NRC FORM 591M PART 1 (1-2008 edited by RIV) 10 CFR 2.201 SAFETY INSPECTION REPORT AND COMPLIANCE INSPECTION							
1. LICENSEE/LOCATIC	1. LICENSEE/LOCATION INSPECTED:			2. NRC/REGIONAL OFFICE			
C&W Enterprises P.O. Box 84286 Sioux falls, South Dakota 57118			USNRC Region IV 612 East Lamar Blvd., Suite 400 Arlington, Texas  76011-4125				
REPORT NUMBER(S) 3. DOCKET NUMBER(S	2008-001	4. LICENSEE NUMBER(S	<u> </u>	5. DATE(S) OF INSPE			
030-30526	,	40-26938-01	·/	March 10-Decembe			
LICENSEE: The inspection was an examination of the activities conducted under your license as they relate to radiation safety and to compliance with the Nuclear Regulatory Commission (NRC) rules and regulations and the conditions of your license. The inspection consisted of selective examinations of procedures and representative records, interviews with personnel, and observations by the inspector. The inspection findings are as follows:							
1. Based on the	inspection findings, no vio	plations were identified.					
2. Previous viola	ation(s) closed.						
<ul> <li>The violations(s), specifically described to you by the inspector as non-cited violations, are not being cited because they were self-identified, non-repetitive, and corrective action was or is being taken, and the remaining criteria in the NRC Enforcement Policy to exercise discretion, were satisfied.</li> </ul>							
Non-Cited Violation(s) was/were discussed involving the following requirement(s) and Corrective Action(s):							
4. During this inspection certain of your activities, as described below and/or attached, were in violation of NRC requirements and are being cited. This form is a NOTICE OF VIOLATION, which may be subject to posting in accordance 10 CFR 19.11.							
(Violations ar	d Corrective Actions)						
	Licensee's	s Statement of Correcti	ive Actions for Item 4	, above.			
I hereby state that, within 30 days, the actions described by me to the inspector will be taken to correct the violations identified. This statement of corrective actions is made in accordance with the requirements of 10 CFR 2.201 (corrective steps already taken, corrective steps which will be taken, date when full compliance will be achieved). I understand that no further written response to NRC will be required, unless specifically requested.							
Title	Printe	ed Name	Signa	iture	Date		
LICENSEE'S REPRESENTATIVE							
NRC INSPECTOR		e Donovan	Laurence A	onoran	12/18/2008		
NRC FORM 591M PART	1 (1-2008 edited by RIV	)					

TRANSMISSION VERIFICATION REPORT

TIME : 12/23/2008 16:56 NAME : USNRC RIV FAX : 8178608263 TEL : SER.# : BROL2J847623

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Jan Pilla un

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DATE,TIME 12/23 16:55 FAX ND./NAME 716057435480 DURATION 00:00:28 PAGE(S) 02 RESULT 0K MODE STANDARD ECM	
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U.S. NUCLEAR REGULATORY COMMISSION Region IV 611 Ryan Plaza Drive, Suite 400 Arlington, Texas 76011 DIVISION OF NUCLEAR MATERIALS SAFETY DATE/TIME: 12/23/08						
Immediately						
1 Hour 2-4 Hours						
MESSAGE TO: Warren Barse, President/RSO-COWENT. MESSAGE FROM: Larry DONOVAN, NRC						
MESSAGE FROM: Larry DONOVAN, NRC						
NUMBER OF PAGES: PLUS TRANSMITTAL SHEET						
TELECOPY NUMBER: 6057435480 VERIFICATION NUMBER:						
CONTACT:						

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SPECIAL INSTRUCTIONS/ATTACHMENTS:

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U.S. NUCLEAR REGULATORY COMMISSION Region IV 611 Ryan Plaza Drive, Suite 400 Arlington, Texas 76011 DIVISION OF NUCLEAR MATERIALS SAFETY
DATE/TIME: $\frac{l2/23/08}{}$
PRIORITY:   Immediately   1 Hour   2-4 Hours
MESSAGE TO: <u>Warren Barse</u> , <u>President RSO -COWENT</u> . MESSAGE FROM: <u>Larry DONOVAN</u> , <u>NRC</u> NUMBER OF PAGES: <u>Plus TRANSMITTAL SHEET</u>
MESSAGE FROM: Larry DONOVAN, NRC
NUMBER OF PAGES: PLUS TRANSMITTAL SHEET
TELECOPY NUMBER: 6057435480 VERIFICATION NUMBER:
CONTACT:
SPECIAL INSTRUCTIONS/ATTACHMENTS:
CLEAR INSpectiON - security corrective action follow-up your signature NOT needed. PLE file with your License.

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Transmitted and Verified	by:	DISPOSITION:		
		Return to Originator:		
NAME	DATE	Place in Mail:		
		Other:		
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