



UNITED STATES
NUCLEAR REGULATORY COMMISSION
OFFICE OF INVESTIGATIONS FIELD OFFICE, REGION III

799 ROOSEVELT ROAD
GLEN ELLYN, ILLINOIS 60137

REPORT OF INQUIRY

JUN 23 1983

SUBJECT: CONSUMERS POWER COMPANY (MIDLAND)-ALLEGATIONS OF QUALITY ASSURANCE PROGRAMS AND HEATING, VENTILATION AND AIR-CONDITIONING CONTRACTOR'S QUESTIONABLE ACTIVITY

REPORT NUMBER: Q3-83-005

1. In March of 1983 discussions were held between the members of Region III management, Regional Administrator, James G. Keppler; Deputy Regional Administrator, A. B. Davis; Regional Atty. S. Lewis; the Chief of Region III Projects Branch 2, W. D. Shafer; and the Director of the OI Field Office, Region III, Eugene T. Pawlik, and it was mutually agreed that the allegations presented in Q3-83-005 fell under the purview of Region III and were not OI issues.
2. In lieu of this decision, this Inquiry consisting of Case File No. Q3-83-005 will be considered CLOSED unless further developments warrant further inquiry.

Wendel E. Frost, Investigator
Office of Investigations Field Office
Region III

APPROVED BY:

Eugene T. Pawlik, Director
Office of Investigations Field Office
Region III

cc: James G. Keppler, RA:RIII
W. J. Ward, OI:HQ
P. Baci, OI:HQ

A L L E G A T I O N T R A C K I N G S Y S T E M

DATA BASE REVIEW/UPDATE SHEET

DATA AS OF THE END OF
JANUARY 1984

ALLEGATION NUMBER: RIII-83-A-0157

FACILITY/DOCKET: MIDLAND 1 05000329
MIDLAND 2 05000330

FUNCTIONAL AREA: CONSTRUCTION

DESCRIPTION: CONCERNS REGARDING ZACK TRENDING, UNQUALIFIED
COMSTOCK PERSONNEL AND INSTRUMENT
TUBING/SUPPORT.

SOURCE: CONTRACTOR EMPLOYEE

DATE RECEIVED: 09/27/83

PERSON RECEIVING: FC HAWKINS

OFFICE RECEIVING: R3

ACTION OFFICE CONTACT: FC HAWKINS

FTS PHONE NUMBER: 388-5585

STATUS: CLOSED

DATE CLOSED: 01/25/84

REMARKS: DUPLICATE OF ATS NO. RIII-83-A-0095

CHANGES TO DATA? ___ YES ___ NO

DATE REVIEWED ___/___/___

OFFICE COORDINATOR'S INITIALS ___

E/18

A L L E G A T I O N T R A C K I N G S Y S T E M

DATA BASE REVIEW/UPDATE SHEET

DATA AS OF THE END OF
JANUARY 1984

ALLEGATION NUMBER: RIII-83-A-0160

FACILITY/DOCKET: MIDLAND 1 05000329
MIDLAND 2 05000330

FUNCTIONAL AREA: CONSTRUCTION

DESCRIPTION: CONCERNS REGARDING DESIGN CHANGES, SURFACE
PLATES, HVAC REDESIGN, HVAC DUCT-WORK, AND
BECHTEL FORMS.

SOURCE: CONTRACTOR EMPLOYEE

DATE RECEIVED: 09/26/83

PERSON RECEIVING: FC HAWKINS

OFFICE RECEIVING: R3

ACTION OFFICE CONTACT: FC HAWKINS

FTS PHONE NUMBER: 388-5585

STATUS: CLOSED

DATE CLOSED: 01/25/84

REMARKS: DUPLICATE OF ATS NO. RIII-83-A-0096

CHANGES TO DATA? _____ YES _____ NO

DATE REVIEWED _____/_____/_____

OFFICE COORDINATOR'S INITIALS _____

E/19

R-1246110

RUN DATE: 04/03/84

A L L E G A T I O N T R A C K I N G S Y S T E M

D A T A B A S E R E V I E W / U P D A T E S H E E T

D A T A A S O F T H E E N D O F
M A R C H 1 9 8 4

ALLEGATION NUMBER: RIII-83-A-0155

FACILITY/DOCKET: MIDLAND 1 05000329
MIDLAND 2 05000330

FUNCTIONAL AREA: CONSTRUCTION

DESCRIPTION: CONCERNS REGARDING ZACK TRAINING, MANAGEMENT
PRESSURE, AND DOCUMENT ALTERATIONS.

SOURCE: CONTRACTOR EMPLOYEE

DATE RECEIVED: 07/25/82

PERSON RECEIVING: JG KEPPLER

OFFICE RECEIVING: R3

ACTION OFFICE CONTACT: JJ HARRISON

FTS PHONE NUMBER: 388-5635

STATUS: CLOSED

DATE CLOSED: 03/07/84

REMARKS: CLOSED BY REPORTS: 50-329/83-08; 50-330/83-08

CHANGES TO DATA? YES NO

DATE REVIEWED _____/_____/_____

OFFICE COORDINATOR'S INITIALS _____

E/20
[initials]

H-1246110

RUN DATE: 04/03/84

A L L E G A T I O N T R A C K I N G S Y S T E M

DATA BASE REVIEW/UPDATE SHEET

DATA AS OF THE END OF
MARCH 1984

ALLEGATION NUMBER: RIII-83-A-0146

FACILITY/DOCKET: MIDLAND 1 05000329
MIDLAND 2 05000330

FUNCTIONAL AREA: CONSTRUCTION

DESCRIPTION: CONCERNS REGARDING ZACK TRAINING, MATERIAL,
QA PROGRAM, PROCEDURES, AND DOCUMENT CONTROL.

SOURCE: CONTRACTOR EMPLOYEE
ORG - GAP

DATE RECEIVED: 08/15/82

PERSON RECEIVING: JG KEPPLER

OFFICE RECEIVING: R3

ACTION OFFICE CONTACT: FC HAWKINS

FTS PHONE NUMBER: 388-5585

STATUS: CLOSED

DATE CLOSED: 03/07/84

REMARKS: CLOSED BY REPORTS: 50-329/83-08; 50-330/83-08

CHANGES TO DATA? YES NO

DATE REVIEWED _____/_____/_____

OFFICE COORDINATOR'S INITIALS _____

E/21