

INSERVICE INSPECTION SUMMARY REPORT

ARKANSAS NUCLEAR ONE, UNIT 1

OUTAGE NUMBER: 1R10

OUTAGE COMPLETION DATE: 05/09/92

OWNER:

Arkansas Power & Light Company

Capital and Broadway

Little Rock, Arkansas 72203

OWNER/OPERATOR:

Entergy Operations, Inc.

Subsidiary of Entergy Corporation

GENERATING PLANT:

Arkansas Nuclear One

Route 3, Box 137G

Russellville, AR 72801

Commercial Operating Date: December 19, 1974

Submittal Date: September 4, 1992

FORM NIS-1 OWNER'S REPORT FOR INSERVICE INSPECTIONS
As required by the Provisions of the ASME Code Rules

1. Owner Arkansas Power & Light Company/Entergy Operations, Inc.
P. O. Box 551, Capitol Tower Building, Little Rock, AR 72203
(Name and Address of Owner)
2. Plant Arkansas Nuclear One, Rt 3 Box 137G, Russellville, AR 72801
(Name and Address of Plant)
3. Plant Unit 1 4. Owner and Certificate of Authorization (if required) N/A
5. Commercial Service Date 12/19/74 6. National Board Number for Unit N-121
7. Components Inspected ASME Code Class 1 (IWB)/2 (IWC)/3 (IWD) Components and Supports (IWF)

Component or Appurtenance	Manufacturer or Installer	Manufacturer or Installer Serial No.	State or Province	National Board No.
Pressurizer	B&W	N/A	ARK-9826	N-122
E24A Steam Generator	B&W	N/A	ARK-9825	N-123
E24B Steam Generator	B&W	N/A	ARK-9824	N-124
Rx Coolant Pump "A"	Byron-Jackson (Mfg) Bechtel (Installer)	N/A	N/A	N/A
Rx Coolant Pump "B"	Byron-Jackson (Mfg) Bechtel (Installer)	N/A	N/A	N/A
Rx Coolant Pump "D"	Byron-Jackson (Mfg) Bechtel (Installer)	N/A	N/A	N/A
Rx Vessel Studs & Nuts	B&W	N/A	N/A	N/A
Class 1 Piping	Bechtel (Installer)	N/A	N/A	N/A
Class 2 Piping	Bechtel (Installer)	N/A	N/A	N/A
Class 3 Piping	Bechtel (Installer)	N/A	N/A	N/A
Class 1 Component Supports	Bechtel (Installer)	N/A	N/A	N/A
Class 2 Component Supports	Bechtel (Installer)	N/A	N/A	N/A
Class 3 Component Supports	Bechtel (Installer)	N/A	N/A	N/A

AP&L/Entergy by D. B. Lomax Date 9/3/92 Factory Mutual by J. O. Elliott Date 9/3/92
J. O. Elliott, ANII

FORM NIS-1 (Back)

8. Examination Dates 03/01/92 to 05/09/92 9. Inspection Interval from 12/84 to 12/94

10. Abstract of Examinations. Include a list of examinations and a statement concerning status of work required for current interval.

See attached "1R10 Outage Summary Report". The outage was the second and last in the second period of the second interval.

11. Abstract of Conditions Noted.

See attached "1R10 Outage Summary Report".

12. Abstract of Corrective Measures Recommended and Taken.

See attached "1R10 Outage Summary Report".

We certify that the statements made in his report are correct and the examinations and corrective measures taken conform to the rules of ASME Code, Section XI.

Certificate of Authorization No. (if applicable) N/A Expiration Date N/A

Date Sept. 3 19 92 Signed AP&L/Energy Operations, Inc. By [Signature]
Owner D. B. Lomax

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Arkansas and employed by Arkwright Mutual Insurance Co. of Norwood, Mass have inspected the components described in this Owner's Report during the period 03/01/92 to 05/09/92, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the inspection plan and as required by the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, express or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature
J. O. Elliott

Commissions NB 9947 AR 1133 "N" "I"
National Board, State, Province, and Endorsements

Date 9/3 19 92

1R10 OUTAGE SUMMARY REPORT

The regularly-scheduled ISI examinations performed during 1R10 are listed in the attached table. 1R10 was the second and last refueling outage in the second period of the second 10-year Interval. The attached table includes the non-destructive examinations other than the pressure tests and associated VT-2 exams. The pressure tests are summarized below.

Pressure Tests

All remaining second-period pressure tests, as required by the ASME Code and by the ISI Program, were performed during this outage. In addition, the following 10-year ISI hydrostatic tests were completed during Cycle 10:

- I. Both Service Water loops including supply and suction headers except the following components within the supply and return isolation valves:
 1. Emergency diesel generator coolers (E20B1 & E20B2)
 2. Auxiliary Building Electrical Rooms Emergency Chillers (E-175 & E-177)
 3. Auxiliary Building Decay Heat Removal Unit Coolers (VUC-1A, 1B, 1C, & 1D).

- II. Emergency Feedwater Pump suction piping.

Component Supports (Hangers)

The current ISI Program requires inspection of 100% of the component supports (hangers) during each period. This requirement is carried over from the first 10-year ISI Program. Consequently, a very large number of hangers were inspected during this outage. All but a few of the hangers were found to be in satisfactory condition and these few hangers had only minor problems. Most of the problems had to do with loose bolts and nuts, probably due to vibration associated with an operating plant. A few hanger welds were found to be undersized and one spring hanger was discovered to be carrying no load. All of these conditions were either corrected or resolved by engineering evaluation.

In the case of the spring hanger with no load, additional supports were inspected and found to be satisfactory. Therefore, the condition appears to have been an isolated case. Due to oversight, four of the hangers (24-082, 24-092, 50-020, and 53-010) with loose bolts and nuts did not receive a visual inspection after the maintenance was performed to tighten the loose parts. Consequently, a Condition Report (CR-1-92-486) was issued to have the reinspections performed during the next refueling outage. The

CR also requires that the process of assigning post-maintenance testing requirements be reviewed for adequacy.

Intergranular Stress Corrosion Cracking (IGSCC)

In addition to the ASME Code-required examinations, an augmented program of examinations was performed on thin-wall stainless steel piping connected to the Borated Water Storage Tank (BWST). This piping was selected for examination due to the discovery of a cracked weld during plant restart from refueling outage 1R9. A few months after completion of 1R9, another crack was discovered in thin-wall stainless steel piping in the Spent Fuel Pool Cooling (SFP) System. Since both of these cracks were in similar piping carrying the same borated water, a common cracking mechanism was believed to exist. These cracks were the basis for initiation of Condition Reports CR-1-91-131 and CR-1-91-199.

The basis for the selection of welds to include in the augmented program was NRC Bulletin 79-17 which addresses Intergranular Stress Corrosion Cracking (IGSCC) in stainless steel piping in Pressurized Water Reactors (PWRs). The original scope for this outage was 26 welds, which was a 10% sample of thin-wall piping welds that were not already in the ISI Program. The BWST piping was examined using ultrasonic techniques specially designed for the detection of IGSCC in thin-wall stainless steel. During the examinations, one weld was found to have a small IGSCC indication. The same weld that had the crack in 1R9 still contained a small crack that had not been detected by radiography performed in 1R9 and subsequently had not been repaired. The small indication is believed to have existed from the original startup timeframe of the early 1970s. The entire weld was removed, along with the adjacent elbow, and two new welds were added. Two additional welds, one on either side of the cracked weld, were added to the scope of the augmented program. In addition, one of the original 26 welds was found to be partially obstructed due to a pipe hanger; consequently, another adjacent weld was added to the scope. Thus, the final scope of this augmented program was 29 welds. It was determined from the examination results, which were reviewed by NRC Region IV inspectors, that IGSCC is not a significant concern at ANO-1 at this time. On-going IGSCC examinations will be performed as part of our augmented ISI Program.

In order to determine the root cause of the cracking, a cracked weld from the SFP system was sent to Southwest Research Institute (SwRI) for metallurgical evaluation. The SwRI report (06-4722-001, contract A-2071) concluded that the crack was indeed IGSCC and that the probable cause was sulfides. The sulfides are believed to have been introduced into the borated water systems during the original startup of ANO-1 in the 1970s. The original design of the plant included a Sodium Thiosulfate Tank in the Reactor Building Spray (BS) System. During startup, this tank either leaked or was dumped into the BS System which communicates directly with the BWST which, in turn, feeds the SFP System. The sulfates in the Sodium Thiosulfate solution break down

into sulfides which then cause cracking in sensitized stainless steel welds. During the early 1970s, ANO-1 and other B&W plants with Sodium Thiosulfate Tanks had cracking problems in thin-wall stainless steel piping systems. These results were reported to the NRC who then initially issued IE Circular 76-06 and later issued IE Bulletin 79-17.

The SFP System also received a visual (VT-2) inspection to determine if any other IGSCC cracks existed. One indication was found on the body of valve SF-8B. It is a through-wall seepage, but is not located in the weld or heat-affected zone. Therefore, the seepage is probably not caused by IGSCC, but may simply be a casting defect in the valve body. Another Condition Report (CR-1-92-0077) has been generated to track this indication. This minor seepage can be repaired in a non-outage timeframe and poses no reactor safety or spent fuel pool cooling problems.

Pure Water Stress Corrosion Cracking (PWSCC)

Other augmented examinations occurred during 1R10. One of these involved an ultrasonic examination of a repair weld installed during 1R9. When ANO-1 was heating up at the end of 1R9, a leak was detected in one of the three upper level taps on the Pressurizer. The level tap is a 1-inch Inconel pipe inserted through a drilled hole in the side of the Pressurizer. The Inconel pipe is secured in place with a single weld on the inside diameter of the Pressurizer. After discovery of the leak, the unit was shut down and cooled down in order to repair the weld. Rather than go inside the Pressurizer, a repair weld was installed on the outside. In making this repair, the Inconel pipe had to be cut off within the Pressurizer wall and a new section of pipe welded in place with the exterior repair weld. A gap of approximately 0.060-inch had to be left between the old and new sections of piping. This gap could allow borated water to come in contact with the carbon steel Pressurizer wall. Even though calculations qualified the repair until 1R11, ANO committed to perform an ultrasonic examination of the suspect area during 1R10 to determine if any corrosion of the base material was taking place. This examination was performed by SwRI personnel and witnessed by ANO NDE personnel. No corrosion was detected during the operating cycle between 1R9 and 1R10. The Pressurizer upper level tap repair weld is tracked in the ISI Program as A-10173. The SwRI report is filed in the ANO Calc Room as report number 91-R-1017-02.

The root cause of the cracked weld is presently believed to be Pure Water Stress Corrosion Cracking (PWSCC), which is a cracking mechanism that can attack Inconel materials in a very pure water environment such as the pressurizer steam space in the Reactor Coolant System (RCS). In order to determine if any other Inconel materials in the RCS are experiencing cracking problems, another augmented program was performed during 1R10. Ten areas on the Pressurizer that contain Inconel, including the repair weld, were visually (VT-2) inspected after the plant had been heated up to normal operating pressure and temperature at the end of the outage. No leakage was detected. This same exam is scheduled to be repeated each outage for the near future.

Other Piping Weld Indications

Additional stainless steel piping cracks were found near the end of the refueling outage. Workers in the Reactor Building noticed that one of the welds in the Pressurizer Safety Valve Discharge lines ("tailpipe") appeared to be dripping water. The horizontal runs of piping on top of the Pressurizer were ultrasonically examined. Five of the 19 welds were found to have crack-like indications. Consequently, the horizontal runs of piping on both safety valve discharges were replaced with new piping. One of the cracked welds has been sent to SwRI for metallurgical evaluation to determine the root cause of the cracking. The evaluation is currently underway. It should be noted that although this safety valve discharge piping was originally built to ASME Class 2 standards, it does not have a nuclear safety function. However, the piping will be inspected in the future as part of the augmented ISI Program. This activity is also being tracked by CR-1-92-0244.

Reactor Coolant Pumps "A" and "B" Re-examinations

During previous outages, flaws were detected in the casing welds of Reactor Coolant Pumps (RCPs) A and B. Per requirements in Section XI of the ASME Code, these flaws must be reexamined three times in the ten years following their discovery. These flaws, which are believed to be slag inclusions left over from the original fabrication of the pumps, were reexamined during this refueling outage. The examinations were performed by B&W using an improved version of the same ultrasonic equipment utilized several outages ago to find and size these indications. The inclusions did not grow in size from the previous inspections performed during 1R8. In fact, due to the refinements made in the UT equipment, the slag inclusions appeared to shrink in size. From this examination, it is concluded that the RCP casing welds remain in a satisfactory condition. These examinations are contained in the ISI Program and in this report as 43-001A, 44-001, 44-001A, and 44-002.

Reactor Coolant Pump "D" Flywheel

During the coast-down from power to the refueling outage, the bearings in RCP D were damaged. Consequently, during the outage the pump and motor were disassembled. Since ANO-1 has a Tech Spec requirement to perform a ten-year examination on the RCP Flywheels, the flywheel on RCP D was examined while the motor was disassembled and sitting on the motor stand. The motor stand provides better access to the flywheel and therefore a more thorough exam can be performed. The flywheel received an ultrasonic and a magnetic particle (MT) exam. The examinations revealed no recordable indications.

Reactor Coolant Pump "D" Casing Welds

ANO-1 committed to the NRC in a letter dated October 27, 1988 (1CAN108805) to radiograph C and D RCP casing welds any time that either pump is disassembled. However, since RCP D was not planned to be disassembled, but rather discovered during the outage to be damaged, it was decided that the unexpected radiography would be a hardship on the plant. At the time of the outage, ASME had recently published Code Case N-481 which allows a nuclear plant owner to substitute an engineering evaluation for the radiographic inspection. ANO approached the NRC to obtain approval of the use of the Code Case. The NRC granted approval for the use of the Code Case for 1R10. The engineering evaluation was performed by a contractor, Structural Integrity Associates, with assistance by ANO personnel. Code Case N-481 was submitted to the NRC after the outage in letter dated June 12, 1992 (1CAN069201). If the NRC approves of the conclusions drawn in the Code Case, then all future radiographs of the RCP casing welds on all four RCPs will also be deleted as stated in ANO letter 1CAN069201.

Reactor Pressure Vessel Studs and Nuts

Magnaflux, a manufacturer of magnetic particle testing (MT) materials, issued a recall notice in 1991 to their customers. Some of the aerosol cans of fluorescent MT materials may not have contained the proper amounts of suspended solids. ANO-1 had used some of the questionable materials during the previous outage, 1R9, on 20 Reactor Pressure Vessel (RPV) studs and 10 RPV nuts. These studs and nuts were reexamined during 1R10 using new MT materials from Magnaflux. In addition, a magnetic field indicator, sometimes referred to as a "pie gauge", was utilized to verify both field strength and direction. The examinations revealed no recordable indications. This re-examination was tracked by CR-C-91-0102.

ENERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
B-B	B 2.11	05-008	PRESSURIZER	HTR BELT SHELL TO LO HD CIR SM	UT
B-B	B 2.11	05-009	PRESSURIZER	HTR BUNDLE SHELL HALF CIR SEAM	UT
B-B	B 2.12	05-010	PRESSURIZER	HTR BDLE SHELL LONG SEAM X-AXIS	UT
B-B	B 2.12	05-011	PRESSURIZER	HTR BDLE SHELL LONG SEAM Y-AXIS	UT
B-B	B 2.40	03-002	STEAM GENERATOR E24A	TUBESHEET TO LOW SHELL TRAN WD	UT
B-B	B 2.40	03-003	STEAM GENERATOR E24A	LOWER HEAD TO TUBESHEET WELD	UT
B-D	B 3.110	05-015	PRESSURIZER	PZR RELIEF NOZZ BETWEEN Z-W AXIS (NOZZLE TO VESSEL WELD)	UT
B-D	B 3.110	05-015IR	PRESSURIZER	PZR RELIEF NOZZ BETWEEN Z-W AXIS (INSIDE RADIUS & ACTION)	UT
B-D	B 3.130	03-006	STEAM GENERATOR E24A	NOZZLE TO LOWER HEAD WELD	UT
B-D	B 3.140	03-007	STEAM GENERATOR E24A	NOZZLE TO HEAD INNER RADIUS	UT
B-F	B 5.50	18-001	PRESSURIZER SPRAY	NOZZLE TO PIPE SE CIRC SEAM	UT ,PT
B-F	B 5.50	24-066A	LETDOWN COOLER & DRAIN	PIPE TO SAFE END	PT
B-G-1	B 6.10	01-N-022	REACTOR VESSEL	CLOSURE HEAD NUT #22	MT
B-G-1	B 6.10	01-N-024	REACTOR VESSEL	CLOSURE HEAD NUT #24	MT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
B-G-1	B 6.10	01-N-025	REACTOR VESSEL	CLOSURE HEAD NUT #25	MT
B-G-1	B 6.10	01-N-026	REACTOR VESSEL	CLOSURE HEAD NUT #26	MT
B-G-1	B 6.10	01-N-027	REACTOR VESSEL	CLOSURE HEAD NUT #27	MT
B-G-1	B 6.10	01-N-028	REACTOR VESSEL	CLOSURE HEAD NUT #28	MT
B-G-1	B 6.10	01-N-032	REACTOR VESSEL	CLOSURE HEAD NUT #32	MT
B-G-1	L 6.10	01-N-033	REACTOR VESSEL	CLOSURE HEAD NUT #33	MT
B-G-1	B 6.10	01-N-035	REACTOR VESSEL	CLOSURE HEAD NUT #35	MT
B-G-1	B 6.10	01-N-037	REACTOR VESSEL	CLOSURE HEAD NUT #37	MT
B-G-1	B 6.20	01-S-021	REACTOR VESSEL	CLOSURE STUD #21	MT
B-G-1	B 6.20	01-S-022	REACTOR VESSEL	CLOSURE STUD #22	MT
B-G-1	B 6.20	01-S-023	REACTOR VESSEL	CLOSURE STUD #23	MT
B-G-1	B 6.20	01-S-024	REACTOR VESSEL	CLOSURE STUD #24	MT
B-G-1	B 6.20	01-S-025	REACTOR VESSEL	CLOSURE STUD #25	MT
B-G-1	B 6.20	01-S-026	REACTOR VESSEL	CLOSURE STUD #26	MT
B-G-1	B 6.20	01-S-027	REACTOR VESSEL	CLOSURE STUD #27	MT
B-G-1	B 6.20	01-S-028	REACTOR VESSEL	CLOSURE STUD #28	MT
B-G-1	B 6.20	01-S-029	REACTOR VESSEL	CLOSURE STUD #29	MT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
IRIG COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
B-G-1	B 6.20	01-S-030	REACTOR VESSEL	CLOSURE STUD #30	MT
B-G-1	B 6.20	01-S-031	REACTOR VESSEL	CLOSURE STUD #31	MT
B-G-1	B 6.20	01-S-032	REACTOR VESSEL	CLOSURE STUD #32	MT
B-G-1	B 6.20	01-S-033	REACTOR VESSEL	CLOSURE STUD #33	MT
B-G-1	B 6.20	01-S-034	REACTOR VESSEL	CLOSURE STUD #34	MT
B-G-1	B 6.20	01-S-035	REACTOR VESSEL	CLOSURE STUD #35	MT
B-G-1	B 6.20	01-S-036	REACTOR VESSEL	CLOSURE STUD #36	MT
B-G-1	B 6.20	01-S-037	REACTOR VESSEL	CLOSURE STUD #37	MT
B-G-1	B 6.20	01-S-038	REACTOR VESSEL	CLOSURE STUD #38	MT
B-G-1	B 6.20	01-S-039	REACTOR VESSEL	CLOSURE STUD #39	MT
B-G-1	B 6.20	01-S-040	REACTOR VESSEL	CLOSURE STUD #40	MT
B-G-2	B 7.20	05-031	PRESSURIZER	HEATER BUNDLE STUDS	VT-1
B-G-2	B 7.20	05-032	PRESSURIZER	HEATER BUNDLE NUTS	VT-1
B-G-2	B 7.20	05-034	PRESSURIZER	MANWAY STUDS	UT
B-G-2	B 7.20	05-035	PRESSURIZER	MANWAY NUTS	VT-1
B-H	B 8.30	03-049	STEAM GENERATOR E24A	SUPPORT SKIRT	UT
B-J	B 9.11	16-001	PRESSURIZER SURGE	SE TO PIPE CIRC SEAM	UT ,PT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
IR10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
B-J	B 9.11	16-002	PRESSURIZER SURGE	PIPE TO ELL CIRC SEAM	UT ,PT
B-J	B 9.11	16-008	PRESSURIZER SURGE	PIPE TO ELL CIRC SEAM	UT ,PT
B-J	B 9.11	16-012	PRESSURIZER SURGE	PIPE TO SE CIRC SEAM	UT ,PT
B-J	B 9.11	17-001	DECAY HEAT REMOVAL	PIPE TO VALVE CIRC SEAM	UT ,PT
B-J	B 9.11	17-006	DECAY HEAT REMOVAL	PIPE TO ELL CIRC SEAM	UT ,PT
B-J	B 9.11	17-009	DECAY HEAT REMOVAL	ELL TO PIPE CIRC SEAM	UT ,PT
B-J	B 9.11	17-013	DECAY HEAT REMOVAL	ELL TO ELL CIRC SEAM	UT ,PT
B-J	B 9.11	17-017	DECAY HEAT REMOVAL	ELL TO HOT LEG SE CIRC SEAM	UT ,PT
B-J	B 9.11	18-001A	PRESSURIZER SPRAY	PIPE TO SAFE END CIRC SEAM	UT ,PT
B-J	B 9.11	18-002	PRESSURIZER SPRAY	PIPE TO ELL CIRC SEAM	UT ,PT
B-J	B 9.11	19-005B	CORE FLOOD-A & B	ELL TO PIPE CIRC SEAM	UT ,PT
B-J	B 9.11	19-024A	CORE FLOOD-A & B	ELL TO PIPE CIRC SEAM	UT ,PT
B-J	B 9.11	19-032A	CORE FLOOD-A & B	REDUCER TO RED TEE CIRC SEAM	UT ,PT
B-J	B 9.11	19-034A	CORE FLOOD-A & B	RED TEE TO PIPE CIRC SEAM	UT ,PT
B-J	B 9.11	19-035A	CORE FLOOD-A & B	PIPE TO ELL CIRC SEAM	UT ,PT
B-J	B 9.11	24-066	LETDOWN COOLER & DRAIN	NOZZLE TO SE CIRC SEAM	PT
B-J	B 9.21	20-046	H.P.I. TO A1 LOOP	PIPE TO RED CIRC SEAM	PT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
B-J	B 9.21	21-003	H.P.I. TO A2 LOOP	VALVE TO PIPE CIRC SEAM	PT
B-J	B 9.21	21-021	H.P.I. TO A2 LOOP	PIPE TO ELL CIRC SEAM	PT
B-J	B 9.21	21-059	H.P.I. TO A2 LOOP	PIPE TO VALVE CIRC SEAM	PT
B-J	B 9.21	21-063	H.P.I. TO A2 LOOP	ELL TO PIPE CIRC SEAM	PT
B-J	B 9.21	22-051	H.P.I. TO B1 LOOP	ELL TO PIPE CIRC SEAM	PT
B-J	B 9.21	22-068	H.P.I. TO B1 LOOP	PIPE TO PIPE CIRC SEAM	PT
B-J	B 9.21	23-006	H.P.I. TO B2 LOOP	RED TO VALVE CIRC SEAM	PT
B-J	B 9.21	24-002	LETDOWN COOLER & DRAIN	TEES TO PIPE CIRC SEAM	PT
B-J	B 9.40	20-054	H.P.I. TO A1 LOOP	PIPE TO RED CIRC SEAM	PT
B-L-1	B12.10	43-001A	1A-RCP & MOTOR FLYWHEEL	TIE IN (TORUS) WELD BETWEEN 001 AND 002	UT ,VT-1,VT-3
B-L-1	B12.10	44-001	1B-RCP & MOTOR FLYWHEEL	UPPER SCROLL WELD	UT ,VT-1,VT-3
B-L-1	B12.10	44-001A	1B-RCP & MOTOR FLYWHEEL	TIE IN (TORUS) WELD BETWEEN 001 AND 002	UT ,VT-1,VT-3
B-L-1	B12.10	44-002	1B-RCP & MOTOR FLYWHEEL	LOWER SCROLL WELD	UT ,VT-1,VT-3
C-A	C 1.10	03-013	STEAM GENERATOR E24A	UPPER SHELL TO NOZZ BELT WELD	UT
C-A	C 1.10	03-014	STEAM GENERATOR E24A	UPPER NOZ BELT TO SHELL WELD	UT
C-A	C 1.10	03-015	STEAM GENERATOR E24A	LOWER SHELL TO SHELL TRAN	UT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u> WELD	<u>NDE METHOD(S)</u>
C-A	C 1.10	03-047	STEAM GENERATOR E24A	UPPER SHELL TO NOZZ BELT	UT
C-B	C 2.21	03-018	STEAM GENERATOR E24A	MAIN STEAM NOZZLE TO SHELL	UT
C-B	C 2.21	03-020	STEAM GENERATOR E24A	MAIN STEAM NOZZLE TO SHELL	UT
C-B	C 2.21	41-005	D.H. REMOVAL COOLER E35A	NOZZLE TO SHELL WELD	PT
C-B	C 2.22	03-019	STEAM GENERATOR E24A	NOZZLE TO SHELL INNER RADIUS	UT
C-B	C 2.22	03-021	STEAM GENERATOR E24A	NOZZLE TO SHELL INNER RADIUS	UT
C-C	C 3.10	03-043A	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	03-043B	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	03-043C	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	03-043D	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	03-043E	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	03-043F	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	03-043G	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT

ENERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
IR10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
C-C	C 3.10	03-043H	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	04-043A	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043B	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043C	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043D	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043E	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043F	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043G	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043H	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-F	C 5.11	31-011	MAIN STEAM -B OUTSIDE RB	PIPE TO ELL CIRC SEAM	MT
C-F	C 5.11	31-016	MAIN STEAM -B OUTSIDE RB	PIPE TO ELL CIRC SEAM	MT
C-F	C 5.11	32-020	MAKE-UP PUMP SUCTION	TEE TO REDUCER CIRC SEAM	PT
C-F	C 5.11	32-032	MAKE-UP PUMP SUCTION	ELL TO PIPE CIRC SEAM	PT
C-F	C 5.11	33-007	D.H. REMOVAL TO PUMPS	PIPE TO ELL CIRC SEAM	PT
C-F	C 5.11	33-008	D.H. REMOVAL TO PUMPS	ELL TO PIPE CIRC SEAM	PT
C-F	C 5.11	33-011	D.H. REMOVAL TO PUMPS	PIPE TO ELL CIRC SEAM	PT
C-F	C 5.11	33-015	D.H. REMOVAL TO PUMPS	PIPE TO PENE. CIRC SEAM	PT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
C-F	C 5.11	33-021	D.H. REMOVAL TO PUMPS	TEE TO PIPE CIRC SEAM	PT
C-F	C 5.11	33-031	D.H. REMOVAL TO PUMPS	PIPE TO ELL CIRC SEAM	PT
C-F	C 5.11	33-039	D.H. REMOVAL TO PUMPS	ELL TO PIPE CIRC SEAM	PT
C-F	C 5.11	33-049	D.H. REMOVAL TO PUMPS	REDUCER TO VALVE CIRC SEAM	PT
C-F	C 5.11	34-076	L.P.I. PUMP A TO PEN	ELL TO PIPE CIRC SEAM	PT
C-F	C 5.11	35-014	L.P.I. PUMP B TO PEN	PIPE TO ELL CIRC SEAM	PT
C-F	C 5.11	35-045	L.P.I. PUMP B TO PEN	PIPE TO ELL CIRC SEAM	PT
C-F	C 5.11	35-055	L.P.I. PUMP B TO PEN	PIPE TO ELL CIRC SEAM	PT
C-F	C 5.11	35-076	L.P.I. PUMP B TO PEN	PIPE TO ELL CIRC SEAM	PT
C-F	C 5.11	55-007	BUILDING SPRAY 1A INSIDE RB	PIPE TO ELL CIRC WELD	PT
C-F	C 5.11	55-008	BUILDING SPRAY 1A INSIDE RB	ELL TO PIPE CIRC WELD	PT
C-F	C 5.12	33-020AB	D.H. REMOVAL TO PUMPS	TEE LONG SEAMS	PT
C-F	C 5.12	33-031AB	D.H. REMOVAL TO PUMPS	ELL LONG SEAMS	PT
C-F	C 5.12	33-038AB	D.H. REMOVAL TO PUMPS	ELL LONG SEAMS	PT
C-F	C 5.12	33-042AB	D.H. REMOVAL TO PUMPS	ELL LONG SEAMS	PT
C-F	C 5.12	33-048AB	D.H. REMOVAL TO PUMPS	REDUCER LONG SEAMS	PT

INTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
C-F	C 5.12	35-014AB	L.P.I. PUMP B TO PEN	ELL LONG SEAMS	PT
C-F	C 5.12	35-021AB	L.P.I. PUMP B TO PEN	ELL LONG SEAMS	PT
C-F	C 5.12	35-045AB	L.P.I. PUMP B TO PEN	ELL LONG SEAM	PT
C-F	C 5.12	35-055AB	L.P.I. PUMP B TO PEN	ELL LONG SEAMS	PT
C-F	C 5.12	35-076AB	L.P.I. PUMP B TO PEN	ELL LONG SEAMS	PT
C-F	C 5.21	26-006	FEEDWATER LOOP A	PIPE TO PENE. CIRC SEAM	UT ,MT
C-F	C 5.21	26-011	FEEDWATER LOOP A	PIPE TO ELL CIRC SEAM	UT ,MT
C-F	C 5.21	26-024	FEEDWATER LOOP A	RED TO PIPE CIRC SEAM	UT ,MT
C-F	C 5.21	26-043	FEEDWATER LOOP A	TEE TO PIPE CIRC SEAM	UT ,MT
C-F	C 5.21	27-027	FEEDWATER LOOP B	PIPE TO END CAP CIRC SEAM	UT ,MT
C-F	C 5.21	27-035	FEEDWATER LOOP B	TEE TO PIPE CIRC SEAM	UT ,MT
C-F	C 5.21	28-025	MAIN STEAM -A INSIDE RB	PIPE TO ELL CIRC SEAM	UT ,MT
C-F	C 5.21	30-007	MAIN STEAM -B INSIDE RB	PIPE TO ELL CIRC SEAM	UT ,MT
C-F	C 5.21	30-023	MAIN STEAM -B INSIDE RB	ELL TO PIPE CIRC SEAM	UT ,MT
C-F	C 5.21	36-017	L.P.I. PEN TO CORE FLOOD	PIPE TO ELL CIRC SEAM	UT ,PT
C-F	C 5.21	36-042	L.P.I. PEN TO CORE FLOOD	PIPE TO TEE CIRC SEAM	UT ,PT
C-F	C 5.21	36-044	L.P.I. PEN TO CORE FLOOD	PIPE TO ELL CIRC SEAM	UT ,PT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDF METHOD(S)</u>
C-F	C 5.21	36-051	L.P.I. PEN TO CORE FLOOD	ELL TO PIPE CIRC SEAM	UT ,PT
C-F	C 5.22	36-017AB	L.P.I. PEN TO CORE FLOOD	ELL LONG SEAMS	UT ,PT
C-F	C 5.22	36-051AB	L.P.I. PEN TO CORE FLOOD	ELL LONG SEAMS	UT ,PT
C-F	C 5.31	29-017	MAIN STEAM -A OUTSIDE RB	PIPE TO SWEEPolet	MT
C-F	C 5.31	31-003	MAIN STEAM -B OUTSIDE RB	PIPE TO SWEEPolet	MT
D-B	D 2.20	52-019	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-21-H54	VT-3
D-B	D 2.50	49-063	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3-EFW-114-H7	VT-3
D-B	D 2.50	50-012	SERVICE WATER 1A INSIDE RB	RIGID HANGER HBD-20-H46	VT-3
F-A	F 1.30	41-018	D.H. REMOVAL COOLER E35A	SUPPORT SADDLE TO SHELL WEST	VT-3
F-B	F 2.40	39-008	EMERGENCY FEEDWATER DBD-1	GUIDE 3-EFW-116-H14	VT-3
F-B	F 2.40	39-009	EMERGENCY FEEDWATER DBD-1	GUIDE 3-EFW-116-H15	VT-3
F-B	F 2.40	49-041	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER HBD-46-H35	VT-3
F-B	F 2.40	49-043	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3-EFW-113-H5	VT-3
F-B	F 2.40	49-044	SERVICE WATER 1A OUTSIDE	GUIDE HANGER 3-EFW-113-H11	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
			RB		
F-B	F 2.40	49-046	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3-EFW-113-H10	VT-3
F-B	F 2.40	49-047	SERVICE WATER 1A OUTSIDE RB	RIGID SUPPORT 13-SW-122-H3	VT-3
F-B	F 2.40	49-049	SERVICE WATER 1A OUTSIDE RB	GUIDE HBD-4-H13	VT-3
F-B	F 2.40	49-051	SERVICE WATER 1A OUTSIDE RB	GUIDE HBD-21-H16	VT-3
F-B	F 2.40	49-052	SERVICE WATER 1A OUTSIDE RB	GUIDE HBD-21-H15	VT-3
F-B	F 2.40	49-054	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER HBD-21-H20	VT-3
F-B	F 2.40	49-056	SERVICE WATER 1A OUTSIDE RB	GUIDE HBD-21-H18	VT-3
F-B	F 2.40	49-057	SERVICE WATER 1A OUTSIDE RB	GUIDE HBD-21-H28	VT-3
F-B	F 2.40	49-058	SERVICE WATER 1A OUTSIDE RB	GUIDE HBD-21-H29	VT-3
F-B	F 2.40	49-060	SERVICE WATER 1A OUTSIDE RB	GUIDE HBD-21-H72	VT-3
F-B	F 2.40	49-062	SERVICE WATER 1A OUTSIDE RB	GUIDE 13-SW-122-H2	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
F-B	F 2.40	49-065	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER HBD-14-H19	VT-3
F-B	F 2.40	49-066	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER HBD-14-H26A	VT-3
F-B	F 2.40	49-070	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER HBD-21-H14	VT-3
F-B	F 2.40	49-071	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER HBD-21-H39	VT-3
F-B	F 2.40	49-072	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER HBD-21-H-110	VT-3
F-B	F 2.40	49-073	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3-EFW-113-H2	VT-3
F-B	F 2.40	49-075	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3-EFW-113-H4	VT-3
F-B	F 2.40	49-076	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3-EFW-113-H6	VT-3
F-B	F 2.40	49-078	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EFW-113-H9	VT-3
F-B	F 2.40	49-080	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3 EFW-114-H1	VT-3
F-B	F 2.40	49-081	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EFW-114-H2	VT-3
F-B	F 2.40	49-082	SERVICE WATER 1A OUTSIDE	GUIDE HANGER 3 EFW-114-H3	VT-3

ENERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
			RB		
F-B	F 2.40	49-083	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3 EPW-114-H4	VT-3
F-B	F 2.40	49-084	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3 EPW-114-H5	VT-3
F-B	F 2.40	49-086	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EPW-114-H7	VT-3
F-B	F 2.40	49-087	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EPW-114-H8	VT-3
F-B	F 2.40	49-088	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3 EPW-114-H9	VT-3
F-B	F 2.40	49-089	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EPW-114-H10	VT-3
F-B	F 2.40	49-091	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EPW-114-H12	VT-3
F-B	F 2.40	49-092	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EPW-114-H13	VT-3
F-B	F 2.40	49-093	SERVICE WATER 1A OUTSIDE FB	GUIDE HANGER HBB-3-H2	VT-3
F-B	F 2.40	49-094	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER HBB-3-H3	VT-3
F-B	F 2.40	50-008	SERVICE WATER 1A INSIDE RB	GUIDE HBD-20-H43	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
F-B	F 2.40	50-009	SERVICE WATER 1A INSIDE RB	GUIDE HBD-20-H42	VT-3
F-B	F 2.40	50-010	SERVICE WATER 1A INSIDE RB	RIGID HANGER HBD-20-H44	VT-4
F-B	F 2.40	50-011	SERVICE WATER 1A INSIDE RB	RIGID HANGER HBD-20-H46	VT-3
F-B	F 2.40	50-013	SERVICE WATER 1A INSIDE RB	GUIDE HANGER HBD-H71	VT-3
F-B	F 2.40	50-014	SERVICE WATER 1A INSIDE RB	RIGID HANGER HBD-20-H73	VT-3
F-B	F 2.40	50-015	SERVICE WATER 1A INSIDE RB	RIGID HANGER HBD-20-H50	VT-3
F-B	F 2.40	50-016	SERVICE WATER 1A INSIDE RB	RIGID HANGER HBD-21-H100	VT-3
F-B	F 2.40	50-017	SERVICE WATER 1A INSIDE RB	GUIDE HANGER HBD-20-H70	VT-3
F-B	F 2.40	50-018	SERVICE WATER 1A INSIDE RB	GUIDE HANGER HBD-20-H72	VT-3
F-B	F 2.40	50-019	SERVICE WATER 1A INSIDE RB	GUIDE HANGER HBD-21-H92	VT-3
F-B	F 2.40	51-038	SERVICE WATER 2A OUTSIDE RB	GUIDE HBD-21-H7	VT-3
F-B	F 2.40	51-039	SERVICE WATER 2A OUTSIDE	GUIDE HBD-21-H6	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
			RB		
F-B	F 2.40	51-040	SERVICE WATER 2A OUTSIDE RB	GUIDE HCD-112-H6	VT-3
F-B	F 2.40	51-041	SERVICE WATER 2A OUTSIDE RB	GUIDE HCD-112-H7	VT-3
F-B	F 2.40	51-042	SERVICE WATER 2A OUTSIDE RB	RIGID HANGER HBD-20- H11	VT-3
F-B	F 2.40	51-043	SERVICE WATER 2A OUTSIDE RB	GUIDE HBD-20-H1	VT-3
F-B	F 2.40	51-044	SERVICE WATER 2A OUTSIDE RB	GUIDE HANGER HBD-45-H41	VT-3
F-B	F 2.40	51-045	SERVICE WATER 2A OUTSIDE RB	RIGID HANGER HBD-45-H14	VT-3
F-B	F 2.40	51-046	SERVICE WATER 2A OUTSIDE RB	RIGID HANGER HBD-45-H15	VT-3
F-B	F 2.40	51-049	SERVICE WATER 2A OUTSIDE RB	RIGID HBD-20-H30	VT-3
F-B	F 2.40	51-050	SERVICE WATER 2A OUTSIDE RB	RIGID HCD-112-H12	VT-3
F-B	F 2.40	51-051	SERVICE WATER 2A OUTSIDE RB	GUIDE HCD-112-H11	VT-3
F-B	F 2.40	51-052	SERVICE WATER 2A OUTSIDE RB	RIGID HANGER HCD-112-H10	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
IRI COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
F-B	F 2.40	51-053	SERVICE WATER 2A OUTSIDE RB	GUIDE HCD-112-H9	VT-3
F-B	F 2.40	51-054	SERVICE WATER 2A OUTSIDE RB	RIGID HANGER HCD-112-H8	VT-3
F-B	F 2.40	51-055	SERVICE WATER 2A OUTSIDE RB	RIGID HANGER HBD-20-H30A	VT-3
F-B	F 2.40	52-011	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-14-H44	VT-3
F-B	F 2.40	52-012	SERVICE WATER 2A INSIDE RB	GUIDE HBD-14-H45	VT-3
F-B	F 2.40	52-013	SERVICE WATER 2A INSIDE RB	RIGID HANGER HED-14-H46	VT-3
F-B	F 2.40	52-014	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-14-H47	VT-3
F-B	F 2.40	52-016	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-21-H52	VT-3
F-B	F 2.40	52-017	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-21-H53	VT-3
F-B	F 2.40	52-018	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-21-H54	VT-3
F-B	F 2.40	52-021	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-21-H95	VT-3
F-B	F 2.40	52-022	SERVICE WATER 2A INSIDE	RIGID HANGER HBD-21-H66	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>TEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
			RB		
F-B	F 2.40	52-023	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-1A-164	VT-3
F-B	F 2.40	52-024	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-21-H98	VT-3
F-B	F 2.40	52-025	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-14-H63	VT-3
F-B	F 2.40	52-026	SERVICE WATER 2A INSIDE RB	RIGID HANGER HBD-14-H62	VT-3
F-B	F 2.40	52-027	SERVICE WATER 2A INSIDE RB	GUIDE HANGER HBD-21-H96	VT-3
F-B	F 2.40	53-007	SERVICE WATER 1A & 2A RETURN IN RB	RIGID HANGER HBD-21-H104	VT-3
F-B	F 2.40	53-009	SERVICE WATER 1A & 2A RETURN IN RB	RIGID HANGER HBD-21-H55	VT-3
F-B	F 2.40	54-028	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HCD-116-H30	VT-3
F-B	F 2.40	54-029	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HBD-21-H17	VT-3
F-B	F 2.40	54-030	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER HBD-13-17	VT-3
F-B	F 2.40	54-031	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HCD-116-H31	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
F-B	F 2.40	54-032	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE H3D-21-H25	VT-3
F-B	F 2.40	54-033	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HBD-21-H25A	VT-3
F-B	F 2.40	54-034	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HBD-21-H26	VT-3
F-B	F 2.40	54-038	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HBD-21-H9	VT-3
F-B	F 2.40	54-039	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER H3D-21-H10	VT-3
F-B	F 2.40	54-040	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HBD-21-H8	VT-3
F-B	F 2.40	54-041	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE H3D-21-H7	VT-3
F-B	F 2.40	54-043	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER HBD-21-H1	VT-3
F-B	F 2.40	54-044	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE H3D-21-H2	VT-3
F-B	F 2.40	54-045	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER HBD-21-H3	VT-3
F-B	F 2.40	54-046	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HBD-21-H4	VT-3
F-B	F 2.40	54-047	SERVICE WATER 1A & 2A	RIGID HANGER JBD-15-H009	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
			RETURN OUTSIDE RB		
F-B	F 2.40	54-048	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER HBD-13-17A	VT-3
F-B	F 2.40	54-049	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HANGER HBD-13-17B	VT-3
F-B	F 2.40	54-050	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER HBD-13-17C	VT-3
F-B	F 2.40	54-051	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HANGER HBD-13-17D	VT-3
F-B	F 2.40	54-054	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HANGER HCD-111-H6	VT-3
F-B	F 2.40	54-055	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HANGER HCD-111-H5	VT-3
F-B	F 2.40	54-056	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HANGER HCD-111-H8	VT-3
F-B	F 2.40	54-058	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER HCD-111-H1	VT-3
F-B	F 2.40	54-059	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HANGER HCD-111-H3	VT-3
F-B	F 2.40	54-060	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HANGER HCD-111-H4	VT-3
F-B	F 2.40	55-092	BUILDING SPRAY 1A INSIDE RB	RIGID HANGER GCB-12-H25	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
IR10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
F-C	F 3.30	26-050	FEEDWATER LOOP A	RIGID HANGER MFW-25	VT-3
F-C	F 3.30	26-053	FEEDWATER LOOP A	RIGID HANGER MFW-24	VT-3
F-C	F 3.40	24-081	LETDOWN COOLER & DRAIN	RESTRAINT MU-134	VT-3
F-C	F 3.40	24-085	LETDOWN COOLER & DRAIN	RIGID HANGER MU-129	VT-3
F-C	F 3.40	24-086	LETDOWN COOLER & DRAIN	RESTRAINT MU-128	VT-3
F-C	F 3.40	24-090	LETDOWN COOLER & DRAIN	GUIDE MU-125	VT-3
F-C	F 3.40	62-008	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H16	VT-3
F-C	F 3.40	62-009	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H6	VT-3
F-C	F 3.40	62-010	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H5	VT-3
F-C	F 3.40	62-011	SODIUM HYDROXIDE	SWAY STRUT HCD-6-H7	VT-3
F-C	F 3.40	62-012	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H8	VT-3
F-C	F 3.40	62-013	SODIUM HYDROXIDE	ROD HANGER HCD-6-H9	VT-3
F-C	F 3.40	62-014	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H10	VT-3
F-C	F 3.40	62-015	SODIUM HYDROXIDE	ROD HANGER HCD-6-H11	VT-3
F-C	F 3.40	62-016	SODIUM HYDROXIDE	RIGID HANGER HCD-6-H12	VT-3
F-C	F 3.40	62-018	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H18	VT-3
F-C	F 3.40	62-019	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H17	VT-3

ENERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
F-C	F 3.40	63-008	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-82	VT-3
F-C	F 3.40	63-009	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-83	VT-3
F-C	F 3.40	63-017	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-92	VT-3
F-C	F 3.40	63-018	BUILDING SPRAY OUTSIDE RB	RIGID GUIDE BS-93	VT-3
F-C	F 3.40	63-019	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-94	VT-3
F-C	F 3.40	63-020	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-95	VT-3
F-C	F 3.40	63-021	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-96	VT-3
F-C	F 3.40	63-022	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-97	VT-3
F-C	F 3.40	63-023	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-98	VT-3
F-C	F 3.40	63-024	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-99	VT-3
F-C	F 3.40	63-025	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-100	VT-3
F-C	F 3.40	63-026	BUILDING SPRAY OUTSIDE	RIGID GUIDE BS-101	VT-3

ENERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(?)</u>
F-C	F 3.40	63-027	BUILDING SPRAY OUTSIDE RB	GUIDE HANGER BS-102	VT-3
F-C	F 3.40	63-030	BUILDING SPRAY OUTSIDE RB	RIGID HANGER H001	VT-3
F-C	F 3.40	63-031	BUILDING SPRAY OUTSIDE RB	RIGID HANGER H002	VT-3
F-C	F 3.40	63-032	BUILDING SPRAY OUTSIDE RB	RIGID HANGER H003	VT-3
F-C	F 3.50	24-080	LETDOWN COOLER & DRAIN	SPRING HANGER MU-135	VT-3
F-C	F 3.50	24-083	LETDOWN COOLER & DRAIN	SPRING HANGER MU-133	VT-3
F-C	F 3.50	24-084	LETDOWN COOLER & DRAIN	SPRING HANGER MU-130	VT-3
F-C	F 3.50	24-087	LETDOWN COOLER & DRAIN	SPRING HANGER MU-127	VT-3
F-C	F 3.50	24-088	LETDOWN COOLER & DRAIN	SPRING HANGER MU-126	VT-3
F-C	F 3.50	24-089	LETDOWN COOLER & DRAIN	SPRING HANGER MU-139	VT-3
F-C	F 3.50	24-091	LETDOWN COOLER & DRAIN	SPRING HANGER MU-136	VT-3
F-C	F 3.50	27-051	FEEDWATER LOOP B	HYDRAULIC SNUBBER HS-31	VT-3
F-C	F 3.50	40-005	EMERGENCY FEEDWATER DBD-2	SPRING HANGER 3-EFW-111-113	VT-4
F-C	F 3.50	49-042	SERVICE WATER 1A OUTSIDE E3	SPRING HANGER 3-EFW-113-H1	VT-3

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
F-C	F 3.50	49-045	SERVICE WATER 1A OUTSIDE RB	SPRING HANGER 3-EFW-113-H8	VT-4
F-C	F 3.50	49-048	SERVICE WATER 1A OUTSIDE RB	SPRING HANGER HBD-4-H12	VT-4
F-C	F 3.50	49-053	SERVICE WATER 1A OUTSIDE RB	SPRING HANGER HBD-21-H21	VT-4
F-C	F 3.50	49-055	SERVICE WATER 1A OUTSIDE RB	S' G HANGER HBD-21-H19	VT-4
F-C	F 3.50	49-059	SERVICE WATER 1A OUTSIDE RB	SPRING HANGER HBD-21-H73	VT-4
F-C	F 3.50	49-074	SERVICE WATER 1A OUTSIDE RB	SNUBBER 3-EFW-113-H3	VT-3
F-C	F 3.50	49-077	SERVICE WATER 1A OUTSIDE RB	SNUBBER 3-EFW-113-H7	VT-3
F-C	F 3.50	49-079	SERVICE WATER 1A OUTSIDE RB	SPRING HANGER 3 EFW-113-H13	VT-3
F-C	F 3.50	49-085	SERVICE WATER 1A OUTSIDE RB	SPRING HANGER 3EFW-114-H6	VT-4
F-C	F 3.50	50-007	SERVICE WATER 1A INSIDE RB	SPRING HANGER H41	VT-4
F-C	F 3.50	51-048	SERVICE WATER 2A OUTSIDE RB	SWAY STRUT HBD-45-H17	VT-3
F-C	F 3.50	54-035	SERVICE WATER 1A & 2A	SPRING HANGER HBD-21-H27	VT-4

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
IRIG COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
			RETURN OUTSIDE RB		
F-C	F 3.50	54-042	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	SPRING HANGER HBD-21-H6	VT-4
F-C	F 3.50	62-017	SODIUM HYDROXIDE	SPRING HANGER HCD-6-H13	VT-4
F-C	F 3.50	63-028	BUILDING SPRAY OUTSIDE RB	VARIABLE SPRING HANGER BS-127	VT-4
F-C	F 3.50	63-029	BUILDING SPRAY OUTSIDE RB	VARIABLE SPRING HANGER BS-128	VT-4
N/A	N/A	A-10066	AUGMENTED INSPECTION	BRANCH TO HEADER WELD	MT
N/A	N/A	A-10067	AUGMENTED INSPECTION	FLANGE TO PIPE CIRC WELD	MT
N/A	N/A	A-10068	AUGMENTED INSPECTION	ELL TO FLANGE CIRC WELD	MT
N/A	N/A	A-10072	AUGMENTED INSPECTION	BRANCH TO HEADER WELD	MT
N/A	N/A	A-10073	AUGMENTED INSPECTION	FLANGE TO PIPE CIRC WELD	MT
N/A	N/A	A-10074	AUGMENTED INSPECTION	ELL TO FLANGE CIRC WELD	MT
N/A	N/A	A-10137	AUGMENTED INSPECTION	THERMOWELL NOZZLE	VT-2
N/A	N/A	A-10138	AUGMENTED INSPECTION	SAMPLING NOZZLE	VT-2
N/A	N/A	A-10139	AUGMENTED INSPECTION	LOWER LEVEL TAP @ 157 $\frac{1}{2}$ FROM X	VT-2
N/A	N/A	A-10140	AUGMENTED INSPECTION	LOWER LEVEL TAP @ 217 $\frac{1}{2}$ FROM X	VT-2

ENERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
N/A	N/A	A-10141	AUGMENTED INSPECTION	LOWER LEVEL TAP @ 277½ FROM X	VT-2
N/A	N/A	A-10142	AUGMENTED INSPECTION	UPPER LEVEL TAP @ 157½ FROM X	VT-2
N/A	N/A	A-10143	AUGMENTED INSPECTION	UPPER LEVEL TAP @ 217½ FROM X	VT-2
N/A	N/A	A-10144	AUGMENTED INSPECTION	UPPER LEVEL TAP @ 277½ FROM X	VT-2
N/A	N/A	A-10145	AUGMENTED INSPECTION	SPRAY LINE SAFE-END	VT-2
N/A	N/A	A-10146	AUGMENTED INSPECTION	VENT NOZZLE	VT-2
N/A	N/A	A-10147	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10148	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10149	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10150	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10151	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10152	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10153	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10154	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10155	AUGMENTED INSPECTION	PIPING WELD	UT

ENTERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
N/A	N/A	A-10156	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10157	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10158	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10159	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10160	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10161	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10162	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10163	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10164	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10165	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10166	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10167	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10168	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10168A	AUGMENTED INSPECTION	PIPE TO ELL CIRC WELD	MT
N/A	N/A	A-10169	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10170	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10171	AUGMENTED INSPECTION	PIPING WELD	UT

ENERGY OPERATIONS
 ARKANSAS NUCLEAR ONE - UNIT 1
1R10 COMPLETED ISI EXAMINATIONS

<u>CATEGORY</u>	<u>ITEM NO.</u>	<u>ISI EXAM NO.</u>	<u>COMPONENT DESCRIPTION</u>	<u>EXAMINATION AREA DESCRIPTION</u>	<u>NDE METHOD(S)</u>
N/A	N/A	A-10172	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10173	AUGMENTED INSPECTION	UPPER LEVEL TAP REPAIR WELD	UT
N/A	N/A	A-10174	AUGMENTED INSPECTION	PIPE TO VALVE WELD (CV-6865, FW# 40)	UT
N/A	N/A	A-10174A	AUGMENTED INSPECTION	PIPE TO ELL CIRC WELD	MT
N/A	N/A	A-10175	MAIN STEAM PIPING	PIPE TO VALVE WELD (CV-6865, FW# 41)	UT
N/A	N/A	A-10176	MAIN STEAM PIPING	PIPE TO VALVE WELD (CV-6864, FW# 44)	UT
N/A	N/A	A-10177	MAIN STEAM PIPING	PIPE TO VALVE WELD (CV-6864, FW# 45)	UT
N/A	N/A	A-10178	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10179	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	N/A	A-10180	AUGMENTED INSPECTION	PIPING WELD	UT
N/A	REG1.14	46-008	1D-RCP & MOTOR FLYWHEEL	MOTOR FLYWHEEL-BORE AND KEYWAY	UT
N/A	REG1.14	46-009	1E-RCP & MOTOR FLYWHEEL	MOTOR FLYWHEEL-ENTIRE FLYWHEEL	UT ,MT

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 12-8-90
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00818403
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make Up
5. (a) APPLICABLE CONSTRUCTION CODE ASME 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>GCB-2-DH207</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modify Support per OCP 85-1051
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92 19__
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II133 "N" "I"
Date May 12 1992
National board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 12-26-90
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72901 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00817032
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Decay Heat & High Pressure Injection
5. (a) APPLICABLE CONSTRUCTION CODE ASME 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>MU-132</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>MU-131</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modify Supports
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
Date May 12 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-3-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00816567
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address

EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Decay Heat

5. (a) APPLICABLE CONSTRUCTION CODE ASCE 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>DH-144</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modify Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the sta. ents made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92 19
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
Date May 12 1992 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 11/25/90
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 0816563
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Buchtel</u>	<u>NA</u>	<u>NA</u>	<u>MU-190</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 19__
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in the Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-3-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT CHE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00816049
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address

EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1967 EDITION, 6th Edition ADDENDA.
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>MU-257</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by *ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions

*FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"

National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 12-26-90
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 IC# 0021477
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Shutdown Cooling System
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA, NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Buehler</u>	<u>NA</u>	<u>NA</u>	<u>MU-128</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>
<u>Component Support</u>	<u>Buehler</u>	<u>NA</u>	<u>NA</u>	<u>MU-129</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modify Support per DCP 88-1089

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NPV-1 CERTIFICATE MODEL (back) 1-PV MINOR FOR NUCLEAR PUMPS OR VALVES
As Required by the Provisions of the ASME Code, Section III, Division 1

B. Remarks PO Jo. PO188715, Item No. 1

9. Design conditions 2465 (pressure) psi 650 (temperature) °F or valve pressure class 1500 (1)
10. Cold working pressure 3600 psi at 100°F
11. Hydrostatic test 5400 psi. Disk differential test pressure 3600 psi

CERTIFICATION OF DESIGN

Design Specification certified by Larry D. Young P.E. State AR Reg. no. 4557
Design Report certified by Richard W. Conley P.E. State PA Reg. no. 20112E

CERTIFICATE OF SHOP COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III, Division 1.
N Certificate of Authorization No. 19024 Expires 4/25/89
Date 1/20/89 Name Kerotest Mfg. Corp. Signed Gen Sheridan
(N Certificate Holder) (authorized representative)

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspection and the State or Province of Pennsylvania and employed by Hartford Steam Boiler I & I Co. of Hartford, CT have inspected the pump, or valve, described in this Data Report on 1-20 1989, and state that to the best of my knowledge and belief, the Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III, Division 1.
By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the component described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.
Date 1-20-89 Signed Ray Welch Commissions PA2052N
(Authorized Inspector) (Nat'l. Bd. (incl. endorsements) state or prov. and no.)

(1) For manually operated valves only.

00043184663

POOR ORIGINAL

CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES*
As Required by the Provisions of the ASME Code, Section III, Division 1

1. Manufactured and certified by Kerotest Mfg. Corp., 2525 Liberty Ave., Pgh. Pa 15222 (CI45036)
(name and address of Certificate Holder)

2. Manufactured for Arkansas Power & Light, P.O. Box 8058, Little Rock, AR 72203
(name and address of Purchaser or Owner)

3. Location of installation Arkansas Nuclear One, Russellv. AR 72801
(name and address)

4. Model No., Series No., or Type Globe Drawing ARK5-R9954-(1) Rev. A CRN N/A

5. ASME Code, Section III, Division 1: 1974 Summer 1975 1 N/A
(edition) (addenda date) (class) (Code Case no.)

6. Pump or valve Valve Nominal inlet size 3/4" Outlet size 3/4"
(in.) (in.)

7. Material: Body SA182,F316 Bonnet SA479,316 Disk SA479,316 Bolting N/A

(a) Cert. Holder's Serial No.	(b) Nat'l Board No.	(c) Body Serial No.	(d) Bonnet Serial No.	(e) Disk Serial No.
AQB5-12	N/A	AQB5-12 ✓	AOE	AOL
AQB2-1	N/A	AQB2-1 ✓	AOE	AOL
AQB2-2	N/A	AQB2-2 ✓	AOE	AOL
AQB2-3	N/A	AQB2-3 ✓	AOE	AOL
AQB2-4	N/A	AQB2-4 ✓	AOE	AOL
AQB2-5	N/A	AQB2-5 ✓	AOE	AOL
AQB2-6	N/A	AQB2-6 ✓	AOE	AOL
AQB2-7	N/A	AQB2-7 ✓	AOE	AOL
AQB2-8	N/A	AQB2-8 ✓	AOE	AOL
AQB2-9	N/A	AQB2-9 ✓	AOE	AOL
AQB2-10	N/A	AQB2-10 ✓	AOE	AOL
AQB2-11	N/A	AQB2-11 ✓	AOE	AOL
AQB2-12	N/A	AQB2-12 ✓	AOE	AOL
DWD-4448 AQB2-13	N/A	AQB2-13 ✓	AOE	AOL
AQB2-15	N/A	AQB2-15 ✓	AOE	AOL
AQB2-17	N/A	AQB2-17 ✓	AOE	AOL
AQB2-18	N/A	AQB2-18 ✓	AOE	AOL
AQB2-19	N/A	AQB2-19 ✓	AOE	AOL
AQB2-20	N/A	AQB2-20 ✓	AOE	AOL

* Supplemental information in form of lists, sketches, or drawings may be used provided (1) size is 8 1/2" x 11, (2) information in items 1 through 4 on this Data Report is included on each sheet, (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

(12/88)

This form (E00037) may be obtained from the Order Dept., ASME, 22 Law Drive, Box 2300, Fairfield, NJ 07007-2300.

00043184659

9. REMARKS NPV-1
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions

FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"

J. O. Elliott
Date

May 12 1992

National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 10-10-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00787582
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Dirty Waste Drain

5. (a) APPLICABLE CONSTRUCTION CODE USASB31.7 19 71 EDITION, 5-72 ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>3/4" Globe Valve</u>	<u>Kerotect</u>	<u>P11-16</u>	<u>NA</u>	<u>DWD-4448</u>	<u>1973</u>	<u>Replaced</u>	<u>No</u>
<u>3/4" Globe Valve</u>	<u>Kerotect</u>	<u>AQB2-13</u>	<u>NA</u>	<u>DWD-4448</u>	<u>1989</u>	<u>Replacement</u>	<u>No</u>

7. DESCRIPTION OF WORK Cut-Out valve and replace with like for like.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

Applicable Manufacturer's Data Reports to be Attached

This valve was placed in storage after refurbishment.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7-2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-7-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements
Date 7/2 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-22-92
Name
- RT. 1, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 1, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00761380
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE sect. III 19 68 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
SAFETY VALVE	DRESSER	BM4916	NA	PSV-1000	1970	Replacement	NA

7. DESCRIPTION OF WORK Replaced main spring wearing serial number AAB-24
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
Date May 12 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-7-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00744263
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Building Vent
5. (a) APPLICABLE CONSTRUCTION CODE ASME 19 68 EDITION, NA ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>3/4" globe Valve</u>	<u>Velan</u>	<u>30-46</u>	<u>NA</u>	<u>RBV-73</u>	<u>E 1968</u>	<u>Repaired</u>	<u>NA</u>

7. DESCRIPTION OF WORK Welded stem disc union to disc.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

ATTACHMENT 2

OWNER'S REPORT FOR REPAIRS OR
REPLACEMENTS - NIS-2 FORMS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
2.5" globe Valve	Anchor Darling	EB535-1-8	NA	CV-1220	1990	Replacement	No
2.5" globe Valve	Nelap	34465	NA	CV-1219	1968 ^E	Replaced	No
2.5" globe Valve	Anchor Darling	EB535-1-7	NA	CV-1219	1990	Replacement	No
1" Gate Valve	Henny Noft	315-215017	NA	MU-1079A	1984	New	No
1" Gate Valve	Henny Noft	304-215017	NA	MU-1079B	1984	New	No
1" Gate Valve	Henny Noft	295-215017	NA	MU-1080A	1984	New	No
1" Gate Valve	Henny Noft	329-215017	NA	MU-1080B	1984	New	No
2.5" Flange	Various	NA	NA	CCB-5-2.5"	1992	Replacement	No

FORM NPV-1 (back)

8. Remarks Gasket Retainer Material - SA240-316

9. Design conditions 3091 psi 280 °F or valve pressure class 1500 (1)
(pressure) (temperature)

10. Cold working pressure 3600 psi at 100°F

11. Hydrostatic test 5400 psi. Disk differential test pressure 3960 psi

CERTIFICATION OF DESIGN

Design Specification certified by Christopher Davenport P.E. State AR Reg. no. 6156
 Design Report certified by Drew W. Wright P.E. State PA Reg. no. PE-038728-E

CERTIFICATE OF SHOP COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III, Division 1.

N Certificate of Authorization No. N1712 Expires 4/15/92

Date 10-26-90 Name Anchor/Darling Valve Company Signed Leon J. Snyder
(N Certificate Holder) (Authorized Representative)

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State of ~~MASSACHUSETTS~~ of Pennsylvania and employed by Commercial Union Ins. Co. of Boston, Mass. have inspected the pump, or valve, described in this Data Report on 2316m 1029, 19 90, and state that to the best of my knowledge and belief, the Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III, Division 1.

By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the component described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date 10-29-90 Signed Charles Young Commissions Pennsylvania 2392
(Authorized Inspector) (Nat'l. Bd. (incl. endorsements) state or prov. and no.)

(T) For manually operated valves only.

FORM NPV-1 (back)

8. Remarks Gasket Retainer Material - SA240-316

9. Design conditions 3091 (pressure) psi 280 (temperature) °F or valve pressure class 1500 (1)

10. Cold working pressure 3600 psi at 100°F

11. Hydrostatic test 5400 psi. Disk differential test pressure 3960 psi

CERTIFICATION OF DESIGN

Design Specification certified by Christopher Davenport P.E. State AR Reg. no. 6156
 Design Report certified by Drew W. Wright P.E. State PA Reg. no. PE-038728-E

CERTIFICATE OF SHOP COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III, Division 1.
 N Certificate of Authorization No. N1712 Expires 4/15/92

Date 10-26-90 Name Anchor/Darling Valve Company Signed Leon J. Snyder
(N Certificate Holder) (Authorized Representative)

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State of ~~MASSACHUSETTS~~ Pennsylvania and employed by Commercial Union Ins. Co. of Boston, Mass. have inspected the pump, or valve, described in this Data Report on 7-31-90, 19 90, and state that to the best of my knowledge and belief, the Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III, Division 1.

By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the component described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date 10-29-90 Signed Charles Young Commissions Pennsylvania 2392
(Authorized Inspector) (Nat'l. Bd. (incl. endorsement) state or prov. and no.)

(1) For manually operated valves only.

FORM NPV-1 (back)

8. Remarks Gasket Retainer Material - SA240-316

9. Design conditions 3091 (pressure) psi 280 (temperature) °F or valve pressure class 1500 (1)

10. Cold working pressure 3600 psi at 100°F

11. Hydrostatic test 5400 psi. Disk differential test pressure 3960 psi

CERTIFICATION OF DESIGN

Design Specification certified by Christopher Davenport P.E. State AR Reg. no. 6156
 Design Report certified by Drew W. Wright P.E. State PA Reg. no. PE-038728-E

CERTIFICATE OF SHOP COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III, Division 1.

N Certificate of Authorization No. N1712 Expires 4/15/92

Date 10-26-90 Name Anchor/Darling Valve Company Signed Leon J. Snyder
 (N Certificate Holder) (Authorized Representative)

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Pennsylvania and employed by Commercial Union Ins. Co. of Boston, Mass. have inspected the pump, or valve, described in this Data Report on 7-31-90 1029, 19 90, and state that to the best of my knowledge and belief, the Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III, Division 1.

By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the component described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date 10-29-90 Signed Charles Young Commissions Pennsylvania 2392
 (Authorized Inspector) (Nat'l. Bd. (incl. endorsements) state or prov. and no.)

(1) For manually operated valves only.

FORM NPV-1 (back)

8. Remarks Gasket Retainer Material - SA240-316

9. Design conditions 3091 psi 280 °F or valve pressure class 1500 (1)
(pressure) (temperature)

10. Cold working pressure 3600 psi at 100°F

11. Hydrostatic test 5400 psi. Diak differential test pressure 3900 psi

CERTIFICATION OF DESIGN

Design Specification certified by Christopher Davenport P.E. State AR Reg. no. 6156
 Design Report certified by Drew W. Wright P.E. State PA Reg. no. PE-039728-F

CERTIFICATE OF SHOP COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III, Division 1.

N Certificate of Authorization No. N1712 Expires 4/15/92

Date 10-26-90 Name Anchor/Darling Valve Company Signed Leon L. Snyder
(N Certificate Holder) (authorized representative)

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State of ~~Massachusetts~~ Pennsylvania and employed by Commercial Union Ins. Co. of Boston, Mass. have inspected the pump, or valve, described in this Data Report on 7-316-1029, 19 90, and state that to the best of my knowledge and belief, the Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III, Division 1.

By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the component described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date 10-29-90 Signed Charles Young Commissions Pennsylvania 2392
(Authorized Inspector) (Nat'l. Bd. (inc.) endorsement) state or prov. and no.)

(1) For manually operated valves only.

FORM NPV-1 N CERTIFICATE HOLDERS DATA REPORT FOR NUCLEAR PUMPS OR VALVES
As Required by the Provisions of the ASME Code, Section III, Div. 1

1. Manufactured by Henry Vogt Machine Co., Louisville, KY
(Name and Address of N Certificate Holder)
2. Manufactured for Arkansas Power & Light Co., Little Rock, AR
(Name and Address of Purchaser or Owner)
3. Location of Installation Arkansas Nuclear One, Russellville, AR
(Name and Address)
4. Pump or Valve Gate Valve Nominal Inlet Size 1" Outlet Size 1"
(inches) (inches)

001-5240455

(a) Model No. or Type	(b) N Certificate Holder's Serial No.	(c) Canadian Registration No.	(d) Drawing No.	(e) Class	(f) Nat'l. Bd. No.	(g) Year Built
(1) Gate	284-215017	---	B-49832	1	---	1984
(2) Gate	290-215017	---	B-49832	1	---	1984
(3) thru						
(4) 313-215017						
(5) (See Attached Sheet)			MU-1079A			
(6)			SA 313-215017			
(7)						
(8)						
(9)						
(10)						

5. _____ (Brief description of service for which equipment was designed)

6. Design Conditions _____ psi _____ °F or Valve Pressure Class 1500 (1)
(Pressure) (Temperature)

7. Cold Working Pressure 3600 psi at 100°F.

8. Pressure Retaining Pieces

Mark No	Material Spec. No.	Manufacturer	Remarks
(a) Castings			
(b) Forgings			
Body			
R4600A	SA 182 F316	Vogt	
Bonnet			
R4602A	SA 182 F316	Vogt	
R1853	SA 182 F316	Vogt	

(1) For manually operated valves only.

* Supplemental sheets in form of lists, sketches or drawings may be used provided (1) size is 8-1/2" x 11", (2) information in items 1, 2 and 5 on this Data Report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at top of this form.

Mark No.	Material Spec. Co.	Manufacturer	Remarks
(c) Bolting			
Cap Screw HTC	SA 564, Gr. 630 (Condition H 1150)	Vogt	
(d) Other Parts			
Gate HSN	SA 564, Gr. 630 (Condition H 1075)	Vogt	

9. Hydrostatic test 5400 psi. Disk Differential test pressure _____ psi.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in this report are correct and that this pump, or valve, conforms to the rules of construction of the ASME Code for Nuclear Power Plant Components, Section III, Div. 1, Edition 1974 Addenda Summer, '75, Code Case No. _____ Date November 27, 1984
 Signed Henry Vogt Machine Co. by Barbara George
(Date)
(N Certificate Holder)
 Our ASME Certificate of Authorization No. 947 to use the N symbol expires 1/6/87
(N) (Date)

CERTIFICATION OF DESIGN

Design information on file at Henry Vogt Machine Co.
 Stress analysis report (Class 1 only) on file at Henry Vogt Machine Co.
 Design specifications certified by (1) Larry D. Young
 PE State Arkansas Reg. No. 4557
 Stress analysis certified by (1) R. S. Perry
 PE State Kentucky Reg. No. 5380
 (1) Signature not required. List name only.

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Commercial Union Ins. Co. of Boston, MA have inspected the pump, or valve, described in this Data Report on April 16, 1984 and state that to the best of my knowledge and belief, the N Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III.

By signing this certificate, neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the equipment described in this Data Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date November 27, 1984
Robert R. Durbin Commissions Tennessee #2289
(Inspector) (Nat'l Bd., State, Prov. and No.)

0033140456

FORM NPV-1 N CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES*
As Required by the Provisions of the ASME Code, Section III, Div. 1

1. Manufactured by Henry Vogt Machine Co., Louisville, KY
(Name and Address of N Certificate Holder)
2. Manufactured for Arkansas Power & Light Co., Little Rock, AR
(Name and Address of Purchaser or Owner)
3. Location of Installation Arkansas Nuclear One, Russellville, AR
(Name and Address)
4. Pump or Valve Gate Valve Nominal Inlet Size 1" Outlet Size 1"
(inch) (inch)

5-1034035

(a) Model No. Series No. or Type	(b) N Certificate Holder's Serial No.	(c) Canadian Registration No.	(d) Drawing No.	(e) Class	(f) Nat'l. Bd. No.	(g) Year Built
(1) Gate	284-215017	---	B-49832	1	---	1984
(2) Gate	290-215017	---	B-49832	1	---	1984
(3)	thru					
(4)	313-215017					
(5)	(See Attached Sheet)		MU-1079B			
(6)			SA 304-21507			
(7)						
(8)						
(9)						
(10)						

5. (Brief description of service for which equipment was designed)

6. Design Conditions (Pressure) 1500 psi (Temperature) 1500 °F or Valve Pressure Class 1500 (1)

7. Cold Working Pressure 3600 psi at 100°F.

8. Pressure Retaining Pieces

Mark No	Material Spec. No.	Manufacturer	Remarks
(a) Castings			
(b) Forgings			
Body			
R4600A	SA 182 F316	Vogt	
Bonnet			
R4602A	SA 182 F316	Vogt	
R1853	SA 182 F316	Vogt	

(1) For manually operated valves only.

* Supplemental sheets in form of lists, sketches or drawings may be used provided (1) size is 8-1/2" x 11", (2) information in items 1, 2 and 5 on this Data Report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at top of this form.

Mark No.	Material Spec. No.	Manufacturer	Remarks
(c) Bolting			
Cap Screw			
HTC	SA 564, Gr. 630 (Condition H 1150)	Vogt	
(d) Other Parts			
Gate			
HSN	SA 564, Gr. 630 (Condition H 1075)	Vogt	

9. Hydrostatic test 5400 psi. Disk Differential test pressure _____ psi.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in this report are correct and that this pump, or valve, conforms to the rules of construction of the ASME Code for Nuclear Power Plant Components, Section III, Div. 1, Edition 1974
 Addenda Summer, '75, Code Case No. _____ Date November 27, 1984
 Signed Henry Vogt Machine Co. by Barbara Bronze
(Date)
(N Certificate Holder)
 Our ASME Certificate of Authorization No. 947 to use the N symbol expires 1/6/87
(N) (Date)

CERTIFICATION OF DESIGN

Design information on file at _____ Henry Vogt Machine Co.
 Stress analysis report (Class 1 only) on file at _____ Henry Vogt Machine Co.
 Design specifications certified by (1) _____ Larry D. Young
 PE State Arkansas Reg. No. 4557
 Stress analysis certified by (1) _____ R. S. Perry
 PE State Kentucky Reg. No. 5380
 (1) Signature not required. List name only.

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Commercial Union Ins. Co. of Boston, MA have inspected the pump, or valve, described in this Data Report on April 16, 1984, and state that to the best of my knowledge and belief, the N Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III.

By signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning the equipment described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date November 27, 1984 Commissions Tennessee #2289
Robert R. Dutton (Inspector) (Nat'l Bd. Stat. Gov. and No.)

001-5140456

FORM NPV-1 N CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES*
 As Required by the Provisions of the ASME Code, Section III, Div. 1

1. Manufactured by Henry Vogt Machine Co., Louisville, KY
(Name and Address of N Certificate Holder)
 2. Manufactured for Arkansas Power & Light Co., Little Rock, AR
(Name and Address of Purchaser or Owner)
 3. Location of Installation Arkansas Nuclear One, Russellville, AR
(Name and Address)
 4. Pump or Valve Gate Valve Nominal Inlet Size 1" Outlet Size 1"
(inch) (inch)

	(a) Model No. or Type	(b) N Certificate Holder's Serial No.	(c) Canadian Registration No.	(d) Drawing No.	(e) Class	(f) Nat'l. Bd. No.	(g) Year Built
(1)	Gate	284-215017	---	B-49832	1	---	1984
(2)	Gate	290-215017	---	B-49832	1	---	1984
(3)	thru						
(4)	313-215017						
(5)	(See Attached Sheet)			MU-1080A			
(6)	SN 295-215017						
(7)							
(8)							
(9)							
(10)							

5.
(Brief description of service for which equipment was designed)

6. Design Conditions psi °F or Valve Pressure Class 1500 (1)
(Pressure) (Temperature)

7. Cold Working Pressure 3500 psi at 100°F.

8. Pressure Retaining Pieces

Mark No.	Material Spec. No.	Manufacturer	Remarks
(a) Castings			
(b) Forgings			
Body			
R4600A	SA 182 F316	Vogt	
Bonnet			
R4602A	SA 182 F316	Vogt	
R1853	SA 182 F316	Vogt	

(1) For manually operated valves only.

* Supplemental sheets in form of lists, sketches or drawings may be used provided (1) size is 8-1/2" x 11", (2) information in items 1, 2 and 5 on this Data Report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at top of this form.

001-524045

Mark No.	Material Spec. No.	Manufacturer	Remarks
(c) Bolting			
Cap Screw HTC	SA 564, Gr. 630 (Condition H 1150)	Vogt	
(d) Other Parts			
Gate HSN	SA 564, Gr. 630 (Condition H 1075)	Vogt	

9. Hydrostatic test 5400 psi. Disk Differential test pressure _____ psi.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in this report are correct and that this pump, or valve, conforms to the rules of construction of the ASME Code for Nuclear Power Plant Components, Section III, Div. 1, Edition 1974 Addenda Summer, '75, Code Case No. _____ Date November 27, 1984
 Signed Henry Vogt Machine Co. by Barbara Brown
(Date)
(N Certificate Holder)
 Our ASME Certificate of Authorization No. 947 to use the N symbol expires 1/6/87
(N) (Date)

CERTIFICATION OF DESIGN

Design information on file at Henry Vogt Machine Co.
 Stress analysis report (Class 1 only) on file at Henry Vogt Machine Co.
 Design specifications certified by (1) Larry D. Young
 PE State Arkansas Reg. No. 4557
 Stress analysis certified by (1) R. S. Perry
 PE State Kentucky Reg. No. 5380
 (1) Signature not required. List name only.

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Commercial Union Ins. Co. of Boston, MA have inspected the pump, or valve, described in this Data Report on April 16, 1984, and state that to the best of my knowledge and belief, the N Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III.
 By signing this certificate, neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the equipment described in this Data Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.
 Date November 27, 1984
Robert R. Durham Commissions Tennessee #2289
(Inspector) (Natl Bd. State, Prov. and No.)

0015140456

Page 1 of 2

FORM NPV-1 N CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES
As Required by the Provisions of the ASME Code, Section III, Div. 1

1. Manufactured by Henry Vogt Machine Co., Louisville, KY
(Name and Address of N Certificate Holder)

2. Manufactured for Arkansas Power & Light Co., Little Rock, AR
(Name and Address of Purchaser or Owner)

3. Location of Installation Arkansas Nuclear One, Russellville, AR
(Name and Address)

4. Pump or Valve Gate Valve Nominal Inlet Size 1" Outlet Size 1"
(inch) (inch)

(a) Model No. or Type	(b) N Certificate Holder's Serial No.	(c) Canadian Registration No.	(d) Drawing No.	(e) Class	(f) Nat'l. Bd. No.	(g) Year Built
(1) Gate	314-215017	---	B-49832	1	---	1984
(2) thru	331-215017					
(3) (See Attached Sheet)			MU-1020B			
(4)			S/N 328-215017			
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

5. _____
(Brief description of service for which equipment was designed)

6. Design Conditions - _____ PSI _____ °F or Valve Pressure Class 1500 (1)
(Pressure) (Temperature)

7. Cold Working Pressure 3600 psi at 100°F.

8. Pressure Retaining Pieces

Mark No.	Material Spec. No.	Manufacturer	Remarks
(a) Castings			
(b) Forgings			
Body			
R4600A	SA 182 F 16	Vogt	
Bonnet			
R4602A	SA 182 F316	Vogt	
R1853	SA 182 F316	Vogt	

(1) For manually operated valves only.

* Supplemental sheets in form of lists, sketches or drawings may be used provided (1) size is 8-1/2" x 11", (2) information in items 1, 2 and 5 on this Data Report is included on each sheet, and (3) each sheet is numbered and number of sheets is recorded at top of this form.

00126240458

Mark No.	Material Spec. No.	Manufacturer	Remarks
(c) Bolting			
Cap Screw HTC	SA 564, Gr. 630 (Condition H 1150)	Vogt	
(d) Other Parts			
Gate HSN	SA 564, Gr. 630 (Condition H 1075)	Vogt	

9. Hydrostatic test 5400 psi. Disk Differential test pressure _____ psi.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in this report are correct and that this pump, or valve, conforms to the rules of construction of the ASME Code for Nuclear Power Plant Components Section III, Div. 1, Edition 1974, Addenda Summer, '75, Code Case No. _____ Date November 27, 1984
 Signed Henry Vogt Machine Co. by Richard Brings
(N Certificate Holder)
 Our ASME Certificate of Authorization No. 947 to use the N symbol expires 1/6/87
(N) (Date)

CERTIFICATION OF DESIGN

Design information on file at _____ Henry Vogt Machine Co.
 Stress analysis report (Class 1 only) on file at _____ Henry Vogt Machine Co.
 Design specifications certified by (1) _____ Larry D. Young
 PE State Arkansas Reg. No. 4557
 Stress analysis certified by (1) _____ R. S. Perry
 PE State Kentucky Reg. No. 5380
 (1) Signature not required. List name only.

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Tennessee and employed by Commercial Union Ins. Co. of Boston, MA have inspected the pump, or valve, described in this Data Report on April 16, 1984 and state that to the best of my knowledge and belief, the N Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III.
 By signing this certificate, neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the equipment described in this Data Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.
 Date November 27, 1984 Commissions Tennessee #2289
Robert L. Decker (Inspector) Nat'l B.C., State, Prov. and No.

00315240439

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 6-19-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 J.O.# 00851787
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up (CCB-5)
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th ADDENDA,
N/A CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
Component Support	Bechtel	NA	NA	CCB-5-MU-466	1968 ^E	Repaired	No
Component Support	Bechtel	NA	NA	MU-220	1968 ^E	Repaired	No
Component Support	Bechtel	NA	NA	CCB-5-MU-467	1968 ^E	Repaired	No
Component Support	Bechtel	NA	NA	MU-244-H00Z	1968 ^E	Repaired	No

7. DESCRIPTION OF WORK Modified supports to meet Code and Specifications
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in this report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II133 "N" "I"
Date 7/2, 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3-31-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 2
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR, 72801 J.O.# 00852428
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Decay Heat Removal (CCB-1)
5. (a) APPLICABLE CONSTRUCTION CODE ASCE 1963 EDITION, 6th ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
Component Support	Bechtel	NA	NA	CCB-1-H14	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCB-6-DH-192	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCB-1-H6	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCB-1-H2	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCA-6-DH-175	1968	Repaired	No

7. DESCRIPTION OF WORK Modify supports to meet Code and specifications
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3-28-92
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00852445
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address

EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Decay Heat (GCB-4)

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
Component Support	Bechtel	NA	NA	DH-129	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-52	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-59	1968	Repaired	No
Component Support	Bechtel	NA	NA	HCB-6-H28	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-103	1968	Repaired	No

7. DESCRIPTION OF WORK Modify Supports

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designer, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J.O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3/20/92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR, 72801 J.O.#00853638
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Emergency Feedwater
5. (a) APPLICABLE CONSTRUCTION CODE USAS B31.7 19 68 EDITION, Draft ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
4" Check Valve	Welan	NA	NA	FW-13B	E 1968	Disc Replaced	No

7. DESCRIPTION OF WORK Replace valve disc.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 1150 psi TEST TEMP. 100 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

f. REMARKS

Applicable Manufacturer's Data Reports to be Attached

USASR31.7. Draft 1968 did not require a Manufacturers Data Report for replacement parts. Therefore none was provided

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employe by CREWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 1-07-92 to 5-9-92 and state that to the best of my knowledge and belief, the inspections were performed examinations and taken corrective measures described in the Owner's Report in accordance with the requirements of the ASME Code, Section III.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

FACTORY MUTUAL SYSTEMS
NB-9947, ARK-1133 "N" "I"

National Board, State, Province, and Endorsements

J. O. Elliott
Inspector's Signature

Commissions

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 12-12-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00854114
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Decay Heat (HCB-2)
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (Y ^o OR ^o)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>PH-108</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modify support to achieve Design Requirements
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

signed R.D. Gillespie Date 7/2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-1133 "N" "I"

National Board, State, Province, and Endorsements

Date J. O. Elliott 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-10-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00854136
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE III 19 77 EDITION, 5-79 ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Rock</u>	<u>71</u>	<u>NA</u>	<u>SV-1079</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and resawelded body to bonnet
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
Date May 12 1992 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-18-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR, 72801 J.O. # 00854137
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System

5. (a) APPLICABLE CONSTRUCTION CODE III 19 77 EDITION, 5-79 ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
1" Globe Valve	Target	14	NA	SV-1083	1980	Replaced	No
1" Globe Valve	Target	81	NA	SV-1083	1992	Replacement	No

7. DESCRIPTION OF WORK Cut-Out and replace valve like for like.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NPV-1
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Co/s Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NE-9947, ARK-I133 "N" "I"
Date May 12 1992
National Board, State, Province, and Endorsements

FORM NPV-1 (back)

Mfr. Serial No. N/A

8. Remarks _____

9. Design conditions 2500 psi 700 °F or valve pressure class N/A (1)
(pressure) (temperature)

10. Cold working pressure 4372 psi at 100°F

11. Hydrostatic test 6575 psi Temp. Ambient °F Disk differential test pressure 4825 psi

CERTIFICATION OF DESIGN

Design Specification certified by Larry Young Prof. Eng. state Arkansas Reg. No. 4557
 Design Report certified by Steven Karidas Prof. Eng. state NY Reg. No. 056047

CERTIFICATE OF SHOP COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III.

N Certificate of Authorization No. 1947 Expires 12-12-92

Date 2/21/92 Name Target Rock Corporation Signed E. Bajada
(N Certificate Holder) E. Bajada, Director, Q.A.

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of New York and employed by Commercial Union Ins. Co. of Boston, Mass. have inspected the pump, or valve, described in this Data Report on

2/21 1992 and state that to the best of my knowledge and belief, the N Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III.

By signing this certificate, neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the equipment described in this Data Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date 2/21 1992
William A. Ireland Commissions N. Y. STATE COMMISSION NO. 2288
(Inspector) ALSO COMMISSIONED IN PENN., OHIO & CONN.
(Nat'l Bd., (incl. endorsements) State, Prov. and No.)

(1) For manually operated valves only.

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 4-8-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 J.O.# 00854220
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE III 19 77 EDITION, 5-79 ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Farset Rock</u>	<u>22</u>	<u>NA</u>	<u>S-1091</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and reweld body to bonnet seal weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-9-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00854267
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System (CCM-13-1)

5. (a) APPLICABLE CONSTRUCTION CODE III 1980 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Bolt</u>	<u>12</u>	<u>NA</u>	<u>SV-1084</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NA
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements
Date 7/2 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-6-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00857438
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up (CCB-4)
5. (a) APPLICABLE CONSTRUCTION CODE ASME B31.1 1968 EDITION, NA ADDENDA,
CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>2" Globe Valve</u>	<u>Nelan</u>	<u>NA</u>	<u>NA</u>	<u>MU-1207-1</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Replaced disc.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2850 psi TEST TEMP. 110 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
 Applicable Manufacturer's Data Reports to be Attached
Draft 68 edition of code, does not require an N-2
manufactures data report or for the part to be
sealized.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this
repair conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/17/92, 1992
 Owner or Owner's Designee, Title
 R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of
 Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS
NORWOOD, MASS. and employed by ARKWRIGHT MUTUAL INSURANCE CO. of
NORWOOD, MASS. have inspected the components described in this
 Owner's Report during the period 01-07-91 to 5-9-92
 and state that to the best of my knowledge and belief, the Owner has performed
 examinations and taken corrective measures described in this Owner's Report in
 accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any
 warranty, expressed or implied, concerning the examinations and corrective measures
 described in this Owner's Report. Furthermore, neither the Inspector nor his
 employer shall be liable in any manner for any personal injury or property damage
 or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
 Inspector's Signature NB-9947, ARK-II33 "N" "I"
 Date July 20 1992
 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 11-17-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00864289
Address Repair Organization PG No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Decay Heat (HCB-2)
5. (a) APPLICABLE CONSTRUCTION CODE Sect. III 1968 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>4" Thick Nerve</u>	<u>Anchor Darling</u>	<u>7250-9</u>	<u>NA</u>	<u>CA-62</u>	<u>1970</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Replaced disc with like for like.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 39 psi TEST TEMP. 78 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

signed R. D. Gillespie Date 7/17/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date July 20 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 4-8-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00854268
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System

5. (a) APPLICABLE CONSTRUCTION CODE III 1977 EDITION, S-79 ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
1" Globe Valve	Target Rock	12	NA	SV-1084	1980	Replaced	No
1" Globe Valve	Target Rock	85	NA	SV-1084	1992	Replacement	No

7. DESCRIPTION OF WORK Cut-out valve and replaced like for like.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NPR-1
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/2 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-1133 "N" "I"
Date 7/2 1992
National Board, State, Province, and Endorsements

FORM NPV-1 (back)

Mfr. Serial No. N/A

8. Remarks _____

9. Design conditions 2500 (pressure) psi 700 (temperature) °F or valve pressure class N/A (1)

10. Cold working pressure 4372 psi at 100°F

11. Hydrostatic test 6575 psi Temp. Ambient °F Disk differential test pressure 4825 psi

CERTIFICATION OF DESIGN

Design Specification certified by Larry Young Prof. Eng. state Arkansas Reg. No. 4557
 Design Report certified by Steven Karidas Prof. Eng. state NY Reg. No. 056047

CERTIFICATE OF SHOP COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III.

N Certificate of Authorization No. 1947 Expires 12-12-92

Date 2/28/92 Name Target Rock Corporation Signed E. Bajada
(N Certificate Holder) E. Bajada, Director, Q.A.

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of New York and employed by Commercial Union Ins. Co. of Boston, Mass. have inspected the pump, or valve, described in this Data Report on 2/28 1992, and state that to the best of my knowledge and belief, the N Certificate Holder has constructed the pump, or valve, in accordance with the ASME Code, Section III.

By signing this certificate, neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the equipment described in this Data Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date 2/28 1992
William A. Ireland Commissions N. Y. STATE COMMISSION NO. 2288
(Inspector) ALSO COMMISSIONED IN PENN., OHIO & CONN.
(Nat'l Bd., (incl. endorsements) State, Prov. and No.)

(1) For manually operated valves only.

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-2-92
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00854219
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System (CCM-13-1)

5. (a) APPLICABLE CONSTRUCTION CODE III 1980 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Rock</u>	<u>22</u>	<u>NA</u>	<u>SU-1091</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NE-9947, ARK-I133 "N" "I"
Date 7/2 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00855034
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address

EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Recog Heat

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>DH-10</i>	<i>1968</i>	<i>Repaired</i>	<i>No</i>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NA
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-7-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-1133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-1-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00855567
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Decay Heat Removal
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Becht</u>	<u>NA</u>	<u>NA</u>	<u>CCB-1-H12</u>	<u>1968</u>	<u>Repaired</u>	<u>No.</u>

7. DESCRIPTION OF WORK Modify support to meet Code and specifications
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF SERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions

FACTORY MUTUAL SYSTEMS
NB-9947, ARK-II33 "N" "I."
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-9-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 J.O. #00857897
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name AUTHORIZATION NO. N/A
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 EXPIRATION DATE N/A
Address
4. IDENTIFICATION OF SYSTEM Steam Generator (E-24A)
5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 1971 EDITION, NA ADDENDA,
NA CODE CASE
 (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Steam Generator</u>	<u>B&W</u>	<u>123</u>	<u>123</u>	<u>E-24A</u>	<u>1971</u>	<u>Replaced Studs</u>	<u>Yes</u>

7. DESCRIPTION OF WORK Replaced all upper handhole primary studs.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
 OTHER PRESSURE 2500 psi TEST TEMP. 650 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

Replacement studs are not serialized

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I132 "B" "I"

Inspector's Signature J. O. Elliott Commissions NB-9947, ARK-I132 "B" "I"
National Board, State, Province, and Endorsements

Date 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 J.O. #00857905
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Steam Generator (E-248)
5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 19 71 EDITION, NA ADDENDA,
Code Case
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>16" Steam Generator</u>	<u>B+W</u>	<u>124</u>	<u>124</u>	<u>E-248</u>	<u>1971</u>	<u>Stud Replacement</u>	<u>Yes</u>

7. DESCRIPTION OF WORK Replaced all upper primary handhole studs.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2500 psi TEST TEMP. 600 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

Replacement studs are not serialized.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsement:

Date 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-14-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00860967
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up (CCB-4)
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th ADDENDA,
N/A CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>H005 Ret 4</i>	<i>E 1968</i>	<i>Repaired</i>	<i>No</i>

7. DESCRIPTION OF WORK Modified Support to meet Code & Specifications
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 of this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section VI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
Date 7/2 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-17-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00860970
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. E/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up (CCB-4)
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th ADDENDA,
N/A CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>H004 Dist. 4</i>	<i>E 1968</i>	<i>Repaired</i>	<i>No</i>

7. DESCRIPTION OF WORK Modified Support to meet Design Specifications

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
Date 7/2 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENT
As Required by the Provisions of the ASME Code Section I

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-10-92
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00861130
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>NA4-197</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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J. O. Elliott
Inspector's Signature

Commissions

FACTORY MUTUAL SYSTEMS
NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3-31-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00861662
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up & Purification
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>MU-237</i>	<i>1968</i>	<i>Repaired</i>	<i>No</i>

7. DESCRIPTION OF WORK Modified Support
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

NA

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 19

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions NB-9947, ARK-I133 "R" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 19 92

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-21-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 2
Address

2. PLANT ARKANSAS NUCLEAR ONE UNITY ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. 00864142
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant, Decay Heat and Safety Valve Discharge

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
Hydraulic Lumber	Anchor Darling	852	NA	MU-210A	1982	Replaced	No
Hydraulic Lumber	Anchor Darling	877	NA	MU-210A	1992	Replacement	No
Hydraulic Lumber	Anchor Darling	856	NA	RC-214-H3	1982	Replaced	No
Hydraulic Lumber	Anchor Darling	1089	NA	RC-214-H3	1982	Replacement	No
Hydraulic Lumber	FTT Gruenl	9990	NA	HS-69	1982	Replaced	No

7. DESCRIPTION OF WORK Replaced ladders per technical specification requirements.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/2, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements
Date 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4/24/92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00865079
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Deeg Heat System

5. (a) APPLICABLE CONSTRUCTION CODE USASB31.7 1969 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
14" Gate Valve	Walworth	69/W-483-1	NA	CV-1407	1969	Repaired	No

7. DESCRIPTION OF WORK Replaced 90° elbow welded to valve due to crack in weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 62 psi TEST TEMP. Amb. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repairs conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Inspector's Signature

Commissions

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-14-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00865984
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up (CCB-4)
5. (a) APPLICABLE CONSTRUCTION CODE sect. III 19 71 EDITION, S-V2 ADDENDA,
CODE CASE N/A
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>2" globe Valve</u>	<u>Xerotest</u>	<u>9909/FB</u>	<u>NA</u>	<u>MU-1207-2</u>	<u>1968</u>	<u>Replaced</u>	<u>No</u>
<u>2" globe Valve</u>	<u>Xerotest</u>	<u>R19-3</u>	<u>NA</u>	<u>MU-1207-2</u>	<u>1973</u>	<u>Replacement</u>	<u>No</u>

7. DESCRIPTION OF WORK Cut-Out valve and replaced with like for like.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 3850 psi TEST TEMP. 250 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. **REMARKS** NPV-1 attached
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
Date 7/2, 1992 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-16-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00864259
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE sect. III 19 68 EDITION, NA ADDENDA,
N/A CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1/2" Globe Valve</u>	<u>Xerotest</u>	<u>AFG-10</u>	<u>NA</u>	<u>RC-4</u>	<u>1986</u>	<u>Replaced</u>	<u>Yes</u>
<u>1/2" Globe Valve</u>	<u>Controlled Components</u>	<u>587751-1</u>	<u>NA</u>	<u>RC-4</u>	<u>1992</u>	<u>Replacement</u>	<u>Yes</u>

7. DESCRIPTION OF WORK Cut-out and replaced valve.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS HPV-1 Attached
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/9/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

Date J. O. Elliott 7/9 1992

Certificate Holder's Serial No. 587751-1-1 & 587751-1-2

8. Design conditions 2580 psi 670 Deg. F or Valve pressure class 2500 ANSI (1)
(pressure) (temperature)
9. Cold working pressure 6000 psi at 100 Deg. F
- 10 Hydrostatic test 9000 psi. Disk differential pressure N/A (1)
- 11 Remarks PRESURIZER BY-PASS SPRAY VALVE

CERTIFICATE OF DESIGN

Design Specification certified by CHRISTOPHER DAVENPORT P.E. State ARKANSAS Reg. no. 6156
 Design Report certified by _____ P.E. State _____ Reg. no. _____

CERTIFICATE OF COMPLIANCE

We certify that the statements made in this report are correct and that this pump or valve conforms to the rules for construction of the ASME Code, Section III, Division 1.

N Certificate of Authorization No. 2695 Expires JUNE 7, 1994

Date 2/21/92 Name CONTROL COMPONENTS INC. Signed [Signature]
(N Certificate Holder) (authorized representative)

CERTIFICATE OF INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of CALIFORNIA and employed by HARTFORD STEAM BOILER INSPECTION AND INSURANCE COMPANY of HARTFORD, CONNECTICUT have inspected the pump, or valve, described in this Data Report on 2-22-92 and state that to the best of my knowledge and belief, the Certificate Holder has constructed this pump or valve, in accordance with ASME Section III, Division 1.

By signing this certificate, neither the inspector nor his employer makes warranty, expressed or implied, concerning the component described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personal injury or property loss of any kind arising from or connected with this inspection.

Date 2/22/92 Signed [Signature] Commissions C-1494
(Authorized inspector) (Nat'l Bd. (including endorsement) and state or prov. and no.)

(1) For manually operated valves only.

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3-31-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00854/35
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System (CCA-15)
5. (a) APPLICABLE CONSTRUCTION CODE III 1980 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
1" Globe Valve	Target Rock	45	NA	SV-1073	1980	Repaired	No
1" Globe Valve	Target Rock	43	NA	SV-1074	1980	Repaired	No

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NA
 Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/15/92, 1992
 Owner or Owner's Designee, Title
 R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
 Inspector's Signature NB-9947, ARK-I133 "N" "I"
 Date July 16 1992
 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3-27-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00842610
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System (ccc-2)
5. (a) APPLICABLE CONSTRUCTION CODE sect. III 1968 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>3/4" Globe Valve</u>	<u>Warg-Warner</u>	<u>1486</u>	<u>NA</u>	<u>RC-1054C</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed seal weld and rewelded body to bonnet seal weld.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE N/A psi TEST TEMP. N/A °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/15/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF IN-SERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by NORWOOD, MASS. "ARKWRIGHT MUTUAL INSURANCE CO." of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
Date July 16, 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3-31-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801
Address

J.O. # 00836561
Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR, 72801
Address

AUTHORIZATION NO. N/A
EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System (CCS-17)

5. (a) APPLICABLE CONSTRUCTION CODE sect. III 19 68 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target</u>	<u>5</u>	<u>NA</u>	<u>SU-1071</u>	<u>1980</u>	<u>Repaired</u>	

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/15/92 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-1133 "N" "I"
Date July 16 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-27-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00852398
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up (CEB-7)
5. (a) APPLICABLE CONSTRUCTION CODE Draft 68 1968 EDITION, NA ADDENDA,
Code Case
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>2" Globe Valve</u>	<u>Velan</u>	<u>NA</u>	<u>NA</u>	<u>MU-21C</u>	<u>E 1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Replaced disc.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2750 psi TEST TEMP. 250 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information on items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

The replaced disc serial number is 50988
The replacement disc serial number is 244-1

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/5/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
Date July 16 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 J.O. # 0865061
Address Repair organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE Sect. III 1968 EDITION, NA ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
CRDM-9	B&W	NA	NA	CRDM-9	^E 1968	Replacement	No

7. DESCRIPTION OF WORK Replaced CRDM with like for like.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2500 psi TEST TEMP. 650 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form

9. REMARKS N/A
 Applicable Manufacturer's Data Reports to be Attached
CRDM housings are not analyzed.
No Manufacturer Data Report required for replacement CRDM

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/15/92 1992
 Owner or Owner's Designee, Title
 R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
 Inspector's Signature NB-9947, ARK-II33 "N" "I"
 Date July 16 1992
 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-30-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 J.O.# 00768505
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SECTION CA
5. (a) APPLICABLE ASME SECTION CODE Draft 68 1968 EDITION, NA ADDENDA,
Code Case
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1° 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
1.5" Gate Valve	Nelan	Not available	NA	CA-111B	E 1968	Replaced	No.
1.5" Gate	Henry Doft	90-214782	NA	CA-111B	1980	Replacement	No.

7. DESCRIPTION OF WORK Cut-Out valve and replaced per PEAR 88-2057
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 1150 psi TEST TEMP. 100 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NPV-1
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/15/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF DEERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date July 16 1992

0001412 3657

Mark No.	Material Spec. No.	Manufacturer	Remarks
(c) Baking (See Section 2) BY	SA 285 GR. 37	Yonke Valve	
(d) Other Parts Gaskets G-304	SA 479 Y. 520 (Manufacturer Only)	Yonke	

8. Hydrostatic test 2175 psi. Peak Differential test pressure 1400 psi.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in this report are correct and that this pump, or valve, conforms to the rules of construction of the ASME Code for Nuclear Power Plant Components, Section III, Div. 1, Edition 1977.

Addenda Supplement 177 Code Case No. _____ Date 3/21/80

Signed Henry Vogt Machine Co. by Henry A. Juczyk
(ASME Certificate Holder) (in) symbol expires 1/6/81

Our ASME Certificate of Authorization No. 947 to use the III symbol expires _____ (Date)

CERTIFICATION OF DESIGN

Design information on file at Henry Vogt Machine Co.
Stress analysis report (Class 1 only) on file at Henry Vogt Machine Co.

Design specifications certified by (1) Ray Tomala
PE State CA Reg. No. 27041

Stress analysis certified by (1) R. S. Perry
PE State TX Reg. No. 5388

(1) Signature not required. List name only.

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Massachusetts and employed by Henry Vogt Machine Co. of Boston, MA have inspected the pump, or valve, described in this Data Report on Feb. 20, 1980 and state that to the best of my knowledge and belief, the ASME Certificate Holder has constructed this pump, or valve, in accordance with the ASME Code, Section III.

By signing this certificate, neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the equipment described in this Data Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Date March 11, 1980 Commissions Massachusetts #1
(Inspector) (Nat'l Bd., State, Prov. and No.)

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00867-134
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Steam Generator (E-24B)
5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 19 71 EDITION, N/A ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS IS 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Steam Generator</u>	<u>B+W</u>	<u>124</u>	<u>124</u>	<u>E-24B</u>	<u>1971</u>	<u>Repaired</u>	<u>Yes</u>

7. DESCRIPTION OF WORK Machined feedwater nozzle seating surface in shell
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE ME
OTHER PRESSURE 1150 psi TEST TEMP. 650 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
 Applicable Manufacturer's Data Reports to be Attached
Replaced 2 studs and 2 nuts at feedwater nozzle to shell joint.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/15/92, 1992
 Owner or Owner's Designee, Title
 R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
 Inspector's Signature NB-9947, ARK-II33 "N" "I"
 National Board, State, Province, and Endorsements
 J. O. Elliott Date July 16 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 11-17-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00864289
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Decay Heat (HCB-2)
5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 1968 EDITION, NA ADDENDA.
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>4" Check Valve</u>	<u>Anchor Boring</u>	<u>9250-9</u>	<u>NA</u>	<u>CA-62</u>	<u>1970</u>	<u>Repaired</u>	<u>NA</u>

7. DESCRIPTION OF WORK Replaced disc with like for like.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 39 psi TEST TEMP. 78 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/17/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date July 20 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 5-6-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00857438
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up (CEB-4)
5. (a) APPLICABLE CONSTRUCTION CODE ASME 1968 EDITION, NA ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>2" Globe Valve</u>	<u>Velan</u>	<u>NA</u>	<u>NA</u>	<u>MU-1207-1</u>	<u>1968^E</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Replaced disc.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2850 psi TEST TEMP. 110 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A

Applicable Manufacturer's Data Reports to be Attached

Draft 68 edition of code, does not require an N-2
manufactures data report or for the part to be
specialized.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this remain conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/17/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date July 20 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 12-8-90
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00818403
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make Up
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>GCB-2-DH203</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modify Support per DCP 85-1051
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
 Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/1/92, 1992
 Owner or Owner's Designee, Title
 R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-92 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
 Inspector's Signature NB-9947, ARK-I133 "N" "I"
 National Board, State, Province, and Endorsements
 J. O. Elliott Date May 12 1992

FORM NPV-1 (back)

00006344097

Mark No.	Material Spec. No.	Manufacturer	Remarks
(c) Bolting			
(d) Other Parts			
disc B-9909-9-(2)	SA479 Type 316	Carpenter	Mat'l. Code X
bonnet W-B-9909-3-(2)	"	"	" HP

2. Hydrostatic test 5400 psi.

CERTIFICATION OF DESIGN

Design information file no. Kerotest Manufacturing Corp.

Stress analysis report on file no. N/A

Design specifications certified by J. Genoles (1) Prof. Eng. State Calif. Reg. No. 2371

Stress analysis report certified by N/A (1) Prof. Eng. State _____ Reg. No. _____

(1) Signature not required. List name only.

We certify that the statements made in this report are correct.

Date February 6 73 Signed Kerotest By J. D. Tricini
(Manufacturer)

Certificate of Authorization No. 310 expires 10/22/74

CERTIFICATE OF SHOP INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and in the State of Pennsylvania and employed by Hartford Steam Boiler I & I of Hartford, Connecticut have inspected the equipment described in this Data Report on February 6 73 and state that on the basis of my knowledge and belief, the Manufacturer has constructed this equipment in accordance with the applicable Subsections of ASME Code, Section III.

In signing this certificate, neither the inspector nor his employer makes any warranty, expressed or implied, concerning any equipment described in this Data Report. Furthermore, neither the inspector nor his employer shall be liable in any manner for any personnel injury or property damage or a loss of any kind arising from or connected with this inspection.

Date February 6 73

[Signature] (Inspector)
[Signature] (Manufacturer)

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-19-91
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00818761
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Pressure Relief
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA, NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>FCB-2-RC-37</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support per LCP 90-5019
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and his repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by AREWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
Date May 12 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&I/ENERGY OPERATIONS, INC. DATE 4-22-92
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 2
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00849166
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&I/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address

EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up System

5. (a) APPLICABLE CONSTRUCTION CODE B31.7 1968 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
2.5" Globe Valve	Nelap	128860	NA	CV-1228	1968 ^E	Replaced	No
2.5" Globe Valve	Anchor Darling	EB535-1-5	NA	CV-1228	1990	Replacement	No
2.5" Globe Valve	Nelap	334450	NA	CV-1227	1968 ^E	Replaced	No
2.5" Globe Valve	Anchor Darling	EB535-1-6	NA	CV-1227	1990	Replacement	No
2.5" Globe Valve	Nelap	47	NA	CV-1220	1968 ^E	Replaced	No

7. DESCRIPTION OF WORK Cut-out and replaced valves per DCP87-1097

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 3900 psi TEST TEMP. Amb. °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NPR-1s
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 7-4-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00822071
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make Up
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA, NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
Component Support	Bechtel	NA	NA	CCB-MU-138	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCB-2-MU-113	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCB-2-MU-114	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCB-2-H5	1968	Repaired	No
Component Support	Bechtel	NA	NA	CCB-2-H9	1968	Repaired	No

7. DESCRIPTION OF WORK Modify Supports
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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J. O. Elliott Commissions NB-9947, ARK-1133 "N" "I"
Inspector's Signature National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-1-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 2
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR, 72801 J.O.# 00822925
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Decay Heat

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>GCB-3-H1</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>GCB-1-DH-11</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>GCB-1-DH-13</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>GCB-1-DH-16</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>DH-306</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

signed R. D. Gillespie Date 5/11/92 19__
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 6-22-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR, 72801 J.O. # 00823448
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 AUTORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Service Water

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENT IS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>HBB-3-H3</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gilman Date 7/11/92, 19

Owner or Owner's Designee, Title
R. D. Gilman Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

Date J. O. Elliott
May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 11-19-90
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 0. #00825581
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>MU-248</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>MU-249</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Increased weld sizes on support.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this N/A conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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J. O. Elliott Commission FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 12-8-90
Name
- RT. 3 BOX 137 G. RUSSELLVILLE, AR. 72801 SHEET 1 of 2
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00825106, 008184034 00827331
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make Up and Decay Heat
5. (a) APPLICABLE CONSTRUCTION CODE ASCE 19 63 EDITION, 6th Edition ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
Component Support	Bechtel	NA	NA	DH-209	1968	Repaired	No
Component Support	Bechtel	NA	NA	ACB-2-H4	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-213	1968	Repaired	No
Component Support	Bechtel	NA	NA	HCB-2-H5	1968	Repaired	No
Component Support	Bechtel	NA	NA	HCB-2-H1	1968	Repaired	No

7. DESCRIPTION OF WORK Modify Supports per OCP 85-1051
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II133 "N" "I"
National Board, State, Province, and Endorsements
Date May 12 1992

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
Component Support	Bechtel	NA	NA	DH-214	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-205	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-146	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-147	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-210	1968	Repaired	No
Component Support	Bechtel	NA	NA	HCB-15-H3	1968	Repaired	No
Component Support	Bechtel	NA	NA	HCB-2-H21	1968	Repaired	No
Component Support	Bechtel	NA	NA	GCB-2-H2	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-138	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-121	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-54	1968	Repaired	No
Component Support	Bechtel	NA	NA	GCB-4-H17	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-107	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-51	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-125	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-53	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-251	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-117	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-56	1968	Repaired	No
Component Support	Bechtel	NA	NA	GCB-4-H18	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-130	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-252	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-122	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-133	1968	Repaired	No
Component Support	Bechtel	NA	NA	DH-111	1968	Repaired	No

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-8-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00827215
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Core Flood System

5. (a) APPLICABLE CONSTRUCTION CODE Draft 1968 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>3/4" Globe Valve</u>	<u>Nelan</u>	<u>NA</u>	<u>NA</u>	<u>CF-2426</u>	<u>E</u> <u>1968</u>	<u>Repaired</u>	<u>NA</u>

7. DESCRIPTION OF WORK Replaced vent nipple to valve.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

Valve serial number does not exist.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"

National Board, State, Province, and Endorsements

J. O. Elliott
Inspector's Signature

Commissions

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00827650
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM _____
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1965 EDITION, 6th Edition ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>PS-103</i>	<i>1968</i>	<i>Repaired</i>	<i>No</i>

7. DESCRIPTION OF WORK Modified Support
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

signed R. D. Gillespie Date 7/2, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-1133 "N" "I"
National Board, State, Province, and Endorsements
J. O. Elliott Date 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00827827
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up

5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 1968 EDITION, N/A ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>PIPING</u>	<u>Various</u>	<u>NA</u>	<u>NA</u>	<u>CEB-4-12"</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed arc strikes and gauges

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions NB-9947, ARK-I133 "N" "I"
Inspector's Signature FACTORY MUTUAL SYSTEMS
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-8-90
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00828171
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address

EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Decay Heat

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Buehler</u>	<u>NA</u>	<u>NA</u>	<u>DH-142</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. **REMARKS** N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorisation No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "Y"
National Board, State, Province, and Endorsements

Date J. O. Elliott May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 11-17-90
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00828203
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Decay Heat

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA.
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>GCB-1-H14</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Joseph O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00828206
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>SI-17</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF DESERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO." of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements

Date J. O. Elliott May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-8-91
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00828294
Address Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up

5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>PS-103</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-1133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 J.O.#00828296
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Make-Up
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Buckel</u>	<u>NA</u>	<u>NA</u>	<u>PS-102</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions NE-9947, ARK-II33 "N" "I"
Inspector's Signature FACTORY MUTUAL SYSTEMS
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-7-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00828489
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant
5. (a) APPLICABLE CONSTRUCTION CODE USAS B31.7 1968 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
6" PIPING	Various	NA	NA	FCB-2-6"	1968	Repaired	No

7. DESCRIPTION OF WORK Remove arc strikes
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 6-22-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00830439
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED at APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Service Water
5. (a) APPLICABLE CONSTRUCTION CODE ASME 1963 EDITION, 6th Edition ADDENDA,
N/A CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>HBB-3-SK-1</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support per OCP 89-1045
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 2 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-113, "N" "I"
Date May 12 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-17-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SKETCH 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT DHE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00835029
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Building Sprung
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Component Support</u>	<u>Bechtel</u>	<u>NA</u>	<u>NA</u>	<u>BS-205</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Modified Support
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/91 1991
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
Date May 12 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 3-31-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 Address
J.O.#00836656
Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 Address
AUTHORIZATION NO. N/A
EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System

5. (a) APPLICABLE CONSTRUCTION CODE III 19 77 EDITION, S-79 ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Tech</u>	<u>80E-21</u>	<u>NA</u>	<u>SU-1072</u>	<u>1980</u>	<u>Repaired</u>	<u>NA</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

signed R.D. Gillespie Date 5/11/92 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 4-18-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00836803
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE III 19 77 EDITION, S-79 ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Rock</u>	<u>10</u>	<u>NA</u>	<u>SU-1082</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed seal weld and rewelded body to bonnet seal weld.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 19

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed NORWOOD, MASS. ARKWRIGHT MUTUAL INSURANCE CO. of ARKANSAS have inspected the components described in this Owner's Report during the period 01-07-91 to 5-8-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-16-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00840158
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 1980 EDITION, NA ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Wegert</u>	<u>40</u>	<u>NA</u>	<u>SV-1193</u>	<u>1980</u>	<u>Repaired</u>	<u>Yes</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Date May 12 1992 NB-9947, ARK-T133 "N" "I"
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 3-24-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00 842575
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Decay Heat (CCB-1-12)
5. (a) APPLICABLE CONSTRUCTION CODE B31.7 1968 EDITION, NA ADDENDA
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>10" Gate Valve</u>	<u>Velan</u>	<u>NA</u>	<u>NA</u>	<u>CV-1401</u>	<u>1968</u>	<u>Replacement</u>	<u>NA</u>

7. DESCRIPTION OF WORK Replaced wedge, S/N 3527
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 19.3 psi TEST TEMP. 82 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

Applicable Manufacturer's Data Reports to be Attached

This valve does not have a serial number, since B31.7 did not require an NPV-1 Manufacturer's Data Report. Also there is no requirement for an N-2 Manufacturer's Data Report for the wedge.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott
Inspector's Signature

Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-I133 "N" "I"

J. O. Elliott
Date 7/2, 1992

National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 3-26-92
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00848710
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up (CCA-5)

5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 1968 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>2.5" Check Valve</u>	<u>Anchor Darling</u>	<u>E6375-3-1</u>	<u>NA</u>	<u>MU-66A</u>	<u>1979</u>	<u>Revised</u>	<u>NA</u>

7. DESCRIPTION OF WORK Replaced disc

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2320 psi TEST TEMP. 650 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
 Applicable Manufacturer's Data Reports to be Attached
The serial number of the replacement disc is #3

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 7/2 1992
 Owner or Owner's Designee, Title
 K. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
 Inspector's Signature NB-9947, ARK-I133 "N" "I"
 Date 7/2 1992
 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-5-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00849145
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System (CCA-13)
5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 1968 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Rock</u>	<u>71</u>	<u>NA</u>	<u>SV-1079</u>	<u>1979</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/1 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-1133 "N" "I"
Date 7/2 1992
National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-9-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00849146
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System (CCR-13-1)
5. (a) APPLICABLE CONSTRUCTION CODE III 1980 EDITION, IV-81 ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1/4" Globe Valve</u>	<u>Target Works</u>	<u>14</u>	<u>NA</u>	<u>SV-1083</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal welds
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5-9-92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-1133 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date 7/2 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&I/ENERGY OPERATIONS, INC. DATE 5-5-92
Name

RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name

RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00849146
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&I/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name

RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System

5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 19 88 EDITION, NA-W-81 ADDENDA,
NA COD' CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Rock</u>	<u>14</u>	<u>NA</u>	<u>SU-1083</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

FACTORY MUTUAL SYSTEMS
NB-9947, ARK-II33 "N" "I"

National Board, State, Province, and Endorsements

J. O. Elliott
Inspector's Signature

J. O. Elliott
Date 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-9-92
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR, 72801 Address
J.O.#00849166
Repair Organisation PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 Address
AUTHORIZATION NO. N/A
EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Make-Up & Purification
5. (a) APPLICABLE CONSTRUCTION CODE AISC 1963 EDITION, 6th Edition ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>MU-153</i>	<i>1968</i>	<i>Repaired</i>	<i>No</i>
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>MU-401</i>	<i>1968</i>	<i>Repaired</i>	<i>No</i>
<i>Component Support</i>	<i>Bechtel</i>	<i>NA</i>	<i>NA</i>	<i>MU-190</i>	<i>1968</i>	<i>Repaired</i>	<i>No</i>

7. DESCRIPTION OF WORK Modified Supports
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS NA
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. P. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. P. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
Date May 12 1992
National board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER APAL/ENERGY OPERATIONS, INC. DATE 5-6-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00849147
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY APAL/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant Systems (CCM-15-1)
5. (a) APPLICABLE CONSTRUCTION CODE III 1980 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
1" Globe Valve	Parrot Rock	45	NA	SV-1073	1980	Repaired	No
Valve 1" Globe	Parrot Rock	43	NA	SV-1074	1980	Repaired	No

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A

Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/2, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

Date 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-16-91
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00837164
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 19 80 EDITION, NA ADDENDA,
NA CODE CASE
(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Forst</u>	<u>12</u>	<u>NA</u>	<u>SV-1084</u>	<u>1980</u>	<u>Repaired</u>	<u>Yes</u>

7. DESCRIPTION OF WORK Remove and reweld body to bonnet seal weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Report to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-4-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-I133 "N" "I"
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-7-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. #00846987
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE Section III 19 68 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
CRDM	B&W	12	NA	CRDM-47	1968	Replaced	No
CRDM	B&W	1626	NA	CRDM-47	1990	Replacement	No

7. DESCRIPTION OF WORK Replaced CRDM-47 with like for like spare.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2320 psi TEST TEMP. 670 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
 Applicable Manufacturer's Data Reports to be Attached
A manufacturer's data report not required for this CRDM replacement.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 7/2, 1992
 Owner or Owner's Designee, Title
 R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
 Inspector's Signature NB-9947, ARK-II33 "N" "I"
 National Board, State, Province, and Endorsements
 Date 7/2, 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-25-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00840222
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant
5. (a) APPLICABLE CONSTRUCTION CODE B31.7 1968 EDITION, NA ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>Safety Valve</u>	<u>Dresser</u>	<u>BM 4916</u>	<u>NA</u>	<u>PSV-1000</u>	<u>1965</u> ^E	<u>Replaced</u>	<u>No</u>
<u>Safety Valve</u>	<u>Dresser</u>	<u>BM 01594</u>	<u>NA</u>	<u>PSV-1000</u>	<u>1968</u> ^E	<u>Replacement</u>	<u>No</u>

7. DESCRIPTION OF WORK Replace valve with spare like for like valve
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE 2500 psi TEST TEMP. 600 °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

N/A

Applicable Manufacturer's Data Reports to be Attached

NPV-1 Manufacturers Data Report for spare replacement submitted previously. The process is basically an exchange of valves which occurs each refueling outage.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this replacement conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&I/ENERGY OPERATIONS, INC. DATE 4-18-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O. # 00837112
Address Repair Organisation PO No., Job No., etc.
3. WORK PERFORMED BY AP&I/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE III 19 77 EDITION, S-79 ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" globe Valve</u>	<u>Target Rock</u>	<u>9</u>	<u>NA</u>	<u>SV-1081</u>	<u>1980</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

FACTORY MUTUAL SYSTEMS
NB-9947, ARF-II33 "X" "I"

National Board, State, Province, and Endorsements

J. O. Elliott
Inspector's Signature

Commissions

J. O. Elliott
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-16-91
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR, 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR, 72801 J.O.# 00837122
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR, 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Reactor Coolant System

5. (a) APPLICABLE CONSTRUCTION CODE sect. III 19 80 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 19 86

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Yarset Rock</u>	<u>14</u>	<u>NA</u>	<u>SU-1083</u>	<u>1980</u>	<u>Repaired</u>	<u>Yes</u>

7. DESCRIPTION OF WORK Remove and reweld body to bonnet seal weld.

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, hold a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-1133 "N" "I"
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 4-8-92
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.#00837217
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Reactor Coolant System
5. (a) APPLICABLE CONSTRUCTION CODE III 1981 EDITION, NA ADDENDA,
Code Case NA
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Rock</u>	<u>80E-001</u>	<u>NA</u>	<u>SU-1092</u>	<u>1981</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Remove and reweld body to bonnet seal weld.
8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
 Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
 repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

signed R.D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
 R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions NE-9947, ARK-1133 "N" "I"
 Inspector's Signature FACTORY MUTUAL SYSTEMS
 Date May 12 1992 National Board, State, Province, and Endorsements

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-10-91
Name
- RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address
2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
- RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00842650
Address Repair Organization PO No., Job No., etc.
3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
- RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A
4. IDENTIFICATION OF SYSTEM Steam Sampling System
5. (a) APPLICABLE CONSTRUCTION CODE sect III 1968 EDITION, NA ADDENDA,
NA CODE CASE
- (b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986
6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" globe valve</u>	<u>Target</u>	<u>48</u>	<u>NA</u>	<u>SV-1842</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Remove & re weld body to bonnet seal weld.
8. TESTS CONDUCTED: HYDR. STATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE NA psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS

NA
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R.D. Gillespie Date 5/11/92, 1992
Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. O. Elliott Commissions NB-9947, ARK-I133 "N" "I"
Inspector's Signature FACTORY MUTUAL SYSTEMS
National Board, State, Province, and Endorsements
Date May 12 1992

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. OWNER AP&L/ENERGY OPERATIONS, INC. DATE 5-10-91
Name
RT. 3, BOX 137 G, RUSSELLVILLE, AR. 72801 SHEET 1 of 1
Address

2. PLANT ARKANSAS NUCLEAR ONE UNIT ONE
Name
RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 J.O.# 00842650
Address Repair Organization PO No., Job No., etc.

3. WORK PERFORMED BY AP&L/ENERGY OPS., INC. TYPE CODE SYMBOL STAMP N/A
Name
RT. 3, Box 137G, RUSSELLVILLE, AR. 72801 AUTHORIZATION NO. N/A
Address EXPIRATION DATE N/A

4. IDENTIFICATION OF SYSTEM Sampling System

5. (a) APPLICABLE CONSTRUCTION CODE Sec. III 1968 EDITION, NA ADDENDA,
NA CODE CASE

(b) APPLICABLE EDITION OF SECTION XI UTILIZED FOR REPAIRS OR REPLACEMENTS 1986

6. IDENTIFICATION OF COMPONENTS REPAIRED OR REPLACED AND REPLACEMENT COMPONENTS

NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
<u>1" Globe Valve</u>	<u>Target Rock</u>	<u>56</u>	<u>NA</u>	<u>SV-1841</u>	<u>1968</u>	<u>Repaired</u>	<u>No</u>

7. DESCRIPTION OF WORK Removed and rewelded body to bonnet seal weld

8. TESTS CONDUCTED: HYDROSTATIC PNEUMATIC NOMINAL OPERATING PRESSURE
OTHER PRESSURE N/A psi TEST TEMP. NA °F

NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8 1/2 in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

9. REMARKS N/A
Applicable Manufacturer's Data Reports to be Attached

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this repair conforms to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp N/A

Certificate of Authorization No. N/A Expiration Date N/A

Signed R. D. Gillespie Date 5/11/92, 1992

Owner or Owner's Designee, Title
R. D. Gillespie - Manager, Central Support

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this Owner's Report during the period 01-07-91 to 5-9-92 and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

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J. O. Elliott Commissions FACTORY MUTUAL SYSTEMS
Inspector's Signature NB-9947, ARK-II33 "N" "I"
National Board, State, Province, and Endorsements

J. O. Elliott
Date May 12 1992