

VIRGINIA ELECTRIC AND POWER COMPANY
RICHMOND, VIRGINIA 23261

July 5, 2006

United States Nuclear Regulatory Commission
Attention: Document Control Desk
Washington, D. C. 20555-0001

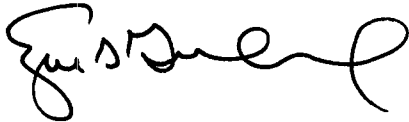
Serial No.: 06-402
NLOS/VLH
Docket No.: 50-338
License No.: NPF-4

VIRGINIA ELECTRIC AND POWER COMPANY (DOMINION)
NORTH ANNA POWER STATION UNIT 1
OWNER'S ACTIVITY REPORTS

By letter dated October 2, 2000, the NRC granted North Anna Units 1 and 2 approval to use the recording and reporting requirements of American Society of Mechanical Engineers (ASME) Code Case N-532. Therefore, in accordance with the requirements of ASME Code Case N-532, enclosed are the Owner's Activity Reports (Form OAR-1), for refueling outage N1R18 and for the end of the second period, N1R18a. This information completes the reporting requirements for North Anna Unit 1's second period of the third ten-year interval.

Should you have any questions regarding this submittal, please contact Mr. Thomas Shaub at (804) 273-2763.

Very truly yours,



Eugene S. Grecheck
Vice President - Nuclear Support Services

Commitments made in this letter: None

Attachment

cc: U. S. Nuclear Regulatory Commission
Region II
Sam Nunn Atlanta Federal Center
61 Forsyth Street, S. W., Suite 23T85
Atlanta, GA 30303-8931

Mr. S. R. Monarque
U. S. Nuclear Regulatory Commission
One White Flint North
11555 Rockville Pike
Rockville, MD 20852-2738

Mr. J. T. Reece
NRC Senior Resident Inspector
North Anna Power Station

Mr. J. E. Reasor, Jr. (letter only)
Old Dominion Electric Cooperative
Innsbrook Corporate Center
4201 Dominion Boulevard
Suite 300
Glen Allen, VA 23060

Mr. M. M. Grace
Authorized Nuclear Inspector
North Anna Power Station

Attachment

**Owner's Activity Reports (Form OAR-1)
Refueling Outage - N1R18, and
End of Second Period - N1R18a**

**Virginia Electric and Power Company
North Anna Power Station Unit 1**

**NORTH ANNA POWER STATION, N1R18 OUTAGE
FORM OAR-1 OWNER'S ACTIVITY REPORT**

Report Number: N1R18 (Unit 1, 3rd Interval, 2nd Period)

Owner Virginia Electric and Power Company, 5000 Dominion Boulevard, Glen Allen, VA 23060
(Name and Address of Owner)

Plant: North Anna Power Station, P.O. Box 402, Mineral VA 23117
(Name and Address of Plant)

Unit No. 1 Commercial service date 6/6/78 Refueling outage no. N1R18(10/07/04-4/10/06)
(If applicable)

Current inspection interval 3rd (5/1/99 - 4/30/09)
(1st, 2nd, 3rd, 4th, other)

Current inspection period 2nd (5/1/02 - 4/30/06)
(1st, 2nd, 3rd)

Edition and Addenda of Section XI applicable to the inspection plan 1989 Edition No Addenda

Date and revision of inspection plan ISI Plan Rev 5 dated March 2006 including the ISI Schedule Revision 11, dated May 2006 and the SPT Implementation Schedule Revision 3, dated May 2006

Edition and Addenda of Section XI applicable to repairs and replacements, if different than the inspection plan Same

CERTIFICATE OF CONFORMANCE

I certify that the statements made in this Owner's Activity Report are correct, and that the examinations, tests, repairs, replacements, evaluations, and corrective measures represented by this report conform to the requirements of Section XI.

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

Signed *James J. Johnson* SUPERVISOR TEST & INSPECTION ENGINEER Date 6/19/06
(Owner's 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 Virginia and employed by HSB CT of Hartford, CT have inspected the items described in this Owner's Activity Report, during the period 10/07/04 to 4/10/06 and state that to the best of my knowledge and belief, the Owner has performed all activities represented by this report in accordance with the requirements of Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations, tests, repairs, replacements, evaluations and corrective measures described in this report. Furthermore, neither the inspector nor his employer shall be liable, in any manner for any personal injury or property damage or loss of any kind arising from or connected with this inspection.

Mark M. Grace Commissions VA 424-R
Inspector's Signature National Board, State, Province, and Endorsements

Date 6/19/06

North Anna Power Station
N1R18 OUTAGE
Form OAR-1 Owner's Activity Report
Table 1
Abstract Of Examinations And Tests

Examination Category	Total Examinations Required For The Interval	Total Examinations Credited For This Period	Total Examinations Credited (%) For The Period	Total Examinations Credited (%) To Date For The Interval	Remarks
B-A	8.67	.00	.00	32.69	
B-B	7.00	1.67	100.00	47.62	
B-D	28.00	7.00	100.00	60.71	Note 1
B-E	11.00	3.00	100.00	45.45	
B-G-1	650.00	196.00	100.00	64.77	
B-G-2	49.00	16.00	100.00	73.47	
B-K	18.00	5.33	100.00	59.26	
B-L-1	1.00	.00	.00	.00	Note 2
B-M-2	4.00	.00	.00	100.00	Note 3
B-N-1	3.00	1.00	100.00	66.67	
B-N-2	1.00	.00	.00	.00	
B-N-3	1.00	.00	.00	.00	
B-O	3.00	.00	.00	.00	Note 4
B-P	7.00	3.00	100.00	71.43	Note 5
B-Q	5.00	2.00	100.00	80.00	
C-A	9.00	3.67	100.00	48.15	Note 6
C-B	16.00	5.00	100.00	56.25	
C-C	29.00	9.00	100.00	68.97	
C-D	17.00	5.00	100.00	58.82	
C-F-1	109.00	38.00	100.00	74.31	Note 7

<i>Examination Category</i>	<i>Total Examinations Required For The Interval</i>	<i>Total Examinations Credited For This Period</i>	<i>Total Examinations Credited (%) For The Period</i>	<i>Total Examinations Credited (%) To Date For The Interval</i>	<i>Remarks</i>
C-F-2	30.00	9.00	100.00	63.33	
C-G	1.00	1.00	100.00	100.00	
C-H	3.00	.00	.00	33.33	Note 8
D-A	37.00	11.00	91.67	56.76	Note 8
F-A	366.00	129.00	100.00	59.29	
R-A	59.00	20.00	100.00	66.10	Note 9

North Anna Power Station
N1R18 OUTAGE
Form OAR-1 Owner's Activity Report
Table 1 Notes
Abstract Of Examinations And Tests

- Note 1** Examinations are limited to components selected.
- Note 2** Internal examinations is required only when a pump is disassembled for maintenance, repair, or examination. B-L-1 has one scheduled examination of the external surface of the weld of one pump casing in accordance with Code Case N-481.
- Note 3** Examination is required only when a valve is disassembled for maintenance, repair, or examination.
- Note 4** Category B-O is scheduled to be examined as part of the reactor vessel examination in the third period.
- Note 5** The Class 1 leakage test is required to be performed every refueling outage. The number and percentages listed represent the total number of refueling outages anticipated over the inspection interval. All required Class 1 system pressure tests have been completed.
- Note 6** Relief will be requested for the regenerator heat exchanger welds.
- Note 7** See partial Examination attachment.
- Note 8** The number and percentages listed represent the total number of periods over the inspection interval. All required system pressure tests for Class 2 and 3 were not completed prior to the end of N1R18 outage.
- Note 9** Risk informed program currently addresses categories B-F and B-J. See Partial Examination attachment.

Partial Examinations N1R18

<i>CATEGORY</i>	<i>ITEM</i>	<i>DRAWING</i>	<i>LINE</i>	<i>NUMBER</i>	<i>EXAM REMARKS</i>
C-F-1					
	<i>C5.11</i>				
	11715-WMKS-0111XK		6"-SI-169-1502-Q2	SW-39	65% UT coverage due to nozzle configuration. A request for relief will be submitted to the NRC.
	<i>C5.21</i>				
	11715-WMKS-0111XA		3"-CH-11-1502-Q2	SW-1W	50% UT coverage due to tee to pipe configuration. A request for relief will be submitted to the NRC.
R-A					
	<i>R1.11</i>				
	11715-WMKS-0109E-1		27 1/2"-RC-3-2501R-Q1	10	39% UT coverage due to pipe to valve joint configuration. A request for relief will be submitted to the NRC.
	11715-WMKS-0109E-2		27 1/2"-RC-3-2501R-Q1	SW-41	35% UT coverage due to nozzle configuration. A request for relief will be submitted to the NRC.

**NORTH ANNA POWER STATION
N1R18 OUTAGE
FORM OAR-1 OWNER'S ACTIVITY REPORT
TABLE 2
ITEMS WITH FLAWS OR RELEVANT CONDITIONS THAT REQUIRE
EVALUATION FOR CONTINUED SERVICE**

Exam Category	Item Number	Item Description	Flaw Characterization (IWA-3300)	Flaw or Relevant Condition Found During Scheduled Section XI Exam or Test (Yes or No)
No flaws or relevant conditions that require evaluation for continued service were identified for this period during this time frame				

**NORTH ANNA POWER STATION
N1R18 OUTAGE
FORM OAR-1 OWNER'S ACTIVITY REPORT**

**TABLE 3
ABSTRACT OF REPAIRS, REPLACEMENTS, OR CORRECTIVE MEASURES
REQUIRED FOR CONTINUED SERVICE**

Code Class	Repair, Replacement, or Corrective Measure	Item Description	Description of Work	Flaw or Relevant Condition Found During Scheduled Section XI Examination or Test (Yes or No)	Date Completed	Repair/ Replacement Plan Number
NF	Replacement	Support	Replaced Rod Eyes	No	6/22/05	2005-039
NF	Replacement	Support	Replaced Restraint	No	8/16/05	2005-042
NF	Replacement	Support	Replaced Restraint	No	8/16/05	2005-043
3	Repair	Pump	Repaired Through-Wall Leak in Pump Casing	No	11/23/05	2005-064
3	Repair	Pipe	Repaired Through-Wall Defect in Service Water Pipe	No	1/3/06	2005-067
2	Replacement	Pipe	Replaced Pipe and Elbow due to Through-Wall Leak in SI Pipe	No	2/27/06	2005-134
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/10/06	2006-022 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/15/06	2006-023 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/5/06	2006-024 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/19/06	2006-025 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/9/06	2006-026 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/24/06	2006-027 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/11/06	2006-028 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/11/06	2006-029 R1
MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/9/06	2006-030 R1

MC	Repair	Penetration Cooler	Repaired coolers due to MIC Leaks per DCP 05-144	No	5/9/06	2006-031 R1
MC	Repair	Penetration Cooler	Repaired 1.25" x 1" Wide Indication at top of Penetration Cooler Sleeve	No	5/5/06	2006-032
NF	Replacement	Support	Replaced Bent Upper Rod, Eye Nut and Locking Nuts	No	4/6/06	2006-034
NF	Replacement	Support	Replaced monoball support with new support design due to crack in support.	No	4/1/06	2006-043
NF	Repair	Safety Injection Pipe	Repaired 1" linear indication in weld at Boron Injection Tank discharge nozzle.	Yes	4/25/06	2006-044

**NORTH ANNA POWER STATION, N1R18a OUTAGE
FORM OAR-1 OWNER'S ACTIVITY REPORT**

Report Number: N1R18a (Unit 1, 3rd Interval, 2nd Period)

Owner Virginia Electric and Power Company, 5000 Dominion Boulevard, Glen Allen, VA 23060
(Name and Address of Owner)

Plant: North Anna Power Station, P.O. Box 402, Mineral VA 23117
(Name and Address of Plant)

Unit No. 1 Commercial service date 6/6/78 Refueling outage no. (4/10/06-4/30/06)
(If applicable)

Current inspection interval 3rd (5/1/99 - 4/30/09)
(1st, 2nd, 3rd, 4th, other)

Current inspection period 2nd (5/1/02 - 4/30/06)
(1st, 2nd, 3rd)

Edition and Addenda of Section XI applicable to the inspection plan 1989 Edition No Addenda

Date and revision of inspection plan ISI Plan Rev 5 dated March 2006 including the ISI Schedule Revision 11, dated May 2006 and the SPT Implementation Schedule Revision 3, dated May 2006

Edition and Addenda of Section XI applicable to repairs and replacements, if different than the inspection plan Same

CERTIFICATE OF CONFORMANCE

I certify that the statements made in this Owner's Activity Report are correct, and that the examinations, tests, repairs, replacements, evaluations, and corrective measures represented by this report conform to the requirements of Section XI.

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

Signed *James Zaboront*, SUPERVISOR TEST & INSPECTION Date 6/19/06
(Owner's or Owner's Designee, Title) ENGINEERING

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 Virginia and employed by HSB CT of Hartford, CT have inspected the items described in this Owner's Activity Report, during the period 4/10/06 to 4/30/06 and state that to the best of my knowledge and belief, the Owner has performed all activities represented by this report in accordance with the requirements of Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations, tests, repairs, replacements, evaluations and corrective measures described in this report. Furthermore, neither the inspector nor his employer shall be liable, in any manner for any personal injury or property damage or loss of any kind arising from or connected with this inspection.

Mark M. Hare Commissions VA 424-R
Inspector's Signature National Board, State, Province, and Endorsements

Date 6/19/06

North Anna Power Station
N1R18a OUTAGE
Form OAR-1 Owner's Activity Report
Table 1
Abstract Of Examinations And Tests

<i>Examination Category</i>	<i>Total Examinations Required For The Interval</i>	<i>Total Examinations Credited For This Period</i>	<i>Total Examinations Credited (%) For The Period</i>	<i>Total Examinations Credited (%) To Date For The Interval</i>	<i>Remarks</i>
B-A	8.67	.00	.00	32.69	
B-B	7.00	1.67	100.00	47.62	
B-D	28.00	7.00	100.00	60.71	Note 1
B-E	11.00	3.00	100.00	45.45	
B-G-1	650.00	196.00	100.00	64.77	
B-G-2	49.00	16.00	100.00	73.47	
B-K	18.00	5.33	100.00	59.26	
B-L-1	1.00	.00	.00	.00	Note 2
B-M-2	4.00	.00	.00	100.00	Note 3
B-N-1	3.00	1.00	100.00	66.67	
B-N-2	1.00	.00	.00	.00	
B-N-3	1.00	.00	.00	.00	
B-O	3.00	.00	.00	.00	Note 4
B-P	7.00	3.00	100.00	71.43	Note 5
B-Q	5.00	2.00	100.00	80.00	
C-A	9.00	3.67	100.00	48.15	Note 6
C-B	16.00	5.00	100.00	56.25	
C-C	29.00	9.00	100.00	68.97	
C-D	17.00	5.00	100.00	58.82	
C-F-1	109.00	38.00	100.00	74.31	

<i>Examination Category</i>	<i>Total Examinations Required For The Interval</i>	<i>Total Examinations Credited For This Period</i>	<i>Total Examinations Credited (%) For The Period</i>	<i>Total Examinations Credited (%) To Date For The Interval</i>	<i>Remarks</i>
C-F-2	30.00	9.00	100.00	63.33	
C-G	1.00	1.00	100.00	100.00	
C-H	3.00	1.00	100.00	66.67	Note 7
D-A	37.00	12.00	100.00	59.46	Note 7
F-A	366.00	129.00	100.00	59.29	
R-A	59.00	20.00	100.00	66.10	Note 8

North Anna Power Station
N1R18a OUTAGE
Form OAR-1 Owner's Activity Report
Table 1 Notes
Abstract Of Examinations And Tests

- Note 1** Examinations are limited to components selected.
- Note 2** Internal examinations is required only when a pump is disassembled for maintenance, repair, or examination. B-L-1 has one scheduled examination of the external surface of the weld of one pump casing in accordance with Code Case N-481.
- Note 3** Examination is required only when a valve is disassembled for maintenance, repair, or examination.
- Note 4** Category B-O is scheduled to be examined as part of the reactor vessel examination in the third period.
- Note 5** The Class 1 leakage test is required to be performed every refueling outage. The number and percentages listed represent the total number of refueling outages anticipated over the inspection interval. All required Class 1 system pressure tests have been completed.
- Note 6** Relief will be requested for the regenerator heat exchanger welds.
- Note 7** The number and percentages listed represent the total number of periods over the inspection interval. All required system pressure tests for Class 2 and 3 were completed.
- Note 8** Risk informed program currently addresses categories B-F and B-J.

**NORTH ANNA POWER STATION
N1R18a OUTAGE
FORM OAR-1 OWNER'S ACTIVITY REPORT
TABLE 2
ITEMS WITH FLAWS OR RELEVANT CONDITIONS THAT REQUIRE
EVALUATION FOR CONTINUED SERVICE**

Exam Category	Item Number	Item Description	Flaw Characterization (IWA-3300)	Flaw or Relevant Condition Found During Scheduled Section XI Exam or Test (Yes or No)
No flaws or relevant conditions that require evaluation for continued service were identified for this period during this time frame				

TABLE 3
ABSTRACT OF REPAIRS, REPLACEMENTS, OR CORRECTIVE MEASURES
REQUIRED FOR CONTINUED SERVICE

Code Class	Repair, Replacement, or Corrective Measure	Item Description	Description of Work	Flaw or Relent Condition Found During Scheduled Section XI Examination or Test (Yes or No)	Date Completed	Repair/ Replacement Plan Number
No repairs or replacements were credited to the second period during this time frame						