

March 20, 2009

ULNRC-05606

U.S. Nuclear Regulatory Commission
Attn: Document Control Desk
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Washington, DC 20555-0001

Ladies and Gentlemen:

**DOCKET NUMBER 50-483
CALLAWAY PLANT UNIT 1
UNION ELECTRIC CO.
FACILITY OPERATING LICENSE NPF-30
OWNER'S ACTIVITY REPORT
(FORM OAR-1) FOR REFUEL 16
IWE - CONTAINMENT PRESSURE BOUNDARY INSPECTION**



Attached for submittal is the Owner's Activity Report (Form OAR-1) for Containment Pressure Boundary Inspection activities conducted at Callaway Plant during Refuel 16 pursuant to ASME Section XI, subsection IWE. The report is submitted pursuant to the provisions of ASME Boiler and Pressure Vessel Code Case N-532, "Alternative Requirements to Repair and Replacement Documentation Requirements and Inservice Summary Report Preparation and Submission as Required by IWA-4000 and IWA-6000."

In accordance with Code Case N-532, attached Form OAR-1 includes Table 1 which provides a listing of examinations and tests performed, Table 2 which provides a listing of items with flaws or relevant conditions that required evaluation for continued service, and Table 3 which provides an abstract of repairs, replacements, or corrective measures required for continued service (of which none were required).

For any questions regarding the attached information, please contact me at 573-676-8528 or Scott A. Maglio at 573-676-8719.

Sincerely,

A handwritten signature in black ink that reads "Scott Sandbothe".

Scott Sandbothe
Manager, Regulatory Affairs

DJW/nls
Attachment

AD47
LKR

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cc: Mr. Elmo E. Collins, Jr.
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U.S. Nuclear Regulatory Commission
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Callaway Resident Office
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Mr. Mohan C. Thadani (2 copies)
Licensing Project Manager, Callaway Plant
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U. S. Nuclear Regulatory Commission
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Index and send hardcopy to QA File A160.0761

Hardcopy:

Certrec Corporation
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Attachment
to ULNRC-05606

**FORM OAR-1
OWNER'S ACTIVITY REPORT
FOR REFUEL 16
IWE – CONTAINMENT PRESSURE BOUNDARY INSPECTION
CALLAWAY PLANT**

FORM OAR-1 OWNER'S ACTIVITY REPORT

Report Number RF16-IWE

Owner AmerenUE, P.O. Box 149, St. Louis, MO 63166
(Name and Address of Owner)

Plant Callaway Plant, P.O. Box 620, Fulton, MO 65251
(Name and Address of Plant)

Unit No. 1 Commercial Service Date 12/19/84 Refueling Outage No. 16
(If applicable)

Current Inspection Interval 1st
(1st, 2nd, 3rd, 4th, other)

Current Inspection Period 3rd
(1st, 2nd, 3rd)

Edition and Addenda of Section XI applicable to the inspection plan 1998 Edition (As supplemented by specific commitments)

Date and revision of inspection plan Rev. 2, November 11, 2001

Edition and Addenda of Section XI applicable to repairs and replacements, if different than the inspection plan 1998 Edition through 2000 Addenda

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.

Certification of Authorization No. N/A Expiration Date N/A

Signed Curtis Standteth, IWE Engineer Date 3/4/09
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Missouri and employed by HSB CT of Hartford, CT have inspected the items described in this Owner's Activity Report, during the period 11/19/05 to 11/08/08, 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 a loss of any kind arising from or connected with this inspection.

R. Underwood Commissions MO 0374
Inspector's Signature National Board, State, Province, and Endorsements

Date 3/4/09

Callaway Nuclear Plant
 Containment ASME Section XI, Subsection IWE Pressure Boundary Inspection
 Attachment to OAR-1, Report RF16-IWE

TABLE 1
ABSTRACT OF EXAMINATIONS AND TESTS

Examination Category	Item Number	Description of Components Examined	Total Examinations Required for The Period	Total Examinations Credited for This Period	Total Examinations Credited (%) For The Period	Notes
E-A Containment Surfaces	E1.11	Accessible Surface Areas (not including areas embedded in concrete or covered with insulation)	1	1	100%	1
E-C Containment Surfaces Requiring Augmented Examination	E4.11	Visible Surfaces	0	0	0	
	E4.12	Surface Area Grid, Minimum Wall Thickness Location	0	0	0	
E-D Seals, Gaskets, Moisture Barriers	E5.10	Seals	6	6	5%	
	E5.11	Gaskets	0	0	0%	
	E5.12	Moisture Barriers	0	0	0	
E-G Pressure Retaining Bolting	E8.10	Bolted Connections	4	4	6%	2
	E8.20	Bolted Connections	4	4	6%	2

- NOTES:
1. Third Period General Visual inspection as required by 10 CFR 50.55(a) in accordance with ASME Section XI Subsection IWE and Procedure ESP-ZZ-01016.
 2. Three (3) penetrations were unbolted in support of other work activities. These penetrations have VT-1, VT-3 and bolt torque inspections. The containment equipment hatch comprises the fourth bolted component requiring additional inspections.

Callaway Nuclear Plant
Containment ASME Section XI, Subsection IWE Pressure Boundary Inspection
Attachment to OAR-1, Report RF16-IWE

TABLE 2
ITEMS WITH FLAWS OR REVELANT CONDITIONS THAT
REQUIRED EVALUATION FOR CONTINUED SERVICE

Examination Category	Item Number	Item Description	Flaw Characterization	CARS Number
E-A	E1.11	Containment Sump B	Weld flaw located in stainless steel liner plate near bottom of the sump	CAR 200811479

Callaway Nuclear Plant
Containment ASME Section XI, Subsection IWE Pressure Boundary Inspection
Attachment to OAR-1, Report RF16-IWE

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	Date Complete	Repair/ Replacement Plan Number
NO ITEMS						