



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION IV  
611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TEXAS 76011-4005**

October 16, 2006

Mr. John S. Keenan  
Senior Vice President – Generation and Chief Nuclear Officer  
Pacific Gas and Electric Company  
P.O. Box 770000, Mail Code B32  
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SUBJECT: NRC INSPECTION REPORT 050-00133/06-003

Dear Mr. Keenan:

An NRC inspection was conducted on September 25-29, 2006, at your Humboldt Bay Power Plant Unit 3 facility. This inspection was an examination of activities conducted under your license as they relate to safety and compliance of the Commission's rules and regulations and with the conditions of your license. Within these areas, the inspection included reviews of your organization and management; safety reviews, design changes and modifications; spent fuel pool safety; decommissioning performance and status; and solid radioactive waste management and transportation of radioactive materials. On September 29, 2006, at the conclusion of the site visit, an exit briefing was conducted with Mr. Terry Nelson, Plant Manager, and other members of your staff. The enclosed report presents the scope and results of that inspection. The inspection determined that you were conducting decommissioning activities in compliance with regulatory and license requirements.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter, its enclosure, and your response (if any) will be made available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/Adams.html>. To the extent possible, your response should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction.

Should you have any questions concerning this inspection, please contact the undersigned at (817) 860-8191 or Emilio M. Garcia at (530) 756-3910.

Sincerely,

***/RA J. Vincent Everett for/***

D. Blair Spitzberg, Ph.D., Chief  
Fuel Cycle and Decommissioning Branch

Docket No.: 050-00133  
License No.: DPR-7

Enclosure:  
NRC Inspection Report 050-00133/06-003

cc w/enclosure:

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SUNSI Review Complete: EMG

ADAMS: X Yes      Initials: emg  
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10/06/2006	10/08/2006	10/16/2006

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**ENCLOSURE**

U.S. NUCLEAR REGULATORY COMMISSION  
REGION IV

Docket No.: 050-00133

License No.: DPR-7

Report No.: 050-00133/06-003

Licensee: Pacific Gas and Electric Company (PG&E)

Facility: Humboldt Bay Power Plant (HBPP), Unit 3

Location: 1000 King Salmon Avenue  
Eureka, California 95503

Dates: September 25-29, 2006

Inspectors: Emilio M. Garcia, Health Physicist  
Robert J. Evans, P.E., C.H.P., Senior Health Physicist

Approved By: D. Blair Spitzberg, Ph.D., Chief  
Fuel Cycle and Decommissioning Branch

Attachments: Supplemental Inspection Information

ADAMS Entry: IR 05000133-06-03, on 09/25-29/06; Pacific Gas & Electric Co.;  
Humboldt Bay, Unit 3. No violations.

## **EXECUTIVE SUMMARY**

Humboldt Bay Power Plant, Unit 3  
NRC Inspection Report 050-00133/06-003

The Humboldt Bay Power Plant (HBPP), Unit 3 was shutdown in 1976. The facility has been in a SAFSTOR status since shutdown with minimal decommissioning activity.

### **Organization, Management and Cost Controls**

- The licensee had sufficient staff to conduct the work in progress, including an ample number of certified fuel handlers. The onsite and offsite review committees were functioning in accordance with quality assurance program requirements. The licensee had established a nuclear safety concerns program in accordance with site procedures to give employees an alternate opportunity to report safety concerns. The licensee conducted an emergency response drill that met the intent of the Emergency Plan (Section 1).

### **Safety Reviews, Design Changes, and Modification**

- The licensee's safety review program was conducted in compliance with 10 CFR 50.59 requirements. Plus, the licensee had established and implemented a non-conformance program that was in compliance with Quality Assurance Plan requirements (Section 2).

### **Spent Fuel Pool Safety**

- The licensee was maintaining the spent fuel pool water level and water chemistry in accordance with Technical Specifications requirements and Defueled Safety Analysis Report commitments (Sections 3).

### **Decommissioning Performance and Status Review**

- Radiological conditions of the facility were properly posted. Housekeeping and facility conditions were effectively controlled (Sections 4).

### **Solid Radwaste Management & Transportation of Radioactive Materials**

- The licensee had implemented and maintained a transportation program for radioactive materials and radioactive waste in accordance with NRC and U.S. Department of Transportation regulations (Section 5).

## **Report Details**

### **Summary of Plant Status**

Humboldt Bay Power Plant, Unit 3, is currently in decommissioning SAFSTOR status. Unit 3 received an operating license from the Atomic Energy Commission on August 28, 1962. On July 2, 1976, Unit 3 was shutdown for annual refueling and seismic modifications. This work was suspended in December 1980 and in June 1983, then PG&E announced its intention to decommission the unit. Unit 3 has been essentially in SAFSTOR since July 1985. On July 19, 1988, NRC approved the licensee's SAFSTOR plan and amended the license to a possess-but-not-operate status. The license will expire on November 9, 2015. The facility has undergone minimal decommissioning activity since shutdown.

### **1.0 Organization, Management, and Cost Controls (36801)**

#### **1.1 Inspection Scope**

The inspectors reviewed site staffing, onsite and offsite safety review committees, nuclear safety concerns program, and an Emergency Plan drill for compliance with regulatory requirements, site procedures, and licensee commitments.

#### **1.2 Observations and Findings**

##### **a. Site Organization**

Technical Specifications 5.2.1 provides the requirements for the onsite and offsite organizations necessary for the safe storage of irradiated fuel. The onsite nuclear organization chart was provided in site procedure HBAP A-1, HBPP Organization and Staff Qualifications," Appendix 6.4, Revision 25. The inspectors compared the actual structure in place at the time of the inspection to the procedure requirements. All staff positions had been filled, except one. The licensee recently created the position of decommissioning project manager, and the licensee plans to fill this position in the near future. Also, the licensee plans to establish the position of Unit 3 manager to reduce the workload of the current Unit 3 supervisor who was responsible for both operations and maintenance work. In summary, the inspectors concluded that the licensee had sufficient staff for the work in progress.

Section 5.2.2 of Technical Specifications states that at least one certified fuel handler shall be onsite when fuel is in the spent fuel pool (SFP). The inspectors interviewed the Unit 3 supervisor who stated that the licensee had 19 certified fuel handlers, including 14 in operations, four in management, and one certified training coordinator. In summary, the licensee had sufficient staff to ensure compliance with Technical Specifications requirements for availability of certified fuel handlers.

##### **b. Onsite and Offsite Review Committees**

The Quality Assurance Plan, Revision 19, provides the requirements for the Plant Safety Review Committee (PSRC) and the Nuclear Safety Oversight Committee (NSOC). The

inspectors reviewed the implementation of the committees to ensure compliance with quality assurance program requirements. Further, the inspectors attended several PSRC meetings that were held during the onsite inspection.

The PSRC was the onsite group that reviewed proposed changes, tests and experiments, plant modifications, procedure revisions, and other issues having nuclear safety significance. During 2006, the PSRC met about 60 times including routine and special meetings. The PSRC meeting minutes were reviewed. Minutes documented that the quorum requirements had been met and provided a list of all subjects reviewed. The committee reviewed and approved, as appropriate, proposed procedure changes, temporary procedures, plant modifications, negative trends, and non-conformances. Reasons were documented when proposed changes or procedures were rejected by the committee.

The NSOC provided high level review and oversight of site activities including the PSRC. The NSOC was required to meet at least twice per year. The only site person that was a member of this committee was the plant manager. The committee met once in April 2006 and was scheduled to meet again in November 2006. The minutes for the April 2006 meeting were reviewed. A quorum was present, and the committee reviewed relevant issues.

c. Nuclear Safety Concerns Program

The licensee had established a nuclear safety concerns program to provide employees with an alternate opportunity to have concerns impartially and independently examined. The inspectors interviewed a program representative which included an overview of the program. The Unit 3 Employee Concerns Program was shared with the Diablo Canyon power plant.

Program requirements were described in implementing procedure OM3-ID3, "Employee Concerns Program," Revision 10. Employees could submit concerns via U.S. Postal Service mail, electronic mail, or telephone hot line. The licensee provided a local contact at the site for consultation. Reminders about the Employee Concerns Program were included in annual general employee training, new employee training, site posters, and brochures that were available onsite.

d. Emergency Plan Drill

Section 8.1.3 of the Emergency Plan specifies that periodic drills are to be conducted on various aspects of the plan to assure that personnel retain familiarity with the plan and to improve response actions when applicable. The Emergency Plan required one announced and one unannounced drill per year.

During the inspection, the licensee conducted its annual announced drill. The drill consisted of a combination accountability drill and medical emergency response. The licensee simulated the injury of a contaminated person to test the response capabilities of both onsite and offsite personnel. The drill included a test of the emergency siren and personnel accountability. After the completion of the drill, the licensee conducted

debrief sessions to assess the strengths and weaknesses of the drill. The licensee concluded that the drill met Emergency Plan requirements as the annual announced emergency drill. The licensee plans to conduct the unannounced drill prior to the end of the calendar year.

The inspectors reviewed the Emergency Plan, observed portions of the drill while in progress, and attended the licensee's drill assessment meetings. The inspectors agreed that the drill met the requirements specified in the Emergency Plan for an announced drill.

### 1.3 Conclusions

The licensee had sufficient staff to conduct the work in progress, including an ample number of certified fuel handlers. The onsite and offsite review committees were functioning in accordance with quality assurance program requirements. The licensee had established a nuclear safety concerns program in accordance with site procedures to give employees an alternate opportunity to report safety concerns. The licensee conducted an emergency response drill that met the intent of the Emergency Plan.

## 2.0 **Safety Reviews, Design Changes, and Modifications (37801)**

### 2.1 Inspection Scope

The inspectors conducted reviews of the licensee's design change and nonconformance programs to ensure compliance with the requirements of 10 CFR 50.59 and Quality Assurance Plan requirements.

### 2.2 Observations and Findings

#### a. Design Change Process

The inspectors reviewed selected design change packages to ascertain whether the changes included a safety review or safety screening and adequate explanation of the change being proposed. The inspectors reviewed four design change notices related to the permanent plant SFP demineralizer and the new in-pool demineralizer. Each package included a safety screen that included consideration of the requirements of 10 CFR 50.59. Other attributes considered included impacts on decommissioning and whether changes were required to be implemented in licensing basis documents, site procedures, and site drawings. All safety screens were complete. None of the changes involved a full safety evaluation. Further, the design change notices provided sufficient detail to explain what was being changed.

The inspectors attended several PSRC meetings during the inspection. The PSRC reviewed several proposed procedure and design changes. One design change request being considered involved the removal of the new fuel inspection stand from the Refueling Building floor. The removal of this item was necessary to clear the area for future decommissioning activities. The proposed equipment removal authorization

included a safety review. The removal activity was subsequently approved by the PSRC.

b. Nonconformance Reports

Section 3.1.4 of the Quality Assurance Plan states that measures shall be established for documenting, reviewing, and dispositioning of quality problems and non-conformances. The four non-conformance reports (NCRs) for 2006 were reviewed during the inspection.

The first NCR involved the licensee's failure to immediately recognize an increase in the SFP loss rate because of limitations with the instrumentation used to monitor pool level. The cause of the increased leak rate was subsequently determined to be a mis-positioned valve. The second NCR involved the discovery of a significant increase in the liquid radwaste holding tank radioactivity level. The cause of the increased radioactivity was identified as in-leakage of contamination into the tank from spilled resin that has since been cleaned up. The third NCR involved late reporting and inventory of special nuclear material during 2003-2006. Finally, the fourth NCR involved the identification of four surveillances that were conducted after the end of the respective due dates.

The inspectors reviewed each of these licensee-identified incidents in detail and concluded that none resulted in actual safety consequences or releases of radioactive material above regulatory limits. Immediate and longer term corrective actions were proposed in each situation to prevent recurrences. In summary, the licensee was identifying and correcting conditions adverse to quality.

2.3 Conclusions

The licensee's safety review program was conducted in compliance with 10 CFR 50.59 requirements. Plus, the licensee had established and implemented a non-conformance program that was in compliance with Quality Assurance Plan requirements.

**3.0 Spent Fuel Pool Safety (60801)**

3.1 Inspection Scope

The inspectors reviewed the licensee's control of the SFP to ensure compliance with Technical Specifications requirements and Defueled Safety Analysis Report (DSAR) commitments.

3.2 Observations and Findings

The inspectors conducted a tour of the SFP area and reviewed plant records to ensure the safe storage of the fuel and other irradiated items in the pool. Technical Specifications 3.1.1 states that the SFP water level shall be at an elevation of greater than 10.5 feet. At the time of the inspection, the water level was 11.02 feet. The

inspectors also confirmed that the low water level alarm was set at 10.67 feet as required by the DSAR.

Technical Specifications 3.1.3 states that the SFP liner water level shall be at an elevation less than +9 inches (0.75 feet). The liner water level was -0.2 feet during the inspection. The inspectors also confirmed that the licensee was monitoring both SFP level and liner water level at the frequencies established in Technical Specifications surveillance requirements.

Section 2.3.1.1 of the DSAR states that two sources of makeup water will be maintained for the SFP. The inspectors interviewed operations staff personnel and determined that the two water sources were the demineralized water storage tank and fire water. The DSAR specifies that a minimum of 2,000 gallons shall be maintained in the demineralized water storage tank. At the time of the inspection, the tank contained over 4,000 gallons. The fire water system was available for emergency supply of water.

Table 5.2 of the DSAR provides the limits for SFP water chemistry and radioactivity levels. Details of this requirement were documented in site procedure STP 3.6.5, "Monthly Spent Fuel Pool Water Quality Check," Revision 44. The pool water was routinely sampled for three chemical constituents; pH, conductivity and cesium-137 activity. The inspectors reviewed the plant records for March 2006 through September 2006. The licensee was collecting pool samples on a monthly frequency as required by the DSAR and was analyzing the samples for the required chemical constituents. Since March 2006, all parameters remained within DSAR limits.

In recent months, the licensee experienced problems with the in-plant SFP demineralizer. The licensee experienced a failure of an outlet line which prevented routine sluicing (removal of resin from) the permanent plant demineralizer. The licensee converted an underwater vacuum device into an underwater demineralizer to supplement the permanent plant SFP demineralizer. During the inspection, the licensee continued to make repairs and modifications to return the permanent plant demineralizer back to service.

Recently, the licensee commenced with a plan to remove irradiated and unirradiated hardware from the SFP. The licensee wanted to remove all unnecessary components from the pool to provide room for future fuel handling operations and to ship the material offsite prior to closure of an out-of-state disposal site. The licensee recently conducted radiological surveys of the energy absorber in preparation for removal from the pool. The licensee identified elevated exposure rate readings during its survey. As part of the investigation process, the licensee used an underwater video camera to view the area. The licensee observed several items that included identifiable and unidentifiable metal objects. The licensee elected to move the items to a temporary storage container in the SFP to continue with the timely removal of the energy absorber from the pool. The licensee will investigate these suspect components at a later date to ascertain the identities of the items.

### 3.3 Conclusions

The licensee was maintaining the SFP water level and water chemistry in accordance with Technical Specifications requirements and Defueled Safety Analysis Report commitments.

#### **4.0 Decommissioning Performance and Status Review (IP 71801)**

##### **4.1 Inspection Scope**

Inspectors conducted tours of the site to evaluate whether the facility conditions were being effectively controlled during SAFSTOR.

##### **4.2 Observations and Findings**

The inspectors toured the fuel handling building, the Unit 3 control room, and other areas of the facility. Radiological postings were easily visible and met the requirements of 10 CFR Part 20. Housekeeping and facility conditions were effectively controlled. Most of the areas in the facility were free of radiological contamination and were accessible without the need of protective clothing. No safety concerns were observed during the tours. The control room indicators associated with monitoring spent fuel pool level and spent fuel pool liner level were confirmed to be functional.

The licensee had installed a new decontamination facility inside the fuel handling building. The fabrication of this facility was described in Design Change Notice (DCN) number HB3-EM-600. This facility was intended to accommodate the decontamination of equipment and components during the removal of waste materials from the spent fuel pool in preparation for the packaging of fuel for removal to the independent spent fuel storage installation that is to be built. The facility consists of a structure that can be enclosed. It includes a ventilation system, and access to the plant demineralized water, electrical and service air systems. The facility had been completed and was operational during this inspection.

The inspectors observed the preparation and movement of a resin vessel from the decontamination facility to the "new fuel" storage vault. The movement was conducted safely and without incident. Appropriate radiation protection practices were used by the workers involved. Members of the licensee's management observed the movement.

The inspectors conducted confirmatory radiation surveys using Ludlum Model 2401-EC survey instrument, NRC property number 21176G, due for calibration on August 4, 2007. The inspectors' survey results were comparable to those performed by the licensee.

##### **4.3 Conclusions**

Radiological conditions of the facility were properly posted. Housekeeping and facility conditions were effectively controlled.

## 5.0 Solid Radioactive Waste Management and Transportation (86750)

### 5.1 Inspection Scope

The inspectors reviewed the licensee's solid radwaste management and transportation of radioactive materials program to ensure compliance with NRC and U.S. Department of Transportation (DOT) regulations.

### 5.2 Observations and Findings

#### a. Audits and Assessments

The inspectors interviewed cognizant personnel and reviewed selected documents to determine if any audits or assessments had been conducted of the solid radwaste management and transportation of radioactive materials program. The licensee had not conducted any audits of this area since this area was last inspected in September 2005. The next biannual audit of this area was scheduled to begin on October 9, 2006, and the audit had been announced by the Quality Verification group to the site management.

The inspectors reviewed the report titled "Readiness Review for Shipment of Radioactive Waste to Barnwell Disposal Facility" dated September 22, 2006. This assessment was performed by a consultant with expertise in radioactive materials transportation and radioactive waste disposal requirements. This assessment identified changes that were needed to be made to six licensee procedures for the classification and transportation for disposal of Class B and Class C waste. The licensee initiated SAP Notifications (problem reports) to address the assessment recommendations.

#### b. Changes

There had been no significant changes in the licensee's organization, personnel, facilities, equipment, or procedures affecting the solid radwaste management and transportation of radioactive materials program since this area was last inspected September 12-14, 2005. A Radiation Control Standard and two Radiation Control Procedures related to the solid radwaste management and transportation of radioactive materials program had received their biannual PSRC review, but no standard nor procedure had been revised.

#### c. Shipments

Records indicated that 18 shipments of radioactive material had been completed between January 1, 2006 and September 29, 2006. Three records were selected and reviewed by the inspectors. These were for radioactive materials shipments (RMS) 06-008, RMS 06-013, and RMS 06-017. RMS 06-008 was a metal analyzer shipped as special form solid; RMS 06-013 and RMS 6-017 were shipped as an excepted packages limited quantity of material. The records documented compliance with the applicable requirements of Title 49 of the Code of Federal Regulation. The emergency response telephone number listed on the shipping paper was confirmed as a telephone number staffed 24 hours a day. Documents that required shipper certification

were signed by a licensee representative. Training records of the individuals who signed or otherwise performed functions related to the transport of hazardous material were reviewed. The individuals involved with these shipments had received appropriate training as required by 49 CFR 172, Subpart H.

The Senior Radiation Protection Engineer stated that the licensee had not received any notices of non-compliance from DOT or other competent state authorities. The licensee maintained printed copies NRC and DOT regulations and had copies of the licenses of the designated recipients.

### 5.3 Conclusions

The licensee had implemented and maintained a transportation program for radioactive materials and radioactive waste in accordance with NRC and DOT regulations.

### 6.0 **Exit Meeting**

On September 29, 2006, at the conclusion of the site visit, the inspectors presented to the plant manager and other licensee staff members, the preliminary results on areas inspected. The licensee did not identify as proprietary any information provided to, or reviewed by, the inspectors.

**ATTACHMENT**

**SUPPLEMENTAL INSPECTION INFORMATION**

**PARTIAL LIST OF PERSONS CONTACTED**

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J. Crow, Training Coordinator  
J. Davis, Radiation Protection Engineer  
Z. Easley, Security Supervisor  
J. Galle, Senior Design Engineer  
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V. Jensen, Quality Control Supervisor  
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M. Smith, Engineering Manager  
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R. Sorensen, Programs Coordinator  
R. Willis, Plant Manager - Fossil

**INSPECTION PROCEDURES USED**

IP 36801	Organization, Management and Cost Controls
IP 37801	Safety Reviews, Design Changes, and Modifications
IP 60801	Spent Fuel Pool Safety
IP 71801	Decommissioning Performance and Status Review
IP 86750	Solid Radwaste Management & Transportation of Radioactive Materials

**ITEMS OPENED, CLOSED, AND DISCUSSED**

Opened

None

Closed

None

Discussed

None

**LIST OF ACRONYMS**

DCN	Design Change Notice
DOT	U.S. Department of Transportation
DSAR	Defueled Safety Analysis Report
HBAP	Humboldt Bay Administrative Procedure
HBPP	Humboldt Bay Power Plant
IP	Inspection Procedure
NCR	Non-Conformance Report
NSOC	Nuclear Safety Oversight Committee
PG&E	Pacific Gas and Electric Company
PSRC	Plant Safety Review Committee
RMS	Radioactive Materials Shipment
SFP	Spent Fuel Pool