



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

November 20, 2006

James J. Sheppard, President and
Chief Executive Officer
STP Nuclear Operating Company
P.O. Box 289
Wadsworth, TX 77483

SUBJECT: SOUTH TEXAS PROJECT ELECTRIC GENERATING STATION - NRC
INTEGRATION INSPECTION REPORT 05000498/2006004 AND
05000499/2006004

Dear Mr. Sheppard:

On October 7, 2006, the U.S. Nuclear Regulatory Commission (NRC) completed an inspection at your South Texas Project Electric Generating Station, Units 1 and 2, facility. The enclosed integrated report documents the inspection findings, which were discussed on October 12, 2006, with Mr. Halpin and other members of your staff.

The inspection examined activities conducted under your licenses as they relate to safety and compliance with the Commission's rules and regulations and with the conditions of your licenses. The inspectors reviewed selected procedures and records, observed activities, and interviewed personnel.

Based on the results of this inspection, this report documents two findings of very low safety significance (Green), one inspector identified and one self-revealing. Both of these findings were determined to involve violations of NRC requirements; however, because the findings were entered into your corrective action program, the NRC is treating these violations as noncited violations consistent with Section VI.A of the Enforcement Policy. If you contest these noncited violations, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington DC 20555-0001; with copies to the Regional Administrator, U.S. Nuclear Regulatory Commission Region IV, 611 Ryan Plaza Drive, Suite 400, Arlington, Texas 76011-4005; the Director, Office of Enforcement, U.S. Nuclear Regulatory Commission, Washington DC 20555-0001; and the NRC Resident Inspector at South Texas Project Electric Generating Station, Units 1 and 2, facility.

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 Publicly Available Records (PARS) component of NRC's document system (ADAMS). ADAMS is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

/RA/

Claude E. Johnson, Chief
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Dockets: 50-498
50-499
Licenses: NPF-76
NPF-80

Enclosure:
NRC Inspection Report 05000498/2006004 and 05000499/2006004
w/Attachment: Supplemental Information

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U.S. NUCLEAR REGULATORY COMMISSION

REGION IV

Dockets: 05000498, 05000499
Licenses: NPF-76, NPF-80
Report: 05000498/2006004 and 05000499/2006004
Licensee: STP Nuclear Operating Company
Facility: South Texas Project Electric Generating Station, Units 1 and 2
Location: FM 521 - 8 miles west of Wadsworth
Wadsworth, Texas 77483
Dates: July 8 through October 7, 2006
Inspectors: J. Dixon, Senior Resident Inspector
T. Farnholtz, Senior Project Engineer
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E. Owen, Reactor Inspector
J. Taylor, Resident Inspector
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Approved By: Claude E. Johnson, Chief, Project Branch A
Division of Reactor Projects

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SUMMARY OF FINDINGS

IR 05000498/2006004, 05000499/2006004; 07/08/06 - 10/07/06; South Texas Project Electric Generating Station, Units 1 and 2; Integrated Resident and Regional Report; Surveillance Testing, Problem Identification and Resolution.

This report covered a 3-month period of inspection by resident and regional inspectors. The inspection identified two Green findings, both of which were noncited violations. The significance of most findings is indicated by their color (Green, White, Yellow, or Red) using Inspection Manual Chapter 0609, "Significance Determination Process." Findings for which the significance determination process does not apply may be Green or be assigned a severity level after NRC management's review. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process," Revision 3, dated July 2000.

A. NRC-Identified and Self-Revealing Findings

Cornerstone: Occupational Radiation Safety

- Green. A self-revealing noncited violation was identified for the failure to comply with a radiation work permit requirement. On July 13, 2006, a maintenance technician alarmed the personnel contamination monitors upon exiting the radiologically controlled area, due to contamination on his hands, shoes, and clothing. Operations requested maintenance technician assistance in determining and correcting unexpected flow indications on a Low Head Safety Injection Pump 1B. The technician successfully returned the low scale flow indicator to service; however, the high scale flow indicator was still indicating an unexpected reading. The technician then decided to vent the high side flow indicator to bring the reading within range, but failed to do so in accordance with the radiation work permit. The failure to follow the radiation work permit resulted in an area and personnel contamination.

This finding was considered more than minor as it was associated with the occupational radiation safety attribute of program and process and it affected the cornerstone objective to ensure adequate protection of the worker's health and safety from exposure to radiation. The failure to comply with the radiation work permit requirements resulted in the low-level contamination of one worker and an area approximately 100 square feet. This finding was determined to be of very low safety significance because it did not involve: (1) as low as reasonably achievable planning and controls, (2) an overexposure, (3) a substantial potential for overexposure, or (4) an impaired ability to assess dose. In addition, this finding had a crosscutting aspect with respect to human performance in that the worker did not maintain procedural compliance due to an inadequate prejob brief and self and peer checking techniques (Section 1R22).

Cornerstone: Barrier Integrity

- Green. The inspectors identified three examples and the licensee identified one example of a noncited violation of Technical Specification 6.8.1.a for the failure to provide an adequate procedure to ensure that doors, which provide access through the control room envelope/heating, ventilation, and air conditioning system were properly closed and latched, and controlled and maintained. The licensee rolled up all the recent door failures into two condition reports, one to address the mechanical aspects and another to address the human performance aspects.

The inspectors determined that having an inadequate procedure for the control of doors that encompass the control room envelope system to be a performance deficiency. This finding is greater than minor because it affected the barrier integrity attribute of procedure quality under maintaining radiological barrier functionality of the control room and it affected the cornerstone objective to provide reasonable assurance that physical design barriers protect the public from radionuclide releases caused by accidents or events by maintaining the operational capability of the control room envelope heating, ventilation, and air conditioning boundary. Using the Phase 1 worksheets in Inspection Manual Chapter 0609, "Significance Determination Process," the issue was determined to have very low safety significance because the finding only represented a degradation of the radiological barrier function for the control room. In addition, this finding had a crosscutting aspect with respect to problem identification and resolution in that the licensee did not fully evaluate and assess information from the corrective action program in the aggregate to identify programmatic and common cause problems as a result of having an inadequate procedure for the operation and maintenance of the control room envelope doors (Section 4OA2).

B. Licensee-Identified Violations

None.

REPORT DETAILS

Summary of Plant Status

Unit 1 began the inspection period at 100 percent rated thermal power and remained there until September 5, 2006, when the unit commenced coastdown operations for the upcoming outage. On October 1, 2006, Unit 1 was shut down for Refueling Outage 1RE13.

Unit 2 began the inspection period at 100 percent rated thermal power and essentially remained there throughout the inspection period.

1. REACTOR SAFETY

Cornerstones: Initiating Events, Mitigating Systems, Barrier Integrity

1R01 Adverse Weather Protection (71111.01)

Readiness for Seasonal Susceptibilities

a. Inspection Scope

The inspectors completed a review of the licensee's readiness of seasonal susceptibilities involving high temperatures. The inspectors: (1) reviewed plant procedures, the Updated Final Safety Analysis Report (UFSAR), and Technical Specifications (TSs) to ensure that operator actions defined in adverse weather procedures maintained the readiness of essential systems; (2) walked down portions of the one system listed below to ensure that adverse weather protection features (heat tracing, space heaters, weatherized enclosures, temporary chillers, etc.) were sufficient to support operability including the ability to perform safe shutdown functions; (3) evaluated operator staffing levels to ensure the licensee could maintain the readiness of essential systems required by plant procedures; and (4) reviewed the corrective action program (CAP) to determine if the licensee identified and corrected problems related to adverse weather conditions.

- August 15, 2006, Units 1 and 2, auxiliary engineered safety features Transformers 1, 2, and 3 oil coolers and fans

Documents reviewed by the inspectors included:

- Procedure OPGP03-ZV-0001, "Severe Weather Plan," Revision 13
- Procedure OPOP02-AF-0001, "Auxiliary Feedwater," Revision 22
- TS 3.6.1.5, "Containment Average Air Temperature"
- Technical Requirements Manual 3.7.13, "Area Temperature Monitoring"

The inspectors completed one sample.

b. Findings

No findings of significance were identified.

1R02 Evaluation of Changes, Tests, or Experiments (71111.02)

a. Inspection Scope

The inspectors reviewed the effectiveness of the licensee's implementation of changes to the facility structures, systems, and components (SSC); risk-significant normal and emergency operating procedures; test programs; and the UFSAR in accordance with 10 CFR 50.59, "Changes, Tests, and Experiments." The inspectors utilized Inspection Procedure 71111.02, "Evaluation of Changes, Tests, or Experiments," for this inspection.

The procedure specifies 6 as the minimum sample size of safety evaluations for a 2-unit site and a combination of 12 applicability determinations and screenings with the emphasis on screenings.

The inspectors reviewed 7 safety evaluations performed by the licensee since the last NRC inspection of this area at South Texas Project. The evaluations were reviewed to verify that licensee personnel had appropriately considered the conditions under which the licensee may make changes to the facility or procedures or conduct tests or experiments without prior NRC approval. The inspectors reviewed 26 licensee-performed screenings in which licensee personnel determined that evaluations were not required to ensure that the exclusion of a full evaluation was consistent with the requirements of 10 CFR 50.59. Procedures, evaluations, and screenings reviewed are listed in the attachment to this report.

The inspectors examined the training and qualification records of the preparers and reviewers of the sampled screenings and evaluations to verify that the individuals were appropriately qualified. The inspectors also reviewed and evaluated a sample of recent licensee condition reports (CRs) to determine whether the licensee had identified problems related to 10 CFR 50.59 evaluations, entered them into the CAP, and resolved technical concerns and regulatory requirements.

The inspection procedure specifies inspector review of a required minimum sample of six licensee safety evaluations and 12 applicability determinations and screenings (combined). The inspectors completed review of seven licensee safety evaluations and 26 screenings.

b. Findings

No findings of significance were identified.

1R04 Equipment Alignment (71111.04)

Partial Walkdown

a. Inspection Scope

The inspectors: (1) walked down portions of the two below listed risk important systems and reviewed plant procedures and documents to verify that critical portions of the selected systems were correctly aligned, and (2) compared deficiencies identified during the walk down to the licensee's UFSAR and CAP to ensure problems were being identified and corrected.

- July 21, 2006, Unit 2, the inspectors verified the alignment of the component cooling water (CCW) system, Train B, after system maintenance on the CCW supply header to the CCW supply containment isolation valve
- September 6, 2006, Unit 2, the inspectors verified the alignment of the CCW system, Train B, per Procedure 0POP02-CC-0001, "Component Cooling Water", Revision 29, while Train A was out of service for routine maintenance

Documents reviewed by the inspectors are listed in the attachment.

The inspectors completed two samples.

b. Findings

No findings of significance were identified.

Complete Walkdown

a. Inspection Scope

The inspectors: (1) reviewed plant procedures, drawings, the UFSAR, TSs, and vendor manuals to determine the correct alignment of the one system below; (2) reviewed outstanding design issues, operator work arounds, and UFSAR documents to determine if open issues affected the functionality of the system; and (3) verified that the licensee was identifying and resolving equipment alignment problems.

- September 28 through October 3, 2006, Unit 1, the inspectors verified the alignment of the spent fuel pool cooling system, Trains A and B, per Procedure 0POP02-FC-0001, "Spent Fuel Pool Cooling and Cleanup System," Revision 47, during reactor shutdown and after cooldown of the unit for Refueling Outage 1RE13

The inspectors completed one sample.

b. Findings

No findings of significance were identified.

1R05 Fire Protection (71111.05)

Quarterly Inspection

a. Inspection Scope

The inspectors walked down the six below listed plant areas to assess the material condition of active and passive fire protection features and their operational lineup and readiness. The inspectors: (1) verified that transient combustibles and hot work activities were controlled in accordance with plant procedures; (2) observed the condition of fire detection devices to verify they remained functional; (3) observed fire suppression systems to verify they remained functional and that access to manual actuators was unobstructed; (4) verified that fire extinguishers and hose stations were provided at their designated locations and that they were in a satisfactory condition; (5) verified that passive fire protection features (electrical raceway barriers, fire doors, fire dampers steel fire proofing, penetration seals, and oil collection systems) were in a satisfactory material condition; (6) verified that adequate compensatory measures were established for degraded or inoperable fire protection features and that the compensatory measures were commensurate with the significance of the deficiency; and (7) reviewed the UFSAR to determine if the licensee identified and corrected fire protection problems.

- July 27, 2006, Unit 1, fuel handling building, safety injection/containment spray Train C pump cubicle (Fire Zone Z305)
- August 1, 2006, Unit 1, isolation valve cubicles (Fire Zones Z400-409)
- August 14, 2006, Unit 1, electrical auxiliary building 10-foot elevation engineered safety features switchgear room Train A, power cable vault Train A, battery room, corridor, and equipment removal area (Fire Zones Z004, Z010, Z013, Z016, and Z019)
- August 16, 2006, Unit 2, electrical auxiliary building 10-foot elevation engineered safety features switchgear room Train A, power cable vault Train A, battery room, corridor, and equipment removal area (Fire Zones Z004, Z010, Z013, Z016, and Z019)
- August 25, 2006, Unit 2, isolation valve cubicles (Fire Zones Z400-409)
- September 6, 2006, Unit 2, CCW Pump B room and heat exchanger room (Fire Zones Z140-142)

The inspectors completed six samples.

b. Findings

No findings of significance were identified.

1R06 Flood Protection Measures (71111.06)

Semi-Annual Internal Flooding

a. Inspection Scope

The inspectors: (1) reviewed the UFSAR, the flooding analysis, and plant procedures to assess seasonal susceptibilities involving internal flooding; (2) reviewed the UFSAR and CAP to determine if the licensee identified and corrected flooding problems; (3) inspected underground bunkers/manholes to verify the adequacy of (a) sump pumps, (b) level alarm circuits, © cable splices subject to submergence, and (d) drainage for bunkers/manholes; (4) verified that operator actions for coping with flooding can reasonably achieve the desired outcomes; and (5) walked down the below listed areas to verify the adequacy of: (a) equipment seals located below the floodline, (b) floor and wall penetration seals, © watertight door seals, (d) common drain lines and sumps, (e) sump pumps, level alarms and control circuits, and (f) temporary or removable flood barriers.

- July 26, 2006, Unit 1, the inspectors conducted a walkdown of the emergency core cooling pump bays

Documents reviewed by the inspectors included:

- CR 00-15324
- Calculation MC-5365

The inspectors completed one sample.

b. Findings

No findings of significance were identified.

1R11 Licensed Operator Requalification Program (71111.11)

a. Inspection Scope

The inspectors observed testing and training of senior reactor operators and reactor operators on August 17, 2006, to identify deficiencies and discrepancies in the training, to assess operator performance, and to assess the evaluator's critique. The training scenario involved a failure of source range nuclear instrument Channel 31, a fire in centrifugal charging Pump 1A breaker cubicle, and a loss of coolant accident while in Mode 4.

Documents reviewed by the inspectors are listed in the attachment.

The inspectors completed one sample.

b. Findings

No findings of significance were identified.

1R12 Maintenance Effectiveness (71111.12)

a. Inspection Scope

The inspectors reviewed the two below listed maintenance activities to: (1) verify the appropriate handling of SSC performance or condition problems; (2) verify the appropriate handling of degraded SSC functional performance; (3) evaluate the role of work practices and common cause problems; and (4) evaluate the handling of SSC issues reviewed under the requirements of the Maintenance Rule, 10 CFR Part 50, Appendix B, and TSs.

- July 27, 2006, Units 1 and 2, electrical auxiliary building heating, ventilation, and air conditioning (HVAC) system overall health and problems with control room envelope (CRE) HVAC boundary doors
- October 6, 2006, Units 1 and 2, main steam system overall health and problems with main steam safety valves

Documents reviewed by the inspectors included:

- Maintenance Rule System Health Report for Electrical Auxiliary Building (XE)
- Performance Criteria, Goals, and Monitoring List for Electrical Auxiliary Building (XE) from May 6, 2005, through July 26, 2006
- Maintenance Rule System Health Report for Main Steam (MS)
- Performance Criteria, Goals, and Monitoring List for Main Steam (MS) from July 2005 through June 2006

The inspectors completed two samples.

b. Findings

No findings of significance were identified.

1R13 Maintenance Risk Assessments and Emergent Work Control (71111.13)

Risk Assessment and Management of Risk

a. Inspection Scope

The inspectors reviewed the three below listed assessment activities to verify: (1) performance of risk assessments when required by 10 CFR 50.65 (a)(4) and licensee procedures prior to changes in plant configuration for maintenance activities and plant operations; (2) the accuracy, adequacy, and completeness of the information considered in the risk assessment; (3) that the licensee recognizes, and/or enters as applicable, the appropriate licensee-established risk category according to the risk assessment results and licensee procedures; and (4) that the licensee identified and corrected problems related to maintenance risk assessments.

- July 14, 2006, Unit 1, evaluation of risk for the week during planned equipment outages on Train B
- August 25, 2006, Unit 2, evaluation of risk for the week during planned equipment outages on Train C
- September 8, 2006, Units 1 and 2, evaluation of risk for the week during planned equipment outages in conjunction with upgrades to the Switchyard 345 kV south bus

The inspectors completed three samples.

b. Findings

No findings of significance were identified.

Emergent Work Control

a. Inspection Scope

The inspectors: (1) verified that the licensee performed actions to minimize the probability of initiating events and maintained the functional capability of mitigating systems and barrier integrity systems; (2) verified that emergent work-related activities such as troubleshooting, work planning/scheduling, establishing plant conditions, aligning equipment, tagging, temporary modifications, and equipment restoration did not place the plant in an unacceptable configuration; and (3) reviewed the UFSAR to determine if the licensee identified and corrected risk assessment and emergency work control problems.

- August 31, 2006, Unit 1, evaluation of risk for the week during planned equipment outages on Train A along with emergent work on Standby Diesel Generator (SDG) 11, CRE HVAC Train C, and essential chiller Train B

- September 16, 2006, Units 1 and 2, evaluation of risk for the week during planned equipment outages, upgrades to Switchyard 345 kV north bus, emergent work on Unit 1 qualified data processing system Channel D computer board replacement, and Unit 2 SDG 22 control room handswitch replacement
- September 22, 2006, Units 1 and 2, evaluation of risk for the week during planned equipment outages with emergent work to verify, and change if necessary, the breaker trip setting on replaced 480 V Class 1E molded case circuit breakers

The inspectors completed three samples.

b. Findings

No findings of significance were identified.

1R15 Operability Evaluations (71111.15)

a. Inspection Scope

The inspectors: (1) reviewed plant status documents such as operator shift logs, emergent work documentation, deferred modifications, and standing orders to determine if an operability evaluation was warranted for degraded components; (2) referred to the UFSAR and design basis documents to review the technical adequacy of licensee operability evaluations; (3) evaluated compensatory measures associated with operability evaluations; (4) determined degraded component impact on any TSs; (5) used the significance determination process to evaluate the risk significance of degraded or inoperable equipment; and (6) verified that the licensee has identified and implemented appropriate corrective actions associated with degraded components.

- January 4, 2006, Units 1 and 2, evaluation of several Agastat relay out of tolerance conditions (CRs 06-188 and 95-14359)
- July 6, 2006, Unit 2, evaluation of auxiliary feedwater turbine failing to immediately trip from a manual local trip (CR 06-8564)
- July 21, 2006, Units 1 and 2, essential cooling water (ECW) minimum wall thickness concerns from erosion, corrosion, and dealloying (CRs 06-8963 and -8594)
- August 9, 2006, Unit 2, Permissive Lampbox 5M024-A1 is slowly flashing at approximately 1 time per every 5-7 seconds for a full cycle (CR 06-9714)
- August 12, 2006, Unit 1, during the preparation for the installation of the Unit 1, ECW Train B motor-control center feeder cables, no insulator blocks were found under the 5kV cables which feed the ECW Train B pump motor (CR 06-9916)

- September 11, 2006, Unit 2, during the SDG 22 surveillance test the output breaker failed to close until the third attempt (CR 06-9129)

The inspectors completed six samples.

b. Findings

No findings of significance were identified.

1R17B Permanent Plant Modifications (71111.17B)

a. Inspection Scope

The inspection procedure requires inspection of a minimum sample size of five permanent plant modifications.

The inspectors reviewed five permanent plant modification packages and associated documentation, such as implementation reviews, safety evaluation applicability determinations, and screenings to verify that they were performed in accordance with regulatory requirements and plant procedures. The inspectors also reviewed the procedures governing plant modifications to evaluate the effectiveness of the program for implementing modifications to risk-significant SSCs, such that these changes did not adversely affect the design and licensing basis of the facility. Procedures and permanent plant modifications reviewed are listed in the attachment to this report. Further, the inspectors interviewed cognizant design and system engineers for the identified modifications as to their understanding of the modification packages and process.

The inspectors evaluated the effectiveness of the licensee's corrective action process to identify and correct problems concerning the performance of permanent plant modifications by reviewing a sample of related CRs. The reviewed CRs are identified in the attachment.

The inspection procedure specifies inspector-review of a required minimum sample of five permanent plant modifications. The inspectors completed review of five permanent plant modifications.

b. Findings

No findings of significance were identified.

1R19 Postmaintenance Testing (71111.19)

a. Inspection Scope

The inspectors selected the five below listed postmaintenance test activities of risk significant systems or components. For each item, the inspectors: (1) reviewed the applicable licensing basis and/or design-basis documents to determine the safety functions; (2) evaluated the safety functions that may have been affected by the

maintenance activity; and (3) reviewed the test procedure to ensure it adequately tested the safety function that may have been affected. The inspectors either witnessed or reviewed test data to verify that acceptance criteria were met, plant impacts were evaluated, test equipment was calibrated, procedures were followed, jumpers were properly controlled, the test data results were complete and accurate, the test equipment was removed, the system was properly realigned, and deficiencies during testing were documented. The inspectors also reviewed the UFSAR to determine if the licensee identified and corrected problems related to postmaintenance testing.

- July 25, 2006, Unit 2, the inspectors reviewed the installation and removal of a freeze-seal on the 1-inch, ASME Class 2 pressurizer liquid sample piping associated with the removal and replacement of the inside reactor containment (IRC) containment isolation valve.
- July 27, 2006, Unit 1, auxiliary feedwater turbine trip/throttle valve electrical contact inspection
- August 11, 2006, Unit 1, Corrective Maintenance Work Order 469905 and Procedure 0PSP03-SP-0005R, "SSPS Logic Train R Functional Test," Revision 22
- September 25, 2006, Unit 1, SDG 11 Corrective Maintenance Work Orders 460198 (Kiene test valves), 472706 (emergency idle start failure to reach rated operating voltage), 455991 (air intake butterfly valve latch lever spring failure), and CRs 06-10974 (junction box cover fastener missing), 06-10977 (two broken tubing clamps), 06-10959 (missing damper shaft bearing stud), and Procedure 0PSP03-DG-0001, "Standby Diesel 11(12) Operability Test," Revision 29
- September 27, 2006, Unit 1, residual heat removal CR 06-11142 and Procedure 0PSP03-RH-0001, "Residual Heat Removal Pump 1A(2A) Inservice Test," Revision 7

Documents reviewed by the inspectors are listed in the attachment.

The inspectors completed five samples.

b. Findings

No findings of significance were identified.

1R20 Refueling and Outage Activities (71111.20)

a. Inspection Scope

The inspectors reviewed the following risk significant refueling items or outage activities on Unit 1 during 1RE13, which commenced October 1, 2006, to verify defense in depth commensurate with the outage risk control plan, compliance with the TSs, and adherence to commitments in response to Generic Letter 88-17, "Loss of Decay Heat

Removal”: (1) the risk control plan, (2) tagging/clearance activities, (3) reactor coolant system (RCS) instrumentation, (4) electrical power, (5) decay heat removal, (6) spent fuel pool cooling, (7) inventory control, (8) reactivity control, (9) containment closure, (10) cooldown activities, and (11) licensee identification and implementation of appropriate corrective actions associated with refueling and outage activities. The inspectors’ containment inspections included observation of the containment sump for damage and debris, supports, braces, and snubbers for evidence of excessive stress, water hammer, or aging.

The inspectors completed one sample.

b. Findings

No findings of significance were identified.

1R22 Surveillance Testing (71111.22)

a. Inspection Scope

The inspectors reviewed the UFSAR, procedure requirements, and TSs to ensure that the two below listed surveillance activities demonstrated that the SSC’s tested were capable of performing their intended safety functions. The inspectors either witnessed or reviewed test data to verify that the following significant surveillance test attributes were adequate: (1) preconditioning; (2) evaluation of testing impact on the plant; (3) acceptance criteria; (4) test equipment; (5) procedures; (6) jumper/lifted lead controls; (7) test data; (8) testing frequency and method demonstrated TS operability; (9) test equipment removal; (10) restoration of plant systems; (11) fulfillment of ASME Code requirements; (12) updating of performance indicator (PI) data; (13) engineering evaluations, root causes, and bases for returning tested SSCs not meeting the test acceptance criteria were correct; (14) reference setting data; and (15) annunciators and alarms setpoints. The inspectors also verified that the licensee identified and implemented any needed corrective actions associated with the surveillance testing.

- July 13, 2006, Unit 1, Procedure 0PSP03-SP-0010B, “Train B ESF Load Sequencer Manual Local Test,” Revision 17
- July 13, 2006, Unit 1, Procedure 0PSP03-SI-0002, “Low Head Safety Injection Pump 1B(2B) Inservice Test,” Revision 12

Documents reviewed by the inspectors included:

- CR 06-8982
- Station Video on Radiological Control Area Work Expectations
- Radiation Work Permit 2006-0-0001, Revision 1
- Radiation Work Permit 2006-0-0003, Revision 1

- Drawing 5N129F05016#1, "Piping and Instrumentation Diagram Safety Injection System," Revision 14

The inspectors completed two samples.

b. Findings

Introduction. A Green self-revealing noncited violation (NCV) was identified for failing to comply with a radiation work permit requirement. Radiation protection personnel were not consulted or informed of breaching a potentially contaminated system.

Description. On July 13, 2006, a maintenance technician alarmed the personnel contamination monitors upon exiting the radiologically controlled area. The technician received contamination to his hands, shoes, and clothing. In addition, approximately 100 square feet of area was also contaminated. This event occurred during the surveillance on the Low Head Safety Injection Pump 1B inservice test. Unexpected indications were seen on Flow Indicators N1SIFI0920A and N1SIFI0920B. Operations requested maintenance technician assistance in determining and correcting the indication issue. The technicians were briefed on the condition in the control room by operations. Upon arriving at the gauges, the technician noted that the root valves for the flow indicators were Kerotest valves and were known for sticking. The technician successfully returned the low scale flow indicator to service by mechanically agitating the root valve. However, the high scale flow indicator still indicated an unexpected reading. The technician then decided to vent the high side flow indicator to bring the reading within range. Radiation Work Permit 2006-0-0001, Revision 1, specified: (1) radiation protection is to be contacted before the system is breached, (2) appropriate dress requirements, and (3) provision to contain any residual liquids. The technician vented the high scale flow indicator without notifying radiation protection, without proper dress requirements, and without having a provision to contain the residual liquid. When the technician vented the system, it resulted in getting both his hands and shoes and parts of his clothing wet. The technician failed to notify radiation protection of the event and proceeded to try to exit the radiologically controlled area at which point he alarmed the personnel monitors and radiation protection became informed. The failure to follow the radiation work permit resulted in an area and personnel contamination.

Analysis. The failure to follow a radiation work permit requirement is a performance deficiency. This finding was considered more than minor as it was associated with the occupational radiation safety attribute of program and process and it affected the cornerstone objective to ensure adequate protection of the worker's health and safety from exposure to radiation. The failure to comply with the radiation work permit requirements resulted in the low-level contamination of one worker and an area approximately 100 square feet.

This finding was evaluated with the occupational radiation safety significance determination process and was determined to be of very low safety significance because it did not involve: (1) as low as reasonably achievable planning and controls, (2) an overexposure, (3) a substantial potential for overexposure, or (4) an impaired ability to assess dose. In addition, this finding had a crosscutting aspect with respect to

human performance in that the worker did not maintain procedural compliance due to an inadequate prejob brief, and self and peer checking techniques.

Enforcement. TS 6.8.1.a states, in part, that written procedures shall be established, implemented, and maintained covering the applicable procedures recommended in Regulatory Guide 1.33, Revision 2, February 1978, Appendix A. Regulatory Guide 1.33, Appendix A, Section 7.e.(1), recommends procedures for a radiation work permit system. Procedure OPGP03-ZR-0051, "Radiological Access and Work Controls," Revision 2, Section 6.1, states, in part, that personnel shall be assigned and logged on an active radiation work permit for entry into the radiologically controlled area. Further, Procedure OPGP03-ZR-0051, Section 4.4, states, in part, that persons entering the radiologically controlled area shall review and comply with the information provided in the appropriate radiation work permit.

Radiation Work Permit 2006-0-0001, Revision 1, instructed workers to contact radiation protection personnel for initial breach of contaminated systems. Additional requirements included dress requirements of a lab coat and gloves, as well as, provisions to contain any residual liquids expected from opening the system.

Contrary to these requirements, radiation protection personnel were not contacted before the worker breached the contaminated system, nor was the worker appropriately dressed out, nor was the worker prepared to contain any of the contaminated liquids. Consequently, one worker received low levels of contamination on his clothes. This finding was placed into the licensee's CAP as CR 06-8982. Because this violation was of very low safety significance and was entered into the licensee's CAP, it is being treated as a NCV, consistent with Section VI.A of the NRC Enforcement Policy: NCV 05000498/2006004-01, "Failure to Comply with a Radiation Work Permit Requirement."

1R23 Temporary Plant Modifications (71111.23)

a. Inspection Scope

The inspectors reviewed the UFSAR, plant drawings, procedure requirements, and TSs to ensure that the one below listed temporary modification was properly implemented. The inspectors: (1) verified that the modification did not have an affect on system operability/availability, (2) verified that the installation was consistent with the modification documents, (3) ensured that the postinstallation test results were satisfactory and that the impact of the temporary modification on permanently installed SSC's were supported by the test, (4) verified that the modification was identified on control room drawings and that appropriate identification tags were placed on the affected drawings, and (5) verified that appropriate safety evaluations were completed. The inspectors verified that licensee identified and implemented any needed corrective actions associated with temporary modifications.

- July 20, 2006, Unit 1, the inspectors reviewed temporary modifications of failed Core Exit Thermocouples TE-06 and TE-39

Documents reviewed by the inspectors are listed in the attachment.

The inspectors completed one sample.

b. Findings

No findings of significance were identified.

4. OTHER ACTIVITIES

4OA1 Performance Indicator Verification (71151)

a. Inspection Scope

Cornerstone: Mitigating Systems

The inspectors sampled licensee submittals for the PI listed below for the period from July 2004 to June 2006 for Units 1 and 2. The definitions and guidance of Nuclear Energy Institute 99-02, "Regulatory Assessment Performance Indicator Guideline," Revision 2, were used to verify the licensee's basis for reporting each data element in order to verify the accuracy of PI data reported during the assessment period. The inspectors reviewed licensee event reports (LERs), out-of-service logs, operating logs, and the maintenance rule database as part of the assessment. Licensee PI data was also reviewed against the requirements of Procedures OPGP05-ZN-0007, "Preparation and Submittal of NRC Performance Indicators," Revision 1, and Procedure OPGP05-ZV-0013, "Performance Indicator Tracking Guide," Revision 1.

- Safety system functional failures

The inspectors completed one sample per unit.

Cornerstone: Barrier Integrity

The inspectors sampled licensee submittals for the two PIs listed below for the period from October 2004 to June 2006 for Units 1 and 2. The definitions and guidance of Nuclear Energy Institute 99-02, "Regulatory Assessment Performance Indicator Guideline," Revision 2, were used to verify the licensee's basis for report each data element in order to verify the accuracy of PI data reported during the assessment period. The inspectors: (1) reviewed RCS chemistry sample analyses for dose equivalent Iodine-131 and compared the results to the TS limit; (2) observed a chemistry technician obtain and analyze an RCS sample; (3) reviewed operating logs and surveillance results for measurements of RCS identified leakage; and (4) observed a surveillance test that determined RCS identified leakage. Licensee PI data was also reviewed against the requirements of Procedures OPGP05-ZN-0007, "Preparation and Submittal of NRC Performance Indicators," Revision 1, and Procedure OPGP05-ZV-0013, "Performance Indicator Tracking Guide," Revision 1.

- RCS specific activity
- RCS leakage

The inspectors completed two samples per unit.

b. Findings

No findings of significance were identified.

4OA2 Identification and Resolution of Problems (71152)

.1 Routine Review of Identification and Resolution of Problems

The inspectors performed a daily screening of items entered into the licensee's CAP. This assessment was accomplished by reviewing work orders, CRs, etc., and attending corrective action review and work control meetings. The inspectors: (1) verified that equipment, human performance, and program issues were being identified by the licensee at an appropriate threshold and that the issues were entered into the CAP; (2) verified that corrective actions were commensurate with the significance of the issue; and (3) identified conditions that might warrant additional followup through other baseline inspection procedures. The inspectors used the licensee's Procedure OPGP03-X-002, "Condition Reporting Process," Revision 30, for understanding the threshold level for generating a CR.

.2 Selected Issue Followup Inspection

a. Inspection Scope

In addition to the routine review, the inspectors selected the one below listed issue for a more in-depth review. The inspectors considered the following during the review of the licensee's actions: (1) complete and accurate identification of the problem in a timely manner; (2) evaluation and disposition of operability/reportability issues; (3) consideration of extent of condition, generic implications, common cause, and previous occurrences; (4) classification and prioritization of the resolution of the problem; (5) identification of root and contributing causes of the problem; (6) identification of corrective actions; and (7) completion of corrective actions in a timely manner.

- September 29, 2006, Units 1 and 2, CRE HVAC doors not properly secured due to material degradation and human performance issues resulting in unplanned entries into a 12-hour shutdown limiting condition of operation per TS 3.7.7.c.

Documents reviewed by the inspectors are listed in the attachment.

The inspectors completed one sample.

b. Findings

Introduction. The inspectors identified three examples and the licensee identified one example of a Green NCV of TS 6.8.1.a for the failure to provide an adequate procedure, to ensure that doors which provide access through the CRE HVAC system boundary walls were properly closed and latched, and controlled and maintained.

Description. On June 10, 2006, the licensee identified that Door 227 in Unit 1 was not able to close properly due to an equipment malfunction. This door provides isolation for the CRE HVAC system. The licensee replaced the mechanical door hardware and captured the event in CR 06-7516. Subsequently, the inspectors checked various CRE HVAC doors to ensure that the licensee was maintaining them closed and latched to ensure CRE operability.

On June 26, 2006, the inspectors found Door 365 in Unit 1 not latched. The inspectors latched the door and informed the shift supervisor. CR 06-8138 was written to document the occurrence; in addition, the licensee replaced the mechanical door hardware. On June 27, 2006, the inspectors found Door 218 in Unit 1 not latched. The inspectors latched the door and informed the shift supervisor. The licensee adjusted the closure mechanism on the door and documented the condition in CR 06-8206. On August 4, 2006, the inspectors found Door 218 in Unit 2 not latched. The licensee replaced the mechanical door hardware and documented the condition in CR 06-9845.

As a result of the number of failures on ensuring doors were closed and latched, the licensee developed a video that was used for training purposes that showcased proper door etiquette. In addition, the licensee acquired all the recent door failures into two CRs, one to address the mechanical aspects of the failures (CR 06-8138) and another to address the human performance aspects of people not ensuring that the door was properly closed and latched behind them (CR 06-9139). Additionally, the licensee upgraded the door hardware components to a more robust design, placed a conspicuous sign on high traffic doors, increased the testing of the doors, and verified that the maintenance rule system which tracks the CRE HVAC doors was in the appropriate category.

Analysis. The inspectors determined that having an inadequate procedure for the control of doors that encompass the CRE system to be a performance deficiency. This finding is greater than minor because it affected the barrier integrity attribute of procedure quality under maintaining radiological barrier functionality of the control room and affected the cornerstone objective to provide reasonable assurance that physical design barriers protect the public from radionuclide releases caused by accidents or events by maintaining the operational capability of the CRE HVAC boundary. Using the Phase 1 worksheets in Inspection Manual Chapter 0609, "Significance Determination Process," the issue was determined to have very low safety significance (Green) because the finding only represented a degradation of the radiological barrier function for the control room. In addition, this finding had a crosscutting aspect with respect to problem identification and resolution in that the licensee did not fully evaluate and assess information from the corrective action program in the aggregate to identify programmatic and common cause problems as a result of having an inadequate procedure for the operation and maintenance of the control room envelope doors.

Enforcement. TS 6.8.1.a states, in part, that written procedures shall be established, implemented, and maintained covering the applicable procedures recommended in Regulatory Guide 1.33, Revision 2, February 1978, Appendix A. Regulatory Guide 1.33, Appendix A, Section 1.c, recommends procedures for equipment control. Contrary to this requirement, Procedure OPGP03-ZA-0514, "Controlled System or Barrier Impairment," Revision 0, lacked guidance on ensuring that CRE doors were properly

secured after personnel passed through. Consequently, on multiple occasions, CRE doors were left not latched resulting in all three trains of CRE HVAC being declared inoperable. This finding was placed into the licensee's CAP as CRs 06-8138 and -9139. Because this violation was of very low safety significance and was entered into the licensee's CAP, it is being treated as an NCV, consistent with Section VI.A of the NRC Enforcement Policy: NCV 05000498/2006004-02; 05000499/2006004-02, "Inadequate Procedural Guidance for Verifying Control Room Ventilation Doors are Secured."

4OA3 Followup of Events and Notices of Enforcement Discretion (71153)

.1 (Closed) LER 05000498/2003003-01, "Bottom Mounted Instrumentation Penetrations"

The inspectors reviewed LER 05000498/2003003-01 to verify that the cause of the RCS pressure boundary leakage was identified and that corrective actions were appropriate. The leakage was identified around the circumference of bottom mounted instrumentation nozzle Penetrations 1 and 46 where they enter the reactor vessel. The leakage was identified during Refueling Outage 1RE11 as part of the regularly scheduled bare metal inspection of the reactor vessel bottom penetrations. The original LER 05000498/2003003-00 was closed in NRC Inspection Report 05000498/2003004 and 05000499/2003004. The additional information provided in the supplement does not change the original classification of the event. Per the corrective actions, the licensee repaired the penetrations via the half-nozzle method and committed to performing similar future inspections of the bottom head. These inspections have not resulted in any further discovery of bottom mounted instrumentation nozzle leakage indications on either unit. No findings of significance were identified. The licensee has documented this condition in CRs 03-6266 and -6248. This LER is closed.

.2 (Closed) LER 05000498/2006001-00, "SDG Failed Surveillance Test Demonstrating Performance at 110 Percent Load"

The inspectors reviewed LER 05000498/2006001-00 to verify that the cause of SDG 13 failing to demonstrate 110 percent load carrying ability was identified and that corrective actions were appropriate. The failure was determined to be an incorrectly set fuel oil linkage assembly. This incorrect alignment was limiting the amount of fuel oil that could reach the fuel injectors to 100 percent. Additionally, the licensee determined that: (1) the Maintenance Procedure 0PMP04-DG-0019, "Standby Diesel Generator Fuel Injection Pump and Nozzle Assembly Maintenance," did not have sufficient verification to ensure that the linkage was set correctly; and (2) the Postmaintenance Test Procedure 0PSP03-DG-0003, "Standby Diesel Generator 13(23) Operability Test," only verified that the diesel could load to 100 percent vice 110 percent; and it did not include a reference to Procedure 0PSP-DG-0018, "Standby Diesel 13(23) Twenty-Four Hour Load Test," which does require 110 percent load testing. However, the worst case amount of load that would be required on the SDG is approximately 84 percent and since the diesel did demonstrate load carrying ability to 100 percent, this large amount of margin ensured functionality of the train. Consequently, this issue is considered to be minor with no findings of significance identified. The licensee has corrected these procedural deficiencies and has documented this condition in CR 06-4207. This LER is closed.

4OA5 Other Activities

.1 Licensee Strike Contingency Plans (Inspection Procedure 92709)

a. Inspection Scope

The inspectors evaluated the adequacy of the licensee's business disruption plan (strike contingency plan). The inspectors verified that the plan could be implemented at any time after the original contract expiration, July 31, 2006, and the adoption of the new negotiated labor agreement, August 14, 2006.

b. Findings

No findings of significance were identified.

.2 (Closed) Unresolved Item (URI) 05000498/2006002-01, "DGs Potentially Inoperable for Greater than the TS Allowed Outage Time (AOT)"

This URI was opened before the licensee determined that this event was reportable. The licensee subsequently issued LER 05000498/2006001-00, "Standby Diesel Generator Failed Surveillance Test Demonstrating Performance at 110% Load." See Section 4OA3.2 for closure of the LER. The inspectors reviewed the information provided by the LER and the corresponding CR to determine if any finding or violation occurred. The inspectors determined that since the SDG 13 was able to demonstrate load carrying ability to 100 percent and the worst case loading requirements on the diesel is approximately 84 percent, that the available margin remaining ensures the function of the diesel always remained available. As a result the minor questions in Appendix B, "Issue Screening," of Inspection Manual Chapter 0612, "Power Reactor Inspection Reports," resulted in the performance deficiency being a minor violation of TSs since none of the questions could be answered "yes." This URI is closed.

4OA6 Meetings, Including Exit

On September 21, 2006, the inspectors presented the safety evaluation and permanent plant modifications inspection results to Mr. Edward D. Halpin, Site Vice President and Plant General Manager, and other members of the staff who acknowledged the findings. No proprietary information was included in this report.

The inspectors presented the inspection results of the integrated resident report inspection to Mr. Edward D. Halpin, Site Vice President and Plant General Manager, and other members of the licensee's management staff at the conclusion of the inspection on October 12, 2006. The licensee acknowledged the findings presented. The inspectors noted that while proprietary information was reviewed, none would be included in this report.

ATTACHMENT: SUPPLEMENTAL INFORMATION

SUPPLEMENTAL INFORMATION

KEY POINTS OF CONTACT

Licensee Personnel

R. Aguilera, Radiological Manager, Radiological Engineering
M. Berg, Manager, Testing and Programs Engineering
T. Bowman, General Manager Oversight
W. Bullard, Manager, Health Physics
K. Coates, Manager, Maintenance
D. Cobb, STP Employee Concerns Program (EAP) Manager
J. Cook, Process Improvement Leadership Team
T. Frawley, Manager, Performance Improvement
R. Gangluff, Manager, Chemistry, Environmental and Health Physics
S. Hafeez, Design Engineer
E. Halpin, Site Vice President/ Plant General Manager
W. Harrison, Senior Engineer, Quality and Licensing
E. Heacock, Engineer, Electrical & I&C Design
S. Head, Manager, Licensing
K. House, Manager, Design Engineering
W. Jump, Manager, Work Management
D. Leazar, Manager, Nuclear Fuels and Analysis
A. McGalliard, Supervisor, Systems Engineering
J. Mertink, Manager, Operations
W. Mookhoek, Senior Engineer, Licensing
J. Morris, Licensing Engineer
M. Murray, Manager, Systems Engineering
M. Oswald, Supervisor, Nuclear Engineering
G. Powell, Manager, Site Engineering
D. Rencurrel, Vice President, Engineering
M. Ruvalcaba, Supervisor, Systems Engineering
R. Savage, Staff Specialist, Licensing
A. Schildkraut, Supervisor, Design Engineering
P. Serra, Manager, Emergency Response
J. Sheppard, President and CEO
W. Sotos, Design Engineer
D. Stillwell, Supervisor, Configuration Control and Analysis
K. Taplett, Senior Engineer, Licensing
S. Thomas, Process Improvement Leadership Team
T. Walker, Manager, Quality
D. Zink, Engineer, Electrical & Auxiliary Systems

LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

Opened

None

Opened and Closed

05000498/2006004-01	NCV	Failure to Comply with a Radiation Work Permit Requirement (Section 1R22)
05000498/2006004-02; 05000499/2006004-02	NCV	Inadequate Procedural Guidance for Verifying Control Room Ventilation Doors are Secured (Section 4OA2)

Closed

05000498/2006002-01	URI	DGs Potential Inoperability for Greater than the TS Allowed Outage Time (AOT) (Section 4OA5)
05000498/2003-003-01	LER	Bottom Mounted Instrumentation Penetration Indications (Section 4OA3)
05000498/2006-001-00	LER	SDG Failed Surveillance Test Demonstrating Performance at 110 Percent Load (Section 4OA3)

Discussed

None

LIST OF DOCUMENTS REVIEWED

In addition to the documents referred to in the inspection report, the following documents were selected and reviewed by the inspectors to accomplish the objectives and scope of the inspection and to support any findings:

Section 1R02: Evaluations of Changes, Tests, or Experiments

10 CFR 50.59 Evaluations

DCP 00-10937-96	DCP 04-1238-88	DCP 05-15364-10
DCP 01-11345-28	DCP 04-3921-1	
DCP 03-17841-14	DCP 04-12793-3	

10 CFR 50.59 Screenings

DCP 00-17400-4	DCP 04-5751-16	DCP 05-5094-6	DCP 05-16528-2
DCP 01-6273-6	DCP 04-7293-2	DCP 05-10563-2	DCP 06-465-2
DCP 02-4578-4	DCP 04-7871-2	DCP 05-10820-4	DCP 06-465-3
DCP 03-1239-3	DCP 04-9889-2	DCP 05-11853-1	DCP 06-6365-1
DCP 03-2071-3	DCP 04-11100-2	DCP 05-12351-3	DCP 06-7566
DCP 03-9384-9	DCP 05-1739-6	DCP 05-15693-2	
DCP 03-14656-2	DCP 05-2971-4	DCP 05-16459-2	

Procedures

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
0PAP01-ZA-0103	License Compliance Review	7
0PGP05-Z10-0004	Changes to Licensing Basis Documents & Amendments to the Operating License	16
0PGP05-ZA-0002	10CFR50.59 Evaluations	14
0POP05-ES02	Natural Circulation Cooldown	11
0POP05-ES03	Natural Circulation Cooldown with Steam Void in Vessel	8
0POP05-ES05	Natural Circulation Cooldown without Letdown	16

Miscellaneous Documents

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
	USA 50.59 Resource Manual	3
EQCP-AVCO	Seismic Equipment Qualification Report	0
EQCP-44975	Seismic Equipment Qualification Report	0
EC-5008	Class 1E Battery Charger and Inverter Sizing	13
RC 05020	Auxiliary Feedwater Piping Stress Calculations	0
RC 06531	Stress Analysis of Auxiliary Feedwater Piping	0
USQE 01-1144-4	Post Maintenance Test of Preheater Bypass Valve	0
USQE 97-0030	Feedwater Temperature Reduction	0
	10CFR 50.59 Summary Report	April 2005
	10CFR 50.59 Summary Report	May 2003
CREE 03-17842-8	Engineering Evaluation	0
NC-7081	Long Term Cooling Analysis for Auxiliary Feedwater Piping	0
MC-6082	Auxiliary Feedwater Storage Tank Volume and Setpoints	0

CRs

CR 05-1283	CR 05-15364	CR 06-11920
CR 05-1283-1	CR 05-15364-11	CR 06-11941

Section 1R04: Equipment Alignment

Drawings

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
5R209F05017 #2	Component Cooling Water System	19
5R209F05018 #2	Component Cooling Water System	18
5R209F05019 #2	Component Cooling Water System	16
5R209F05020 #2	Component Cooling Water System	14

Section 1R11: Licensed Operator Requalification Program

Procedures

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
0POP03-ZG-0001	Plant Heatup	44
0POP03-ZG-0007	Plant Cooldown	47
0POP03-ZG-0008	Power Operations	43
0POP04-NI-0001	Nuclear Instrument Malfunction	13
0POP04-ZO-0008	Fire/Explosion	12
0POP04-ZO-0009	Safe Shutdown Fire Response	4
0POP04-RC-0006	Shutdown LOCA	11
0ERP01-ZV-IN01	Emergency Classification	7

Section 1R17B: Permanent Plant Modifications

Plant Modifications

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
DCP 03-4019-11	Move Hydraulic Pressure Transducers from Inside the Feedwater Isolation Valve Yoke	0
DCP 00-17400-4	Upgrade Primary Meteorological Tower Data Acquisition and Communications	0

DCP 02-4578-4	Modify the Boron Recycle Piping to Prevent Resin Intrusion into the Supply Lines	2
DCP 03-2071-3	Install Local Indication for Startup Steam Generator Feedwater Pump Start Permissive	0
DCP 03-1239-3	Replace Existing 10KVA Uninterruptible Power Supply, 8E242EI	0

Calculations

MED-REE-5547, "Evaluation of the Integrated Head Pkg. Messenger and Cable Trays,"
Revision 0

Procedures

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
OPGP05-ZE-0001	PRA Analyses/Assessments	1
OPGP04-ZF-0309	Design Change Package	16
OPGP03-ZA-0109	Configuration Management Program	10
OPOP05-EO-EC00	Loss of All AC Power	18

CRs

00-10931	05-9023	06-1404	06-3370
00-10397	05-9660	06-2075	06-4161
02-3712	05-9850	06-2133	06-9909
04-12793	05-15364	06-2134	06-11920
05-1283	05-15364-11	06-2167	06-11941
05-3617	05-15427	06-2773	
05-7030	06-844	06-2905	

Section 1R19: Postmaintenance Testing

CRs

99-11430
02-16587

Drawings

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
5R149F05003 #1	Piping and Instrumentation diagram, RCS pressurizer	18
5Z329Z0045 #1	Piping and Instrumentation diagram primary sampling system	22

Miscellaneous

<u>NUMBER</u>	<u>TITLE</u>	<u>DATE</u>
VTW-2006-076	Pre-Freeze Przr liquid sample line IRC isolation	6/27/2006
VTW-2006-077	Post-Freeze Przr liquid sample line IRC isolation	6/28/2006

Procedures

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
0PMP04-ZG-0113	Liquid Nitrogen (LN2) Freeze Seal	7
0PMP04-ZG-0107	Target rock solenoid operated globe valve maintenance models 84DD-002 and 84DD-003	3

Work Orders

462220
458030

Section 1R23: Temporary Plant Modifications

Temporary Modifications

<u>NUMBER</u>	<u>TITLE</u>	<u>REVISION</u>
T1-05-12617-2	Disable Core Exit Thermocouple (CET) TE-06	0
T1-05-5606-2	Temporary Modification for Core Exit Thermocouple TE-39	0

Work Orders

449762
459190

Section 4OA2: Identification and Resolution of Problem

CRs

06-4366	06-8138	06-9048	06-9845
06-6665	06-8206	06-9049	
06-7516	06-8504	06-9139	

Procedure

OPGP03-ZA-0514, "Controlled System or Barrier Impairment," Revision 0

Miscellaneous

Station video on door etiquette
Training bulletin on door etiquette

Work Authorization

277339, Procedure PSP11-HE-002, "Control Room Emergency Air Cleanup System Function Test," Revision 25, dated September 1, 2005 (Unit 2 Surveillance Test 88000369)

278170, Procedure OPSP11-HE-002, "Control Room Emergency Air Cleanup System Function Test," Revision 25, dated September 9, 2005 (Unit 1 Surveillance Test 86000178)

LIST OF ACRONYMS

CAP	corrective action program
CCW	component cooling water
CFR	<i>Code of Federal Regulations</i>
CR	condition report
CRE HVAC	control room envelope heating, ventilation, and air conditioning
ECW	essential cooling water
IRC	inside reactor containment
LER	licensee event report
NCV	noncited violation
PI	performance indicator
RCS	reactor coolant system
SDG	standby diesel generator
SSC	structures, systems, and components
TS	Technical Specification
UFSAR	Updated Final Safety Analysis Report