

**INSPECTOR'S REPORT**  
 Office of Inspection and Enforcement

REVIEWER  
 Gaines Anthony D.  
 C. Cain Inc

INSPECTORS		TRANSACTION TYPE		DOCKET NO. & DATE		REPORT		NEXT INSP DATE	
		<input checked="" type="checkbox"/> I - INSERT <input type="checkbox"/> M - MODIFY <input type="checkbox"/> D - DELETE <input type="checkbox"/> R - REPLACE		03029470		9001		0793	
LICENSEE VENDOR						NO		SEC	
Sperry-Sun Drilling Services, Inc.								A	

PERIOD OF INVESTIGATION INSPECTION			INSPECTION PERFORMED BY			ORGANIZATION CODE OF REGION/HQ CONDUCTING ACTIVITY (See EAC 05.02 Manual Reporting by Code)		
FROM TO MO DAY YR MO DAY YR 07/19/90 07/30/90			<input checked="" type="checkbox"/> 1 - REGIONAL OFFICE STAFF <input type="checkbox"/> 2 - RESIDENT INSPECTOR <input type="checkbox"/> 3 - PERFORMANCE APPRAISAL TEAM			REGION DIVISION BRANCH 4 3 4		

REGIONAL ACTION (Circle one box only)		TYPE OF ACTIVITY CONDUCTED (Circle one box only)	
<input checked="" type="checkbox"/> 1 - NRC FORM 801 <input type="checkbox"/> 2 - REGIONAL OFFICE LETTER		<input checked="" type="checkbox"/> 02 - SAFETY (fee) <input type="checkbox"/> 03 - INCIDENT <input type="checkbox"/> 04 - ENFORCEMENT <input type="checkbox"/> 05 - MGMT AUDIT <input type="checkbox"/> 06 - MGMT VISIT <input type="checkbox"/> 07 - SPECIAL (fee) <input type="checkbox"/> 08 - VENDOR <input type="checkbox"/> 09 - MAT ACCT <input type="checkbox"/> 10 - PLANT SEC. <input type="checkbox"/> 11 - INVENT. VER. <input type="checkbox"/> 12 - SHIPMENT/EXPORT <input type="checkbox"/> 13 - IMPORT <input type="checkbox"/> 14 - INQUIRY (no fee) <input type="checkbox"/> 15 - INVESTIGATION	

INSPECTION INVESTIGATION FINDINGS (Circle one box only)				TOTAL NUMBER OF VIOLATIONS AND DEVIATIONS				ENFORCEMENT CONFERENCE HELD				REPORT CONTAIN 270 INFORMATION				LETTER OR REPORT TRANSMITTAL DATE			
1 - CLEAR <input checked="" type="checkbox"/> 2 - VIOLATION 3 - DEVIATION 4 - VIOLATION & DEVIATION				A B C D				A B C D				A B C D				NRC FORM 801 OR REG LETTER ISSUED MO DAY YR 05 09 90			

MODULE INFORMATION												MODULE INFORMATION													
REC ORD	MODULE NUMBER INSP				PRIORITY	DIRECT INSP/IC TRN EFFORT IN STAFF HOURS EXPENDED THIS INSPECTION	PERCENTAGE COMPLETED	STATUS	MODULE REG FOLLOWUP				REC ORD	MODULE NUMBER INSP				PRIORITY	DIRECT INSP/IC TRN EFFORT IN STAFF HOURS EXPENDED THIS INSPECTION	PERCENTAGE COMPLETED	STATUS	MODULE REG FOLLOWUP			
TYPE	NUMBER	PHASE	MANUAL CHAPTER	PROCEDURE NUMBER					LEVEL	SECT	PHASE	MANUAL CHAPTER	PROCEDURE NUMBER	LEVEL	TYPE	NUMBER	PHASE					MANUAL CHAPTER	PROCEDURE NUMBER	LEVEL	SECT
	53	07	03		A	0.01	- - -						53	08	00		A	0	1.00	C					
	management meetings											Inspection of Waste Control Requirements													
	58	71	00		A	0.02	1.00	C				58	08	00		A	0	1.00	C						
	licensed materials programs											Initial inspection													
	58	38	22		A	0.03	1.00	C				59	27	02		A	0.01	- - -							
	radiation protection											Followup on violations													
	58	67	40		A	0.01	1.00	C								A									
	transportation																								

Mark through module numbers not reviewed. Fill in leading 0's for hours.

FORM NO. 100 (REV. 10-6-66)

OBJECT NO. OR SERIAL NO. (BY PRODUCT) (13 digits)

REPORT

INSPECTION NUMBER

# INSPECTOR'S REPORT

(Continuation)

Office of Inspection and Enforcement

03029474		9201	A	5838221						BY RELATED		SUPPL	
			B	1230500						AC		4	
			C							DC			
			D										

VIOLATION OR DEVIATION (Check up to 200 characters for each item. If the text exceeds this number, it will be necessary to complete one or more additional pages.)

1	
2	A storage container containing radioactive material was not labeled in accordance with 10 CFR 20.203 (F).
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