

#### UNITED STATES NUCLEAR REGULATORY COMMISSION

REGION III 2443 WARRENVILLE ROAD, SUITE 210 LISLE, IL 60532-4352

May 4, 2010

Mr. Christopher J. Schwarz Vice President, Operations Entergy Nuclear Operations, Inc. Palisades Nuclear Plant 27780 Blue Star Memorial Highway Covert, MI 49043-9530

# SUBJECT: PALISADES NUCLEAR PLANT INTEGRATED INSPECTION REPORT 05000255/2010002

Dear Mr. Schwarz:

On March 31, 2010, the U.S. Nuclear Regulatory Commission (NRC) completed an inspection at your Palisades Nuclear Plant. The enclosed inspection report documents the inspection results, which were discussed on April 5, 2010, with yourself and other members of your staff.

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

This report documents three NRC-identified findings of very low safety significance (Green). The findings were determined to involve violations of NRC requirements. Additionally, a licensee-identified violation which was determined to be of very low safety significance is listed in this report. However, because of their very low safety significance, and because the issues were entered into your corrective action program, the NRC is treating the issues as Non-Cited Violations (NCV) in accordance with Section VI.A.1 of the NRC Enforcement Policy.

If you contest any NCV in this report, 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 a copy to the Regional Administrator, U.S. Nuclear Regulatory Commission - Region III, 2443 Warrenville Road, Suite 210, Lisle, IL 60532-4352; the Director, Office of Enforcement, U.S. Nuclear Regulatory Commission, DC 20555-0001; and the Resident Inspector Office at the Palisades Nuclear Plant. In addition, if you disagree with the characterization of any finding in this report, you should provide a response within 30 days of the date of this inspection report, with the basis for your disagreement, to the Regional Administrator, Region III, and the NRC Resident Inspector at the Palisades Nuclear Plant. The information you provide will be considered in accordance with Inspection Manual Chapter 0305.

C. Schwarz

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be 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), accessible from the NRC Web site at <a href="http://www.nrc.gov/reading-rm/adams.html">http://www.nrc.gov/reading-rm/adams.html</a> (the Public Electronic Reading Room).

Sincerely,

#### /RA/

John B. Giessner, Chief Branch 4 Division of Reactor Projects

Docket No. 50-255 License No. DPR-20

- Enclosure: Inspection Report 05000255/2010002 w/Attachment: Supplemental Information
- cc w/encl: Distribution via ListServe

# U.S. NUCLEAR REGULATORY COMMISSION

## **REGION III**

Docket No: License No:	50-255 DPR-20
Report No:	05000255/2010002
Licensee:	Entergy Nuclear Operations, Inc.
Facility:	Palisades Nuclear Plant
Location:	Covert, MI
Dates:	January 1, 2010, to March 31, 2010
Inspectors:	J. Ellegood, Senior Resident Inspector T. Taylor, Resident Inspector D. Betancourt, Reactor Engineer B. Palagi, Senior Operations Engineer D. Reeser, Operations Engineer J. Cassidy, Senior Health Physicist
Approved by:	John Giessner, Chief Branch 4 Division of Reactor Projects

SUMMARY OF	FINDINGS	1
REPORT DETA	NLS	3
Summary of F	Plant Status	3
	TOR SAFETY	
1R01	Adverse Weather Protection (71111.01)	3
1R04	Equipment Alignment (71111.04)	3
1R05	Fire Protection (71111.05)	
1R11	Licensed Operator Requalification Program (71111.11)	
1R12	Maintenance Effectiveness (71111.12)	
1R13	Maintenance Risk Assessments and Emergent Work Control (71111.13)	
1R15	Operability Evaluations (71111.15)	
1R18	Plant Modifications (71111.18)	
1R19	Post-Maintenance Testing (71111.19)	
1R22	Surveillance Testing (71111.22)	
1EP6	Drill Evaluation (71114.06)	17
		47
		17
2RS8	Radioactive Solid Waste Processing and Radioactive Material Handling,	47
	Storage, and Transportation (71124.08)	17
4. OTHE	R ACTIVITIES	21
4. OTTE 40A1	Performance Indicator Verification (71151)	
40A1 40A2	Identification and Resolution of Problems (71152)	
40A2 40A5	Other Activities	
40A3 40A6	Management Meetings	
4070		20
SUPPLEMENT	AL INFORMATION	1
Key Points of	Contact	1
List of Items (	Opened, Closed, and Discussed	2
List of Docum	nents Reviewed	3
List of Acrony	rms Used	8

# TABLE OF CONTENTS

## SUMMARY OF FINDINGS

IR 05000255/2010002; 01/01/2010 – 3/31/2010; Palisades Power Plant; Fire Protection, Other Activities.

The inspection was conducted by resident and regional inspectors. The report covers a 3-month period of resident inspection. Three green findings were identified, each with an associated non-cited violation (NCV). In addition, there was one licensee-identified violation. The significance of most findings is indicated by their color (Green, White, Yellow, Red) using Inspection Manual Chapter (IMC) 0609 "Significance Determination Process" (SDP). Cross-cutting aspects were determined using IMC 0310, "Components Within the Cross-Cutting Area." Findings for which the SDP does not apply may be "Green," or be assigned a severity level after NRC management review. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process," Revision 4, dated July 2006.

## A. NRC-Identified and Self-Revealed Findings

## **Cornerstone: Mitigating Systems**

<u>Green</u>. The inspectors identified a finding of very low safety significance (Green) and an associated NCV of License Section 2.C(3), Fire Protection Program for failing to maintain in effect all provisions of the Fire Protection Program. Specifically, the fire protection plan requires 3-hour fire barriers, unless there is adequate justification that a fire barrier, which is less than 3 hours is acceptable. The licensee credited a 2-hour fire barrier in lieu of a 3-hour barrier based on less than two hours of combustible material in the cable spreading room. In 2006, the licensee determined the cable spreading room contained in excess of two hours worth of combustible material. As an immediate action, the licensee implemented compensatory actions and performed fire tours in the area.

The issue is more than minor because it affects the Protection Against External Events attribute of the Mitigating Systems Cornerstone in that it affects the cornerstone objective of ensuring the availability, reliability, and capability of systems that respond to initiating events. Specifically, the licensee had an invalid basis for the adequacy of a firewall protecting safety-related equipment. The finding screened as Green because the fire barrier retained at least a two hour rating and the seismic issues did not impact both trains. The finding does not include an associated cross-cutting aspect due to the issue dating back greater than three years and not reflective of current performance. (1R05)

 <u>Green</u>. A finding of very low safety significance (Green) and associated NCV of Palisades Technical Specification (TS) 5.4.1, Procedures, was identified by the inspectors for failing to adequately implement a procedure to construct a scaffold near the 1-2 emergency diesel generator (EDG). Specifically, a fire sprinkler was impaired without the proper fire protection evaluation; and required seismic evaluations were not performed despite being in close proximity to safety-related equipment. The issue was entered into the licensee's corrective action program and the scaffold was modified. The issue is more than minor because it affects the Protection Against External Events attribute of the Mitigating Systems Cornerstone in that it affects the cornerstone objective of ensuring the availability, reliability, and capability of systems that respond to initiating events. Specifically a fire protection feature (sprinkler) in a safety-related area was affected without compensatory measures. Additionally, the scaffold was in close proximity to safety-related equipment, and the equipment could have been impacted by a seismic event. The finding screened as Green based on remaining sprinkler capability and the fact that only one EDG could be affected by the scaffold during a seismic event. The finding had an associated cross-cutting aspect in the area of Human Performance (Planning) in that the licensee failed to appropriately plan work activities by incorporating the need for compensatory actions (H.3(a)). (1R05)

## **Cornerstone: Public Radiation Safety**

• <u>Green</u>. The inspectors identified a finding of very low-safety-significance and an associated NCV for the failure to implement TS requirement 5.5.1, Offsite Dose Calculation Manual (ODCM). Specifically, the inspectors determined that the evaluation written to support the 2004 change to eliminate drinking water well sampling from the ODCM was not correct. This evaluation failed to address community wells that provide drinking water to homes immediately adjacent to plant property to the south. These community wells are between the plant site and the Covert Township Park. These locations were drinking water wells that were historically sampled until the 2004 ODCM change. Corrective actions were being developed in the corrective action program (condition report (CR)-PLP-2010-01013) and senior plant management expressed the understanding that sampling was important and the condition would be corrected.

The finding was more than minor because it affected the Public Radiation Safety Cornerstone objective to ensure adequate protection of public health and safety from exposure to radioactive materials released into the public domain, in that these conditions could result in reduced capability to detect potential impacts associated with this pathway. The finding was assessed using IMC 0609, Attachment D for the Public Radiation Safety SDP and determined to be of very low-safety-significance because it involved the environmental monitoring program. The finding was not associated with a cross-cutting aspect because the flawed evaluation occurred in 2004 and appeared to be a legacy issue which did not represent current licensee performance. (Section 4OA5)

#### B. <u>Licensee-Identified Violations</u>

Violations of very low-safety-significance that were identified by the licensee have been reviewed by inspectors. Corrective actions planned or taken by the licensee have been entered into the licensee's corrective action program. These violations and corrective action tracking numbers are listed in Section 4OA7 of this report.

## **REPORT DETAILS**

## **Summary of Plant Status**

The plant began the inspection period at 100 percent power and remained at or near 100 percent power until March 23, 2010, when the unit decreased power to approximately 95 percent to address an issue with a feedwater heater level control valve. The plant returned to 100 percent power on March 27, 2010, and remained at or near 100 percent power for the remainder of the inspection period.

## 1. REACTOR SAFETY

## Cornerstones: Initiating Events, Mitigating Systems, and Barrier Integrity

- 1R01 Adverse Weather Protection (71111.01)
- .1 Readiness for Impending Adverse Weather Condition Heavy Snowfall Conditions
  - a. Inspection Scope

During the week of February 8, 2010, heavy snowfall was forecast with attendant blizzard warnings issued by the National Weather Service. The inspectors observed the licensee's preparations and planning for the significant winter weather potential. The inspectors reviewed licensee procedures and discussed potential compensatory measures with control room personnel. The inspectors focused on plant management's actions for implementing the station's procedures for ensuring adequate personnel for safe plant operation would be available. The inspectors conducted a site walkdown including various plant structures and systems to check for maintenance or other apparent deficiencies that could affect system operations during the predicted significant weather. The inspectors also reviewed corrective action program (CAP) items to verify that the licensee was identifying adverse weather issues at an appropriate threshold and entering them into their CAP in accordance with station corrective action procedures. Specific documents reviewed during this inspection are listed in the Attachment to this report.

This inspection constituted one readiness for impending adverse weather condition sample as defined in Inspection Procedure (IP) 71111.01-05.

b. Findings

No findings of significance were identified.

## 1R04 Equipment Alignment (71111.04)

#### .1 Quarterly Partial System Walkdowns

a. Inspection Scope

The inspectors performed partial system walkdowns of the following risk-significant systems:

- component cooling water during 'A' pump outage;
- high pressure safety injection during 'B' train outage ;
- containment spray during 'B' pump outage;
- 1-2 EDG during 1-1 EDG outage; and
- auxiliary feedwater during 'C' pump outage.

The inspectors selected these systems based on their risk significance relative to the Reactor Safety Cornerstones at the time they were inspected. The inspectors attempted to identify any discrepancies that could impact the function of the system, and, therefore, potentially increase risk. The inspectors reviewed applicable operating procedures. system diagrams, Updated Final Safety Analysis Report (UFSAR), TS requirements, outstanding work orders (WOs), condition reports (CRs), and the impact of ongoing work activities on redundant trains of equipment in order to identify conditions that could have rendered the systems incapable of performing their intended functions. The inspectors also walked down accessible portions of the systems to verify system components and support equipment were aligned correctly and operable. The inspectors examined the material condition of the components and observed operating parameters of equipment to verify that there were no obvious deficiencies. The inspectors also verified that the licensee had properly identified and resolved equipment alignment problems that could cause initiating events or impact the capability of mitigating systems or barriers and entered them into the CAP with the appropriate significance characterization. Documents reviewed are listed in the Attachment to this report.

These activities constituted five partial system walkdown samples as defined in IP 71111.04-05.

b. Findings

No findings of significance were identified.

- 1R05 Fire Protection (71111.05)
- .1 Routine Resident Inspector Tours (71111.05Q)
  - a. Inspection Scope

The inspectors conducted fire protection walkdowns which were focused on availability, accessibility, and the condition of firefighting equipment in the following risk-significant plant areas:

- 1-2 emergency diesel generator room;
- service water screenhouse;
- auxiliary feed water room;
- 'D' switchgear room; and
- turbine building 590' level.

The inspectors reviewed areas to assess if the licensee had implemented a fire protection program that adequately controlled combustibles and ignition sources within the plant, effectively maintained fire detection and suppression capability, maintained passive fire protection features in good material condition, and implemented adequate compensatory measures for out-of-service, degraded or inoperable fire protection

equipment, systems, or features in accordance with the licensee's fire plan. The inspectors selected fire areas based on their overall contribution to internal fire risk as documented in the plant's Individual Plant Examination of External Events with later additional insights, their potential to impact equipment which could initiate or mitigate a plant transient, or their impact on the plant's ability to respond to a security event. Using the documents listed in the Attachment to this report, the inspectors verified that fire hoses and extinguishers were in their designated locations and available for immediate use; that fire detectors and sprinklers were unobstructed; that transient material loading was within the analyzed limits; and fire doors, dampers, and penetration seals appeared to be in satisfactory condition. The inspectors also verified that minor issues identified during the inspection were entered into the licensee's CAP. Documents reviewed are listed in the Attachment to this report.

These activities constituted five quarterly fire protection inspection samples as defined in IP 71111.05-05.

- b. Findings
- (1) <u>Introduction</u>: The inspectors identified a finding of very low safety significance (Green) and an associated Non-Cited Violation (NCV) of License Section 2.C(3), Fire Protection Program for failing to maintain in effect all provisions of the Fire Protection Program. Specifically, the licensee credited a 2-hour fire barrier between the battery rooms and the cable spreading room based on less than two hours of combustible material in the cable spreading room. The cable spreading room contains in excess of two hours worth of combustible material.

<u>Description</u>: During an inspection of the battery rooms, the inspectors reviewed the Fire Hazards Analysis and supporting documents for the battery room. These documents justified a 2-hour barrier between the cable spreading room and battery rooms in lieu of a National Fire Protection Association compliant 3-hour barrier based on the fire load in the cable spreading room. In 2006, the licensee had re-evaluated the combustible load for these fire areas and calculated a fire load in the room of 2.47 hours. At the time of the calculation, the licensee did not evaluate the change for effects on the justification for a two hour fire barrier. After recognition of the issue, the licensee impaired the area and performed an evaluation of the current fire load and the effects of a tight crack on the 2-hour fire barrier that was identified by the NRC. The licensee concluded that the crack did not have a substantial effect on the rating of the wall. With respect to fire loading, the licensee concluded that the load exceeded the two hour fire rating of the wall. The revised evaluation did provide a new basis for the acceptability of the two hour fire wall.

<u>Analysis</u>: The inspectors determined that the failure to validate the acceptability of a fire barrier after determining that the fire duration significantly increased was a performance deficiency warranting further significance determination using the SDP. The issue is more than minor because it affects the Protection Against External Events attribute of the Mitigating Systems Cornerstone in that it affects the cornerstone objective of ensuring the availability, reliability, and capability of systems that respond to initiating events. The inspectors also compared the issue with examples in IMC 0612, Appendix E, and concluded the issue was similar to Example 3.j in that the use of a non-conservative value resulted in reasonable doubt on the functionality of the fire wall and, therefore, was more than minor. The inspectors further evaluated the finding using IMC 0609, Appendix F, Task 1.3.2: <u>Supplemental Screening for Fire Confinement</u>

<u>Findings</u>, question 1, and screened the finding as Green because the barrier could provide a 2-hour endurance rating. The inspectors determined the finding did not have a cross-cutting aspect because the change to the calculated fire loading occurred in 2006 and was therefore not reflective of current licensee performance.

Enforcement: License DPR-20 section 2.C(3) requires Entergy Nuclear Operations to implement and maintain in effect all provisions of the fire protection program as described in the UFSAR and approved in various Safety Evaluation Reports. The Safety Evaluation Reports, in part, relied on the licensee's response to Branch Technical Position (BTP) APCSB 9.5-1. In the response to the BTP, the licensee responded that each fire area was bounded by a 3-hour fire barrier with some exceptions documented with a discussion of adequacy. Contrary to this requirement, from August of 2006 to December 2009, the fire barrier between the battery rooms and the cable spreading room had neither a 3-hour barrier nor an accurate discussion of adequacy for lower than 3 hours. Specifically, the licensee's Fire Hazard Analysis, part of the fire protection program as described in the UFSAR, references calculation EA-APR-98-011 for justification of a 2-hour fire wall. This calculation justifies the 2-hour fire wall based on less than two hours of combustibles in the cable spreading room. Calculation EA-FPP-03-001 concludes that the cable spreading room has in excess of two hours of combustible load. Therefore, the discussion of adequacy of the barrier was not accurate. The licensee entered the condition into the corrective action program as CR-PLP-2010-1411. Because this violation was of very low safety significance and it was entered into the licensee's corrective action program, this violation is being treated as an NCV, consistent with the NRC Enforcement Policy: NCV 05000255/2010002-01, Inadequate Fire Barrier.

(2) <u>Introduction</u>: A finding of very low safety significance (Green) and associated NCV of Palisades Technical Specification (TS) 5.4.1, Procedures, was identified by the inspectors for failing to adequately implement a procedure to construct a scaffold near the 1-2 emergency diesel generator (EDG). Specifically, the scaffold was approved for use without the appropriate seismic or fire protection evaluations being done.

<u>Description</u>: While touring the EDG rooms, the inspectors observed a scaffold approved for use in the 1-2 EDG room. Some scaffold poles were routed through a cable tray and there were several points where it appeared the scaffold was in close proximity to safety-related components. A seismic evaluation tag could not be found. Additionally, it appeared that the platform was obstructing a fire sprinkler located in the overhead. The inspectors informed the operating crew of the issues. Subsequent investigation by the licensee identified numerous areas where the scaffold was within the two inches of safety-related equipment. Per the licensee's scaffolding procedure, an engineering evaluation should have been done to evaluate potential effects on safety-related equipment. Similarly, a fire protection evaluation should have been completed for the potential effects on the fire sprinkler. Although the completed checklist the site used to evaluate the scaffold indicated such evaluations were necessary, the evaluations were not done until after the issues were raised by the inspectors approximately three days later.

As an immediate action, the licensee precluded use of the scaffold pending resolution of the above issues and instituted a compensatory fire tour. Engineering was asked if the scaffold could be evaluated and approved as it was currently constructed. After consultation, it was decided the scaffold should be modified before an engineering

evaluation would be done. The scaffold was modified to address some of the concerns, and subsequent fire and seismic evaluations were performed before work utilizing the scaffolding recommenced.

<u>Analysis</u>: The inspectors determined that the improperly constructed scaffold was a performance deficiency warranting further evaluation with the SDP. The issue was more than minor because it affected the Protection Against External Events attribute of the Mitigating Systems Cornerstone in that it affected the cornerstone objective of ensuring the availability, reliability, and capability of systems that respond to initiating events. Specifically, contrary to site procedures, a fire protection feature (sprinkler) in a safety-related area was affected without appropriate evaluations or compensatory measures. Additionally, seismic evaluations were not performed with the scaffold in close proximity to safety-related equipment.

The inspectors used IMC 0609 Appendix F, "Fire Protection Significance Determination Process," <u>Task 1.3.2</u>: <u>Supplemental Screening for Fire Confinement Findings</u>, <u>question 3</u>, to determine the significance of the finding for the fire related aspects. The finding screened as Green, or very low safety significance, based on only one of ten sprinklers in the room being affected by the scaffold. Additionally, the inspectors utilized IMC 0609, "Significance Determination Process," to evaluate the significance of the finding for the seismic-related aspects. The finding screened as Green using the worksheets of Attachment 4. Specifically, Table 4b was utilized to determine if the finding was potentially risk significant based on seismic, flooding, or severe weather screening criteria. With no degradation of equipment specifically designed to mitigate seismic events and no complete loss of any safety function, the finding screened as Green. The finding had an associated cross-cutting aspect in the Human Performance area, Work Control component in that the licensee failed to appropriately plan work activities by incorporating the need for compensatory actions (H.3(a)).

Enforcement: Technical Specification 5.4.1 states, in part, that written procedures shall be established, implemented, and maintained covering site fire protection program implementation and the procedures recommended in Regulatory Guide 1.33, Revision 2, Appendix A. Regulatory Guide 1.33 states, in part, that maintenance that can affect the performance of safety-related equipment should be properly pre-planned and performed in accordance with written procedures appropriate to the circumstances. Procedure EN-MA-133, "Control of Scaffolding," implements these requirements for constructing scaffolds near safety-related equipment. Procedure EN-MA-133 requires construction of the scaffold so it does not impact safety-related equipment with an allowance that requires evaluations for seismic impacts and other possible impairments when the scaffold is in close vicinity to the equipment. Contrary to TS 5.4.1, from January 16 to 19, 2010, a scaffold constructed in close proximity to the 1-2 EDG was without the appropriate evaluations and compensatory measures established as required by procedure EN-MA-133. The licensee modified the scaffold and performed the appropriate evaluations. Because this violation was of very low safety significance and it was entered into the licensee's corrective action program as CR-PLP-2010-00264, this violation is being treated as an NCV, consistent with the NRC Enforcement Policy: NCV 05000255/2010002-02, Improper Construction of Scaffolding.

## 1R11 Licensed Operator Requalification Program (71111.11)

## .1 <u>Resident Inspector Quarterly Review</u> (71111.11Q)

#### a. Inspection Scope

On February 18, the inspectors observed a crew of licensed operators in the plant's simulator during licensed operator requalification examinations to verify that operator performance was adequate, evaluators were identifying and documenting crew performance problems, and training was being conducted in accordance with licensee procedures. The inspectors evaluated the following areas:

- licensed operator performance;
- crew's clarity and formality of communications;
- ability to take timely actions in the conservative direction;
- prioritization, interpretation, and verification of annunciator alarms;
- correct use and implementation of abnormal and emergency procedures;
- control board manipulations;
- oversight and direction from supervisors; and
- ability to identify and implement appropriate TS actions and Emergency Plan actions and notifications.

The crew's performance in these areas was compared to pre-established operator action expectations and successful critical task completion requirements. Documents reviewed are listed in the Attachment to this report.

This inspection constituted one quarterly licensed operator requalification program sample as defined in IP 71111.11.

b. Findings

No findings of significance were identified.

.2 Facility Operating History (71111.11B)

Completion of Sections .2 through .9 constituted one biennial licensed operator requalification inspection sample as defined in IP 71111.11B.

a. Inspection Scope

The inspectors reviewed the plant's operating history from January 1, 2009, through January 30, 2010, to identify operating experience that was expected to be addressed by the Licensed Operator Requalification Training (LORT) program. The inspector verified that the identified operating experience had been addressed by the facility licensee in accordance with the station's approved Systems Approach to Training (SAT) program to satisfy the requirements of 10 CFR 55.59(c). The documents reviewed during this inspection are listed in the Attachment to this report.

b. Findings

No findings of significance were identified.

## .3 Licensee Regualification Examinations

#### a. Inspection Scope

The inspectors performed an inspection of the licensee's LORT test/examination program for compliance with the station's SAT program, which would satisfy the requirements of 10 CFR 55.59(c)(4). The reviewed operating examination material consisted of two operating tests, each containing two dynamic simulator scenarios and five job performance measures. The written examinations reviewed consisted of two written examinations, consisting of 30 questions for each examination. The inspectors reviewed the annual requalification operating test and biennial written examination material to evaluate general quality, construction, and difficulty level. The inspectors assessed the level of examination duplication from week-to-week for the operating test administered in 2010 and written examination material administered in 2009. The inspectors reviewed the methodology for developing the examinations, including the LORT program 2-year sample plan, probabilistic risk assessment insights, previously identified operator performance deficiencies, and plant modifications. The documents reviewed during this inspection are listed in the Attachment to this report.

b. Findings

No findings of significance were identified.

## .4 Licensee Administration of Regualification Examinations

a. Inspection Scope

The inspectors observed the administration of a requalification operating test to assess the licensee's effectiveness in conducting the test to ensure compliance with 10 CRF 55.59(c)(4). The inspectors evaluated the performance of one operating crew in parallel with the facility evaluators during two dynamic simulator scenarios and evaluated various licensed crew members concurrently with facility evaluators during the administration of several job performance measures. The inspectors assessed the facility evaluators' ability to determine adequate crew and individual performance using objective, measurable standards. The inspectors observed the training staff personnel administer the operating test, including conducting pre-examination briefings, evaluations of operator performance, and individual and crew evaluations upon completion of the operating test. The inspectors evaluated the ability of the simulator to support the examinations. A specific evaluation of simulator performance was conducted and documented in the section below titled, "Conformance with Simulator Requirements Specified in 10 CFR 55.46." The documents reviewed during this inspection are listed in the Attachment to this report.

b. Findings

No findings of significance were identified.

## .5 Examination Security

#### a. Inspection Scope

The inspectors observed and reviewed the licensee's overall licensed operator requalification examination security program related to examination physical security (e.g., access restrictions and simulator considerations) and integrity (e.g., predictability and bias) to verify compliance with 10 CFR 55.49, "Integrity of Examinations and Tests." The inspectors also reviewed the facility licensee's examination security procedure and the implementation of security and integrity measures (e.g., security agreements, sampling criteria, bank use, and test item repetition) throughout the examination process. The documents reviewed during this inspection are listed in the Attachment to this report.

## b. Findings

No findings of significance were identified.

## .6 Licensee Training Feedback System

#### a. Inspection Scope

The inspectors assessed the methods and effectiveness of the licensee's processes for revising and maintaining its LORT Program up-to-date, including the use of feedback from plant events and industry experience information. The inspectors reviewed the licensee's quality assurance oversight activities, including licensee training department self-assessment reports. The inspectors evaluated the licensee's ability to assess the effectiveness of its LORT program and their ability to implement appropriate corrective actions. This evaluation was performed to verify compliance with 10 CFR 55.59(c) and the licensee's SAT program. The documents reviewed during this inspection are listed in the Attachment to this report.

b. Findings

No findings of significance were identified.

#### .7 Licensee Remedial Training Program

#### a. Inspection Scope

The inspectors assessed the adequacy and effectiveness of the remedial training conducted since the previous biennial requalification examinations and the training from the current examination cycle to ensure that they addressed weaknesses in licensed operator or crew performance identified during training and plant operations. The inspectors reviewed remedial training procedures and individual remedial training plans. This evaluation was performed in accordance with 10 CFR 55.59(c) and with respect to the licensee's SAT program. The documents reviewed during this inspection are listed in the Attachment to this report.

## b. <u>Findings</u>

No findings of significance were identified.

## .8 Conformance with Operator License Conditions

#### a. Inspection Scope

The inspectors reviewed the facility and individual operator licensees' conformance with the requirements of 10 CFR Part 55. The inspectors reviewed the facility licensee's program for maintaining active operator licenses and to assess compliance with 10 CFR 55.53(e) and (f). The inspectors reviewed the procedural guidance and the process for tracking on-shift hours for licensed operators and which control room positions were granted watch-standing credit for maintaining active operator licenses. The inspectors reviewed the facility licensee's LORT program to assess compliance with the requalification program requirements as described by 10 CFR 55.59(c). Additionally, medical records for six licensed operators were reviewed for compliance with 10 CFR 55.53(I). The documents reviewed during this inspection are listed in the Attachment to this report.

b. Findings

No findings of significance were identified.

## .9 Conformance with Simulator Requirements Specified in 10 CFR 55.46

a. Inspection Scope

The inspectors assessed the adequacy of the licensee's simulation facility (simulator) for use in operator licensing examinations and for satisfying experience requirements as prescribed in 10 CFR 55.46, "Simulation Facilities." The inspectors also reviewed a sample of simulator performance test records (i.e., transient tests, malfunction tests, steady state tests, and core performance tests), simulator discrepancies, and the process for ensuring continued assurance of simulator fidelity in accordance with 10 CFR 55.46. The inspectors reviewed and evaluated the discrepancy process to ensure that simulator fidelity was maintained. Open simulator discrepancies were reviewed for importance relative to the impact on 10 CFR 55.45 and 55.59 operator actions as well as on nuclear and thermal hydraulic operating characteristics. The inspectors conducted interviews with members of the licensee's simulator staff about the configuration control process and completed the IP 71111.11, Appendix C, checklist to evaluate whether or not the licensee's plant-referenced simulator was operating adequately as required by 10 CFR 55.46(c) and (d). The documents reviewed during this inspection are listed in the Attachment to this report.

b. <u>Findings</u>

No findings of significance were identified.

## .10 <u>Annual Operating Test Results</u> (71111.11B)

#### a. Inspection Scope

The inspectors reviewed the overall pass/fail results of the biennial written examination administered in 2009, and the individual Job Performance Measure operating tests, and the simulator operating tests (required to be given per 10 CFR 55.59(a)(2)) administered by the licensee in January and February 2010, as part of the licensee's operator licensing requalification cycle. These results were compared to the thresholds established in Inspection Manual Chapter 0609, Appendix I, "Licensed Operator Requalification Significance Determination Process." The evaluations were also performed to determine if the licensee effectively implemented operator requalification guidelines established in NUREG-1021, "Operator Licensing Examination Standards for Power Reactors," and Inspection Procedure 71111.11, "Licensed Operator Requalification Program." The documents reviewed during this inspection are listed in the Attachment to this report.

b. Findings

No findings of significance were identified.

- 1R12 Maintenance Effectiveness (71111.12)
  - a. Inspection Scope

The inspectors evaluated degraded performance issues involving the following risk-significant systems:

- component cooling water system; and
- chemical volume control system.

The inspectors reviewed events such as where ineffective equipment maintenance had resulted in valid or invalid automatic actuations of engineered safeguards systems and independently verified the licensee's actions to address system performance or condition problems in terms of the following:

- implementing appropriate work practices;
- identifying and addressing common cause failures;
- scoping of systems in accordance with 10 CFR 50.65(b) of the maintenance rule;
- characterizing system reliability issues for performance;
- charging unavailability for performance;
- trending key parameters for condition monitoring;
- ensuring 10 CFR 50.65(a)(1) or (a)(2) classification or re-classification; and
- verifying appropriate performance criteria for structures, systems, and components/functions classified as (a)(2) or appropriate and adequate goals and corrective actions for systems classified as (a)(1).

The inspectors assessed performance issues with respect to the reliability, availability, and condition monitoring of the system. In addition, the inspectors verified maintenance effectiveness issues were entered into the CAP with the appropriate significance characterization. Documents reviewed are listed in the Attachment to this report.

This inspection constituted two maintenance effectiveness samples as defined in IP 71111.12-05.

b. Findings

No findings of significance were identified.

## 1R13 <u>Maintenance Risk Assessments and Emergent Work Control</u> (71111.13)

#### a. Inspection Scope

The inspectors reviewed the licensee's evaluation and management of plant risk for the maintenance and emergent work activities affecting risk-significant and safety-related equipment listed below to verify that the appropriate risk assessments were performed prior to removing equipment for work:

- risk during planned component cooling water pump outage;
- risk during planned high pressure safety injection outage;
- risk during planned 1-1 emergency diesel generator outage;
- risk during maintenance on auxiliary feedwater air operated valves;
- risk during low pressure safety injection maintenance and 1-2 emergency diesel generator 24 hour run; and
- risk during maintenance on heater level controller.

These activities were selected based on their potential risk significance relative to the Reactor Safety Cornerstones. As applicable for each activity, the inspectors verified that risk assessments were performed as required by 10 CFR 50.65(a)(4) and were accurate and complete. When emergent work was performed, the inspectors verified that the plant risk was promptly reassessed and managed. The inspectors reviewed the scope of maintenance work, discussed the results of the assessment with the licensee's probabilistic risk analyst or shift technical advisor, and verified plant conditions were consistent with the risk assessment. The inspectors also reviewed TS requirements and walked down portions of redundant safety systems, when applicable, to verify risk analysis assumptions were valid and applicable requirements were met.

These maintenance risk assessments and emergent work control activities constituted six samples as defined in IP 71111.13-05.

b. Findings

No findings of significance were identified.

## 1R15 Operability Evaluations (71111.15)

#### a. Inspection Scope

The inspectors reviewed the following issues:

- containment spray accident analysis;
- fouling in the EDG 1-1 after cooler;
- EDG 1-2 due to open petcock;

13

- adequacy of barriers;
- region 1e of the spent fuel pool;
- control room heating, ventilation, and air conditioning filtration.

The inspectors selected these potential operability issues based on the risk significance of the associated components and systems. The inspectors evaluated the technical adequacy of the evaluations to ensure that TS operability was properly justified and the subject component or system remained available such that no unrecognized increase in risk occurred. The inspectors compared the operability and design criteria in the appropriate sections of the TS and UFSAR to the licensee's evaluations to determine whether the components or systems were operable. Where compensatory measures were required to maintain operability, the inspectors determined whether the measures in place would function as intended and were properly controlled. The inspectors determined, where appropriate, compliance with bounding limitations associated with the evaluations. Additionally, the inspectors reviewed a sampling of corrective action documents to verify that the licensee was identifying and correcting any deficiencies associated with operability evaluations. Documents reviewed are listed in the Attachment to this report.

This operability inspection constituted six samples as defined in IP 71111.15-05.

b. Findings

No findings of significance were identified.

- 1R18 Plant Modifications (71111.18)
  - a. Inspection Scope

The following engineering design package was reviewed and selected aspects were discussed with engineering personnel:

• modification to fuel bundle constitution.

This document and related documentation were reviewed for adequacy of the associated 10 CFR 50.59 safety evaluation screening. The proposed modification changes the fuel loading for operating cycle 22 and necessitates a change to the Core Operating Limits Requirements. Documents reviewed in the course of this inspection are listed in the Attachment to this report.

This inspection constituted one permanent plant modification sample as defined in IP 71111.18-05.

b. <u>Findings</u>

No findings of significance were identified.

## 1R19 <u>Post-Maintenance Testing</u> (71111.19)

#### a. Inspection Scope

The inspectors reviewed the following post-maintenance activities to verify that procedures and test activities were adequate to ensure system operability and functional capability:

- utility water tank piping replacement;
- reactor vessel level power supply replacement;
- battery charger #3 overhaul;
- 1-1 EDG maintenance outage;
- bus 1A feeder breaker;
- VC-11 overhaul; and
- main transformer following grid transient.

These activities were selected based upon the structure, system, or component's ability to impact risk. The inspectors evaluated these activities for the following (as applicable): the effect of testing on the plant had been adequately addressed; testing was adequate for the maintenance performed: acceptance criteria were clear and demonstrated operational readiness; test instrumentation was appropriate; tests were performed as written in accordance with properly reviewed and approved procedures; equipment was returned to its operational status following testing (temporary modifications or jumpers required for test performance were properly removed after test completion); and test documentation was properly evaluated. The inspectors evaluated the activities against TS, the UFSAR, 10 CFR Part 50 requirements, licensee procedures, and various NRC generic communications to ensure that the test results adequately ensured that the equipment met the licensing basis and design requirements. In addition, the inspectors reviewed corrective action documents associated with post-maintenance tests to determine whether the licensee was identifying problems and entering them in the CAP and that the problems were being corrected commensurate with their importance to safety. Documents reviewed are listed in the Attachment to this report.

This inspection constituted seven post-maintenance testing samples as defined in IP 71111.19-05.

b. Findings

No findings of significance were identified.

#### 1R22 <u>Surveillance Testing</u> (71111.22)

a. Inspection Scope

The inspectors reviewed the test results for the following activities to determine whether risk-significant systems and equipment were capable of performing their intended safety function and to verify testing was conducted in accordance with applicable procedural and TS requirements:

- anticipated transient without scram functional test;
- control room ventilation;

- plant heat balance;
- component cooling pump 'C' (inservice testing); and
- Primary Coolant System leak rate (reactor coolant system leak detection).

The inspectors observed in-plant activities and reviewed procedures and associated records to determine the following:

- did preconditioning occur;
- were the effects of the testing adequately addressed by control room personnel or engineers prior to the commencement of the testing;
- were acceptance criteria clearly stated, demonstrated operational readiness, and consistent with the system design basis;
- plant equipment calibration was correct, accurate, and properly documented;
- as-left setpoints were within required ranges; and the calibration frequency were in accordance with TSs, the UFSAR, procedures, and applicable commitments;
- measuring and test equipment calibration was current;
- test equipment was used within the required range and accuracy; applicable prerequisites described in the test procedures were satisfied;
- test frequencies met TS requirements to demonstrate operability and reliability; tests were performed in accordance with the test procedures and other applicable procedures; jumpers and lifted leads were controlled and restored where used;
- test data and results were accurate, complete, within limits, and valid;
- test equipment was removed after testing;
- where applicable for inservice testing activities, testing was performed in accordance with the applicable version of Section XI, American Society of Mechanical Engineers code, and reference values were consistent with the system design basis;
- where applicable, test results not meeting acceptance criteria were addressed with an adequate operability evaluation or the system or component was declared inoperable;
- where applicable for safety-related instrument control surveillance tests, reference setting data were accurately incorporated in the test procedure;
- where applicable, actual conditions encountering high resistance electrical contacts were such that the intended safety function could still be accomplished;
- prior procedure changes had not provided an opportunity to identify problems encountered during the performance of the surveillance or calibration test;
- equipment was returned to a position or status required to support the performance of its safety functions; and
- all problems identified during the testing were appropriately documented and dispositioned in the CAP.

Documents reviewed are listed in the Attachment to this report.

This inspection constituted three routine surveillance testing samples, one inservice testing sample, and one reactor coolant system leak detection inspection sample as defined in IP 71111.22, Sections -02 and -05.

## b. Findings

No findings of significance were identified.

#### 1EP6 Drill Evaluation (71114.06)

## a. Inspection Scope

The inspectors evaluated the conduct of a routine licensee emergency drill on January 27, 2010, to identify any weaknesses and deficiencies in classification, notification, and protective action recommendation development activities. The inspectors observed emergency response operations in the simulator control room and Emergency Operations Facility to determine whether the event classification, notifications, and protective action recommendations were performed in accordance with procedures. The inspectors also attended the licensee drill critique to compare any inspector-observed weakness with those identified by the licensee staff in order to evaluate the critique and to verify whether the licensee staff was properly identifying weaknesses and entering them into the corrective action program. As part of the inspection, the inspectors reviewed the drill package and other documents listed in the Attachment to this report.

This emergency preparedness drill observation constituted one sample as defined in IP 71114.06-05.

b. Findings

No findings of significance were identified.

## 2. RADIATION SAFETY

2RS8 <u>Radioactive Solid Waste Processing and Radioactive Material Handling, Storage, and</u> <u>Transportation</u> (71124.08)

This inspection constituted one radioactive solid waste processing and radioactive material handling, storage, and transportation sample as defined in IP 71124.08-05.

- .1 Inspection Planning (02.01)
- a. Inspection Scope

The inspectors reviewed the solid radioactive waste system description in the UFSAR, the Process Control Program, and the recent radiological effluent release report for information on the types, amounts, and processing of radioactive waste disposed.

The inspectors reviewed the scope of any quality assurance audit in this area since the last inspection to gain insights into the licensee's performance and inform the "smart sampling" inspection planning.

b. Findings

No findings of significance were identified.

## .2 <u>Radioactive Material Storage</u> (02.02)

#### a. Inspection Scope

The inspectors selected three areas where containers of radioactive waste are stored, and evaluated whether the containers were labeled in accordance with 10 CFR 20.1904, "Labeling Containers," or controlled in accordance with 10 CFR 20.1905, "Exemptions to Labeling Requirements," as appropriate.

The inspectors assessed whether the radioactive materials storage areas were controlled and posted in accordance with the requirements of 10 CFR Part 20, "Standards for Protection against Radiation." For materials stored or used in the controlled or unrestricted areas, the inspectors evaluated whether they were secured against unauthorized removal and controlled in accordance with 10 CFR 20.1801, "Security of Stored Material," and 10 CFR 20.1802, "Control of Material Not in Storage," as appropriate.

The inspectors evaluated whether the licensee established a process for monitoring the impact of long-term storage (e.g., buildup of any gases produced by waste decomposition, chemical reactions, container deformation, loss of container integrity, or re-release of free-flowing water) that was sufficient to identify potential unmonitored, unplanned releases or nonconformance with waste disposal requirements.

The inspectors selected five containers of stored radioactive materials, and assessed for signs of swelling, leakage, and deformation.

b. Findings

No findings of significance were identified.

- .3 Radioactive Waste System Walkdown (02.03)
- a. Inspection Scope

The inspectors walked down accessible portions of selected radioactive waste processing systems to assess whether the current system configuration and operation agreed with the descriptions in the UFSAR, offsite dose calculation manual, and process control program.

The inspectors reviewed administrative and/or physical controls (i.e., drainage and isolation of the system from other systems) to assess whether the equipment, which is not service or abandoned in place, would not contribute to an unmonitored release path and/or affect operating systems or be a source of unnecessary personnel exposure. The inspectors assessed whether the licensee reviewed the safety significance of systems and equipment abandoned in place in accordance with 10 CFR 50.59, "Changes, Tests, and Experiments."

The inspectors reviewed the adequacy of changes made to the radioactive waste processing systems since the last inspection. The inspectors evaluated whether changes from what is described in the UFSAR were reviewed and documented in

accordance with 10 CFR 50.59, as appropriate, and to assess the impact on radiation doses to members of the public.

The inspectors assessed whether the waste stream mixing, sampling procedures, and methodology for waste concentration averaging were consistent with the process control program, and provided representative samples of the waste product for the purposes of waste classification as described in 10 CFR 61.55, "Waste Classification" for selected waste processes.

The inspectors evaluated whether the tank recirculation procedures provided sufficient mixing for systems that provide tank recirculation.

The inspectors assessed whether the licensee's process control program correctly described the current methods and procedures for dewatering and waste stabilization (e.g., removal of freestanding liquid).

b. Findings

No findings of significance were identified.

- .4 <u>Waste Characterization and Classification</u> (02.04)
  - a. Inspection Scope

The inspectors selected the following radioactive waste streams for review:

- dry active waste;
- resin;
- advanced liquid processing (charcoal).

For the waste streams listed above, the inspectors assessed whether the licensee's radiochemical sample analysis results (i.e., "10 CFR Part 61" analysis) were sufficient to support radioactive waste characterization as required by 10 CFR Part 61, "Licensing Requirements for Land Disposal of Radioactive Waste." The inspectors evaluated whether the licensee's use of scaling factors and calculations to account for difficult-to-measure radionuclides was technically sound and based on current 10 CFR Part 61 analysis for the selected radioactive waste streams.

The inspectors evaluated whether changes to plant operational parameters were taken into account to: (1) maintain the validity of the waste stream composition data between the annual or biennial sample analysis update; and (2) assure that waste shipments continued to meet the requirements of 10 CFR Part 61 for the waste streams selected above.

The inspectors evaluated whether the licensee had established and maintained an adequate quality assurance program to ensure compliance with the waste classification and characterization requirements of 10 CFR 61.55 and 10 CFR 61.56, "Waste Characteristics."

## b. Findings

No findings of significance were identified.

#### .5 <u>Shipment Preparation</u> (02.05)

#### a. Inspection Scope

The inspectors observed shipment packaging, surveying, labeling, marking, placarding, vehicle checks, emergency instructions, disposal manifest, shipping papers provided to the driver, and licensee verification of shipment readiness. The inspectors assessed whether the requirements of applicable transport cask certificate of compliance had been met. The inspectors evaluated whether the receiving licensee was authorized to receive the shipment packages. The inspectors evaluated whether the licensee's procedures for cask loading and closure procedures were consistent with the vendor's current approved procedures.

The inspectors observed radiation workers during the conduct of radioactive waste processing and radioactive material shipment preparation and receipt activities. The inspectors assessed whether the shippers were knowledgeable of the shipping regulations and whether shipping personnel demonstrated adequate skills to accomplish the package preparation requirements for public transport with respect to:

- the licensee's response to NRC Bulletin 79-19, "Packaging of Low-Level Radioactive Waste for Transport and Burial," dated August 10, 1979; and
- Title 49 CFR Part 172, "Hazardous Materials Table, Special Provisions, Hazardous Materials Communication, Emergency Response Information, Training Requirements, and Security Plans," Subpart H, "Training."

Additionally, due to limited opportunities for direct observation, the inspectors reviewed the technical instructions presented to workers during routine training. The inspectors assessed whether the licensee's training program provided training to personnel responsible for the conduct of radioactive waste processing and radioactive material shipment preparation activities.

## b. Findings

No findings of significance were identified.

- .6 <u>Shipping Records</u> (02.06)
- a. Inspection Scope

The inspectors evaluated whether the shipping documents indicated the proper shipper name; emergency response information and a 24-hour contact telephone number; accurate curie content and volume of material; and appropriate waste classification, transport index, and "UN" number for the following radioactive shipments:

- Shipment PLP-RM-10-010; Open Trailer with five Boxes of Scaffold Equipment, 03/10/2010;
- Shipment PLP-RM-09-058; Areva Refuel Equipment, 06/10/2009; and
- Shipment PLP-RW-10-001; 8-120B Cask Number CNS 8-120B-1S; 01/29/2010.

Additionally, the inspectors assessed whether the shipment placarding was consistent with the information in the shipping documentation.

## b. Findings

No findings of significance were identified.

- .7 Identification and Resolution of Problems (02.07)
- a. Inspection Scope

The inspectors assessed whether problems associated with radioactive waste processing, handling, storage, and transportation, were being identified by the licensee at an appropriate threshold, were properly characterized, and were properly addressed for resolution in the licensee corrective action program. Additionally, the inspectors evaluated whether the corrective actions were appropriate for a selected sample of problems documented by the licensee that involve radioactive waste processing, handling, storage, and transportation.

The inspectors reviewed results of selected audits performed since the last inspection of this program and evaluated the adequacy of the licensee's corrective actions for issues identified during those audits.

b. Findings

No findings of significance were identified.

## 4. OTHER ACTIVITIES

#### 4OA1 Performance Indicator Verification (71151)

#### .1 <u>Mitigating Systems Performance Index - High Pressure Injection Systems</u>

a. Inspection Scope

The inspectors sampled licensee submittals for the Mitigating Systems Performance Index (MSPI) - High Pressure Injection Systems performance indicator for the period of the first through the fourth quarter 2009. To determine the accuracy of the Performance Indicator (PI) data reported during those periods, PI definitions and guidance contained in the Nuclear Energy Institute Document 99-02, "Regulatory Assessment Performance Indicator Guideline," Revision 6, was used. The inspectors reviewed the licensee's operator narrative logs, corrective action documents, and MSPI derivation reports for the period of the first through the fourth quarters 2009 to validate the accuracy of the submittals. The inspectors reviewed the MSPI component risk coefficient to determine if it had changed by more than 25 percent in value since the previous inspection and, if so, that the change was in accordance with applicable Nuclear Energy Institute guidance. The inspectors also reviewed the licensee's condition report database to determine if any problems had been identified with the PI data collected or transmitted for this indicator and none were identified. Documents reviewed are listed in the Attachment to this report.

This inspection constituted one MSPI high pressure injection system sample as defined in IP 71151-05.

b. Findings

No findings of significance were identified.

## 4OA2 Identification and Resolution of Problems (71152)

Cornerstones: Initiating Events, Mitigating Systems, Barrier Integrity, Emergency Preparedness, Public Radiation Safety, Occupational Radiation Safety, and Physical Protection

- .1 Routine Review of items Entered Into the Corrective Action Program
  - a. Inspection Scope

As part of the various baseline inspection procedures discussed in previous sections of this report, the inspectors routinely reviewed issues during baseline inspection activities and plant status reviews to verify that they were being entered into the licensee's CAP at an appropriate threshold, that adequate attention was being given to timely corrective actions, and that adverse trends were identified and addressed. Attributes reviewed included: the complete and accurate identification of the problem; that timeliness was commensurate with the safety significance; that evaluation and disposition of performance issues, generic implications, common causes, contributing factors, root causes, extent of condition reviews, and previous occurrences reviews were proper and adequate; and that the classification, prioritization, focus, and timeliness of corrective actions were commensurate with safety and sufficient to prevent recurrence of the issue. Minor issues entered into the licensee's CAP as a result of the inspectors' observations are included in the attached List of Documents Reviewed.

These routine reviews for the identification and resolution of problems did not constitute any additional inspection samples. Instead, by procedure they were considered an integral part of the inspections performed during the quarter and documented in Section 1 of this report.

b. Findings

No findings of significance were identified.

#### .2 Daily Corrective Action Program Reviews

a. Inspection Scope

In order to assist with the identification of repetitive equipment failures and specific human performance issues for followup, the inspectors performed a daily screening of

items entered into the licensee's CAP. This review was accomplished through inspection of the station's daily condition report packages.

These daily reviews were performed by procedure as part of the inspectors' daily plant status monitoring activities and, as such, did not constitute any separate inspection samples.

b. Findings

No findings of significance were identified.

40A5 Other Activities

#### .1 (Closed) Unresolved Item (URI) 2009005-03; Adequacy of Building Lightning Protection

a. Inspection Scope

In report 05000255/2009005, the inspectors documented a URI regarding the adequacy of lightning protection for the Auxiliary Building. At the time, the inspectors could not determine if the Auxiliary Building met regulatory requirements for protection from lightning. The need to protect structures, systems, and components important to safety from the effects of natural phenomena (to include lightning) is discussed in the UFSAR and in the plant's response to Fire Protection BTP APCSB 9.5-1. The licensee could not provide a standard's based or analytically based evaluation to show protection of the Auxiliary Building. The licensee provided the inspectors with a copy of changes and response to the BTP APCSB 9.5-1 dated August 24, 1996. This revision was dated after applicable Safety Evaluation Reports incorporated by the license. After the licensee located the initial version that was submitted to the NRC, the inspectors confirmed that the NRC had accepted the response.

b. Findings

No findings of significance were identified.

- .2 (Closed) URI 05000255/2008004-01; Justification Regarding Changes to the ODCM With Respect to Environmental Monitoring, Commitments in Terms of Sampling Locations, Monitoring and Measurement Frequencies
- a. Inspection Scope

The inspectors reviewed information regarding changes that were made in 2004 to the ODCM. The review was performed to identify whether these changes created discrepancies between the program last approved by the NRC and the program in effect at the time of the inspection. The inspection focused on environmental monitoring commitments in terms of sampling locations, monitoring, and measurement frequency.

b. Findings

Introduction: The inspectors identified a finding of very low-safety-significance and an associated NCV of TS requirement 5.5.1, Offsite Dose Calculation Manual (ODCM) for

the failure to provide sufficient information to support the change to the ODCM together with the appropriate analyses or evaluations justifying the changes.

<u>Description</u>: In July 2008, an inspection of the Radiological Environmental Monitoring Program (REMP) noted the requirements, that were last approved by the NRC in 1993, were no longer present in the then current revision of the ODCM. Examples of the discrepancies included the discontinuation of drinking water (well) samples and a reduction of the frequency for vegetation samples. At the time of the inspection, the licensee could not provide evaluations or justification for the changes. The licensee indicated that an in-depth review of the current revision of the ODCM against the requirements last approved by the NRC would be completed. As part of the review, the licensee planned to locate any evaluations that had been previously performed to justify changes to the ODCM. As a result, the inspectors could not review the appropriate analyses or assess the evaluations justifying the changes. Consequently, the issue was characterized as an URI (05000255/2008-004-01).

The licensee located the documentation from 2004 that deleted the requirements from the ODCM. The inspectors reviewed the change package and identified that the evaluation for the removal of drinking water wells from the ODCM consisted of a single paragraph that stated:

"Well water sampling consisted of monthly samples from the Plant, State Park, and Covert Township Park wells for drinking water. Over the past two years these samples have been eliminated, as the city of South Haven treated water service area has expanded to supply drinking water to all three locations. There are no longer any groundwater samples near the Palisades facility being utilized for drink or irrigation purposes. The Branch Technical Position states that groundwater samples should be taken from one or two sources if likely to affected, samples should be taken when this source is tapped for drinking or irrigation purposes in areas where the hydraulic gradient or recharge properties are suitable for contamination. The plant site, State Park, and Covert Township well samples collections/analysis were based on drinking water. There are no sources of ground water being used for irrigation purposes adjacent to the plant site."

The inspectors determined that this evaluation was not correct. Specifically, this evaluation failed to address community wells that were still used to provide drinking water to homes immediately adjacent to plant property to the south. These community wells are between the plant site and the Covert Township Park, locations where drinking water wells were historically sampled until the 2004 ODCM change.

The inspectors determined that the licensee had not performed an evaluation to demonstrate that the drinking water wells for properties adjacent to the south side of plant property were not impacted by plant discharge or whether any calculated dose to an individual in this population was bounded by the sampling and analysis of the South Haven Municipal water supply.

Environmental monitoring of all pathways, including drinking water, is required to supplement the radiological effluent monitoring program and is intended to verify that measurable concentrations of radioactive material in the environment are not greater than expected on the basis of environmental exposure pathway modeling. The inspectors also reviewed the 2004 change to the ODCM that authorized a reduction of the frequency for vegetation samples. The inspectors determined that the licensee placed an inappropriate emphasis on milk collection, even when the nearest dairy animals are at locations that would not likely be impacted by site effluents. The inspectors determined that this emphasis was the cause for a previously identified finding and associated violation (05000255/2008004-02). The inspectors determined that the ODCM had been corrected to collect vegetation when dairy animals are not available within 8km (5 miles) of the plant site. No further actions are required for this ODCM change.

The finding is not subject to traditional enforcement, in that, the finding did not have any actual safety consequence, did not have the potential for impacting the NRC's ability to perform its regulatory function, and were not willful.

<u>Analysis</u>: The failure to implement Technical Specification requirements for managing ODCM changes is a performance deficiency, because the licensee failed to meet the requirement and the cause of this issue was reasonably within its ability to foresee and correct, and should have been prevented.

The finding is greater than minor because it affected the Public Radiation Safety Cornerstone objective to ensure adequate protection of public health and safety from exposure to radioactive materials released into the public domain, in that these conditions could result in reduced capability to detect potential impacts associated with this pathway. The finding was assessed using IMC 0609, Attachment D for the Public Radiation Safety-SDP and determined to be of very low-safety-significance (Green) because it involved the environmental monitoring program.

As described above, the evaluation occurred in 2004 and appeared to be a legacy issue which did not represent current licensee performance. Consequently, this deficiency does not have any cross-cutting aspects.

<u>Enforcement</u>: Technical Specification 5.5.1.c states that changes to the ODCM shall be documented and records of reviews performed shall be retained. This documentation shall contain:

- Sufficient information to support the change together with the appropriate analyses or evaluations justifying the changes; and
- determination that the change will maintain the level of radioactive effluent control required by 10 CFR Part 50, Appendix I, and not adversely impact the accuracy or reliability of effluent, dose, or setpoint calculations.

Contrary to the above, as of March 11, 2010, the licensee did not have sufficient information to support the change to the ODCM together with the appropriate analyses or evaluations justifying the changes. Additionally, the licensee could not demonstrate that the change maintained the level of radioactive effluent control required by 10 CFR Part 50, Appendix I, and did not adversely impact the accuracy or reliability of effluent, dose, or setpoint calculations.

Corrective actions were being developed and senior plant management expressed the understanding that sampling was important and the condition would be corrected. Since the licensee documented this issue in its corrective action program

(CR-PLP-2010-01013) and because the violation is of very low-safety-significance, it is being treated as an NCV. (NCV 50-255/2010002-03; Failure to Adequately Manage Changes to the ODCM).

## 4OA6 Management Meetings

## .1 Exit Meeting Summary

On April 5, 2010, the inspectors presented the inspection results to Mr. C. Schwarz and other members of the licensee staff. The licensee acknowledged the issues presented. The inspectors confirmed that none of the potential report input discussed was considered proprietary.

## .2 Interim Exit Meetings

Interim exits were conducted for:

- The results of the licensed operator requalification training program inspection with Mr. C. Schwarz, Site Vice President, on February 12, 2010.
- The licensed operator requalification training biennial written examination and annual operating test results with Mr. T. Horan, Operations Training Superintendent, via telephone on March 2, 2009.
- The results of the radioactive material processing, storage, and transportation program, including closure of an unresolved item with the Site Vice President, Mr. C. Schwarz, on March 11, 2010.

The inspectors confirmed that none of the potential report input discussed was considered proprietary. Proprietary material received during the inspection was returned to the licensee.

## 4OA7 Licensee-Identified Violations

The following violation of very low significance (Green) was identified by the licensee and is a violation of NRC requirements which meets the criteria of Section VI of the NRC Enforcement Policy, NUREG-1600, for being dispositioned as an NCV.

Technical Specification 5.4.1 requires, in part, that written procedures shall be established, implemented, and maintained covering applicable procedures recommended in Regulatory Guide 1.33. The Regulatory Guide states, in part, that procedures of a type appropriate to the circumstances should be provided to ensure that tools, gauges, instruments, controls, and other measuring and test devices are properly controlled, calibrated, and adjusted to maintain accuracy. Contrary to this, in November and December of 2009, numerous deficiencies related to implementation of the procedure for control of the measuring and test equipment program were identified by the licensee and evaluated under CR-PLP-2010-0082. The finding is of very low safety significance because it did not impact a safety function, nor was it risk significant due to seismic, flooding, or severe weather criteria.

## ATTACHMENT: SUPPLEMENTAL INFORMATION

## SUPPLEMENTAL INFORMATION

## **KEY POINTS OF CONTACT**

#### Licensee

- C. Schwarz, Site Vice President
- V. Beilfuss, Project Manager
- A. Blind, Engineering Director
- N. Brott, Emergency Preparedness Coordinator
- K. Bowers, Radiation Protection
- J. Burnett, RETS/REMP Specialist
- T. Davis, Regulatory Compliance
- B. Dotson, Regulatory Compliance
- J. Fontaine, Senior Emergency Planning Coordinator
- J. Ford, Corrective Action Manager
- M. Ginzel, Radiation Protection
- G. Goralski, Design Engineering Supervisor
- J. Hill Entergy/MP&C Manager
- T. Horan, Operations Training Superintendent
- D. Karnes, Operations Training
- B. Kemp, Entergy/Design Engineering Manager
- T. Kirwin, Plant General Manager
- S. Martin, Operations Initial Training supervisor
- S. Mims, Radioactive Material Shipper
- D. Moody, Radiation Protection
- B. Nixon, Assistant Operations Manager
- P. Schmidt, Simulator Training Supervisor
- T. Shewmaker, Chemistry Manager
- C. Sherman, Radiation Protection Manager
- M. Sicard, Operations Manager
- G. Sleeper, Assistant Operations Manager
- D. Watkins, Radiation Protection Supervisor

#### Nuclear Regulatory Commission

M. Chawla

# LIST OF ITEMS OPENED, CLOSED, AND DISCUSSED

# <u>Opened</u>

05000255/2010002-01	NCV	Inadequate Fire Barrier (1R05)
05000255/2010002-02	NCV	Improper Construction of Scaffolding (1R05)
05000255/2010002-03	NCV	Failure to Adequately Manage Changes to the ODCM (40A5)

# <u>Closed</u>

05000255/2010002-01	NCV	Inadequate Fire Barrier (1R05)					
05000255/2010002-02	NCV	nproper Construction of Scaffolding (1R05)					
05000255/2009005-03	URI	Adequacy of Building Lightning Protection (4OA5)					
05000255/2008004-01	URI	Justification regarding changes to the ODCM with respect to environmental monitoring, commitments in terms of sampling locations, monitoring and measurement frequencies (4OA5)					
05000255/2010002-03	NCV	Failure to Adequately Manage Changes to the ODCM (40A5)					

## LIST OF DOCUMENTS REVIEWED

#### 1R01 Adverse Weather Protection

- ONP-12, Acts of Nature, Revision 26

## 1R04 Equipment Alignment

- CR-PLP-2009-05533, Component Cooling Water Lacks Margin, December 12, 2009
- SOP-12, Feedwater System, Revision 57
- SOP-16, Component Cooling Water System, Revision 32
- SOP-22, Emergency Diesel Generators. Revision 46
- SOP-3, Safety Injection and Shutdown Cooling System, Revision 76
- SOP-4, Containment Spray System, Revision 4

## 1R05 Fire Protection

- Analysis, Wall between 1D Switchgear Room and Control Room, September 25, 1991
- CR-PLP-2010-0264, Scaffold Erected to Perform Work on V-24C was not in accordance with EN-MA-133, January 19, 2010
- CR-PLP-2010-0315, Adverse Trend in Control and Inspection of Scaffolding Activities, January 22, 2010
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- CR-PLP-2010-0443, Material Staged without Transient Material Evaluation, February 1, 2010
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- EN-DC-161, Control of Combustibles, Revision 3
- EN-MA-133, Control of Scaffolding, Revision 6
- Palisades Plant Fire Hazards Analysis Report, Revision 7

## 1R11 Licensed Operator Regualification Program

- 2008 Written Requal Examination Sample Plan
- Cycle 20 Core Performance Test; September 12-19, 2007
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- EN-TQ-114; Licensed Operator Requalification Training Program Description; Revision 0
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- EN-TQ-210; Conduct of Simulator Training; Revision 0
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- Palisade's 2010 Annual Operating Test (Week 2 Simulator Scenarios and Job Performance Measures); January 2010
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- Palisades Operating Training Self-Assessment; January 22-25, 2008
- PL-LOR-TPD; "Training Program Description"; Revision 2
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- SS-01; Steady State Test; November 25, 2008
- T-02; Simultaneous Trip of All Feedwater Pumps; April 1, 2009
- T-02; Simultaneous Trip of All Feedwater Pumps; October 27, 2008
- T-06; Main Turbine Trip from Maximum Power Level which Does Not Result in Immediate Reactor Trip; November 11, 2008
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- T-09; Maximum Size Unisolable Main Steam Line Rupture; April 1, 2009
- T-09; Maximum Size Unisolable Main Steam Line Rupture; November 11, 2008

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- Chemical Volume Control System Health Report, Second Half 2009, Revision 1
- CR-PLP-2007-02115, 152-216 Breaker has both Red and Green Lights Lit, May 17, 2007
- CR-PLP-2007-03057, P-52C Has Exceeded Maintenance Rule Performance Criteria, July 26, 2007
- CR-PLP-2007-04118, MV-CC923 Leaks By at a Rate of Approximately 685 gpm, September 18, 2007
- CR-PLP-2008-1232, P-55B Number 3 Cylinder Found Damaged, March 16, 2008
- CR-PLP-2009-00043, Chemical Volume Control had a Repeat Functional Failure, January 7, 2009
- CR-PLP-2009-02774, Amount of Oil Drained from P-52B less than what Added by >20%, May 20, 2009
- CR-PLP-2009-03773, Leakby on CV-0918, CCW Surge Tank T-3 Fill, August 3, 2009
- CR-PLP-2009-04312, P-52A Auto-Started when P-52C Started, September 14, 2009
- CR-PLP-2009-05533, Component Cooling Water Pumps Lack Adequate Inservice Testing Margin, December 3, 2009
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- CR-PLP-2009-5648, P-55A/B/C has Experienced a Repeat Maintenance Rule Functional Failure, December 9, 2009
- EGAD-EP-10, Palisades Maintenance Rule Scoping Document, Revision 5
- Palisades Chemical Volume Control Maintenance Rule Performance Indicators, February 1, 2010
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- Selected Operating Log Entries Associated with Component Cooling Water System

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- ADM-4.02, Control of Equipment, Revision 53
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- Work Week 1010 Schedule
- Work week 1011 schedule

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- CR-PLP-2010-00552, 1-1 EDG (K-6A) After Cooler has dirty Cooling Fins, February 8, 2010
- CR-PLP-2010-01133, Purchase Order Failed to Specify the Correct Specific Test Conditions per Technical Specifications, March 19, 2010
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- Eval 09-0601, Core Operating Limits report 10 CFR 50.59 evaluation, Revision 0

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- ANSI B31.1-1973 Power Piping
- CR-PLP-2010-00975, At 1825 hours, Numerous Alarms Received as a Result of Grid Disturbance, March 7, 2010
- DBD 1.06, Control Room HVAC System, Revision 7
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- EN-EE-G-001, Large Power Transformer Inspection Guidelines, Revision 1
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- ASME OM Code-2001 (Addenda thru 2003) for Operation and Maintenance of Nuclear Power Plants
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- EA-BWB-96-01, Heat Balance Calculation Using the Ultrasonic Flowmeter Measurement Device, Revision 5
- MO-33, Control Room Ventilation Emergency Operation, Revision 18
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- Drill and exercise Performance Indicators for Drill on January 27, 2010
- Palisades Nuclear Plant Graded Exercise Practice 1, January 27, 2010

## 2RS8 Radioactive Solid Waste Processing and Radioactive Material Handling, Storage, and Transportation

- CR-HQN-2009-0400; SER 02-09 Recurring Events: Radioactive Shipments Exceed Regulatory Limits, May 15, 2009
- CR-PLP-2009-04722; 2008 Annual Effluent and Waste Report Contains Conflicting Information, October 9, 2009
- EN-RW-102; Radioactive Shipping Procedure; Revision 7
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- EN-RW-104; Attachment 9.1; 10CFR61 Part 61 Waste Stream Sample Screening and Evaluation; DAW, July 25, 2008
- EN-RW-104; Attachment 9.1; 10CFR61 Part 61 Waste Stream Sample Screening and Evaluation; DAW, September 16, 2009
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- EN-RW-104; Attachment 9.2; Quarterly Trending Documentation, January 19, 2009
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- EN-RW-104; Scaling Factors; Revision 6

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- Lesson Plan 80011362; DOT Hazmat Safety Training, Revision 2
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- Procedure No HP-6.35; Attachment 1; Trending for Shifts in Scaling Factors, May 13, 2008
- Procedure No HP-6.35; Attachment 1; Trending for Shifts in Scaling Factors, July 22, 2008
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- Snapshot Assessment; Radwaste Shipping, September 8, 2009 September 10, 2009

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- CR-PLP-2009-3012, Air Supply Pressure for CV-3027, SIRWT RECIRC is low at 172psig, June 8, 2009
- CR-PLP-2009-3377, Gas Void Identified in High Pressure Safety Injection Subcooling Line, July 1, 2009
- Palisades Nuclear Plant Mitigating Systems Performance Indicator Basis Document, June 26, 2008
- Selected Operating Logs from 2009

## 40A5 Other Activities

- 10-4001-01, NFPA Code Compliance review, April 2, 2010
- CR-PLP-2008-03273; Identified Differences between Current ODCM and Last NRC-Approved ODCM, July 31, 2008
- CR-PLP-2009-05798; December 2003 Technical Basis for ODCM Revision May Not Be Entirely Accurate, December 17, 2009
- CR-PLP-2009-05800; Compliance with 10 CFR Part 50, Appendix I, February 17, 2009
- CR-PLP-2010-01013; Further Justification May Be Needed to Demonstrate Drinking Water Sampling Locations, March 10, 2010
- Licensing Correspondence Record Summary; Technical Specification Change Request Radiological Technical Specifications Generic Letter 89-01 (TAC No. 75060), October 13, 1989
- Proc No 10.41; Procedure Traveler and Associated Reviews; ODCM Appendix A; Revision 11, January 2, 2004

# LIST OF ACRONYMS USED

BTP CAP CFR CR EDG IMC IP LORT MSPI NCV NRC ODCM PI REMP SAT SDP TS UFSAR	Branch Technical Position Corrective Action Program Code of Federal Regulations Condition Report Emergency Diesel Generator Inspection Manual Chapter Inspection Procedure Licensed Operator Requalification Training Mitigating Systems Performance Index Non-Cited Violation U.S. Nuclear Regulatory Commission Offsite Dose Calculation Manual Performance Indicator Radiological Environmental Monitoring Program Systems Approach to Training Significance Determination Process Technical Specification Updated Final Safety Analysis Report

C. Schwarz

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Sincerely,

## /RA/

John B. Giessner, Chief Branch 4 Division of Reactor Projects

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