



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**
REGION III
2443 WARRENVILLE RD. SUITE 210
LISLE, IL 60532-4352

January 17, 2017

Mr. Daniel G. Stoddard
Senior Vice President and Chief Nuclear Officer
Dominion Energy Kewaunee, Inc.
Innsbrook Technical Center
5000 Dominion Boulevard
Glen Allen, VA 23060-6711

SUBJECT: NRC INSPECTION REPORT NOS. 05000305/2016001(DNMS);
07200064/2016001(DNMS) – KEWAUNEE POWER STATION

Dear Mr. Stoddard:

On December 31, 2016, the U.S. Nuclear Regulatory Commission (NRC) completed onsite inspection activities for August through December 2016, at the permanently shut down Kewaunee Power Station (KPS) in Kewaunee, Wisconsin. The purpose of the inspection was to determine whether decommissioning activities were conducted safely and in accordance with NRC requirements. The enclosed report presents the results of this inspection, which were discussed with Mr. S. Yuen and other members of your staff on January 9, 2017.

During the inspection period, the NRC inspectors reviewed the following aspects of onsite activities: organization, management, and cost control at the site; safety reviews, design changes, and modifications; self-assessments, audits, and corrective actions; spent fuel pool safety; preoperational testing of an Independent Spent Fuel Storage Installation (ISFSI); decommissioning performance; occupational radiation exposure; effluent and environmental monitoring; and management and transportation of radioactive materials. The inspection consisted of an examination of activities at the site as they relate to safety and compliance with the Commission's rules and regulations. Areas examined during the inspection are identified in the enclosed report. Within these areas, the inspection consisted of a selective examination of procedures and representative records, observation of work activities, and interviews with personnel.

Based on the results of this inspection, no violations of NRC requirements were identified.

In accordance with Title 10 of the *Code of Federal Regulations* (CFR) 2.390, "Public Inspections, Exemptions, Requests for Withholding," 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's

D. Stoddard

2

Public Document Room or from the Publicly Available Records System (PARS) component of NRC's Agencywide Documents Access and Management System (ADAMS). ADAMS is accessible from the NRC's website at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room).

Sincerely,

/RA/

Michael A. Kunowski, Chief
Materials Control, ISFSI, and
Decommissioning Branch
Division of Nuclear Materials Safety

Docket Nos: 050-305; 072-064
License No: DPR-43

Enclosure:
IR Nos. 05000305/2016001(DNMS);
07200064/2016001(DNMS)

cc w/encl: Distribution via LISTSERV®

D. Stoddard

3

Letter to Daniel G. Stoddard from Michael A. Kunowski dated January 17, 2017

SUBJECT: NRC INSPECTION REPORT NOS. 05000305/2016001(DNMS);
07200064/2016001(DNMS) – KEWAUNEE POWER STATION

DISTRIBUTION w/encl:

Cynthia Pederson
Darrell Roberts
John Giessner
Christine Lipa
Bruce Watson

Ted Carter
Carole Ariano
Paul Pelke
Linda Linn
Allan Barker

Harral Logaras
MCID Inspectors

ADAMS Accession Number: ML17019A051

OFFICE	RIII DNMS	E	RIII DNMS	E				
NAME	REdwards		MKunowski					
DATE	01/13/17		01/17/17					

OFFICIAL RECORD COPY

U.S. NUCLEAR REGULATORY COMMISSION
REGION III

Docket Nos: 050-00305
072-00064

License No: DPR-43

Report Nos: 05000305/2016001(DNMS):
07200064/2016001(DNMS)

Licensee: Dominion Energy Kewaunee, Inc., (DEK)

Facility: Kewaunee Power Station (KPS)

Location: Kewaunee, Wisconsin

Dates: August 8, 2016, through December 31, 2016

Inspectors: Rhex A. Edwards, Senior Health Physicist
Bill C. Lin, Health Physicist

Approved by: Michael A. Kunowski, Chief
Materials Control, ISFSI, and
Decommissioning Branch
Division of Nuclear Materials Safety

Enclosure

EXECUTIVE SUMMARY

Kewaunee Power Station NRC Inspection Report 05000305/2016001(DNMS); 07200064/2016001(DNMS)

Kewaunee Power Station (KPS) operated at full power until May 7, 2013, when KPS shutdown and permanently ceased power operation. On May 14, 2013, KPS certified the permanent removal of fuel from the reactor vessel (ADAMS Accession No. ML13135A209). On May 31, 2013, the U.S. Nuclear Regulatory Commission (NRC) notified KPS that the Operating Reactor Assessment Program had ceased and that implementation of the Decommissioning Power Reactor Inspection Program would begin on June 1, 2013 (ADAMS Accession No. ML13151A375).

Currently, KPS is a permanently shut-down and defueled power reactor facility that was maintained in a safe storage (SAFSTOR) condition with spent fuel in wet storage and at an Independent Spent Fuel Storage Installation (ISFSI).

Organization, Management, and Cost Controls

- The licensee adequately implemented organization, management, and cost controls in accordance with regulatory requirements, license conditions, and the Technical Specifications (TSs). (Section 1.0)

Safety Reviews, Design Changes, and Modifications

- The licensee performed adequate safety evaluations or screenings, completed design change evaluations, and properly assessed decommissioning impacts of various work activities as required by Title 10 of the *Code of Federal Regulations* (CFR) 50.59. (Section 2.0)

Self-Assessment, Auditing, and Corrective Action

- Issues were identified by the licensee at appropriate thresholds and entered into the corrective action program (CAP). Issues were screened and prioritized commensurate with safety significance. Licensee evaluations determined the significance of issues, and included appropriate remedial corrective actions. (Section 3.0)

Spent Fuel Pool Safety

- The licensee maintained spent fuel pool (SFP) equipment used to maintain SFP water level and cooling in a safe manner. (Section 4.0)

Preoperational Testing of an ISFSI

- The licensee's preoperational testing program completed dry run demonstrations, in accordance with NAC MAGNASTOR Certificate of Compliance (CoC) 1031 requirements, in preparation for a spent fuel storage campaign. (Section 5.0)

Decommissioning Performance and Status Review

- The inspectors determined that the licensee conducted decommissioning activities in accordance with the regulations and license requirements. The inspectors verified that the licensee's activities to transition to a SAFSTOR condition were in accordance with TSs, the Updated Safety Analysis Report (USAR) and the Post-Shutdown Decommissioning Activities Report (PSDAR). Finally, the inspectors conducted plant tours to verify that the material condition of structures, systems, and components supported the safe storage of spent fuel and conduct of safe decommissioning. (Section 6.0)

Occupational Radiation Exposure

- Radiation Work Permit (RWP) and As Low As Is Reasonably Achievable (ALARA) reviews provided contamination controls and dose reduction measures appropriate for the work activities. Workers adhered to the radiological controls provided in the RWPs and ALARA plans and followed the radiation protection (RP) staff instruction. Personal monitoring devices were calibrated and radiation surveys were performed adequately to identify the hazards present. (Section 7.0)

Radioactive Waste Treatment, and Effluent and Environmental Monitoring

- The licensee controlled, monitored, and quantified releases of radioactive materials released to the environment to ensure offsite doses were within regulatory limits and were ALARA. (Section 8.0)

Solid Radioactive Waste Management and Transportation of Radioactive Materials

- Radioactive materials planned for shipment were classified and characterized appropriately in accordance with 10 CFR 61.55 and 61.66 so as to meet low-level waste burial site criteria. (Section 9.0)

Report Details

Summary of Plant Activities

During the inspection period, the licensee continued to prepare for SAFSTOR conditions. Specifically, the licensee continued to make preparations for a dry cask storage campaign to remove the remaining fuel from the SFP and place it on the ISFSI pad. The site previously constructed an ISFSI pad to accommodate NAC MAGNASTOR vertical dry fuel storage casks. Throughout this inspection period, the licensee prepared engineering evaluations, developed procedures, and performed demonstrations of the NAC MAGNASTOR system prior to loading the system with fuel.

1.0 Organization, Management, and Cost Controls at Permanently Shutdown Reactors (Inspection Procedure (IP) 36801)

1.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Procedures and processes the licensee established to resolve employee and safety concerns, and to assess the licensee's effectiveness at resolving identified problems;
- Implementation of CAP procedures;
- Implementation of a cost and personnel reduction strategy that did not adversely challenge public health and safety;
- Regulatory requirements were properly implemented with respect to the site organization, staffing, and staff qualifications;
- Future licensee plans for decommissioning organization and staffing would continue to meet regulatory requirements;
- Certified fuel handler and employee training programs were implemented in accordance with licensee procedures and NRC requirements;
- Licensee appropriately implemented TS, Technical Requirements Manual, PSDAR, and fire protection plan requirements and commitments;
- Licensee continued implementation of regulatory requirements that remained applicable as described in NRC Bulletins, Generic Letters, and Orders; and
- Licensee decommissioning activities were initiated, sequenced, and performed in a manner consistent with the PSDAR.

As part of the inspection, the inspectors verified that licensee programs and procedures were appropriately implemented by licensee staff. In addition, the inspectors verified

that when issues were identified, licensee personnel appropriately documented the issue in the CAP.

1.2 Observations and Findings

The inspectors determined through direct licensee observation; sampling of training programs, qualification matrices, and corrective action documents; and interviews with licensee personnel that the appropriate regulatory requirements and commitments were followed. During walkdowns, the inspectors concluded that the licensee maintained good housekeeping practices and adhered to fire protection program requirements.

No findings were identified.

1.3 Conclusions

The licensee adequately implemented organization, management, and cost controls in accordance with regulatory requirements, license conditions, and the TSs.

2.0 **Safety Reviews, Design Changes, and Modifications (IP 37801)**

2.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Determination that licensee procedures and processes conform to the regulation and guidance associated with 10 CFR 50.59;
- Procedures that control and implement design changes and modifications to assess that the procedures provided adequate guidance for implementation, review, and approval;
- Implementation of a sampling of design change modifications to verify that procedures and controls were followed; and confirm that the applicable changes were effectively implemented in the field and in plant procedures, drawings, and training programs if applicable; and
- Verification that changes made under 10 CFR 50.59 did not require prior NRC approval;

The inspectors verified that when issues were identified that licensee personnel appropriately documented the issue in the CAP.

2.2 Observations and Findings

The inspectors reviewed the licensee's programs for changes and performed a review of procedure and modification changes on a sample of licensee-approved changes.

The inspectors determined that when issues were identified, the issues were documented by the licensee in the CAP at an appropriate threshold.

No findings were identified.

2.3 Conclusions

The licensee performed adequate safety evaluations or screenings, completed design change evaluations, and properly assessed decommissioning impacts of various work activities as required by 10 CFR 50.59. (Section 2.0)

3.0 **Self-Assessments, Audits, and Corrective Actions (IP 40801)**

3.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Administrative procedures prescribed actions for the identification, evaluation, and resolution of problems;
- Licensee procedures prescribed thresholds for the performance of self-assessments, audits, and surveillances;
- Licensee management reviewed self-assessments, audits, and corrective actions to remain knowledgeable of plant performance;
- Self-assessments were conducted with technically qualified personnel and sufficient independence from the licensee;
- Issues or problems were identified and corrected in accordance with the licensee's CAP;
- Quality assurance personnel audited changes in the status of decommissioning and licensee organization; and
- Licensee management observed maintenance and surveillance activities, operations evolutions, and training.

The inspectors reviewed CAP documents to determine if a sufficiently low threshold for problem identification existed. The inspectors also reviewed the quality of follow-up evaluations, including extent-of-condition and whether the licensee assigned timely and appropriate prioritization for issue resolution commensurate with the significance of the issue. Issues that were repetitive and those with the potential for safety or regulatory consequence were evaluated further by the inspectors to assess apparent and/or common cause and significance.

3.2 Observations and Findings

The inspectors determined that issues were identified by the licensee at an appropriate threshold within various functional areas of the site and entered into the CAP. Issues were effectively screened, prioritized, and evaluated commensurate with safety significance. The scope and depth of evaluations were adequate in that the evaluations reviewed addressed the significance of issues and assigned an appropriate course of remedial action.

The inspectors verified that self-assessments conducted during the inspection period were performed with technically qualified personnel, and when appropriate, used personnel independent of the licensee. Finally, the inspectors verified that quality assurance personnel continued to audit changes implemented at the plant.

No findings were identified.

3.3 Conclusions

Issues were identified by the licensee at appropriate thresholds and entered into the CAP. Issues were screened and prioritized commensurate with safety significance. Licensee evaluations determined the significance of issues and included appropriate remedial corrective actions.

4.0 **Spent Fuel Pool Safety (IP 60801)**

4.1 Inspection Scope

The inspectors verified the safe wet storage of spent fuel in the auxiliary building. The review included: SFP siphon and drain down protection; SFP instrumentation, alarms, and leak detection systems; SFP chemistry and cleanliness controls; SFP criticality controls; and SFP system operation and electrical power supply adequacy.

4.2 Observations and Findings

The inspectors reviewed the service water system, the SFP cooling system, and SFP design drawings in addition to performing periodic walk downs of the SFP, accessible SFP cooling system piping, and areas of SFP makeup water piping to evaluate whether conditions existed that represented a siphon or drain path.

The inspectors reviewed SFP drawings and instrument alarm calibration records for the SFP level detector set points. The inspectors concluded that the detectors were appropriately calibrated and provided the licensee adequate time to implement abnormal operating procedures and restore SFP level or cooling if needed. The inspectors also validated through a review of operator logs and condition reports that the licensee was monitoring the leak detection collection container in the auxiliary building basement for signs of increased SFP liner leakage.

The inspectors observed the sampling and analyses of spent fuel water. The results of the analyses indicated that the SFP boron concentration was within TS limits. The inspectors also confirmed that the general housekeeping practices, foreign material

exclusion, combustible material control, and SFP chemistry procedures adequately protect the integrity and cooling of the spent fuel.

The inspectors reviewed electrical circuit drawings for the SFP pumps and confirmed that the pumps had redundant power supplies that were available and capable of supporting spent fuel cooling should they be needed. The inspectors also reviewed SFP procedures and operational strategies and confirmed that no significant changes occurred since the previous inspection.

No findings were identified.

4.3 Conclusions

The inspectors determined that the licensee was safely storing spent fuel in wet storage. Specifically, the SFP was adequately protected from a siphon or drain down event. The SFP instrumentation, alarms, and leakage detection systems were maintained and adequate. The SFP chemistry and cleanliness controls were implemented and adequate. The SFP cooling system electrical power supplies were reliable and licensee SFP operational strategies were consistent with those used during reactor power operations.

5.0 **Preoperational Testing of an ISFSI (IP 60854)**

5.1 Inspection Scope

The inspectors reviewed documents, observed activities, and interviewed plant personnel to assess the licensee's performance in the following areas:

- Preoperational test procedures for dry cask storage system loading, unloading, and transfer activities met acceptance criteria specified in commitments and requirements;
- Preoperational test procedures were prepared, reviewed, and initially approved in accordance with the licensee's administrative programs;
- Licensee personnel conducting preoperational activities had a clear understanding of their duties and responsibilities;
- Equipment used during preoperational activities was tested or evaluated for its impact on plant structures, systems, and components before performance of preoperational tests;
- Responsibilities for specific activities related to the ISFSI were defined and integrated into appropriate plant programs;
- Management effectively provided quality oversight of preoperational testing activities;
- Preparations were made to effectively control radiological and security activities during preoperational testing;

- Preoperational testing demonstrations adequately displayed readiness to safely transfer spent fuel from the SFP to the ISFSI; and
- Preoperational testing demonstrations adequately displayed readiness to safely retrieve spent fuel from the ISFSI and transfer it to the SFP.

The inspectors verified that when issues were identified, licensee personnel appropriately documented the issues in the CAP.

5.2 Observations and Findings

Inspections of the licensee's preoperational testing program began in 2015 and were originally documented in Inspection Report No. 05000305/2015004; 072000642015002. During this inspection period, the licensee completed the remaining dry run demonstrations to fulfill the NAC MAGNASTOR CoC requirements. Specifically, the licensee demonstrated the ability to transfer a loaded canister between a transfer and storage cask. To accomplish this task, the licensee requested and the NRC approved License Amendment Request No. 263 (ML16320A042).

No findings were identified.

5.3 Conclusions

The licensee's preoperational testing program completed dry run demonstrations, in accordance with NAC MAGNASTOR CoC 1031 requirements, in preparation for a spent fuel storage campaign.

6.0 **Decommissioning Performance and Status Reviews (IP 71801)**

6.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Status of ongoing decommissioning activities and planning for future activities;
- Whether licensee activities were in accordance with license conditions and docketed commitments, as well as, within the bounds of the docketed PSDAR;
- Operability and functionality of systems necessary for safe decommissioning were assessed through control room and plant walkdowns, including the following systems: radioactive effluent monitoring; SFP cooling, level, and temperature control; radiation protection monitors and alarms; equipment important to emergency preparedness; and equipment that provided normal and standby electrical power;
- Operator logs and data taking for normal facility operations, surveillances, maintenance, and verification that data out of specification were appropriately dispositioned and resolved;

- Assessed ongoing in-plant work activities to ensure work activities were evaluated for risk in accordance with 10 CFR 50.65(a)(4), operational work risk assessments were performed, and operations shift turnovers appropriately communicated pertinent plant status;
- Verified appropriate plant staffing was maintained and that appropriate management oversight of licensee and supplemental activities was performed;
- Performed plant tours to assess field conditions and decommissioning abandonment activities;
- Plant material condition of structures, systems, and components was maintained at a high level to ensure safe storage of spent fuel;
- Verified the storage of combustibles and flammables was in accordance with plant procedures and the fire plan;
- Verified firefighting equipment and stations were properly maintained, inventoried, and ready for use; and
- Verified that the installed fire detection and suppression systems were effectively maintained, surveillances performed, and were capable of performing their intended function.

The inspectors verified that when issues were identified, licensee personnel appropriately documented the issues in the CAP.

6.2 Observations and Findings

The inspectors determined through plant tours and activities observed that the licensee conducted activities in accordance with the regulatory requirements and plant procedures. Structures, systems, and components were maintained to support the safe storage of spent fuel and good housekeeping practices were in place to limit the quantity of combustibles. Firefighting equipment was available and maintained in accordance with the licensee's fire protection program.

No findings were identified.

6.3 Conclusions

The inspectors determined that the licensee conducted decommissioning activities in accordance with the regulations and license requirements. The inspectors verified that the licensee's activities to transition to a SAFSTOR condition were in accordance with TSs, the USAR, and the PSDAR. Finally, the inspectors conducted plant tours to verify that the material condition of structures, systems, and components supported the safe storage of spent fuel and conduct of safe decommissioning.

7.0 Occupational Radiation Exposure (IP 83750)

7.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Planning and preparation for radiation work were adequate and if licensee management supported radiation protection planning;
- Personal dosimetry for external exposure met requirements;
- Management and administrative controls of external radiation exposure met requirements and were designed to make exposures ALARA;
- Processes or engineering controls were used to the extent practicable to limit concentrations of airborne radioactive materials;
- Survey and monitoring activities were performed as required;
- Control of radioactive materials and contamination met requirements;
- Effective implementation of the ALARA program;
- Initiatives to implement operational methods and practices maintained doses ALARA; and
- Issues, events, or problems were identified and resolved, to preclude future problems in the area of radiological controls.

7.2 Observations and Findings

The licensee prepared for a dry cask storage campaign and the radiological oversight of this campaign. The inspectors found these preparations, including the ALARA plan and plans for use of temporary shielding, to be consistent with industry practice and regulatory requirements. Electronic personal dosimetry and survey instruments were found to be calibrated and biased, as appropriate and applicable, to account for uncertainties in measurements. Surveys and monitoring activities were performed as required per 10 CFR 20.1501. A review of periodic surveys did not identify any anomalous results.

No findings were identified.

7.3 Conclusions

RWP and ALARA reviews provided contamination controls and dose reduction measures appropriate for the work activities. Workers adhered to the radiological controls provided in the RWPs and ALARA plans and followed the RP staff instruction.

Personal monitoring devices were calibrated and radiation surveys were performed adequately to identify the hazards present.

8.0 Radioactive Waste Treatment, and Effluent and Environmental Monitoring

8.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- Radioactive waste treatment systems were maintained and operated to keep offsite doses ALARA;
- The licensee effectively controlled, monitored, and quantified releases of radioactive materials in liquid, gaseous, and particulate forms to the environment; and
- The radiological environmental monitoring programs were effectively implemented to ensure effluent releases were being adequately performed as required to minimize public dose.

As part of the inspection, the inspectors verified that licensee programs and procedures were appropriately implemented by licensee staff. In addition, the inspectors verified that when issues were identified licensee personnel appropriately documented the issues in the CAP and adequate corrective actions were taken.

8.2 Observations and Findings

The inspectors noted during walkdowns of the effluent equipment and pathways that they were configured as described in the Offsite Dose Calculation Manual and were in good material condition. In addition, the inspectors noted that during a review of past Annual Radiological Effluent Release Reports, no anomalous results, unexpected trends, or abnormal releases were identified. For the inter-laboratory comparison results reviewed, the inspectors noted the program contained the appropriate radioisotopes for current plant conditions and it was performed bi-annually as required.

No findings were identified.

8.3 Conclusions

The licensee controlled, monitored, and quantified releases of radioactive materials released to the environment to ensure offsite doses were within regulatory limits and ALARA.

9.0 Solid Radioactive Waste Management and Transportation of Radioactive Materials (IP 86750)

9.1 Inspection Scope

The inspectors reviewed documents and interviewed plant personnel to assess the licensee's performance in the following areas:

- The licensee provided detailed instructions and operating procedures for transfer, packaging, and transport of low-level radioactive waste;
- Material was properly classified, described, packaged, marked, and labeled for transportation;
- Whether the licensee used updated and audited procedures when scaling factors or correlation factors were used to quantify the concentration of hard-to-detect radionuclides; and
- Whether shipments made by the licensee were in compliance with NRC and Department of Transportation (DOT) regulations.

9.2 Observations and Findings

Procedures for the preparation and shipping of radioactive waste were provided by the licensee and followed by the licensee's staff. The inspectors found that radioactive material was properly classified, prepared, and labeled for transportation in accordance with NRC and DOT requirements.

No findings were identified.

9.3 Conclusions

Radioactive materials planned for shipment were classified and characterized appropriately in accordance with 10 CFR 61.55 and 61.66 so as to meet low-level waste burial site criteria.

10.0 **Exit Meeting**

The inspectors presented the results of the inspection to Mr. S. Yuen and other members of the KPS staff at an onsite exit meeting on January 9, 2017. The licensee acknowledged the results presented and did not identify any of the information discussed as proprietary.

ATTACHMENT: SUPPLEMENTAL INFORMATION

SUPPLEMENTAL INFORMATION

PARTIAL LIST OF PERSONS CONTACTED

S. Yuen, Plant Manager
T. Olson, Technical Support Manager
M. Hale, Radiation Protection Manager
D. Shannon, Radiation Protection Supervisor
B. Koehler, Project Manager
J. McNamara, Project Manager
R. Repshas, Licensing Manager
J. Gadzala, Licensing Engineer

INSPECTION PROCEDURES (IPs) USED

IP 36801 Organization and Management Controls at Permanently Shutdown Reactors
IP 37801 Safety Reviews, Design Changes, and Modifications at Permanently Shutdown Reactors
IP 40801 Self-Assessment, Auditing, and Corrective Action at Permanently Shutdown Reactors
IP 60801 Spent Fuel Pool Safety at Permanently Shutdown Reactors
IP 60854 Preoperational Testing of an ISFSI
IP 71801 Decommissioning Performance and Status Reviews at Permanently Shutdown Plants
IP 84750 Radioactive Waste Treatment, and Effluent and Environmental Monitoring

ITEMS OPENED, CLOSED, AND DISCUSSED

<u>Opened</u>	<u>Type</u>	<u>Summary</u>
---------------	-------------	----------------

None

<u>Closed</u>	<u>Type</u>	<u>Summary</u>
---------------	-------------	----------------

None

PARTIAL LIST OF DOCUMENTS REVIEWED

The following is a partial list of documents reviewed during the inspection. Inclusion on this list does not imply that the NRC inspectors reviewed the documents in their entirety, but rather that selected sections or portions of the documents were evaluated as part of the overall inspection effort. Inclusion of a document on this list does not imply NRC acceptance of the document or any part of it, unless this is stated in the body of the inspection report.

- 2016 Radiac Calibration Worksheets for Ludlum 12-4
- 2016 Radiac Calibration Worksheets for DMC 2000GN

Attachment

- 2016 Radiac Calibration Worksheets for IRD 3 DMC
- ACE No. 166; Fire Pumps A and B Were Both Non-Functional During the Performance of OSP-FP-002
- ACE No. 171; SNM Seals Removed from NUHOMS HSM
- RCE No. 100374306; Damage to NAC Lift Equipment; October 17, 2016
- CR 409; 2015 Annual RP-CY Training Program Review; December 31, 2015
- CR-689; Power Found Off at K-2 Air Environmental Air Sampler; June 28, 2016
- CR-746; Environmental Air Samples Not Running; August 16, 2016
- CR-756; Three REMP Environmental Air Samples Found Not Running; August 22, 2016
- CR-764; K-8 Environmental Air Samples Not Running; September 20, 2016
- CR 859; Worker Dropped ED Causing Dose Rate Alarm While in RCA; November 2, 2016
- Dominion Energy Kewaunee 2013 and 2015 Annual Radiological Environmental Operating Report
- HP-09.015; High Integrity Containers Operating Guidelines; Revision 7
- HP-09.028; OSM Operating Procedure; Revision B
- HP-09.029; RADMAN Operating Procedure; Revision 4
- KPS Technical Requirements Manual; Revision 69
- KW100421211; Spent Fuel Rack Boron Carbide In Service Inspection; September 14, 2011
- KW100929921; Spent Fuel Rack Boron Carbide In Service Inspection; September 16, 2014
- MA-KW-ICP-SFP-006A; Spent Fuel Pool Level A Indication Calibration and Functional Check; Revision 0
- MA-KW-ICP-SFP-005A; Spent Fuel Pool Train A Temperature Indicating Switch Calibration; Revision 0
- PM21-013; Boron Carbide ISI Inspection-Spent Fuel Pool Racks
- RP-KW-003-005; Dosimetry Record Keeping; Revision 4
- RP-KW-005-003; Radioactive Material Receipt; Revision 6
- RP-KW-007-113; IRD 2000 Dosimeter Irradiator and DMC 2000 Electric Dosimeter; Revision 4
- RP-KW-007-122; Instrument Calibration Procedure – Ludlum Model 12-4 Neutron Survey Meter; Revision 0
- RP-KW-009-031; Radioactive Material Shipping; Revision 1
- RP-KW-105; External Radiation Exposure Control Program; Revision 0
- RP-KW-203; Radiological Labeling and Marking; Revision 0
- SP-21-073; Spent Fuel Pool Sample; Revision 31
- SP-21-015; Spent Fuel Rack Boron Carbide In Service Inspection; Revision 14
- SP-63-164; Environmental Sample Collection; Revision 47
- RP-2014-005; 2015 Dosimetry Program Changes Related to Changing to the Genesis Ultra Type BT36 TLD; December 15, 2014
- Audit 16-04; RP/Chemistry/PCP/Millstone Refueling; June 22, 2016
- SAE-140; External Exposure Control Program; November 9, 2016
- SAR-136; Internal Exposure Control Program; July 20, 2016
- SAR-274; Radiological Survey Program; October 26, 2016
- SAR-290; KPS 2016 Annual 10CFR37 Program Assessment; November 15, 2016
- Spent Fuel Pool Sample Data Sheet; July 14, 2016
- Spent Fuel Pool Sample Data Sheet; June 14, 2016
- Summary of Facility Changes, Tests, and Experiments and Summary of Commitment Changes; May 23, 2016

LIST OF ACRONYMS USED

ADAMS	Agencywide Documents Access and Management System
ALARA	As Low As Is Reasonably Achievable
CAP	Corrective Action Program
CFR	Code of Federal Regulations
CoC	Certificate of Compliance
DEK	Dominion Energy Kewaunee
DNMS	Division of Nuclear Materials Safety
DOT	Department of Transportation
IP	Inspection Procedure
IR	Inspection Report
KPS	Kewaunee Power Station
NRC	U.S. Nuclear Regulatory Commission
PARS	Publicly Available Records System
PSDAR	Post-Shutdown Decommissioning Activities Report
RP	Radiation Protection
RWP	Radiation Work Permit
SAFSTOR	Safe Storage of Spent Fuel
SFP	Spent Fuel Pool
TS	Technical Specification
USAR	Updated Safety Analysis Report