

#### Carolina Power & Light Company

September 8, 1981

USNRO REGITY A"I ANTA

81 SEP 14 A8.50

Mr. James P. O'Reilly United States Nuclear Regulatory Commission Region II 101 Marietta Street, Northwest Atlanta, Georgia 30303

Dear Mr. O'Reilly:

In reference to your letter of August 5, 1981, referring to RII: GFM : 50-400/401/402/403/81-14, the attached is Carolina Power & Light Company's reply to the deficiency identified in Appendix A. It is considered that the corrective and preventive actions taken will be satisfactory for resolution of this item.

To the best of my knowledge, information, and belief, the corrective action in this report is true and complete.

Thank you for your consideration in this matter.

Yours very truly,

H. R. Banks

Manager

Corporate Quality Assurance

NJC/ecc Attachment

cc: Mr. J. A. Jones

Sworn to and Subscribed before 8th day of September, 1981.

NOTAR

My commission expires October

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## Severity Level VI Violation





10 CFR 50, Appendix B, criterion XVII as implemented by PSAR Section 1.8.5.17 and Carolina Power and Light's Corporate QA Program Part I, Section 8.2.2 requires that the results of inspections be properly documented.

Contrary to the above, the results of inspections were not documented, in that, on July 6, 1981, a Unit 1 containment building Cadweld numbered 032S on drawing 8099 sheet 17A was found not to have the results of the installation inspection recorded and on June 30, 1981, the weld data report for ASME class 3 weld joint 2-SW-207-FW 459 was found not to identify the correct welder who had applied the tack weld.

## Denial or Admission and Reasons for Violation:

The violations identified by NRC audit are correct as stated. The examples referenced are in different areas of activity and are considered to be two isolated cases rather than examples of a generic documentation problem. To organize the discussion of the two conditions for this report, the item concerning the Cadweld records will be identified as item A, and item B will address the weld data report.

- A. Investigation indicates that either cadweld splice number 032S was not inspected and recorded or that the inspection records for that splice were lost. Further investigation revealed no other case in which a splice was not inspected or for which inspection records are missing. Over 47,000 Cadweld splices have been installed to date.
- On June 18, 1981, welder B-30 requisitioned weld material and was scheduled to do the welding on field weld - 459. Prior to starting the tack welding, the foreman entered B-30's symbol on the field copy (yellow sheet) of the Weld Data Report (WDR). Immediately prior to starting the tack welding the sites' safety department stopped work due to a potential safety hazard. The stop work was resolved and activity resumed in the area on June 24, 1981. At this time the same foreman assigned welder D-7 to perform the tack welding. The QA inspector was then notified for fit-up inspection once the tack welding was completed. The inspection was performed with acceptable results. The field copy (yellow sheet) of the WDR indicated welder B-30 performed the work. The QA inspector then transferred this information to the record copy. (white sheet) of the WDR. After the QA Inspector left the work area the pipe foreman made a correction to the field copy (yellow sheet) of the WDR to indicate D-7 as the welder who actually did the tack weld. He failed to notify the QA inspector of the correction. This created the disparity identified by the NRC inspector.

It should be noted that although there was a conflict as to which welder performed the weld, the investigation indicated both welders were qualified and there was no compromise in the quality of the weld.



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## Corrective Steps Taken and Results Achieved:

- A. Deficiency and Disposition Report (DDR) number 612 was issued for control and resolution of the condition. The DDR was dispositioned to accept the splice "as is" based on an evaluation of the statistical history records of the subject splicer which reflect a low rejection rate of splices made to date. The evaluation of splices made by splicer CO-108 revealed the following information:
  - 1. The rejection rate for his #18 vertical splices is 5.0%.
  - 2. The overall rejection rate for his splices is 3.4%.
  - 3. All his rejections were visual rejects.
  - 4. All his splices tensile tested met minimum tensile strength requirements.

The site has tested a large number of visually rejected cadweld splices and found them to have acceptable tensile strengths. Based on the low rejection rate and the fact that all splices tensile tested met minimum tensile strength standards, there is sufficient justification to accept cadweld splice number 032S without further evaluation.

B. The erroneous weld symbol B-30 was corrected on both copies of the WDR to reflect the welder (D-7) who actually did the work.

#### Corrective Steps Taken to Avoid Further Noncompliance:

- A. Additional emphasis was stressed to the cadweld inspectors presently certified to use more care and pay closer attention to details when marking prints to indicate work performed. A second check of the "as built" drawings has been implemented to ensure all splices have been identified and inspections recorded in order to prevent future noncompliances.
- B. Procedure CQC-19, Weld Control, will be revised to require the record copy of the WDR to be maintained in the field by the welding foreman and the yellow copy maintained by QA as a backup. QA will retrieve the record copy when the last holdpoint is signed off. A Procedure Deviation Notice was issued on September 4, 1981, to affect the above change until the procedure can be revised.

Procedure MP-05, Stamping of Weldments, will be revised to require the welder to stamp the weld in the event he must leave the area for any reason after welding has started. A Deviation Notice to that effect was issued September 3, 1981, and invokes the above until it is incorporated in the next procedure revision.

The revisions to the handling of WDR's and stamping of weldments are sufficient to prevent errors of this nature in the future.



# Date When Full Compliance Will be Achieved:

- A. Full compliance is considered to have been achieved on August 13, 1981.
- Full compliance is considered to have been achieved on September 4, 1981, with
  the issuance of Deviation 1 to revision 14 of procedure MP-05 and
  Deviation 1 to revision 1 of procedure CQC-19.

