

**CAMECO RESOURCES,
CROW BUTTE OPERATION**



**86 Crow Butte Road
P.O. Box 169
Crawford, Nebraska 69339-0169**

**(308) 665-2215
(308) 665-2341 – FAX**

August 11, 2011

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

Mr. Michael Linder, Director
Nebraska Department of Environmental Quality
PO Box 98922
Lincoln, Nebraska 68509-8922

Subject: Exceedance of Well Head Manifold Pressure Limitations
Class III Underground Injection Control Permit NE0122611

Dear Mr. Linder:

Part II, Section A.1 of the referenced Class III Underground Injection Control (UIC) permit requires that Crow Butte Operation (CBO) maintain well head injection manifold pressure at a level not to exceed 100 PSIG. On August 9, 2011 at 4:15 a.m. MST, CBO was shutting down MU 10 wellhouses to tie-in a new trunkline. During this process, the trunkline injection pressure in Wellhouse 36 increased to 130 psi. The injection pressure reducing valve (PRV), which controls manifold pressure, failed causing manifold pressure to remain at this level for a period of 10 minutes.

When the pressure limitation was exceeded, the alarm in the wellhouse was triggered which alerted the Central Plant Control Room. Plant personnel were in the field near Wellhouse 36, and were able to respond immediately. An attempt was made to clean the PRV to relieve the pressure. When this failed to be effective, the wellhouse was taken off line causing the injection pressure to drop to zero. Due to the immediate response of plant personnel and the resulting short duration of the pressure exceedance, no apparent environmental damage resulted from this incident. Flow in the wellhouse at the time of the event was 80 GPM through ten injection wells. CBO mechanically integrity tested the ten injection wells that were affected and the tests show that there was no damage to the wells. (Copies of these tests are attached to this report).

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Mr. Michael Linder
August 11, 2011
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This incident will be investigated through the CBO corrective action process and corrective actions will be taken as appropriate.

Title 122 Chapter 21 Section 001.06 requires 24 hour telephone notification of a noncompliance with the permit conditions, followed by a written report in five days. General Manager Jim Stokey notified Mrs. Jennifer Coughlin of the pressure exceedance at 10:55 a.m. MST on August 9, 2011. Mr. Ron Burrows, Project Manager, for the Nuclear Regulatory Commission was notified by SHEQ Larry Teahon at 12:00 p.m. MST on August 9, 2011.

If you have any questions, please do not hesitate to call me at (308) 665-2215 ext 111.

Sincerely,
CAMECO RESOURCES
CROW BUTTE OPERATION

A handwritten signature in black ink, appearing to read "Jim Stokey". The signature is fluid and cursive.

Jim Stokey
General Manager

Attachments

cc: U.S. Nuclear Regulatory Commission
Mr. Ron Burrows - ADDRESSEE ONLY
Fuel Cycle Licensing Branch
Mailstop T8-F5
Washington, DC 20555

Mr. Dave Carlson, NDEQ, Chadron Field Office

CBO-File

Ec: CR-Cheyenne



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611
 Project: Crowbutte Well No: 2936
 Casing Type: White Certalok Diameter: 4 1/2"
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 402 Depth to Test Packer(s) Top Ground Level
 Comments: Bottom 393

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
7:25	0	125
7:30	5	122
7:35	10	120
7:40	15	118
7:45	20	116

Test Performed By: Rich Purnell
 Date: 8-10-11
 Calibration Performed By: AD
 Date: 8-8-11

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on inquiry of those individuals immediately responsible for obtaining information, I believe that the information is true, accurate, and complete. Further, I certify awareness that there are significant penalties for submitting false information, including the possibility of a fine and imprisonment.

By _____ TITLE _____
PRINTED NAME OF PERSON SIGNING
 By _____ SIGNATURE _____ DATE _____
SIGNATURE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611
 Project: Crowbutte Well No: 3120
 Casing Type: White Certalock Diameter: 4 1/2"
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 394 Depth to Test Packer(s) Top - Ground Level
Bottom - 383
 Comments: _____

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
8:55	0	125
9:00	5	124
9:05	10	122
9:10	15	120
9:15	20	119

Test Performed By: Rich Dunn
 Date: 8-10-11
 Calibration Performed By: RD
 Date: 8-8-11

CERTIFICATION

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By _____ TITLE _____
PRINTED NAME OF PERSON SIGNING
 By _____ DATE _____
SIGNATURE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611

Project: Crowbutte Well No: 3073

Casing Type: White Certalok Diameter: 4 1/2"

Hole Depth: _____ Casing Depth: _____

Screened Interval(s): _____

Depth to K-Packer: 389 Depth to Test Packer(s) Top - Ground Level

Comments: Bottom - 378

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
11:00	0	125
11:05	5	124
11:10	10	123
11:15	15	122
11:20	20	121

Test Performed By: Rich Duran

Date: 8-10-11

Calibration Performed By: RF

Date: 8-8-11

CERTIFICATION

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By _____
PRINTED NAME OF PERSON SIGNING

TITLE

By _____
SIGNATURE

DATE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611
 Project: Crowbutte Well No: 2874
 Casing Type: White Certalok Diameter: 4 1/2"
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 387 Depth to Test Packer(s) Top-Ground Level
 Comments: Bottom - 378

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
12:55	0	125
1:00	5	124
1:05	10	122
1:10	15	121
1:15	20	119

Test Performed By: Rich Dunn
 Date: 8-10-11
 Calibration Performed By: RJ
 Date: 8-8-11

CERTIFICATION

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 By _____ DATE _____
SIGNATURE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611
 Project: Crow Butte Well No: 3125
 Casing Type: White Diameter: 4.5
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 380 Depth to Test Packer(s) Top Ground level
 Comments: Bottom 373

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
1:30	0	125
1:35	5	123
1:40	10	121
1:45	15	120
1:50	20	118

Test Performed By: Justin Didier
 Date: 8-10-11
 Calibration Performed By: JD
 Date: 8-8-11

CERTIFICATION

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PRINTED NAME OF PERSON SIGNING
 By _____ DATE _____
SIGNATURE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611

Project: Crow Butte Well No: 3123

Casing Type: White Conduits Diameter: 4.5

Hole Depth: _____ Casing Depth: _____

Screened Interval(s): _____

Depth to K-Packer: 384 Depth to Test Packer(s) Top ground level

Comments: Bottom 373

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
11:10	0	125
11:15	5	123
11:20	10	121
11:25	15	119
11:30	20	118

Test Performed By: Justin Didier

Date: 8-10-11

Calibration Performed By: JM

Date: 8-8-11

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on inquiry of those individuals immediately responsible for obtaining information, I believe that the information is true, accurate, and complete. Further, I certify awareness that there are significant penalties for submitting false information, including the possibility of a fine and imprisonment.

By _____
PRINTED NAME OF PERSON SIGNING

TITLE

By _____
SIGNATURE

DATE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611
 Project: Crow Butte Well No: 4104
 Casing Type: White Cerclite Diameter: 4.5
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 352 Depth to Test Packer(s) Top Ground level
 Comments: Bottom 343

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
9:40	0	125
9:45	5	124
9:50	10	123
9:55	15	122
10:00	20	121

Test Performed By: Justin Didier
 Date: 8-10-11
 Calibration Performed By: JD
 Date: 8-8-11

CERTIFICATION

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By _____
PRINTED NAME OF PERSON SIGNING

TITLE

By _____
SIGNATURE

DATE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0127611
 Project: CrowButte Well No: 3095
 Casing Type: White Certilok Diameter: 4.5
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 371 Depth to Test Packer(s) Top ground level
 Comments: Bottom 363

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
7:50	0	125
7:55	5	123
8:00	10	121
8:05	15	119
8:10	20	118

Test Performed By: Justin Didier
 Date: 8-10-11
 Calibration Performed By: JD
 Date: 8-8-11

CERTIFICATION

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By _____ PRINTED NAME OF PERSON SIGNING _____ TITLE _____
 By _____ SIGNATURE _____ DATE _____



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: C.B.R. Permit No: NE 0122611
 Project: CROW Butte Well No: 30 84
 Casing Type: WHITE CERTALOB Diameter: 4 1/2"
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 385' Depth to Test Packer(s) Top of Round Neve.
Bottom - 373'
 Comments: _____

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
7:50	0	125
7:55	5	124
8:00	10	123
8:05	15	121
8:10	20	120

Test Performed By: [Signature]
 Date: 8-10-11
 Calibration Performed By: [Signature]
 Date: 8-8-11

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on inquiry of those individuals immediately responsible for obtaining information, I believe that the information is true, accurate, and complete. Further, I certify awareness that there are significant penalties for submitting false information, including the possibility of a fine and imprisonment.

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PRINTED NAME OF PERSON SIGNING
 By _____ DATE _____
SIGNATURE



Nebraska Department
of Environmental Quality

Casing Integrity Test Report

Company: CBR Permit No: NE0122611
 Project: Crowbutte Well No: 3092
 Casing Type: white Certalok Diameter: 4 1/2"
 Hole Depth: _____ Casing Depth: _____
 Screened Interval(s): _____
 Depth to K-Packer: 391 Depth to Test Packer(s) Top Ground level
 Comments: Bottom - 383

TIME	ELAPSED TIME (Min)	PRESSURE (PSIG)
7:40	0	125
7:45	5	124
7:50	10	124
7:55	15	123
8:00	20	122

Test Performed By: Richard [Signature]
 Date: 8-11-11
 Calibration Performed By: [Signature]
 Date: 8-8-11

CERTIFICATION

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By _____ TITLE _____
PRINTED NAME OF PERSON SIGNING
 By _____ DATE _____
SIGNATURE