



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION**  
REGION II  
245 PEACHTREE CENTER AVENUE NE, SUITE 1200  
ATLANTA, GEORGIA 30303-1257

March 15, 2017

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

**SUBJECT: SURRY POWER STATION – NRC PROBLEM IDENTIFICATION AND  
RESOLUTION INSPECTION REPORT 05000280/2017008 AND  
05000281/2017008**

Dear Mr. Stoddard:

On February 16, 2017, the U. S. Nuclear Regulatory Commission (NRC) completed a Problem Identification and Resolution biennial inspection at your Surry Power Station Units 1 and 2. The enclosed report documents the inspection results which were discussed on February 16, 2017, with Mr. D. Lawrence and other members of your staff.

Based on the inspection sample, the inspection team determined that your staff's implementation of the corrective action program supported nuclear safety. In reviewing your corrective action program, the team assessed how well your staff identified problems at a low threshold, your staff's implementation of the station's process for prioritizing and evaluating these problems, and the effectiveness of corrective actions taken by the station to resolve these problems. In each of these areas, the team determined that your staff's performance was adequate to support nuclear safety.

The inspectors also evaluated other processes your staff used to identify issues for resolution. These included your use of audits and self-assessments to identify latent problems and your incorporation of lessons learned from industry operating experience into station programs, processes, and procedures. The inspectors determined that your station's performance in each of these areas supported nuclear safety.

Finally, the inspectors determined that your station's management maintains a safety-conscious work environment adequate to support nuclear safety. Based on the inspectors' observations, your employees are willing to raise concerns related to nuclear safety through at least one of the several means available.

NRC inspectors documented one finding of very low safety significance (Green) in this report. The finding involved a violation of NRC requirements. The NRC is treating the violation as non-cited violation (NCV) consistent with Section 2.3.2.a of the Enforcement Policy.

D. Stoddard

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If you contest the violation or the significance of this NCV, 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 copies to the Regional Administrator, Region II; the Director, Office of Enforcement, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001; and the NRC resident inspector at the Surry Power Station Units 1 and 2.

This letter, its enclosure, and your response (if any) will be made available for public inspection and copying at <http://www.nrc.gov/reading-rm/adams.html> and at the NRC Public Document Room in accordance with 10 CFR 2.390, "Public Inspections, Exemptions, Requests for Withholding."

Sincerely,

*/RA/*

Philip J. McKenna, Chief  
Reactor Projects Branch 7  
Division of Reactor Projects

Docket Nos.: 50-280, 50-281  
License Nos.: DPR-32, DPR-37

Enclosure:  
IR 05000280/2017008, 05000281/2017008  
w/Attachment: Supplemental Information

cc Distribution via ListServ

D. Stoddard

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**U.S. NUCLEAR REGULATORY COMMISSION**

**REGION II**

Docket Nos.: 50-280, 50-281

License Nos.: DPR-32, DPR-37

Report No.: 05000280/2017008, 05000281/2017008

Licensee: Virginia Electric and Power Company (VEPCO)

Facility: Surry Power Station, Units 1 and 2

Location: Surry, VA 23883

Dates: January 30, 2017 through February 16, 2017

Inspectors: T. Steadham, Senior Construction Inspector, Team Leader  
C. Highley, Resident Inspector (Millstone), R-I  
C. Jones, Resident Inspector  
R. Taylor, Senior Project Inspector

Approved by: Philip J. McKenna, Chief  
Reactor Projects Branch 7  
Division of Reactor Projects

Enclosure

## SUMMARY

IR 05000280/2017008 and 05000281/2017008; 01/30/2017 – 02/16/2017; Surry Power Station, Units 1 and 2; Biennial Inspection of the Problem Identification and Resolution Program.

The inspection was conducted by one senior construction inspector, a senior project inspector, and two resident inspectors. One NRC identified non-cited violation (NCV) of very low safety significance was identified. The significance of most findings is identified by their color (Green, White, Yellow, Red) using Inspection Manual Chapter (IMC) 0609, Significance Determination Process (SDP), dated April 29, 2015. All violations of NRC requirements are dispositioned in accordance with the NRC's Enforcement Policy, dated February 4, 2015. The NRC's program for overseeing the safe operation of commercial nuclear power reactors is described in NUREG-1649, "Reactor Oversight Process," Revision 6.

### Identification and Resolution of Problems

The inspectors concluded that, in general, problems were properly identified, evaluated, prioritized, and corrected. The licensee was effective at identifying problems and entering them into the corrective action program (CAP) for resolution, as evidenced by the relatively few number of deficiencies identified by external organizations (including the NRC) that had not been previously identified by the licensee, during the review period. Generally, prioritization and evaluation of issues were adequate, formal root cause evaluations (RCE) for significant problems were adequate, and corrective actions specified for problems were acceptable. Overall, corrective actions developed and implemented for issues were generally effective and implemented in a timely manner.

The inspectors determined that overall, audits and self-assessments were adequate in identifying deficiencies and areas for improvement in the CAP, and appropriate corrective actions were developed to address the issues identified. Operating experience usage was found to be generally acceptable and integrated into the licensee's processes for performing and managing work, and plant operations.

Based on discussions and interviews conducted with plant employees from various departments, the inspectors determined that personnel at the site felt free to raise safety concerns to management and use the CAP to resolve those concerns.

### Cornerstone: Mitigating Systems

- Green: The inspectors identified a non-cited violation of Title 10 CFR Part 50, Appendix B, Criterion III, "Design Control," for the licensee's failure to verify or check the adequacy of the design of bulkheads in the recirculation spray service water motor operated valve pits. Specifically, the design allowed for unsealed penetrations in bulkheads and the licensee failed to demonstrate that the unsealed penetrations would not adversely affect the ability of the bulkheads to provide adequate train separation during a postulated pipe rupture. The licensee entered the issue into the CAP as Condition Report (CR) 1060189 and sealed the penetrations.

This performance deficiency was determined to be more than minor because it was associated with the design control attribute of the Mitigating Systems Cornerstone and it adversely affected the cornerstone objective to ensure the capability of systems that respond to initiating events to prevent undesirable consequences. Specifically, the

capability to maintain train separation between the Recirculation Spray Service Water header motor operated valves was adversely affected due to the presence of degraded penetrations through the flood barriers. The team determined the finding to be of very low safety significance (Green) because the finding was a deficiency affecting the design of a mitigating structure, system, or component (SSC), and the SSC maintained its operability or functionality. This finding was not assigned a cross-cutting aspect because the issue did not reflect current licensee performance. (Section 40A2).

## REPORT DETAILS

### 4OA2 Problem Identification and Resolution

#### 1. Corrective Action Program Effectiveness

##### a. Inspection Scope

The team reviewed the licensee's CAP procedures which described the administrative process for initiating and resolving problems primarily through the use of CRs. To verify that problems were being properly identified, appropriately characterized, and entered into the CAP, the inspectors reviewed CRs that had been issued between July 2015 and December 2017, including a detailed review of selected CRs associated with the following risk-significant systems:

- Service Water
- Emergency Service Water
- Reactor Protection System
- Component Cooling

Where possible, the team independently verified that the corrective actions were implemented as intended. The team also reviewed selected common causes and generic concerns associated with RCEs to determine if they had been appropriately addressed.

To help ensure that samples were reviewed across all cornerstones of safety identified in the Reactor Oversight Process (ROP), the team selected a representative number of CRs that were identified and assigned to the major plant departments, including quality assurance, health physics, chemistry, emergency preparedness, and security. These CRs were reviewed to assess each department's threshold for identifying and documenting plant problems, thoroughness of evaluations, and adequacy of corrective actions. The team reviewed selected CRs, verified corrective actions were implemented, and attended meetings where CRs were evaluated for significance to determine whether the licensee was identifying, accurately characterizing, and entering problems into the CAP at an appropriate threshold.

The inspectors conducted plant walkdowns of equipment within the selected systems listed above and other plant areas to assess the material condition and to identify deficiencies that had not been previously entered into the CAP. The inspectors reviewed CRs, maintenance history, corrective actions (CAs), completed work orders (WOs) for the systems, and reviewed associated system health reports. These reviews were performed to verify that problems were being properly identified, appropriately characterized, and entered into the CAP. Items reviewed generally covered a two-year period of time; however, in accordance with the inspection procedure, a five-year review was performed for selected systems for age-related issues.

Control Room walk-downs were also performed to assess the main control room (MCR) deficiency list and to ascertain if deficiencies were entered into the CAP and tracked to resolution. Operator workarounds (OWA) and operator burden screenings were reviewed, and the inspectors verified compensatory measures for deficient equipment which were being implemented in the field. The inspectors conducted a detailed review of selected CRs to assess the adequacy of the root cause and apparent cause evaluations of the problems identified. The inspectors reviewed these evaluations

against the descriptions of the problem described in the CRs and the guidance in licensee procedure PI-AA-300, Cause Evaluation.

The inspectors assessed if the licensee had adequately determined the cause(s) of identified problems, and had adequately addressed operability, reportability, common cause, generic concerns, extent-of-condition, and extent-of-cause. The review also assessed if the licensee had appropriately identified and prioritized corrective actions to prevent recurrence.

The inspectors reviewed selected industry operating experience (OE) items, including NRC generic communications, to verify that they had been appropriately evaluated for applicability and that issues identified through these reviews had been entered into the CAP. The inspectors reviewed site trend reports, to determine if the licensee effectively trended identified issues and initiated appropriate corrective actions when adverse trends were identified.

The inspectors reviewed licensee audits and self-assessments, including those which focused on problem identification and resolution programs and processes, to verify that findings were entered into the CAP and to verify that these audits and assessments were consistent with the NRC's assessment of the licensee's CAP. The inspectors attended various plant meetings to observe management oversight functions of the corrective action process. CR screening meetings and Management Review Committee meetings.

Documents reviewed are listed in the Attachment.

b. Assessment

Problem Identification

The inspectors determined that the licensee was generally effective in identifying problems and entering them into the CAP at an appropriately low threshold. This conclusion was based on:

- a review of the requirements for initiating CRs as described in licensee procedure PI-AA-200, Corrective Action, which described management's expectation that employees were encouraged to initiate CRs for any reason;
- a review of the CRs initiated since July 2015 including a review of the number and nature of the CRs that were entered into the CAP;
- a review of a sample of the CRs initiated since July 2015; and
- interviews with approximately 20 station personnel.

Trending was generally effective in monitoring equipment performance. Site management was actively involved in the CAP and focused appropriate attention on significant plant issues. Based on reviews and walkdowns of accessible portions of the selected systems, the inspectors determined that system deficiencies were being identified and placed in the CAP.

Problem Prioritization and Evaluation

Based on the review of CRs sampled by the inspection team during the onsite period, the inspectors concluded that problems were generally prioritized and evaluated in accordance with the licensee's CAP procedures as described in the CR significance

determination guidance in PI-AA-200. Each CR was assigned a priority level at the CR screening meeting, and adequate consideration was given to system or component operability and associated plant risk.

The inspectors determined that station personnel had conducted root cause and apparent cause analyses in compliance with the licensee's CAP procedures and assigned cause determinations were appropriate, considering the significance of the issues being evaluated. A variety of formal causal-analysis techniques were used depending on the type and complexity of the issue consistent with PI-AA-300.

### Effectiveness of Corrective Actions

Based on a review of corrective action documents, interviews with licensee staff, and verification of completed corrective actions, the inspectors determined that overall, corrective actions were timely, commensurate with the safety significance of the issues, and effective, in that conditions adverse to quality were corrected and non-recurring. For significant conditions adverse to quality, the corrective actions directly addressed the cause and effectively prevented recurrence in that a review of performance indicators, CRs, and effectiveness reviews demonstrated that the significant conditions adverse to quality had not recurred. Effectiveness reviews for corrective actions to prevent recurrence (CAPRs) were sufficient to ensure corrective actions were properly implemented and were effective.

### c. Findings

Introduction: An NRC identified Green NCV of 10 CFR 50, Appendix B, Criterion III, "Design Control," was identified for the licensee's failure to verify or check the adequacy of the design of bulkheads in the recirculation spray service water motor operated valve pits. Specifically, the design allowed for unsealed penetrations in the bulkheads and the licensee failed to demonstrate that the unsealed penetrations would not adversely affect the ability of the bulkheads to provide adequate train separation during a postulated pipe rupture.

Description: During a walkdown of the recirculation spray (RS) heat exchanger service water (SW) supply header supply motor operated valves (MOVs), 1/2-SW-MOV-103 A, B, C, and D, the inspectors identified unsealed penetrations in bulkheads that were intended to provide train separation for the MOVs. The valve pits were divided into three sections with two bulkheads; with each RSSW train in the outer two sections and a bearing cooling MOV in the middle section.

The pits were designed such that a break in one of the sections would require the water to fill the respective pit to the top before the water would spill over into another section. Level alarms and sump pumps in each pit were relied upon to mitigate a break in one section from affecting both RSSW MOV trains.

Both bulkheads in the Unit 1 and Unit 2 pits had unsealed penetrations which would allow water to enter the other sections of the pit sooner than if it was allowed to rise up to the top of the bulkhead and spill over. The water could cause the MOVs to fail as is, in the shut position, on a safety injection demand signal that would have required the MOVs to open. The inspectors determined that the original design change (74-55F & G) did not require the penetrations to be sealed. When questioned, the licensee failed to demonstrate that the unsealed penetrations would not adversely affect the ability of the operators to mitigate an internal flooding event. The licensee identified the unsealed

penetrations on October 28, 2016, as documented in condition report (CR) 1052084 and issued work order (WO) 38103719401 to seal the penetrations; however, the licensee failed to properly evaluate the safety significance of the unsealed penetrations and therefore had not started the work prior to this inspection.

Analysis: The inspectors determined that the licensee's failure to verify or check the adequacy of the design for the installation of the bulkheads was a performance deficiency (PD) within the licensee's ability to foresee and correct. Specifically, the licensee's failure to verify or check the adequacy of the design allowed the unsealed penetrations to exist since design change 74-55 F & G implementation in January 1979. Using IMC 0612, Appendix B, Issue Screening, dated September 7, 2012, the inspectors determined that the PD was more than minor because it was associated with the design control attribute of the Mitigating Systems Cornerstone, and it adversely affected the cornerstone objective to ensure the capability of systems that respond to initiating events to prevent undesirable consequences. Specifically, the capability to maintain train separation between the RSSW MOVs was adversely affected due to the presence of penetrations through the flood barriers. Once identified by the inspection team, the licensee entered the issue into the corrective action program as CR 1060189 and sealed the penetrations.

Using IMC 0609.04, "Initial Characterization of Findings," Table 2, dated October 07, 2016, the finding was determined to affect the Mitigating Systems Cornerstone. The inspectors screened the finding using IMC Chapter 0609, Appendix A, "SDP for Findings at Power", dated June 19, 2012, and determined that it screened to Green because all questions were answered, "No." No cross-cutting aspect is assigned since the design change occurred in 1979 and the licensee identified the condition adverse to quality in October 28, 2016, therefore it is no longer consistent with current licensee performance.

Enforcement: 10 CFR 50, Appendix B, Criterion III, "Design Control," states, in part, "The design control measures shall provide for verifying or checking the adequacy of design." Contrary to the above, in January 1979, the licensee failed to ensure that a verification or check of the design (74-55 F & G) was performed. Specifically, the design failed to demonstrate that operators would be able to mitigate a postulated failure in the pit and ensure the required train separation between the RSSW MOVs with the unsealed penetrations in the bulkheads. Because the licensee entered the issue into their CAP as CR 1060189 and the finding is of very low safety significance (Green), this violation is being treated as an NCV, consistent with Section 2.3.2 of the NRC Enforcement Policy: NCV 05000280, 281/2017008-01, Failure to verify or check the adequacy of a design change in the Recirculation Spray Service Water Valve Pits.

## 2. Use of Operating Experience

### a. Inspection Scope

The team examined the licensee's use of industry OE to assess the effectiveness of how external and internal operating experience information was used to prevent similar or recurring problems at the plant. In addition, the team selected operating experience documents (e.g., NRC generic communications, 10 CFR Part 21 reports, licensee event reports, vendor notifications, and plant internal operating experience items, etc.), which had been issued since July 2015, to verify whether the licensee had appropriately evaluated each notification for applicability to the Hatch Power Station, and whether issues identified through these reviews were entered into the CAP.

b. Assessment

Based on a review of selected documentation related to operating experience issues, the inspectors determined that the licensee was generally effective in screening operating experience for applicability to the plant. Industry OE was evaluated at either the corporate or plant level depending on the source and type of the document. Relevant information was then forwarded to the applicable department for further action or informational purposes. OE issues requiring action were entered into the CAP for tracking and closure. In addition, OE was included in all apparent cause and root cause evaluations in accordance with licensee procedure PI-AA-300.

c. Findings

No findings were identified.

3. Self-Assessments and Audits

a. Inspection Scope

The team reviewed audit reports and self-assessment reports, including those which focused on problem identification and resolution, to assess the thoroughness and self-criticism of the licensee's audits and self-assessments, and to verify that problems identified through those activities were appropriately prioritized and entered into the CAP for resolution in accordance with licensee procedure PI-AA-100-1004, Self-Assessments.

b. Assessment

The team determined that the scopes of assessments and audits were adequate. Self-assessments were generally detailed and critical, as evidenced by findings consistent with the inspector's independent review. The team verified that CRs were created to document areas for improvement and findings resulting from the self-assessments, and verified that actions had been completed consistent with those recommendations. Generally, the licensee performed evaluations that were technically accurate.

c. Findings

No findings were identified.

4. Safety-Conscious Work Environment

a. Inspection Scope

During the course of the inspection, the team reviewed the station's safety-conscious work environment (SCWE) through review of the station Employee Concerns Program (ECP) and interviews with various departmental personnel. The team reviewed a sample of ECP issues to verify that concerns were being properly reviewed and identified deficiencies were being resolved and entered into the CAP when appropriate.

b. Assessment

Based on the interviews conducted and the CRs reviewed, the inspectors determined that licensee management emphasized the need for all employees to identify and report

problems using the appropriate methods established within the administrative programs, including the CAP and ECP. These methods were readily accessible to all employees. Based on discussions conducted with a sample of plant employees from various departments, the inspectors determined that employees felt free to raise issues, and that management encouraged employees to place issues into the CAP for resolution. The inspectors did not identify any reluctance on the part of the licensee staff to report safety concerns.

c. Findings

No findings were identified.

40A6 Exit

Exit Meeting Summary

On February 16, 2017, the inspectors presented the inspection results to Mr. D. Lawrence and other members of his staff. The inspectors confirmed that proprietary information was not provided or examined during the inspection.

ATTACHMENT: SUPPLEMENTAL INFORMATION

## **SUPPLEMENTAL INFORMATION**

### **KEY POINTS OF CONTACT**

#### **Licensee personnel**

L. Eagan, Corrective Action Program Coordinator  
J. Eggart, Manager, Radiation Protection & Chemistry  
B. Garber, Manager, Station Licensing  
C. Grady, Supervisor, Auxiliary Systems  
L. Helstosky, Licensing Engineer  
J. Henderson, Manager, Site Engineering  
D. Lawrence, Director, Station Safety and Licensing  
A. Murphy, Manager, Protection Services  
L. Ragland, Supervisor, Health Physics Operations  
J. Rosenberger, Director, Site Engineering  
R. Simmons, Plant Manager  
M. Smith, Manager, Nuclear Organizational Effectiveness  
B. Ferlis, System Engineer  
M. Kacmarcik, System Engineer  
D. Brock, Supervisor, Chemistry  
D. Godwin, Supervisor, Civil Engineering

### **LIST OF ITEMS OPENED, CLOSED AND DISCUSSED**

#### **Opened and Closed**

05000280, 281/2017008-01	NCV	Failure to verify or check the adequacy of a design change in the Recirculation Spray Service Water Valve Pits. (Section 4OA2.1)
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## LIST OF DOCUMENTS REVIEWED

### Procedures:

NOD-GL-2, Nuclear Oversight Assessment Methodology, Revision 18  
MA-AA-108, Station Rework Reduction Program, Revision 4  
NO-AA-IAP-101, Internal Audit Program, Revision 1  
PI-AA-100-1004, Self-Assessments, Revision 12  
PI-AA-200, Corrective Action Program, Revision 32  
PI-AA-200, Corrective Action Program, Revision 33  
PI-AA-200-2001, Trending, Revision 6  
PI-AA-200-2002, Effectiveness Reviews, Revision 10  
PI-AA-300, Cause Evaluations, Revision 12  
PI-AA-300-3001, Root Cause Evaluations, Revision 9  
PI-AA-300-3002, Apparent Cause Evaluations, Revision 14  
PI-AA-300-3003, Common Cause Evaluations, Revision 1  
PI-AA-300-3004, Cause Evaluation Methods, Revision 5  
CY-AA-100, Conduct of Chemistry, Revision 10  
0-NSP-BS-001, Erosion Control Inspection, dated January 29, 2016  
0-STP-70.7, Annual Intake Canal Liner Visual, dated January 12, 2016  
GMP-013, General Maintenance Procedure, Revision 19  
PI-AA-100-1004 attachment 2, Chemistry Self Assessment, dated June 01, 2015  
OP-AA-102, Operability Determination, Revision 14  
OP-AA-100-1004, Self Assessments, Revision 12  
PI-AA-200, Corrective Action Program, Revision 32  
0-MPM-1900-01, Mechanical Preventive Maintenance, Revision 10  
ER-AA-AMP-10, License Renewal Aging Management Program, Revision 2  
ER-AA-AMP-101, Implementation of Activities Performed by License Renewal Aging Management Coordinators, Revision 6  
PI-AA-100-1007, Operating Experience Program, Revision 15  
1-OP0CC-001A, Component Cooling System Alignment for Normally Throttled Valves, Revision 0

### Audits:

NOD 13-05, Corrective Action and Independent Review Activities, dated July 30, 2013  
NOD 15-18-S, Benchmarking and Self-Assessment Program, dated December 30, 2015  
NOD 15-19-S, Surry S2R26 Refueling Outage Assessment – Engineering, dated January 5, 2016  
NOD 15-05, Corrective Action, Independent Review, and License Conditions, dated July 16, 2015

### Self-Assessments:

SAR 002609, Corrective Action Program, dated December 2, 2014  
SAR 003023, Problem Identification and Resolution, dated March 31, 2015  
PIR 1039196, Corrective Action Program, dated October 6, 2016  
PIR 1005062, Surry Maintenance Rule (a)(3) Periodic Assessment, dated November 13, 2015  
PIR 1041843, Chemistry Primary and Secondary Program Procedures, dated October 14, 2015  
SAR 3163, Informal License Renewal / Aging Management SA, dated December 10, 2015

Condition Reports (CR):

504072	582631	1013360	1019501	1029649	1045354	1056556
543530	1001151	1013396	1019551	1029649	1046355	1059136
543530	1001331	1013711	1022832	1030588	1047429	1059971*
561802	1003251	1014381	1024316	1032432	1048169	1059993*
562014	1003878	1014964	1024585	1032605	1048251	1060000*
565416	1004695	1015208	1024601	1032845	1048758	1060076*
565563	1006392	1016198	1024925	1033210	1048965	1060158*
571661	1006761	1016729	1024925	1033278	1048975	1060189*
573322	1006793	1016731	1025593	1034648	1048976	
575931	1007272	1016733	1026038	1036156	1048977	
578448	1009239	1016734	1026431	1036528	1049803	
579296	1010484	1017235	1028635	1037584	1050138	
580412	1010566	1017997	1028799	1042390	1050518	
580543	1011350	1017999	1029109	1043674	1052507	
580789	1013350	1019347	1029129	1045203	1053268	

\*NRC-Identified

Corrective Action Documents

CA3016987	CA291745	CA3041748	CA3040587	CA3039366
CA3022524	CA3015336	CA3010084	CA3026038	CA3023614
CA3047029	CA303546	CA3005615	CA3005617	CA3008199
CA3008833	CA3008834	CA302144	CA3012750	CA3029477
CA303543	CA3043418			

Cause Evaluations

RCE 3002046, 1-RC-P-1B Seal Degradation (CR 1002289)  
RCE 3003232, Reactor Trip during Performance of 2-OP-TM-001 (CR 1003328)  
EACE 3028629, 1-SW-3 Cracked Flange (CR 1033107)  
EACE 3026038, EACE to Engineering for 1-PT-8.4 Hi CLS Testing Unexpected Annunciators (CR1029109)  
ACE 3015756, CA to Security to Perform ACE for NRC Violation for Security FOF Inspection (CR1017997 and CR1017999)  
ACE 3040737, ACE to Engineering for 1-VS-S-1B High Differential Pressure (CR1048251)  
RCE 3015336, U1 Exciter Coupling Failure (CR 1013360)

Work Orders (WO):

38103719401  
38103535127  
38103579776  
38103674492  
38103705501  
38103717124

Other Documents:

DOM-QA-1, Nuclear Facility Quality Assurance Program Description, Revision 23  
PO 70288441, Purchase Order to Energy & Process Corp fo Piping, dated April 17, 2015  
DC 86-10-1, Service Water and Circulating Water Butterfly Valve Replacement Surry Power Station Unit 1, dated July 12, 1990  
DC 86-11-1, Service Water and Circulating Water Butterfly Valve Replacement Surry Power Station Unit 2, dated May 24, 1990  
SU-Calc-STR-250226-C-017, Anchor bolts not fully engaging threads on the 1-SW-P-1B-Engine, dated August 24, 2009  
CM-AA-REA-1001 Tracking # SU-2015-081, Request for Engineering Assistants, dated October 25, 2015  
ET-S-04-0086, Repair of intake canal earthen structure and concrete liner, dated August 21, 2008  
ETE-SU-2012-0046, Condition assessment of plant structures (third five-year inspection interval), dated December 4, 2012  
U1 & U2 Control Room Operator Shift Turnover Relief Checklist RO Abnormal Status Reports, dated February 16, 2017  
Q3-2016 System Health Report for the Service Water System  
Q2-2015 System Health Report for the Component Cooling Water System  
Q3-2015 System Health Report for the Component Cooling Water System  
Q4-2015 System Health Report for the Component Cooling Water System  
Q2-2016 System Health Report for the Component Cooling Water System