

Oyster Creek Generating Station
Route 9 South
PO Box 388
Forked River, NJ 08731

www.exeloncorp.com

ASME Code, Section XI
10CFR50.55a

RA-11-014

March 1, 2011

U.S. Nuclear Regulatory Commission
ATTN: Document Control Desk
Washington, DC 20555

Oyster Creek Nuclear Generating Station
Renewed Facility Operating License No. DPR-16
Docket No. 50-219

Subject: Oyster Creek Nuclear Generating Station (OCNGS) 1R23 Refueling Outage Inservice Inspection (ISI) Owner's Activity Report and Attachments

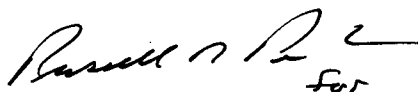
The purpose of this letter is to provide the Oyster Creek Nuclear Generating Station Owner's Activity Report (OAR-1) for Inservice Inspections as required by the American Society of Mechanical Engineers (ASME) Code, Section XI, 1995 Edition with 1996 Addenda and ASME Code Case N-532-4 Repair/Replacement Activity Documentation Requirements and Inservice Summary Report Preparation and Submission – Section XI, Division 1.

Attachment 1 is the ISI Owner's Activity Report covering ISI activities associated with 1R23 Refueling Outage which started on November 1, 2010, and was the first outage of the third period of the current ISI inspection interval.

Attachment 2 includes the NIS-2 Forms, "Form NIS-2 Owner's Report for Repairs or Replacements," addressing repairs or replacements where documentation was completed between December 19, 2008 and October 31, 2010.

If you should have any questions, please contact the Oyster Creek ISI Coordinator, Gregory Harttraft at 609-971-2287.

Sincerely,



Michael J. Massaro
Vice President
Oyster Creek Nuclear Generating Station

A047
NRR

U. S. Nuclear Regulatory Commission

March 1, 2011

Page 2 of 2

Enclosures:

Attachment 1 – ISI Owner's Activity Report – 1R23 Outage

Attachment 2 - NIS-2 Forms

cc: USNRC, Regional Administrator, Region I
USNRC, Senior Project Manager, NRR
USNRC, Senior Resident Inspector
Gary Gustofson, Hartford Steam Boiler I&I Co. of CT

Attachment 1

ISI Owner's Activity Report – 1R23 Outage

OYSTER CREEK GENERATING STATION, UNIT No. 1 – 1R23 OAR REPORT

FORM OAR-1 OWNER'S ACTIVITY REPORT

Report Number 1R23

Plant Oyster Creek Generating Station, US Route 9 South, Forked River, NJ 08731

Unit No. 1 Commercial Service Date December 23, 1969 Refueling Outage No. 23

Current Inspection Interval ISI = Fourth / CISI = Second

Current Inspection Period ISI = Third / CISI = First

Edition and Addenda of Section XI Applicable to the inspection plans 1995 Edition through 1996 Addenda

CISI (IWE & IWL) – 2001 Edition through 2003 Addenda

Date and revision of inspection plan 06/24/10 Revision 7 - ISI; 09/10/09 Revision 0 - CISI

Edition & Addenda of Section XI applicable to repairs and replacements, if different than the inspection plans
N/A

Code Cases used: N-416-3, N-460, N-526, N-532-4, N-566-2 & N-586-1

CERTIFICATE OF CONFORMANCE

I certify that (a) the statements made in this report are correct; (b) the examinations and tests meet the Inspection Plan as required by the ASME Code, Section XI; and (c) the repair/replacement activities and evaluations supporting the completion of 1R23 conform to the requirements of Section XI.

Signed Gregory Hartcraft Gregory Hartcraft, ISI Program Owner Date 2/25/11
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 New Jersey and employed by Hartford Steam Boiler Inspection and Insurance Company of Connecticut have inspected the items described in this Owner's Activity Report, 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 repair/replacement activities and evaluation 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.

Inspector's Signature

Commissions NB13855 – ANI NJ948

National Board, State, Province, and Endorsements

Date 2/25/11

TABLE 1

ITEMS WITH FLAWS OR RELEVANT CONDITIONS THAT REQUIRED EVALUATION FOR
CONTINUED SERVICE

Examination Category	Examination Item Number	Item Description	Evaluation Description
B-J	B9.11	NG-E-007 Valve to Elbow Weld	ASME - IWB-3600 Flaw Evaluation of a circumferential indication found in reactor recirculation line weld NG-E-007 during regularly scheduled non-destructive examinations (NDE)
E-A	E1.11	NR01 Drywell Head	FME (weld wire) identified attached to inside surface of Drywell Head
F-A	F1.10	212-BP-368-R11-0007 Hydraulic Snubber	Evaluate the as-found Snubber piston setting that is outside the normal acceptable range as acceptable as-is.
F-A	F1.20	211-BP-NE-1-H1-0045 Support	Evaluate the as-found load settings on the spring can type hanger as acceptable

TABLE 2

ABSTRACT OF REPAIR / REPLACEMENT ACTIVITIES REQUIRED
FOR CONTINUED SERVICE

Code Class	Item Description	Description of Work	Date Completed	Repair / Replacement Plan Number
1	411-0009B Support	Installed new mechanical snubber	2/25/11	R2153133
1	411-0002 Support	Installed new mechanical snubber	2/25/11	R2153133
1	411-0009A Support	Installed new mechanical snubber	2/25/11	R2153133
1	223-0032A Support	Installed new mechanical snubber	2/25/11	R2153133
1	411-0029A Support	Installed new mechanical snubber	2/25/11	C2024581
1	212-0155 Support	Installed new mechanical snubber	2/25/11	R2153133
1	NP-2-0021 Socket Weld	Repair of rounded indication in the edge of a stainless steel socket weld	2/21/11	C2023136
3	6 inch CH-5 Piping	Aluminum piping replacement – condensate transfer piping	1/11/11	C2022628
2	6 inch NZ-2 Piping	Core spray pipe replacement due to local corrosion on inside diameter	2/24/11	C2023712
3	541-1056 Support	Tighten loose nuts on support to wall anchor bolts	2/21/11	C2023067

Attachment 2

NIS-2 Forms

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As required by the Provisions of the ASME Code Section XI

1. Owner AmerGen Energy Co. L.L.C. Date December 19, 2008
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit OYSTER CREEK
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# R2127792
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by AmerGen Energy Co LLC Type Code Symbol Stamp N/A
Name
200 EXELON WAY, KENNETT SQUARE, PA Authorization No. N/A
Address Expiration Date N/A
4. Identification of System Emergency Service Water System (532)
5. (a) Applicable Construction Code ASME B31.1 1955 Edition, N/A Addenda, Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
V-3-133				Sys 532		Replacement	No

7. Description of Work: Replaced 2" check valve with new valve.
8. Tests Conducted Hydrostatic Nominal Operating Pressure X
Other psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 ½ x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced 2" check valve with new valve.

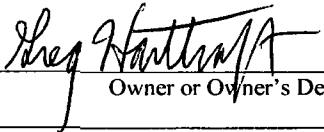
Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A

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

Signed  ISI Program Engineer Date DEC. 19th, 2008
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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 10/16/08 to 8/11/09 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.

 Commissions NB 9364 (1) (N) NJ766
Inspector's Signature National Board, State, Province, and Endorsements

Date 8/11/09 -2008

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As required by the Provisions of the ASME Code Section XI

1. Owner AmerGen Energy Co. L.L.C. Date January 26, 2009
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit OYSTER CREEK
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# R2120590
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by AmerGen Energy Co LLC Type Code Symbol Stamp N/A
Name
200 EXELON WAY, KENNETT SQUARE, PA Authorization No. N/A
Address Expiration Date N/A
4. Identification of System Emergency Service Water System (532)
5. (a) Applicable Construction Code ASME B31.1 1955 Edition, N/A Addenda, _____ Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
V-3-68				Sys 532		Replacement	No

7. Description of Work: Replaced 10" check valve with new valve.
8. Tests Conducted Hydrostatic _____ Nominal Operating Pressure X
Other _____ psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced 10" check valve with new valve.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A

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

Signed Greg Hartman ISI Program Engineer Date JANUARY 26th, 2009
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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 3/12/09 to 5/14/09, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.

Scott R. Selig
Inspector's Signature

Commissions NB 9364 (J) (N) N1766
National Board, State, Province, and Endorsements

Date 5/5 2009

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As required by the Provisions of the ASME Code Section XI

1. Owner AmerGen Energy Co. L.L.C. Date January 26, 2009
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit OYSTER CREEK
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# R2120358
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by AmerGen Energy Co LLC Type Code Symbol Stamp N/A
Name
Authorization No. N/A
200 EXELON WAY, KENNETT SQUARE, PA Expiration Date N/A
Address
4. Identification of System Emergency Service Water System (532)
5. (a) Applicable Construction Code ASME B31.1 1955 Edition, N/A Addenda, _____ Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
V-3-67				Sys 532		Replacement	No

7. Description of Work: Replaced 10" check valve with new valve.
8. Tests Conducted Hydrostatic _____ Nominal Operating Pressure X
Other _____ psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced 10" check valve with new valve.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A

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

Signed [Signature] ISI Program Engineer Date JANUARY 26th 2009
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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 3/12/09 to 5/5/09 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.

[Signature] Commissions NB 9364 (1) (N) NJ766
Inspector's Signature National Board, State, Province, and Endorsements

Date 5/5/09 5/5/09 2009

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As required by the Provisions of the ASME Code Section XI

1. Owner AmerGen Energy Co. L.L.C. Date June 4, 2009
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit One
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# R2143760
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by AmerGen Energy Co LLC Type Code Symbol Stamp N/A
Name
Authorization No. N/A
200 EXELON WAY, KENNETT SQUARE, PA Expiration Date N/A
Address
4. Identification of System Emergency Service Water System (532)
5. (a) Applicable Construction Code ASME B31.1 1989 Edition, N/A Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve				V-3-133		Replacement	No

7. Description of Work: Replaced ESW keep fill check valve V-3-133 with new valve.
8. Tests Conducted Hydrostatic _____ Nominal Operating Pressure X
Other ISLT VT-2 psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 ½ x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced ESW keep fill check valve V-3-133 with new valve.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A

Certificate of Authorization No. N/A

Expiration Date N/A

Signed



ISI Program Engineer

Date

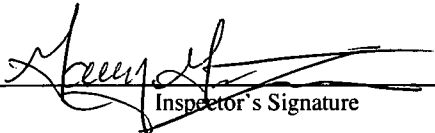
JAN. 27, 2011

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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 1/31/11 to 1/31/11, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.



Inspector's Signature

Commissions NB 13855 ANI

National Board, State, Province, and Endorsements

Date

1/31

2011

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As required by the Provisions of the ASME Code Section XI

1. Owner AmerGen Energy Co. L.L.C. Date November 9, 2009
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit 1
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# R2145683
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by AmerGen Energy Co LLC Type Code Symbol Stamp N/A
Name
Authorization No. N/A
200 EXELON WAY, KENNETT SQUARE, PA Expiration Date N/A
Address
4. Identification of System Emergency Service Water System (532)
5. (a) Applicable Construction Code ASME B31.1 1955 Edition, N/A Addenda, N/A Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve				V-3-133		Replacement	No

7. Description of Work: Replaced ESW keep fill check valve V-3-133 with new valve.
8. Tests Conducted Hydrostatic _____ Nominal Operating Pressure X
Other ISLT VT-2 psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced ESW keep fill check valve V-3-133 with new valve.


Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A


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

Signed  ISI Program Engineer Date 2/25, 2011
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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 2/25/11 to 2/25/11, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.

 Commissions NB13855 ANI - NJ948
Inspector's Signature National Board, State, Province, and Endorsements
Date 2/25, 2011

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As required by the Provisions of the ASME Code Section XI

1. Owner EXELON NUCLEAR CORPORATION Date April 14, 2010
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit OYSTER CREEK
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# C2017482
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by AmerGen Energy Co LLC Type Code Symbol Stamp N/A
Name
200 EXELON WAY, KENNETT SQUARE, PA Authorization No. N/A
Address Expiration Date N/A
4. Identification of System Main Steam System (411)
5. (a) Applicable Construction Code ASME B31.1 1955 Edition, N/A Addenda, N/A Code Case N-416-3
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Globe Valve	Edwards	-----	NA	V-1-11	2008	Replacement	No

7. Description of Work: Replaced Aux. Steam supply isolation valve V-1-11 with a new valve.
8. Tests Conducted Hydrostatic NA Nominal Operating Pressure X
Other ISLT VT-2 / 1000 psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced Aux. Steam supply isolation valve V-1-11 with a new valve.

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A

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

Signed Meg Hawthorn ISI Program Engineer Date APRIL 14, 2010
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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 10/1/08 to 4/14/10, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.

M. Scott Hewitt Commissions PA2056 NJ431
Inspector's Signature National Board, State, Province, and Endorsements

Date 4/14 2010

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS**As required by the Provisions of the ASME Code Section XI**

1. Owner EXELON NUCLEAR CORPORATION Date April 29, 2010
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit OYSTER CREEK
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# R2151240
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by AmerGen Energy Co LLC Type Code Symbol Stamp N/A
Name
200 EXELON WAY, KENNETT SQUARE, PA Authorization No. N/A
Address Expiration Date N/A
4. Identification of System Emergency Service Water System (532)
5. (a) Applicable Construction Code ASME B31.1 1955 Edition, N/A Addenda, N/A Code Case N-416-3
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve	Goodwin	-----	NA	V-3-131	2008	Replacement	No

7. Description of Work: Replaced ESW keep-fill check valve V-3-131 with a new valve.
8. Tests Conducted Hydrostatic NA Nominal Operating Pressure X
Other ISLT VT-2 / 136 psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced ESW keep-fill check valve V-3-131 with a new valve.


Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A

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

Signed  ISI Program Engineer Date APRIL 29, 2010
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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 10/1/08 to 4/29/10, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.

 Commissions PA2056 NJ431
Inspector's Signature National Board, State, Province, and Endorsements

Date 4/29/2010 2010

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As required by the Provisions of the ASME Code Section XI

1. Owner EXELON NUCLEAR CORPORATION Date June 2, 2010
Name
200 EXELON WAY, KENNETT SQUARE, PA Sheet 1 of 2
Address
2. Plant OYSTER CREEK GENERATING STATION Unit OYSTER CREEK
Name
US ROUTE 9 SOUTH, FORKED RIVER, NJ 08731 WO# R2156445
Address Repair Organization P.O. No., Job No., etc.
3. Work Performed by EXELON NUCLEAR CORPORATION Type Code Symbol Stamp N/A
Name
Authorization No. N/A
200 EXELON WAY, KENNETT SQUARE, PA Expiration Date N/A
Address
4. Identification of System Emergency Service Water System (532)
5. (a) Applicable Construction Code ASME B31.1 1955 Edition, N/A Addenda, N/A Code Case N-416-3
(b) Applicable Edition of Section XI Utilized for Repairs or Replacements 1995 w/ 1996 Addenda
6. Identification of Components Repaired or Replaced and Replacement Components.

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
Check Valve	Goodwin	-----	NA	V-3-133	2008	Replacement	No

7. Description of Work: Replaced ESW keep-fill check valve V-3-133 with a new valve.
8. Tests Conducted Hydrostatic NA Nominal Operating Pressure X
Other ISLT VT-2 / 106 psi Normal Operating Temp. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 x 11 in. (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks: Replaced ESW keep-fill check valve V-3-133 with a new valve.


Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement (repair or replacement) conforms to the rules of the ASME Code, Section XI.

Type of Code Symbol Stamp N/A

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

Signed  ISI Program Engineer Date 6/2, 2010
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 NEW JERSEY and employed by HSB OF CT of HARTFORD, CONNECTICUT have inspected the components described in this Owner's Report during the period 10/1/08 to 6/2/10, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's 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.

 Commissions PA2056 NJ431
Inspector's Signature National Board, State, Province, and Endorsements

Date 6 - 2 - 2010