

From: <david.chrzanowski@exeloncorp.com>
To: <gfd@nrc.gov>, <tgs@nrc.gov>
Date: 3/18/05 12:18PM
Subject: Byron LSIV Info 1

Action Required:
Recommendation:

I am also including the drawing again since I misaddressed it earlier.

<<Document #1 Drawing.pdf>> <<Document #1 Part 1a.pdf>> <<Document #1 Part 1b.pdf>>

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Mail Envelope Properties (423B0D5A.1CB : 12 : 41419)

Subject: Byron LSIV Info 1
Creation Date: 3/18/05 12:17PM
From: <david.chrzanowski@exeloncorp.com>

Created By: david.chrzanowski@exeloncorp.com

Recipients

nrc.gov
owf4_po.OWFN_DO
GFD (George Dick)

nrc.goc
tgs

Post Office

owf4_po.OWFN_DO

Route

nrc.gov
nrc.goc

Files	Size	Date & Time
MESSAGE	1242	03/18/05 12:17PM
Document #1 Drawing.pdf	160981	
Document #1 Part 1a.pdf	2419405	
Document #1 Part 1b.pdf	1235455	
Mime.822	5225340	

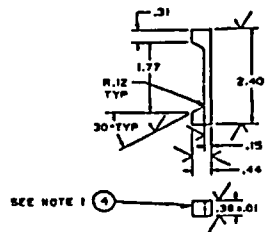
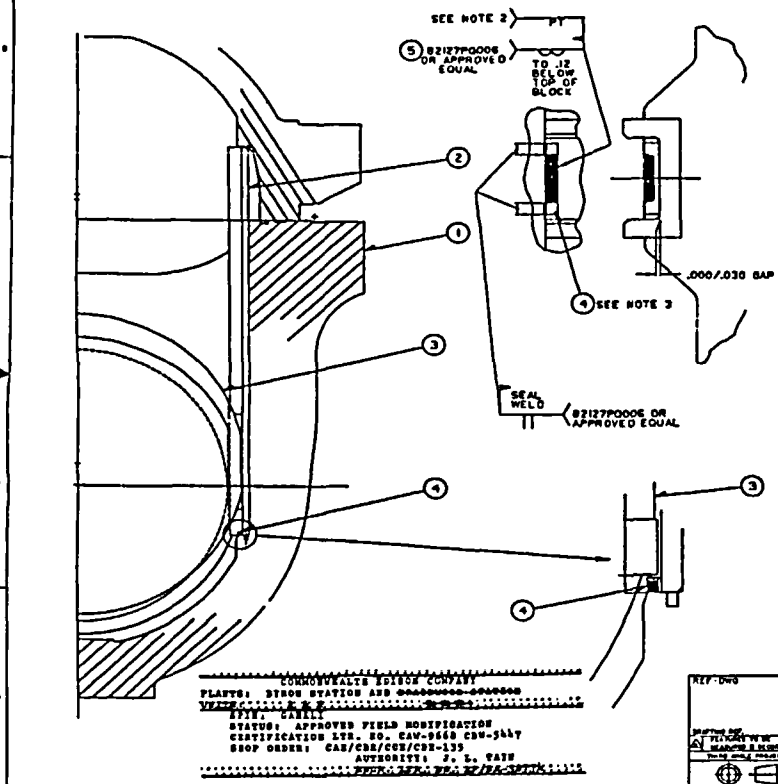
Options

Expiration Date: None
Priority: Standard
Reply Requested: No
Return Notification: None

Concealed Subject: No
Security: Standard

ALP/WDG

REVISION
1 BY 8/20/78 R. S. 4422-01



NOTES

1. LIQUID PENETRANT INSPECT BLOCKS IN ACCORDANCE WITH ASME SECTION III, PARA HG-2546. USE ACCEPTANCE STANDARD FOR MATERIALS LESS THAN 5/8 INCH THICK.
 2. LIQUID PENETRANT INSPECT FINAL WELD SURFACES IN ACCORDANCE WITH ASME SECTION III, HG-2500 USING ACCEPTANCE STANDARD SPECIFIED IN HG-2550. (IN ACCORDANCE WITH THE WELDING CODE A DELTA FERRITE LIMIT IS CONTAINED IN CODE SPEC 11-1)
 3. BLOCK ASSEMBLY NOTES:
 1. PLACE BLOCK AGAINST GUIDE & TAP BLOCK TO VALVE BODY.
 2. PLACE A LAYER OF WELD AROUND BLOCK EDGES TO BE WELDED.
 3. USE CAUTION NOT TO MELT BLOCK LEGS INTO THE GUIDE.
- A-BODY ASSEMBLIES 11A4854001, 11A4855001, 11E276001 & 11E295001.
 B-MATERIAL SHALL COMPLY WITH ASME BOKER AND PRESSURE VESSEL CODE SECTION III, SUBSECTION NB, 1971 EDITION THROUGH 1973 OR LATER ADDENDA.
 C-MATERIAL SHALL COMPLY WITH SA479 TYPE 304 OR 316, SA454 TYPE 304 OR 316. THE MAXIMUM COBALT CONTENT SHALL NOT EXCEED 0.02%.
 D-TYPE 308 WELD WIRE SHALL MEET REQUIREMENTS OF SECTION II SA454 AND SECTION III HB-2400 OF THE ASME BOKER AND PRESSURE VESSEL CODE WITH ADDENDA OR LATER.
 E-DELTA FERRITE SHALL BE DETERMINED FROM THE ACTUAL CHEMICAL ANALYSIS OF THE WIRE USING FIGURE HB-3433.11 OF SECTION III. THE DELTA FERRITE SHALL BE REPORTED IN FERRITE NUMBER IF #1. THE DELTA FERRITE SHALL BE NO LESS THAN 5 OR GREATER THAN 20.

COMMONWEALTH Edison Company
 PLANT: STROB STATION AND 00000000-000000
 VELOCITY: 1000 RPM
 TYPE: GATE
 STATUS: APPROVED FIELD MODIFICATION
 CERTIFICATION SER. NO. 24V-0660 CR-544
 SHOP ORDER: GAR/CRR/CRR-133
 AUTHORITY: J. L. PAIS

REF: DWG	0510000	TOLERANCE & FINISHING NOTES UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES DIMENSIONS IN PARENTHESES ARE IN MILLIMETERS DIMENSIONS IN BRACKETS ARE HOLE DIA. DIMENSIONS IN SQUARE BRACKETS ARE HOLE DIA. DIMENSIONS IN CIRCULAR BRACKETS ARE HOLE DIA. DIMENSIONS IN DIAGONAL BRACKETS ARE HOLE DIA. DIMENSIONS IN TYPED BRACKETS ARE HOLE DIA.
----------	---------	--

NO	WELD WIRE	TYPE	QTY	REVISION	DATE
1	BLOCK	308	1	1	10/1/78
2	WELD WIRE	308	1	1	10/1/78
3	WELD WIRE	308	1	1	10/1/78
4	WELD WIRE	308	1	1	10/1/78
5	WELD WIRE	308	1	1	10/1/78

PARTS LIST

01	WELDED ASSEMBLY	1	1	10/1/78
02	WELD WIRE	1	1	10/1/78
03	WELD WIRE	1	1	10/1/78
04	WELD WIRE	1	1	10/1/78
05	WELD WIRE	1	1	10/1/78

Westinghouse Electric Corporation
 FIELD MODIF-GUIDE
 RETENTION ISOL VALVE
 GUID-RETNN

D104808 3D18417

FIELD MODIFICATION-GUIDE
 RETENTION ISOLATION VALVE

3D18417

NUCLEAR SAFETY RELATED
 EQUIPMENT IS SHOWN
 ON THIS DRAWING

DATE: 10/1/78
 DRAWN BY: [Signature]
 CHECKED BY: [Signature]
 SHEET NUMBER: [Blank]
 SIZE: D (400)

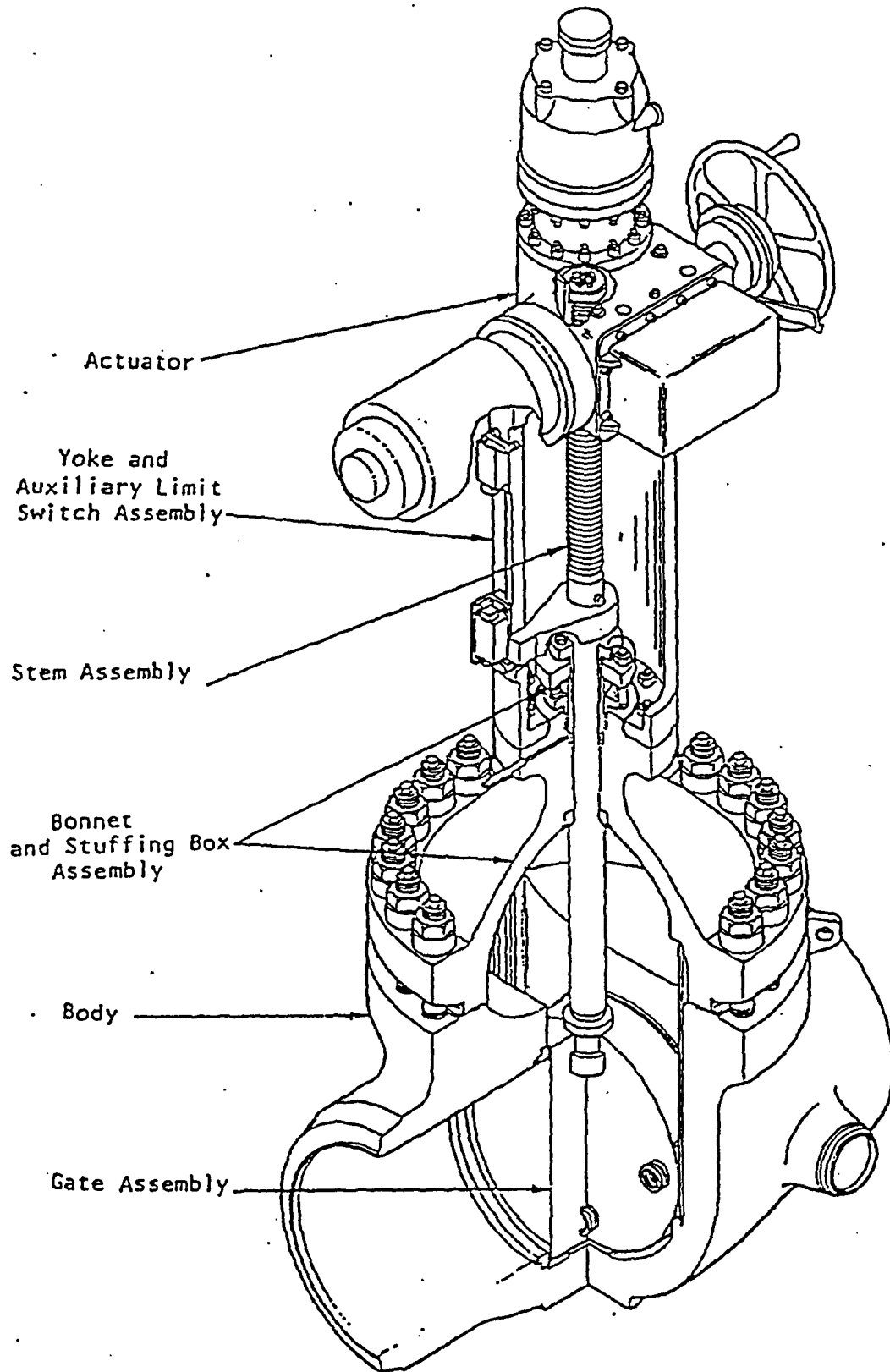


Figure 1.1
Main Loop Isolation Valve

ORIGINAL

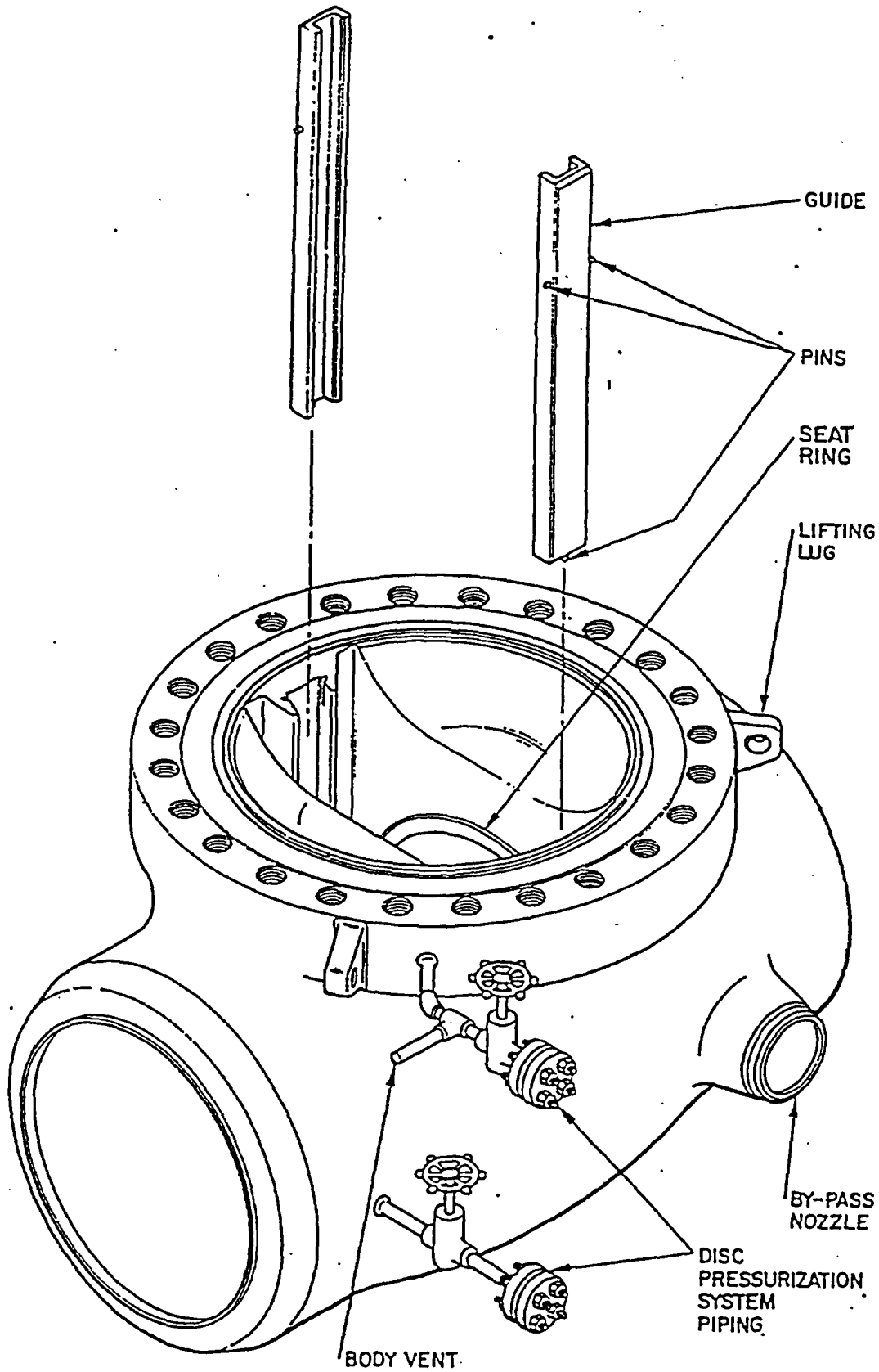



FIGURE 1.2
BODY AND COMPONENTS

Request Task: 570122923 01  Date: 03/25/00
 Work Order Number: 01
 Work Order Type: D DUPLICATE
 Work Order: **MOV IC RC LOOP GL STOP VLV**
REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

WORK WRITTEN TO:
 Facility: BYR Unit 01 Sys RC Mfr Code: AW120 IOPC No
 Assembly/Equip: MOVA 8002C Model No: 1165E261
 Component: V20 (Serial No:)
 IOPC: 1RC8002C
 Building: RX1 Elev: 401 Room: Row: Grid: Radial:
 Cell: 03 Yard: Azimuth: Panel/Rack:
 Location: +01
 Job Loc:
 Job Desc: **REPAIR VALVE GUIDE RETAINING PINS BY INSTALLING KEEPERS**

PLANNING/SCHEDULING INFORMATION
 Task Dept: CM Task Dept: CM Priority: C Planned Date: 03/31/00
 Work Analyst: HARDEBROOK
 Requester: *** UNKNOWN ***
 Plant Supv:
 Spec Date: Est Required:

OPERATIONS SIGN IN REVIEW DATA
 Tech Spec: Y Tech Spec/Admin Tech Req No:
 Cond Isol: N (List of possible entries / Evaluate using actual document)
 Pipe Prot: N NONE FOUND
 Job Req No: Y 990024622

SIGNATURE AUTHORIZATION/APPROVAL/REVIEW

Supv Authorization to start work	N/A	Peter S. H. [Signature]	9-2-00
Plant Supv for work completion	[Signature]	[Signature]	2-2-00
Review of work	N/A	[Signature]	[Date]
Review of Code work	N/A	[Signature]	[Date]
Post-Maintenance Test Complete	[Signature]	[Signature]	[Date]
Shift Approval For Completion	[Signature]	[Signature]	[Date]
Review of work package	N/A	[Signature]	[Date]
Review of work package	[Signature]	[Signature]	[Date]

BYRON NUCLEAR POWER STATION
 ENGINEERING DEPT.
 671 SUNDY AVENUE

COMMON

Work Request Task: 970122923 01



Page: 2

Date: 09/25/00

Master Number : 01

PART 1 of 2

Package Type : D DUPLICATE

Work Date:

Time/Act : MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

TASK DETERMINATION DATA:		50.59 Scrn Rq: N	
Safety Related	: Y Y	Critical Comp:	Fire Protection: N
Code Related	: Y Y	Availability : R	ASME XI/IST : N
Reliability Rel	: N N	Modification : N	Cntnmnt Isolat : N
Regulatory Rel	: N N	Tracking Code:	Fire Hazard : N
EQ Related	: N N	RWP Rqrd : Y	Confined Space : N
Control Rm Equip:	N	OOS Rqrd/No : Y 990024622	Personal Safety: N
Effect S/R Eq	: Y	Spcl Hazards : WD	PMV Required : N
Leakage Related	: N	Spcl Precaut : WG	PIF Rel : :
Unit Derating	: :	Barrier(s) :	ISI Required : Y
Foreign Mtl Excl:	Y	Mode Required:	Reg 1.97 : :
EPA Log Entry	: :	Applic Mode :	Temp Alt : :
Evals Required	: :	Tech Spec : Y	Trouble/Brkdown: N
Weighting Factor:	:	Work Plan Fac: WP ND QS RS VS WE	Security : N
RWP Request No. :	99005974	RWP No/Rev : 001827 00	

QC REQMTS & COMMENTS: QC Inspection Standard:

QC HOLD POINTS FOR WELD INSPECTION. SEE NSWP WELD RECORDS 06/03/00 MMC96
 AND WORK INSTRUCTIONS. 06/03/00 MMC96
 06/03/00 MMC96

QC TO PERFORM INTERNAL CLEANLINESS INSPECTION 06/03/00 MMC96

QC Inspector :

COMMON

Work Request Task: 970122923 01



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Date: 09/25/00
PART 1 of 2

Master Number : 01

Package Type : D DUPLICATE

Work Date:

Me/Act : MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

WORK DESCRIPTION:

CLNINSP

*** WORK SCOPE ***

INSTALL GUIDE STOP BLOCKS IN ACCORDANCE WITH WESTINGHOUSE FCN# CBEM-10754 (DOC# 11) AND THE REQUIREMENTS STATED IN BAP 1600-5T1 (DOC# 19).

ONCE ASME MATERIAL(S) IS/ARE CHECKED OUT TO WORK REQUEST, SUPERVISOR/DESIGNEE SHALL RETURN WORK PACKAGE TO WORK PLANNER FOR COMPLETING NIS-2 FORM AND OBTAINING REQUIRED RRR DATA DOCUMENTATION.

MM SUPERVISOR/DESIGNEE: David L. ... / 9/25/00
SIGNATURE / DATE

PRIOR TO START OF WORK, REQUEST QC TO PERFORM PT EXAM ON GUIDE BLOCKS. RECORD NDE REPORT NO. 2000-329

RECORD AS FOUND VALVE POSITION.

AS FOUND: OPEN - () ** CLOSED - () ** THROTTLED - ()

INSTALLER: A. Lopez / 9/25/00
SIGNATURE / DATE

MAINTAIN SYSTEM CLEANLINESS IN ACCORDANCE WITH FME PROCEDURE MA-AA-AD-6-03008 AND ATTACHMENT 2.

[] AREA 1 AREA 2 [X]

INSTALL FIXTURE FOR PCI ROBOTIC WELDING MACHINE ON THE 8" BYPASS NOZZLE OF THE LSIV.

---PERFORM TACK WELDING PER NSWP-W-01, PCI PROCEDURES GWS-1, WCP-6 AND WCP-8 AND PCI WELDING PROCEDURE 8 MN-GTAW/ SMAW.

---PREHEAT: 50 DEG. INTERPASS: 350 DEG.

---FILLER MATL.: SMAW = E308/E316 GTAW = ER308/ER316

---QC FINAL WELD INSPECTION: ...

COMMON

Work Request No.: 970122923 01



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Date: 09/25/00

Master Number: 01

PART 1 of 2

Package Type: D DUPLICATE

Work Date:

Work/Ass: MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

WORK DESCRIPTION:

CLNINSP

INITIAL/DATE

CLOSE VALVE UNDER POWER TO THE CLOSED LIMIT SWITCH POSITION
CONTINUE TO CLOSE VALVE MANUALLY TO THE STEM STOP POSITION
(APPROXIMATELY 3/8" BELOW LIMIT SWITCH POSITION).

MARK A REFERENCE LINE ON THE VALVE YOKE CORRESPONDING TO
THE TORQUE ARM POSITION. KEEP REFERENCE LINE ON YOKE TO
CHECK THIS POSITION AFTER BLOCK WELDING.

OPEN VALVE ELECTRICALLY TO THE FULL OPEN POSITION FOR
WELDING OF THE BLOCKS.

PROVIDE PROTECTION FOR VALVE SEATS FROM DAMAGE DURING
BLOCK INSTALLATION.

INSTALL GUIDE BLOCKS IN ACCORDANCE WITH WESTINGHOUSE
FCN# CBEM-10754 (DOC# 11) USING WELD MAP (DOC# 12).

---PERFORM WELDING PER NSWP-W-01, PCI PROCEDURES GWS-1,
WCP-6 AND WCP-8 AND PCI WELD PROCEDURE 8-MC-GTAW
USING WELD MAP (DOC# 12) AND W-01-A WELD RECORDS
(DOC# 13 - 18)

---DOCUMENT WELDING USING W-01-A WELD RECORDS
(DOC# 13 THRU 18)

---PLACE BLOCK AGAINST GUIDE AND TACK WELD TO VALVE BODY.

---PLACE A LAYER OF WELD AROUND BLOCK EDGES TO BE WELDED.

TAP BLOCK TO KEEP IT AGAINST THE GUIDE.

---USE CAUTION NOT TO MELT BLOCK LEGS INTO THE GUIDE.

WELDING COMPLETE - INSTALLER:

INITIAL/DATE

CLEAN SEAT SURFACES AND INSIDE OF VALVE BODY TO REMOVE
DEBRIS AND RESIDUE FROM WELDING AND NDE.

INSTALLER:

INITIAL/DATE

COMD001

Work Request Task: 970122923 01



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Date: 09/25/00

Master Number : 01

PART 1 of 2

Package Type : D DUPLICATE

Work Date:

Time/Act : MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

WORK DESCRIPTION: CLNINSP

CLOSE VALVE ELECTRICALLY TO THE CLOSED LIMIT SWITCH POSITION. CONTINUE TO TO CLOSE VALVE MANUALLY TO THE REFERENCE LINE MARKED ON THE YOKE IN THE PREVIOUS STEP.

IF TORQUE ARM DOES NOT GO DOWN TO THE REFERENCE LINE, RECORD DIMENSION FROM THE TORQUE ARM TO THE REFERENCE LINE. CONTACT ENGINEERING FOR RESOLUTION DIMENSION

SEE REV. 1
RH 9/25/00

REMOVE FIXTURE FROM THE 8" BYPASS NOZZLE ON THE LSIV. REQUEST QC TO VISUALLY INSPECT REMOVAL AREA AND TO PERFORM NDE (PT) EXAM.

NDE REPORT NO. 9000-277

QC: *[Signature]* / 10-4-00
INITIAL/DATE

*****HOLD*****

QC TO PERFORM INTERNAL CLEANLINESS INSPECTION(S) AND DOCUMENT ACCEPTANCE USING APPROPRIATE ATTACHMENT(S).

POSITION VALVE IN THE AS FOUND POSITION RECORDED AT INITIAL WORK INSTRUCTIONS.

AS LEFT : OPEN - (✓) ** CLOSED - () ** THROTTLED - (%)

INSTALLER: *[Signature]* / 10/1/00
SIGNATURE / DATE

*****END OF REV.0*****

*** WORK SCOPE ***

INSTALL GUIDE STOP BLOCKS IN ACCORDANCE WITH WESTINGHOUSE DRAWING 4D98951 (DOC# 21) (PROVIDED BY ER9915633, DOC# 22) AND THE REQUIREMENTS STATED IN BAP 1600-5T1 (DOC# 19).

COMMON

Work Request Task: 970122923 01



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PART 1 of 2

Package Type: D DUPLICATE

Work Date:

Name/Act: MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

WORK DESCRIPTION:

CLNINSP

REVISIONS:
REVISION 1
REVISE PREVIOUS WORK INSTRUCTIONS AS FOLLOWS:

INSTALL GUIDE BLOCKS IN ACCORDANCE WITH THE NOTES AND DETAILS ON WESTINGHOUSE DRAWING 4D98951 (DOC# 21) USING WELD MAP (DOC# 12).

---PERFORM WELDING PER NSWP-W-01, PCI PROCEDURES GWS-1, WCP-6 AND WCP-8 AND PCI WELD PROCEDURE 8-MC-GTAW USING WELD MAP (DOC# 12) AND W-01-A WELD RECORD (DOC# 13 & 14).

---DOCUMENT WELDING USING W-01-A WELD RECORDS (DOC# 13 & 14).

---FILLET WELD MAY BE LESS THAN .25" AT THE START AND FINISH OF THE WELD.

---USE CAUTION NOT TO MELT BLOCK LEGS INTO THE GUIDE(S)

DELETE ALL STEPS IN PREVIOUS WORK INSTRUCTIONS PERTAINING TO VERIFICATION OF VALVE CLOSURE. STEPS ARE NOT INCLUDED IN DRAWING 4D8951 (DOC# 22).

REV.1 DOCUMENT CHANGES:

---DRAWING 4D98951 (DOC# 21) SUPERSEDES FCN# CBEM-10754 (DOC# 11)

---WELD MAP (DOC# 12) REVISED PER NEW WELD DETAIL ON DRAWING# 4D98951 (DOC# 21).

---DOC# 13 & 14 REVISED PER NEW WELD DETAIL ON DRAWING# 4D98951 (DOC# 21).

---DOC# 15 - 19 (WELDS# 3 - 6) DELETED PER REVISED WELD DETAIL ON DRAWING# 4D98951 (DOC# 21).

---ER9915633 (DOC# 22) SUPERSEDES ER9913429 (DOC# 20)

COMMON

Work Request No: 970122923.01



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Date: 09/25/00
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Master Number: 01

Package Type: D DUPLICATE Work Dates:

Me/Act: MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

ACTUAL START / UTC CHANGE-OUT INFORMATION:

Actual Start Date/Time: 9/20/00 07:00
Actual Complete Date/Time: 10/04/00 1800

UTC: W120 1165E26

Change out:
UTC:
Manufacturer:
Model Name:
Catalog #:
Reason:

AS FOUND/WORK PERFORMED:

As Found: *Installed and removed fixture to allow robotic welding repairs to valve guide of 1RC8002C.*

COMMON

Work Request Task: 970122923 01



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Date: 09/25/00
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Master Number : 01

Package Type : D DUPLICATE

Work Date:

Location : MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

Work Performed:

*Installed and removed Fixture to allow
Robotic welding modifications to valve guides
of 1RC8002. size 10-1.00*

Continued on Additional Sheets?:

No

Company

Work Request Task: 970122923 01



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Date: 09/25/00

Master Number : 01

PART 1 of 2

Package Type : D DUPLICATE

Work Date:

Location : MOV 1C RC LOOP CL STOP VLV

Task Title: REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

Root Cause (if applicable): N/A - Modification

Root Cause

Comments :

Worker: Ronald Edwards

Date: 10/5/00

Total Hours: _____

Deficiency Tag Removed: N/A

Comments:

Post Maintenance Verification:

Test No Dept Inits Date

*N/A
MAD
10-7-00*

NO POST MAINTENANCE VERIFICATION SPECIFIED

COMB

Work Request Task : 970122923 01



Page: 1
Date: 09/25/00
PART 1 of 2

Master Number : 01

Package Type : D DUPLICATE

Work Date:

Line/Act : MOV 1C RC LOOP CL STOP VLV

Task Title : REPAIR VALVE INTERNAL GUIDES DUE TO RETAINING PIN FAILURE

SUPERVISOR FEEDBACK:

Maint Cause : _____ Maintenance Code: _____
 Avoidance Code : _____ Action Taken : _____
 PMT Required : _____ (Y/N)
 Downtime : _____ Hrs _____ Min Limited Cond Operation: _____

Work Delay: _____
 Comments and Hours _____

Rework : NONE
 Comments and Hours _____

REFERENCES:

TYPE	Sub	Document Number	Sheet	Title/Description
PROC	MSP	MA-AA-AD-6-00010 ATT# 1	1	WP REVISION SHEET
PROC	MSP	MA-AA-AD-6-03009 ATT# 1	1	BILL OF MATERIALS
PROC	SBPM	VOL 3A NSWP-W-01		ASME WELDING *
PROC	SPPM	VOL 3A NSWP-W-01 EXHIBIT		ASME WELD RECORD
PROC	SBPM	VOL 2 ASME/B31.1 OWR		ASME/B31.1 GENERAL WEL *
DWGV		1165E26	1	MOTOR OPERATED GATE VA
DWGV		1165E26	2	MOTOR OPERATED GATE VA
DCD		FCN# CBEM-10754		
PROC	MSP	MA-AA-AD-6-03009 ATT# 5	1	M&TE USAGE LOG
PROC	MSP	AD-AA-104-109 ATTACHMENT	1	PRE-JOB BRIEFING *
PROC	MSP	AD-AA-104-109 ATTACHMENT	1-4	EXPANDED PRE-JOB BRIEF *
PROC	MSP	AD-AA-104-109 ATTACHMENT	1-3	POST-JOB CRITIQUE *
PROC	MSP	MA-AA-AD-6-03008 ATT.2	1 & 3	FME REQUIREMENTS
DWGV		4D98951		
DCD	ER	9915633		

REMOVED @ CLOSE OUT *MAK 10-7-00*

MATERIALS LIST:

Parts required date/time : _____
 Deliver Parts to : _____
 Parts Checked & Available: _____
 Parts Assembled In Storeroom Under This Work Request: _____

R	Qty	UOM	Catalog Id	Description
M	1	EA	0000615523	4 GASKET, SPIRAL WOUND, SPIRAL WOUND, NUCLEAR C
M	1	EA	0000785551	4 ASSEMBLY, GUIDE, SPIN REPELSAA / FOR HOT LEG
	2	EA	0001026789	1 BLOCK, GUIDE, LSIV RETENTION, SA-479 OR SA-24

*9/27
10/6/00*

0011000 - 0111111000

ATTACHMENT 1
Example of Work Package Revision sheet
Page 3 of 3

WR Number: 970122923-01

Rev. No.	Revision Type Major/Minor	Revision Description
①	MINOR	UPDATED PROCEDURES ON REFERENCE LIST AND INSERTED CORRECT FORMS. <i>11/9/00</i>
②	MINOR	Added data to WELD MAP <i>11/9/00</i>
Major Revision Field Approvals Rev. No. <u> </u>		

Work Package Preparer _____

AI/AN/ANH Reviewer _____

Operations _____

Operations Validation of OOS

Technical Reviewer _____

Cross-Discipline Reviewer _____

Approver _____

NA *11/9/00*

Planning / E-3 Walkdown Checklist

(use back of form for additional comments/information)

Dept: EM IM MM Other: CM PCI

AR# / WR #: 970122923-01 EPN #: 1RC8002C Component Type: _____

Initial Information EWCs Panel M49	Location: Bldg. <u>01</u> Elev. <u>390' H4</u> Rm. _____ Col. _____ Row. _____ Az. _____						
	Rad. _____ Yard. _____ Panel Rack #: _____						
	Cont Rm Equip: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Shielding Issues: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Interference's: Yrs <input type="checkbox"/> No <input checked="" type="checkbox"/> Conf. Space: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>						
	RWP Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Scaffold Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Insul Removal: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Isolatable: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
Special Hazards: <input type="checkbox"/> Asbestos <input checked="" type="checkbox"/> Fall Protection <input type="checkbox"/> Noise <input checked="" type="checkbox"/> Lighting <input type="checkbox"/> Cutting/Welding Other: <u>High Dose</u>							
Special Precautions / Safety Equip: <input type="checkbox"/> Manlift <input checked="" type="checkbox"/> Ladder <input type="checkbox"/> Low Voltage Lighting <input type="checkbox"/> Chemical Clothing Other: <u>High Dose</u>							
Manufacturer: _____ Model: _____ Serial #: _____ UTC No: _____							
Type / Size: <u>NA 155 9-30-00</u> Instrument Range / Mounting: _____ Common Sensing Line: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							

Initial Walkdown Information	Component Label Present/Correct: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> AR / Deficiency Tag(s) Hung: Yes <input type="checkbox"/> No <input type="checkbox"/> Tag Number(s): _____						
	Type of leakage: _____ Quantity of leakage: _____						
	Identify / Validate Problem: <u>RETAINING PIN FAILURE</u>						
	Repair Recommendation: <u>REPAIR VALVE INTERNAL GUIDES</u>						
	Estimated Parts Required: <u>1 - CSIV GUIDE STOP BLOCK</u>						
Tools / Special Tools Required: <u>yes POOR QUALITY ORIGINAL</u>							

Special Requirements and EWCs Panel M213 Information	OOS Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Suggested isolation points: _____						
	Temp Mod / Power Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If Yes specify: _____						
	Long lead parts Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If Yes specify: _____						
	Area Decon Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Step Off Pad Required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dose Concerns: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>						
	Security Breaches Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Fire Protection: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Photo/Picture Available: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
	Maint history reviewed: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> JIT/Mock-up Training: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>						
	FME Zone: <input type="checkbox"/> Zone 1 <input checked="" type="checkbox"/> Zone 2 FME Concerns: <u>Chips From cutting INSIDE Pipe & VALVE</u>						
	Key Required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Key #: _____ Contingencies Needed: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>						
	Work Planning Factors: <input type="checkbox"/> High Risk <input type="checkbox"/> HLA <input type="checkbox"/> LCO <input checked="" type="checkbox"/> Rigging Required <input type="checkbox"/> Freeze Required <input type="checkbox"/> Furmanite Required						
	<input type="checkbox"/> Crane Support <input checked="" type="checkbox"/> Vendor Support <input type="checkbox"/> Painting <input checked="" type="checkbox"/> Shielding <input checked="" type="checkbox"/> Scaffold Other: _____						
Plant Barrier Impairment(s): <u>NA</u>							
Procedures / Drawings / VETIPS Required: <u>yes</u>							
Other Safety Issues: _____							
Support From Other Groups: <u>CM PCI RP CP</u> Est. Crew / Job Duration: _____							
Distance to: Air _____ Water _____ Electricity _____							

Planning Walkdown performed by: John [Signature] Date: 9 / 30 / 00

Planning / E-3 Walkdown Checklist

(use back of form for additional comments/information)

POOR QUALITY ORIGINAL

E-3 Walkdown
Validate Information

All potential errors / safety issues addressed:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Comments: _____
Work instructions / Procedures / VETIPS Adequate:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Comments: _____
Correct parts identified on BOM:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Comments: _____
Dose / Alara concerns identified:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Comments: _____
M&TE / Tool list / equipment available:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Comments: _____
Crew / Duration Correct:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Comments: _____
Support groups Correct:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Comments: _____
RWP Request Submitted:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	RWP #: <u>1827</u>
OOS Request Submitted / Adequate:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	OOS #: 990021933 ⁷⁵⁵⁹⁻³⁰⁻⁰⁰ <u>990024622</u>
Scaffold Request Submitted:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Scaffold #: _____
Insulation Request Submitted:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Insulation #: _____
Parts Reserved:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Ticket #: _____
Parts Staged:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Location: _____
All Holds Removed:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	All Eng. Approvals obtained: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Required Tests Identified:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	All Procedure Datapoints Identified: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
IM data cards in package:	Yes ^{7/11/00} <input checked="" type="checkbox"/> No <input type="checkbox"/>	FME concerns addressed: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Drawings Adequate / Legible:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Painting required: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Pre-fab work needed:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Job set-up required: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
PERMITS:		
Hot Work #: <u>YES</u>	Confined Space #: <u>NA</u>	Special Chemical use #: <u>NA</u>
Plant Barrier Impairment Number(s):	<u>NA</u>	

E-3 Walkdown performed by: John Poy Date: 9 / 30 / 00

Work Completion Information

Verify installed:
 Manufacturer: _____ Model: _____ Serial #: _____ UTC #: _____

Validate remaining data previously collected is correct: Yes No
 If No - List discrepancies / differences: _____

Validate tools previously listed are correct: Yes No
 If No - List discrepancies / differences: _____

First Line Supervisor: John Poy Date: 10 / 07 / 00

MA-AA-AD-6-03008

DOC. 10 REV: 0

MA-AA-AD-6-03008
Revision 0
Page 25 of 40

**ATTACHMENT 2
Work Package Forms
Page 1 of 3**

Work Request No.: 970122923-01	MA-AA-AD-6-03008, Attachment 2
---------------------------------------	--------------------------------

Foreign Material Exclusion Requirements

FME AREA CLASSIFICATION: An FME Area 1 is established in situations where a final visual inspection of internal cleanliness prior to system closure is not possible due to configuration or other circumstances, otherwise a FME Area 2 will be established.

Work Planner - Initial Appropriate FME Area	AREA 1		AREA 2	
FME Requirements: These requirements shall be complete prior to initial system breach.	Required	WGS Initials	Required	WGS Initials
FME Work Practices discussed	Yes		Yes	JFF
Safety/Cobalt addressed during pre-job brief	Yes		Yes	JFF
FME Devices were addressed	Yes		Yes	JFF
FMEA Boundary in place	Yes		Yes/No	---
FMEA Signs Posted (Attachment 2, page 2)	Yes		Yes/No	---
FMEA Pre-cleaning completed	Yes		Yes	---
FMEA Prejob Inspections performed	Yes		Yes	---
FME Monitor required	Yes/No	---	Yes/No	---

*** At the discretion of the Work Group Supervisor, this item may be N/A.

FME Internal Device Record	Yes	See Below	Yes	See Below
FMEA Log required (Attachment 2, Page 3)	Yes	See Below	Yes/No	See Below

Remarks:

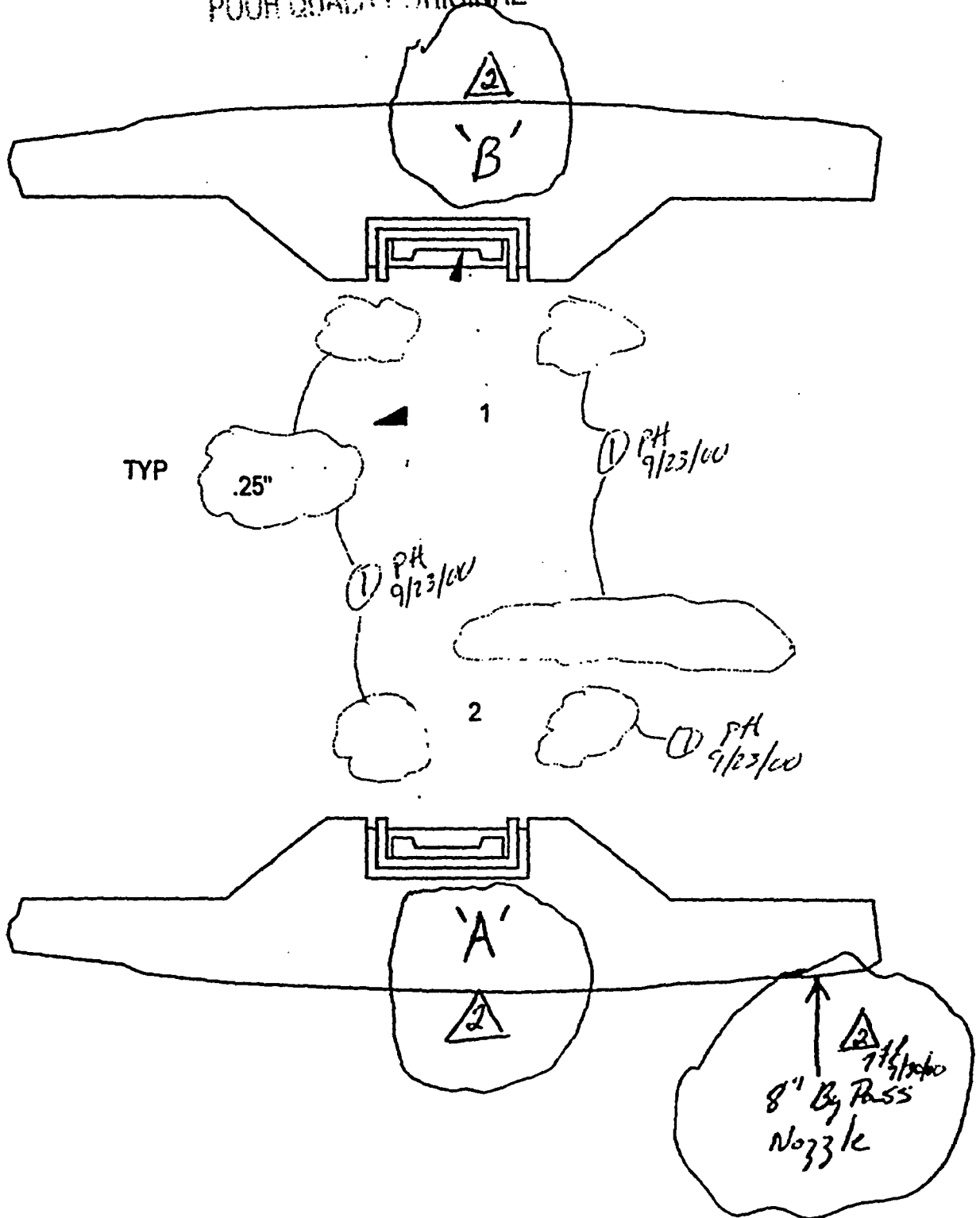
Initial Internal Foreign Material inspection completed and appropriate levels of FME controls exist:
John P... 10/07/00
 Lead Worker Initials/Date

FME INTERNAL DEVICE RECORD

Internal Device Description	Location	Date Installed	Lead Worker Initials	Date Removed	Lead Worker Initials

Tool and Parts Log Used? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	If Tool and Parts Log is used, reconcile prior to final closeout. Work Supervisor Initials/Date <i>JFF</i> 10/7/00
Verify system/component is free of foreign material prior to final system closure.	Work Supervisor Initials/Date <i>JFF</i> 10/7/00

POOR QUALITY ORIGINAL



ASME WELD RECORD

EXHIBIT A
Page 1 of 2

WELD RECORD GENERAL INFORMATION		<input checked="" type="checkbox"/> Safety
Station: 006 Unit: 01		<input type="checkbox"/> Regulatory/Augmented Quality
Supplement Sheet: <u>POOR QUALITY ORIGINAL</u>		<input type="checkbox"/> Non-Safety
Work Package No.: 970122923-01		<input type="checkbox"/> Reliability
Document No.: 13 Rev.: 01		<input type="checkbox"/> Seismic
Weld No.: 1 Dwg./Doc. Number & Rev.: CBEM-10754[DOC# 11] Design Table: N/A		
EPN No.: 1RC8002C ASME Code/Class: SECT. III / CL.1		
Description (Item #1) VALVE BODY Base Metal Spec.: SA-351 GR.CF8M		
P-No./Gr. No.: 8/1 Nom. Thick: >1" Dia.: N/A		
Description (Item #2) GUIDE STOP BLOCK Base Metal Spec.: SEE REMARKS		
P-No./Gr. No.: 8/1 Nom. Thick: 3/8" Dia.: N/A		
WPS No. & Rev.: 8 MC-GTAW End Prep Detail: PER DOC# 11		
<input type="checkbox"/> Open Root <input type="checkbox"/> Consumable Insert <input type="checkbox"/> Backing Ring <input checked="" type="checkbox"/> Fillet-Min. Size .25"		
<input type="checkbox"/> Overlay Deposit Thickness: Minimum: _____ Maximum: _____		
<input checked="" type="checkbox"/> Other: <u>BUILD-UP (SURFACING)</u> ① PH 9/23/00		
Filler Material Class <input checked="" type="checkbox"/> Root: ER316L <input checked="" type="checkbox"/> Intermediate Pass(es): ER316L		
<input checked="" type="checkbox"/> Final Pass(es): ER316L PWHT @ N/A °F for N/A		
Minimum Preheat Temperature: 50 °F Maximum Interpass Temperature: 350 °F		

Process & Inspection Activities					
Attributes N/A'd: 5 6 7 8 12 13	Welder ID	H/W	QC Insp.		Overview Init./Date
			REJ	ACC	
1. Pre Fit-Up Inspections (6.1/7.1) <input type="checkbox"/> End Prep NDE Req'd <input type="checkbox"/> PT <input type="checkbox"/> MT NDE Report No.: <u>N/A</u>	<u>m-654</u> <u>10-1-00</u>	<u>Hac</u>		<u>Fls</u> <u>pt-03</u>	
2. Base Material Data (6.2/7.2) #1 Heat/Serial/QRI No. <u>EXISTING</u> #2 Heat/Serial/QRI No. <u>H 083159A 105</u>	<u>m-654</u> <u>10-1-00</u>				
3. Fit-Up Inspections (6.3/7.3) <input type="checkbox"/> Heat/Serial/QRI No. of Insert or Backing Ring	<u>m-654</u> <u>10-1-00</u>	<u>Hac</u>		<u>Fls</u> <u>pt-03</u>	
4. Preheat: (6.4/7.4) Actual: <u>> 50°F</u> Temperature Indicator I.D. <u>AMBIENT</u>	<u>m-378</u> <u>10-1-00</u>				
9. Interpass Temperature (6.8/7.8) Actual: <u>< 350°F</u> Temperature Indicator I.D.: <u>①</u>	<u>m-378</u> <u>10-1-00</u>				
10. Fill Data: (6.9, WPS/7.9) Heat/Lot/QRI No.: <u>XT 7591</u> AWS Classification: <u>ER 316 L .035" dia.</u> Heat/Lot/QRI No.: _____ AWS Classification: _____	<u>m-378</u> <u>10-1-00</u>				

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ASME Welding

ASME WELD RECORD (Cont'd)

EXHIBIT A
Page 2 of 2

Work Package No.: 970122923-01

Document No.: 13

Rev.: 0

Process & Inspection Activities (Cont'd)	Welder ID	HW	QC Insp.		Overview
			REJ	ACC	Init./Date
11 Final Weld Visual Inspection (6 10 7 10)	W-378 W-100	Hoc		PS 10-1-00	

REMARKS: BASE METAL ITEM 2: SA-478 TYPE 304 OR 316

SA-308 TYPE 304 OR 316

POOR QUALITY ORIGINAL

① 1st Pass complete 10:03 AM
1st Pass complete 10:23 AM
2nd Pass complete 10:45
3rd Pass complete 10:50 10-1-00
PS

<p>Work Complete/Date (8.)</p> <p><u>1 by 10/1/00</u></p> <p>Maintenance Supv./Foreman</p>	<p>Inspection Complete/Date (8.)</p> <p><u>N/A</u></p> <p>QC Inspector</p>
<p>Reviewed By/Date (8.)</p> <p><u>ANI/ANI 12/1/00</u></p>	<p>Reviewed By/Date (8.)</p> <p><u>W/K</u></p> <p>Overview</p>

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ASME Welding

ASME WELD RECORD

EXHIBIT A
Page 1 of 2

WELD RECORD GENERAL INFORMATION

Station: 006 Unit: 01

Supplement Sheet: POOR QUALITY ORIGINAL

Work Package No.: 970122923-01

- Safety
- Regulatory/Augmented Quality
- Non-Safety
- Reliability
- Seismic

Document No.: 14 Rev.: 01

Weld No.: 2 Dwg./Doc. Number & Rev.: CBEM-10754[DOC# 11] Design Table: N/A

EPN No.: 1RC8002C ASME Code/Class: SECT. III / CL.1

Description (Item #1) VALVE BODY Base Metal Spec.: SA-351 GR.CF8M

P-No./Gr. No.: 8/1 Nom. Thick: >1" Dia.: N/A

Description (Item #2) GUIDE STOP BLOCK Base Metal Spec.: SEE REMARKS

P-No./Gr. No.: 8/1 Nom. Thick: 3/8" Dia.: N/A

WPS No. & Rev.: 8 MC-GTAW End Prep Detail: PER DOC# 11

- Open Root Consumable Insert Backing Ring Fillet-Min. Size .25"
- Overlay Deposit Thickness: Minimum: _____ Maximum: _____
- Other: BUILD-UP (SURFACING) ① PA 9/23/00

Filler Material Class Root: ER316L Intermediate Pass(es): ER316L

Final Pass(es): ER316L PWHT @ N/A °F for N/A

Minimum Preheat Temperature: 50 °F Maximum Interpass Temperature: 350 °F

Process & Inspection Activities

Attributes N/A'd: 5 6 7 8 12 13	Welder ID	H/W	QC Insp.		Overview Init./Date
			REJ	ACC	
1. Pre Fit-Up Inspections (6.1/7.1) <input type="checkbox"/> End Prep NDE Req'd <input type="checkbox"/> PT <input type="checkbox"/> MT NDE Report No.: <u>N/A</u>	M-656 10-1-00	Hac		fl p.1-2	
2. Base Material Data (6.2/7.2) #1 Heat/Serial/QRI No. <u>EXISTING</u> #2 Heat/Serial/QRI No. <u>ND 3059 A/04</u>	M-656 10-1-00				
3. Fit-Up Inspections (6.3/7.3) <input type="checkbox"/> Heat/Serial/QRI No. of Insert or Backing Ring	M-656 10-1-00	Hac		fl p.1-2	
4. Preheat: (6.4/7.4) Actual: <u>>50°F</u> Temperature Indicator I.D.: <u>AMBIENT</u>	*M-378 10-1-00				
9. Interpass Temperature (6.8/7.8) Actual: <u><350°F</u> ① Temperature Indicator I.D.: _____	*M-378 10-1-00				
10. Fill Data: (6.9. WPS/7.9) Heat/Lot/QRI No.: <u>XT 7591</u> AWS Classification: <u>ER 316 L .035" dAA.</u> Heat/Lot/QRI No.: _____ AWS Classification: _____	*M-378 10-1-00				

NSWP-W-01 Revision 5
ASME Welding

ASME WELD RECORD (Cont'd)

EXHIBIT A
Page 2 of 2

Work Package No.: 970122923-01

Document No.: 14

Rev.: 0

Process & Inspection Activities (Cont'd)	Welder ID	H/W	QC Insp.		Overview
			REJ	ACC	Init./Date
11. Final Weld Visual Inspection (6.10 / 7.10)	* M-378 10-1-00	Hac		X	

REMARKS: BASE METAL [ITEM# 2]: SA-470 TYPE 304 OR 316

SA-240 TYPE 304 OR 316

① 1st Pass 10:35 AM

2nd Pass 9:00 AM

3rd Pass 9:40 AM

PS 10-1-00

POOR QUALITY ORIGINAL

Work Complete/Date (8.)

g Pop 10/1/00
Maintenance Supv./Foreman

Inspection Complete/Date (8.)

N/A
QC Inspector

Reviewed By/Date (8.)

*HA 12/1/00
ANI/ANII

Reviewed By/Date (8.)

N/A
Overview

Liquid Penetrant Examination

NDT-D
LIQUID PENETRANT EXAMINATION DATA SHEET

ASME Sect. III Class 3

STATION BYRON 06 UNIT 01 REPORT NO. 2000-229

SYSTEM RC WORK REQUEST NO. ~~970122922-01~~ 970122923-01

COMPONENT/LINE NO. Block Guides EPN/SERIAL NO. 1RC8002B

REF.DWG./ECN/FCR NO. FCN #CBEM-10754 REV. --

PT PROCEDURE NDT-D ACCEPTANCE NDT-D2 APPENDIX "A"
R/23 R/11 R/12

MATERIAL/SIZE/THICKNESS SA-479 / 2-3/8" x 7/16" x 3/8" WELD NO. N/A

COMPONENT TEMPERATURE 72 Deg. F PENETRANT MATERIAL MFG. MAGNAFLUX

	TYPE	BATCH#	TIME		
CLEANER	SKC-S	99D04K	PRE-CLEAN	5	MINS.
PENETRANT	SKL-SP	98A16K	DWELL	10	MINS.
DEVELOPER	SKD-S2	97E05K	DEVELOPMENT	7	MINS.

EXAMINATION RESULTS ACCEPT X REJECT SEE BELOW

EXAMINATION COMMENTS & DESCRIPTION:

N/A Meets the requirements of the SPPM Volume IV, NDT-D-2

Performed a PT Examination of 6 Block Guides for the Loop Stop Isolation valves.

- Heat # D83059A #4D98951H04-05
- Heat # D83059A #4D98951H04-06
- Heat # D83059A #4D98951H04-07
- Heat # D83059A #4D98951H04-08
- Heat # D83059A #4D98951H04-09
- Heat # D83059A #4D98951H04-10

EXAMINER H. M. Ackerman LEVEL II DATE 09/27/00

ComEd REVIEWED BY *[Signature]* DATE 9-27-00

AI/ANI *[Signature]* DATE 9-27-00

DOC: 19 REV: 0

BAP 1800-5T1
Revision 6

APPROVED 12/02/98

Facsimile
POOR QUALITY ORIGINAL

ASME SECTION XI REPAIR/REPLACEMENT REPORT

Part 1. General Information

Work Request No: 970122923-01 Unit: 01

Design Change No: N/A System: RC

EPN: 1RC8002C ASME Class: 1

Description: 1C RC LOOP CL STOP ISOLATION VLV

Original Design Specification: F2702

Original Construction Code: SECT.III, 1971 Ed W73 Ad

Replacement Design Specification: F2702

Replacement Construction Code: SECT.III, 1971 Ed W73 Ad

Code Cases To Be Invoked: ~~1949-1~~ 1949-1

Code of Repair ASME Section XI, 89 Edition NO Addenda

Description of Flaw/Problem: INTERNAL VALVE GUIDES ARE SUSCEPTIBLE TO FAILURE.

Describe Flaw Detection method (i.e., NDE Method, leaking, etc.):
SEE 1RC8002A

(Attach additional sheets as necessary)

Proposed Work Instructions: INSTALL GUIDE STOP BLOCKS IN VALVE
IN ACCORDANCE WITH WESTINGHOUSE FCN# GBEM 48754 DRAWING 4D98951
REV. 3 (ER 9915633) (1) PK 4/23/00

(Attach additional sheets as necessary)

Method of Flaw Removal/Repair/Replacement:

- Grinding/Blending/Buffering Bolting
- Welding Other _____
- Mechanical Joint Disassembly

Comments: _____

<u>PAUL HARDENBROOK</u>	<u>6/3/00</u>	<u>3145</u>	<u>MAINTENANCE PLANNING</u>
Originator	Date.	Ext.	Department

POOR QUALITY ORIGINAL

APPROVED 12-02-98

Facsimile

DAP 1500-5T1
Revision 6

Part 2: Engineering Evaluation (Verification of Acceptability)

Scope of Applicability:

- ASME Section XI Repair/Replacement
- ASME Section XI, IWE/IWL Repair/Replacement
- Replacement of Valves, Piping, Fittings or Supports ≤ 1" NPS
- Temporary Non-Code Piping Repair
- This is Not a Section XI Repair/Replacement
- ASME Form NIS-2 is required.

Mode of Failure: None. Installation of Guide Stops to mitigate possible Failures in Future.

Suitability Evaluation (including Weld Process): N/A SRS 9/23/00
Acceptable Per Westinghouse FCN CBEM-10754
Draw 4098951 Rev 3

Supporting Technical Documentation: SRS 9/23/00
FCN CBEM-10754 Draw 4098951 Rev 3
ER 9913429, Nonstructural Weld per NB 52604 NB-1131.2
Ed. Fin

Is the intended life of the repair or the item to be used for replacement less than the design life of the item being repaired or replaced? Yes No N/A

Is application of an ASME code case symbol stamp required for the repair or replacement item? Yes No N/A

010000-00000

APPROVED 12/02/98

Facsimile

BAP 1600-5T1
Revision 6

POOR QUALITY ORIGINAL

Code Review:

- Maintenance Replacement meets Original Code Requirements BAP 1600-5T2 Code Reconciliation # _____
- Modification Replacement meets Applicable Code Requirements
- Repair meets Applicable Code Requirements
- Replacement of Valves, Piping, and Fittings or Supports ≤ 1" NPS meets material and primary stress level requirements of applicable Code. BAP 1600-5T2 Code Reconciliation # _____
- Temporary Non-Code Piping Repair meets requirements of NRC Generic Letter 90-05 (NRC approval may be required).
- Not applicable.

Required ASME Examinations and Tests:

(Note: All NDE will be performed to the ComEd SPPM Procedures or Station Procedures unless otherwise noted in work instructions).

In-Process:
1. Visual of Welds
2. PT of Guide Block
3. Per Drawg JD18417 Note 1
4.

Post Maintenance:
1. VT-2 @ NRP
2.
3.
4.

Completed by *[Signature]* 7/12/00
Site Support Eng./ISI Group Date

Reviewed by N/A
Responsible Engineer (IWL Scope Only) Date

Reviewed by *[Signature]* 8/18/00
ANI (For Welding)/ANII Date 209/23/00

APPROVED 12/02/98

Facsimile

BAP 1500-5T1
Revision 6

POOR QUALITY ORIGINAL

Part 3 Repair/Replacement Report Completion Checklist

Mode of Failure/Suitability
Evaluation (Part 2) Complete:

Yes No N/A

Testing Requirements (Part 2)
Satisfied:

Yes No N/A

New Welds, Valves, Components
Incorporated into ISI Program:
NTS Item # _____

Yes No N/A

Baseline Data Results Review
Complete:

Yes No N/A

ASME Code documentation included in
Work Package:

Yes No N/A

UFSAR Table A1.126-1 Update Initiated
for Permanent Repair of Temporary
Non-Code Piping Repair:

Yes No N/A

Action Item, or equivalent, Initiated
for Permanent Repair of Temporary
Non-Code Piping Repair:
NTS Item # _____

Yes No N/A

ASME Form NIS-2 Form Initiated (thru
part 7)

Yes No N/A

Completed by :

SMA
ISI Group

12/6/00
Date

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENT

01331

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

POOR QUALITY ORIGINAL

1. Owner Commonwealth Edison Company Date 10/08/00
Name
One First National Plaza, Chicago, IL
Address
2. Plant Byron Nuclear Power Station Unit _____
Name
4450 N. German Church Road, Byron, IL
Address Work Request No. 970122923-01, -03, -07
3. Work Performed by PCI Energy Services Repair Organization, P.O. No., Job No., etc.
Name Type Code Symbol Stamp Not Applicable
One Energy Dr., Lake Bluff, IL 60044
Address Authorization No. Not Applicable
 Expiration Date Not Applicable
4. Identification of System Reactor Coolant (RC)
5. (a) Applicable Construction Code Section III ¹⁹⁷¹ ~~1974~~ Edition, ^{6/73} ~~575~~ Addenda, 1976-1 Code Case
** In: 2/2/83
 (b) Applicable Edition of Section XI Utilized for Repairs or Replacement Components 19 89
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No	Nominal Size No	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code, Stamped (Yes or No)
Guide Stops	PCI	H083059A/05 H083059A/06	n/a	IRC8002C s/n 04-114E937-G-03		Replacement	No
Field Weld FW-80	Hunter Corp.	n/a	n/a	IRC21AC-8" FW-80	1984	Replaced	No
Field Weld FW-80	PCI Energy Services	n/a	n/a	IRC21AC-8" FW-80	2000	Replacement	No
Field Weld FW-244	Hunter Corp.	n/a	n/a	IRC21AC-8" FW-244	1984	Replaced	No
Field Weld FW-244	PCI Energy Services	n/a	n/a	IRC21AC-8" FW-244	2000	Replacement	No
Field Weld FW-417	Hunter Corp.	n/a	n/a	IRC22AC-1 1/2" FW-417	1984	Replaced	No
Field Weld FW-417	PCI Energy Services	n/a	n/a	IRC22AC-1 1/2" FW-417	2000	Replacement	No
1 1/2" Sched. 160 Pipe	Hunter Corp.	Ht #: 462294	N/a	IRC22AC-1 1/2"	1984	Replaced	No
1 1/4" Coupling	ASP	Ht Code: HLT Ht #: A13836	N/a	IRC22AC-1 1/4"	1998	Replacement	No

7. Description of Work: Install Guide Stops in IRC8002C/Cut out & Re-install IRC21AC, IRC22AC/Install New Coupling
8. Test Conducted: Hydrostatic Pneumatic Nominal Operating Pressure
 Other Pressure 2238 psi Test Temp. 553 °F

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

FORM NIS-2 (Back)

9. Remarks Invoked Code Case N-416-1 WR 970122923-01-03-07

Applicable Manufacturer's Data Reports to be attached

POOR QUALITY ORIGINAL
* *Work also performed by: NPS + Bentecore*
555 S. Juliet Rd
Bolingbrook IL 60440

** *74/575 for piping weld code edition.*

CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable Expiration Date Not Applicable

Signed *[Signature]* ISI - Engr Date 12/6 .20 00

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 Illinois and employed by H.S.B.L.I. Co of Hartford, Ct. have inspected the components described in this Owner's Report during the period 7/21/00 - 5/13/02 to 12/15/02, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in the 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 111-1654

Date 12/12 .20 00