



Tennessee Valley Authority, Post Office Box 2000, Spring City, Tennessee 37381-2000

JUN 23 2005

10 CFR 50.55(a)

U.S. Nuclear Regulatory Commission  
ATTN: Document Control Desk  
Washington, D. C. 20555-0001

Gentlemen:

In the Matter of ) Docket No.50-390  
Tennessee Valley Authority )

**WATTS BAR NUCLEAR PLANT (WBN) UNIT 1 - AMERICAN SOCIETY OF  
MECHANICAL ENGINEERS (ASME) SECTION XI INSERVICE INSPECTION  
(ISI) SUMMARY REPORT FOR THE SIXTH CYCLE OF OPERATION**

The purpose of this letter is to provide the ISI Summary Report within 90 days of completion of the inspections which occurred at the end of the refueling outage as required by ASME Section XI, IWA-6230 of the 1989 Edition of the ASME Section XI Code. The WBN Unit 1 Cycle 6 Refueling Outage is the first of two outages in the Third Period of the First Inservice Inspection Interval. To coincide with the Cycle 7 Refueling Outage, the first interval has been extended in accordance with IWA-2430(d) to end on December 26, 2006.

This summary report documents the results of the ASME Section XI examinations, tests, repairs, and replacements performed during the sixth cycle of operations of TVA's WBN Unit 1. Included in the Cycle 6 Summary Report is the summary of ISI examinations and results; summary of steam generator tube eddy current examinations and results; summary of pressure tests and results; and, a summary of repairs and replacements as documented on ASME Forms, NIS-2.

AD-17

'JUN 23 2005

There are no regulatory commitments associated with this submittal. If you have any questions about this report, please contact me at (423) 365-1824.

Sincerely,



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

Enclosure

1. ASME Section XI Inservice Inspection Summary Report Sixth Refueling Cycle

Cc: (Enclosure)  
NRC Resident Inspector  
Watts Bar Nuclear Plant  
1260 Nuclear Plant Road  
Spring City, Tennessee 37381

Mr. D. V. Pickett, Project Manager  
U.S. Nuclear Regulatory Commission  
MS O8G9a  
One White Flint North  
11555 Rockville Pike  
Rockville, Maryland 20852-2738

U.S. Nuclear Regulatory Commission  
Region II  
Sam Nunn Atlanta Federal Center  
61 Forsyth St., SW, Suite 23T85  
Atlanta, Georgia 30303

ENCLOSURE

WATTS BAR NUCLEAR PLANT UNIT 1  
AMERICAN SOCIETY OF MECHANICAL ENGINEERS (ASME) SECTION XI  
INSERVICE INSPECTION SUMMARY REPORT  
SIXTH REFUELING CYCLE

**TENNESSEE VALLEY AUTHORITY'S  
WATTS BAR NUCLEAR PLANT  
UNIT 1**

**ASME SECTION XI**

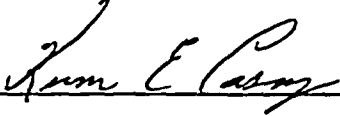

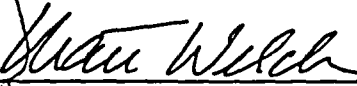
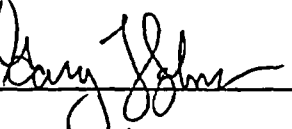
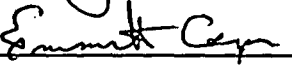



**INSERVICE INSPECTION**

**SUMMARY REPORT**

**SIXTH REFUELING CYCLE**

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

### CONCURRENCE AND APPROVAL SHEET

Name	Title	Signature	Date
<b>Prepared by:</b>			
K. E. Casey	ISI Program Engineer		04/21/05
<b>Concurred by:</b>			
J. M. Lockwood	ISO Site ISI/NDE Coordinator		4/26/05
M. C. Welch	ISO NDE Level III		4/22/05
G. L. Johnson	System Pressure Test Engineer		4/26/05
E. D. Camp	Steam Generator Specialist		22 Apr 05
J. K. McClanahan	Corporate ISI Specialist		
M. D. Davis	Component Engineering Manager		4/27/05
<b>Approved by:</b>			
K. A. Lovell	System Engineering Manager		6/8/05

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

## TABLE OF CONTENTS

Concurrence Sheet.....	2
Table of Contents .....	3
Cover Sheet .....	4
Form NIS-1.....	5
Form NIS-1 for ISI Examinations.....	5
Form NIS-1 for Steam Generator Tube Eddy Current Examinations.....	7
Form NIS-1 for Pressure Tests.....	9
Introduction and Summary of the Inspection .....	11
Table 1, Summary of Cycle 6 ISI Examinations .....	12
Summary of Requests for Relief .....	13
Appendices	
Appendix I, ISI Examination Plan	
Appendix II, Augmented Examination Plan	
Appendix III, Steam Generator Tube Eddy Current Summary	
Appendix IV, Pressure Test Report Summary	
Appendix V, Report for Repairs and Replacements, Form NIS-2	

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

Cover Sheet

Owner: Tennessee Valley Authority

Address of Corporate Office: Chattanooga Office Complex  
1101 Market Street  
Chattanooga, Tennessee 37402-2801

Name and Address of Nuclear Power Plant: Watts Bar Nuclear Plant  
P.O. Box 2000  
Spring City, Tennessee 37381-2000

Applicable Nuclear Power Units: Watts Bar Nuclear Plant, Unit 1

Commercial Operation Date: May 27, 1996

Document Completion Date: April 21, 2005





Owner: TENNESSEE VALLEY AUTHORITY  
Chattanooga Office Complex  
1101 Market Street  
Chattanooga, TN 37402

Unit: 1

Commercial Service Date: May 27, 1996

Plant: WATTS BAR NUCLEAR PLANT  
P.O. Box 2000  
Spring City, TN 37381-2000

Certificate of Authorization: N/A  
National Board Number for Unit: N/A

FORM NIS-1 (Back)

8. Examination Dates: December 19, 2003 to March 23, 2005

9. Inspection Period Identification: Third

10. Inspection Interval Identification: First

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

12. Date/Revision of Inspection Plan: December 6, 2004/1-TRI-0-10, Revision 12

13. Abstract of Examinations and Tests. Include a list of examinations and tests and a statement concerning status of work required for the Inspection Plan. See Appendix I

14. Abstract of Results of Examinations and Tests. See Appendix I

15. Abstract of Corrective Measures. No corrective measures required this inspection.

We certify that a) the statements made in this report are correct, b) the examinations and tests meet the Inspection Plan as required by the 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 04/21 20 05 Signed Tennessee Valley Authority By James E. Casey  
Owner ISZ SPECIALIST

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 1/8/04 to 6/7/05, 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 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.

Bruce M. Earnigh Commissions TN 2534  
Inspector's Signature National Board, State, Province and Endorsements

Date 6/7 20 05



Owner: TENNESSEE VALLEY AUTHORITY  
Chattanooga Office Complex  
1101 Market Street  
Chattanooga, TN 37402

Unit: 1

Commercial Service Date: May 27, 1996

Plant: WATTS BAR NUCLEAR PLANT  
P.O. Box 2000  
Spring City, TN 37381-2000

Certificate of Authorization: N/A  
National Board Number for Unit: N/A

FORM NIS-1 (Back)

8. Examination Dates: March 02, 2005 to March 23, 2005
9. Inspection Period Identification: Third
10. Inspection Interval Identification: First
11. Applicable Edition of Section XI: 1989 Addenda N/A
12. Date/Revision of Inspection Plan: November 18, 2004/1-SI-68-907, Revision 14
13. Abstract of Examinations and Tests. Include a list of examinations and tests and a statement concerning status of work required for the Inspection Plan. See Appendix ~~II~~ III 2/16/05
14. Abstract of Results of Examinations and Tests. See Appendix III
15. Abstract of Corrective Measures. See Appendix III

We certify that a) the statements made in this report are correct, b) the examinations and tests meet the Inspection Plan as required by the 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 28-224pr05 20 05 Signed Tennessee Valley Authority By Samuel H. Cyn  
Owner SG Specialist

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 1/8/04 to 6/7/05, 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 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.

Bruce M. Earnigh Commissions TN 2534  
Inspector's Signature National Board, State, Province and Endorsements

Date 6/7 2005



Owner: TENNESSEE VALLEY AUTHORITY  
Chattanooga Office Complex  
1101 Market Street  
Chattanooga, TN 37402

Unit: 1

Commercial Service Date: May 27, 1996

Plant: WATTS BAR NUCLEAR PLANT  
P.O. Box 2000  
Spring City, TN 37381-2000

Certificate of Authorization: N/A  
National Board Number for Unit: N/A

FORM NIS-1 (Back)

8. Examination Dates: February 11, 2005 to March 27, 2005
9. Inspection Period Identification: Third
10. Inspection Interval Identification: First
11. Applicable Edition of Section XI: 1989 Addenda N/A
12. Date/Revision of Inspection Plan: December 17, 2004/TI-100.009, Revision 7
13. Abstract of Examinations and Tests. Include a list of examinations and tests and a statement concerning status of work required for the Inspection Plan. See Appendix III IV 2/26/05
14. Abstract of Results of Examinations and Tests. See Appendix IV
15. Abstract of Corrective Measures. See Appendix IV

We certify that a) the statements made in this report are correct, b) the examinations and tests meet the Inspection Plan as required by the 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 April 26 20 05 Signed Tennessee Valley Authority By Dave Johnson, Sp. Engr.  
Owner

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 1/8/04 to 6/7/05, 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 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.

Bruce M. Earnigh Commissions TN 2534  
Inspector's Signature National Board, State, Province and Endorsements

Date 6/7 20 05

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

## INTRODUCTION AND SUMMARY

### Introduction

As required by ASME Section XI, IWA-6200, this summary report documents the results of the ASME Section XI examinations, tests, repairs and replacements performed during the sixth cycle of operation of TVA's Watts Bar Nuclear Plant's Unit 1. The cycle 6 refueling outage is the first of two outages in the Third Period of the First Inservice Inspection Interval. To coincide with the cycle 7 refueling outage, the first interval has been extended in accordance with IWA-2430(d) to end on December 26, 2006.

*Included in this cycle 6 Summary Report is: the summary of ISI examinations and results; summary of steam generator tube eddy current examinations and results; summary of pressure tests and results; and, summary of repairs and replacements as documented on ASME Form NIS-2s.*

### Summary

ISI examinations were performed in accordance with Technical Requirement Instruction 1-TRI-0-10, "ASME Section XI ISI/NDE Program." Table 1 provides an overview of the ISI examinations that were performed during cycle 6. The majority of the examinations performed this cycle were due to the reactor vessel 10-year ISI. The results of all the examinations met the applicable acceptance standards. The examination results for the ISI components are summarized in Appendix I. Examination of a safety injection system elbow-to-tee weld and several of the reactor vessel welds require a request for relief be prepared as the required code coverage could not be obtained.

Included in 1-TRI-0-10 are augmented requirements to perform examination of the Reactor Coolant Pump Flywheel in accordance with Regulatory Guide 1.14, "Reactor Coolant Pump Flywheel Integrity" and requirements to perform visual examinations on alloy 600 reactor vessel bottom head and pressurizer nozzle safe-end weld components. These examination results are summarized in Appendix II.

Eddy current testing of the steam generator tubes was performed in accordance with Surveillance Instruction 1-SI-68-907, "Steam Generator Tubing Inservice Inspection and Augmented Inspection." Six hundred and six tubes were plugged among all 4 steam generators and a total of 275 hot leg top of tube sheet sleeves were installed among steam generators 1, 2, and 4 as a result of this inspection. The results are summarized in Appendix III.

Appendix IV provides a summary of the system pressure tests performed for code credit during cycle 6. System pressure tests are implemented as defined in Technical Instruction TI-100.009, "ASME Section XI System Pressure Testing Program Basis Document." Individual system pressure test procedures are listed in the summary.

Appendix V provides a summary of the repairs and replacements performed during cycle 6. Included are the ASME Form NIS-2s, "Owners Report for Repair and Replacements." Repairs and Replacements are documented in accordance with Standard Programs and Processes SPP-9.1, Part D, "Repair/Replacement of ASME Section XI Components."

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

TABLE 1  
SUMMARY OF CYCLE 6 ISI EXAMINATIONS

Examination Category	Item Number	Component Description	Number Examined
<u>Code Class 1 Components</u>			
B-A	B1.11	RV Circ Welds	4
	B1.21	RV Bottom Head Circ Weld	1
	B1.22	RV Head Meridional Welds	6
	B1.30	RV Vessel to Flg Weld	1
B-D	B3.90	RV Nozzle to Vessel Welds	8
	B3.100	RV Nozzle Inner Radius Sections	8
B-N-2	B13.10	RV Interior Accessible Areas	1
B-N-2	B13.60	RV Interior Attachments	6
B-N-3	B13.70	RV Core Support Structure	1
<u>Code Class 1 and 2 Risk-Informed ISI Piping Welds</u>			
R-A	R1.11	Elements Subject to Thermal Fatigue	8
	R1.16	Elements Subject to Intergranular Stress Corrosion Cracking	3
	R1.18	Elements Subject to Flow Accelerated Corrosion	26

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

### SUMMARY OF REQUESTS FOR RELIEF (RFRs)

Four RFRs are required to be written for components examined during this inspection. Due to configuration of a Safety Injection System Piping weld, the required examination coverage could not be achieved. The reactor vessel weld examinations were limited as noted in the summaries below. The RFRs will be submitted under separate letter to the NRC.

#### Proposed RFR 1-ISI-16

ISI Component Number(s): SIF-D092-15

Component Description: Safety Injection System Piping Weld

Examination Category/Item No.: R-A/R1.16

Report Numbers: R0960

Summary: The design configuration of the subject austenitic elbow-to-tee weld provides single side access for examination. Single side access precludes meeting the examination coverage and qualification demonstration requirements required by 10 CFR 50.55a(b)(2)(xv)(A) and (xvi)(B).

#### Proposed RFR 1-ISI-17

ISI Component Number(s): W02-03 and W01-02

Component Description: Reactor Vessel Circumferential Welds

Examination Category/Item No.: B-A/B1.11 and B1.21

Report Numbers: R0991 (and respective vendor examination reports)

Summary: Circumferential weld W02-03 (item number B1.11) examination was limited due to the core barrel support lugs. Weld W01-02 (item number B1.21) examination was limited due to the lower head thimble tube penetrations. Due to this limitation, required code coverage was not be obtained.



Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

Proposed RFR 1-ISI-18

ISI Component Number(s): W2A, W2B, W2C, W2D, W2E, and W2F

Component Description: Reactor Vessel Meridional Welds

Examination Category/Item No.: B-A/B1.22

Report Numbers: R0991 (and respective vendor examination reports)

Summary: The lower head meridional weld examinations were limited due to the core barrel support lugs and the lower head thimble tube penetrations. Due to this limitation, required code coverage was not be obtained.

Proposed RFR 1-ISI-19

ISI Component Number(s): N15, N16, N17, and N18

Component Description: Reactor Vessel Outlet Nozzle-to-Shell Welds

Examination Category/Item No.: B-D/B3.90

Report Numbers: R0991 (and respective vendor examination reports)

Summary: The outlet nozzle-to-shell weld examinations performed from the vessel shell were limited due to the nozzle integral extension. Due to this limitation, required code coverage was not be obtained.

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

## APPENDIX I CYCLE 6 ISI EXAMINATION PLAN

The following examination plan provides the list and results of examinations performed during the sixth cycle. This plan is sorted by examination category and item number and system. The headings are defined below:

System	System Title Abbreviation
	AFWS Auxiliary Feedwater System      RCS Reactor Coolant System
	BDS Steam Generator Blowdown System      RV Reactor Vessel
	FWS Feedwater System      SIS Safety Injection System
Component Number	ISI Component Identifier
ISO Drawing	ISI Drawing Number
Category	Code Examination Category
Item Number	Code Item Number
Exam Requirement	Examination Requirement
	89E-01 Code Class 1, 2 or 3 Item examined per the requirements of the 1989 Edition of ASME Section XI for first interval code credit
	P89001 Item examined per the requirements of the 1989 Edition of ASME Section XI for preservice credit (i.e. repaired/replaced item)
Exam Scheduled	Required Examination Method
NDE Procedure	TVA NDE Procedure Number
Calibration Standard	Calibration Standard Identifier
Exam Date	Date Examination Performed
Exam Report	Examination Report Number
Exam Results	Results of the Examination
	P = PASS, examination met the applicable acceptance standards
	F = FAIL, examination did not meet the applicable acceptance standards and was repaired or replaced
Comments	Applicable Comments

Owner: TENNESSEE VALLEY AUTHORITY  
Chattanooga Office Complex  
1101 Market Street  
Chattanooga, TN 37402

Unit: 1  
Commercial Service Date: May 27, 1996

Plant: WATTS BAR NUCLEAR PLANT  
P.O. Box 2000  
Spring City, TN 37381-2000

Certificate of Authorization: N/A  
National Board Number for Unit: N/A

System	Component Number	ISO Drawing	Category	Item Number	Exam Requirement	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	Comments
RV	W02-03	ISI-0427-C-01	B-A	B1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300026. limited exam due to core barrel stabilizing lugs. Ref RFR 1-ISI-17
RV	W03-04	ISI-0427-C-01	B-A	B1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300001.
RV	W04-05	ISI-0427-C-01	B-A	B1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300002.
RV	W05-06	ISI-0427-C-01	B-A	B1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300003.
RV	W01-02	ISI-0427-C-01	B-A	B1.21	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300028. limited exam due to lower head penetrations. Ref RFR 1-ISI-17
RV	W2A	ISI-0427-C-01	B-A	B1.22	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300033. limited exam due to core barrel stabilizing lugs and lower head penetrations. Ref RFR 1-ISI-18
RV	W2B	ISI-0427-C-01	B-A	B1.22	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300008. limited exam due to core barrel stabilizing lugs and lower head penetrations. Ref RFR 1-ISI-18
RV	W2C	ISI-0427-C-01	B-A	B1.22	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300009. limited exam due to core barrel stabilizing lugs and lower head penetrations. Ref RFR 1-ISI-18
RV	W2D	ISI-0427-C-01	B-A	B1.22	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300034. limited exam due to core barrel stabilizing lugs and lower head penetrations. Ref RFR 1-ISI-18
RV	W2E	ISI-0427-C-01	B-A	B1.22	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300011. limited exam due to core barrel stabilizing lugs and lower head penetrations. Ref RFR 1-ISI-18
RV	W2F	ISI-0427-C-01	B-A	B1.22	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300012. limited exam due to core barrel stabilizing lugs and lower head penetrations. Ref RFR 1-ISI-18
RV	W06-07	ISI-0427-C-01	B-A	B1.30	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300006
RV	N11-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300021. VT per Code Case N-648-1
RV	N12-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300022. VT per Code Case N-648-1
RV	N13-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300023. VT per Code Case N-648-1
RV	N14-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300024. VT per Code Case N-648-1
RV	N15-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300025. VT per Code Case N-648-1
RV	N16-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300035. VT per Code Case N-648-1
RV	N17-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300036. VT per Code Case N-648-1
RV	N18-IR	ISI-0427-C-01	B-D	B3.100	89E-01	VT-1	VENDOR		2005031	R0991	P	Ref IST summary 300037. VT per Code Case N-648-1
RV	N11	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300019
RV	N12	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300101.
RV	N13	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300018.
RV	N14	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300014.
RV	N15	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300020. limited exam due to nozzle integral extension. Ref RFR 1-ISI-19

Owner: TENNESSEE VALLEY AUTHORITY  
Chattanooga Office Complex  
1101 Market Street  
Chattanooga, TN 37402

Plant: WATTS BAR NUCLEAR PLANT  
P.O. Box 2000  
Spring City, TN 37381-2000

Unit: 1  
Commercial Service Date: May 27, 1996

Certificate of Authorization: N/A  
National Board Number for Unit: N/A

System	Component Number	ISO Drawing	Category	Item Number	Exam Requirement	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	Comments
RV	N16	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300017. limited exam from the vessel integral extension. Ref RFR 1-IST-20
RV	N17	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300016. limited exam from the vessel integral extension. Ref RFR 1-IST-20
RV	N18	ISI-0427-C-01	B-D	B3.90	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300013. 2 allowable flaw indications. Limited exam due to nozzle integral extension. Ref RFR 1-IST-20
RCS	RC-01-BC	ISI-0365-C-01	B-G-2	B7.50	P89000	VT-1	N-VT-1		2005022	R0955	P	16 STUDS, 16 SUPERNUTS, 16 WASHERS
RCS	RC-02-BC	ISI-0365-C-01	B-G-2	B7.50	P89000	VT-1	N-VT-1		2005022	R0956	P	
RCS	RC-04-BC	ISI-0365-C-01	B-G-2	B7.50	89E-01	VT-1	N-VT-1		2005022	R0957	P	12 STUDS, 12 NUTS, 12 WASHERS
RCS	RC-05-BC	ISI-0365-C-01	B-G-2	B7.50	89E-01	VT-1	N-VT-1		2005022	R0958	P	VALVE S/N N56964-10-0096, 12 STUDS, 12 NUTS, 12
RCS	RC-05-BC	ISI-0365-C-01	B-G-2	B7.50	P89000	VT-1	N-VT-1		2005022	R0959	P	VALVE S/N N56964-10-0097, 12 STUDS, 12 NUTS, 12
RCP	RCP3CSABLT-01	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCP	RCP3CSABLT-02	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCP	RCP3CSABLT-03	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCP	RCP3CSABLT-04	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCP	RCP3CSABLT-05	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCP	RCP3CSABLT-06	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCP	RCP3CSABLT-07	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCP	RCP3CSABLT-08	ISI-0447-C-01	B-G-2	B7.60	P89000	VT-1	N-VT-1		2005030	R0954	P	
RCS	68-563-BC	ISI-0365-C-01	B-G-2	B7.70	P89000	VT-1	N-VT-1		2004050	R0973	P	Valve S/N N56964-10-0097, 8 studs and nuts examined
RCS	68-563	ISI-0365-C-01	B-M-2	B12.50	89E-01	VT-3	N-VT-1		2004050	R0951	P	Valve S/N N56964-10-0097
RV	RVINT	ISI-0427-C-05	B-N-1	B13.10	89E-01	VT-3	N-VT-8		2005031	R0991	P	Ref IST summary RVINT
RV	RVIA-CSG	ISI-0427-C-06	B-N-2	B13.60	89E-01	VT-3	N-VT-8		2005031	R0991	P	Ref IST summary RVIA-CSG
RV	RVCSUPST	ISI-0427-C-06	B-N-3	B13.70	89E-01	VT-3	N-VT-8		2005031	R0991	P	Ref IST summary RVCSUPST
FWS	1-03A-428	ISI-0062-C-06	F-A	F1.20B	P89000	VT-3	N-VT-1		2005032	R0990	P	WO 03-021495-000
RV	N11-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300051
RV	N12-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300052
RV	N13-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300053
RV	N14-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300054
RV	N15-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300055
RV	N16-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300056
RV	N17-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300057
RV	N18-SE	ISI-0427-C-06	R-A	R1.11	89E-01	UT	VENDOR	D70389-1 D70187-2	2005031	R0991	P	Ref IST summary 300058

Owner: TENNESSEE VALLEY AUTHORITY  
 Chattanooga Office Complex  
 1101 Market Street  
 Chattanooga, TN 37402

Unit: 1  
 Commercial Service Date: May 27, 1996

Plant: WATTS BAR NUCLEAR PLANT  
 P.O. Box 2000  
 Spring City, TN 37381-2000

Certificate of Authorization: N/A  
 National Board Number for Unit: N/A

System	Component Number	ISO Drawing	Category	Item Number	Exam Requirement	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	Comments
SIS	SIF-D079-01	ISI-0375-C-12	R-A	R1.16	89E-01	UT	N-UT-64	ALTSS	2005022	R0953	P	Limited Exam, Ref RFR 1-ISI-16
SIS	SIF-D079-11	ISI-0375-C-12	R-A	R1.16	89E-01	UT	N-UT-64	ALTSS	2005030	R0972	P	
SIS	SIF-D092-15	CHM-2758-C-10	R-A	R1.16	89E-01	UT	N-UT-64	ALTSS	2005030	R0960	P	
AFWS	103BE374	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0986	P	
AFWS	103BE375	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0986	P	
AFWS	103BE465	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0984	P	
AFWS	103BE466	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0984	P	
AFWS	103BE531	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0985	P	
BDS	115E024	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0982	P	
BDS	115E094	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0979	P	
BDS	115P004	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0983	P	
BDS	115P006	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0983	P	
BDS	115P023	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0982	P	
BDS	115P025	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0981	P	
BDS	115P027	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0981	P	
BDS	115P093	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0979	P	
BDS	115P095	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0980	P	
BDS	115P188	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0978	P	
BDS	115P190	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0977	P	
BDS	115P262	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0976	P	
BDS	115P264	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0976	P	
BDS	115T041	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005022	R0975	P	
BDS	115X005	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0983	P	
BDS	115X021	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005022	R0975	P	
BDS	115X026	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0981	P	
BDS	115X040	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005022	R0975	P	
BDS	115X096	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0980	P	
BDS	115X189	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0977	P	
BDS	115X263	FAC Program	R-A	R1.18	89E-01	UT	N-UT-26		2005030	R0976	P	



Owner: TENNESSEE VALLEY AUTHORITY  
Chattanooga Office Complex  
1101 Market Street  
Chattanooga, TN 37402

Unit: 1

Commercial Service Date: May 27, 1996

Plant: WATTS BAR NUCLEAR PLANT  
P.O. Box 2000  
Spring City, TN 37381-2000

Certificate of Authorization: N/A  
National Board Number for Unit: N/A

System	Component Number	ISO Drawing	Category	Item Number	Exam Requirement	Exam Scheduled	NDE Procedure	Calibration Standard	Exam Date	Exam Report	Exam Results	Comments
RV	RVBTHEAD	ISI-0427-C-08	1.0	N/A	AUG-04	VT-2	N-VT-17		20050311	R0988	P	
PZR	WP-10-SE	CHM-2570-C-01	B-F	B5.40	AUG-04	VT-2	N-VT-19		20050317	R0987	P	
PZR	WP-11-SE	CHM-2570-C-01	B-F	B5.40	AUG-04	VT-2	N-VT-19		20050306	R0966	P	
PZR	WP-12-SE	CHM-2570-C-01	B-F	B5.40	AUG-04	VT-2	N-VT-19		20050306	R0967	P	
PZR	WP-13-SE	CHM-2570-C-01	B-F	B5.40	AUG-04	VT-2	N-VT-19		20050306	R0968	P	
PZR	WP-14-SE	CHM-2570-C-01	B-F	B5.40	AUG-04	VT-2	N-VT-19		20050306	R0969	P	
PZR	WP-15-SE	CHM-2570-C-01	B-F	B5.40	AUG-04	VT-2	N-VT-19		20050306	R0970	P	
RCP	2S-82P191-BOREKEY	ISI-0447-C-02	RG1.14	AUGM	AUG-01	UT	N-UT-21	SQ-68	20040318	R0950	P	
RCP	2S-82P191-SUR	ISI-0447-C-02	RG1.14	AUGM	AUG-01	MT	N-MT-6		20040311	R0949	P	Indication cleared by PSS CAR 20040446
RCP	2S-82P191-VOL	ISI-0447-C-02	RG1.14	AUGM	AUG-01	UT	N-UT-21	SQ-68	20040318	R0950	P	

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

### APPENDIX III

#### SUMMARY OF WATTS BAR UNIT 1 CYCLE 6 SG EDDY CURRENT INSPECTION/TUBE PLUGGING RESULTS

EDDY CURRENT EXAM TYPE	S/G 1	S/G 2	S/G 3	S/G 4	Totals
Full Length Bobbin Coil	3945	3988	4021	3824	15778
Hot Leg Bobbin Coil	558	546	562	551	2217
Cold Leg Bobbin Coil	558	546	562	551	2217
Hot Leg TTS +Point	4503	4535	4583	4375	17996
Hot Leg TSP & FS +Point	33	61	32	74	200
Cold Leg TSP & FS +Point	20	50	31	148	249
U-Bend Dent +Point	34	35	27	31	127
Low Row U-Bend +Point	558	546	562	555	2221
Cold Leg OXP +Point	408	102	88	1622	2220
Previous Sleeved Tube Bobbin	0	0	0	148	148
Previous Sleeved Tube +Point	0	0	0	148	148
Current Sleeve +Point	118	28	0	136	282
Diagnostic +Point	373	334	245	425	1377
Total Exams Completed	11108	10771	10713	12588	45180
INDICATIONS (Tubes)	S/G 1	S/G 2	S/G 3	S/G 4	Totals
AVB Wear	18	21	15	15	69
Loose Part Wear	1	0	0	1	2
Obstructed Tube	1	0	0	1	2
ODSCC Freespan Axial	0	0	0	1	1
ODSCC HTS Axial	7	5	1	3	16
ODSCC HTS Circ	167	175	96	278	716
ODSCC Sludge Pile	4	7	1	8	20
ODSCC TSP Axial (APC)	257	155	153	172	737
Pre-Heater Wear	1	2	0	1	4
Preventive	0	0	1	0	1
PWSCC CTS Axial	0	0	2	0	2
PWSCC HTS Axial	11	27	13	30	81
PWSCC HTS Circ	2	2	0	1	5
PWSCC U-Bend Axial	0	0	0	1	1
Volumetric Indication (SVI)	0	0	2	2	4



Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

PLUGGING STATUS	S/G 1	S/G 2	S/G 3	S/G 4	Totals
Previously Plugged Tubes	171	139	91	151	552
Plugged Cycle 6					
Damage Mechanism					
Loose Part Wear	1	0	0	1	2
ODSCC Freespan Axial	0	0	0	1	1
ODSCC HTS Axial	2	4	1	3	10
ODSCC HTS Circ	60	148	96	150	454
ODSCC Sludge Pile	0	6	1	2	9
ODSCC TSP Axial	57	16	8	7	88
Preventive	0	0	1	0	1
PWSCC CTS Axial	0	0	2	0	2
PWSCC HTS Axial	3	8	11	11	33
PWSCC HTS Circ	1	1	0	1	3
PWSCC U-Bend Axial	0	0	0	1	1
Volumetric Indication	0	0	0	2	2
TOTAL TUBES PLUGGED	295	322	211	330	1158
TOTAL TUBES SLEEVED (H/L TTS)	118	28	0	277	423
Classification of Inspection Results	S/G 1	S/G 2	S/G 3	S/G 4	
Full-Length Bobbin Coil	C-2	C-2	C-2	C-2	
Top of Tubesheet +Point	C-3	C-3	C-3	C-3	
Dented TSP +Point	C-1	C-1	C-1	C-1	
U-Bend +Point	C-1	C-1	C-1	C-2	
Hot Leg Freespan Ding +Point	C-1	C-1	C-1	C-1	
Cold Leg Freespan Ding +Point	C-1	C-1	C-1	C-2	
AVB Ding +Point	C-1	C-1	C-1	C-1	
MBM with Ding +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

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

#### APPENDIX IV PRESSURE TEST SUMMARY

The following table summarizes the tests and results of the system pressure tests performed during the sixth cycle.

Owner: TENNESSEE VALLEY AUTHORITY  
Chattanooga Office Complex  
1101 Market Street  
Chattanooga, TN 37402

Unit: 1  
Commercial Service Date: May 27, 1996

Plant: WATTS BAR NUCLEAR PLANT  
P.O. Box 2000  
Spring City, TN 37381-2000

Certificate of Authorization: N/A  
National Board Number for Unit: N/A

WBN Unit 1 Cycle 6 RFO Pressure Test Report  
[First Inspection Interval, third period]

System	Procedure No.	Test Type	Exam	Performance Date	Test Results
Main Steam System piping and components. (credit taken for a system hydrostatic test)	1-TRI-1-901	System Inservice	VT-2	03/27/2005	Satisfactory
Motor Driven Auxiliary Feedwater Pump 1B-B and associated piping and components [recirculation]	1-TRI-3-901-B	System Functional	VT-2	03/27/2005	Satisfactory
Turbine Driven Auxiliary Feedwater Pump 1A-S and associated piping and components.[recirculation] (credit taken for a system hydrostatic test)	1-TRI-3-902	System Functional	VT-2	02/11/2005	Satisfactory
Motor Driven Auxiliary Feedwater Pump 1B-B piping and components [forward flow]	1-TRI-3-906-B	System Functional	VT-2	02/23/2005	Satisfactory
Turbine Driven Auxiliary Feedwater Pump 1A-S piping and components.[forward flow] (credit taken for a system hydrostatic test)	1-TRI-3-907	System Functional	VT-2	03/27/2005	Satisfactory
Ice Condenser ice bay floor drain piping and valves	1-SI-61-9	Unobstructed Flow	VT-2	03/18/2005	Satisfactory
Chemical and Volume Control System piping and components outside containment (Risk Informed ISI)	1-TRI-62-904	System Functional	VT-2	02/23/2005	Satisfactory
Safety Injection System boron injection piping and components inside containment (Risk Informed ISI)	1-TRI-63-903	System Functional	VT-2	03/14/2005	Satisfactory
Safety Injection System Train A hot and cold leg injection piping and components (Risk Informed ISI)	1-TRI-63-905-A	System Functional	VT-2	02/16/2005	Satisfactory
Safety Injection System Train B hot and cold leg injection piping and components (Risk Informed ISI)	1-TRI-63-905-B	System Functional	VT-2	02/11/2005	Satisfactory
Safety Injection System RHR hot leg injection piping and components (Risk Informed ISI)	1-TRI-63-906	System Functional	VT-2	03/24/2005	Satisfactory
Essential Raw Cooling Water Train A piping and components inside containment (credit taken for a system hydrostatic test)	1-TRI-67-901-A	System Inservice	VT-2	02/23/2005	Satisfactory
Essential Raw Cooling Water Train B piping and components inside containment (credit taken for a system hydrostatic test)	1-TRI-67-901-B	System Inservice	VT-2	02/23/2005	Satisfactory

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

**APPENDIX V  
REPORT FOR REPAIRS AND REPLACEMENTS  
ASME FORM NIS-2**

Attached are the ASME Form NIS-2s, Report for Repairs and Replacements, for the period from October 18, 2003 to completion of the sixth cycle refueling outage, April 1, 2005.

The following table lists by tracking number the NIS-2s included in this report. Tracking numbers not listed are either for Code Class 3 components or have been deleted.

TRACKING NUMBER	CODE CLASS	WORK ORDER NUMBER	BRIEF DESCRIPTION
RR-06-006	2	03-015766-000	Replace flange bolting material for valve
RR-06-017	2	03-018255-000	Repair weld 1-043A-T013-26
RR-06-018	1	PO 00001640R1	Repaired valve
RR-06-031	2	03-020825-000	Install bonnet seal weld on 1-CKV-062-0931
RR-06-034	2	03-021232-000	Replaced cover and pilot poppet.
RR-06-035	2	04-815133-000	Replaced cover and pilot poppet
RR-06-040	1	03-022635-000	Replaced 2" valve seal weld
RR-06-050	2	04-813845-008	Replace valve
RR-06-052	2	04-813845-003	Replace valve
RR-06-054	2	04-813845-009	Replace valve
RR-06-055	2	04-813845-010	Replace valve
RR-06-056	1	04-813845-007	Replace valve
RR-06-057	2	04-813875-000	Replace seal housings and seal plates
RR-06-059	1	04-813661-000	Replace valve
RR-06-060	1	04-813662-000	Replace valve
RR-06-063	2	04-813845-013	Replace valve
RR-06-064	2	04-813845-014	Replace valve
RR-06-067	2	03-003170-000	Repair 2" valve seal weld
RR-06-082	1	04-813850-000	Replace existing seal with new seal
RR-06-084	1	03-004777-002	Remove existing valve and piping as required to replace valve.
RR-06-092	1	05-810075-000	Replace bonnet seal weld
RR-06-093	1	05-810074-000	Replace bonnet seal weld
RR-06-097	2	04-813845-024	Replace valve
RR-06-103	2	04-827109-000	Repaired pipe and weld 1-068A-T113-87 by metal removal to remove vise marks
RR-06-106	2	05-812187-000	Replace valve
RR-06-107	2	05-812186-000	Replace valve
RR-06-108	2	05-812185-000	Replace valve
RR-06-109	2	05-812184-000	Replace valve

Owner: TENNESSEE VALLEY AUTHORITY Chattanooga Office Complex 1101 Market Street Chattanooga, TN 37402	Plant: WATTS BAR NUCLEAR PLANT P.O. Box 2000 Spring City, TN 37381-2000
Unit: 1 Commercial Service Date: May 27, 1996	Certificate of Authorization: N/A National Board Number for Unit: N/A

TRACKING	CODE	WORK ORDER	BRIEF
NUMBER	CLASS	NUMBER	DESCRIPTION
RR-06-111	2	03-005228-001	Add weld metal to existing vendor weld on 1-RTV-068-0445A
RR-06-115	2	03-012465-000	Repair 1/2" pipe to valve weld
RR-06-116	2	03-021495-000	Reinstall pipe support 1-03A-428
RR-06-117	1	04-810991-000	Sleeve SG tubes.
RR-06-118	1	04-810989-000	Sleeve SG tubes
RR-06-119	1	04-810988-000	Sleeve SG tubes
RR-06-120	2	04-824914-000	Replace existing blind flange with new flange
RR-06-121	2	03-011091-000	Replace valve trim

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

<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <div style="text-align: center;"><small>Name</small></div> <u>1101 Market St., Chattanooga, TN 37402</u> <div style="text-align: center;"><small>Address</small></div>	<b>Date</b> <u>10/29/03</u> <b>Sheet</b> <u>1</u> of <u>2</u> <b>Unit</b> <u>Unit 1</u> <b>W/O</b> <u>03-015766-000</u> <div style="text-align: center;"><small>Repair Organization P.O. No., Job No., etc.</small></div> <b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <div style="text-align: center;"><small>Name</small></div> <u>P. O. Box 2000, Spring City, TN 37381</u> <div style="text-align: center;"><small>Address</small></div>	
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <div style="text-align: center;"><small>Name</small></div> <u>P.O. BOX 2000 SPRING CITY, TN 37381</u> <div style="text-align: center;"><small>Address</small></div>	

**4. Identification of system**      SYSTEM 067 ERCW

**5. (a) Applicable Construction Code**      ASME SEC III 19 71 Edition, S/73      **Addenda,** N/A      **Code Case** N/A  
**(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)
BOLTING MAT'L 3/4" ALL-THD SA 564 GR 630	MFG.	N/A	N/A	HT# 727642	N/A	REPLACEMENT	NO
NUTS 3/4" SA 194 GR 6	MFG.	N/A	N/A	HT# 38202	N/A	REPLACEMENT	NO

**7. Description of Work**      REPLACED BOLTING MATERIAL

**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	TRACKING NO. <u>AA-06-006</u>	CODE CASE <u>N-416-1</u>	WO <u>03-015766-000</u>
Applicable Manufacturer's Data Reports to be Attached			
<b>CERTIFICATE OF COMPLIANCE</b>			
<p>We certify that the statements made in the report are correct and this <u>Replacement</u> conforms to the rules of the ASME Code, Section XI.</p>			
Type Code Symbol Stamp <u>N/A</u>			
Certificate of Authorization No. <u>N/A</u>			
Signed <u>Holler Maint. Specialist</u>		Date <u>2/12</u> 20 <u>04</u>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>			
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>10/30/03</u> to <u>2/17/04</u> 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.</p> <p>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.</p>			
<u>Bruce M. Earnigh</u> Inspector's Signature		Commissions <u>TN 2534</u> National Board, State, Province, and Endorsements	
Date <u>2/17</u> 20 <u>04</u>			

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> As Required by the Provisions of the ASME Code Section XI							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <div style="text-align: center; font-size: small;">Name</div> <u>1101 Market St., Chattanooga, TN 37402</u> <div style="text-align: center; font-size: small;">Address</div>				<b>Date</b> <u>01/17/2004</u> <b>Sheet</b> <u>1</u> of <u>2</u>			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <div style="text-align: center; font-size: small;">Name</div> <u>P. O. Box 2000, Spring City, TN, 37381</u> <div style="text-align: center; font-size: small;">Address</div>				<b>Unit</b> <u>Unit 1</u> <b>Work Order</b> <u>03-018255-000</u> <div style="text-align: center; font-size: small;">Repair Organization P.O. No., Job No., etc.</div> <b>Type Code Symbol Stamp</b> <u>N/A</u>			
<b>3. Work Performed by</b> <u>TVA Modifications</u> <div style="text-align: center; font-size: small;">Address</div> <u>Watts Bar Nuclear Plant</u> <div style="text-align: center; font-size: small;">Name</div>				<b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>4. Identification of system</b> <u>043 SAMPLE AND WATER QUALITY SYSTEM</u>							
<b>5. (a) Applicable Construction Code</b> <u>ASME III</u> <u>19 71</u> Edition, <u>S73</u> Addenda, <u>N/A</u> Code Case <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>1989</u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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-TUBE-043-B	N/A	N/A	N/A	N/A	NA	Repaired	No
<b>7. Description of Work</b> <u>REPAIR WELD 1-043A-T013-26</u>							
<b>8. Tests Conducted:</b> Hydrostatic    Pneumatic    Nominal Operating Pressure <input checked="" type="checkbox"/> Other    Pressure _____ psi    Test Temp _____ °F							
<b>NOTE:</b> 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.							



NIS-2 FORM SHEET 2 OF 2

FORM NIS-2 (Back)	
9. Remarks	Code Case <u>N-416-2</u> Tracking No. <u>PR-06-017 WMD 1/17/2004</u> <small>Applicable Manufacturer Data Reports to be Attached</small>
WO 03-018255-000	
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>repair</u> conforms to the rules of the ASME Code, Section XI. (repair or replacement)</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>Mike Dodd, CONST. ENGR.</u> Date <u>1/17</u> 20 <u>04</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>1/20/04</u> to <u>1/26/04</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <u>Bruce M. Emigh</u> Inspector's Signature                         </div> <div style="width: 60%;">                             Commissions <u>TN 2534</u> National Board, State, Province, and Endorsements                         </div> </div>	
Date <u>1/26</u> 20 <u>04</u>	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> 1101 Market St., Chattanooga, TN 37402 <small>Address</small>				Date <u>03/05/2005</u> Sheet <u>1</u> of <u>2</u>			
2. Plant <u>Watts Bar Nuclear Plant</u> <small>Name</small> P. O. Box 2000, Spring City, TN 37381 <small>Address</small>				Unit <u>Unit 1</u> Contract <u>Purchase Order 00001640 R1</u> <small>Repair Organization P.O. No., Job No., etc.</small>			
3. Work Performed by <u>Target Rock @ Wyle Lab</u> <small>Name</small> PO Box 379 Farmingdale, NY 11735 <small>Address</small>				Type Code Symbol Stamp <u>N/A</u> Authorization No <u>N/A</u> Expiration Date <u>N/A</u>			
4. Identification of system <u>System 068. Reactor Coolant System</u>							
5. (a) Applicable Construction Code <u>ASME Sec III 19 80</u> Edition, <u>W1980</u> Addenda, <u>n/a</u> Code Case (b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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)
PORV S/N 4	Target Rock	4	n/a	Model 83A	83	Repaired	Yes
7. Description of Work <u>Straighten indicator tube and removed/replaced seal weld.</u>							
8. Tests Conducted: Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input type="checkbox"/> <u>SEE REMARKS</u> Other <input type="checkbox"/> 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 <u>NIS-2 Tracking # RR-06-018</u>	Purchase Order <u>00001640</u>
<small>Applicable Manufacturer's Data Reports to be Attached</small>	
Valve repaired and stored as spare. To be installed under other work implementing document.	
Installed by <u>WN-04-813662-00</u>	
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>repair</u> conforms to the rules of the ASME Code, Section XI. <div style="text-align: right; margin-right: 100px;"><u>repair or replacement</u></div>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u><i>[Signature]</i> ISE ENGINEER</u> Date <u>03/05</u> 20 <u>05</u> <div style="text-align: center; font-size: small;">Owner or Owner's Designee, Title</div>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>TENNESSEE</u> and employed by <u>HSP-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>1/20/04</u> to <u>3/5/05</u> 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.	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <u><i>Bruce M. Earnigh</i></u> Inspector's Signature </div> <div style="width: 60%;"> Commissions <u>TN 2534</u> National Board, State, Province, and Endorsements </div> </div>	
Date <u>3/5</u> 20 <u>05</u>	



FORM NIS-2 (Back)	
9. Remarks	<div style="display: flex; justify-content: space-between;"> <span>NIS-2 Tracking #: RR-06-018</span> <span>Purchase Order 00001640</span> </div> <div style="text-align: center; font-size: small; margin-top: -5px;">Applicable Manufacturer's Data Reports to be Attached</div>
Valve repaired and stored as spare. To be installed under other work implementing document.	
Installed by WO 04-813161-00	
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>repair</u> conforms to the rules of the ASME Code, Section XI. <div style="text-align: right; margin-right: 100px;">repair or replacement</div>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u><i>Sam E. Casper</i></u> <u>IST ENGINEER</u> Date <u>03/05</u> 20 <u>05</u> <div style="text-align: center; font-size: small; margin-top: -5px;">Owner or Owner's Designee, Title</div>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>1/20/04</u> to <u>3/5/05</u> 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.	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u><i>Bruce M. Earnigh</i></u>              Inspector's Signature           </div> <div style="text-align: center;"> <u>Commission</u> <u>TN 2534</u>  <small>National Board, State, Province, and Endorsements</small> </div> </div>	
Date <u>3/5</u> 20 <u>05</u>	

[illegible]

FORM NIS-2 (Back)	
9. Remarks	<u>TRACKING NO. RR-06-031</u> <u>CODE CASE N-416-2</u> <small>Applicable Manufacturer's Data Reports to be Attached</small> <div style="text-align: right; margin-top: 10px;"><u>W0 03-020825-000</u></div>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>replaced.</u> <u>REPORT ASME/ASME</u> conforms to the rules of the ASME Code, Section XI. <u>repair or replacement</u></p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>HASD MECH ENGR</u> Date <u>10/14/04</u> 20 <u>04</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>TENNESSEE</u> and employed by <u>HSR I &amp; I Co of CT</u> of <u>HARTFORD, CT</u> have inspected the components described in this Owner's Report during the period <u>5-13-04</u> to <u>11-01-04</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <u>C. E. Mitcalf</u>  <small>Inspector's Signature</small> </div> <div style="width: 50%;"> Commissions <u>TN-2633 (A B N I)</u>  <small>National Board, State, Province, and Endorsements</small> </div> </div>	
Date <u>Nov. 01, 2004</u>	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>				Date <u>6/2/2004</u> Sheet <u>1</u> of <u>2</u>			
2. Plant <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u> <small>Address</small>				Unit <u>Unit 1</u> MMG/WO# <u>03-021232-000</u>			
3. Work Performed by <u>MECHANICAL MAINTENANCE</u> <small>Name</small> <u>WATTS BAR NUCLEAR PLANT, PO BOX 2000</u> <u>SPRING CITY, TN 37381</u> <small>Address</small>				Repair Organization P.O. No., Job No., etc. Type Code Symbol Stamp <u>N/A</u> Authorization No <u>N/A</u> Expiration Date <u>N/A</u>			
4. Identification of system <u>001- MAIN STEAM</u>							
5. (a) Applicable Construction Code <u>SECT III</u> 19 <sup>74</sup> Edition, <u>S75</u> Addenda, <u>N/A</u> Code Case (b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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-001-0011-T COVER	ATWOOD & MORRILL	1-13824	N/A	MSIV HT# 216057	9/77	Replaced	Y
↓	↓	L 3962-3	N/A	↓	9/03	3/2/10 Replacement	Y
1-FCV-001-0011-T PILOT POPPET	ATWOOD & MORRILL	1-13824	N/A	MSIV HT# 10260	9/77	Replaced	Y
↓	↓	A 4772-2	N/A	↓	7/03	Replacement	Y
7. Description of Work <u>Replaced Cover &amp; Pilot Poppet on MSIV</u>							
8. Tests Conducted: Hydrostatic    Pneumatic    Nominal Operating Pressure <input checked="" type="checkbox"/> 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	<u>TRACKING # RR-06-034</u> <span style="float: right;"><u>W07 03-02/232-000</u></span> <small>Applicable Manufacturers Data Reports to be Attached</small>
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the <small>rules of the ASME Code, Section XI.</small>	
Type Code Symbol Stamp	<u>N/A</u>
Certificate of Authorization No.	<u>N/A</u>
Signed	<u>McCalli</u> <u>3/27/05</u> <u>Maint Specialist</u> Date <u>3/27</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HJB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>6/2/04</u> to <u>3/28/05</u> 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.	
<u>Bruce M. Earnigh</u> <small>Inspector's Signature</small>	Commissions <u>TN 2534</u> <small>National Board, State, Province, and Endorsements</small>
Date <u>3/28</u> 20 <u>05</u>	

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

<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>	<b>Date</b> <u>6/2/2004</u> <b>Sheet</b> <u>    </u> <b>of</b> <u>    </u>
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u> <small>Address</small>	<b>Unit</b> <u>Unit 1</u> <b>MMG/WO#</b> <u>04-815133-000</u> <small>Repair Organization P.O. No., Job No., etc.</small> <b>Type Code Symbol Stamp</b> <u>N/A</u>
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <small>Name</small> <u>WATTS BAR NUCLEAR PLANT, PO BOX 2000</u> <u>SPRING CITY, TN 37381</u> <small>Address</small>	<b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>

**4. Identification of system** 001- MAIN STEAM

**5. (a) Applicable Construction Code** SECT III **19 74 Edition, S75** **Addenda,** N/A **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-001-0004-T COVER	ATWOOD & MORRILL	4-13824	N/A	MSIV HT# 216057	N/A	Replaced	Y
1-FCV-001-0004-T COVER	ATWOOD & MORRILL	L3902-2	N/A	MSIV HT# 10260	2003	Replacement	Y
1-FCV-001-0004-T PILOT POPPET	ATWOOD & MORRILL	4-13824	N/A	MSIV HT# 10260	N/A	Replaced	Y
↓	↓	A4772-1	N/A	MSIV HT# 10260	2003	Replacement	Y

**7. Description of Work** Replaced Cover & Pilot Poppet on MSIV

**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	<u>TRACKING # AR-06-035</u> <span style="float: right;"><u>W/O # 04-215133-000</u></span> <small>Applicable Manufacturer's Data Reports to be Attached</small>
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the rules of the ASME Code, Section XI.	
Type Code Symbol Stamp	<u>N/A</u>
Certificate of Authorization No.	<u>N/A</u>
Signed	<u><i>J. Callin Maint Specialist</i></u> Date <u>3/28</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>6/2/04</u> to <u>3/29/05</u> 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.	
<u><i>Bruce M. Emigh</i></u> Inspector's Signature	Commissions <u>TN 2534</u> National Board, State, Province, and Endorsements
Date <u>3/29</u> 20 <u>05</u>	

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> As Required by the Provisions of the ASME Code Section XI							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>				<b>Date</b> <u>06-17-2004</u> <b>Sheet</b> _____ <b>of</b> _____			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u> <small>Address</small>				<b>Unit</b> <u>Unit 1</u> <b>W/O</b> <u>03-022635-000</u> <small>Repair Organization P.O. No., Job No., etc.</small>			
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <small>Name</small> <u>P.O. BOX 2000 SPRING CITY, TN 37381</u> <small>Address</small>				<b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>4. Identification of system</b> <u>063 -S.I.S.</u>							
<b>5. (a) Applicable Construction Code</b> <u>SECTION III 19 74 Edition, W74</u> <b>Addenda,</b> <u>n/a</u> <b>Code Case</b> <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>1989</u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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)
WELD NO. 1-063B-T108-10	N/A	N/A	N/A	SEAL WELD		REPAIR ED	Y
<b>7. Description of Work</b> <sup>RO-</sup> <u>REPAIRED 2 INCH VALVE SEAL WELD</u> <sup>R1-</sup> <u>ADD'L PIN HOLE FOUND REPAIR SEAL WELD REMOVE AND REINSTALL COMPLETE SEAL WELD.</u>							
<b>8. Tests Conducted:</b> Hydrostatic    Pneumatic    Nominal Operating Pressure <input checked="" type="checkbox"/> Other    Pressure _____ psi    Test Temp _____ °F							
<b>NOTE:</b> 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	<div style="display: flex; justify-content: space-between;"> <span>TRACKING NO. <u>RP-06-440</u></span> <span>CODE CASE <u>N-416-2</u></span> <span><u>WO 03-022635-001</u></span> </div> <div style="text-align: center; font-size: small; margin-top: 5px;">Applicable Manufacturer's Data Reports to be Attached</div>		
<b>CERTIFICATE OF COMPLIANCE</b>			
<p>We certify that the statements made in the report are correct and this <u>repair</u> conforms to the rules of the ASME Code, Section XI.  <div style="text-align: right; margin-right: 100px;"><u>repair or replacement</u></div> </p>			
Type Code Symbol Stamp <u>N/A</u>			
Certificate of Authorization No. <u>N/A</u>			
Signed <u><i>Glenn Mart. Specialist</i></u> Date <u>3/12</u> 20 <u>05</u> <div style="text-align: center; font-size: small;">Owner or Owner's Designee. Title</div>			
<b>CERTIFICATE OF INSERVICE INSPECTION</b>			
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hastings CT</u> have inspected the components described in this Owner's Report during the period <u>6/17/04</u> to <u>3/14/05</u> 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.</p> <p>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.</p>			
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <u><i>Bruce M. Eamigh</i></u>            Inspector's Signature         </div> <div style="width: 50%;">           Commissions <u>TN2534</u>            National Board, State, Province, and Endorsements         </div> </div>			
Date <u>3/14</u> 20 <u>05</u>			

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

1. Öwner TENNESSEE VALLEY AUTHORITY  
Name  
1101 Market St., Chattanooga, TN 37402

Date 7-21-04

Sheet / of 2

2. Plant	Watts Bar Nuclear Plant
	P. O. Box 2000, Spring City, TN 37381

Unit Unit 1

WO 04-813845-008

3. Work Performed by WATTS BAR NUCLEAR PLANT  
P.O. BOX 2000, SPRING CITY, TENN. 37381

Repair Organization P.O. No., Job No., etc.  
Type Code Symbol Stamp N/A

Authorization No N/A

Expiration Date N/A

4. Identification of system LeZ Chemical + Volume control

5. (a) Applicable Construction Code Section III 1971 Edition, 572 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)
1-2FU-62-662-S	Crosby	USL903-00-0006	NA	WA	1971	replacement	y
1-2FU-62-662-S	Crosby	USL903-00-0010	NA	NA	1971	replaced	y
1-2FU-62-662-S	Crosby	190137-87-0310-5 West Number 91005	3-105 N/A	NOZZLE	1991	replacement	y
1-2FU-62-662-S	Crosby	N/A 41-0164	N/A	DISCONNECT	1999	replacement	y
		AS/N 90137-87-0310					

7. Description of Work *Reconcile RFU*

8. Tests Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒  
Other ☐ Pressure >2200 psi Test Temp 7500 °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	<div style="text-align: center;"><u>RP-06-050</u></div> <div style="text-align: right; font-size: small;">Applicable Manufacturers Data Reports to be Attached</div> <div style="text-align: right; font-size: large; margin-top: 10px;">04-813045-08</div>
<b>CERTIFICATE OF COMPLIANCE</b>  We certify that the statements made in the report are correct and this <u>replacement</u> conforms to the rules of the ASME Code, Section XI. <div style="text-align: right; font-size: small;">repair or replacement</div>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>J. Coller</u> <u>J. Coller Maint Special</u> Date <u>3/27</u> 20 <u>05</u> <div style="text-align: center; font-size: x-small;">Owner or Owner's Designee, Title</div>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission Issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>2/21/04</u> to <u>3/28/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <u>Bruce M. Earnigh</u>            Inspector's Signature         </div> <div style="width: 50%;">           Commissions <u>TN 2534</u>            National Board, State, Province, and Endorsements         </div> </div> <div style="margin-top: 10px;">           Date <u>3/28</u> 20 <u>05</u> </div>	

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> As Required by the Provisions of the ASME Code Section XI							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <div style="text-align: center; font-size: small;">Name</div> 1101 Market St., Chattanooga, TN 37402 <div style="text-align: center; font-size: small;">Address</div>				<b>Date</b> <u>8-6-04</u> <b>Sheet</b> <u>1</u> of <u>2</u>			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <div style="text-align: center; font-size: small;">Name</div> P. O. Box 2000, Spring City, TN 37381 <div style="text-align: center; font-size: small;">Address</div>				<b>Unit</b> <u>Unit 1</u> <u>WO 04-813845-003</u> <div style="text-align: center; font-size: small;">Repair Organization P.O. No., Job No., etc.</div>			
<b>3. Work Performed by</b> <u>WATTS BAR NUCLEAR PLANT</u> <div style="text-align: center; font-size: small;">Name</div> P.O. BOX 2000, SPRING CITY, TENN. 37381 <div style="text-align: center; font-size: small;">Address</div>				<b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>4. Identification of system</b> <u>74 Residual Heat Removal</u>							
<b>5. (a) Applicable Construction Code</b> <u>Section III</u> <b>19</b> <u>71</u> <b>Edition,</b> <u>S 72</u> <b>Addenda,</b> <u>N/A</u> <b>Code Case</b> <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>1989</u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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-RV-74-505	Crosby	NS5904-00-0106	N/A	N/A	1975	Replaced	Y
1-RV-74-505	Crosby	NS5904-00-0073	N/A	N/A	1977	Replaced	Y
<b>7. Description of Work</b> <u>Replaced valve</u>							
<b>8. Tests Conducted:</b> Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input checked="" type="checkbox"/> Other <input type="checkbox"/> Pressure _____ psi Test Temp _____ °F							
<b>NOTE:</b> 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	<u>RR-06-052</u> <small>Applicable Manufacturer's Data Reports to be Attached</small> <div style="text-align: right; margin-top: 10px;"><u>04-83845-03</u></div>
<b>CERTIFICATE OF COMPLIANCE</b> <p>We certify that the statements made in the report are correct and this <u>replacement</u> conforms to the rules of the ASME Code, Section XI.  <div style="text-align: right; margin-right: 100px;"><small>repair or replacement</small></div> </p> <p>Type Code Symbol Stamp <u>N/A</u></p> <p>Certificate of Authorization No. <u>N/A</u></p> <p>Signed <u>J. Callin Maint Specialist</u> Date <u>3/25</u> 20 <u>05</u>  <small>Owner or Owner's Designee, Title</small></p>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b> <p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>8/13/04</u> to <u>3/25/05</u> 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.</p> <p>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.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 40%;"> <u>Bruce M. Earnigh</u>  <small>Inspector's Signature</small> </div> <div style="width: 50%;"> Commissions <u>TN 2534</u>  <small>National Board, State, Province, and Endorsements</small> </div> </div> <p>Date <u>3/25</u> 20 <u>05</u></p>	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u>			Date <u>8-12-04</u>				
<small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u>			<small>Address</small> Sheet <u>1</u> of <u>2</u>				
2. Plant <u>Watts Bar Nuclear Plant</u>			Unit <u>Unit 1</u>				
<small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u>			<small>Repair Organization P.O. No., Job No., etc.</small> <u>WO. 04-813845-009</u>				
3. Work Performed by <u>WATTS BAR NUCLEAR PLANT</u>			Type Code Symbol Stamp <u>N/A</u>				
<small>Name</small> <u>P.O. BOX 2000, SPRING CITY, TENN. 37381</u>			Authorization No <u>N/A</u>				
<small>Address</small>			Expiration Date <u>N/A</u>				
4. Identification of system <u>L2 CIXS</u>							
5. (a) Applicable Construction Code <u>ASME Section III</u> 1971 Edition, <u>572</u> Addenda, <u>NA</u> Code Case							
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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)
<u>1-RFV-42-475</u>	<u>Crosby</u>	<u>U6900-00-0012</u>	<u>N/A</u>	<u>NA</u>	<u>1975</u>	<u>Replacement</u>	<u>Y</u>
<u>1-RFV-42-475</u>	<u>Crosby</u>	<u>U6900-00-0005</u>	<u>N/A</u>	<u>NA</u>	<u>1975</u>	<u>replaced</u>	<u>Y</u>
7. Description of Work <u>Repair valve</u>							
8. Tests Conducted: Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input checked="" type="checkbox"/>							
Other <input type="checkbox"/> 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.							

9. Remarks

PR-01-054

Applicable Manufacturers Data Reports to be Attached

04-513845-09

## 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.  
 repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A

Signed

McCollin Maint Specialist

Owner or Owner's Designated Title

Date

3/24

20

05

## 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 Owner's Report during the period 8/13/04 to 3/25/05 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.

Bruce M. Eamigh

Inspector's Signature

Commissions

TN 2534

National Board, State, Province, and Endorsements

Date

3/2520 05

As Required by the Provisions of the ASME Code Section XI

Appendix V  
Page 25 of 76

## FORM NIS-2 (Back)

9. Remarks

RR-06-055

Applicable Manufacturer's Data Reports to be Attached

04-813845-10

## 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.  
 repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A

Signed

J. Collin Maint. Specialist

Date

3/11

20

05

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 CT. have inspected the components described in this Owner's Report during the period 8/13/04 to 3/24/05 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.

Bruce M. Eimigh  
 Inspector's Signature

Commissions

TN2534

National Board, State, Province, and Endorsements

Date

3/242005

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> As Required by the Provisions of the ASME Code Section XI							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>				<b>Date</b> <u>3-5-23-05</u> <i>3/5-23-05</i> <b>Sheet</b> <u>1</u> of <u>2</u>			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u> <small>Address</small>				<b>Unit</b> <u>Unit #1 SWH</u> <b>MMG/WO#</b> <u>04-813845-007</u>			
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <small>Name</small> <u>WATTS BAR NUCLEAR PLANT, PO BOX 2000</u> <u>SPRING CITY, TN 37381</u> <small>Address</small>				<small>Repair Organization P.O. No., Job No., etc.</small> <b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>4. Identification of system</b> <u>SYSTEM 068, REACTOR COOLANT SYSTEM</u>							
<b>5. (a) Applicable Construction Code</b> <u>SECTION III</u> <u>19 71</u> Edition, <u>W72</u> Addenda, <u>NONE</u> Code Case <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>1989</u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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-RFV-088-0563	CROSBY	<del>N56964-10-0029</del> N56964-10-0097 <i>#13 3/21/85</i>	N/A	HB-86-BP	1983	REPLACE-MENT	Y
1-RFV-068-0523	Crosby	N56964-10-0096	N/A	HB-86-BP	N/A	Replaced	Y
<b>7. Description of Work</b> <u>REPLACE EXISTING VALVE WITH NEW VALVE</u>							
<b>8. Tests Conducted:</b> Hydrostatic    Pneumatic <u>Nominal Operating Pressure</u> <i>To be performed by</i> <small>Other</small> Pressure _____ psi    Test Temp _____ °F <i>Da TRI-68-6</i>							
<b>NOTE:</b> 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	<u>TRACKING # RR-06-056</u> <u>WO 04-813845-007</u> <small>Applicable Manufacturers Data Reports to be Attached</small>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the rules of the ASME Code, Section XI.</p> <p style="text-align: right; margin-right: 100px;">repair or replacement</p>	
Type Code Symbol Stamp	<u>N/A</u>
Certificate of Authorization No.	<u>N/A</u>
Signed	<u>Shawn M. McNeill</u> <u>Mechanical Engineer</u> Date <u>3-23-05</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford Ct.</u> have inspected the components described in this Owner's Report during the period <u>8/17/04</u> to <u>3/23/05</u> 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.</p> <p>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.</p>	
<u>Bruce M. Eamigh</u> Inspector's Signature	Commissions <u>TN2534</u> National Board, State, Province, and Endorsements
Date <u>3/23</u> 20 <u>05</u>	

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> <small>As Required by the Provisions of the ASME Code Section XI</small>							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>				<b>Date</b> <u>3-14-05</u> <b>Sheet</b> <u>      </u> of <u>      </u>			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u> <small>Address</small>				<b>Unit</b> <u>Unit 0</u> <b>MMG/WO#</b> <u>04-813875-000</u> <small>Repair Organization P.O. No., Job No., etc.</small> <b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <small>Name</small> <u>WATTS BAR NUCLEAR PLANT, PO BOX 2000</u> <u>SPRING CITY, TN 37381</u> <small>Address</small>							
<b>4. Identification of system</b> <u>062, CVCS, CENTRIFUGAL CHARGING PUMP SEAL COMPONENTS</u>							
<b>5. (a) Applicable Construction Code</b> <u>SECTION III 1974 Edition, 1971</u> <b>Addenda,</b> <u>      </u> <b>Code Case</b> <u>      </u> <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>      </u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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)
SEAL HOUSING RADIAL	PACIFIC PUMP	63893-7-AA	N/A	1-PMP-062-0108 -A	1974	REPLACE-MENT	
SEAL PLATE RADIAL	PACIFIC PUMP	59785-23-AA	N/A	1-PMP-062-0108 -A	1974	REPLACE-MENT	
SEAL HOUSING THRUST	PACIFIC PUMP	67953-68-AE	N/A	1-PMP-062-0108-A	1974	REPLACE-MENT	
SEAL PLATE THRUST	PACIFIC PUMP	81898-52-AA <sup>702</sup> 618398-52-AR	N/A	1-PMP-062-0108-A	1974	REPLACE-MENT	
<i>Seal Housing Radial</i>		63893-26-AB				REPLACED	
<i>Seal Plate Radial</i>		59785-6-AF					
<i>Seal Housing Thrust</i>		63893-21-AC					
<i>Seal Plate Thrust</i>		59785-21-AB					
<b>7. Description of Work</b> <u>REPLACE SEAL HOUSINGS AND SEAL PLATES (RADIAL &amp; THRUST).</u>							
<b>8. Tests Conducted:</b> Hydrostatic    Pneumatic    Nominal Operating Pressure <input checked="" type="checkbox"/> Other    Pressure _____ psi    Test Temp _____ °F							
<b>NOTE:</b> 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 TRACKING # RR-06-057 WO # 04-813875-000  
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 conforms to the rules of the ASME Code, Section XI.  
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A

Signed J. Hall Maint Specialist Date 3/13 20 05  
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 CT. have inspected the components described in this Owner's Report during the period 8/17/04 to 3/14/05 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.

Bruce M. Earnigh Commissions TN 2534  
Inspector's Signature National Board, State, Province, and Endorsements  
 Date 3/14 20 05

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> As Required by the Provisions of the ASME Code Section XI							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <div style="text-align: center; font-size: small;">Name</div> <u>1101 Market St., Chattanooga, TN 37402</u> <div style="text-align: center; font-size: small;">Address</div>				<b>Date</b> <u>3-21-05</u> <b>Sheet</b> _____ <b>of</b> _____			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <div style="text-align: center; font-size: small;">Name</div> <u>P. O. Box 2000, Spring City, TN 37381</u> <div style="text-align: center; font-size: small;">Address</div>				<b>Unit</b> <u>Unit 1</u> <b>MMG/WO#</b> <u>04-813661-000</u>			
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <div style="text-align: center; font-size: small;">Name</div> <u>WATTS BAR NUCLEAR PLANT, PO BOX 2000</u> <div style="text-align: center; font-size: small;">Address</div> <u>SPRING CITY, TN 37381</u>				<div style="text-align: center; font-size: small;">Repair Organization P.O. No., Job No., etc.</div> <b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>4. Identification of system</b> <u>SYSTEM 068, REACTOR COOLANT SYSTEM</u>							
<b>5. (a) Applicable Construction Code</b> <u>SECTION III</u> <u>19 80</u> Edition, <u>W80</u> Addenda, <u>NONE</u> Code Case <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>1989</u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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-068-0340-A	TARGET ROCK	5	N/A	B2UU-001	1983	REPLACE-MENT	Y
<b>7. Description of Work</b> <u>REPLACE EXISTING VALVE WITH NEW VALVE</u>							
<b>8. Tests Conducted:</b> Hydrostatic    Pneumatic    Nominal Operating Pressure <u>600-04-813661</u> <div style="text-align: right; font-size: small;">Performance of</div> <div style="text-align: right; font-size: small;">5/2/01</div> Other    Pressure _____ psi    Test Temp _____ °F <u>007</u> <div style="text-align: right; font-size: small;">1-781-68-6</div>							
<b>NOTE:</b> 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	<u>Tracking + RR-06-059</u> <span style="float: right;"><u>WORK 04-B13661-000</u></span>
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the rules of the ASME Code, Section XI. <div style="text-align: right; margin-right: 100px;">repair or replacement</div>	
Type Code Symbol Stamp	<u>N/A</u>
Certificate of Authorization No.	<u>N/A</u>
Signed <u><i>[Signature]</i></u> <u>Specialist</u>	Date <u>3/21</u> 20 <u>05</u>
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>8/17/04</u> to <u>3/21/05</u> 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.</p> <p>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.</p>	
<u><i>[Signature]</i></u> Inspector's Signature	Commissions <u>TN 2534</u> National Board, State, Province, and Endorsements
Date <u>3/21</u> 20 <u>05</u>	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS							
AS Required by the Provisions of the ASME Code Section XI							
1. Owner <b>TENNESSEE VALLEY AUTHORITY</b>				Date <b>3-21/05</b>			
<small>Name</small> <b>1101 Market St., Chattanooga, TN 37402</b>				Sheet _____ of _____			
<small>Address</small> 2. Plant <b>Watts Bar Nuclear Plant</b>				Unit <b>Unit 1</b>			
<small>Name</small> <b>P. O. Box 2000, Spring City, TN 37381</b>				MMG/WO# <b>04-813662-000</b>			
<small>Address</small> 3. Work Performed by <b>MECHANICAL MAINTENANCE</b>				<small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <b>N/A</b>			
<small>Name</small> <b>WATTS BAR NUCLEAR PLANT, PO BOX 2000</b>				Authorization No <b>N/A</b>			
<small>Address</small> <b>SPRING CITY, TN 37381</b>				Expiration Date <b>N/A</b>			
4. Identification of system <b>SYSTEM 068, REACTOR COOLANT SYSTEM</b>							
5. (a) Applicable Construction Code <b>SECTION III</b> 1980 Edition, W80 Addenda, <b>NONE</b> Code Case							
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements <b>1989</b>							
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)
<b>1-PCV-068-0334-B</b>	<b>TARGET ROCK</b>	<b>4</b>	<b>N/A</b>	<b>82UU-001</b>	<b>1983</b>	<b>REPLACE-MENT</b>	<b>Y</b>
7. Description of Work <b>REPLACE EXISTING VALVE WITH NEW VALVE</b>							
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.							

*To be performed by 00-04-813662-001 3/21/11 1-TAT-68-16*

FORM NIS-2 (Back)	
9. Remarks	<u>TRACKING # RR-06-060</u> <u>WO 04-813662-000</u> <small>Applicable Manufacturers Data Reports to be Attached</small>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the rules of the ASME Code, Section XI.</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed	<u><i>Prof. [Signature]</i></u> <u><i>Owner</i></u> Date <u>3-21</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>HARTFORD CT.</u> have inspected the components described in this Owner's Report during the period <u>8/17/04</u> to <u>3/21/05</u> 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.</p> <p>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.</p>	
<u><i>Bruce M. Earnigh</i></u> Inspector's Signature	Commissions <u>TN 2534</u> National Board, State, Province, and Endorsements
Date <u>3/21</u> 20 <u>05</u>	

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u>			Date <u>03/28/05</u>				
<small>Name</small> 1101 Market St., Chattanooga, TN 37402			<small>Sheet</small> <u>1</u> of <u>2</u>				
2. Plant <u>Watts Bar Nuclear Plant</u>			Unit <u>Unit 1</u>				
<small>Address</small> P. O. Box 2000, Spring City, TN 37381			<small>Repair Organization P.O. No., Job No., etc.</small> <u>WO 04-813845-013</u>				
3. Work Performed by <u>WATTS BAR NUCLEAR PLANT</u>			Type Code Symbol Stamp <u>N/A</u>				
<small>Name</small> P.O. BOX 2000, SPRING CITY, TENN. 37381			Authorization No <u>N/A</u>				
<small>Address</small>			Expiration Date <u>N/A</u>				
4. Identification of system <u>63 Safety Injection</u>							
5. (a) Applicable Construction Code <u>Section III</u> 1971 Edition, <u>SR</u> Addenda, <u>W/A</u> Code Case							
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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-RF-63626-P	Crosby	N/A			→	replaced	Y
1-RF-63626-A	Crosby	N/A	N/A	N/A	9/97	replacement	Y
7. Description of Work <u>Repair Valve</u>							
8. Tests Conducted: Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input checked="" type="checkbox"/>							
Other <input type="checkbox"/> 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

RR-de-de3

Applicable Manufacturer's Data Reports to be Attached

04-813845-13

## 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.  
 repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/ASigned Officer Maint SpecialistDate 3/27 20 05

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 CT have inspected the components described in this Owner's Report during the period 8/13/04 to 3/28/05 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.

Bruce M. Eamigh  
 Inspector's Signature
Commissions TN 2534

National Board, State, Province, and Endorsements

Date 3/28 20 05

As Required by the Provisions of the ASME Code Section X

Appendix V  
Page 37 of 76



9. Remarks

Re - 06-04

Applicable Manufacturers Data Reports to be Attached

04-813845-14

## 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.  
 repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A

Signed

John F. Casey ISI ENGINEER

Date

03/2420 05

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 CT. have inspected the components described in this Owner's Report during the period 8/18/04 to 3/24/05 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.

Bruce M. Earnigh

Inspector's Signature

Commissions

TN2534

National Board, State, Province, and Endorsements

Date

3/2420 05

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

Date 06-17-2004

Sheet of

Unit	Unit 1
------	--------

W/O ~~03-022635-000~~ 03-003170-000

Repair Organization P.O. No., Job No., etc.  
Type Code Symbol Stamp N/A

Authorization No N/A

**Expiration Date** N/A

5. (a) Applicable Construction Code SECTION III 19 74 Edition, W74 Addenda, n/a Code Case

(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

[illegible]

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

Appendix V  
Page 39 of 76

FORM NIS-2 (Back)	
9. Remarks	<u>TRACKING NO. RR-06-067 CODE CASE N-416-2</u> <small>Applicable Manufacturer's Data Reports to be Attached</small> <div style="text-align: right; margin-top: 10px;"> <u>WO 03-022635-000</u>  <u>03-003170-000</u>  <u>10/12/04</u> </div>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>repair</u> conforms to the rules of the ASME Code, Section XI.</p> <p style="text-align: right; margin-right: 100px;">repair or replacement</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>Janet Collier Maintenance Specialist</u> Date <u>10/13/04</u> 20 <u>04</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>8/26/04</u> to <u>10/20/04</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <u>Bruce M. Earnigh</u>            Inspector's Signature         </div> <div style="width: 50%;">           Commissions <u>TN 2534</u>            National Board, State, Province, and Endorsements         </div> </div>	
Date <u>10/20</u> 20 <u>04</u>	

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> <i>As Required by the Provisions of the ASME Code Section XI</i>							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>				<b>Date</b> <u>3/28/05</u> <b>Sheet</b> <u>1</u> of <u>X 2 286, 2/14/05</u>			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u> <small>Address</small>				<b>Unit</b> <u>Unit 1</u> <b>MMG/WO#</b> <u>04-B13850-000</u>			
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <small>Name</small> <u>WATTS BAR NUCLEAR PLANT, PO BOX 2000</u> <u>SPRING CITY, TN 37381</u> <small>Address</small>				<small>Repair Organization P.O. No., Job No., etc.</small> <b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>4. Identification of system</b> <u>068, REACTOR COOLANT SYSTEM</u>							
<b>5. (a) Applicable Construction Code</b> <u>SECT III</u> <u>19 74</u> Edition, <u>S 74</u> Addenda, <u>NONE</u> Code Case <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>1989</u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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 CARTRIDGE SEAL	Westinghouse	2287	N/A	2D74703-G01	1990	Replacement	NO
<b>7. Description of Work</b> <u>Replace existing seal with rebuilt seal removed from RCP-2 during RFO5</u>							
<b>8. Tests Conducted:</b> Hydrostatic    Pneumatic    Nominal Operating Pressure <u>2000</u> psi    Test Temp <u>200</u> °F Other [ ] Pressure _____ psi							
<b>NOTE:</b> 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.							

RDS 2/16/05

FORM NIS-2 (Back)	
9. Remarks <u>Tracking Number RR-06-082</u>	WO 04-813850-000
Applicable Manufacturer's Data Reports to be Attached	
The cartridge seal being installed (S/N: 2287) was removed from RCP-2 during RFO5 by WO 03-014058-000.	
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the	
repair or replacement	
rules of the ASME Code, Section XI.	
Type Code Symbol Stamp	<u>N/A</u>
Certificate of Authorization No.	<u>N/A</u>
Signed <u>J. Collins Maint Specialist</u>	Date <u>3/28</u> 20 <u>05</u>
Owner or Owner's Designee, Title	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u>	
of <u>Hartford CT</u> have inspected the components described in this	
Owner's Report during the period <u>9/20/04</u> to <u>3/28/05</u> 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.	
<u>Bruce M. Emigh</u>	Commissions <u>TN 2534</u>
Inspector's Signature	National Board, State, Province, and Endorsements
Date <u>3/28</u>	20 <u>05</u>

RDS 2/16/05

As Required by the Provisions of the ASME Code Section XI

Appendix V  
Page 43 of 76

NIS-2 FORM SHEET 2 OF 2

FORM NIS-2 (Back)	
9. Remarks	Code Case N-416-2      Tracking No. <u>RR-06-084</u> <small>Applicable Manufacturer's Data Reports to be Attached</small>
Work Order 03-004777-002	
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>replacement</u> conforms to the rules of the ASME Code, Section XI. <span style="float: right;"><u>repair or replacement</u></span></p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>Bob Callier</u> <u>FE</u> Date <u>March 7</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of _____ have inspected the components described in this Owner's Report during the period <u>12/12/04</u> to <u>3/7/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <u>Bruce M. Earnight</u>  <small>Inspector's Signature</small> </div> <div style="width: 60%;">                 Commissions <u>TN 2534</u>  <small>National Board, State, Province, and Endorsements</small> </div> </div>	
Date <u>3/7</u> 20 <u>05</u>	

[illegible]



FORM NIS-2 (Back)	
9. Remarks <u>Case Case N-416-2</u> <small>Applicable Manufacturer's Data Reports to be Attached</small> <u>TRACKING # RR-06-097</u>	<u>NO: 05-810075-000</u>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>REPAIR</u> <sup>REPLACEMENT</sup> <sub>NAC 1/13/1005</sub> conforms to the rules of the ASME Code, Section XI.</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>J. Collins Maint Specialist</u> Date <u>3/04</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>HARTFORD CT.</u> have inspected the components described in this Owner's Report during the period <u>1/21/05</u> to <u>3/5/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u>Bruce M. Earnigh</u>  <small>Inspector's Signature</small> </div> <div style="width: 50%;">           Commissions <u>TN 2534</u>  <small>National Board, State, Province, and Endorsements</small> </div> </div>	
Date: <u>3/5</u> 20 <u>05</u>	

[illegible]

FORM NIS-2 (Back) <span style="float: right;">N/A 11/19/2005</span>	
9. Remarks	<div style="display: flex; justify-content: space-between;"> <span><u>CODE CASE N-416-2</u></span> <span>NO: <u>8 05-810074-000</u></span> </div> <div style="text-align: center; font-size: small; margin-top: -10px;">Applicable Manufacturer's Data Reports to be Attached</div> <p><u>TRACKING No RR-06-093</u></p>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the rules of the ASME Code, Section XI.</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>J. Callie</u> <u>Maint. Specialist</u> Date <u>3/04</u> 20 <u>05</u> <div style="text-align: center; font-size: small;">Owner or Owner's Designee, Title</div>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>1/21/05</u> to <u>3/5/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Bruce M. Emigh</u>  <small>Inspector's Signature</small> </div> <div style="text-align: center;"> <u>TN 2534</u>  <small>Commissions</small>  <small>National Board, State, Province, and Endorsements</small> </div> </div>	
Date <u>3/5</u> 20 <u>05</u>	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>				Date <u>01-26-2005</u>			
2. Plant <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u> <small>Address</small>				Sheet <u>1</u> of <u>2</u>			
3. Work Performed by <u>MECHANICAL MAINTENANCE</u> <small>Name</small> <u>P.O. BOX 2000 SPRING CITY, TN 37381</u> <small>Address</small>				Unit <u>Unit 1</u> W/O <u>04-83845-024</u> <small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <u>N/A</u>			
				Authorization No <u>N/A</u> Expiration Date <u>N/A</u>			
4. Identification of system <u>062 - CHEMICAL AND VOLUME CONTROL</u>							
5. (a) Applicable Construction Code <u>SECTION III 19 71 Edition, S72</u> Addenda, <u>N/A</u> Code Case <u></u> (b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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-RFV-062-0636-S	CROSBY	N56900-00-0006	129	N/A	75	REPLACEMENT	Y
1-RFV-062-0636-S	CROSBY	N56900-00-0020	N/A	N/A	75	REPLACED	Y
7. Description of Work <u>Replaced valve with new valve</u>							
8. Tests Conducted: Hydrostatic    Pneumatic    Nominal Operating Pressure <input checked="" type="checkbox"/> 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	<div style="display: flex; justify-content: space-between;"> <span>TRACKING NO. <u>RR-06-097</u></span> <span>CODE CASE <u>N/A</u></span> <span><u>WO 04-613845-024</u></span> </div> <div style="text-align: center; font-size: small; margin-top: 5px;">Applicable Manufacturer's Data reports to be Attached</div>		
<b>CERTIFICATE OF COMPLIANCE</b>			
<p>We certify that the statements made in the report are correct and this <u>replacement</u> conforms to the rules of the ASME Code, Section XI.</p> <p style="text-align: center; margin-left: 400px;">repair or replacement</p>			
Type Code Symbol Stamp <u>N/A</u>			
Certificate of Authorization No. <u>N/A</u>			
Signed <u><i>J. Callin</i></u> <u>Maint. Specialist</u> Date <u>3/10</u> 20 <u>05</u> <div style="text-align: center; font-size: small;">Owner or Owner's Designee, Title</div>			
<b>CERTIFICATE OF INSERVICE INSPECTION</b>			
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>HARTFORD CT.</u> have inspected the components described in this Owner's Report during the period <u>1/27/05</u> to <u>3/25/05</u> 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.</p> <p>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.</p>			
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u><i>Bruce M. Earnigh</i></u>              Inspector's Signature           </div> <div style="text-align: center;">             Commissions <u>TN2534</u>              National Board, State, Province, and Endorsements           </div> </div>			
Date <u>3/25</u> 20 <u>05</u>			

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u>			Date <u>3/10/2005</u>				
<small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u>			Sheet <u>1</u> of <u>2</u>				
2. Plant <u>Watts Bar Nuclear Plant</u>			Unit <u>Unit 1</u>				
<small>Name</small> <u>P. O. Box 2000, Spring City, TN 37381</u>			WORK ORDER# <u>04-827109-000</u>				
3. Work Performed by <u>TVA MODIFICATIONS</u>			<small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <u>N/A</u>				
<small>Name</small> <u>WATTS BAR NUCLEAR PLANT</u>			Authorization No <u>N/A</u>				
<small>Address</small> _____			Expiration Date <u>N/A</u>				
4. Identification of system <u>REACTOR COOLANT</u>			SYSTEM <u>068</u>				
5. (a) Applicable Construction Code <u>ASME SECT. III</u>			19 <u>71</u> Edition, <u>S73</u>		Addenda, <u>N/A</u>		Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements			<u>1989</u>				
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-PIPE-068-B	N/A	N/A	N/A	N/A	N/A	REPAIRED	NO
7. Description of Work <u>Repaired pipe and weld 1-068A-T113-87 by metal removal to remove vise marks.</u>							
8. Tests Conducted: Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input checked="" type="checkbox"/>							
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 CODE CASE N-416-2 TRACKING# RR-06-103 and 2/22/2005  
Applicable Manufacturer's Data Reports to be Attached  
 WORK ORDER# 04-827109-000

## CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A

Signed Kurt H. Currell CONST ENGR Date 3/10 20 05  
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 CT. have inspected the components described in this  
 Owner's Report during the period 2/23/05 to 3/10/05 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.

Bruce M. Earnigh Commissions TN 2534  
 Inspector's Signature National Board, State, Province, and Endorsements

Date 3/10 20 05

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <b>TENNESSEE VALLEY AUTHORITY</b>		: Date <u>03/28/05</u>					
1101 Market St., Chattanooga, TN 37402		Sheet <u>1</u> of <u>2</u>					
2. Plant <b>Watts Bar Nuclear Plant</b>		Unit <u>Unit 1</u>					
P. O. Box 2000, Spring City, TN 37381		<u>05-812187-00</u>					
3. Work Performed by <b>WATTS BAR NUCLEAR PLANT</b>		Type Code Symbol Stamp <u>N/A</u>		Repair Organization P.O. No., Job No., etc. -			
P.O. BOX 2000, SPRING CITY, TENN. 37381		Authorization No <u>N/A</u>					
Address		Expiration Date <u>N/A</u>					
4. Identification of system <u>ool: Main Steam</u>							
5. (a) Applicable Construction Code <u>Section III</u> 1974 Edition, <u>W74</u> Addenda, <u>WA</u> Code Case							
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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-SFU-1-S31	Dresser-Consolidated	B504218	WA	N/A	N/A	replaced	Y
1-SFU-1-S31	Dresser-Consolidated	B504245	NA	N/A	1977	replaced	Y
7. Description of Work <u>Replaced valve with pre-tested valve</u>							
8. Tests Conducted: Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input checked="" type="checkbox"/>							
Other <input type="checkbox"/> 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

RR-06-106

Applicable Manufacturer's Data Reports to be Attached

05-812187-00

## 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.  
repair or replacement

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A

Signed

Hallie Maint Special  
Owner or Owner's Designee, Title

Date

3/27 20 05

## 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 Owner's Report during the period 2/26/05 to 3/28/05 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.

Bruce M. Earnig  
Inspector's Signature

Commissions

TN2534

National Board, State, Province, and Endorsements

Date

3/28/05 20 05

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> 1101 Market St., Chattanooga, TN 37402 <small>Address</small>			Date <u>2/26/05</u> Sheet <u>1</u> of <u>2</u>				
2. Plant <u>Watts Bar Nuclear Plant</u> <small>Name</small> P. O. Box 2000, Spring City, TN 37381 <small>Address</small>			Unit <u>Unit 1</u> <u>08-812186-00</u> <small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <u>N/A</u>				
3. Work Performed by <u>WATTS BAR NUCLEAR PLANT</u> <small>Name</small> P.O. BOX 2000, SPRING CITY, TENN. 37381 <small>Address</small>			Authorization No <u>N/A</u> Expiration Date <u>N/A</u>				
4. Identification of system <u>ool: Main Steam</u>							
5. (a) Applicable Construction Code <u>Section III</u> 1974 Edition, <u>W74</u> Addenda, <u>WA</u> Code Case (b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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-SFU-1-S29	Dresser - Consolidated	BS0234	WA	N/A	N/A	replaced	Y
1-SFU-1-S28	Dresser - Consolidated	BS0235	WA	N/A	2005	replacement	Y
7. Description of Work <u>Replace existing SFV with New One.</u>							
8. Tests Conducted: Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input checked="" type="checkbox"/> Other <input type="checkbox"/> 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.							

## 9. Remarks

RR-06-107

Applicable Manufacturer's Data Reports to be Attached

05-812186-00

## CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A

Signed Tom E. Casey, III ENGINEER Date 07/28 20 05  
 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 CT have inspected the components described in this  
 Owner's Report during the period 2/26/05 to 3/28/05 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.

Bruce M. Emigh  
 Inspector's Signature

Commissions TN 2534  
 National Board, State, Province, and Endorsements

Date 3/28 20 05

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u>				Date <u>03/28/05</u>			
<div style="text-align: center;"> <small>Name</small>            1101 Market St., Chattanooga, TN 37402         </div>				<div style="text-align: center;"> <small>Sheet</small>  <u>1</u> of <u>2</u> </div>			
2. Plant <u>Watts Bar Nuclear Plant</u>				Unit <u>Unit 1</u>			
<div style="text-align: center;"> <small>Address</small>            P. O. Box 2000, Spring City, TN 37381         </div>				<div style="text-align: center;"> <small>Repair Organization P.O. No., Job No., etc.</small>  <u>OS-812185-00</u> </div>			
3. Work Performed by <u>WATTS BAR NUCLEAR PLANT</u>				Type Code Symbol Stamp <u>N/A</u>			
<div style="text-align: center;"> <small>Name</small>            P.O. BOX 2000, SPRING CITY, TENN. 37381         </div>				<div style="text-align: center;"> <small>Authorization No</small>  <u>N/A</u> </div>			
<div style="text-align: center;"> <small>Address</small> </div>				<div style="text-align: center;"> <small>Expiration Date</small>  <u>N/A</u> </div>			
4. Identification of system <u>ool: Main Steam</u>							
5. (a) Applicable Construction Code <u>Section III</u> 1974 Edition, <u>W74</u> Addenda, <u>W74</u> Code Case							
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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-SFU-1-S24	Dresser-Consolidated	B504231	WA	N/A	1977	replaced	Y
1-SFU-1-S24	Dresser-Consolidated	B504233	WA	N/A	1977	replacement	Y
1 3/8 Dia. Inlet Stud	NOVA Mach	N/A	NA	HT# 51181	1904	replacement	N
1 3/8 Dia. NUTS	NOVA Mach	↓	NA	HT# Y12439	1990	replacement	N
7. Description of Work <u>Replace valve with pre-tested valve &amp; installed new studs/nuts</u>							
8. Tests Conducted: Hydrostatic <input type="checkbox"/> Pneumatic <input type="checkbox"/> Nominal Operating Pressure <input checked="" type="checkbox"/>							
Other <input type="checkbox"/> Pressure _____ psi Test Temp _____ °F							
NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.							

FORM NIS-2 (Back)	
9. Remarks	<div style="text-align: right;">PR -00-108</div> <div style="text-align: right;">05-812185 -00</div>
<small>Applicable Manufacturer's Data Reports to be Attached</small>	
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>replacement</u> conforms to the rules of the ASME Code, Section XI. <div style="text-align: right; margin-right: 100px;"><small>repair or replacement</small></div>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>[Signature]</u> <u>Plant Maint Specialist</u> Date <u>3/27</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT</u> have inspected the components described in this Owner's Report during the period <u>2/26/05</u> to <u>3/28/05</u> 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.	
<div style="display: flex; justify-content: space-between;"> <div> <u>[Signature]</u>  <small>Inspector's Signature</small> </div> <div> <small>Commissions</small> <u>TN 2534</u>  <small>National Board, State, Province, and Endorsements</small> </div> </div>	
Date <u>3/28</u> 20 <u>05</u>	

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

<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <div style="text-align: right; font-size: small;">Name</div> <u>1101 Market St., Chattanooga, TN 37402</u> <div style="text-align: right; font-size: small;">Address</div>	<b>Date</b> <u>2/26/05</u> <b>Sheet</b> <u>1</u> of <u>2</u> <b>Unit</b> <u>Unit 1</u>
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <div style="text-align: right; font-size: small;">Name</div> <u>P. O. Box 2000, Spring City, TN 37381</u> <div style="text-align: right; font-size: small;">Address</div>	<u>WO 05-812184-00</u> <div style="text-align: right; font-size: small;">Repair Organization P.O. No., Job No., etc.</div>
<b>3. Work Performed by</b> <u>WATTS BAR NUCLEAR PLANT</u> <div style="text-align: right; font-size: small;">Address</div> <u>P.O. BOX 2000, SPRING CITY, TENN. 37381</u> <div style="text-align: right; font-size: small;">Name</div>	<b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>

**4. Identification of system** 001 Main Steam

**5. (a) Applicable Construction Code** III **1974 Edition, with Addenda,** N/A **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-SFU-1-523	Dresser	B S d e 239	NA	N/A	77	Replaced	Y
1-SFU-1-523	Dresser	B S d e 241	NA	N/A	77	Replacement	Y

**7. Description of Work** Replaced valve with pre-tested 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.

9. Remarks

PR-06-109

Applicable Manufacturer's Data Reports to be Attached

60-05-812184-00

## CERTIFICATE OF COMPLIANCE

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

Type Code Symbol Stamp N/ACertificate of Authorization No. N/A

Signed Gallic Maint Specialist Date 3/27 20 05  
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 CT. have inspected the components described in this Owner's Report during the period 2/26/05 to 3/28/05 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.

Bruce M. Earnigh  
Inspector's Signature

Commissions TN2534  
National Board, State, Province, and Endorsements

Date 3/28 20 05

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> AS Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u>			Date <u>3-3-05</u>				
<small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u>			<small>Sheet</small> <u>      </u> of <u>      </u>				
2. Plant <u>Watts Bar Nuclear Plant</u>			Unit <u>Unit 1</u>				
<small>Address</small> <u>P. O. Box 2000, Spring City, TN, 37381</u>			<small>Work Order</small> <u>03-005228-001</u>				
3. Work Performed by <u>TVA Modifications</u>			<small>Repair Organization P.O. No., Job No., etc.</small> <small>Type Code Symbol Stamp</small> <u>N/A</u>				
<small>Name</small> <u>Watts Bar Nuclear Plant</u>			<small>Authorization No</small> <u>N/A</u>				
<small>Address</small> <u>      </u>			<small>Expiration Date</small> <u>N/A</u>				
4. Identification of system <u>068 Reactor Coolant</u>							
5. (a) Applicable Construction Code <u>ASME III</u> <u>19 71</u> Edition, <u>S73</u> Addenda, <u>N/A</u> Code Case							
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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-RTV-68-445A	Flowserve	13AYE	N/A	Model # 1878 #	2004	Repaired	Yes
7. Description of Work <u>Add weld metal to existing vendor weld on 1-RTV-68-445A</u>							
8. Tests Conducted: Hydrostatic    Pneumatic    Nominal Operating Pressure <u>X</u> <u>per 1-RTV-68-6</u>							
Other    Pressure <u>      </u> psi    Test Temp <u>      </u> °F <u>WO 04-815778-000</u>							
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.							



## NIS-2 FORM SHEET 2 OF 2

FORM NIS-2 (Back)	
9. Remarks	Code Case N-416-2      Tracking No. <u>RR 06-11</u> <small>Applications Manufacturers Data Reports to be Attached</small>
Work Order 03-005228-001	
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>repair</u> conforms to the <u>repair or replacement</u> rules of the ASME Code, Section XI.</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u><i>[Signature]</i></u> <u>CONST. ENGR</u> Date <u>3/6</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission Issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>3/3/05</u> to <u>3/6/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <u><i>Bruce M. Earnigh</i></u> Inspector's Signature             </div> <div style="width: 50%;">               Commissions <u>TN 2534</u> National Board, State, Province, and Endorsements             </div> </div>	
Date <u>3/6</u> 20 <u>05</u>	

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

<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <div style="text-align: right; font-size: small;">Name</div> <u>1101 Market St., Chattanooga, TN 37402</u> <div style="text-align: right; font-size: small;">Address</div>	<b>Date</b> <u>03-17-2005</u> <b>Sheet</b> <u>1</u> of <u>2</u> <b>Unit</b> <u>Unit 1</u> <b>W/O</b> <u>03-012465-000</u> <div style="text-align: right; font-size: small;">Repair Organization P.O. No., Job No., etc.</div> <b>Type Code Symbol Stamp</b> <u>N/A</u> <div style="text-align: right; font-size: small;">Name</div> <b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <u>P. O. Box 2000, Spring City, TN 37381</u> <div style="text-align: right; font-size: small;">Address</div> <b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <div style="text-align: right; font-size: small;">Name</div> <u>P.O. BOX 2000 SPRING CITY, TN 37381</u> <div style="text-align: right; font-size: small;">Address</div> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>
--	--

**4. Identification of system** 062 -C.V.C.S.

**5. (a) Applicable Construction Code** SECTION III 19 74 Edition, W76 **Addenda,** \_\_\_\_\_ **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)
WELD NO. 1-062B-T334-1A	N/A	N/A	N/A	WELD	2005	REPAIRED	Y

**7. Description of Work** REPAIRED 1/2 INCH PIPE TO VALVE WELD

**8. Tests Conducted:** Hydrostatic    Pneumatic    Nominal Operating Pressure ☒ Per I-TRF-68-6  
Other    Pressure \_\_\_\_\_ psi    Test Temp \_\_\_\_\_ °F    04-815778-000

**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	TRACKING NO. <u>RR-06-115</u> CODE CASE <u>N-416-2</u> <small>Applicable Manufacturers Data Reports to be Attached</small> <div style="text-align: right; margin-top: 10px;"><u>WO 03-012465-000</u></div>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>repair</u> conforms to the rules of the ASME Code, Section XI.  <div style="text-align: right; margin-right: 100px;"><small>repair or replacement</small></div> </p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>J. Collins Maint Specialist</u> Date <u>3/21</u> 20 <u>05</u> <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>3/17/05</u> to <u>3/24/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <u>Bruce M. Eamigh</u>  <small>Inspector's Signature</small> </div> <div style="width: 50%;">           Commissions <u>TN 2534</u>  <small>National Board, State, Province, and Endorsements</small> </div> </div>	
Date <u>3/24</u> 20 <u>05</u>	

FORM NIS-2, OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <u>TENNESSEE VALLEY AUTHORITY</u> <small>Name</small> <u>1101 Market St., Chattanooga, TN 37402</u> <small>Address</small>			Date <u>3/22/05</u> Sheet <u>1</u> of <u>2</u>				
2. Plant <u>Watts Bar Nuclear Plant</u> <small>Name</small> <u>P. O. Box 2000, Spring City, TN, 37381</u> <small>Address</small>			Unit <u>Unit 1</u> Work Order <u>03-021495-000</u> <small>Repair Organization P.O. No., Job No., etc.</small> Type Code Symbol Stamp <u>N/A</u>				
3. Work Performed by <u>TVA Modifications</u> <small>Name</small> <u>Watts Bar Nuclear Plant</u> <small>Address</small>			Authorization No <u>N/A</u> Expiration Date <u>N/A</u>				
4. Identification of system <u>03 Feedwater</u>							
5. (a) Applicable Construction Code <u>AISC 7th</u> Edition, <u>        </u> Addenda, <u>N/A</u> Code Case (b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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)
Pipe Support 1-1003-A428-3	TVA	N/A	N/A	N/A		Replaced	NO
7. Description of Work <u>Reinstall pipe support 1-1003-A428-3 by welding.</u>							
8. Tests Conducted: Hydrostatic    Pneumatic    Nominal Operating Pressure <u>        </u> Other    Pressure <u>N/A</u> psi    Test Temp <u>        </u> °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.							

NIS-2 FORM SHEET 2 OF 2

FORM NIS-2 (Back)	
9. Remarks <u>N/A</u>	Tracking No. <u>RR-06-116</u>
<small>Applicable Manufacturer's Data Reports to be Attached</small>	
Work Order <u>03-021495-000</u>	
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>replacement</u> conforms to the rules of the ASME Code, Section XI.</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u><i>James P. Ballard</i></u>	Date <u>MARCH 22, 2005</u>
<small>Owner or Owner's Designee, Title</small>	<small>82-22-05</small>
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>HARTFORD CT.</u> have inspected the components described in this Owner's Report during the period <u>3/17/05</u> to <u>3/22/05</u> 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.</p> <p>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.</p>	
<u><i>Bruce M. Earnight</i></u> Inspector's Signature	Commissions <u>TN2534</u> National Board, State, Province, and Endorsements
Date <u>3/22</u> 20 <u>05</u>	

[illegible]

FORM NIS-2 (Back)	
9. Remarks	<u>TRACKING NO. RR-06-117 CODE CASE N-416-2 WO 04-810991-000</u> <small>Applicable Manufacturer's Data Reports to be Attached</small>
<b>CERTIFICATE OF COMPLIANCE</b>	
We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the rules of the ASME Code, Section XI. <div style="text-align: right; margin-right: 100px;"><small>repair or replacement</small></div>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u>Edward SG Coordinator</u> Date <u>3/23/05</u> 20__ <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>3/17/05</u> to <u>3/23/05</u> 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.	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Bruce M. Earnigh</u>              Inspector's Signature           </div> <div style="text-align: center;">             Commissions <u>TN 2534</u>              National Board, State, Province, and Endorsements           </div> </div> <div style="margin-top: 10px;">             Date <u>3/23</u> 20<u>05</u> </div>	

As Required by the Provisions of the ASME Code Section XI

Appendix V  
Page 69 of 76



## FORM NIS-2 (Back)

9. Remarks TRACKING NO. RR-06-118 CODE CASE N-416-2 WD 04-810987-000  
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 conforms to the  
 rules of the ASME Code, Section XI. repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A

Signed W. Edwards SC Coordinator Date 7-23-05 20 05  
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 CT. have inspected the components described in this  
 Owner's Report during the period 3/17/05 to 3/23/05 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.

Bruce M. Earnigh  
 Inspector's Signature

Commissions TN 2534

National Board, State, Province, and Endorsements

Date 3/23 20 05

<b>FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS</b> As Required by the Provisions of the ASME Code Section XI							
<b>1. Owner</b> <u>TENNESSEE VALLEY AUTHORITY</u> <div style="text-align: center; font-size: small;">Name</div> <u>1101 Market St., Chattanooga, TN 37402</u> <div style="text-align: center; font-size: small;">Address</div>				<b>Date</b> <u>03-17-2005</u> <b>Sheet</b> <u>1</u> of <u>2</u>			
<b>2. Plant</b> <u>Watts Bar Nuclear Plant</u> <div style="text-align: center; font-size: small;">Name</div> <u>P. O. Box 2000, Spring City, TN 37381</u> <div style="text-align: center; font-size: small;">Address</div>				<b>Unit</b> <u>Unit 1</u> <b>W/O</b> <u>04-810988-000</u> <div style="text-align: center; font-size: small;">Repair Organization P.O. No., Job No., etc.</div>			
<b>3. Work Performed by</b> <u>MECHANICAL MAINTENANCE</u> <div style="text-align: center; font-size: small;">Name</div> <u>P.O. BOX 2000 SPRING CITY, TN 37381</u> <div style="text-align: center; font-size: small;">Address</div>				<b>Type Code Symbol Stamp</b> <u>N/A</u> <b>Authorization No</b> <u>N/A</u> <b>Expiration Date</b> <u>N/A</u>			
<b>4. Identification of system</b> <u>068- STEAM GENERATOR</u>							
<b>5. (a) Applicable Construction Code</b> <u>SECTION III 19 71 Edition, S71</u> <b>Addenda</b> <u>NB4643</u> <b>Code Case</b> <b>(b) Applicable Edition of Section XI Utilized for Repairs or Replacements</b> <u>1989</u>							
<b>6. Identification of Components Repaired or Replaced and Replacement Components</b>							
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-SGEN-68-SG1	Westinghouse	1591	W16236	N/A	75	replaced	Y
<b>7. Description of Work</b> <u>SLEEVING TUBES</u>							
<b>8. Tests Conducted:</b> Hydrostatic    Pneumatic    Nominal Operating Pressure Other <input checked="" type="checkbox"/> Pressure _____ psi    Test Temp _____ °F <b>EDDY CURRENT TESTED</b>							
<b>NOTE:</b> 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	<u>TRACKING NO. RK-06-119</u> <u>CODE CASE N-416-2</u> <u>WO 04-810988-000</u> <small>Applicable Manufacturer's Data Reports to be Attached</small>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>REPLACEMENT</u> conforms to the rules of the ASME Code, Section XI.</p> <p style="text-align: right; margin-right: 100px;">repair or replacement</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u><i>P. Edwards</i></u> <u>SG Coordinator</u> Date <u>3-23-05</u> 20__ <small>Owner or Owner's Designee, Title</small>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>3/17/05</u> to <u>3/23/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u><i>Bruce M. Enright</i></u>              Inspector's Signature           </div> <div style="text-align: center;"> <u>Commissions TN2534</u>              National Board, State, Province, and Endorsements           </div> </div>	
Date <u>3/23</u> 20 <u>05</u>	

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	03/25/2005
	Name 1101 Market St., Chattanooga, TN 37402	Sheet	/ of 2
2. Plant	Watts Bar Nuclear Plant	Unit	Unit 1
	Address P. O. Box 2000, Spring City, TN 37381		WO 04-824914-000
3. Work Performed by	Mechanical Maintenance		Repair Organization P.O. No., Job No., etc. Type Code Symbol Stamp N/A
	Name PO Box 2000 Spring City, TN 37381	Authorization No	N/A
	Address	Expiration Date	N/A
4. Identification of system	079, Fuel Transfer Tube		

5. (a) Applicable Construction Code ASME Sec III 19 71 Edition, n/a Addenda, n/a Code Case  
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1989

### 6. Identification of Components Repaired or Replaced and Replacement Components

[illegible]

**7. Description of Work** Replace existing blind flange with new blind flange.

8. Tests Conducted: Hydrostatic      Pneumatic-x      Nominal Operating Pressure      LLRT Tested per  
Other      Pressure \_\_\_\_\_ psi      Test Temp \_\_\_\_\_ °F      1-SI-0-702

**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 NS-2 (Back)	
9. Remarks	<div style="display: flex; justify-content: space-between;"> <span>Tracking Number RR-06-120</span> <span>WO 04-824914-000</span> </div> <div style="text-align: center; font-size: small; margin-top: 5px;">Applicable Manufacturer's Data Reports to be Attached</div>
<b>CERTIFICATE OF COMPLIANCE</b>	
<p>We certify that the statements made in the report are correct and this <u>replacement</u> conforms to the rules of the ASME Code, Section XI.</p>	
Type Code Symbol Stamp <u>N/A</u>	
Certificate of Authorization No. <u>N/A</u>	
Signed <u><i>James E. Carey</i> ISI ENGINEER</u> Date <u>03/25</u> 20 <u>05</u> <div style="text-align: center; font-size: small;">Owner or Owner's Designee, Title</div>	
<b>CERTIFICATE OF INSERVICE INSPECTION</b>	
<p>I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of <u>Tennessee</u> and employed by <u>HSB-CT</u> of <u>Hartford CT.</u> have inspected the components described in this Owner's Report during the period <u>PER 79387</u> to <u>3/25/05</u> 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.</p> <p>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.</p>	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u><i>Bruce M. Earnigh</i></u>              Inspector's Signature           </div> <div style="text-align: center;">             Commissions <u>TN2534</u>              National Board, State, Province, and Endorsements           </div> </div>	
Date <u>3/25</u> 20 <u>05</u>	

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI							
1. Owner <b>TENNESSEE VALLEY AUTHORITY</b>		Date <u>7/30/03</u>					
Name <b>1101 Market St., Chattanooga, TN 37402</b>		Sheet <u>1</u> of <u>2</u>					
Address 2. Plant <b>Watts Bar Nuclear Plant</b>		Unit <u>Unit 1</u>					
Name <b>P. O. Box 2000, Spring City, TN 37381</b>		W/O <u>03-011091-000</u>					
Address 3. Work Performed by <b>MECHANICAL MAINTENANCE</b>		Repair Organization P.O. No., Job No., etc. Type Code Symbol Stamp <u>N/A</u>					
Name <b>P.O. BOX 2000 SPRING CITY, TN 37381</b>		Authorization No <u>N/A</u>					
Address Expiration Date <u>N/A</u>							
4. Identification of system <b>SYSTEM 001 MAIN STEAM</b>							
5. (a) Applicable Construction Code <u>Sect. III CL 2 19 74</u> Edition, <u>W/75</u> Addenda, <u>NONE</u> Code Case							
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements <u>1989</u>							
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)
<del>1-DRV-001-0535</del>	<del>YARWAY VALVE</del>	<del>S/N 8782</del>	<del>NONE</del>	<del>GLOBE VALVE</del>	<del>1977</del>	<del>REPLACED</del>	<del>YES</del>
<del>1-DRV-001-0534</del>	<del>YARWAY VALVE</del>	<del>S/N 8760</del>	<del>NONE</del>	<del>GLOBE VALVE</del>	<del>1977</del>	<del>REPLACED</del>	<del>YES</del>
1-DRV-001-0534	Yarway Valve	BL99-A5	N/A	N/A	2000	replacement	Yes
Valve Trim							
7. Description of Work <u>Replace Valve trim</u>							
8. Tests Conducted: Hydrostatic    Pneumatic    Nominal Operating Pressure <input checked="" type="checkbox"/> 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 TRACKING NO. RR-05-076 CODE CASE N-416-1 WD 03-011091-000  
Applicable Manufacturer's Data Reports to be Attached  
RR-06-121

## 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.  
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A

Signed John M. Earnigh Date 3/29 20 05  
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 CT. have inspected the components described in this Owner's Report during the period 7/31/03 to 3/29/05 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.

Bruce M. Earnigh Commissions TN2534  
 Inspector's Signature National Board, State, Province, and Endorsements

Date 3/29 20 05