Tennessee Valley Authority, Post Office Box 2000, Soddy-Daisy, Tennessee 37384-2000

February 15, 2005

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, D.C. 20555

Gentlemen:

In the Matter of ) Docket No. 50-327
Tennessee Valley Authority )

**SEQUOYAH NUCLEAR PLANT (SQN) - UNIT 1 CYCLE 13 (U1C13) 90-DAY INSERVICE INSPECTION (ISI) SUMMARY REPORT**

In accordance with the American Society of Mechanical Engineers (ASME) Boiler and Pressure Vessel Code, Section XI, Article IWA-6230, TVA is providing the SQN ISI Summary Report within 90 days from completion of the inspections performed during the U1C13 refueling outage. The summary report contains an overview of the in-service examinations and augmented non-destructive examination results that were performed on ASME Class 1 and 2 components from June 17, 2003, to November 20, 2004. This report also contains a summary of ASME Section XI steam generator tube examinations (Appendix A), a report of the repair and replacement activities (Appendix B), a pressure test report (Appendix C), and the IWE metal containment evaluations (Appendix D).

This report does not contain TVA commitments. Please direct questions concerning this issue to me at (423) 843-7170 or J. D. Smith at (423) 843-6672.

Sincerely,

Paul L. Pace
Manager, Site Licensing and
Industry Affairs Manager

Enclosure
cc: See page 2

A047

cc (Enclosure):
Mr. Douglas V. Pickett, Senior Project Manager
U.S. Nuclear Regulatory Commission
Mail Stop 08G9
One White Flint North
11555 Rockville Pike
Rockville, Maryland 20852-2739

ENCLOSURE

TENNESSEE VALLEY AUTHORITY (TVA)
SEQUOYAH NUCLEAR PLANT (SQN)
UNIT 1

ASME SECTION XI
INSERVICE INSPECTION SUMMARY REPORT
FROM UNIT 1 CYCLE 13

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# ASME SECTION XI

# INSERVICE INSPECTION SUMMARY REPORT FOR SEQUOYAH NUCLEAR PLANT

# UNIT 1 CYCLE 13

DATE OF COMPLETION OF REPORT 1/28/2005

PREPARED BY _____
SYSTEM ENGINEER, COMPONENT (ISI)

REVIEWED BY _____
ISO NDE LEVEL III

REVIEWED BY _____
ISO ISI/NDE SUPERVISOR

REVIEWED BY Jeffrey C Norlat FOR RICHARD M. EMRATH PER TELECON
MATERIALS TECHNOLOGY AND CODES

APPROVED BY _____
COMPONENT ENGINEERING MANAGER

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# TABLE OF CONTENTS

# FORM NIS-1 OWNERS' REPORT FOR INSERVICE INSPECTIONS
As required by the Provisions of the ASME Code Rules

1. Owner Tennessee Valley Authority, 1101 Market St. Chattanooga, TN. 37402-2801
(Name and Address of Owner)

2. Plant Sequoyah Nuclear Plant, P.O. Box 2000, Soddy Daisy, Tennessee 37384-2000
(Name and Address of Plant)

3. Plant Unit ONE (1) 4. Owner Certificate of Authorization (if required) Not Required

5. Commercial Service Date July 1, 1981 6. National Board Number for Unit No Number Assigned

7. Components Inspected:

| Component or Appurtenance | Manufacturer or Installer | Manufacturer or Installer Serial No. | State or Province No. | National Board No. |
|---|---|---|---|---|
| Reactor Vessel | Westinghouse | 30-616 | N/A | N/A |
| Steam Generator | Doosan Heavy Industries (Westinghouse) | NF7N01-01<br>NF7N01-02<br>NF7N01-03<br>NF7N01-04 | N/A | 1653<br>1654<br>1655<br>1656 |
| Pressurizer | Westinghouse | 1331 | N/A | 68-102 |
| See Section 2 (Examination Plan) for remaining components | Tennessee Valley Authority | N/A | N/A | N/A |
| See Appendix C for pressure test | Tennessee Valley Authority | N/A | N/A | 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 the number of sheets is recorded at the top of this form.

## FORM NIS-1 (back)

8. Examination Dates June 17, 2003 to November 20, 2004

9. Inspection Period Identification: Third Period

10. Inspection Interval Identification: Second Interval

11. Applicable Edition of Section XI 1989 Addenda N/A

12. Date/Revision of Inspection Plan: Scan Plan Revision 1, dated November 23, 2004

13. Abstract of Examinations and Tests. Includes a list of examinations and tests and a statement concerning status of work required for Inspection Plan. See Introduction/Summary of Inservice Inspections. Examination status is on schedule. Examinations performed complete the second outage of the third period of the second inspection interval.

14. Abstract of Results of Examinations and Tests. See Introduction/Summary of Inservice Inspections

15. Abstract of Corrective Measures. See Introduction/Summary of Inservice Inspections

We certify that a) the statements made in this report are correct b) the examinations and tests meet the Inspection Plan as required by ASME Code, Section XI, and c) corrective measures taken conform to the rules of the ASME Code, Section XI.

Certificate of Authorization No. (if applicable) N/A Expiration Date N/A

Date 1/27/2005 Signed TVA Owner By

## 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 Tennessee and employed by HSB CT of Hartford CT have inspected the components described in this Owners' Data Report during the period June 17, 2003 to Nov. 20, 2004, and state that to the best of my knowledge and belief, the Owner has performed examinations and tests and taken corrective measures described in this Owner's Report in accordance with the Inspection Plan and as required by 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 tests, and corrective measures described in this Owner's Report. Furthermore, neither the Inspector now 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.

James N. McInnes
Inspector's Signature

Commissions TN 2693
National Board, State, Province and Endorsements

Date Jan. 27 2005

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SCOPE, INTRODUCTION AND SUMMARY OF INSERVICE EXAMINATIONS

| | | | |
|---|---|---|---|
| OWNER: | TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: | SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED | |

## Scope:

This overview is for the Inservice Examinations performed during the Unit 1 Cycle 13 for Class 1 and 2 components as required by 0-SI-DXI-000-114.2 "ASME Section XI ISI/NDE Program Unit 1 and Unit 2", SPP-9.1 "ASME Section XI and Augmented Nondestructive Examination Program", and IWA-6220 of ASME Section XI, 1989 Edition. This report also includes steam generator tubing eddy current examinations in Appendix A, repairs and replacements performed in Appendix B, pressure test examinations in Appendix C, and the IWE metal containment evaluations in accordance with 10CFR 50.55a(b)(2)(ix) in Appendix D.

## Introduction:

The code of record for the second inspection interval which began December 16, 1995, is the 1989 Edition of the ASME Boiler and Pressure Vessel Code, Section XI, Division 1. Starting April 12, 2002 the NDE techniques, qualification of personnel, weld reference system, and standards for examination are in accordance with 1995 Edition of ASME Section XI through the 1996 Addenda.

The Unit 1 Cycle 13 inservice examinations were performed during the period from June 17, 2003 to November 20, 2004. This report also includes repairs and replacements and pressure tests performed during this period. The Unit 1 Cycle 13 Refueling Outage began when the generator was taken off line on October 25, 2004. The outage was completed on November 20, 2004, when the generator was tied to the power grid. The inservice examinations which include risk-informed inservice inspection examinations were performed to the implementing plant Surveillance Instruction, 0-SI-DXI-000-114.2, "ASME Section XI ISI/NDE Program Unit 1 and Unit 2" revisions 17 thru 21. The steam generator tubing eddy current examinations are discussed in Appendix A. Repairs and replacements are discussed in Appendix B. Pressure test examinations are discussed in Appendix C. The IWE metal containment evaluations are discussed in Appendix D. Examinations performed during this cycle satisfy the inspection requirements for the second outage of the third period of the Second 10 Year Inspection Interval as defined in 0-SI-DXI-000-114.2.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

The Authorized Inspection Agency (AIA), Hartford Steam Boiler Inspection and Insurance Company of Connecticut (HSB CT), provided the following ANIIs:

Michael Lockwood and Jim Myhan
HSB CT
200 Ashford Center North, Suite 205
Atlanta, Georgia 30338-4860

**Summary:**

Unit 1 Cycle 13 was the second scheduled refueling outage during the third inspection period of the second Ten Year ISI Interval. Class 1 and 2 components were examined in accordance with 0-SI-DXI-000-114.2, "ASME Section XI ISI/NDE Program Unit 1 and Unit 2". A summary listing of examinations performed for code credit are listed in **SECTION 1.** The examinations were performed to TVA approved procedures. The class 1 and 2 components examined and results for this inservice inspection outage are listed in **SECTION 2.** There were five notice of indications generated for ASME Section XI, Class 1 and 2 examinations. See **SECTION 3** for the notice of indications summary. See **SECTION 4** for the additional samples summary. See **SECTION 5** for the successive examinations summary. No regulatory required augmented examinations were performed which require submittal to the regulatory authority (Reference **SECTION 6**). There were no ASME Class 1, 2, or 3 equivalent components for which examination results required acceptance by analytical evaluation (IWB-3132.4, IWB-3142.4, IWC-3122.4, IWC-3132.4 or IWD-3000) (Reference **SECTION 7**). One component did not receive the code required examination coverage (see **SECTION 8**).

For Unit 1 Cycle 13 steam generator tubing eddy current examinations results and number of tubes examined see **Appendix A.**

For repairs and replacements performed see **Appendix B.**

For Unit 1 Cycle 13 pressure test results see **Appendix C.**

For Unit 1 Cycle 13 IWE metal containment evaluations see **Appendix D.**

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 1

# EXAMINATION SUMMARY

- Examination Credit Summary
- Examination Code Category and Item Number Summary

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

The completion of examinations as required by the inspection plan for the second outage of the third period of the second interval is on schedule. The examination category and number of examinations for the second interval and the third period for the following summary are based on 0-SI-DXI-000-114.2 revision 21.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

| CATEGORY | TOTAL NUMBER REQUIRED FOR INTERVAL | TOTAL NUMBER CREDITED FOR THE INTERVAL | TOTAL NUMBER REQUIRED FOR THIRD PERIOD (U1C12, U1C13 and U1C14) | TOTAL NUMBER CREDITED FOR THE THIRD PERIOD (U1C12 and U1C13) | TOTAL NUMBER CREDITED FOR U1C13 OF THE THIRD PERIOD | EXCLUSIONS EXCEPTIONS OR DEFERRALS |
|---|---|---|---|---|---|---|
| B-A | 14 | 1 | 13 | 0 | 0 | deferral permissible |
| B-B | 5 | 5 | 2 | 2 | 0 | |
| B-D | 36<br>**see note 12** | 20<br>**see notes 12 and 19** | 24<br>**see note 19** | 8<br>**see note 19** | 0<br>**see note 19** | Code Case N-521 |
| B-E<br>See Appendix C | **see note 31** | **see note 31** | | | | |
| B-F | 22<br>**see note 11** | 4<br>**see note 11** | N/A<br>**see note 11** | N/A<br>**see note 11** | N/A<br>**see note 11** | Code Case N-521 |
| B-G-1 | RV (216)<br>RCP (25)<br>**see note 10** | RV (216)<br>RCP (25) | RV (72) | RV (72) | 0 | RCP only when B-L-2 examination performed |
| B-G-2 | PZR (1)<br>SG (2)<br><br>RCP (2)<br>Valves (6)<br><br>Piping (13) | PZR (1)<br>SG (2)<br>**see note 20**<br>RCP (2)<br>Valves (4)<br>**see note 1**<br>Piping (13) | <br>SG (1)<br>**see note 20**<br><br>Valves (2)<br><br>Piping (6) | <br>SG (1)<br>**see note 20**<br><br><br><br>Piping(6 ) | 0<br>0<br><br>0<br>0<br><br>0 | valves when B-M-2 examination performed or in place during cycle 14 |
| B-H, see B-K of Code Case N-509 | | | | | | |
| B-J | 261<br>**see notes 2, 11 and 27** | 81<br>**see notes 3, 11 and 13** | N/A<br>**see note 11** | N/A<br>**see note 11** | N/A<br>**see note 11** | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

(continued)

| CATEGORY | TOTAL NUMBER REQUIRED FOR INTERVAL | TOTAL NUMBER CREDITED FOR THE INTERVAL | TOTAL NUMBER REQUIRED FOR THIRD PERIOD (U1C12, U1C13 and U1C14) | TOTAL NUMBER CREDITED FOR THE THIRD PERIOD (U1C12 and U1C13) | TOTAL NUMBER CREDITED FOR U1C13 OF THE THIRD PERIOD | EXCLUSIONS EXCEPTIONS OR DEFERRALS |
|---|---|---|---|---|---|---|
| B-K-1, see B-K of Code Case N-509 | | | | | | |
| B-K of Code Case N-509 | 7 | 7 | 3 | 3 | 0 | |
| B-L-1 per Code Case N-481 | 1 - internal surface when disassembled<br>1- external surface | 1 (internal surface)<br>**see note 18** | 1- external surface | 0 | 0 | deferral permissible: examine only if pump disassembled |
| B-L-2 | 1 | 1 | 0 | 0 | 0 | deferral permissible: examine only if pump disassembled |
| B-M-1 | N/A | | | | | |
| B-M-2 | 6 | 4 | 2 | 0 | 0 | deferral permissible: examine only if valve disassembled, |
| B-N-1 | Three - 1 each period | 1 (first period)<br>1 (second period) | 1(third period) | 0 | 0 | |
| B-N-2 | 6 | 0 | 6 | 0 | 0 | deferral permissible |
| B-N-3 | 1 | 0 | 1 | 0 | 0 | deferral permissible |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

(continued)

| CATEGORY | TOTAL NUMBER REQUIRED FOR INTERVAL | TOTAL NUMBER CREDITED FOR THE INTERVAL | TOTAL NUMBER REQUIRED FOR THIRD PERIOD (U1C12, U1C13 and U1C14) | TOTAL NUMBER CREDITED FOR THE THIRD PERIOD (U1C12 and U1C13) | TOTAL NUMBER CREDITED FOR U1C13 OF THE THIRD PERIOD | EXCLUSIONS EXCEPTIONS OR DEFERRALS |
|---|---|---|---|---|---|---|
| B-O | 2 | 0 | 2 | 0 | 0 | deferral permissible |
| B-P, see Appendix C | | | | | | |
| B-Q, see Appendix A | | | | | | |
| C-A | 19 **see notes 4, 14 and 21** | 16 **see note 14** | 8 | 5 | 1 | |
| C-B | 14 **see note 4 and 15** | 12 **see note 15** | 5 | 3 | 3 | |
| C-C see C-C of Code Case N-509 | | | | | | |
| C-C of Code Case N-509 | 31 **see note 4, 16 and 17** | 29 | 14 | 12 | 7 | |
| C-D | 1 | 1 | 0 | 0 | 0 | |
| C-F-1 | 143 **see notes 5, 9 and 11** | 45 **see note 11** | N/A **see note 11** | N/A **see note 11** | N/A **see note 11** | |
| C-F-2 | 29 **see note 11** | 9 **see note 11** | N/A **see note 11** | N/A **see note 11** | N/A **see note 11** | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

(continued)

| CATEGORY | TOTAL NUMBER REQUIRED FOR INTERVAL | TOTAL NUMBER CREDITED FOR THE INTERVAL | TOTAL NUMBER REQUIRED FOR THIRD PERIOD (U1C12, U1C13 and U1C14) | TOTAL NUMBER CREDITED FOR THE THIRD PERIOD (U1C12 and U1C13) | TOTAL NUMBER CREDITED FOR U1C13 OF THE THIRD PERIOD | EXCLUSIONS EXCEPTIONS OR DEFERRALS |
|---|---|---|---|---|---|---|
| C-G | N/A | | | | | |
| C-H, see Appendix C | | | | | | |
| F-A see F-A of Code Case N-491 | | | | | | |
| F-A of Code Case N-491 | 195*<br>*Class 1 and 2 only<br>**see notes 4, 7 and 22** | 192<br>**see notes 6, 8 and 23** | 70 | 67 | 19 | |
| R-A R1.11(UT) | 70 Elements **see notes 11 and 24** | 41<br>**see note 25** | 24 | 16 | 3 | |
| R-A R1.11(VT) | 50 Segments **see notes 11 and 28** | All each refueling outage | See Appendix C | See Appendix C | See Appendix C | |
| R-A R1.12(VT) | 29 Segments **see notes 11 and 29** | All each refueling outage | See Appendix C | See Appendix C | See Appendix C | |
| R-A R1.13 | N/A | | | | | |
| R-A R1.14 | N/A | | | | | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

(continued)

| CATEGORY | TOTAL NUMBER REQUIRED FOR INTERVAL | TOTAL NUMBER CREDITED FOR THE INTERVAL | TOTAL NUMBER REQUIRED FOR THIRD PERIOD (U1C12, U1C13and U1C14) | TOTAL NUMBER CREDITED FOR THE THIRD PERIOD (U1C12 and U1C13) | TOTAL NUMBER CREDITED FOR U1C13 OF THE THIRD PERIOD | EXCLUSIONS EXCEPTIONS OR DEFERRALS |
|---|---|---|---|---|---|---|
| R-A R1.15 | N/A | | | | | |
| R-A R1.16 | 6 Elements **see note 11, 26 and 30** | 3 **see note 30** | 2 | 2 | 2 | |
| R-A R1.17 | N/A | | | | | |
| R-A R1.18 | 16 Segments **see note 11** | As scheduled in FAC program | As scheduled in FAC program | As scheduled in FAC program | As scheduled in FAC program (3 segments examined) | |

Notes:

1. Credit taken only for the studs on valve 63-632 examined in examination category B-G-2 during U1C8.
2. Piping modification in U1C10 of the second period added 12 examination category B-J welds to the total number required for the interval increased from 247 to 259.
3. Due to piping modifications in the second period and the increase in the total number of welds required for examination in examination category B-J for the interval these welds were added over the three periods - (4) first, (3) second, (5) third. The 4 welds in the first period are counted as credit for the interval.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

(continued)

4. Containment spray heat Exchanger 1B was replaced in U1C9 of the first period and the totals for examination category C-A increased from 17 to 20, examination category C-B increased from 12 to 14, examination category C-C increased from 28 to 29, and examination category F-A increased from 203 to 204 in the U1C9 report
5. Use of code paragraph IWC-1221(e) reduced the total number required for examination in examination category C-F-1 from 146 to 142 in the U1C9 report.
6. Removed from credit 2 supports (1-SIH-031 and 1-SIH-160) reported in examination category F-A in U1C8 in the U1C9 report.
7. Due to the support modifications in the second period, the total number of required examinations in examination category F-A for the interval decreased from 204 to 202 during U1C10 in the U1C10 report.
8. Removed from credit one support in examination category F-A (1-SIH-065) in the first period due to its removal in U1C10 in the U1C10 report.
9. Due to piping modification in the second period, the total number of required examinations in examination category C-F-1 increased by one weld for the interval from 142 to 143 in the U1C10 report.
10. Increased total number of examinations in examination category B-G-1 for RCP from 24 to 25 in the U1C10 report to include the examination of the RCP flange surface when the connection is disassembled.
11. The RI-ISI Program was approved for the second and third periods for examination categories B-F, B-J, C-F-1, and C-F-2. The RI-ISI examinations are performed under examination category R-A item numbers R1.11, R1.12, R1.16 and R1.18. There were no examinations performed in the first period for examination category R-A.
12. For examination category B-D, item number B3.140, Steam Generator Primary Side Nozzle Inside Radius Section, two examinations that were originally scheduled for the second period were not required to be examined due to replacement of the steam generators in the third period, (see request for relief 1-ISI-16). Added two welds to the total number credited for the interval in U1C12 for interval tracking.
13. Removed from credit two welds in examination category B-J in the second period U1C11 report due to implementation of the RI-ISI program in the second and third periods.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

(continued)

14. For examination category C-A, item number C1.10, Steam Generator Pressure Retaining Shell Circumferential Welds, the one weld scheduled for the second period was not required to be examined due to the replacement of the steam generators in the third period, (see request for relief 1-ISI-16). Added one weld to the total number credited for the interval in U1C12 for interval tracking.
15. Examination category C-B, item number C2.20, Residual Heat Removal Heat Exchanger, the nozzle-to-vessel weld examination will be used for the nozzle inside radius section examination, request for relief 1-ISI-15. Added two welds to the total number credited for the interval in U1C12 for interval tracking.
16. Increased total number of examination category C-C examinations required for the interval from 29 to 31 to correct number of integrally welded attachments in the U1C11 report.
17. Removed from credit one integrally welded attachment (1-CVCH-560-IA) reported in examination category C-C in U1C10 in the U1C11 report.
18. RCP # 4 internal casing surface was examined during U1C11 forced outage per Code Case N-481; the evaluation report for part (d) of Code Case N-481 has previously been submitted in the Unit 1 Cycle 6 report for part (e) of Code Case N-481.
19. Replacement steam generator preservice examinations are being credited for the period on the primary side nozzle inside radius section (4 welds, on 2 steam generators)
20. Replacement steam generator preservice examinations are being credited for the period on the primary pressure retaining bolting, credited one steam generator manway
21. Due to the steam generator replacement in U1C12 the number of examination category C-A for the interval changed from 20 to 19 in the U1C12 report.
22. Due to support modifications the number of examinations required for the interval for examination category F-A changed from 202 to 195 in U1C12.
23. Due to support modifications one support credited during the interval in the second period for credit is being removed from credit due to the deletion of the support in U1C12 in the U1C12 report.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CREDIT SUMMARY

## ASME SECTION XI EXAMINATIONS FOR THE SECOND OUTAGE (U1C13) OF THE THIRD PERIOD OF THE SECOND TEN-YEAR INSPECTION INTERVAL

(continued)

24. Examination category R-A item number R1.11 examinations for the second period was 75, but was revised by the periodic update to 70 in the U1C12 report.
25. For examination category R-A, the number of welds credited in the second period was 25 welds.
26. Examination category R-A, item number R1.16 for the total number examinations required for the interval in the second period was 3, but was revised by the periodic update to 6 in the U1C12 report.
27. Examination category B-J examinations changed from 259 to 261 for total number required for the interval due to the steam generator replacement in the U1C12 report.
28. Examination category R-A, item number R1.11(VT) examinations for the second period was 62 segments, but was revised by the periodic update to 50 segments in the U1C12 report.
29. Examination category R-A, item number R1.12 examinations for the second period was 34 segments, but was revised by the periodic update to 29 segments in the U1C12 report.
30. Due to the changes in the RI-ISI program for the periodic update the examinations category R-A, item number R1.16 the number required for credit for the second interval was 3.
31. Examination category B-E, was moved to Appendix C in the U1C13 report.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 13 CLASS 1 COMPONENTS

| COMPONENT | EXAM METHOD | CODE CATEGORY | CODE ITEM NUMBER | Total |
|---|---|---|---|---|
| Steam Generator Class 1 Supports | VT-3 | F-A | F1.40 | 1 |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 13 CLASS 2 COMPONENTS

| COMPONENT | EXAM METHOD | CODE CATEGORY | CODE ITEM NUMBER | Total |
|---|---|---|---|---|
| Centrifugal Charging Pump Tank Head Circumferential Weld | UT | C-A | C1.20 | 1 |
| Centrifugal Charging Pump Tank Nozzle Weld | UT/MT | C-B | C2.21 | 1 |
| Containment Spray Heat Exchanger Nozzle Weld | UT/MT | C-B | C2.21 | 2 |
| Centrifugal Charging Pump Tank Class 2 Equipment Support Integrally Welded Attachment | MT | C-C | C3.10 | 1 |
| CSS Class 2 Piping Support Integrally Welded Attachments | PT | C-C | C3.20 | 1 |
| CVCS Class 2 Piping Support Integrally Welded Attachments | PT | C-C | C3.20 | 3 |
| RHRS Class 2 Piping Support Integrally Welded Attachments | PT | C-C | C3.20 | 2 |
| CSS Class 2 Piping Support, Function A | VT-3 | F-A | F1.20A | 1 |
| CVCS Class 2 Piping Support, Function A | VT-3 | F-A | F1.20A | 3 |
| RHRS Class 2 Piping Support, Function A | VT-3 | F-A | F1.20A | 4 |
| SIS Class 2 Piping Support, Function A | VT-3 | F-A | F1.20A | 2 |
| CSS Class 2 Piping Support, Function B | VT-3 | F-A | F1.20B | 2 |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 13 CLASS 2 COMPONENTS

(continued)

| COMPONENT | EXAM METHOD | CODE CATEGORY | CODE ITEM NUMBER | Total |
|---|---|---|---|---|
| CVCS Class 2 Piping Support, Function C | VT-3 | F-A | F1.20C | 1 |
| RHRS Class 2 Piping Support, Function C | VT-3 | F-A | F1.20C | 1 |
| RHRS Class 2 Piping Support, Function D | VT-3 | F-A | F1.20D | 1 |
| CSS Class 2 Containment Spray Pump Support | VT-3 | F-A | F1.40 | 1 |
| SIS Class 2 Centrifugal Charging Pump Tank Support | VT-3 | F-A | F1.40 | 1 |
| RHRS Class 2 Valve Support | VT-3 | F-A | F1.40 | 1 |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 13 CLASS 1 AND 2 RI-ISI COMPONENTS

| COMPONENT | EXAM METHOD | CODE CATEGORY | CODE ITEM NUMBER | Total |
|---|---|---|---|---|
| RHRS Piping Welds | UT | R-A | R1.11 | 2 |
| SIS Piping Welds | UT | R-A | R1.11 | 1 |
| RHRS Piping Welds | UT | R-A | R1.16 | 1 |
| SIS Piping Welds | UT | R-A | R1.16 | 1 |
| SGBS FAC Piping Areas | UT-THK | R-A | R1.18 | 3 |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 13 STEAM GENERATORS

| COMPONENT | EXAM METHOD | CODE CATEGORY | CODE ITEM NUMBER | Total |
|---|---|---|---|---|
| TUBING * | ET | B-Q | B16.20 | * |

*** See Appendix A for Summary of Steam Generator Eddy Current Examinations.**

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 13 PRESSURE TESTS

| COMPONENT | EXAM METHOD | CODE CATEGORY | CODE ITEM NUMBER | Total |
|---|---|---|---|---|
| PRESSURE TEST * | VT-2 | * | * | * |

*** See Appendix C for Summary of Pressure Tests.**

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# EXAMINATION CODE CATEGORY AND ITEM NUMBER SUMMARY ASME SECTION XI CREDIT UNIT 1 CYCLE 13 SUCCESSIVE EXAMINATIONS COMPONENTS

| COMPONENT | EXAM METHOD | CODE CATEGORY | CODE ITEM NUMBER | Total |
|---|---|---|---|---|
| CVCS Class 1 Supports- Function A | VT-3 | F-A | F1.10A | 1 |
| SIS Class 1 Supports- Function A | VT-3 | F-A | F1.10A | 6 |
| CVCS Class 1 Supports- Function B | VT-3 | F-A | F1.10B | 1 |
| RCS Class 1 Supports- Function B | VT-3 | F-A | F1.10B | 1 |
| SIS Class 2 Supports- Function A | VT-3 | F-A | F1.20A | 2 |
| RHRS Class 2 Supports- Function B | VT-3 | F-A | F1.20B | 7 |
| MSS Class 2 Supports- Function C | VT-3 | F-A | F1.20C | 1 |
| MSS Class 2 Supports- Function D | VT-3 | F-A | F1.20D | 7 |
| RCS Class 1 RCP Supports | VT-3 | F-A | F1.40 | 1 |
| SG Class 1 SG Supports | VT-3 | F-A | F1.40 | 4 |
| SG Class 2 SG Supports | VT-3 | F-A | F1.40 | 4 |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 2

# EXAMINATION PLAN
# (POST OUTAGE INSERVICE REPORT
# AND
# PRESERVICE REPORT)

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

This Section contains a standardized Post Outage ISI Report to satisfy the Reporting Requirements of IWA-6000 of the ASME Section XI Code. This report contains the inservice and preservice inspection data for Class 1 and 2 Components defined in 0-SI-DXI-000-114.2, "ASME Section XI ISI/NDE Program Unit 1 and Unit 2".

For Unit 1 Cycle 13 steam generator tubing eddy current examination results and number of tubes examined see **Appendix A**.

For Unit 1 Cycle 13 system pressure testing results see **Appendix C**.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# POST OUTAGE INSERVICE REPORT

OWNER: TENNESSEE VALLEY AUTHORITY
NUCLEAR POWER GROUP
1101 MARKET STREET
CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
P.O. BOX 2000
SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT: 89E-02 UNIT: 1 CYCLE: 13 COMMERCIAL SERVICE DATE: JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

| System | Component Number | ISO Drawing | Category | Item Number | Exam Scheduled | NDE Procedure | Calibration Standard | Exam Date | Exam Report | Exam Results | NOI Number | Comments |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| SIS | BIT-4 | ISI-0069-C-01 | C-A | C1.20 | UT | N-UT-19 | BNP-79 | 20041015 | R-8190 | Passed | | 93.75% CODE COVERAGE ACHIEVED |
| CSS | CSHXW-1-A | ISI-0462-C-01 | C-B | C2.21 | MT | N-MT-6 | | 20041007 | R-8161 | Passed | | |
| CSS | CSHXW-1-A | ISI-0462-C-01 | C-B | C2.21 | UT | N-UT-18 | SQ-107 | 20041030 | R-8226 | Passed | | 1"THK PLUS 1/4" CLAD; ID & OD SCANS |
| CSS | CSHXW-2-A | ISI-0462-C-01 | C-B | C2.21 | MT | N-MT-6 | | 20041007 | R-8160 | Passed | | |
| CSS | CSHXW-2-A | ISI-0462-C-01 | C-B | C2.21 | UT | N-UT-18 | SQ-107 | 20041030 | R-8227 | Passed | | 1"THK PLUS 1/4" CLAD; ID & OD SCANS |
| SIS | BIT-2 | ISI-0069-C-01 | C-B | C2.21 | MT | N-MT-6 | | 20041014 | R-8181 | Passed | | |
| SIS | BIT-2 | ISI-0069-C-01 | C-B | C2.21 | UT | N-UT-19 | BNP-79 | 20041015 | R-8189 | Passed | | 74.54% CODE COVERAGE ACHIEVED |
| SIS | BITH-1-IA | ISI-0069-C-01 | C-C | C3.10 | MT | N-MT-6 | N/A | 20041015 | R-8182 | Passed | | |
| CSS | 1-CSH-410-IA | CHM-2440-C-03 | C-C | C3.20 | PT | N-PT-9 | | 20041013 | R-8185 | Passed | | |
| CVCS | 1-CVCH-413-IA | ISI-0448-C-26 | C-C | C3.20 | PT | N-PT-9 | | 20041012 | R-8177 | Passed | | |
| CVCS | 1-CVCH-460-IA | ISI-0448-C-16 | C-C | C3.20 | PT | N-PT-9 | | 20041013 | R-8184 | Passed | | |
| CVCS | 1-CVCH-521-IA | ISI-0448-C-37 | C-C | C3.20 | PT | N-PT-9 | | 20041013 | R-8179 | Passed | | |
| RHRS | 1-RHRH-421-IA | CHM-2435-C-03 | C-C | C3.20 | PT | N-PT-9 | | 20041008 | R-8187 | Passed | | |
| RHRS | 1-RHRH-448-IA | CHM-2435-C-03 | C-C | C3.20 | PT | N-PT-9 | | 20041008 | R-8188 | Passed | | |
| CSS | 1-CSH-414 | CHM-2440-C-05 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041013 | R-8178 | Passed | | |
| CVCS | 1-CVCH-475 | ISI-0448-C-33 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041005 | R-8152 | Passed | | |
| CVCS | 1-CVCH-498 | ISI-0448-C-29 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041008 | R-8166 | Passed | | |
| CVCS | 1-CVCH-531 | ISI-0448-C-37 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041005 | R-8153 | Passed | | |
| RHRS | 1-RHRH-417 | CHM-2435-C-05 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041005 | R-8154 | Passed | | |
| RHRS | 1-RHRH-422 | CHM-2435-C-03 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041007 | R-8163 | Passed | | |
| RHRS | 1-RHRH-440 | CHM-2435-C-03 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041007 | R-8164 | Passed | | |
| RHRS | 1-RHRH-469 | CHM-2435-C-03 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041012 | R-8176 | Passed | | |
| SIS | 1-SIH-466 | ISI-0448-C-02 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041012 | R-8173 | Passed | | |
| SIS | 1-SIH-481 | ISI-0448-C-03 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041012 | R-8175 | Passed | | |
| CSS | 1-CSH-410 | CHM-2440-C-03 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041013 | R-8183 | Passed | | |
| CSS | 1-CSH-422 | ISI-0448-C-40 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041005 | R-8151 | Passed | | |
| CVCS | 1-CVCH-502 | ISI-0448-C-29 | F-A | F1.20C | VT-3 | N-VT-1 | | 20041008 | R-8156 | Engineering | 1-SQ-457 | RANGE: 1 27/64"-1 59/64" OR 172#-190# |
| RHRS | 1-RHRH-420 | CHM-2435-C-05 | F-A | F1.20C | VT-3 | N-VT-1 | | 20041008 | R-8169 | Passed | | RANGE: 1-4/64" TO 1-22/64" OR 1905# TO 2105# |
| RHRS | 1-RHRH-471 | CHM-2435-C-03 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041012 | R-8174 | Passed | | |
| SG | SGH-2-2 | ISI-0399-C-02 | F-A | F1.40E1 | VT-3 | N-VT-1 | | 20041028 | R-8210 | Passed | | |
| CSS | CSPH-A | ISI-0464-C-01 | F-A | F1.40E3 | VT-3 | N-VT-1 | | 20041018 | R-8186 | Passed | | |

29 of 128

OWNER: TENNESSEE VALLEY AUTHORITY
NUCLEAR POWER GROUP
1101 MARKET STREET
CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
P.O. BOX 2000
SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT: 89E-02 UNIT: 1 CYCLE: 13 COMMERCIAL SERVICE DATE: JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

| System | Component Number | ISO Drawing | Category | Item Number | Exam Scheduled | NDE Procedure | Calibration Standard | Exam Date | Exam Report | Exam Results | NOI Number | Comments |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| SIS | BITH-1 | ISI-0069-C-01 | F-A | F1.40E8 | VT-3 | N-VT-1 | | 20041015 | R-8180 | Passed | | |
| RHRS | 1-RHRH-449A | CHM-2435-C-03 | F-A | F1.40E9 | VT-3 | N-VT-1 | | 20041007 | R-8155 | Engineering | 1-SQ-456 | RANGE: 40/64"-55/64" OR 330#-364# |
| RHRS | RHRF-018 | CHM-2336-C-05 | R-A | R1.11 | UT | N-UT-64 | SQ-121 | 20041008 | R-8172 | Passed | | ALT-SS |
| RHRS | RHRF-022 | CHM-2336-C-05 | R-A | R1.11 | UT | N-UT-64 | ALT-SS | 20041018 | R-8192 | Passed | | ALT-SS |
| SIS | SIF-031 | ISI-0434-C-05 | R-A | R1.11 | UT | N-UT-64 | SQ-117 | 20041006 | R-8158 | Passed | | ALT-SS |
| RHRS | RHRF-022 | CHM-2336-C-05 | R-A | R1.16 | UT | N-UT-64 | SQ-121 | 20041018 | R-8192 | Passed | | ALT-SS |
| SIS | SIF-031 | ISI-0434-C-05 | R-A | R1.16 | UT | N-UT-64 | SQ-117 | 20041006 | R-8158 | Passed | | ALT-SS |
| SGBS | BD-010 SEGMENT | FAC PROGRAM | R-A | R1.18 | UT-THK | N-UT-26 | N/A | 20041104 | R-8264 | Passed | | FILE# 15-02 |
| SGBS | BD-011 SEGMENT | FAC PROGRAM | R-A | R1.18 | UT-THK | N-UT-26 | N/A | 20041104 | R-8265 | Passed | | FILE# 15-03 |
| SGBS | BD-012 SEGMENT | FAC PROGRAM | R-A | R1.18 | UT-THK | N-UT-26 | N/A | 20041104 | R-8266 | Passed | | FILE# 15-01 |

30 of 128

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# POST OUTAGE PRESERVICE REPORT

OWNER: TENNESSEE VALLEY AUTHORITY
NUCLEAR POWER GROUP
1101 MARKET STREET
CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
P.O. BOX 2000
SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT: P08-02 UNIT: 1 CYCLE: 13 COMMERCIAL SERVICE DATE: JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

| System | Component Number | ISO Drawing | Category | Item Number | Exam Scheduled | NDE Procedure | Calibration Standard | Exam Date | Exam Report | Exam Results | NOI Number | Comments |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| RCP | RCP3CSABLT-01 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP3CSABLT-02 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP3CSABLT-03 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP3CSABLT-04 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP3CSABLT-05 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP3CSABLT-06 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP3CSABLT-07 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP3CSABLT-08 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8205 | Passed | | |
| RCP | RCP4CSABLT-01 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| RCP | RCP4CSABLT-02 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| RCP | RCP4CSABLT-03 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| RCP | RCP4CSABLT-04 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| RCP | RCP4CSABLT-05 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| RCP | RCP4CSABLT-06 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| RCP | RCP4CSABLT-07 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| RCP | RCP4CSABLT-08 | ISI-0325-C-02 | B-G-2 | B7.60 | VT-1 | N-VT-1 | | 20041029 | R-8206 | Passed | | |
| SIS | 1-SIH-453 | CHM-2436-C-03 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041110 | R-8270 | Passed | | |
| SG | SGH-4-1 | ISI-0399-C-02 | F-A | F1.40E2 | VT-3 | N-VT-1 | | 20041108 | R-8269 | Passed | | REF: R-8216 |

32 of 128

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 3

# SUMMARY OF NOTIFICATION OF INDICATIONS

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## SUMMARY OF NOTIFICATIONS

The Unit 1 Cycle 13 Inservice Inspection of Class 1 and 2 components at Sequoyah Nuclear Plant included a total of five Notification of Indications (NOIs) identified during inservice examinations. The following is a listing of the NOIs and a brief summary of the corrective measures taken for each.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SUMMARY:
# NOTIFICATION OF INDICATIONS IDENTIFIED DURING INSERVICE EXAMINATIONS ON CLASS 1 AND 2 COMPONENTS

| NOI NUMBER | COMPONENT IDENTIFIER | DISCREPANCY | WORK INSTRUCTION | RE-EXAMINATION |
|---|---|---|---|---|
| **1-SQ-456** | 1-RHRH-449A<br><br>Class 2 | Spring can setting (VT-3) | WO# 04-782249-000 | No re-examination required |
| **DISPOSITION:** Acceptance by evaluation per Code Case N-491 paragraph -3122.3. | | | | |
| **1-SQ-457** | 1-CVCH-502<br><br>Class 2 | Spring can setting (VT-3) | WO# 04-782248-000 | No re-examination required |
| **DISPOSITION:** Acceptance by evaluation per Code Case N-491 paragraph -3122.3. | | | | |
| **1-SQ-459** | SGH-1-2<br><br>Class 1 | Loose bolting (VT-3) | WO# 04-782399-000 | No re-examination required |
| **DISPOSITION:** Successive examination. Acceptance by evaluation per Code Case N-491 paragraph -3122.3. | | | | |
| **1-SQ-460** | SGH-4-2<br><br>Class 1 | Bolt engagement and broken cap screw retaining wire (VT-3) | WO# 04-782400-000 | No re-examination required |
| **DISPOSITION:** Successive examination. Acceptance by evaluation per Code Case N-491 paragraph -3122.3. | | | | |
| **1-SQ-461** | SGH-4-1<br><br>Class 2 | Bolt engagement and broken cap screw retaining wire (VT-3) | WO# 04-782577-000 | Yes R-8269 |
| **DISPOSITION:** Successive examination. Acceptance by evaluation per Code Case N-491 paragraph -3122.3. | | | | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 4
# ADDITIONAL SAMPLES

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# ADDITIONAL SAMPLE SUMMARY

There were no examinations requiring additional samples for Unit 1 Cycle 13.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 5

# SUCCESSIVE EXAMINATIONS

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## SUCCESSIVE EXAMINATIONS

| COMPONENT | CATEGORY AND ITEM NUMBER | EXAM METHOD | PROGRAM *0-SI-DXI-000-114.2* REFERENCE SECTION | RESULTS |
|---|---|---|---|---|
| **1-CVCH-043** | F-A<br>F1.10A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-007** | F-A<br>F1.10A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-008** | F-A<br>F1.10A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-021** | F-A<br>F1.10A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-113** | F-A<br>F1.10A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-169** | F-A<br>F1.10A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-172** | F-A<br>F1.10A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## SUCCESSIVE EXAMINATIONS
## (continued)

| COMPONENT | CATEGORY AND ITEM NUMBER | EXAM METHOD | PROGRAM 0-SI-DXI-000-114.2 REFERENCE SECTION | RESULTS |
|---|---|---|---|---|
| **1-CVCH-013** | F-A<br>F1.10B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-RCH-027** | F-A<br>F1.10B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-041** | F-A<br>F1.20A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-132** | F-A<br>F1.20A | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-385** | F-A<br>F1.20B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-386** | F-A<br>F1.20B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-389** | F-A<br>F1.20B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-SIH-391** | F-A<br>F1.20B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## SUCCESSIVE EXAMINATIONS
## (continued)

| COMPONENT | CATEGORY AND ITEM NUMBER | EXAM METHOD | PROGRAM 0-SI-DXI-000-114.2 REFERENCE SECTION | RESULTS |
|---|---|---|---|---|
| 1-SIH-396 | F-A<br>F1.20B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| 1-SIH-397 | F-A<br>F1.20B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| 1-SIH-806 | F-A<br>F1.20B | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| 1-MSH-388 | F-A<br>F1.20C | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| 1-MSH-300 | F-A<br>F1.20D | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| 1-MSH-303 | F-A<br>F1.20D | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| 1-MSH-340 | F-A<br>F1.20D | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| 1-MSH-343 | F-A<br>F1.20D | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## SUCCESSIVE EXAMINATIONS
## (continued)

| COMPONENT | CATEGORY AND ITEM NUMBER | EXAM METHOD | PROGRAM 0-SI-DXI-000-114.2 REFERENCE SECTION | RESULTS |
|---|---|---|---|---|
| **1-MSH-380** | F-A<br>F1.20D | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-MSH-420** | F-A<br>F1.20D | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **1-MSH-423** | F-A<br>F1.20D | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **SGH-1-2** | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **SGH-2-2** | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **SGH-3-2** | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **SGH-4-2** | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| **SGH-1-1** | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## SUCCESSIVE EXAMINATIONS
## (continued)

| COMPONENT | CATEGORY AND ITEM NUMBER | EXAM METHOD | PROGRAM 0-SI-DXI-000-114.2 REFERENCE SECTION | RESULTS |
|---|---|---|---|---|
| SGH-2-1 | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| SGH-3-1 | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| SGH-4-1 | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |
| RCPH-4 | F-A<br>F1.40 | VT-3 | 7.4.2.D | Acceptable |
| Note: This is the additional preservice examination required by Code Case N-491, paragraph - 2420 (b). | | | | |

OWNER: TENNESSEE VALLEY AUTHORITY
NUCLEAR POWER GROUP
1101 MARKET STREET
CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
P.O. BOX 2000
SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT: S02-02 UNIT: 1 CYCLE: 13 COMMERCIAL SERVICE DATE: JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

| System | Component Number | ISO Drawing | Category | Item Number | Exam Scheduled | NDE Procedure | Calibration Standard | Exam Date | Exam Report | Exam Results | NOI Number | Comments |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| CVCS | 1-CVCH-043 | CHM-2434-C-02 | F-A | F1.10A | VT-3 | N-VT-1 | | 20041102 | R-8242 | Passed | | |
| SIS | 1-SIH-007 | CHM-2436-C-08 | F-A | F1.10A | VT-3 | N-VT-1 | | 20041028 | R-8229 | Passed | | |
| SIS | 1-SIH-008 | CHM-2436-C-08 | F-A | F1.10A | VT-3 | N-VT-1 | | 20041104 | R-8252 | Passed | | |
| SIS | 1-SIH-021 | CHM-2436-C-08 | F-A | F1.10A | VT-3 | N-VT-1 | | 20041028 | R-8209 | Passed | | |
| SIS | 1-SIH-113 | CHM-2436-C-09 | F-A | F1.10A | VT-3 | N-VT-1 | | 20041106 | R-8262 | Passed | | |
| SIS | 1-SIH-169 | CHM-2436-C-01 | F-A | F1.10A | VT-3 | N-VT-1 | | 20041106 | R-8263 | Passed | | |
| SIS | 1-SIH-172 | CHM-2436-C-01 | F-A | F1.10A | VT-3 | N-VT-1 | | 20041029 | R-8208 | Passed | | |
| CVCS | 1-CVCH-013 | CHM-2434-C-01 | F-A | F1.10B | VT-3 | N-VT-1 | | 20041102 | R-8241 | Passed | | |
| RCS | 1-RCH-027 | ISI-0370-C-02 | F-A | F1.10B | VT-3 | N-VT-1 | | 20041027 | R-8196 | Passed | | PRIOR TO SHIELDING |
| SIS | 1-SIH-041 | CHM-2436-C-05 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041103 | R-8245 | Passed | | |
| SIS | 1-SIH-132 | ISI-0448-C-09 | F-A | F1.20A | VT-3 | N-VT-1 | | 20041103 | R-8246 | Passed | | |
| RHRS | 1-SIH-385 | CHM-2435-C-04 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041105 | R-8259 | Passed | | |
| RHRS | 1-SIH-386 | CHM-2435-C-04 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041105 | R-8260 | Passed | | |
| RHRS | 1-SIH-389 | CHM-2435-C-04 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041105 | R-8261 | Passed | | |
| RHRS | 1-SIH-391 | CHM-2435-C-04 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041104 | R-8251 | Passed | | |
| RHRS | 1-SIH-396 | CHM-2435-C-04 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041107 | R-8267 | Passed | | |
| RHRS | 1-SIH-397 | CHM-2435-C-04 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041107 | R-8268 | Passed | | |
| RHRS | 1-SIH-806 | CHM-2435-C-06 | F-A | F1.20B | VT-3 | N-VT-1 | | 20041029 | R-8207 | Passed | | |
| MSS | 1-MSH-388 | CHM-2438-C-02 | F-A | F1.20C | VT-3 | N-VT-1 | | 20041102 | R-8243 | Passed | | RANGE: 1 23/64"-1 54/64" OR 5236#-5786# |
| MSS | 1-MSH-300 | CHM-2438-C-01 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041102 | R-8238 | Passed | | |
| MSS | 1-MSH-303 | CHM-2438-C-01 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041031 | R-8230 | Passed | | |
| MSS | 1-MSH-340 | CHM-2438-C-02 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041102 | R-8239 | Passed | | |
| MSS | 1-MSH-343 | CHM-2438-C-02 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041101 | R-8237 | Passed | | |
| MSS | 1-MSH-380 | CHM-2438-C-02 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041102 | R-8240 | Passed | | |
| MSS | 1-MSH-420 | CHM-2438-C-01 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041104 | R-8250 | Passed | | |
| MSS | 1-MSH-423 | CHM-2438-C-01 | F-A | F1.20D | VT-3 | N-VT-1 | | 20041030 | R-8228 | Passed | | |
| SG | SGH-1-2 | ISI-0399-C-02 | F-A | F1.40E1 | VT-3 | N-VT-1 | | 20041028 | R-8198 | Engineering | 1-SQ-459 | LOOSE NUT |
| SG | SGH-2-2 | ISI-0399-C-02 | F-A | F1.40E1 | VT-3 | N-VT-1 | | 20041028 | R-8210 | Passed | | |
| SG | SGH-3-2 | ISI-0399-C-02 | F-A | F1.40E1 | VT-3 | N-VT-1 | | 20041028 | R-8211 | Passed | | |
| SG | SGH-4-2 | ISI-0399-C-02 | F-A | F1.40E1 | VT-3 | N-VT-1 | | 20041028 | R-8199 | Engineering | 1-SQ-460 | LOOSE NUT |
| SG | SGH-1-1 | ISI-0399-C-02 | F-A | F1.40E2 | VT-3 | N-VT-1 | | 20041031 | R-8231 | Passed | | |
| SG | SGH-2-1 | ISI-0399-C-02 | F-A | F1.40E2 | VT-3 | N-VT-1 | | 20041101 | R-8235 | Passed | | |

OWNER: TENNESSEE VALLEY AUTHORITY
NUCLEAR POWER GROUP
1101 MARKET STREET
CHATTANOOGA, TENNESSEE 37402

PLANT: SEQUOYAH NUCLEAR PLANT
P.O. BOX 2000
SODDY DAISY, TENNESSEE 37379

CERTIFICATION OF AUTHORIZATION: NOT REQUIRED

EXAM REQUIREMENT: S02-02 UNIT: 1 CYCLE: 13 COMMERCIAL SERVICE DATE: JULY 1, 1981 NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED

| System | Component Number | ISO Drawing | Category | Item Number | Exam Scheduled | NDE Procedure | Calibration Standard | Exam Date | Exam Report | Exam Results | NOI Number | Comments |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| SG | SGH-3-1 | ISI-0399-C-02 | F-A | F1.40E2 | VT-3 | N-VT-1 | | 20041101 | R-8236 | Passed | | |
| SG | SGH-4-1 | ISI-0399-C-02 | F-A | F1.40E2 | VT-3 | N-VT-1 | | 20041030 | R-8216 | Engineering | 1-SQ-461 | REF: R-8269 |
| RCP | RCPH-4 | ISI-0325-C-01 | F-A | F1.40E3 | VT-3 | N-VT-1 | | 20041028 | R-8194 | Passed | | |

45 of 128

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 6

# AUGMENTED EXAMINATIONS

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## Augmented Examinations

There were no augmented examinations performed during Unit 1 Cycle 13 as part of the Inservice Inspection Program, 0-SI-DXI-000-114.2 that requires submittal to the regulatory agency.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 7

# ANALYTICAL EVALUATIONS

There were no analytical evaluation assessments required for acceptance during Unit 1 Cycle 13 reporting period.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SECTION 8

# REQUEST FOR RELIEF

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

During Unit 1 Cycle 13 there was one code class 2 component that did not receive code required examination coverage due to design configuration, access limitations, etc. Request for relief for the code case 2 component was submitted to the regulatory authorities in accordance with 10 CFR 50.55a, prior to U1C13 anticipating achieving a certain amount of examination coverage. The percentage of examination coverage was derived from methods established in the TVA NDE Procedures Manual. The following is a component summary.

**REQUEST FOR RELIEF SUMMARY**
**ASME SECTION XI UNIT 1 CYCLE 13**

| COMPONENT | CODE CLASS | CODE CATEGORY | CODE ITEM NUMBER | EXAMINATION METHOD | BEST EFFORT PERCENT COVERAGE |
|---|---|---|---|---|---|
| BIT-2 | 2 | C-B | C2.21 | UT | 74.54% |
| Examination report R-8189. Examination limited due to configuration of the nozzle to-head geometry. Request for relief 1-ISI-17 was approved by the NRC (TAC NOS. MB5474 and MB5475) provided actual examination coverage was the same or greater than 67% examination coverage. | | | | | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# APPENDIX A

## SUMMARY OF ASME SECTION XI STEAM GENERATOR TUBING EXAMINATIONS

The inspection plan work required for the second outage of the third period of the second interval for Code Category B-Q, item number B16.20 is on schedule. The following table is a tabulation of examinations, results of examinations and corrective measures taken.

PREPARED BY Jeffry C Lockard FOR EMMETT D. CAMP PER TELECON

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## SUMMARY OF SEQUOYAH UNIT 1 CYCLE 13 RSG
## SG EDDY CURRENT INSPECTION/TUBE PLUGGING RESULTS

| EDDY CURRENT EXAM TYPE | RSG 1 | RSG 2 | RSG 3 | RSG 4 | Total |
|---|---|---|---|---|---|
| Full Length Bobbin Coil | 4979 | 4977 | 4978 | 4978 | 19912 |
| Predetermined Diagnostic Plus Point | 18 | 17 | 84 | 20 | 139 |
| Diagnostic/PID Plus Point | 20 | 2 | 14 | 2 | 38 |
| Total Exams Completed | 5017 | 4996 | 5076 | 5000 | 20089 |
| Total Tubes Examined | 4979 | 4977 | 4978 | 4978 | 19912 |

| INDICATIONS (Tubes) | RSG 1 | RSG 2 | RSG 3 | RSG 4 | Total |
|---|---|---|---|---|---|
| AVB WEAR | 10 | 0 | 1 | 0 | 11 |
| Total | 10 | 0 | 1 | 0 | 11 |

| PLUGGING STATUS | RSG 1 | RSG 2 | RSG 3 | RSG 4 | Total |
|---|---|---|---|---|---|
| Previously Plugged Tubes | 4 | 6 | 5 | 5 | 20 |
| Tubes Plugged by Damage Mechanism | | | | | |
| AVB WEAR | 10 | 0 | 1 | 0 | 11 |
| Total Plugged Cycle 13 | 10 | 0 | 1 | 0 | 11 |
| TOTAL TUBES PLUGGED | 14 | 6 | 6 | 5 | 31 |

| Classification of Inspection Results | RSG1 | RSG2 | RSG3 | RSG4 |
|---|---|---|---|---|
| Full Length Bobbin Coil | C-1 | C-1 | C-1 | C-1 |
| Predetermined Diagnostic Plus Point | C-1 | C-1 | C-1 | C-1 |
| Diagnostic Plus Point | C-1 | C-1 | C-1 | C-1 |

| Inspection Classification Category | Inspection Results |
|---|---|
| C-1 | Less than 5% of the total tubes inspected are degraded tubes and none of the inspected tubes are defective |
| C-2 | One or more tubes, but not more than 1% of the total tubes inspected are defective, or between 5 and 10% of the total tubes inspected are degraded tubes |
| C-3 | More than 10% of the total tubes inspected are degraded tubes or more than 1% of the inspected tubes are defective |

Emmett Cain 9 Nov 04
Preparer

William David Jamison 11/09/04
Reviewer

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## Miscellaneous Nomenclature

| Notation | Description |
|---|---|
| AVB | Anti-Vibration Bar |
| PID | Positive Identification |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# APPENDIX B

# FORM NIS-2 "OWNERS REPORT FOR REPAIRS OR REPLACEMENTS"

PREPARED BY _____

| | | |
|---|---|---|
| **Owner:** | Tennessee Valley Authority<br>Nuclear Power Group<br>1101 Market Street<br>Chattanooga, Tennessee<br>37402 | **Plant:** Unit 1<br><br>**Owner Certificate of Authorization:**<br>Not Required |
| **Plant:** | Sequoyah Nuclear Plant<br>P. O. Box 2000<br>Soddy-Daisy, Tennessee<br>37384-2000 | **Commercial Service Date:**<br>July 1, 1981<br><br>**National Board Number for the Unit:**<br>Not Required |

**Sheet** 1 **of** 34

## Appendix B

An index of the work documents which required reporting under the inclusion of the NIS-2 Report is as follows:

| Work Initiating Document | Work Initiating Document |
|---|---|
| WO 01-010470-000 | WO 04-771230-013 |
| WO 03-003645-000 | WO 04-771230-015 |
| WO 03-007682-000 | WO 04-771230-016 |
| WO 03-008777-000 | WO 04-771230-018 |
| WO 03-011299-001 | WO 04-771230-019 |
| WO 03-013748-000 | WO 04-771230-021 |
| WO 03-016066-000 | WO 04-771230-025 |
| WO 04-770346-005 | WO 04-771230-027 |
| WO 04-770346-007 | WO 04-771230-029 |
| WO 04-770722-000 | WO 04-773985-000 |
| WO 04-770723-000 | WO 04-774008-000 |
| WO 04-770731-000 | WO 04-777535-000 |
| WO 04-771230-002 | WO 04-778755-000 |
| WO 04-771230-003 | WO 04-782577-000 |
| WO 04-771230-004 | WO 04-782698-000 |
| WO 04-771230-010 | |

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority (Name) — Date 12/13/04
1101 Market Street, Chattanooga, TN 37402-2801 (Address) — Sheet 2 of 34
2. Plant Sequoyah Nuclear Plant (Name) — Unit 1
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — WO# 01-010470-000 (Repair Organization P.O. No., Job No., etc.)
3. Work Performed by Sequoyah Nuclear Plant (Name) — Type Code Symbol Stamp N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — Authorization No N/A
Expiration Date N/A

4. Identification of system SAMPLING, CLASS 2

5. (a) Applicable Construction Code ASME SECT III 19 77 Edition, NA Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-FCV-43-3 | TARLET ROCK | 50 | NA | NA | 1982 | REPAIRED | YES |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REINSTALLED BODY TO BONNET SEAL WELD.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPAIRED (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 13 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 2/13/02 to 12/14/04 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 measures described in this 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.

James N. Mylan Commissions TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 14, 2004

W/O #01-010470-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 12/16/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 3 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 03-003645-000
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address — Expiration Date N/A
4. Identification of system RCS, Class 1
5. (a) Applicable Construction Code ASME Sect III 19 80 Edition, W80 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-PCV-68-340 | TARGET ROCK | 2 | NA | NA | 1983 | REPAIRED | YES |
| | | | | | | REPLACED | YES |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED MAIN DISC. PERFORMED WELD REPAIR BY REINSTALLING SEAT RING AND BODY-TO-BONNET SEAL WELD.
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks HA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPAIR AND REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 16 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 8/14/04 to 12/20/04 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 measures described in this 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.

James N. Mcghan Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 20, 2004

W/O #03-003645-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 12/4/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 4 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 03-007682-000
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address
   Expiration Date N/A
4. Identification of system CVCS, CLASS 1
5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, CODE CASE N-416-2
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-62-566 | ROCKWELL | VA239- | NA | NA | 2004 | REPLACEMENT | YES |
| | EDWARDS | 5KS50 | NA | NA | 2004 | REPLACED | NO |
| CVCS PIPING | TVA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED VALVE AND A SECTION OF PIPING

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
   Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks CONSTRUCTION CODE: CO

Applicable Manufacturer's Data Reports to be Attached

VALVE - CONTRACT 91934 AND WESTINGHOUSE E-SPECS 678769/677264

PIPE - ANSI B31.7, 1969 EDITION, 1970 ADDENDA

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature] M, MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/26/04 to 12/09/04 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 measures described in this 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.

James R. Mylan Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 09, 2004

W/O #03-007682-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
**As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority — Date 11/29/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 5 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 03-008777-000
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address
   Expiration Date N/A
4. Identification of system RHR, CLASS 2
5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-HCV-74-34 | DARLING | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED VALVE DISK.
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPEC 6788760 AND 6762411.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 29 NOVEMBER 2004

**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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/22/04 to 12/02/04 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 measures described in this 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.

James N. Myhan Commissions TN #2693
Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 2, 2004

W/O # 03-008777-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/13/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 6 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO # 03-011299-001
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address — Expiration Date N/A
4. Identification of system SAFETY INJECTION, CLASS 2
5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| REFUELING WATER STORAGE TANK | INDUSTRIAL ENGINEERING AND EQUIPMENT | NA | NA | NA | 2004 | REPLACED | NO |
| IMMERSION HEATERS | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED IMMERSION HEATERS
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
   Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks CONSTRUCTION CODE: CONTRACT 87394
Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature] MECH ENGR Date 13 NOVEMBER 2004
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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/19/04 to 12/01/04 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 measures described in this 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.

James R. Mylan Commissions TN#2693
Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 01, 2004

W/O # 03-011299-001

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 12/4/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 7 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 03-013748-000
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address — Expiration Date N/A
4. Identification of system CVCS, CLASS 2
5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| CVCS PIPING | TVA | NA | NA | NA | 2004 | REPAIRED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work PERFORMED BASEMETAL REPAIR BY WELDING TO CORRECT GRINDER DAMAGE.
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPAIR (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/03/04 to 12/10/04 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 measures described in this 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.

James N. McKnight Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 10, 2004

W/O # 03-013748-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
**As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority — Name
1101 Market Street, Chattanooga, TN 37402-2801 — Address

Date 12/4/04
Sheet 8 of 34

2. Plant Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Unit 1
WO# 03-016066000 — Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SEC III 19 74 Edition, S74 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| RCP #3 | WESTING HOUSE | 2174 | NA | NA | 2004 | REPLACED | NO |
| CARTRIDGE SEAL ASSEMBLY | | 2178 | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED CARTRIDGE SEAL ASSEMBLY AND THE HOUSING BOLTS.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 4/19/04 to 12/08/04 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 measures described in this 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.

James R. Mylan Commissions TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 08, 2004

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 12/4/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 9 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-770346-005
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address
   Expiration Date N/A
4. Identification of system SAFETY INJECTION, CLASS 2
5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| SAFETY | TVA | NA | NA | NA | 2004 | REPAIRED | NO |
| INJECTION | | | | | | | |
| PIPING | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work PERFORMED BASEMETAL REPAIR BY WELDING

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPAIR (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 12/08/04 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 measures described in this 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 TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 08, 2004

W/O# 04-770346-005

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 12/4/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 10 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-770346-007
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address
   Expiration Date N/A
4. Identification of system CVCS, CLASS 2
5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989, CODE CASE N-416-1
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| CVCS PIPING | TVA | NA | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work MODIFIED CVCS PIPING
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
   Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/21/04 to 12/07/04 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 measures described in this 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 TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 07, 2004

W/O# 04-770346-007

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority (Name) — Date 11/29/04
1101 Market Street, Chattanooga, TN 37402-2801 (Address) — Sheet 11 of 34
2. Plant Sequoyah Nuclear Plant (Name) — Unit 1
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — WO# 04-770722-000 (Repair Organization P.O. No., Job No., etc.)
3. Work Performed by Sequoyah Nuclear Plant (Name) — Type Code Symbol Stamp N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — Authorization No N/A
Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-68-563 | GROSBY | N73370-01-0001 | NA | NA | 2004 | REPLACED | No |
| | | 51688-00-0002 | NA | NA | 2004 | REPLACEMENT | No |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED VALVE.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks CONSTRUCTION CODE: CONTRACT 9193A AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPECS 678764 AND 676279.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT conforms to
repair or replacement
the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 29 NOVEMBER 2004
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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/22/04 to 12/07/04 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 measures described in this 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 TN#2693
Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 7, 2004

w/o# 04-770722-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/22/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 12 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-770723-000
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address — Expiration Date N/A
4. Identification of system RCS, CLASS 1
5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-68-564 | CROSBY | 51688-01-0001 | NA | NA | 2004 | REPLACED | NO |
| | | N73370-01-0005 | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED VALVE.
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
   Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPECS 678764 AND 676279.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 22 NOVEMBER 2004
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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 4/27/04 to 12/07/04 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 measures described in this 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 TN #2693
Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 7, 2004

W/O #04-770723-00

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority (Name) — Date 11/22/04
1101 Market Street, Chattanooga, TN 37402-2801 (Address) — Sheet 13 of 34
2. Plant Sequoyah Nuclear Plant (Name) — Unit 1
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — WO# 04-770731-000 (Repair Organization P.O. No., Job No., etc.)
3. Work Performed by Sequoyah Nuclear Plant (Name) — Type Code Symbol Stamp N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — Authorization No N/A
Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SECT III 19 80 Edition, W80 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-PCV-68-334 | TARGET ROCK | 9 | NA | NA | 1985 | REPLACEMENT | YES |
| | | 10 | N | NA | 1985 | REPLACED | YES |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED VALVE

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed K. Allison, MECH ENGR Date 22 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/22/04 to 11/29/04 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 measures described in this 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.

James M. Mepham Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 29, 2004

W/O # 04-770731-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
**As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority (Name)
1101 Market Street, Chattanooga, TN 37402-2801 (Address)
Date 11/14/04
Sheet 14 of 34

2. Plant Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)
Unit 1
WO# 04-771230-002 (Repair Organization P.O. No., Job No., etc.)

3. Work Performed by Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system FEEDWATER, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-FDH-206 | BE | SQ-86 | NA | NA | 2004 | REPLACED | NO |
| | | 87C2709 | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 14 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/15/04 to 11/24/04 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 measures described in this 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.

James N. Mayhan Commissions TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

W/O# 04-771230-002

**FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**
**As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority — Date 9/30/04
Name
1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 15 of 34
Address
2. Plant Sequoyah Nuclear Plant — Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-003
Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
Address
Expiration Date N/A

4. Identification of system CVCS, Class 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-CVCH-458 | BE | 592-104 | NA | NA | 2004 | REPLACED | NO |
| | | 81C21724 | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA
Applicable Manufacturer's Data Reports to be Attached

W.O.#04-771230-003

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT conforms to
repair or replacement
the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 30 SEPTEMBER 2004
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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 5/4/04 to 10/01/04 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 measures described in this 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 TN#2693
Inspector's Signature National Board, State, Province, and Endorsements

Date Oct. 01, 2004

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/14/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 16 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-004
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address — Expiration Date N/A
4. Identification of system SAFETY INJECTION, CLASS 2
5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-SIH-448 | BE | SQ-98 | NA | NA | 2004 | REPLACED | NO |
| | | 87C21599 | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED SNUBBER
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 14 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 4/28/04 to 11/23/04 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 measures described in this 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.

James H. McLaren Commissions TN2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 23, 2004

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/14/04
Name
1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 17 of 34
Address
2. Plant Sequoyah Nuclear Plant — Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-010
Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
Address
Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-CVCA-203 | PSA | 582 | NA | NA | 2004 | REPLACED | NO |
| | | 11350 | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED SNUBBER.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

w/o # 04-771230-10

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT conforms to repair or replacement the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 14 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 4/28/04 to 11/24/04 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 measures described in this 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.

James R. McGraw Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/14/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 18 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-013
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address — Expiration Date N/A
4. Identification of system MAIN STEAM, CLASS 2
5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 47A400-16-67 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| 47A400-16-68 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 14 NOVEMBER 2004

**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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 11/24/04 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 measures described in this 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.

James N. Mylan Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date NOV. 24, 2004

W/O #04-771230-013

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/14/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 19 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-013
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address — Expiration Date N/A

4. Identification of system MAIN STEAM / CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 47A400-16-22 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| 47A400-16-37 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| 47A400-16-46 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| 47A400-16-47 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| 47A400-16-50 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| 47A400-16-56 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| 47A400-16-65 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |
| 47A400-16-66 | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ | ↓ |

7. Description of Work REPLACED END ATTACHMENT SCREWS

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 14 NOVEMBER 2004

**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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 11/24/04 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 measures described in this 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.

James N. McLean Commissions TN # 2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

W/O #04-771230-013

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Name
1101 Market Street, Chattanooga, TN 37402-2801 — Address

Date 11/14/04

Sheet 20 of 34

2. Plant Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Unit 1

WO# 04-771230-015 — Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Type Code Symbol Stamp N/A

Authorization No N/A

Expiration Date N/A

4. Identification of system AFW, Class 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-AFDH-25 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 14 NOVEMBER 2004

**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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 11/24/04 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 measures described in this 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.

James R. McLean Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

W/O# 04-771230-015

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Name
1101 Market Street, Chattanooga, TN 37402-2801 — Address

Date 11/14/04
Sheet 21 of 34

2. Plant Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Unit 1
WO# 04-771230-016 — Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SGBD, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-SGBH-110 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| 1-SGBH-138 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐/ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 14 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 11/24/04 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 measures described in this 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.

James R. Myhan Commissions TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

W/O#04-771230-016

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/14/04
Name
1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 22 of 34
Address
2. Plant Sequoyah Nuclear Plant — Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-018
Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
Address
Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-RCH-833 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| 1-RCH-863 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| 1-RCH-821 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 12/08/04 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 measures described in this 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.

James N. Mykram Commissions TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 08, 2004

W/O# 04-771230-018

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
**As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority (Name) — Date 11/14/04
1101 Market Street, Chattanooga, TN 37402-2801 (Address) — Sheet 23 of 34
2. Plant Sequoyah Nuclear Plant (Name) — Unit 1
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — WO# 04-771230-019 (Repair Organization P.O. No., Job No., etc.)
3. Work Performed by Sequoyah Nuclear Plant (Name) — Type Code Symbol Stamp N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — Authorization No N/A
Expiration Date N/A
4. Identification of system CHILLED WATER, CLASS 2
5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 47A915-8-26 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure NA psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 14 NOVEMBER 2004

### 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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 11/24/04 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 measures described in this 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.

James N. McGraw Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

W/O #04-771230-019

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Name
1101 Market Street, Chattanooga, TN 37402-2801 — Address

Date 11/14/04
Sheet 24 of 34

2. Plant Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Unit 1
WO# 04-771230-021 — Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code ANSI B31.1 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-RHRH-425 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| 1-RHRH-492 | 〃 | 〃 | 〃 | 〃 | 〃 | 〃 | 〃 |
| 1-RHRH-506 | 〃 | 〃 | 〃 | 〃 | 〃 | 〃 | 〃 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☑ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 14 NOVEMBER 2004

**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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 11/24/04 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 measures described in this 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.

James R. McLean Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date NOV. 24, 2004

W/O #04-771230-021

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/14/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 25 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-711230-025
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address
   Expiration Date N/A
4. Identification of system CVCS, CLASS 1 ~~AND 2~~ KNW 11/14/04
5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-CVCH-91 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS.
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 14 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/04 to 11/24/04 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 measures described in this 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 TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

w/o #04-771230-025

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority (Name)
1101 Market Street, Chattanooga, TN 37402-2801 (Address)
Date 11/14/04
Sheet 26 of 34

2. Plant Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)
Unit 1
WO # 04-771230-025 (Repair Organization P.O. No., Job No., etc.)

3. Work Performed by Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)
Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system CVCS, CLASS 1 AND 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-CVCH-108 | DSA | NA | NA | NA | 2004 | REPLACED | NO |
| 1-CVCH-422 | | | | | | | |
| 1-CVCH-576 | | | | | | | |
| 1-CVCH-588 | | | | | | | |
| 1-CVCH-595 | | | | | | | |
| 1-CVCH-609 | | | | | | | |
| 1-CVCH-612 | | | | | | | |
| 1-CVCH-000 | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 14 NOVEMBER 2004

### 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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/28/04 to 11/24/04 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 measures described in this 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 TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date NOV. 24, 2004

w/o # 04-771230-025

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 11/14/04
   Name
   1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 27 of 34
   Address
2. Plant Sequoyah Nuclear Plant — Unit 1
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-027
   Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
   Name
   P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
   Address
   Expiration Date N/A
4. Identification of system PRIMARY WATER, CLASS 2
5. (a) Applicable Construction Code ANSI B31.1 19 69 Edition, 70 Addenda, NA Code Case
   (b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 47A492-2-52 | PSA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED END ATTACHMENT SCREWS.
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
   Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR (Owner or Owner's Designee, Title) Date 14 NOVEMBER 2004

### 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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 11/24/04 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 measures described in this 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.

James N. McLean Commissions TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date NOV. 24, 2004

W/O # 04-771230-027

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
**As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority — Date 11/14/04
Name
1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 28 of 34
Address
2. Plant Sequoyah Nuclear Plant — Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-771230-029
Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
Address
Expiration Date N/A

4. Identification of system RHR, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-RHRH-425 | PSA | 20785 | NA | NA | 2004 | REPLACED | NO |
| | | 7905 | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED SNUBBER

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed R. [illegible], MECH ENGR Date 14 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/11/04 to 11/24/04 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 measures described in this 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.

James R. McGraw Commissions TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Nov. 24, 2004

w/o #04-771230-029

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority (Name)
1101 Market Street, Chattanooga, TN 37402-2801 (Address)

Date 11/13/04
Sheet 29 of 34

2. Plant Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)

Unit 1
WO# 04-773985-000 (Repair Organization P.O. No., Job No., etc.)

3. Work Performed by Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| SAFETY INJECTION PIPING | TVA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED FLANGE BOLTING

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 13 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 7/27/04 to 12/02/04 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 measures described in this 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 TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 2, 2004

W/O#04-773985-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority (Name)
1101 Market Street, Chattanooga, TN 37402-2801 (Address)

Date 11/13/04
Sheet 30 of 34

2. Plant Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)

Unit 1
WO# 04-774008-000 (Repair Organization P.O. No., Job No., etc.)

3. Work Performed by Sequoyah Nuclear Plant (Name)
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address)

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system CVCS, CLASS 2

5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| VALVE 1-62-504 | ANCHOR | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED BONNET BOLTING.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ✓
Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks CONSTRUCTION CODE: CONTRACT 91934 AND
Applicable Manufacturer's Data Reports to be Attached
WESTINGHOUSE E-SPECS 678760 AND 676241.

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT conforms to
repair or replacement
the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 13 NOVEMBER 2004
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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/27/04 to 12/03/04 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 measures described in this 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.

James R. Myhan Commissions TN #2693
Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 03, 2004

W/O # 04-774008-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
**As Required by the Provisions of the ASME Code Section XI**

1. Owner Tennessee Valley Authority (Name) — Date 12/4/04
1101 Market Street, Chattanooga, TN 37402-2801 (Address) — Sheet 31 of 34
2. Plant Sequoyah Nuclear Plant (Name) — Unit 1
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — WO# 04-777535-000 (Repair Organization P.O. No., Job No., etc.)
3. Work Performed by Sequoyah Nuclear Plant (Name) — Type Code Symbol Stamp N/A
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 (Address) — Authorization No N/A
Expiration Date N/A
4. Identification of system SAFETY INJECTION, CLASS 1
5. (a) Applicable Construction Code SEE REMARKS 19 NA Edition, NA Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989 CODE CASE N-416-2
6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-63-555 | EDWARDS | NA | NA | NA | 2004 | REPLACED | NO |
| | FLOWSERVE | 45AYV | NA | NA | 2004 | REPLACEMENT | YES |
| 51 PIPING | TVA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED VALVE AND A SECTION OF PIPING.
8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☑
Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks CONSTRUCTION CODE:
Applicable Manufacturer's Data Reports to be Attached
VALVE - CONTRACT 91934 AND WESTINGHOUSE ESPECS
678769 AND 677264
PIPE - ANSI B31.7 1969 EDITION, 1970 ADDENDA

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004
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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/26/04 to 12/10/04 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 measures described in this 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 TN #2693
Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 10, 2004

W/O #04-777535-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Date 12/4/04
Name
1101 Market Street, Chattanooga, TN 37402-2801 — Sheet 32 of 34
Address
2. Plant Sequoyah Nuclear Plant — Unit 1
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — WO# 04-778755-000
Address — Repair Organization P.O. No., Job No., etc.
3. Work Performed by Sequoyah Nuclear Plant — Type Code Symbol Stamp N/A
Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Authorization No N/A
Address
Expiration Date N/A

4. Identification of system RCS, CLASS 1

5. (a) Applicable Construction Code ASME SECT III 19 74 Edition, S74 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| RCP 1 | WESTING HOUSE | 2016 | NA | NA | 2004 | REPLACED | YES |
| CARTRIDGE | | 2183 | NA | NA | 2004 | REPLACEMENT | YES |
| SEAL | | | | | | | |
| ASSEMBLY | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED CARTRIDGE SEAL ASSEMBLY AND HOUSING BOLTS.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒
Other ☐ Pressure _____ psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENTS conforms to repair or replacement the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 10/22/04 to 12/08/04 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 measures described in this 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.

James N. Mylum Commissions TN#2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 08, 2004

W/O # 04-778755-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Name
1101 Market Street, Chattanooga, TN 37402-2801 — Address

Date 12/8/04
Sheet 33 of 34

2. Plant Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Unit 1
WO# 04-782577-000 — Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system MAIN STEAM, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 76 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| STEAM GENERATOR 4 UPPER LATERAL SUPPORT | TVA | NA | NA | NA | 2004 | REPLACED | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work REPLACED A LOOSE BOLT.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure NA psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

## FORM NIS-2 (Back)

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

### CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature], MECH ENGR Date 4 DECEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/04/04 to 12/07/04 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 measures described in this 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 TN #2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 07, 2004

W/O# 04-782577-000

## FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
### As Required by the Provisions of the ASME Code Section XI

1. Owner Tennessee Valley Authority — Name
1101 Market Street, Chattanooga, TN 37402-2801 — Address

Date 11/29/04
Sheet 34 of 34

2. Plant Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Unit 1
WO# 04-782698-000 — Repair Organization P.O. No., Job No., etc.

3. Work Performed by Sequoyah Nuclear Plant — Name
P. O. Box 2000, Soddy-Daisy, TN, 37384-2000 — Address

Type Code Symbol Stamp N/A
Authorization No N/A
Expiration Date N/A

4. Identification of system SAFETY INJECTION, CLASS 2

5. (a) Applicable Construction Code ANSI B31.7 19 69 Edition, 70 Addenda, NA Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

6. Identification of Components Repaired or Replaced and Replacement Components

| Name of Component | Name of Manufacturer | Manufacturer Serial No. | National Board No. | Other Identification | Year Built | Repaired, Replaced, or Replacement | ASME Code Stamped (Yes or No) |
|---|---|---|---|---|---|---|---|
| 1-SIH-453 | TVA | NA | NA | NA | 2004 | REPLACEMENT | NO |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

7. Description of Work MODIFIED PIPE SUPPORT.

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐
Other ☐ Pressure N/A psi Test Temp _____ °F

**NOTE:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ 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 the number of sheets is recorded at the top of this form.

**FORM NIS-2 (Back)**

9. Remarks NA

Applicable Manufacturer's Data Reports to be Attached

**CERTIFICATE OF COMPLIANCE**

We certify that the statements made in the report are correct and this REPLACEMENT (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type Code Symbol Stamp NA

Certificate of Authorization No. NA Expiration Date NA

Signed [signature] M, MECH ENGR Date 29 NOVEMBER 2004

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 Tennessee and employed by HSB CT of Hartford, Connecticut have inspected the components described in this Owner's Report during the period 11/07/04 to 12/09/04 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 measures described in this 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 TN # 2693

Inspector's Signature National Board, State, Province, and Endorsements

Date Dec. 09, 2004

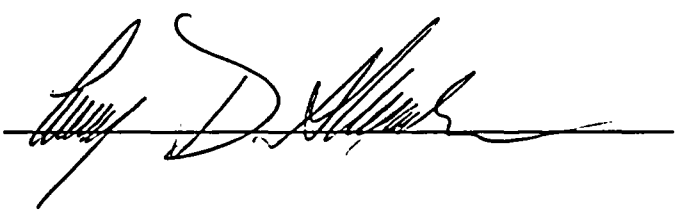
W/O # 04-782698-000

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# APPENDIX C

# PRESSURE TEST REPORT

The inspection plan work required for the second outage of the third period of the second interval for Code Category B-E, Code Category B-P, Code Category C-H, Code Category D-A, Item Number D1.10; Code Category D-B, Item Number D2.10; Code Category D-C, Item Number D3.10 and RI-ISI Code Category R-A (Item Numbers R1.11 and R1.12) is on schedule.

PREPARED BY 

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# System Pressure Tests
# Unit 1 Cycle 13
# Third Period of the Second Interval

## Abstract

The Unit 1 tests scheduled for the third period which were required to be performed during the U1C13 refueling outage are complete except for RCS pressure test (Code Case 498-1 alternative) and portions of SFPC outside containment. Due to the extension of the Unit 1 second interval, Code Case 498-1 alternative testing of RCS including sampling will be performed during U1C14 RFO.

| System | Test Results |
|---|---|
| Main Steam | No leakage found |
| Blowdown and RI-ISI | No leakage found |
| Chemical Volume and Control(CVCS) and RI-ISI | No leakage found |
| Containment Spray and RI-ISI | No leakage found |
| Feedwater and RI-ISI | No leakage found |
| Reactor Coolant and RI-ISI | Small valve packing leaks |
| Safety Injection and RI-ISI | No leakage found |
| AFW Turbine Steam Supply | Governor valve packing leak |
| MFW and AFW Inside Containment | No leakage found |
| MFW Outside Containment | No leakage found |
| TDAFW Pump Suction and Discharge Piping | LCV-3-175 packing leak & Threaded pipe union leak on pump |
| MDAFW 1A-A Suction and Discharge Piping | No leakage found |
| MDAFW 1B-B Suction and Discharge Piping | No leakage found |
| CVCS Inside Containment | No leakage found |
| CVCS Outside Containment | VLV-62-504 bonnet gasket leak repaired & packing leak at VLV-62-529 |
| CVCS Excess Letdown | Heat exchanger head gasket leak repaired |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## System Pressure Tests
## Unit 1 Cycle 13
## Third Period of the Second Interval
(continued)

| System | Test Results |
|---|---|
| CVCS Boric Acid Transfer | Discharge flanges gasket leaks on 1A and 1B pumps repaired |
| Safety Injection Inside Containment | No leakage found |
| Safety Injection Outside Containment | Packing leaks at FCV-63-6, 22, 152, 156, 157, and VLV-63-645 |
| Safety Injection Cold Leg Accumulators | No leakage found |
| RWST and ECCS Pump Supply Piping | No leakage found |
| Various Class 2 Systems Inside Containment | No leakage found |
| ERCW inside and outside Unit 1 containment and common | Three small leaks identified and repaired |
| Component Cooling System Inside Containment | FT-70-105 instrument |
| Unit 1 and Common Component Cooling System Outside Containment | No leakage found |
| Containment Spray Trains A and B | VLV-72-506 flange leak repaired |
| Residual Heat Removal Trains A and B | FE-63-91 and VLV-74-524 flange leaks repaired |
| Residual Heat Removal RI-ISI | No leakage found |
| Containment Penetrations | VLV-78-558 leakage repaired |
| Accumulator Room Drain Lines | No obstructed Flow |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# APPENDIX D

# IWE METAL CONTAINMENT EVALUATIONS

The following evaluations were performed for containment examinations performed during U1C13 for inaccessible areas and additional examinations in accordance with 10CFR 50.55a(b)(2)(ix) for Class MC components.

PREPARED BY Jeffrey C Noulart

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# SUMMARY OF IWE METAL CONTAINMENT EVALUATIONS

The Unit 1 Cycle 13 Inservice Inspection of Class MC components included two Notification of Indications (NOIs) for IWE Metal Containment evaluation. These evaluations require reporting per 10CFR 50.55a(b)(2)(ix).

| NOI NUMBER | COMPONENT IDENTIFIER |
|---|---|
| 1-SQ-458 | MB-2 (SCV surface above floor) |
| **DISPOSITION**: Cleaned and repainted areas. | |
| 1-SQ-463 | SCV-1, SCV-2, SCV-3, SCV-4, SCV-1-IB, SCV-2-IB, SCV-3-IB, SCV-4-IB |
| **DISPOSITION**: Cleaned and repainted areas. | |

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

# IWE METAL CONTAINMENT EVALUATION

## NOI Number: 1-SQ-458

Component Identifier: MB-2 (SCV surface above floor)
Examination Report Number: SCV-0170
Disposition: Cleaned and repainted areas

**Evaluation of inaccessible areas as required by 10CFR50.55a(b)(2)(ix)(A) (Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions).**

These indications were noted during the VT-3 visual examinations of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor (approximately 12 inches above the floor interface). The area examined was identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of light rust and discoloration with no visible signs of active corrosion. The area examined did not show any wall loss or gross degradation. These indications appeared to be the result of previous maintenance activities. This area is not considered suspect and does not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas were cleaned/prepared and recoated in accordance with site procedures. Based on this information, there is no indication that an adverse condition exists in the area examined or that an adverse condition would be present in inaccessible areas.

**Evaluation of additional examinations required per 10CFR50.55a(b)(2)(ix)(D). (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verity that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components.**

These indications were noted during the VT-3 visual examinations of the SCV interior surface in the vicinity of the moisture barrier at the interface of the SCV and raceway floor (approximately 12 inches above the floor interface). The area examined was identified for coating repair, and this VT-3 visual examination was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The examination identified indications consisting of light rust and discoloration, with no visible signs of active corrosion. The areas examined did not show any significant wall loss or gross degradation. These indications appeared to be the result of previous maintenance activities. This area is not considered suspect and does not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas were cleaned/prepared and recoated in accordance with site procedures. A VT-3 preservice examination was performed on this area following reapplication of the coatings to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required. Based upon the conditions found, no additional examinations are warranted.

| | |
|---|---|
| OWNER: TENNESSEE VALLEY AUTHORITY<br>1101 MARKET STREET<br>CHATTANOOGA, TENNESSEE 37402-2801 | PLANT: SEQUOYAH NUCLEAR PLANT<br>P.O. BOX 2000<br>SODDY DAISY, TENNESSEE 37384-2000 |
| UNIT: ONE<br>COMMERCIAL SERVICE DATE: JULY 1, 1981<br>NATIONAL BOARD NUMBER FOR UNIT: NOT REQUIRED | CERTIFICATE OF AUTHORIZATION: NOT REQUIRED |

## IWE METAL CONTAINMENT EVALUATION

**NOI Number: 1-SQ-463**

Component Identifier: SCV- 1, SCV-2, SCV-3, SCV-4, SCV-1-IB, SCV-2-IB, SCV-3-IB, and SCV-4-IB

Examination Report Number: SCV-0173, SCV-0174, SCV-0175, SCV-176, SCV-0185, SCV-0186, SCV-0194, and SCV-0195

Disposition: Cleaned and repainted areas

**Evaluation of inaccessible areas as required by 10CFR50.55a(b)(2)(ix)(A) (Include (1) A description of the type and estimated extent of degradation, and the conditions that led to the degradation; (2) An evaluation of each area, and the result of the evaluation; and (3) A description of necessary corrective actions).**

These indications were noted during the VT-3 visual examination of various areas on the SCV interior and exterior surface. The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion and one arc strike. The areas examined did not show any significant wall loss or gross degradation. These indications appear to be the result of previous maintenance activities. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas were cleaned/prepared and recoated in accordance with site procedures and the arc strike was removed in accordance with 0-MI-MXX-000-030.0. Based on this information, there is no indication that an adverse condition exists in the areas examined or that an adverse condition would be present in inaccessible areas.

**Evaluation of additional examinations required per 10CFR50.55a(b)(2)(ix)(D). (1) A description of each flaw or area, including the extent of degradation, and the conditions that led to the degradation; (2) The acceptability of each flaw or area, and the need for additional examinations to verity that similar degradation does not exist in similar components; (3) A description of the necessary corrective actions; and (4) The number and type of additional examinations to ensure detection of similar degradation in similar components.**

These indications were noted during the VT-3 visual examination of various areas on the SCV interior and exterior surface. The areas examined were identified for coating repairs, and this visual examination (VT-3) was performed prior to surface preparation to satisfy the requirements of IWE-2500(b). The SCV surface showed minor corrosion, rusting, and pitting, with no visible signs of active corrosion and one arc strike. The areas examined did not show any significant wall loss or gross degradation. These indications appear to be the result on previous maintenance activities. These areas are not considered suspect and do not impact the structural integrity or leak tightness of the SCV. No detrimental flaws were observed. These areas were cleaned/prepared and recoated in accordance with site procedures and the arc strike was removed in accordance with 0-MI-MXX-000-030.0. A VT-3 preservice examination was performed on areas re-coated to satisfy the requirements of IWE-2200(g). The component is acceptable for continued service, and no further corrective action is required. Based upon the conditions found, no additional examinations are warranted.