</sup>  
7-21-03

1. Owner Nuclear Management Company, LLC Date 1/10/2002  
Name \_\_\_\_\_
2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2  
Name \_\_\_\_\_  
1717 Wakonade Dr. E, Welch Minnesota 55089 9401690  
Address \_\_\_\_\_ Repair Organization P.O. No., Job No., etc \_\_\_\_\_
3. Work Performed by Owner Type Code Symbol Stamp N/A  
Name \_\_\_\_\_ Authorization N/A  
Same \_\_\_\_\_ Expiration Date N/A  
Address \_\_\_\_\_ Code Class 3
4. Identification of System COOLING WATER
5. (a) Applicable Construction Code B31.1, 1967 Edition  
Addenda N/A Code Case N/A  
(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA  
(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
SUPPORT	NAVCO	N/A	N/A	1-CWRH-27	N/A	MODIFIED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work Shims were added to the support structure to obtain the specified clearances
8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐  
Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F
- Other: VT-3 exam.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1005  
1-16-005 221-03

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 4/8/02 to 4/8/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R.B. Williams  
Inspector's Signature

Commissions NB 11872 ABNI, MN039600-C0  
National Board, Province and Endorsements

Date 4/8/02

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-000 <sup>1000</sup> <sub>7-21-03</sub>

1. Owner Nuclear Management Company, LLC Date 1/10/2002  
Name \_\_\_\_\_  
2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2  
Name \_\_\_\_\_  
1717 Wakonade Dr. E, Welch Minnesota 55089 9403571  
Address \_\_\_\_\_  
3. Work Performed by Owner Repair Organization P.O. No., Job No., etc \_\_\_\_\_  
Name \_\_\_\_\_ Type Code Symbol Stamp N/A  
Same Authorization N/A  
Address \_\_\_\_\_ Expiration Date N/A  
4. Identification of System REACTOR COOLANT Code Class 1  
5. (a) Applicable Construction Code B31 1, 1967 Edition  
Addenda N/A Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
LINE 6-RC-20B	NAVCO	N/A	N/A	WELD W-1	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REMOVED LINEAR INDICATIONS BY FLAPPER WHEEL

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒  
Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Surface exam performed. Pressure test not required.

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1006 1-16-006 21-03

9. Remarks THE WELD WAS RE-EXAMINED WITH NAD ON ISI PT REPORT 94-0049R1 IN THE OUTAGE SUMMARY REPORT. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A  
Certificate of Authorization No. N/A Expiration Date N/A  
Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 4/9/02 to 4/9/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R.B. Williams Commissions NB 11872 ABNE, MN039600-C6  
Inspector's Signature National Board, Province and Endorsements  
Date 4/9/02

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-007 <sup>1007</sup> <sub>Feb 27-03</sub>

1. Owner Nuclear Management Company, LLC Date 1/10/2002  
Name

2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2  
Name  
1717 Wakonade Dr. E, Welch Minnesota 55089 9403822  
Address Repair Organization P.O. No., Job No., etc

3. Work Performed by Owner Type Code Symbol Stamp N/A  
Name Authorization N/A  
Same Expiration Date N/A  
Address Code Class 1

4. Identification of System REACTOR COOLANT

5. (a) Applicable Construction Code B31.1, 1967 Edition  
Addenda N/A Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
LINE 2-RC-10A	NAVCO	N/A	N/A	WELD W-8	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REMOVED LINEAR INDICATIONS BY FLAPPER WHEEL

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒  
Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Surface exam performed Pressure test not required.

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1007  
1-16-007 7-21-03

9. Remarks THE WELD IS NOT LISTED IN THE ISI SUMMARY REPORT FOR INSPECTION. NO PRESERVICE EXAM REQUIRED.

This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

PRESERVICE EXAM DOCUMENTED  
IN ISI EXAM REPORT 94-0188R1.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 4/9/02 to 4/9/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R.B. Williams  
Inspector's Signature

Commissions NB 11872 ASME, MN039600-00  
National Board, Province and Endorsements

Date 4/9/02



**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/**  
**REPLACEMENT ACTIVITY**

ITEM 1-16-008 <sup>1008</sup> <sub>7-21-03</sub>

1. Owner Nuclear Management Company, LLC

Date 1/10/2002

2. Plant Praire Island Nuclear Generating Plant

Sheet 1 of 2

Name  
1717 Wakonade Dr. E, Welch Minnesota 55089  
Address

9403573

Repair Organization P.O. No., Job No., etc

3. Work Performed by Owner

Type Code Symbol Stamp N/A

Name

Authorization N/A

Same

Expiration Date N/A

4. Identification of System REACTOR COOLANT

Code Class 1

5. (a) Applicable Construction Code B31.1

1967 Edition

Addenda N/A

Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
LINE 6-RC-20A	NAVCO	N/A	N/A	WELD W-9	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REMOVED LINEAR INDICATION BY FLAPPER WHEEL

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: N/A NO PRESSURE TEST REQUIRED

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1008 7-21-03  
1-16-000

9. Remarks THE WELD WAS RE-EXAMINED WITH NAD ON ISI PT REPORT 94-0051R1 IN THE OUTAGE SUMMARY REPORT. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 4/9/02 to 4/9/02 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ASME, MN039600-C0  
Inspector's Signature National Board, Province and Endorsements

Date 4/9/02

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/**  
**REPLACEMENT ACTIVITY**

ITEM 1-16-009 <sup>1009</sup> <sub>1-21-03</sub>

1. Owner Nuclear Management Company, LLC

Date 1/10/2002

2. Plant Praire Island Nuclear Generating Plant

Sheet 1 of 2

Name  
1717 Wakonade Dr. E, Welch Minnesota 55089  
Address

9403724

3. Work Performed by Owner

Repair Organization P.O. No., Job No., etc

Name  
Same

Type Code Symbol Stamp N/A

Authorization N/A

Expiration Date N/A

4. Identification of System RESIDUAL HEAT REMOVAL

Code Class 2

5. (a) Applicable Construction Code B31.1

1967 Edition

Addenda N/A

Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
LINE 6-SI-25A	NAVCO	N/A	N/A	WELD W-21	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REMOVED ROUNDED INDICATION BY FLAPPER WHEEL

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: NO PRESSURE TEST REQUIRED

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

1009  
ITEM 1-16-009 7-21-03

9. Remarks THE WELD WAS RE-EXAMINED WITH NAD ON ISI PT REPORT 94-0078R1 IN THE OUTAGE SUMMARY REPORT. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 4/5/02 to 4/5/02 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNE, MN039600-C0  
Inspector's Signature National Board, Province and Endorsements

Date 4/5/02

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/**  
**REPLACEMENT ACTIVITY**

ITEM 1-16-040 <sup>10/10</sup> <sub>7/21/03</sub>

1. Owner Nuclear Management Company, LLC

Date 1/10/2002

2. Plant Prairie Island Nuclear Generating Plant

Sheet 1 of 2

1717 Wakonade Dr E, Welch Minnesota 55089

9402982

Address

Repair Organization P.O. No., Job No., etc

3. Work Performed by Owner

Type Code Symbol Stamp N/A

Name

Authorization N/A

Same

Expiration Date N/A

Address

Code Class 3

4. Identification of System CR CHILLED WATER

5. (a) Applicable Construction Code B31 1

1967 Edition

Addenda N/A

Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1980 W/ W81 ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
#121 CW PMP FE	DIETERICH	N/A	N/A	FE-27051	N/A	INSTALLED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work Installed flow element in control room chilled water pump discharge piping

8. Tests conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☐ Pressure 132 psi Test Temp. ambient °F

Other: HYDROSTATIC PRESSURE TEST TO BE PERFORMED AT 1.10 x 120 PSI = 132 PSI

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM

1010  
1-16-010 1-27-03

9. Remarks This flow element was installed per design change 93L104. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 4/9/02 to 4/9/02 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

RCL

Inspector's Signature

Commissions NB 11872 ABNE, MN039600-C0

National Board, Province and Endorsements

Date 4/9/02

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/**  
**REPLACEMENT ACTIVITY**

ITEM 1011  
1-16-011 7-21-03

1. Owner Nuclear Management Company, LLC Date 1/10/2002  
Name  
 2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2  
Name  
1717 Wakonade Dr. E, Welch Minnesota 55089 9402983  
Address  
 3. Work Performed by Owner Repair Organization P.O. No., Job No., etc  
Name Type Code Symbol Stamp N/A  
Same Authorization N/A  
Address Expiration Date N/A  
 4. Identification of System CR CHILLED WATER Code Class 3  
 5. (a) Applicable Construction Code B31.1, 1967 Edition  
 Addenda N/A Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1980 W/ W81 ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
#122 CW PMP FE	DIETERICH	N/A	N/A	FE-27052	N/A	INSTALLED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work INSTALLED MODIFICATION 93L104

8. Tests conducted: Hydrostatic ☒ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐  
 Other ☐ Pressure 132 psi Test Temp. NOT °F

Other: HYDROSTATIC PRESSURE TEST TO BE PERFORMED AT 1.10 x 120 PSI = 132 PSI

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1011  
1-16-04 7-21-03

9. Remarks This flow element was installed per design change 93L104. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 4-4, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 4/5/02 to 4/5/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNT, MN039600-C0  
National Board, Province and Endorsements

Date 4/5/02



**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/**  
**REPLACEMENT ACTIVITY**

ITEM 1-16-012 <sup>1012</sup>

1. Owner Nuclear Management Company, LLC

Date 1/10/2002

2. Plant Praire Island Nuclear Generating Plant

Sheet 1 of 2

1717 Wakonade Dr. E, Welch Minnesota 55089

9402852

3. Work Performed by Owner  
Same

Repair Organization P.O. No., Job No., etc

Type Code Symbol Stamp N/A

Authorization N/A

Expiration Date N/A

4. Identification of System AUXILIARY FEEDWATER

Code Class 2

5. (a) Applicable Construction Code B31.1, 1967 Edition

Addenda N/A

Code Case N/A

(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 WITH NO ADDENDA

(c) Applicable Section XI Code Cases N/A

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
CHECK VALVE	POWELL	N/A	N/A	AF-16-2	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work DISASSEMBLY INSPECTION REPLACED BONNET BOLTING & PIN PLUG

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Non-code leakage test performed using SP 1174 6

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1012  
1-16-012  
7-21-03

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 4-5, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNI, MN039600-EO  
Inspector's Signature National Board, Province and Endorsements

Date 1/28/03

ITEM 1-16-1013

Date 1/10/2002

Sheet 1 of 2

9303662

Repair Organization P.O. No., Job No., etc

Type Code Symbol Stamp N/A

Authorization	N/A
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Expiration Date	N/A
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Code Class	2
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1967 Edition

Code Case N/A

(c) Applicable Section XI Code Cases	N/A
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[illegible]

Other ☐ Pressure                  psi      Test Temp.                  ° F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1013

9. Remarks THIS REPLACEMENT WAS IN RESPONSE TO NRC IEB 89-02. ALSO REPLACED BODY-TO-BONNET BOLTING. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN039600-CO  
National Board, Province and Endorsements

Date 1/28/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-1014

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>RESIDUAL HEAT REMOVAL</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/10/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9303661</u></p> <p>Repair Organization P.O. No., Job No , etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
11 RH Pump Suction Line	CRANE	N/A	N/A	RH-3-2	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REPLACED HINGE PIN BUSHINGS AND BRACKET BOLTING

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ F

Other: INSERVICE LEAKAGE TEST: LEAKAGE TEST WAS PERFORMED IAW SP1596

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in , (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1014

9. Remarks THIS REPLACEMENT WAS IN RESPONSE TO NRC IEB 89-02. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNT, MN 038600 CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/28/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2.OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-1016

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>ABB/COMBUSTION ENGR</u></p> <p style="text-align: center;">Name</p> <p><u>CHATTANOOGA, TN</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>REACTOR COOLANT</u></p> <p>5. (a) Applicable Construction Code <u>ASME SECTION III</u>, <u>1965</u> Edition</p> <p style="text-align: center;">Addenda <u>W/1966</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p> <p>6. Identification of Components</p>	<p>Date <u>1/10/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9402094</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p>
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Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
12 Steam Generator	WEST.	1101	68-24	134-012	N/A	CORRECTED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work INSTALLED 118 27" TUBE SLEEVES

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ F

Other: THE S/G SECONDARY SIDE IS TO BE FILLED ABOVE THE TUBE BUNDLE IF ANY SLEEVED TUBE EXHIBITS WATER LEAKAGE THEN A 700 PSI HYDRO TO BE PERFORMED

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1016

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ASME, MN035600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/28/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-1017

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>ABB/COMBUSTION ENGR</u></p> <p style="text-align: center;">Name</p> <p><u>CHATTANOOGA, TN</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>REACTOR COOLANT</u></p> <p>5. (a) Applicable Construction Code <u>ASME SECTION III</u>, 1965 Edition</p> <p style="text-align: center;">Addenda <u>W/1966</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/10/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403034</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No, etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p> <p>Code Case <u>N/A</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
12 Steam Generator	WEST.	1101	68-24	134-012	N/A	CORRECTED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work INSTALLED WELDED TUBE PLUG IN R17 C32 HOTLEG SIDE

8. Tests conducted:    Hydrostatic ☐    Pneumatic ☐    Nominal Operating Pressure ☐    Exempt ☐

Other ☒    Pressure \_\_\_\_\_ psi    Test Temp. \_\_\_\_\_ °F

Other: THE S/G SECONDARY SIDE IS TO BE FILLED ABOVE THE TUBE BUNDLE. IF ANY SLEEVED TUBE EXHIBITS WATER LEAKAGE THEN A 700 PSI HYDRO TO BE PERFORMED.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1017

9. Remarks THE PRESSURE TEST WAS PERFORMED IN ACCORDANCE WITH WO 9402094. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Willis, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions NB 11872 AGNE, MNQ35600-10  
National Board, Province and Endorsements

Date 1/28/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-1018

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>CHEM &amp; VOL CONTROL</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/10/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9405304</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
11 Regen Hx Letdown	COPEX-VULCAN	N/A	N/A	CV-31325	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REWORKED VALVE AND REPLACED 6 BODY-BONNET STUD AND NUTS

8. Tests conducted:    Hydrostatic ☐    Pneumatic ☐    Nominal Operating Pressure ☒    Exempt ☐

Other ☒    Pressure NOP psi    Test Temp. NOT °F

Other: INSERVICE LEAKAGE TEST PER SP1596

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1018

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ASNT, MN 035600-00  
National Board, Province and Endorsements

Date 1/28/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-1019

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>CHEM &amp; VOL CONTROL</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/10/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403111</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
11 VCT Relief Valve	CROSBY	51056 M2	N/A	VC-24-1	N/A	Corrected	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work Replaced 4 studs.

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: n/a

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1019

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MN 035600-CO  
National Board, Province and Endorsements

Date 1/28/03

ITEM 1-16-1020

Date 1/10/2002

Sheet - 1 of 2

9403728

Repair Organization P.O. No., Job No., etc

Type Code Symbol Stamp N/A

Authorization	N/A
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Expiration Date	N/A
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<b>Code Class</b>	<b>2</b>
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1967 Edition

Code Case N/A

(c) Applicable Section XI Code Cases	N/A
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[illegible]

Other ☐ Pressure                  psi      Test Temp.                  ° F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1020

9. Remarks TWO LINEAR INDICATIONS WERE REPORTED ON ISI EXAM SHEET 94-0115 ONE INDICATION. This repair/  
replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This  
nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel  
Inspectors and the State or Province of Minnesota and employed  
by HSB CT of Hartford Conn. have  
inspected the components described in this Owner's Report during the period 1/28/03 to  
1/28/03, and state that to the best of my knowledge and belief, the Owner has performed  
examinations and taken corrective measures described in this Owner's Report in accordance with the  
requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or  
implied, concerning the examinations and corrective measure described in the Owner's Report.  
Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of  
property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN 035600-00  
National Board, Province and Endorsements

Date 1/28/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-1021

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SAFETY INJECTION</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/10/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403726</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
Line 12-SI-27A	NAVCO	N/A	N/A	WELD W-3	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work -USED FLAPPER WHEEL TO REMOVE LINEAR INDICATION

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: n/a

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1021

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 AB NJ, MN039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/28/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-16-1022

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;"><u>Name</u></p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;"><u>Address</u></p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>Same</u></p> <p style="text-align: center;"><u>Address</u></p> <p>4. Identification of System <u>COOLING WATER</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;"><u>Addenda</u> <u>N/A</u> <u>Code Case</u> <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/10/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9400223</u></p> <p style="text-align: center;"><u>Repair Organization P.O. No., Job No., etc</u></p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>3</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
12 CL Strainer Backwash	JAMESBURY	N/A	N/A	CV-31653	1986	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REPLACED VALVE

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: n/a

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-16-1022

9. Remarks CANNOT FIND RECORD FOR ANY LEAKAGE TEST PERFORMED AFTER REPLACEMENT. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-23, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/28/03 to 1/28/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MN039600-C0  
National Board, Province and Endorsements

Date 1/28/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-001

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9503831</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-473	1969	Corrected	No

7. Description of Work Replaced cylinder

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9505623.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-001

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNS, MN039600-00  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-002

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9502134</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-157	1969	Corrected	No

7. Description of Work Replaced the piston, cylinder & short body .

8. Tests conducted.      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ ° F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9505623

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-002

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp NIA

Certificate of Authorization No. NIA Expiration Date NIA

Signed R. B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions MB 11872 ABNI, MN039600-C0  
National Board, Province and Endorsements

Date 1/15/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-003

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9503827</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-101	1969	Corrected	No

7. Description of Work Replaced the piston ~~E~~ CYLINDER ~~7-7-03~~

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9505623.

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-003

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

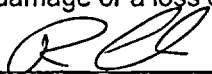
Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection



Inspector's Signature

Commissions NB11872 ABNI, MN039600-CO  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-004

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;"><u>Name</u></p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;"><u>Address</u></p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>Same</u></p> <p style="text-align: center;"><u>Address</u></p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;"><u>Addenda</u> <u>n/a</u> <u>Code Case</u> <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9503829</u></p> <p style="text-align: center;"><u>Repair Organization P.O. No., Job No , etc</u></p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-84	1969	Corrected	No

7. Description of Work Replaced the piston & cylinder.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ ° F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9505623

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-004

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 AB NI, and 039600-CO  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-005

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9503830</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-569	1969	Corrected	No

7. Description of Work Replaced the piston & cylinder.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9505623

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-005

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MAJ039600-CO  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-006

1. Owner Nuclear Management Company, LLC Date 11/29/2002  

Name
2. Plant Prairie Island Nuclear Generating Plant Sheet 1 of 2  

Name

1717 Wakonade Dr. E, Welch Minnesota 55089  

Address
3. Work Performed by Owner Repair Organization P.O. No., Job No., etc  

Name

Same  

Address
4. Identification of System SN Type Code Symbol Stamp N/A  
Authorization N/A  
Expiration Date N/A  
Code Class yes
5. (a) Applicable Construction Code B31 1, 1967 Edition  
Addenda n/a Code Case n/a  
(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda  
(c) Applicable Section XI Code Cases None

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-29	1969	Corrected	No

7. Description of Work Replaced the piston, valve block and cylinder.
8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9505623

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-006

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

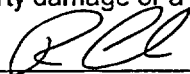
Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions NB 11872 ABNE, MN039600-CO  
National Board, Province and Endorsements

Date 1/15/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-007

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403861</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-407	1969	Corrected	No

7. Description of Work Replaced the piston and cylinder.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9505623

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-007

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Wilcox, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN 039600-Co  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-008

1. Owner Nuclear Management Company, LLC Date 11/29/2002  

Name
2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2  

Name

1717 Wakonade Dr E, Welch Minnesota 55089  

Address
3. Work Performed by Owner Repair Organization P.O. No., Job No., etc  

Name

Same  

Address
4. Identification of System SN Type Code Symbol Stamp N/A  

SN

Authorization N/A  
Expiration Date N/A  
Code Class yes
- 5 (a) Applicable Construction Code B31.1, 1967 Edition  

Addenda

n/a Code Case n/a  
(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda  
(c) Applicable Section XI Code Cases None

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-250	1969	Corrected	No

7. Description of Work Replaced the piston
  8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐  

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ ° F
- Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9505623.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-008

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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R. B. Willis Commissions NB 11872 ASME, MN 039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-009

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9503841</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-81	1969	Corrected	No

7. Description of Work Replaced the piston and cylinder.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9505623

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-009

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN039600-CO  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-010

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;"><u>Name</u></p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;"><u>Address</u></p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>Same</u></p> <p style="text-align: center;"><u>Address</u></p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;"><u>Addenda</u> <u>n/a</u></p> <p style="text-align: center;"><u>Code Case</u> <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9300735</u></p> <p style="text-align: center;"><u>Repair Organization P.O. No., Job No., etc</u></p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-364	1969	Corrected	No

7. Description of Work Replaced the piston.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9505623

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-010

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSC CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABJI, MN039600-CO  
National Board, Province and Endorsements

Date 1/15/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-011

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9404730</u> <u>7-03</u></p> <p><u>9300730</u></p> <p>Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-26	1969	Corrected	No

7. Description of Work Replaced the piston

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9505623.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-011

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

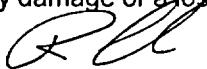
Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions NB 11872 ABWI, MN039600-CU  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-012

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403843</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No , etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-442	1969	Corrected	No

7. Description of Work Replaced the piston. E ROD 1-7-03

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9505623

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in , (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-012

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/15/03 to 1/15/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 AB, NJ, MN 039600-00  
National Board, Province and Endorsements

Date 1/15/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-13

1. Owner Nuclear Management Company, LLC  

Date 12/2/2002
2. Plant Prairie Island Nuclear Generating Plant  

Sheet 1 of 2

9505383
3. Work Performed by Owner  

Repair Organization P.O. No., Job No., etc
4. Identification of System SN  

Type Code Symbol Stamp N/A

Authorization N/A

Expiration Date N/A

Code Class 2
5. (a) Applicable Construction Code B31.1, 1967 Edition  

Code Case n/a
- (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda
- (c) Applicable Section XI Code Cases None

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-376		1-RCVCH-1871	1969	Removed	No
Snubber	Basic Engineers	PI-40		1-RCVCH-1871	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.
8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐  
Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505383

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-13

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions NB11872 ABNE, MN035600-CO  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-14

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505376</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-138		1-RCVCH-1073	1969	Removed	No
Snubber	Basic Engineers	PI-301		1-RCVCH-1073	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture

8. Tests conducted.      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505376.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-14

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN035600-00  
National Board, Province and Endorsements

Date 1/20/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-15

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505360</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-335		1-CVCH-180	1969	Removed	No
Snubber	Basic Engineers	PI-457		1-CVCH-180	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505360

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-15

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Willett, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ASME, MN 039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-16

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505372</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-34		1-CWH-385	1969	Removed	No
Snubber	Basic Engineers	PI-346		1-CWH-385	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505372

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-16

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R B Wilkins, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB11872 ABNZ, mw039600-Co  
Inspector's Signature National Board, Province and Endorsements

Date 1/20/03, \_\_\_\_\_

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-17

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505394</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-472		1-MSH-64	1969	Removed	No
Snubber	Basic Engineers	PI-473		1-MSH-64	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505394.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-17

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willard, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions NB 11872 ABNE, MN 039600-00  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-18

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505389</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-490		1-MSH-68B	1969	Removed	No
Snubber	Basic Engineers	PI-157		1-MSH-68B	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505389

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-18

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R B Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 AB-1E, MN 0396 00-CO  
National Board, Province and Endorsements

Date 1/20/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-19

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505358</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-329		1-MSDH-30	1969	Removed	No
Snubber	Basic Engineers	PI-120		1-MSDH-30	1969	Installed	No

7. Description of Work: Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505358.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-19

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R B Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R B Willis  
Inspector's Signature

Commissions NIB 11872 ABNT, WNO35600-CO  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-20

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505390</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-106		1-MSH-103A	1969	Removed	No
Snubber	Basic Engineers	PI-101		1-MSH-103A	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505390

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-20

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

N/A

Certificate of Authorization No.

N/A

Expiration Date

N/A

Signed

R. B. Williams

, ASME Program Engineer

Date

1-7

, 2003

Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature

Commissions

NB 11872 ABNI, MN035600-Co

National Board, Province and Endorsements

Date

1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-21

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505392</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-305		1-MSH-103B	1969	Removed	No
Snubber	Basic Engineers	PI-84		1-MSH-103B	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505392.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-21

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R B Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions NB 11872 ABNI, MN 039600-60  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-22

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;"><u>Name</u></p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;"><u>Address</u></p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>Same</u></p> <p style="text-align: center;"><u>Address</u></p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;"><u>Addenda</u> <u>n/a</u></p> <p style="text-align: center;"><u>Code Case</u> <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505393</u></p> <p style="text-align: center;"><u>Repair Organization P.O. No., Job No., etc</u></p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-360		1-MSH-101	1969	Removed	No
Snubber	Basic Engineers	PI-569		1-MSH-101	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505393

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-22

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MAJ035600-CO  
National Board, Province and Endorsements

Date 1/20/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-23

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505371</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-302		1-CWH-380	1969	Removed	No
Snubber	Basic Engineers	PI-29		1-CWH-380	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505371

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-23

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R B Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 AB, NE, MN 0396 00-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-24

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u></p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505370</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2-3</u></p> <p><u>1967</u> Edition <u>RC 1/20/13</u></p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-77		1-AFWH-82	1969	Removed	No
Snubber	Basic Engineers	PI-442		1-AFWH-82	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505370

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-24

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R B Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB11872 ABXI, MN039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-25

1. Owner Nuclear Management Company, LLC Date 12/2/2002
2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2
- Name  
1717 Wakonade Dr E, Welch Minnesota 55089 9505385
- Address  
Repair Organization P.O. No., Job No., etc
3. Work Performed by Owner Type Code Symbol Stamp N/A
- Name Same Authorization N/A
- Address SN Expiration Date N/A
4. Identification of System SN Code Class 2
5. (a) Applicable Construction Code B31 1, 1967 Edition
- Addenda n/a Code Case n/a
- (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda
- (c) Applicable Section XI Code Cases None
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-71		1-CWH-395	1969	Removed	No
Snubber	Basic Engineers	PI-407		1-CWH-395	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.
8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
- Other ☒ Pressure                  psi Test Temp.                  °F
- Other: Snubber was visually inspected per WO#9505385

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT.**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-25

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R B Willis, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, MN039600-C0  
National Board, Province and Endorsements

Date 1/20/03, \_\_\_\_\_

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-26

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505386</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-382		1-RCRH-21	1969	Removed	No
Snubber	Basic Engineers	PI-250		1-RCRH-21	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505386

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-26

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R B Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MN 039600-C0  
National Board, Province and Endorsements

Date 1/20/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-27

1. Owner Nuclear Management Company, LLC Date 12/2/2002
2. Plant Prairie Island Nuclear Generating Plant Sheet 1 of 2
- Name  
1717 Wakonade Dr. E, Welch Minnesota 55089  
Address  
9505359
3. Work Performed by Owner Same Repair Organization P.O. No., Job No., etc
- Name  
Type Code Symbol Stamp N/A  
Address  
Authorization N/A  
SN  
Expiration Date N/A  
Code Class 2
4. Identification of System
5. (a) Applicable Construction Code B31.1, 1967 Edition
- Addenda n/a Code Case n/a
- (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda
- (c) Applicable Section XI Code Cases None
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-328		1-RPCH-160	1969	Removed	No
Snubber	Basic Engineers	PI-327		1-RPCH-160	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacturer.
8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
- Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F
- Other: Snubber was visually inspected per WO#9505359.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-27

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp NIA

Certificate of Authorization No. NIA Expiration Date NIA

Signed R B Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MN 035600-00  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-28

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505378</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2-1</u></p> <p><u>1967</u></p> <p style="text-align: right;"><i>Re 1/20/03 Edition</i></p> <p>Code Case <u>n/a</u></p>
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6 Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-241		1-RPCH-23	1969	Removed	No
Snubber	Basic Engineers	PI-343		1-RPCH-23	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505378.

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-28

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNT, MN 035600-00  
National Board, Province and Endorsements

Date 1/20/03

## ITEM 1-17-29

Date 12/2/2002

Sheet 1 of 2 -

9505368

Repair Organization P.O. No., Job No., etc

Type Code Symbol Stamp N/A

Authorization	N/A
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Expiration Date	N/A
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<b>Code Class</b>	<b>2</b>
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1967 Edition

Code Case n/a

(c) Applicable Section XI Code Cases None

7. Description of Work	Replaced snubber with pre-tested spare of same model/manufacturer.
------------------------	--

Other ☒ Pressure      psi      Test Temp.      ° F

**Other:** Snubber was visually inspected per WO#9505368.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-29

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 AB NJ, md 039600-CO  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-30

1. Owner Nuclear Management Company, LLC Date 12/2/2002  

Name
2. Plant Prairie Island Nuclear Generating Plant Sheet 1 of 2  

Name

1717 Wakonade Dr E, Welch Minnesota 55089 9505384  

Address
3. Work Performed by Owner Repair Organization P.O. No., Job No., etc  

Name

Same
4. Identification of System SN Type Code Symbol Stamp N/A  

Address
5. (a) Applicable Construction Code B31 1, 1967 Authorization N/A  

Addenda

n/a Code Class 2-1  

Code Case

n/a RC 1/20/03  

Edition
- (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda
- (c) Applicable Section XI Code Cases None

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-136		1-SIRH-23A	1969	Removed	No
Snubber	Basic Engineers	PI-81		1-SIRH-23A	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.
8. Tests conducted. Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505384.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-30

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNJ, MN 035600-C0  
Inspector's Signature National Board, Province and Endorsements

Date 1/20/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-31

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505375</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-384		1-RCRH-5B	1969	Removed	No
Snubber	Basic Engineers	PI-26		1-RCRH-5B	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505375

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-31

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSA CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R. B. Williams Commissions NB 11872 ABNI, MW039600-C0  
Inspector's Signature National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-32

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505373</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers	PI-225		1-RCRH-12B	1969	Removed	No
Snubber	Basic Engineers	PI-27		1-RCRH-12B	1969	Installed	No

7. Description of Work Replaced snubber with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505373.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-32

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNE, mN039600-C0  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-33

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505631</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber block valve	Bergan Patterson	PI-SG12		11S/G04	1969	Removed	No
Snubber block valve	Bergan Patterson	PI-SG18		11S/G04	1969	Installed	No

7. Description of Work Replaced snubber block valve with pre-tested spare of same model/manufacture.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505531.

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-33

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection

[Signature]  
Inspector's Signature

Commissions NB11872 ABNT, AN039600-C0  
National Board, Province and Endorsements

Date 1/20/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-34

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>12/2/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9505632</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber block valve	Bergan Patterson	PI-SG15		12S/G04	1969	Removed	No
Snubber block valve	Bergan Patterson	PI-SG12		12S/G04	1969	Installed	No

7. Description of Work Replaced snubber block valve with pre-tested spare of same model/manufacturer.

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber was visually inspected per WO#9505532.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-17-34

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-7, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/20/03 to 1/20/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB11872 ABNI, MW035600-C0  
National Board, Province and Endorsements

Date 1/20/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1001

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;"><u>Name</u></p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;"><u>Address</u></p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>Same</u></p> <p style="text-align: center;"><u>Address</u></p> <p>4. Identification of System <u>AUX FEED WATER</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;"><u>Addenda</u> <u>N/A</u> <u>Code Case</u> <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/25/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9502520</u></p> <p style="text-align: center;"><u>Repair Organization P.O. No., Job No., etc</u></p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
AF To 11 SG Check Valve	POWELL	N/A	N/A	AF-16-1	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REMOVED AND REPLACED BODY-BONNET BOLTING.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☒

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: n/a

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1001

9. Remarks THIS VALVE WAS FURMANITED AT THE GASKET AREA AND LATER REPAIRED UNDER WO. This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-27 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNI, MN 039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/30/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1004

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>COOLING WATER</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/25/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9502443</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>3</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
11 CL Strainer Backwash CV	JAMESBURY	N/A	N/A	CV-31652		Removed	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11 CL Strainer Backwash CV	JAMESBURY	N/A	N/A	CV-31652	1994	Installed	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work Replaced valve

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ F

Other: NON CODE LEAKAGE TEST PERFORMED ON WO# 9407704

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1004

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI This nonconformance is documented in plant action request OTH000224

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Wellish, ASME Program Engineer Date 1-27, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNT, MN 039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/30/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1005

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>COOLING WATER</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/25/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403987, 9303873</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>3</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
13 FCU CL Outlet Isolation	ANCHOR DARLING	N/A	N/A	MV-32139	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work Replaced bonnet nuts and tack welded valve internals.

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: HYDRO PERFORMED IN WO #9401688

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1005

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-27, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MN 039600-CO  
National Board, Province and Endorsements

Date 1/30/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1006

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>MAIN STEAM</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p> <p>6. Identification of Components</p>	<p>Date <u>1/25/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9600254</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
12 SG MS Relief Valve	DRESSER	BR6307		RS-21-8	1976	INSTALLED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 SG MS Relief Valve	DRESSER	BM9534		RS-21-8	1969	REMOVED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REPLACED VALVE WITH NEW VALVE FROM SPARE INVENTORY.

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: n/a

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1006

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-27, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNE, MN 039600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 1/30/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1008

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>REACTOR COOLANT</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>1/25/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9509695</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
11 Pressurizer Relief Valve	CROSBY			RC-10-1		REMOVED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 Pressurizer Relief Valve	CROSBY			RC-10-2		REMOVED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 Pressurizer Relief Valve	CROSBY	1RV-8010A		RC-10-1		INSTALLED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12 Pressurizer Relief Valve	CROSBY	N57872-00-0001		RC-10-2		INSTALLED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REPLACED VALVES WITH PRETESTED SPARE RELIEF VALVES.

8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒

Other ☐ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: INSERVICE LEAKAGE TEST TO BE PERFORMED IAW SP1596.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1008

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-30, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNT, MN039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/30/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1009

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>ABB/COMBUSTION ENGR</u></p> <p style="text-align: center;">Name</p> <p><u>CHATTANOOGA, TN</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>REACTOR COOLANT</u></p> <p>5. (a) Applicable Construction Code <u>ASME SECTION III</u>, 1965 Edition</p> <p style="text-align: center;">Addenda <u>W/1966</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p> <p>6. Identification of Components</p>	<p>Date <u>2/13/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9509189, 95SG01</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p> <p>Code Case <u>N/A</u></p>
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Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
12 Steam Generator	Westinghouse	1101	68-24	134-012	N/A	CORRECTED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work INSTALLED 285 27" TUBE SLEEVES.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: THE S/G SECONDARY SIDE IS TO BE FILLED ABOVE THE TUBE BUNDLE. A >500 PSI HYDRO TO BE PERFORMED.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1009

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-27, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABN I, MW 039600-00  
National Board, Province and Endorsements

Date 1/30/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1010

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>FRAMATONE</u></p> <p style="text-align: center;">Name</p> <p><u>LYNCHBURG, VA</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>REACTOR COOLANT</u></p> <p>5. (a) Applicable Construction Code <u>ASME SECTION III</u>, 1965 Edition</p> <p style="text-align: center;">Addenda <u>W/1966</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p> <p>6. Identification of Components</p>	<p>Date <u>2/13/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9600756, 96SG01</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>1</u></p> <p>Code Case <u>N/A</u></p>
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Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
12 Steam Generator	Westinghouse	1101	68-24	134-012	N/A	CORRECTED	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work INSTALLED WELDED TUBE PLUGS.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: PRESSURE RAISED ON SECONDARY SIDE OF S/G TO 530 PSI VISUAL INSPECTION FOR LEAKAGE PERFORMED.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1010

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 1-27, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB11872 AB1E, MN037600-EO  
National Board, Province and Endorsements

Date 1/30/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1011

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>CHEM &amp; VOL CONTROL</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>N/A</u> Code Case <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>2/13/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9506114</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>2</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
Line 2-VC-72B	NAVCO	N/A	N/A	2-VC-72B	N/A	CORRECTED	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work Replaced pipe and fittings.

8. Tests conducted:      Hydrostatic ☒      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☐      Pressure 158 psi      Test Temp. AMB. °F

Other: n/a

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1011

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-27, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNI, PM039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/30/03



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-17-1012

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;"><u>Name</u></p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;"><u>Address</u></p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;"><u>Name</u></p> <p><u>Same</u></p> <p style="text-align: center;"><u>Address</u></p> <p>4. Identification of System <u>ZH</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;"><u>Addenda</u> <u>N/A</u> <u>Code Case</u> <u>N/A</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 WITH NO ADDENDA</u></p> <p>(c) Applicable Section XI Code Cases <u>N/A</u></p>	<p>Date <u>2/13/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9502628</u></p> <p style="text-align: center;"><u>Repair Organization P.O. No , Job No., etc</u></p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>3</u></p>
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### 6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped	
							YES	NO
ZH Piping	NAVCO	N/A	N/A	1 1/2-ZH-105	N/A	Corrected	<input type="checkbox"/>	<input checked="" type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

7. Description of Work REMOVED AND RE-INSTALLED PIPING SECTION.

8. Tests conducted:      Hydrostatic ☒      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☐      Pressure 132 psi      Test Temp. AMB. °F

Other: n/a

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT  
FORM NIS-2 OWNER'S REPORT FOR REPAIR/  
REPLACEMENT ACTIVITY**

ITEM 1-17-1012

9. Remarks This repair/ replacement activity was not submitted with the proper Summary Report as required by ASME Section XI. This nonconformance is documented in plant action request OTH000224.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 1-27, 2003  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 1/30/03 to 1/30/03, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNE, MW039600-00  
Inspector's Signature National Board, Province and Endorsements

Date 1/30/03

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-001

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9404708</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6 Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-204	1969	Corrected	No

7. Description of Work Replaced the piston

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9704769.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-001

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 12-17, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 AB NI, MNO39600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 12/18/02

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-002

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, Addenda <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403845</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p> <p><u>1967</u> Edition</p> <p>Code Case <u>n/a</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-207	1969	Corrected	No

7. Description of Work, Replaced the piston.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9704769.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-002

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Wilkins, ASME Program Engineer Date 12-17, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn. have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R.B. Wilkins Commissions NB 11872 ABNI, MND39600-CO  
Inspector's Signature National Board, Province and Endorsements

Date 12/18/02

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-003

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403846</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-68	1969	Corrected	No

7. Description of Work Replaced the piston

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9704769.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-003

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Willis, ASME Program Engineer Date 12-17-02,  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection



Inspector's Signature

Commissions NB 11872 ABNI, MN039600-CO  
National Board, Province and Endorsements

Date 12/18/02



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-004

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31.1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u> Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403849</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-38	1969	Corrected	No

7. Description of Work. Replaced the piston.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9704769.

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-004

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 12-17, 02  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

R. B. Williams  
Inspector's Signature

Commissions NB 11872 ABNT, MN 039600-CO  
National Board, Province and Endorsements

Date 12/18/02

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-005

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Praire Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr. E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>9403851</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-441	1969	Corrected	No

7. Description of Work Replaced the piston.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☒      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9704769.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-005

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Wiland, ASME Program Engineer Date 12-17, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 AB NI, MNO 39600-CO  
National Board, Province and Endorsements

Date 12/18/02

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-006

<p>1. Owner <u>Nuclear Management Company, LLC</u></p> <p style="text-align: center;">Name</p> <p>2. Plant <u>Prairie Island Nuclear Generating Plant</u></p> <p style="text-align: center;">Name</p> <p><u>1717 Wakonade Dr E, Welch Minnesota 55089</u></p> <p style="text-align: center;">Address</p> <p>3. Work Performed by <u>Owner</u></p> <p style="text-align: center;">Name</p> <p><u>Same</u></p> <p style="text-align: center;">Address</p> <p>4. Identification of System <u>SN</u></p> <p>5. (a) Applicable Construction Code <u>B31 1</u>, <u>1967</u> Edition</p> <p style="text-align: center;">Addenda <u>n/a</u></p> <p style="text-align: center;">Code Case <u>n/a</u></p> <p>(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity <u>1989 With No Addenda</u></p> <p>(c) Applicable Section XI Code Cases <u>None</u></p>	<p>Date <u>11/29/2002</u></p> <p>Sheet <u>1</u> of <u>2</u></p> <p><u>94038517</u> <u>12-17-02</u></p> <p style="text-align: center;">Repair Organization P.O. No., Job No., etc</p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Authorization <u>N/A</u></p> <p>Expiration Date <u>N/A</u></p> <p>Code Class <u>yes</u></p>
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6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-37	1969	Corrected	No

7. Description of Work Replaced the piston.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Other ☐      Pressure \_\_\_\_\_ psi      Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9704769

NOTE. Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-006

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willard, ASME Program Engineer Date 12-17, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions NB 11872 ABNI, MN039600-CO  
National Board, Province and Endorsements

Date 12/18/02

ITEM 1-18-007

Date 11/29/2002

Sheet 1 of 2 -

9403852

Repair Organization P.O. No., Job No., etc

Type Code Symbol Stamp N/A

Authorization	N/A
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Expiration Date	N/A
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Code Class	yes
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1967 Edition

Code Case n/a

t Activity      1989 With No Addenda

ASME

Other	Year	Removed, or	Stamped
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[illegible]

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7. Description of Work: Replaced the piston and valve block.

8. Tests conducted:      Hydrostatic ☐      Pneumatic ☐      Nominal Operating Pressure ☐      Exempt ☐

Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

Other ☒ Pressure      psi      Test Temp.      ° F

**Other:** Snubber will be functionally tested after reassembly. Test results will be attached to work order 9704769

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-007

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.B. Williams, ASME Program Engineer Date 12-17, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions NB 11872 ABNT, MN039600-C0  
Inspector's Signature National Board, Province and Endorsements

Date 12/18/02



# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-008

1. Owner Nuclear Management Company, LLC Date 11/29/2002  

Name
2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2  

Name

1717 Wakonade Dr. E, Welch Minnesota 55089 9403863  

Address

Repair Organization P.O. No., Job No., etc
3. Work Performed by Owner Type Code Symbol Stamp N/A  

Name

Same Authorization N/A  

Address

SN Expiration Date N/A  
4. Identification of System SN Code Class yes
5. (a) Applicable Construction Code B31 1, 1967 Edition  

Addenda

n/a Code Case n/a  
(b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda  
(c) Applicable Section XI Code Cases None
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-176	1969	Corrected	No

7. Description of Work Replaced the piston and valve block.
8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐  
Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly Test results will be attached to work order 9704769.

NOTE Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form.

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

ITEM 1-18-008

9. Remarks

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No N/A Expiration Date N/A

Signed R.B. Willard, ASME Program Engineer Date 12-17, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure described in the Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury of property damage or a loss of any kind arising from or connected with this inspection.

[Signature]  
Inspector's Signature

Commissions NB 11872 ABNI, MD039600-CO  
National Board, Province and Endorsements

Date 12/18/02

# PRAIRIE ISLAND NUCLEAR GENERATING PLANT

## FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY

ITEM 1-18-009

1. Owner Nuclear Management Company, LLC Date 11/29/2002
- Name
2. Plant Praire Island Nuclear Generating Plant Sheet 1 of 2
- Name
- 1717 Wakonade Dr. E, Welch Minnesota 55089 9403865
- Address
3. Work Performed by Owner Repair Organization P.O. No., Job No., etc
- Name
- Same Type Code Symbol Stamp N/A
- Address
4. Identification of System SN Authorization N/A
- SN
- Expiration Date N/A
5. (a) Applicable Construction Code B31 1, 1967 Edition
- Addenda n/a Code Case n/a
- (b) Applicable Edition of Section XI Utilized for Repair/Replacement Activity 1989 With No Addenda
- (c) Applicable Section XI Code Cases None
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber	Basic Engineers			PI-178	1969	Corrected	No

7. Description of Work Replaced the piston.
8. Tests conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
- Other ☒ Pressure \_\_\_\_\_ psi Test Temp. \_\_\_\_\_ °F

Other: Snubber will be functionally tested after reassembly. Test results will be attached to work order 9704769.

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in x 11 in, (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at the top of this form

**PRAIRIE ISLAND NUCLEAR GENERATING PLANT**  
**FORM NIS-2 OWNER'S REPORT FOR REPAIR/ REPLACEMENT ACTIVITY**

9. Remarks

ITEM 1-18-009

n/a

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. B. Williams, ASME Program Engineer Date 12-17, 2002  
Owner or Owner's Designee, Title

**CERTIFICATE OF INSERVICE INSPECTION**

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Minnesota and employed by HSB CT of Hartford Conn have inspected the components described in this Owner's Report during the period 12/18/02 to 12/18/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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Inspector's Signature

Commissions NB 11872 ABNE, MN039600-CO

National Board, Province and Endorsements

Date 12/18/02