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

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1.	Owner				ergy Operations, Inc. Little Rock, AR 72203		-
			(Nan	e an	d Address of Owner)		
2.	Plant	Arkansas Nuclear	One, Rt 3 Box 13	7G, F	Russellville, AR 72801		
	-		(Nam	e and	d Address of Plant)		
3.	Plant Ur	iit <u>1</u> 4. (Owner and Certifi	cate	of Authorization (if required)	N/A	
5.	Comme	rcial Service Date	12/19/74	6.	National Board Number for Unit	N-121	
7.	Compor		ASME Code Clas	s 1 (I	WB)/2 (IWC)/3 (IWD) Components	and	

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 16 200 Date 9/3/92 Factory Mutual by J. O. Elliott, ANII Date 9/3/92

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 concework required for current interval.	erning status of
	See attached "1R10 Outage Summary Report". The outage was the second and i second period of the second interval.	ast in the
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 rective measures taken conform to the rules of A3ME Code, Section XI. rtificate of Authorization No. (if applicable) N/A Expiration Date	
Dat	te 501. 3 19 92 Signed AP&L/Entergy Operations, Inc. By Owner	And D. B. Lomax
Ve Co pe pe ac or Fu	the undersigned, holding a valid commission issued by the National Board of Boi essel Inspectors and the State or Province of Arkansas and employed by Arkwright of Norwood, Mass have inspected the components described in this Owner's Feriod 03/01/92 to 05/09/92, and state that to the best of my knowledge and believerformed examinations and taken corrective measures described in this Owner's Regional State of the State of my knowledge and believerformed examinations and taken corrective measures described in this Owner's Regional State of the Inspector nor his employer makes any or implied, concerning the examinations and corrective measures described in this unthermore, neither the Inspector nor his employer shall be liable in any manner notice of the Inspector	Mutual Insurance Report during the figure that the Owner has wher's Report in warranty, express Owner's Report for any personal pection.

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 his 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)
 - Auxiliary Building Electrical Rooms Emergency Chillers (E-175 & E-177)
 - Auxiliary Building Decay Heat Removal Unit Coolers (VUC-1A, 1B, 1C, & 1D).
- 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 of ar B&W plants with Sodium Thiosulfate Tanks had cracking problems in thin-wall stain assisted piping systems. These results were reported to the NRC who then initially issued IE Circular 76-06 and later issued IE Bulietin 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 *imeframe 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 tape 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. 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 refur ing 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 an, 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.

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
B-B	В 2.11	05-008	PRESSURIZER	HTR BELT SHELL TO LO HD CIR	UT
B-B	B 2-11	05-009	PRESSURIZER	HTR BUNDLE SHELL HALF CIR	UT
В-В	В 2.12	05-010	PRESSURIZER	HTR BDLE SHELL LONG SEAM X-AXIS	UT
B-B	В 2.12	05-011	PRESSURIZER	HTR BDLE SHELL LONG SEAM Y-AXIS	UT
В-В	B 2.40	03-002	STEAM GENERATOR E24A	TUBESHEET TO LOW SHELL TRAN	UT
B-B	B 2.40	03-003	STEAM GENERATOR E24A	LOWER HEAD TO TUBESHEET WELD	UT
B-D	в 3.110	05-015	PRESSURIZER	PZR RELIEF NOZZ BETWEEN Z-W AXIS (NOZZLE TO VESSEL WELD)	UT
B-D	в 3.110	05-015IR	PRESSURIZER	PZR RELIEF NOZZ BETWEEN Z-W AXIS (INSIDE RADIUS 5_CTION)	UT
B-D	в 3.130	03-006	STEAM GENERATOR E24A	NOZZLE TO LOWER HEAD WELD	72
B-D	в 3.340	03-007	STEAM GENERATOR E24A	NOZZLE TO HEAD INNER RADIUS	UT
B-F	B 5.50	18-901	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	в 6.10	01-N-022	REACTOR VESSEL	CLOSURE HEAD NUT #22	MT
B-G-1	в 6.10	01-N-024	REACTOR VESSEL	CLOSURE HEAD NUT #24	MT

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
B-G-1	в 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	в 6.10	01-N-027	REACTOR VESSEL	CLOSURE HEAD NUT #27	MT
B-G-1	В 6.10	01-N-028	REACTOR VESSEL	CLOSURE HEAD NUT #28	MT
B-G-1	в 6.10	01-N-032	REACTOR VESSEL	CLOSURE HEAD NUT #32	MT
B-G-1	£ 6.10	01-N-033	REACTOR VESSEL	CLOSURE HEAD NUT #33	MT
B-G-1	в 6.10	01-N-035	REACTOR VESSEL	CLOSURE HEAD NUT #35	MT
B-G-1	в 6.10	01-N-037	REACTOR VESSEL	CLOSURE HEAD NUT #37	MT
BG-1	в 6.20	01-s-021	REACTOR VESSEL	CLOSURE STUD #21	МТ
B-G-1	в 6.20	01-8-022	REACTOR VESSEL	CLOSURE STUD #22	MT
B-G-1	в 6.20	01-8-023	REACTOR VESSEL	CLOSURE STUD #23	MT
B-G-1	в 6.20	01-8-024	REACTOR VESSEL	CLOSURE STUD #24	MT
B-G-1	в 6.20	01-s-025	REACTOR VESSEL	CLOSURE STUD #25	HT
B-G-1	в 6.20	01-s-026	REACTOR VESSEL	CLOSURE STUD #26	мт
B-G-1	B 6.20	01-S-027	REACTOR VESSEL	CLOSURE STUD #27	мт
B-G-1	B 6.20	01-S-028	REACTOR VESSEL	CLOSURE STUD #28	MT
B-G-1	в 6.20	01-S-029	REACTOR VESSEL	CLOSURE STUD #29	MT

CATEGORY	∠TEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
B-G-1	в 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	в 6.20	01-8-032	REACTOR VESSEL	CLOSURE STUD #32	MT
B-G-1	B 6.20	01-8-033	REACTOR VESSEL	CLOSURE STUD #33	MT
B-G-1	в 6.20	01-S-034	REACTOR VESSEL	CLOSURE STUD #34	MT
B-G-1	в 6.20	01-8-035	REACTOR VESSEL	CLOSURE STUD #35	MT
B-G-1	В 6.20	01-a-036	REACTOR VESSEL	CLOSURE STUD #36	MT
B-G-1	B 6.20	01-8-037	REACTOR VESSEL	CLOSURE STUD #37	MT
B-G-1	B 6.20	01-S-038	REACTOR VESSEL	CLOSURE STUD #38	MT
B-G-1	в 6.20	01-S-039	REACTOR VESSEL	CLOSURE STUD #39	MT
B-G-1	в 6.20	01-s-040	REACTOP VESSEL	CLOSURE STUD #40	MT
B-G-2	в 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	в 7.20	05-035	PRESSURIZER	MANWAY NUTS	VT-1
В-Н	B 8.30	03-049	STEAM GENERATOR E24A	SUPPORT SKIRT	UT
В-Ј	B 9.11	16-001	PRESSURIZER SURGE	SE TO PIPE CIRC SEAM	UT ,PT

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
В-Ј	B 9.11	16-002	PRESSURIZER SURGE	PIPE TO ELL CIRC SEAM	UT ,PT
B-J	В 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	В 9.11	17-001	DECAY HEAT REMOVAL	PIPE TO VALVE CIRC SEAM	UT ,PT
B-J	в 9.11	17-006	DECAY HEAT REMOVAL	PIPE TO ELL CIRC SEAM	UT ,PT
B-J	в 9.11	17-009	DECAY HEAT REMOVAL	ELL TO PIPE CIRC SEAM	UT ,PT
B-J	В 9.11	17-013	DECAY HEAT REMOVAL	ELL TO ELL CIRC SEAM	UT ,PT
B-J	В 9.11	17-017	DECAY HEAT REMOVAL	ELL TO HOT LEG SE CIRC SEAM	UT ,PT
B-J	В 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	В 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	В 9.11	19-032A	CORE FLOOD-A & B	REDUCER TO RED TEE CIRC SEAM	UT ,PT
B-J	в 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
В-Ј	в 9.11	24-066	LETDOWN COOLER & DRAIN	NOZZLE TO SE CIRC SEAM	PT
В-Ј	B 9.21	20-046	H.P.I. TO Al LOOP	PIPE TO RED CIRC SEAM	PT

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	В 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	В 9.21	22-051	H.P.I. TO B1 LOOP	ELL TO PIPE CIRC SEAM	PT
BJ	В 9.21	22-068	H.P.I. TO B1 LOOP	PIPE TO PIPE CIRC SEAM	PT
B-J	В 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	TEE TO PIPE CIRC SEAM	PT
B-J	B 9.40	20-054	H.P.I. TO Al LOOP	PIPE TO RED CIRC SEAM	PT
B-L-1	812.10	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	18-RCP & MOTOR FLYWHEEL	UPPER SCROLL WELD	UT ,VT-1,VT-3
B-L-1	B12.10	44-001A	18-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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION WELD	NDE METHOD(S)
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	нт
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	МТ
c-c	C 3.10	03-0430	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	нт
C-C	C 3.10	03-043E	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	нт
c-c	C 3.10	03-043F	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	мт
c-c	C 3.10	03-043G	STEAM GENERATOR E24A	FW HDR BRACKETS TO SHELL WELDS	MT

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
C-C	c 3.10	03-043н	STEAM GENERATOR E24A	FW HUR BRACKETS TO SHELL WELDS	MT
C-C	C 3.10	04-043A	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
c-c	c 3.10	64-043B	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	МТ
C-C	C 3.10	04-043C	STEAM GENERATOR E24B	"EEDWATE: HEADER BRACKETS	MT
C-C	C 3.10	04-043D	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	МТ
C-C	C 3.10	04-043E	STEAM GENERATOR E248	FEEDWATER HEADER BRACKETS	т
C- 0	C 3.10	04-0/3F	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
C-C	C 3.10	04-043G	STEAM GENERATOR E24B	FEEDWATER HEADER BRACKETS	MT
c-c	3.10	04-043Н	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	32-120	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 CT: SEAM	PT
C~F	c 5.11	33-011	D.H. REMOVAL TO PUMPS	PIPE TO BLL CIRC SEAM	PT
C-F	c 5.11	33-015	D.H. REMOVAL TO PUMPS	PIPE TO PENE. CIRC SEAM	PT

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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-P	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 BLL 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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	FIPE TO ELL CIRC SEAM	UT ,MT
C-F	C 5.21	30-007	MAIN STEAM -B INSIDE NB	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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDF_METHOD(S)
C-F	C 5.21	36-051	L.P.I. PEN TO CORE PLOOD	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 SWZEPOLET	ST
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	NIGID 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	VI-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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION RB	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	7 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	V7-3
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 7.40	49-062	SERVICE WATER 1A OUTSIDE	GUIDE 13-SW-122-H2	VT-3

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
F-B	F 2.4C	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-27-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	49-772	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 1. OUTSIDE	GUIDE HANGER 3 EFW-114-H3	VT-3

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION RB	XAMINATION AREA DESCRIPTION	NDE METHOD(S)
F-B	F 2.40	49-083	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3 EFW-114-H4	VT-3
F-8	F 2.40	49-084	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3 EFW-114-H5	VT-3
F-B	F 2.40	49-086	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EFW-114-H7	VT-3
F-B	F 2.40	49-087	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EFW-114-H8	VT-3
F-B	F 2.40	49-088	SERVICE WATER 1A OUTSIDE RB	GUIDE HANGER 3 EFW-114-H9	VT-3
F-B	F 2.40	49-089	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EFW-114-H10	VT-3
F-B	F 2.40	49-091	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EFW-114-H12	VT-3
F-B	F 2.40	49-092	SERVICE WATER 1A OUTSIDE RB	RIGID HANGER 3 EFW-114-H13	VT-3
F-B	F 2.40	49-093	SERVICE WATER 1A OUTSIDE FA	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	GUIDE HBD-20-H43	VT-3

CATEGORY	ITEM NO	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	SLRVICE WATER 1A INSIDE RB	RIGID HANGER HBD-20-H44	VT-4
P-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-8	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	RIGID HANGER HBD-20-H50	VT-3
F-B	F 2.40	50-016	SERVICE WATER 1A INSIDE	RIGID HANGER HBD-21-H100	VT-3
F-B	F 2.40	50-017	SERVICE WATER 1A INSIDE	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

_ATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION RB	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	VI-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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S
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	₹ 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	7 2.40	52-018	SETVICE WATER 2A INSIDE	RIGID HANGER HBD-21-H54	VT-3
F-8	F 2.40	52-021	SERVICE WATER 2A INSIDE	RIGID HANGER HBD-21-H95	VT-3
F-B	r 2.40	52-022	SERVICE WATER 2A INSIDE	RIGID HANGER HBD-21-H66	VT-3

CATEGORY	TEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION RB	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
₽-B	F 2.40	52-023	SERVICE WATER 2A INSIDE	RIGID HANGER HBD-1 164	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	PIGID HANGER HBD-14-H63	VT-3
F-B	F 2.40	52-026	SERVICE WATER 2A INSIDE	RIGID HANGER HBD-14-H62	VT-3
F-B	F 2.40	52-027	SERVICE WATER 2A INSIDE	GUIDE HANGER HBD-21-H96	VI-3
F-B	F 2.40	53-007	SERVICE WATER 1A & 2A RETURN IN RB	RIGID HANGER HBD-21-H104	V7-3
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	VI-3
F-B	F 2.40	54-029	SERVICE WATER 1A & 23 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 6 2A RETURN OUTSIDE RB	GUIDE HCD-116-H31	VT-3

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	VI-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 HSD-21-H7	VT-3
F-B	F 2.40	54-043	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	RIGID HAMGER HBD-21-H1	VT-3
F-B	F 2.40	54-044	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HSD-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 RETTRN 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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	PURMINATION ADDS DESCRIPTION	NDE METHOD (E)
CHILISONI	libri my.	JOL BARN NO.	RETURN OUTSIDE RB	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	VI-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 PETURN 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	VI-3
F-B	F 2.40	54-060	SERVICE WATER 1A & 2A RETURN OUTSIDE RB	GUIDE HANGER HCD-111-H4	VT-3
7-B	F 2.40	55-092	BUILDING SPRAY 1A INSIDE	RIGID HANGER GCB-12-H25	VT-3

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
F-C	P 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 & PRAIN	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	VI-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	62-024	SODIUM HYDROXIDE	GUIDE HANGER HCD-6-H10	VT-3
F-C	F 3.40	62-015	SODIUM HYDROXIDE	ROD HAMGER 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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
F-C	F 3.40	63-608	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	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	CUIDE 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	GUIDE HANGER BS-98	VI-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	GUIDE HANGER BS-100	VT-3
F-C	F 3.40	63-026	BUILDING SPRAY OUTSIDE	RIGID GUIDE BS-101	VT-3

CATEGO	RY ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION RB	EXAMINATION AREA DESCRIPTION	NDE METHOD(3)	
F-C	F 3.40	63-027	BJILDING SPRAY OUTSIDE	GUIDE HANGER BS-102	VT-3	
F-C	F 3.40	63-030	BUILDING SPRAY OUTSIDE	RIGID HANGER HOO1	VT-3	
F-C	F 3.40	63-031	BUILDING SPRAY OUTSIDE RB	RIGID HANGER HOO2	VT-3	
F-C	F 3.40	63-032	BUILDING SPRAY OUTSIDE RB	RIGID HANGER HOO3	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	V1-3	
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	¥ 3.50	40-005	EMERGENCY FEEDWATER DBD-2	SPRING HANGER 3-EFW-111-H3	VT-4	
F-C	F 3.50	49-042	SERVICE WATER 1A OUTSIDE	SPRING HANGER 3-EFW-113-H1	V3.	

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	VI-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	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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION RETURN OUTSIDE RB	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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	т
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	ит
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 FROM X	VT-2
N/A	N/A	A-10140	AUGMENTED INSPECTION	LOWER LEVEL TAP @ 2173 PROM	VT-2

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT	DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
N/A	N/A	A-10141	AUGMENTED	INSPECTION	LOWER LEVEL TAP @ 277% 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 @ 217⅓ FROM X	VT-2
N/A	N/A	A-10144	AUGMENTED	INSPECTION	UPPER LEVEL TAP @ 277 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	≥-10146	AUGMENTED	INSPECTION	PIPING WELD	UT
N/A	N/A	A-10149	AUGMENTED	INSPECTION	PIPING WELD	UT
N/A	N/A	A-20150	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

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT	DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
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 TELD	UT
N/A	N/A	A-10170	AUGMENTED	INSPECTION	PIPING WELD	UT
N/A	N/A	A-10171	AUGMENTED	INSPECTION	PIPING WELD	UT

ENTERGY OPERATIONS

ARKANSAS MUCLEAR ONE - UNIT 1

1R10 COMPLETED ISI EXAMINATIONS

CATEGORY	ITEM NO.	ISI EXAM NO.	COMPONENT DESCRIPTION	EXAMINATION AREA DESCRIPTION	NDE METHOD(S)
N/A	H/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	MOTOP FLYWHEEL-BORE AND KEYWAY	UT
N/A	REG1.14	46-009	1P-RCP & MOTOR FLYWHEEL	MOTOR FLYWHEEL-ENTIRE FLYWHEEL	UT ,MT

SECTION XI - DIVISION 1

REVISED 06/30/89

FORM HIS-2 (Back)

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

********	TO AND DESCRIPTION OF PERSONS ASSESSED.	
		CERTIFICATE OF COMPLIANCE
	repeat or r	eplacement the statements made in the report are correct and this conforms to the rules of the ASPEK Code, Section XI.
	Type Code S	ymbol Stamp N/A
	Certificate Signed	of authorization No. N/A Expiration Date N/A
	-	Owner or Owner's Designee, Title Date 5/1/92 . 19
MILES MALES	R	D. Gillespie - Manager, Central Support
		CERTIFICATE OF IMPERVICE IMPRECTION .
	I, the under	simed balding a mark
	AAAAN SAS	argue of Finalics of
i	Wher's Repo	OD. MASS. The employed by "AREWRIGHT MUTUAL INSUFANCE CO. of have inspected the components described in this at to the best of my knowledge and belief, the Owner has performed and taken corrective measures described in this Components."
	Examinations coordance v	and taken corrective measures described in this Owner's Report in the requirements of the ASPER Code, Section XI.
v	By sign:	ing this certificate meither the Inspector por his employer makes
- 15	mployer shall	this Owner's Report. Furthermore, neither the Inspector por his
0	r a loss of	any kind erising from or connected with this inspection
TI	nspector's S	ionature NB-9947, ARK-II33 "N" "I"
Di	J. O. Elliot	t may 12 1992
-	The state of the s	

FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

	ARKANSAS MUCL	e-mort as a	AR. 72801	SHRET		me of more	
	ADDARDAD BUCK	Mame	THE RESERVE AND ADDRESS OF THE PERSON	UNIT ONE	NAME OF TAXABLE PARTY.		
_RT3,	BOX 137G. RU	SSELLVILLE, A	8. 72801	J.O. #008/8	F403	PO Mo., Job	No., e
. WORK PE	REPORTED BY AP	61/DHERGY OF	S. INC.	TYPE CODE STOR			
		adress		AUTHORIZATION DAT	мо	N/A	
. IDENTIF	CATION OF STS	TEN Make	1/2		No. Andrews	and the same of th	-
. (a) API	PLICABLE CONST	RUCTION CODE	RISC	19 63 EDIT	TON.	Edition	ADDEN
(b) API	LICABLE EDITI	ON OF SECTION	XI UTILI	ZED FOR REPAIRS	OR RE	PLACEMENTS 1	986
(b) API IDENTIFY NAME OF COMPONENT	LICABLE EDITI	ON OF SECTION POWENTS REPAI	XI UTILI	ZED FOR REPAIRS	OR RE	PLACEMENTS 1 T COMPONENTS REPAIRED,	ASME CODE STAND!
(b) AF	CATION OF COM	ON OF SECTION POWENTS REPAI	RED OR RE	ZED FOR REPAIRS PLACED AND REPL OTHER	OR REAL PROPERTY ACCORDING TEAR SUILT	PLACEMENTS 1 T COMPONENTS REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STANDS
(b) API IDENTIFY NAME OF COMPONENT	CATION OF COM	ON OF SECTION POWENTS REPAI MANUFACTURER SERIAL NO.	RED OR RE	PLACED AND REPL OTHER IDENTIFICATION	OR REAL PROPERTY ACCORDING TEAR SUILT	PLACEMENTS 1 T COMPONENTS REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP (YES OR NO)
IDENTIFY NAME OF COMPONENT	CATION OF COM	ON OF SECTION POWENTS REPAI MANUFACTURER SERIAL NO.	RED OR RE	PLACED AND REPL OTHER IDENTIFICATION	OR REAL PROPERTY ACCORDING TEAR SUILT	PLACEMENTS 1 T COMPONENTS REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP! (YES OR NO)
(b) API IDENTIFY NAME OF COMPONENT	CATION OF COM	ON OF SECTION POWENTS REPAI MANUFACTURER SERIAL NO.	RED OR RE	PLACED AND REPL OTHER IDENTIFICATION	OR REAL PROPERTY ACCORDING TEAR SUILT	PLACEMENTS 1 T COMPONENTS REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP! (YES OR NO)
IDENTIFE NAME OF COMPONENT SHARENST LUGARANT	CATION OF COM	ON OF SECTION POWENTS REPAI MANUFACTURER SERIAL NO.	RED OR RE NATIONAL BOARD NO.	PLACED AND REPLEMENT OFFICE TOWN GCB-2-DH207	TEAR BUILT	PLACEMENTS 1 T COMPONENTS REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP (YES OR NO)
IDENTIFY NAME OF COMPONENT AMAGENT AMAGENT DESCRIPT:	CATION OF COM	MANUFACTURER SERIAL NO.	RED OR RE NATIONAL BOARD NO.	PLACED AND REPL OTHER IDENTIFICATION	TEAR BUILT	PLACEMENTS 1 T COMPONENTS REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP (YES OR NO)

SECTION XI - DIVISION 1

FORM MIS-2 (Back)

REVISED 06/30/89

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		Applicable Man	nufacturer's Data Rep	ports to be attached
	-	CONTRACTOR DESCRIPTION OF THE PARTY AND ADDRESS OF THE PARTY AND ADDRES		
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			APPARENT TO COMPANY AND ADMINISTRAÇÃO DE COMPANY DE CAMPANY DE CAM	
		THE RESIDENCE OF THE PART OF T	-	
CA TRANSPORTER	THE RESIDENCE OF THE PARTY OF		The same of the sa	
			CERTIFICATE OF COMPL	LARCE
re	Me cer	eplacement	tements made in the mes to the rules of the	report are correct and this he ASPE Code, Section XI.
Ty	pe Code s	ymbol Stamp	M/A	
			THE RESIDENCE OF THE PARTY OF T	
Si	gned	RD 8:00	· · · · · · · · · · · · · · · · · · ·	Empiration Date N/A
	R.	Proper or Owner's De	esignee, Title	Date _ 5/1/92 . 19_
-		The state of the s	mager, Central Suppor	t .
		CERTIFI	ICATE OF IMPERVICE IN	V. C. D. C.
I,	the under	signed better -		
Boi	ler and F	ressure Vessel Ins	welld commission is: spectors and the State	sued by the Estional Board of
-	NORWO	OD MASS	TALLES MY TENERS	LIGHT MUTUAL INSURANCE CO
and	state th	at to the best of	01-07-91	to 5-9-92
828	minetions	and taken games	my knowledge and bel tive measures describ its of the ASME Code,	att, the Derner has performed
	By sion	ing this same delan-		
10-820G/F (lover she	this Owner's F of	rt. Furthermore, ne	ither the Inspector por his
Insp	ector's	ignature Commissio	ONS NB-9947, ARK-I	133 "11" "11"
Date	O. Elliot	may 12 19	Metional soard, s	State, Province, and Endorsements
enterna nue	CD TO SERVICE MANAGEMENT AND THE	The second secon	erelandiscins	

FORM WIS-2 ENG-021

recorded at the top of this farm.

APPENDIX II - MAMDATORY

REVISED 06/30/89

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

1. OWNER	APRIL/ENTERGY	Name	DRC.	DATE	26-	90	-
RT. 3	. BOX 137 G. B	Address	AR. 72901	SHEET		of	
2. PLANT	AREANSAS MUCT	EAR ONE		UNIT ONE	NON-EVERNO AND		
_RT3.	BOX 137G. BU	SSELLVILLE, A	8. 72801	J.O. #008/	703	PO Mo Joh	- No
. WORK PE	RFORMED BY AP	AL/ESTERGY OF	S. INC.	TTPE CODE STR	BOL ST	AMP H/A	NO., 1
RT. 3,	Box 137G, RUS	SELLVILLE, AR	. 72801	AUTHORIZATION DAY		The state of the s	
IDENTIF	ICATION OF SYS	TON Deca	40 Wins	+ 4 Nigh 9		10 O 1 15	,
IDENTIFY	CATTON OF OOM		LLL of the	ZED FOR REPAIRS			anorman and
NAME OF	NAME OF HANUFACTURER	POWERTS REPAI	MATIONAL BOARD NO.	PLACED AND REPL	TEAR	REPAIRED, REPLACED, OR	ASME CODE STAMP (TES
NAME OF COMPONENT	NAME OF	POWENTS REPAI	NATIONAL BOARD	OTHER IDENTIFICATION	YEAR SUILT	REPAIRED, REPLACED, OR REPLACEDENT	ASME CODE STAMP (TES OR NO
NAME OF COMPONENT	NAME OF MANUFACTURES	NAMUFACTURER SERIAL NO.	NATIONAL BOARD NO.	PLACED AND REPL	TEAR SUILT	REPLIED, REPLACED, CR REPLACEDENT	ASME CODE STAMP (TES OR NO
NUTE OF COMPONENT	NAME OF HANUFACTURER	NAMUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR SUILT	REPLIED, REPLACED, CR REPLACEDENT	ASME CODE STAMP (TES OR NO
NAME OF COMPONENT	NAME OF KANUFACTURER Bechtel Bechtel	NAMUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION MU-132 MU-137	TEAR SUILT	REPLIED, REPLACED, CR REPLACEDENT	ASME CODE STAMP (TES OR NO
NAME OF COMPONENT	NAME OF KANUFACTURER Bechtel Bechtel	NAMUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION MU-132 MU-137	TEAR SUILT	REPLIED, REPLACED, CR REPLACEDENT	ASME CODE STAMP (TES OR NO
NAME OF COMPONENT OUNTONENT OUNTONENT	NAME OF HANUFACTURER Bechtel CON OF WORK	NAMUTACTURER SERIAL NO. NA NA NA OSTATIC D	NATIONAL BOARD NO.	OTHER IDENTIFICATION AU-132 AU-137	TRAR BUILT	REPAIRED, REPLACED, OR REPLACEDENT Augusted Agraved	ASME CODE STAMP (TES OR NO
NAME OF COMPONENT SUPPONENT SUPPONENT SUPPONENT SUPPONENT TESTS COM	NAME OF HANUFACTURER Bechtel CON OF WORK 2 COUCTED: HYDROTHE	NAMUFACTURER SERIAL NO. NA NA NA OSTATIC D R D PRESS	NATIONAL BOARD NO.	OTHER IDENTIFICATION AU-132 AU-137 TIC D MONIN A psi TE	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEDENT Agravied RATING PRESS	ASME CODE STAMP (TES OF NO
NAME OF COMPONENT SUMMERS SUMMERS DESCRIPT: TESTS COM E: Supples size is 86	NAME OF HANUFACTURER Bechtel CON OF WORK OTHE	NAMUFACTURER SERIAL NO. NA NA NA OSTATIC D R D PRESS ib form of li	NATIONAL BOARD NO.	OTHER IDENTIFICATION AU-132 AU-137	TRAR BUILT	REPAIRED, REPLACEDONT REPLACED	ASME CODE STAMP (TES OF NO

SECTION EI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Bach)

Applicable Manufacturer's Data Reports to be Attached	
	AND REAL PROPERTY OF THE PERSON NAMED AND
	PERSONAL LINE WATERWAY COMMENTS
CERTIFICATE OF COMPLIANCE	CHICAGO CALLES CONCERCIONS MA
repair or replacement conforms to the rules of the ASSE Code, Section XI	his
Type Code Symbol Stamp N/A	
Certificate of Authorization No. N/A Expiration Date N/A	MATERIAL STREET, STREE
Signed RI 4000, MA	
Owner or Owner's Designee, Sitle Date 5/1/92	. 19
R. D. Gillespie - Manager, Central Support	
CERTIFICATE OF IMMERVICE INSPECTION	
I, the undersigned halding a many	
I, the undersigned, holding a walid commission issued by the Mational Boa Boiler and Pressure Vessel Inspectors and the State or Province of	
NORWOOD, MASC. have inspected the communications). of
and state that to the best of an arrival to 5-9-92	ed in this
NORWOOD, MASC. have inspected the components described and state that to the best of my knowledge and belief, the Owner has perfect examinations and taken corrective measures described in this Owner has perfect accordance with the requirements of the ASME Code, Section XI.	ormed rt in
By signing this country	
WERCTLORD IN PRINCIPLE AND CONTRACTOR AND CONTRACTO	A STATE OF THE PARTY OF THE PAR
the total be likely to the termination of the termi	his
or a loss of any kind arising from or connected with this increase or property	dassage
J.O. Ellio Comissions NE-9947, ARK-1133 "N" "TH	
ADDRESS OF THE PARTY OF THE PAR	
Inspector's Signature Commissions NE-9947, ARK-I133 "N" "I" J. O. Elliott May 12 1992 FACTORY MUTUAL SYSTEMS NE-9947, ARK-I133 "N" "I" Mational Board, State, Province, and End	orsements !

FORM NIS-2 ENG-021

APPENDIX II - MAMDATORY

REVISED 06/30/89

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

3. WORK PERFORMED	SY APAL/ENTERGY OF Name , RUSSELLVILLE, AI Address	PS. INC.	Repair Organi	sation	PO Mo., Job	. Ve
RT. 3, Box 1370	Address RUSSELLVILLE, AI Address	PS. INC.	Repair Organia	sation	PO Mo., Job	- No
RT. 3, Box 1370	, RUSSELLVILLE, AS		TIPE CODE STIE		EA MA'' 900	
. IDENTIFICATION	AGGIESS			BOL STA	NO N/A	NO.,
. IDENTIFICATION	AGGIESS	R. 72801	AUTHORIZATION	MO	N/A	-
. IDENTIFICATION			EXPIRATION DAY	T	N/A	Ni derivanta de la constanta d
NAME OF NAME MANUFAC		MATIONAL BOARD BO.	OTHER IDENTIFICATION	YEAR BUILT	10.00	CODE STAPO
amponent D			- Commence of the Commence of	ARTHUR MANAGEMENT.	REPLACEMENT	OR MC
Lugaret Beeft	L NA	NA	DH-144	1968	agravied	96
1	Name of the Owner	-	The state of the s			
				-		-
			NEXT COMPANY OF STREET, STREET			-
	DER Modilio	luccast		-		-
DESCRIPTION OF ME	wednested to the state of the s					

SECTION MI - DIVISION 1

REVISED 06/30/89

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PGSH MIS-2 (Back)

9.	RIDIARIS N/A
	Applicable Manufacturer's Data Reports to be Attached
-	CERTIFICATE OF COMPLIANCE
	We certify that the stal ments made in the report are correct and this repair or replacement conforms to the rules of the ASPE Code, Section XI.
	Type Code Symbol Stamp N/A
	Signed RD Sill Designee, Title Date 5/1/92 . 19
	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION
	soiler and Pressure Vessel Inspectors and the State or Province of
	NORWOOD, MASS. have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has parkened.
	the requirements of the ASME Code, Section XI.
,	By signing this certificate neither the Inspector nor his employer makes any described in this Coner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal interpretations.
	or a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS
01	nspecter's Signature J. O. Elliott May 12 1992
PARTITION OF	

FORM NIS-2 ENG-021

recorded at the top of this form.

APPENDIX II - HAMDATORY

REVISED 06/30/89

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

1. OWNER	APAL/ENTERGY	OPERATIONS, I	DRC.	DATE	125/	20	Williams and the second
-RT. 1	. BOX 137 G. B	DSSELLVILLE,	AR. 72801	SPEET		of	
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	Box 137G, RUS	GGT 688		AUTHORIZATION DAT	-	With Course, which will be some new passes	
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DESCRIPT	ION OF WORK	Modified O	//	TICD WORLD	Sales Service Reconstruction		URE D

SECTION EI - DIVISION 1

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FORM MIS-2 (Back)

REMARK	3 MA
	Applicable Manufacturer's Data Maports to be Attached
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	CERTIFICATE OF COMPLIANCE
repair	conforms to the rules of the ASPE Code, Section XI.
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Certifi	cate of Authorization No. N/A Projection Dec
	Owner or Owner's Designee, Title R. D. Gillespie - Marager, Central Support
	CERTIFICATE OF IMPERVICE INSPECTION
Owner's and sta- examina accorda	undersigned, holding a valid commission issued by the Mational Board of and Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in the Report during the period 01-07-91 to 5-9-92 to that to the best of my knowledge and belief, the Owner has perform the period of the ASME Code, Section XI.
employer or a los	signing this certificate neither the Inspector nor his employer makes any of in this Owner's Report. Furthermore, neither the Inspector nor his shall be liable in any manner for any personal injury or property damage is of any kind arising from or connected with this inspection.
Secondary of Print	FACTORY MUTUAL SYSTEMS NB-9947, ARK-II33 "N" "I" Mational Board, State, Province, and Endorsements

APPENDIX II - NAMDATORY

REVISED 06/30/89

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

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September 1

SECTION XI - DIVISION 1

REVISED 06/30/89

PORM MIS-2 (Back) .

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		Applicable Manufacturer's Data Reports to be Attached
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****	THE RESERVE AND ADDRESS.	
***	DA STREET, SPECIAL SPE	
energia de la constanta	T. S. Miller and S. Market and St. Market	
		CERTIFICATE OF COMPLIANCE
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TY	pe Code s	Tymbol Stamp N/A
		of Authorization No. N/A Expiration Date N/A
Sig		Owner or Owner's Designee, Title Date 5/1/92 . 19
P White statement and	R.	D. Gillespie - Manager, Central Support
	THE RESERVE AND ASSESSED.	CERTIFICATE OF INSERVICE INSPECTION .
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	By sin	ing this countries.
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or s	TORE OF	any kind arising from or connected with this inspection
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J.	O. Ellio	tt may 12 1992
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FORM NIS-2 ENG-021

APPENDIX II - MAMDATORY

REVISED 06/30/89

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

2. PLANT	AREANSAS MUCI	EAR ONE	-	UNIT OFF			
_RT1	. BOX 137G. RU	SSELLVILLE, A	R. 72801	Repair Organi	977,	Po 40 . Joh	w No
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		a a e a		EXPIRATION DA	TE	N/A	-
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	CERTIFICATION OF DESIGN	
Design Specification certified Design Report certified by	Principle of the Princi	AR Reg no 4557 PA Reg no 20112
	CERTIFICATE OF SHOP COMPLIANCE	
We certify that the statement of the ASME Code, Section I	10024	onforms to the rules for constr
N Certificate of Authorization Date 1/20/89 Name	Kerotest Mfg. Corp. Signed	Den Sherido
		Den Sherida (surharized representative)
Dete 1/20/89 Name	Kerotest Mfg. Corp. Signed	Den Sherida (surrorused representative)
Date 1/20/89 Name	Kerotest Mfg. Corp. Signed	Den Sherida (authorized representative)

any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

(Anthorized Inspector)

FORM, NPV-1 CERTIFICATE HOLDET (NOGS) 1-VEN MINOROR NUCLEAR PUMPS OR VALVES* As Required by the Provisions of the ACAIE Code, Section III, Division 1

(temperature)

(Nat'l. Bd. (incl. endorsements) state or prov. and no.)

(1) For manually operated valves only.

Dere 1-20-89 Signed Pay Welch

.pq

Design conditions

8. Remarks PO do. PO188715. Item No.

Morestean Mrg. Warp., 2000 Naperty Ave., Pan. Pa 15022 (G145030

3600

CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES* As Required by the Provisions of the ASME Code, Section III, Division 1 Contectured and continued by Kerotest Mrs. Colp., 2525 Liberty Ave., Fgb. Pa. 15222 (C145036) (name and address of N Certificate Holi Arkansas Power & Light, P.O. Box 8058, Little Rock, AB 72203 2. Manufectured for (name and address of Purchaser or Owner) Arkansas Nuclear One, Russellvi , AR 72801 Location of installation (name and addrs a) _ Drawing ARK5-R9954-(1) Globe 4. Model No., Series No., or Type _ N/A 1974 Summer 1975 5. ASME Code, Section III, Division 1: (addends date) (adition) 3/4" 3/4" Outlet size Valve Nominal inlet size. sin.1 Disk SA479,316 Bonnet SA479,316 SA182,F316 (a) (35) (0) tbl (4) Disk Bonnet Body Nat'l Cert. Serial Serial Serial Board Holder's No. No. No. No. Serial No. AOL AQB5-12 -AOE AQB5-12 N/A AOL AOE AQB2-1 V N/A AQB2-1 AOL AQB2-2 AOE V N/A AQB2-2 AOL AOE AQB2-3 N/A AQB2-3 AOL AQB2-4 W ACE AQB2-4 N/A AOL AQB2-5 AOE AQB2-5 N/A AOL AOE AQB2-6 W AQB2-6 N/A AOL AOE AQB2-7 AQB2-7 N/A AOL AOE N/A AQB2-8 AOL AOE AQB2-9 N/A AQB2-9 AOL AQ82-10 V AOE N/A AQB2-10 AOL AQB2-11 V AOE N/A AQB2-11 AOL AQB2-12 W ADE AQB2-12 N/A AOL ACE AQB2-13 V (DWD-4448, AQB2-13 N/A AOL ACE ACB2-15 W AQB2-15 N/A AOL AOE AQB2-17 V AQB2-17 N/A AOL AOE AQB2-18 V AQB2-18 N/A AOL AOE AQB2-19 V N/A AQB2-19 AOL AOE AQB2-20. N/A AQB2-20

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

(12/88)

Supplemental information in form of lists, sketches, or drawings may be used provided (1) size is 8 ½ × 11, (2) information in items 1 through 6 on this Data Report is included on each sheet, (3) each sheet is numbered end the number of sheets is recorded at the top of this form

SECTION XI - DIVISION 1

REVISED 06/30/89

FORM HIS-2 (Back) .

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REMARKS	HPV-/
	Applicable Manufacturer's Data Reports to be Attached
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	CERTIFICATE OF COMPLIANCE
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Signed /	1 96 /71 / / 4 - 4 - 1
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R.	D. Gillespie - Manager, Central Support
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I, the unde	CERTIFICATE OF DESERVICE DESPECTION rsigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO.
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FORM WIS-2 ENG-021

APPENDIX II - HANDATORY

REVISED 06/30/89

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

2. PLANT	AREANSAS MUCI	EAR ONE		UNIT OWE			
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SECTION XI - DIVISION 1

PORM MIS-3 (Back) .

REVISED 06/30/89

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~1.	Applicable Manufacturer's Data Reports to be Attached
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ertifica	te of Authorization No. N/A Empiretion Date N/A
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R	. D. Gillespie - Manager, Central Support
CONTRACTOR SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN 1	The support
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NOR Wher's Re nd state xaminatio ccordance Sy si arranty, escribed mployer ai r a loss o	Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of WOOD, MASS. have inspected the components described in th that to the best of my Encyloide and belief, the Owner has performed with the requirements of the ASME Code, Section EI. Gring this certificate neither the Inspector nor his employer makes any in this Owner's Report. Furthermore, neither the Inspector nor his call be liable in any manner for any personal injury or property damage of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS
NOR Wher's Re and state Examination coordance Sy si arranty, escribed mployer air r a loss of	Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of WOOD, MASS. have inspected the components described in th that to the best of my Encyledge and belief, the Owner has performed with the requirements of the ARKE Code, Section EI. Gring this certificate neither the Inspector nor his employer makes any in this Owner's Report. Furthermore, neither the Inspector nor his and taken implied, concerning the examinations and corrective measure that is owner's Report. Furthermore, neither the Inspector nor his after the liable in any manner for any personal injury or property damage of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS NB-9947, ARK-II33 "N" "I"
NOR Wher's Re and state Examination coordance Sy si arranty, escribed mployer air r a loss of	Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of WOOD, MASS. have inspected the components described in the that to the best of my Encyloide and belief, the Owner has performed with the requirements of the ASME Code, Section EI. Gning this certificate neither the Inspector nor his employer makes any in this Owner's Report. Furthermore, neither the Inspector nor his and taken in any manner for any personal injury or property damage of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS

FORM MIS-2 ENG-021

APPENDIX II - MAMDATORY

REVISED 06/30/89

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

		N &MC		MT 5-2		The same of the sa	
_RT1	BOX 137 G. N	USSELLVILLE, Address	AR. 72801	SETT		of	/
2. PLANT	AREANSAS WUCL	EAR ONE		UNIT ONE			
RT. 3.	BOX 137G. RU	SSFLLVILLE, A	R. 72801	J.O. #007 Repair Organia	6/3	80 No., Joh	No as
3. WORK PE	REPORTED BY AT	AL/ENTERGY OF	S. INC.	TYPE CODE STOR	DOL ST	NO NA	No., 80
RT. 3,	Box 137G, RUS	SELLVILLE, AR	72801	EXPIRATION DAY	180	N/A	
5. (a) API	PLICABLE CONST	RUCTION CODE ODE CASE ON OF SECTION	Sect. TI	ZED FOR REPAIRS	CR RE	PLACEMENTS 1	9 86
NAME OF COMPONENT	NAME OF MANUFACTURES	NAMUFACTURER SERIAL BO.	NATIONAL BOARD 800.	OTHER IDENTIFICATION	TEAR BUILS	REPAIRED, REPLACED, OR REPLACEDIENT	ASME CODE STAMPED (YES OR MO)
VALVE	DRESSER	BM4916	NB	PSV-1000	1970	agelocement	
1				The prince was the same of the			
7. DESCRIPTI 8. TESTS CON NOTE: Supples (1) cize is 84	DUCTED: HYDR OTHE	OSTATIC D R D PRESS	PHS HA	TICO HOMINO Pei TE	AL OPE	RATING PRESS	URE D

SECTION XI - DIVISION 1

PORM HIS-2 (Back) .

REVISED 06/30/89

CERTIFICATE OF COMPLIANCE We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI. Type Code Symbol Stamp K/A Certificate of Authorization No. E/A Empiration Date K/A Signed R.D. Gellespie - Manager, Central Support CERTIFICATE OF DESERVICE DESPECTION I, the undersigned, holding a valid commission issued by the Rational Board of Allianus. And Pressure Vessel Inspectors and the State or Province of Allianus. Solier and Pressure Vessel Inspectors and the State or Province of Allianus. Ovar's Report during the period have inspected the components described in this 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 the requirements of the ASPE Code, Section XI. By signing this certificate neither the Inspector nor his employer makes any varranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report in Parthermore, 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	. 1	REPARTS N/A
Type Code Symbol Stamp K/A		Applicable Manufacturer's Data Reports to be Attached
Type Code Symbol Stamp K/A		
Type Code Symbol Stamp K/A	*	
Type Code Symbol Stamp K/A		
Type Code Symbol Stamp K/A	MARK THE SERVICE	
Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Empiration Date N/A Signed R. J. J. State Bate ST/1/9, 19 Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, helding a valid commission issued by the National Board of Soiler and Pressure Vessel Inspectors and the State or Province of APRANSAS and employed by "ARRVRIGHT MUTUAL INSURANCE CC. of NORMOOD, MASS. have inspected the components described in this 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 Sy signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measure 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. Commissions NB-9947, ARK-FI33 "N" "IN"		CERTIFICATE OF COMPLIANCE
Signed RD Selection Be. BYA Beginstic Date BYA Signed RD Selection Besignee, 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 ARLANSAS and employed by "ARRAPIGHT MUTUAL INSURANCE CC. of ARLANSAS have inspected the components described in this owner's Report during the period 01-07-91 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 ET. By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any 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 The Popular of Engineering Section State, Province, and Endorsements of Loss of Signeture D. C. Elitore Section State, Province, and Endorsements of Loss of State, Province and Endorsements of Loss of State and Endorsem	P	epair or replacement to the rules of the ASPE Code, Section XI.
Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF IMEERVICE INSPECTION I, the undersigned, helding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of AREANCAS and employed by "AREVRICET INTUAL INSURANCE CC. of NORMOOD, MASS. have inspected the components described in this 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 Sy signing this certificate neither the Inspector nor his employer makes any warranty, empressed or implied, concerning the examinations and corrective measure described in this Owner's Report. Furthermore, neither the Inspector nor his employer shell 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 Thespector's Signature Commissions NE-9947, ARK-F133 "N" "I" Estimal Board, State, Province, and Endorsements.		
Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF IMEERVICE INSPECTION I, the undersigned, helding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARIANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CC. of NORMOOD, MASS. have inspected the components described in this 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 Sysigning this certificate neither the Inspector nor his employer makes any warranty, empressed or implied, concerning the examinations and corrective measure described in this Owner's Report. Furthermore, neither the Inspector nor his employer shell 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 Thespector's Signature Commissions NE-9947, ARK-F133 "N" "I" Estional Board, State, Province, and Endorsements	C	artificate of Authorization No. N/A Employed No.
CERTIFICATE OF INSERVICE DESPECTION I, the modersigned, holding a valid commission issued by the National Board of Soiler and Pressure Vessel Inspectors and the State or Province of AREANSAS and employed by "AREVELGHI MUTUAL INSURANCE CC. of Northood, MASS. have inspected the components described in this 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 described in this Owner's Report. Furthermore, neither the Inspector nor his or a loss of any kind arising from or connected with this inspector nor his factory MUTUAL SYSTEMS Thespector's Signature Commissions NB-9947, ARK-FI33 "N" "I" Mational Board, State, Province, and Endorsements Mational Board, State, Province, and Endorsements	5	gned Rd Gelleyer
I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARIANSAS and employed by "ARIVELIGHT MUTUAL INSURANCE CC. of NORMOOD, MASS. have inspected the components described in this 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 ARME Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his or a loss of any kind arising from or connected with this inspection. "FACTORY MUTUAL SYSTEMS Inspector's Signature Mational Board, State, Province, and Endorsements		R. D. Gillespie - Manager, Central Support
I, the wadersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CC. of NCRWOOD, 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 ARME Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any 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 Inspector's Signature Mational Board, State, Province, and Endorsements Metional Board, State, Province, and Endorsements		CERTIFICATE OF THEFENIOR PARTIES
NCRWOOD, MASS. have inspected the components described in this and state that to the best of my knowledge and belief, the Owner's Report in the examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section MI. By signing this certificate meither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his or a loss of any kind arising from or connected with this inspection. The Commissions of Commissions of Commissions and Corrective measure may be a loss of any kind arising from or connected with this inspection. The Commissions of Commissions of Commissions of State, Province, and Endorsements of Commissions of Commissions of State, Province, and Endorsements of Commissions of Commissions of State, Province, and Endorsements of Commissions of Commi	I,	the modereigned halden
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By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his or a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Inspector's Signature Mational Board, State, Province, and Endorsement.	Ow 8.0	NORMOOD, MASS. have inspected the components described in this destate that the the period 01-07-91
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 Inspector's Signature Mational Board, State, Province, and Endorsement	#C	the requirements of the ASME Code, Section XI.
Inspector's Signature Mational Board, State, Province, and Endorsement	or	ployer shall be liable in any manner for any personal injury or property damage a loss of any kind arising from or connected with this inspection.
J. O. Ellione	In	NB-9947. ARK-T133 "N" NT
Date	J.	O. Elliott

FORM WIS-2 ENG-021

APPENDIX II - MAMDATORY

REVISED 06/30/89

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

1. OWNER	APAL/ENTERGY	OPERATIONS, I	RC.	DATE 4	7-9.	3	
_RI_1	. BOX 137 G. B	USSELLVILLE.	AR. 72801	SHEET		_ of	
2. PLANT	AREASSAS MUCI	EAR ONE		UNIT ONE	Mark der versteren son et	THE RESERVE OF THE PARTY OF THE	***************************************
_RT. 3	BOX 137G. RU	SSELLVILLE, A	R. 72801	J.O. #007	442 84 Llon	63 PO No., Job	No. et
. WORK PE	REPORMED BY AP	L/DETERGY OF	S. INC	TYPE CODE STO	DOL ST	AMP N/A	
RT. 3,	B = 137G, RUS	ddress	72801	AUTHORIZATION DATE	160	N/A	THE RESIDENCE ATTEMPT AND ADDRESS OF THE PARTY
. IDENTIF	ICATION OF SYS	TON Decita	2 Bullo	him Neut	- Military Colors	THE REPORT OF THE PARTY OF THE	THE STREET STREET, STR
NAME OF COMPONENT	NAME OF MANUFACTURES	POSITIVE REPAI	NATIONAL BOARD MO.	PLACED AND REPL OTHER IDENTIFICATION	YEAR	REPAIRED,	ASME CODE STAMPED
34" Globe Nalve	Velan	30-46			E	AEPLA CENTRY	OK NO)
	The sale of the sa	26-76	_N/+	RBV- 73	1968	Agrained	24
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1							ingeneration of the figure
DESCRIPT	ION OF WORK	Welded sten	n dise	union to de			-
	DUCTED: HYDR	OSTATIC D	PARTINA	TICO MOMINO		RATING PRESS	URE D
cluded on ea	ental sheets :	in form of li	sts, sket	ches, or drawing tems 1 through a bered and the m	TE BAY	be used, pr	ovided

ATTACHMENT 2

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

J. O. "C	00849166				Da	ge 2x2	
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPE (YES OR NO)
2.5" Slobe Nalve 2.5" Slobe	Darling	E8535-1-8	NA	CV-1220	1990	Belacement	No
Tabre	Nelan	34465	NA	cr-1219	1968	Ryclacod	No
5" stoke	Darling .	E8535-1-7	NA	80-1219	1990	agreacement	No
" seate Value	Henry Nogt	3/5-2/50/7	NA	M4-1079A	1984	New	Mr
"Sate Valve	Hebry	304-215017	A/A-	MU-10798	V984		no
"Sate Nalve "Sate	Nost	295-215014	NA	M4-10804	1984	Herr	no
Natre Natre	Nogt.	323-215017	NA	MU-1080B	1984	New	Mr
10:	45.					011	4
5" airing	various	NA	NA	CCB-5-2.5"	1992	LANCARAMENT	de
_	-						^
						1122	
Parts Version ways not considerable							
					1	-	
							1

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

Po. 1 of 1

		d certified by Anc		(n	ame and a	ddress	of N Certificate Moldi	Rf)		
2	Manufactured for	Arkansas Po	wer & Lie	ght Co.	. P.C	. Bo	x 551, Litt'	e Rock	, AR 7	2203
				(name an	d address	of Purch	haser or Owner)			
2	Location of inetal	letion Arkansas	Nuclear	One, F	Russel	1111	le, AR 728	301		
9	. Location of metal	(# (1Q1) and out to the contract of			(nam	a bna e	adress)			
	Mandal No. Carino	No., or Type Glo	obe	Drewing	W9023	3262	Bev	- 6	CRN	N/A
*	. Model No., Series	a 140., or 1 year annual		Di merenig						
	ASME Code Sec	rtion III, Division 1:	1986				1		N/A	*****
	. Martie Gode, Sec	AUGIT III, DIFFIGURE T.	(edition		(addend				(Code Case	e no.1
6	Pump or vaive	Valve	Nominal inle	size	2-1/2	211	Outlet size	2-1/	2"	
					(in.)			(tm.)	1111	
7	, Material: Body	SA351-CF8M	Booner SA1	82-F31	6L 0	Disk S	A240-347	Bolting	N/A	-
	, material sour		00111101							
	(a)	(b)		(c			(d)		(e)	
	Cert.	Nat'l		Boo			Bonnut		Disk	
	Holder's	Board		Ser	ial		Serial		Serial	
	Serial No.	No.		No			No.		No.	
-	EB535-1-1	N/A	-			100 KH	4		2	
*****	EB535-1-2	- N/A	-	- 3		-	5	-	4	
****	EB535-1-3	N/A	A SECURITY OF SECURITY SHOWS	3			8	MARKET MARKET	3	AND THE PERSON NAMED IN
100.0	EB535-1-4	N/A		2	-	-	6	-	6	
- captions	EB535-1-5	N/A		2			2	-	7	-
INDICATE	EB535-1-6	N/A	- the	1	THE RESERVE THE PERSON NAMED IN	-	1	-	8	ALBERT SOMETH
-	EB535-1-7	N/A	-	4		-	3	ALLONS NAMES	11	
250.00	E8535-1-8	N/A	-	4	Andrewson Market		7	-	10	-
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-		-				NAME AND		-		
-			manufactures and			-		andrew species	****	
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^{*} Supplemental information in form of lists, sketches, or drawings may be used provided (1) size is 8 % × 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.

FORM NPV-1 (back)

8. Remarks - Gasket Retainer Placerrai	- SA240-316
3. Design conditions 3091 pei 280 (pressure) (temperatu 3600 psi at 100°F	
. Hydrostetic test 5400 psi. Disk differential te	st pressurep
CERTIFICATIO	N OF DESIGN
Design Specification certified by Christopher Davenpo Design Report certified by Drew W. Wright	P.E. State AR Reg. no. 6156 P.E. State PA Reg. no. PE-038728-E
Ve certify that the statements made in this report are correct and of the ASME Code, Section III, Division 1. Certificate of Authorization No	d that this pump or valve conforms to the rules for construction Expires 4/15/92
CERTIFICATE OF S	HOP INSPECTION
the undersigned, holding a valid commission issued by the	National Board of Boiler and Pressure Vessel Inspectors and
the State of Physics of Pennsylvania	inspected the pump, or valve, described in this Data Report on best of my knowledge and belief, the Certificate Holder has
the State of Francisco Pennsylvania	inspected the pump, or valve, described in this Data Report on best of my knowledge and belief, the Certificate Holder has Code, Section III, Division 1. For makes any warranty, expressed or implied, concerning the

(1) For manually operated valves only.

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

Pg. 1 of 1

I. Manufactured and c	ar villed et	ine	ame and address	of N Certificate Holder)	Williamsport, PA
	Arkansas Pow	er & Light Co.	, P.O. Bo	ox 551, Little	Rock, AR 72203
	Arkansas	Nuclear One, R	ussellvi	11e, AR 7280)1
			freezing series	***************************************	41.44
	Glot	Drawing	W9023262	Rev	CRN N/A
4. Model No., Series N	10., or (ype				N/A
5. ASME Code, Section	e III. Division 1:	1986		1	N/A (Code Case no.)
5. ASME Code, Section	on in, pression i	(edition)	(aridenda dati	e) (ciess)	2-1/2"
6. Pump or valveY	alve	Nominal inlet size	2-1/2"	Outlet size	CONTRACTOR AND ADMINISTRATION OF CHARACTER CONTRACTOR OF THE
			(hrt.)		Poting N/A
7. Material: Body Si	A351-CF8M	Bonnet SA182-F31	6L Disk .	SA240-347	Borting N/A
7. Material: 5009					
(a)	(b)	(c		(d)	(e)
Cert	Nat'l	800	fy	Bonnet	Disk
Holder's	Board	Ser	ial	Senai	Serial
Serial No.	No.	No		No.	No.
EB535-1-1	N/A	2		4	2
EB535-1-2	-N/A	3		5	4
EB535-1-3	N/A	3		8	3
EB535-1-4	N/A	2		6	6
E8535-1-5	N/A	2		2	7
EB535-1-6	N/A	1		1	8
EB535-1-7	N/A	4		3	
EB535-1-8	N/A	4		7	10
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***	_	AND DESCRIPTION OF THE PARTY OF		-	
			A THE RESIDENCE OF THE PARTY OF	***************************************	
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^{*}Supplemental information in form of lists, sketches, or drawings may be used provided (1) size is 8 % × 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.

FORM NPV-1 (back)

Remarks			terial - S/					
Design condition	260		280 (temperature)	eF or val	ve pressure	class	1500	
		nei Diek di	fferential test pre	essure		3960	-	ps
Hydrostatic test .	AND THE COURSE OF THE PARTY OF	pai. Dian or						
-		CEI	RTIFICATION OF	DESIGN				
eeign Specification	certified by Ch	ristopher	Davenport	P.E. State _	AR PA	Reg. n	6156 PE-038	728-E
esign Report certif	led by Drew W	. Wright		P.E. State _				
the ASME Code,	Section III, Divis	in this report a	re correct and the	COMPLIANCE	alve confor	4/15/	92	ruction
of the ASME Code, I Certificate of Aut	Section III, Divis	in this report assion 1.	re correct and the	et this pump or v	Leo	4/15/ 4/15/	92	ruction
of the ASME Code, A Certificate of Aut	Section III, Divis	in this report assisted 1. N171	re correct and the	npany Signed	Leo	4/15/	92	ruction
I, the undersigned the State of Rock of Boston	Section III, Division No	central commission is nsylvania	yalve Constant the Valve Constant Holder) FICATE OF SHO assued by the Na	P INSPECTION tional Board of and employed pected the pump	Bailer and F by Commer	4/15/	essel inspection Institute on this Data P	tors and CO
I, the undersigned the State of PKKK of Boston 7-31 Land	Section III, Division No	central commission is nsylvania	yalve Constant the Valve Constant Holder) FICATE OF SHO ISSUED by the Na have inside that to the beath the ASME Constant Const	p INSPECTION tional Board of and employed pected the pump est of my knowled. Section III, D	Boiler and F by Commer p. or vaive.	4/15/	essel Inspection Institute Horisont Reservices Horison Institute Horisont Reservices Horisont Reservices Horisont Reservices Reservi	tors and CO
I, the undersigned the State of PKXK of Boston 21 Constructed this p	section III, Division No	CERTIFICATION OF A STATE OF A STA	Valve Constant the Market Instant to the beath the ASME Constant Instant Insta	P INSPECTION tional Board of and employed peated the pump est of my knowle de. Section III. D	Boiler and F by Commer p, or valve, of ledge and be livision 1.	4/15/ Pressure Vencial Undescribed in alief, the Constant of image and the constant of the con	essel inspection Institute Hoplied, concepte in any m	tors and CO
of Boston 7-31 Law constructed this p	section III, Division No	CERTIFICATION OF A STATE OF A STA	TECATE OF SHO ISSUED BY THE NE INTER THE TO THE BETT THE BY THE	P INSPECTION tional Board of and employed pected the pump est of my knowle de. Section III. D makes any want a inspector nor he from or connect	Boiler and F by Commer p, or valve, of ledge and be division 1. ranty, expre- is employer cred with the	Pressure Vencial Undescribed in shell be lia a inspection	essel inspection Institute Hoplied, concepte in any min.	tors and Co

(1) For manually operated valves only.

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

. Manufactured and certified by Anchor/Darling Valve Co., 701 First St., Williamsport, PA 2. Manufactured for Arkansas Power & Light Co., P.O. Box 551, Little Rock, AR 72203 (name and address of Purchaser or Owner) 3. Location of invitalistion Arkansas Nuclear One, Russellville, AR 72801 4. Model No., Series No., or Type Globe Drawing W9023262 CRN N/A N/A 1 1986 5. ASME Code, Section III, Division 1: . (Cade Case no.) (ciess) (addends date) 2-1/2" 2-1/2" 6. Pump or valve Valve Nominal inlet size. Outlet size . -- Bin.) (In.) Disk SA240-347 Bonnet SA182-F316L N/A 7. Meterial: Body SA351-CF8M Botting (4) (c) (b) (a) Digk Bonnet Body Nat'l Cart. Sarial Serial Serial Holder's Board No. No No. No. Serial No. 4 N/A EB535-1-1 4 N/A EB535-1-2 8 N/A EB535-1-3 6 6 N/A EB535-1-4 EB535-1-5 N/A 8 EB535-1-6 N/A 4 N/A EB535-1-7 10 4 EB535-1-8 N/A CV-1220

^{*}Supplemental information in form of lists, sketched, or drawings may be used proxided (1) size is 8½ × 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.

FORM NPV-1 (back)

Design conditions 309	1 psi 280 (temperature 3600 psi st 100°F	eF or valve pressu	re class 1500
5400			3960 pr
. Hydrostatic test	psi. Disk differential test	pressure	- IA
	CERTIFICATION	OF DESIGN	
Design Specification certified by Dro	Christopher Davenpor	P.E. State AR P.E. State PA	Reg. no. 6156 Reg. no. PE-038728-E
	CERTIFICATE OF SHO	OP COMPLIANCE	
We certify that the statements of the ASME Code, Section III,	made in this report are correct and		
N Certificate of Authorization I	#1712	- Expires	4/15/92
- 10 21 90 1	Anchor/Darling Valve C	ompany Le	- 2.0
Date (U - Q G - 7 U Name)	(N Certificate Holder)	ompany Signed Signed	thousand abused the All A
		ner skapte des ensie samme som til det mer klasse foreste der en	
	CERTIFICATE OF SH	HOP INSPECTION	
I the undersioned holding a	velid commission issued by the !	National Board of Boiler and	Pressure Vessel Inspectors and
i, the undersigned, nothing a	PRILLIP ALL AUTOLO	and employed by worthing	rcial Union Ins. Co
the State of THOMENS of Boston . Mass.	have i	inspected the pump, or valve,	
the State of TRXXXXVI of Boston, Mass. 7-31 LALL 1029		best of my knowledge and b	elief, the Certificate Holder ha
the State of PROMOMENT of Boston, Mass, 7-31 Law 1029 constructed this pump, or value by signing this certificate, ne	have in 19, and state that to the ve, in accordance with the ASME Continue the inspector nor his employed.	best of my knowledge and b Code, Section III, Division 1. er makes any warranty, expre	elief, the Certificate Holder ha
the State of PRINKEN of Of BOSTON, Mass, 7-31 64 1/29 constructed this pump, or value by signing this cartificate, ne component described in this is	, 19, and state that to the ve, in accordance with the ASME C	best of my knowledge and b Code, Section III, Division 1. er makes any warranty, expre the inspector nor his employer	essed or implied, concerning the
the State of PROMOMENT of BOSTON, Mass, 7-31 Law 1029 constructed this pump, or value by signing this cartificate, ne component described in this is	have in 19, and state that to the ve, in accordance with the ASME of the the inspector nor his amployed bara Report. Furthermore, neither the damage one loss of any kind arise.	best of my knowledge and b Code, Section III, Division 1. er makes any warranty, expre the inspector nor his employer ting from or connected with the	essed or implied, concerning the

(1) For manually operated valves only.

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

2. Manufactured for Arkansas Power & Light Co., P.O. Box 551, Little Rock, AR 72203 (name and address of Purchaser or Owner) 3. Location of installation Arkansas Nuclear One, Russellville, AR 72801 4. Model No., Series No., or Type Globe Drewing W9023262 N/A CRN.... N/A 1986 E. ASME Code, Section III, Division 1: (Code Case no.) (class) (addends dete) 2-1/2" 2-1/2" Outlet size . 6. Pump or valve Valve Nominal inlet size. -- (Bn.) (in.) Disk SA240-347 Bonnet SA182-F31EL N/A 7. Meterial: Jody SA351-CF8M Baltino (0) (d) (b) (8) Disk Bonnet Body Nat'l Cert. Serial Serial Board Serial Holder's No. No. No. No. Serial No. T N/A EB535-1-1 4 5 N/A EB535-1-2 3 8 N/A EB535-1-3 6 EB535-1-4 N/A N/A EB535-1-5 8 EB535-1-6 N/A 4 N/A CN-1219 EB535-1-7 10 4 EB535-1-8 N/A

^{*}Supplemental information in form of lists, sketches, or drawings may be used provided (1) size is 8½ 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.

FORM NPV-1 (back)

		ner Material - S			
Design conditions Cold working press	3091 (pressure) 3600	pai	F or valve pres		
Hydrostatic test	5400 psi	. Disk differential test pre	essure	3900	ps
	MARKET SALE COMPANIES NAMED COMPANIES	CERTIFICATION OF	DESIGN	X	
Design Specification of Design Report certified	by Drew W. W	topher Davenport right	P.E. State PA	Reg. no. <u>615</u> Reg. no. <u>PE-03</u>	5 3728-E
		CERTIFICATE OF SHOP		orms to the rules for con-	struction
We certify that the sta of the ASME Code, Ge		s report are correct and tha		4/15/92	
N Cartificate of Autho			0	2	
Dete 10-26-90	Name Anchor/C	Darling Valve Com	pany signed	manofised Boussallanda L	
				AND RESIDENCE OF THE PARTY OF T	
		CENTIFICATE OF SHOP	INSPECTION		
of Boston.	Mass.	nission issued by the Nati	onal Board of Boiler and and employed by COMM ested the pump, or valve at of my knowledge and	ballef, the Certificate H	Report on
the State of PIOXICAK of BOSTON. 7-31 LAC 10 constructed this pumi By signing this certific component described	Mass. 29 19 00 o, or valve, in eccordate, neither the insign this Data Report.	nission issued by the Nativania have insp	onal Board of Boiler and and employed by COMM ected the pump, or valvest of my knowledge and s. Section III. Division 1.	described in this Data I ballef, the Certificate H cressed or implied, conce er shall be liable in any m	Report on older has

(1) For manually operated valves only.

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

Menufactured by	Henry Vogt Mac (Name and Address of Arkansas Power &	N Certificate H	older) Little Rock	, AR		
Manufactured for	Arkansas Power &	renesar or Owner)	1			
	Arkangas Nuclear	Une , russ	Date to the second seco		A SECURITY OF THE PARTY OF	
Location of Installation	(Name and Address)			1" 0.0	iet Size	1"
Pump or Valve	(Name and Address) Gate Valve	. Nominal	Inlet Size(ir	nch)	HET STATE ASSESSED	(inch)
	b) N Certificate Holder's	(c) Canadian				1-14
	Serial	Registration	(d) Drawing		(f) Nat'l.	(g) Y
Series No.	No.	No.	No.	(e) Class	Bd. No.	Bui
or Type	1771		n /0022	1	us other	198
(1) Gate	284-215017	AND THE RESIDENCE OF THE PARTY	B-49832 B-49832	- i -	des NO VIII	198
(1) Gate	290-215017	QC-08-00	D-47032			
(3)	thru					
	313-215017		AX (1	1079A		
(5) (Se	e Attached Sheet)		51 318	285017		and the same of th
			-4N313-	Ø 13 VII		
(7)						
(7)						
(8)			-			
						and the second second second
(10)	INCOME TO SERVICE AND ADDRESS OF THE PARTY O					
						-
	Brief description	on of service for w	nich equipment was	designed)		
Design Conditions		(Tamperature)	"F or Valve I	Pressure Class	15	
7. Cold Working Pressur 3. Pressure Retaining Pie	e 3600 psi at	(Temperature) 100°F.	"F or Valve I			
7. Cold Working Pressur	e <u>3600</u> psi at	(Temperature) 100°F.				
7. Cold Working Pressur 3. Pressure Retaining Pie	e 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 3. Pressure Retaining Pid Mark No.	e 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 3. Pressure Retaining Pid Mark No.	e 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 3. Pressure Retaining Pid Mark No.	e 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 3. Pressure Retaining Pid Mark No.	e 3600 psi at	(Temperature) 100°F.				
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7. Cold Working Pressur 3. Pressure Retaining Pid Mark No.	e 3600 psi at	(Temperature) 100°F.				
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7. Cold Working Pressur 3. Pressure Retaining Pid Mark No.	e 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 3. Pressure Retaining Pid Mark No.	e 3600 psi at	(Temperature) 100°F.				
Mark No. (a) Castings	e 3600 psi at	(Temperature) 100°F.				
Cold Working Pressur Retaining Pil Mark No (a) Castings	e 3600 psi at	(Temperature) 100°F.				
(b) Forgings	e 3500 psi at eces Material	(Tamperature) 100°F. Spec. No.	Manufa			
Cold Working Pressur Retaining Pil Mark No (a) Castings	e 3500 psi at eces Material	(Tamperature) 100°F. Spec. No.				
(b) Forgings Body R4600	e 3500 psi at eces Material	(Tamperature) 100°F. Spec. No.	Manufa			
(b) Forgings Body R4600	e 3500 psi at eces Material	(Tamperature) 100°F. Spec. No.	Vogt			
(b) Forgings Body R4600s	A SA 182	(Tamperature) 100°F. Spec. No. F316	Vogt			
(b) Forgings Body R4600	e 3500 psi at eces Material	(Tamperature) 100°F. Spec. No. F316	Vogt			
(b) Forgings Body R4600s	A SA 182	(Tamperature) 100°F. Spec. No. F316	Vogt			

⁽¹⁾ For manually operated valves only.

^{*} Supplemental sheets in form of lists, stetches 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.

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FORM NPV-1 (Back) Material Spec. 10. 11 Chamballacturer 1911 HS 1 M 1 - Remarks Mark No. (c) Botting Cap Screw Vogt SA 564, Gr. 630 HTC (Condition H 1150) (d) Other Parts Gate SA 564, Gr. 630 Vogt (Condition H 1075) 5400 psi. Disk Differential test pressure 9. Hydrostatic test ____ 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. Uiv. L. Edition 1974

Addenda Summer, 175 Code Case No. Date November 27, 1984 Henry Vogt Machine Co. 1/6/87 (N Certificate Holder) 947 symbol expires _ to use the __ Our ASME Certificate of Authorization No. __ (Dete) CERTIFICATION OF DESIGN Henry Vogt Machine Co. Henry Vogt Machine Co. Design information on file at Stress analysis report (Class 1 only) on file at ___ Design specifications certified by (1) _____ Larry D. Young PE State __ Arkansas _ Reg. No. __ R. S. Perry Stress analysis certified by (1) PE State Kentucky Reg. No. (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 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. Tennessee #2289 whan commissions (Nat'l Ud., State, Prov. and No.)

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

. Manufactured by	Henry Vogt Mac (Name and Address of Arkansas Power &	N Certificate Ho	little Rock	, AR		
. Manufactured for	Arkansas rower a	La La Caraciana de la Caracian	AND DESCRIPTION OF THE PARTY OF			
	Arkansas Nuclear	One, Russe	and the state of t			-
Location of Installation	(Name and Address)			1" 0"	tlet Size	1"
Pump or Valve	(Name and Address) Gate Valve	Nominal i	niet Size(in	ich)		(inch)
	b) N Certificate Holder's	(c) Canadian				1-1 Va
	Serial	Registration	(d) Drawing		(f) Nac'l.	(g) Ye
Series No. or Type	No.	No.	No.	(e) Class	Bd. No.	Built
or type			B-49832	1	W 40.00	198
(1) Gate	284-215017		B-49832	1	4-11-11	198
(2) Gate	290-215017	40.000	D-43035			
(3)	thru					
(4)	313-215017		MU-10791	2		
(5) (Se	ee Attached Sheet)	0	V 304- 2150	7		
		7)	V 30 7 - M 1 2 2			
(7)						
(8)		The second secon				
(10)						
(10)						
5.	iBrief description	on of service for wit	wich equipment was o	(seigned)		
	(Pressure)	(Tamperature)	°F or Valve F	Pressure Class	150	00
7. Cold Working Pressu	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressu	re 3600 psi at	(Temperature) 100°F.	°F or Valve f		Rem	
and the second of the second of the second of	re 3600 psi at	(Temperature) 100°F.				
Cold Working Pressur Pressure Retaining Pi	re 3600 psi at	(Temperature) 100°F.				
Cold Working Pressur Pressure Retaining Pi Mark No.	re 3600 psi at	(Temperature) 100°F.				
Cold Working Pressur Pressure Retaining Pi Mark No.	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No.	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No.	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No (a) Castings	re 3600 psi at	(Temperature) 100°F.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings (b) Forgings Body	re 3600 psi at eces Material !	(Temperature) 100°F. Spec. No.	Manufa			
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No (a) Castings	re 3600 psi at eces Material !	(Temperature) 100°F. Spec. No.				
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings (b) Forgings Body	re 3600 psi at eces Material !	(Temperature) 100°F. Spec. No.	Manufa			
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings (b) Forgings Body	(Pressure) re 3600 psi at eces Material 5	(Temperature) 100°F. Spec. No.	Vogt			
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No (a) Castings (b) Forgings Body R4600	A SA 182 I	(Temperature) 100°F. Spec. No.	Vogt			
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No (a) Castings (b) Forgings Body R4600.	A SA 182	(Temperature) 100°F. Spec. No.	Vogt			
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings (b) Forgings Body R4600.	A SA 182	(Temperature) 100°F. Spec. No.	Vogt			
7. Cold Working Pressur 8. Pressure Retaining Pi Mark No. (a) Castings (b) Forgings Body R4600.	A SA 182	(Temperature) 100°F. Spec. No.	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.

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Design information on file at	Henry Vogt Machine Co. Henry Vogt Machine Co.
Design information on file at	Henry Vogt Machine Co.
- Class I only on file at	110.116.7
Stress analysis report (Class 1 only) on file at	
La La	arry D. Young
Charles enactications certified by the	557
	. S. Perry
Stress analysis certified by (1)	380
PE State	

	Name and Address of the Owner o
CERTIFICATE OF SHOP INSPECTION	
I, the undersigned, holding a valid commission issued by the National Board of Boiler and and the State or Province of . Tennessee	ed in this Data Report on a N Certificate Holder has con- essed or implied, concerning ployer shall be liable in any sected with this inspection.
Date Tennessee v.	& & Q 2
Laket he huntrane Commissions (Nat'l Bd. State	YOV. and NO.1
(maperior)	SACISTIC SECURITY IS NOT THE PARTY OF THE PA

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

2. Manufactured for	(Name and Address of	Light Co.	ouisville, K	, AR		
	Name and Address of Pur Arkansas Nuclear	One, Russe	llville, AR		-	
3. Location of Installation	(Name and Address) Gate Valve	Nominal	niet Size	1" Out	tiet Size	(inch)
4. Pump or Valve	Care varye		(in	ich)		(inch)
(a) Mode, No., (b)) N Certificate Holder's	(c) Canadian			(f) Nat'l.	(g) Yes
Series No.	Serial	Registration	(d) Drawing	(e) Class	Bd. No.	Built
or Type	No.	No.	No.	(e) Ciass	00.110.	
	20/ 215017		B-49832	1	00 MA DE	198
(1) Gate	284-215017 290-215017	SERVICES	B-49832	1	40 80 00	198
(2) Gate	thru					
(3)	313-215017					
(4)	e Attached Sheet)		MU-1080	A		
(5)		5	N295-213	5017		
101						
(7)						
(8)					-	
(9)						-
(10)						
						-
5.	(Brief description	on of service for w	hich equipment was	designed)		
8. Pressure Retaining Pie	e <u>3600</u> psi at eces	100°F				
8. Pressure Retaining Pie	eces	Spec. No.	Manute	scturer	Ren	narks
Mark No.	eces		Manuta	ecturer	Ren	narks
-	eces		Manuta	ecturer	Ren	narks
Mark No.	eces		Manute	ecturer	Ren	narks
Mark No.	eces		Manute	octurer	Ren	narks
Mark No.	eces		Manute	octurer	Ren	narks
Mark No.	eces		Manuta	ecturer	Ren	narks
Mark No.	eces		Manuta	ecturer	Ren	narks
Mark No.	eces		Manute	octurer	Ren	narks
Mark No.	eces		Manute	octurer	Ren	narks
Mark No.	eces		Manute	octurer	Ren	narks
Mark No.	eces		Manuta	ecturer	Ren	narks
Mark No.	eces		Manuta	ecturer	Ren	narks
Mark No. (a) Castings (b) Forgings	eces		Manuta	ecturer	Ren	narks
Mark No. (a) Castings (b) Forgings Body	Material	Spec. No.	Wanute	octurer	Ren	narks
Mark No. (a) Castings (b) Forgings	Material	Spec. No.		octurer	Ren	narks
(a) Castings (b) Forgings Body R4600	Material	Spec. No.	Vogt	ecturer	Ren	narks
(a) Castings (b) Forgings Body R4600	Material SA 182	Spec. No.	Vogt	ecturer	Ren	narks
(a) Castings (b) Forgings Body R4600	Material SA 182	Spec. No.	Vogt	ecturer	Ren	narks
(a) Castings (b) Forgings Body R4600	Material A SA 182 A SA 182	Spec. No.	Vogt	ecturer	Ren	narks

⁽¹⁾ For manually operated valves only.

^{*} Supplemental sheets in form of lists, sketches or " awings 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.

Material Spect No. 25 A 1-10 CH3 Manufacturar 191 H3 1. H 1- Hame A HONE Mark No. (c) Botting Cap Screw Vogt SA 564, Gr. 630 HTC (Condition H 1150) (d) Other Parts Gate Vogt SA 564, Gr. 630 (Condition H 1075) 9. Hydrostatic test ____5400 psi. Disk Differential test pressure ___ 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. I., Edition . November 27, 1984 Addenda Summer, 175 . Code Case No. Henry Vogt Machine Co. 1/6/87 (N Certificate Holder) 947 symbol expires to use the ... Our ASME Certificate of Authorization No. ... (Date) CERTIFICATION OF DESIGN Henry Vogt Machine Co. Design information on file at _ Henry Vogt Machine Co. Stress analysis report (Class 1 only) on file at ___ Larry D. Young Design specifications certified by (1) ___ PE State Arkansas Reg. No. .. R. S. Perry Stress analysis certified by (1) 5380 PE State Kentucky Reg. No. _ (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. 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 Insolutor 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. Tennessee #2289 lucinans Commissions ... (Nat'l 6d , State, Prov. and No.)

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FORM NPV-1 N CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES

Manufactured by	Henry Vogt Ma (Name and Address o Arkansas Powe	r & Light C	o., Little	Rock, AR		
Manufactured for	IName and Address of Pu Arkansas Nucl	rchaser or Owner)	ssellville	AR		
Location of Installation	Arkansas Nucl	Nominal	Inlet Size	1"	Outlet Size	1"
Pump or Valve	Cats Agrae	. NOTHING		(inch)		41.04.0
(a) Model No. (b)	N Certificate Holder's	(c) Canadian	Las Paracipo		(f) Na	(1. (g) Y
Series No.	Serial	Helistranon	(d) Drawing		s Bd. N	o. Bu
or Type	No.	No.	195	- managed you design a contract to	ALTERNATION AND ADDRESS OF THE PARTY OF	1.0
	011 015017	A1 45 FT	B-49832	1		19
(1) Gate	314-215017 chru	THE PARTY NAMED IN COLUMN				AND DESCRIPTION OF THE PARTY OF
(2)	331-215017				and the second second second second	
(3)	ee Attached Shee	et)	MU-1	6.50 B	and the second second second second	CALL STREET, S
(4)	A STATE OF THE PARTY OF THE PAR		S/N 328	215014		
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⁽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.

Tennessee #2289

Nat'l Bo . State, Prov. and No.)

date November 376 1989

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

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NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8% in. m 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.

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REVISED 06/30/89

9. RECERTS NA	DESIREDE MENSION
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 or replacement conforms to the rules of the ASPE Code, Section XI.	
Type Code Symbol Stamp N/A	
Signed Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support	1992
I, the undersigned, bolding a valid commission issued by the Mational Board of	
Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. Dave inspected the components described in 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.	f this
By signing this certificate neither the Inspector nor his employer makes as varranty, expressed or implied, concerning the examinations and corrective meass employer shall be liable in any manner for any personal injury or property damages a loss of any kind arising from or connected with this inspection.	ny i
Inspector's Signature J. O. Elliott Date FACTORY MUTUAL SYSTEMS NB-9947, ARK-II33 "N" "I" Metional Board, State, Province, and Endorsess 1992	ints

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

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We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASPE Code, Section XI.	
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Certificate of Authorization No. N/A	NAMES AND ADDRESS OF THE OWNER,
Signed Ro Gelleyn Date 5/1/97	Michigan de Sancia
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R. D. Gillespie - Manager, Central Support	
CEPTIFICATE OF THE PROPERTY OF	Particular of the Particular o
CERTIFICATE OF INSERVICE INSPECTION	
I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of	
Owner's Report during the period 01-07-91 to 5-9-92	this
a cordence with the requirements of the ASME Code, Section XI.	
By signing this certificate neither the Inspector nor his employer makes are described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any partner the Inspector nor his	48 1
or a loss of any kind arising from or connected with this inspection.	je i
Commissions NB-9947, ARK-I133 "N" "T"	i
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Date may 12 1992	1
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	J.O. # 0085	2428			B	age 2 of 2	
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPET (YES OR NO)
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Legranest	Buchtel	NA	NA	CEB-1-PH-186			No
Supranent,	Bechtel	NA	NA	CC8-1-0H-182			No
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APPENDIX II - MANDATORY

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FORM MIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASPE Code Section El

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Applicable Manufacturer's Data Reports to be Attached CERTIFICATE OF CONTLINECE We cartify that the statements made in the report are correct and this conforms to the rules of the LEME Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Empiration Date N/A Signed Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF DESERVICE DESPECTION I. the undersigned, holding a valid commission issued by the Mational Board of ARLANSAS and employed by "ARVARIGHT MUTUAL INSURANCE CO. of ARLANSAS and employed by "ARVARIGHT MUTUAL INSURANCE CO. of NORMOOD, MASS. and employed by "ARVARIGHT MUTUAL INSURANCE CO. of have inspected the compounts described in this owner is Report during the period of 1-07-91 to 5-9-9% Owner's Report during the period of 10-07-91 to 5-9-9% ARLANSAS and employed dogs and belief, the Owner has performed accordance with the requirements of the ARME Code, Section XI. By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Purthermore, beither the Inspector nor his employer makes any described in this Owner's Report. Purthermore, beither the Inspector nor his employer makes any and secribed in this Owner's Report. Purthermore, beither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any hind arising from or connected with this inspection. "ACTORN WILLIAL SYSTEMS NB-9947, ARK-F133 "N" "I" Bational Board, State, Frovince, and Endorsements Date J. O. Elliott May 2	RI	UKS NA	Military States
We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI. Type Code Symbol Stamp N/A Empiration Date N/A Signed Owner's Designee, Title Date S/N/S 2 19 CERTIFICATE OF DESERVICE DESPECTION I, the undersigned, holding a valid commission issued by the National Board of ARLANKAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of ARLANKAS ARLA		Applicable Manufacturer's Data Reports to be Attached	*
We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI. Type Code Symbol Stamp N/A Empiration Date N/A Signed Owner's Designee, Title Date S/N/S 2 19 CERTIFICATE OF DESERVICE DESPECTION I, the undersigned, holding a valid commission issued by the National Board of ARLANKAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of ARLANKAS ARLA	-		· No.
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Type Code Symbol Stamp R/A		CERTIFICATE OF COMPLIANCE	etter dan manage
Signed Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF DESERVICE INSPECTION I, the undersigned, helding a valid commission issued by the National Board of ARIANSAS And employed by ARRYRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. NORWOOD, MASS. NORWOOD, MASS. And employed by ARRYRIGHT MUTUAL INSURANCE CO. of Sard that 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 Sy signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures employ r shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with his inspection. FACTORY MUTUAL SYSTEMS Inspector's Signature Commissions NB-9947, ARK-F133 "N" "I" Inspector's Signature	rej	We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.	
Owner or Owner's Designes, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF DESERVICE DESPECTION I. the undersigned, helding 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. bave inspected the components described in this and state that to the best of my knowledge and belief, the Owner's Report during the period 01-07-91 to 5-9-92 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 meither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any 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 Commissions NB-9947, ARK-F133 "N" "I" Inspector's Signature	TY	Code Symbol Stamp N/A	
I, the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKARIGHT MUTUAL INSURANCE CO. of NORMOOD. MASS. have inspected the components described in this 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 sakes any 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 Inspector's Signature	Cer	ficate of Authorization No. N/A Expiration Date N/A	
In the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKANIGHT 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 accordance with the requirements of the ASME Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his or a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Inspector's Signature Commissions NB-9947, ARK-II33 "N" "I"		Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support	
In the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKANIGHT 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 accordance with the requirements of the ASME Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his or a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Inspector's Signature Commissions NB-9947, ARK-II33 "N" "I"		CERTIFICATE OF DESPREY OF THE PROPERTY OF	
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APPENDIX II - MANDATORY

REVISED 06/30/89

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

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. IDENTIF	ICATION OF SYS	TEA Emer	aeucy	Feedwater	y.		ACTION OF STREET
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NAME OF COMPONENT	NAME OF MANUFACTURER	NAMUFACTURER SERIAL MO.	MATTOWAL BOARD MO.	OTHER IDENTIFICATION	TEAR BUILT		(YES
		KANUFACTURER SERIAL BO.	BOARD	IDENTIFICATION	EVIL?	REPLACED, OR REPLACEMENT	CODE STAPPE (YES OR MO)
COMPONENT 4" Chiefs.	MANUFACTURER	SERIAL NO.	BOARD MO.		FEAR BUILT	REPLACED, OR REPLACEMENT	CODE STAMPE (YES
COMPONENT 4 Sature	1/elan	SERIAL NO.	BOARD NO.	FW-/3B	EVIL?	REPLACED, OR REPLACEMENT	CODE STAPPE (YES OR MO)
DESCRIPT:	MANUFACTURER 1/Elan ION OF HORE	Replace : a	We di	TIC D NONIN	MILT 1968	REPLACED, OR REPLACEMENT	CODE STAPPE (TES OR MO)

REVISED 06/30/89

FORM MIF-2 (Back) .

ę.	ROURIS
	Applicable Manufacturer's Data Reports to be Attached
	USASK31.7. Draft 1968 did not require a Manufacture of
	Report for relocement parts. Therefore none was provided
,	
	CERTIFICATE OF CONFLIANCE
	We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASPE Code, Section XI.
	Type Code Symbol Stamp N/A
	Signed Signed No. N/A Expiration Date N/A
M. Mary	Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION
	I, the undersigned, bolding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspector; and the State or Province of ARKANSAS and employed by REVERGHT MUTUAL INSURANCE CO. of Owner's Report during the period 1-07-5: to 5-9-92 and state that to the best of my knowledge and belief, the sas performed examinations and taken corrective measures described in the secondance with the requirements of the ASPE Code, Section
2	By signing this certificate neither the Inspector nor his employer makes any serranty, expressed or implied, concerning the examinations and corrective measures 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. FACIORY MUTUAL SYSTEMS Commissions No-9947, ARK-I133 "N" "I"
D	J. O. Elliott may /2 1992

FORM MIS-2 ENG-021

APPENDIX II - HANDATORY

REVISED 06/30/89

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

1. OWNER	APAL/EXTERGY	PERATIONS. I	KC.	DATE	12-9	/	
_RT_3	BOX 137 G. 27	SSELLVILLE.	AR. 72801	SHOCKET		_ of/	
. PLANT	ARRAHSAS EUCL	LAR ONC		UNIT ONE	Marie Marie No.	MINE WHO INSTANCED	Maria de la constanti de la co
_RI_3	. BOX 137G. BUS	STLLVILLE, Al	72501	J. O.# 008	54//	4	N.
. WORK P	ERFORMED BY AN	L/ENTERGY OF	LLIKC	TIPE CODE STICE			NO., et
RT. 3,	Box 137G, RUSS	ELLVILLE, AR.	72801	AUTHORIZATION		The second secon	
IDENTI	FICATION OF SYS		2 Heat	(HCB-Z)	х	- N/A	-
. IDENTIF	FIGATION OF COM	PONCENTS REPAIR	EI UTILI	ZED FOR REPAIRS	OR RE	PLACEDODITS 1 T CONTONIONTS	86
NAME OF COMPONENT	NAME OF MANUFACTURES	HANUFACTURER SERIAL NO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPLACED, OR REPLACEMENT	ASME CODE STAMPET
COMPONENT		KANUFACTURER SERIAL NO.	BOARD	IDENTIFICATION	BUILT	REPLACED, OR REPLACEMENT	ASME CODE STAMPET (YFS OR)
COMPONENT	MANUFACTURER	SERIAL NO.	BOARD NO.	IDENTIFICATION	BUILT	REPLACED, OR	ASME CODE STAMPED (YFS
COMPONENT Component Sugar out	Bechtel TION OF WORK 2	Modifysky	BOARD 160.	IDENTIFICATION	EUILT / 968	REPLACED, OR REPLACEDADES	ASME CODE STANDED (YTS OR))

REVISED 06/30/89

PORM MIS-2 (Back) .

	N/A
	Applicable Manufacturer's Data Reports to be Attached
With the same of the later of the later of	
ANALYSIS STREET, THE CASE OF	
	*
	CERTIFICATE OF COMPLIANCE
repair or r	conforms to the rules of the ASME Code, Section XI.
Type Code S	ymbol Stamp N/A
Certificate	of Authorization No. N/A Expiration Date N/A
signed _ /	D Geller Dete N/A
P	Owner or Owner's Designee, Title Bate
	D. Gillespie - Manager, Central Support
	(TETTERA DE AN ANAMANA DE ANAMANA
	CERTIFICATE OF IMSERVICE IMSPECTION
	Administration of the second control of the
Boiler and P	signed, holding a valid commission issued by the Mational Board of ressure Vessel Inspectors and the State or Province of
ZAZ KAZJA	arate of Floatuce of
NORWO	OD. MASS. have inspected the components described in thi
NORWO Owner's Repo	OD. MASS. Deve inspected the components described in this at to the best of my knowledge and belief, the Owner has performed.
NORWO Owner's Repo and state the examinations accordance w	OD. MASS. The during the period O1-07-91 at to the best of my knowledge and belief, the Owner has performed and taken corrective measures described in this Owner's Report in the requirements of the ANNE Code, Section XI.
NORWO Owner's Repo and state th examinations accordance w By sign varranty, ex	op. MASS. The period ol-07-91 to 5-7-72 and the period ol-07-91 to 5-7-72 at to the best of my knowledge and belief, the Owner has performed and taken corrective measures described in this Owner's Report in the the requirements of the ASME Code, Section MI. ing this certificate neither the Inspector nor his employer makes any pressed or implied, concerning the examinations and corrective measures this Owner's Report in this Owner's Report in the certificate neither the Inspector nor his employer makes any this Owner's Report in the concerning the examinations and corrective measures.
NORWO Dener's Repo and state the examinations accordance w By sign varranty, ex lescribed in employer shall or a loss of	on. MASS. The during the period ol-07-91 at to the best of my knowledge and belief, the Owner has performed and taken corrective measures described in this owner's Report in the requirements of the ANNE Code, Section XI. ing this certificate neither the Inspector nor his employer makes any this Owner's Report. Furthermore, neither the Inspector nor his labels in any manner for any personal injury or property damage any kind arising from or connected with this inspection.
NORWO Owner's Repo and state the examinations accordance w By sign varranty, explescribed in exployer shalor a loss of	OD. MASS. The during the period O1-07-91 at to the best of my knowledge and belief, the Owner has performed and taken corrective measures described in this Owner's Report in the requirements of the ANNE Code, Section MI. ing this certificate neither the Inspector nor his employer makes any this Owner's Report. Furthermore, neither the Inspector nor his any this Owner's Report. Furthermore, neither the Inspector nor his any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Commissions NE-9947, ARK-II33 "N" "IF" Commissions NE-9947, ARK-II33 "N" "IF"
NORWO Owner's Repo and state the examinations accordance w By sign varranty, ex described in exployer shalor a loss of	on mass. The during the period ol-07-91 to 5-2-22 and taken corrective measures described in this owner has performed and taken corrective measures described in this owner's Report in the requirements of the ANNE Code, Section MI. Ing this certificate neither the Inspector nor his employer makes any this owner's Report. Furthermore, neither the Inspector nor his amplied, concerning the examinations and corrective measures this owner's Report. Furthermore, neither the Inspector nor his any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS

REVISED 06/30/89

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS :

**	OWNER _	APAL/EXTERSY	OPERATIONS. I	NC.	DATE 4-	10-9	Z	
	RT. 3.	BOX 137 G. R	USSELLVILLE,	AR. 72801	SHEET		_ of	
2.	PLANT _	ARRANSAS MUCL	EAR ONE	N. San Stranger	UNIT ONE	-		and the second s
	_RT2.	BOX 137G. RU	SELLVILLE, Al	72801	J.O. #008 Repair Organia	54/3 Mation	PO Fa., Joh	No or
3.	WORK PE	RFORKED BY API	L/DETERGY OF	L. DIC.	TTPE CODE STIS	BOL STI	JEP N/A	no., etc
	RT. 3,	Box 137G, RUSS	SELLVILLE, AR.	72801	AUTHORIZATION DATE		The second secon	No description to the latest section to the
4.	IDENTIFI	CATION OF STS	TON Deac	tor Con	lant Sixte	w		Charles in the Constitute on Assess
	(D) AFF	LICABLE EDITI	ON OF SECTION	XI UTILI	19 77 EDIT	OR BE	PLACEDODATE 1	001
COX	ME OF PONENT	NAME OF MANUFACTURES	MANUFACTURES SERIAL NC.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEDIENT	ASME CODE STAMPED (YES OR MO)
1 3	Ely he	garact		- commentation in practice.	- A DESCRIPTION OF THE PARTY OF	¥		Locate States 1
1	alve	Parget Brick	7/	NA	SV-1079	1980	Recailed	96
7	alue	Brek	7/	NA	SV-1079	1980	Regarded	26
	ame	- Back	7/	NA	SV-1079	/986	Recaired	26
								26
7.	DESCRIPTI	ION OF WORK	Removed and	Kareak	Welded Lody TIC D WORLD H DRI TE	24	bonnet	

REVISED 06/30/89

FORM MIS-2 (Back) .

	REPORKS M/A
	Applicable Manufacturer's Data Reports to be Attached
	CERTIFICATE OF CONFLIANCE
	Me certify that the statements made in the report are correct and this conforms to the rules of the ASME Code, Section XI.
	Type Cods Symbol Stamp W/A
1	ertificate of Authorization . W. M/A Profession . W.
1	igned KA Sulle Bate 5/1/ 6 2
mma	OFINET OF DODE ! S DER COLE OF S S S S S S S S S S S S S S S S S S
	January Central Support
et disa	ALL VEHILLET SUPPORT
	the undersigned, helding a valid commission issued by the Mctional Board of ARKANSAS
io a	the undersigned, holding a valid commission issued by the Mctional Board of oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this oil state that to the period 01-07-91 to 5-9-93
- O & e	the undersigned, helding a valid commission issued by the Mctional Board of oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of have inspected the cumponents described in this of state that to the best of my knowledge and belief, the Owner has performed caninations and taken corrective measures described in this owner's Report in the requirements of the ASNE Code, Section XI.
- IO & e &	certificate of inservice inspection the undersigned, helding a valid commission issued by the Mctional Board of other and Pressure Vessel Inspectors and the State or Province of arkansas and employed by "Arkvright Mutual Insurance co. of have inspected the cumponents described in this of state that to the best of my knowledge and belief, the Owner has performed caninations and taken corrective measures described in this owner's Report in Sy signing this certificate neither the Inspector nor his employer makes any scribed in this owners and corrective measures.
O a e a	certificate of Deservice Inspection the undersigned, helding a valid commission issued by the Metional Board of other and Pressure Vessel Inspectors and the State or Province of ARLANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of have inspected the components described in this destate that to the best of sy Encyledge and belief, the Owner has performed cordance with the requirements of the ASME Code, Section XI. By signing this certificate neither the Inspector nor his employer makes any scribed in this Owner's Report. Furthermore, heither the Inspector nor his ployer shall be liable in any manner for any personal injury or property demage a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS
- Oaea	the undersigned, holding a valid commission issued by the Mctional Board of piler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKANIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the cusponents described in this described in this described that the best of many personal in this Owner's Report during the period 01-07-91 to 5-9-92 to describe and taken corrective measures described in this Owner's Report in cordance with the requirements of the ARME Code, Section NI. By signing this certificate neither the Inspector nor his employer makes any scribed in this Owner's Report. Furthermore, neither the Inspector nor his aloss of any kind arising from or connected with this injury or property demage

REVISED 06/30/89

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

	APAL/ENTERGY	OPERATIONS, I	MC.	DATE	1-18	- 92	
-RT. J.	BOX 137 G. B	USSELLVILLE.	AR. 72801	SPOKET		of	/
2. PLANT	ARRANSAS HUCL	EAR ONE	MANY CHARACTER - SPECIAL	UNIT ONT	and the same of th	V-A	
RT. 3.	BOX 137G, RU	SSELLVILLE, A	R. 72801	J.O. # 008	54/ sation	37 ° °	No et
3. WORK PE	REFORMED BY AP.	L/Detercy op	S. INC.	TYPE CODE STIM	BOL ST	NO NA	no., ec
RT. 3,	Box 137G, RUS:	SELLVILLE, AR.	72801	AUTHORIZATION EXPIRATION DAT			
4. IDENTIFE	CATION OF STS	TEM Dear	tor Co	Mont Sexte	ne		-
(b) APP	LICABLE EDITI	ON OF SECTION	MI UTILI	19 77 EDIT	OR RE	PLACEDODETS 1	986
	NAME OF	MANUFACTURER	MATIONAL	The second secon	Application to account to	REPAIRED.	ASME
NAME OF COMPONENT	MANUFACTURER	SERIAL NO.	BOARD NO.	OTHER IDENTIFICATION	TEAR	REPLACED	CODE STAMPED (YES OR NO)
COMPONENT / Sklobe Nalve	Target Abek	SERIAL NO.	. OSL	IDENTIFICATION	BUILT	REPLACED, OR REPLACEMENT	STAMPED (YES OR MO)
COMPONENT ("Slabe	MANUFACTURER	SERIAL NO.	MO.		1980 1980	REPLACED, OR REPLACEDONT	STAMPED (YES OR MO)
COMPONENT /" bloke Nalve /" bloke	Target - Rock Parses	SERIAL NO.	MO.	SV-1083	1980 1980	REPLACED, OR REPLACEDONT	STAMPED (YES OR MO)

REVISED 06/30/89

PORM MIS-2 (Back) .

	Applicable Manufecturer's Data Reports to be Attached
Market annual services	
-	
-	
AND DESCRIPTION OF THE PERSONS ASSESSED.	
	CERTIFICATE OF CONFLIANCE
repair or	replacement conforms to the rules of the ASPE Code, Section XI.
Type Co/se	Symbol Stamp N/A
CertiZice	e of Authorization No. W/A Production
Signed	
	Owner or Owner's Designee, Title D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMSERVICE INSPECTION .
, the und	ersigned belding a make
EAC KAJUAN	Pressure Vessel Inspectors and the State or Province of
Wher's Re	and exployed by ARKVRIGHT MUTUAL INSURANCE CO. of have inspected the components described in the components described in the tenth of the best of my knowledge and belief, the Owner has performed as and taken corrective measures described in this corrective measures described in the corrective
acat member	with the requirements of the ASME Code, Section XI.
By signarranty, escribed in	ming this certificate neither the Inspector nor his employer makes any appressed or implied, concerning the examinations and corrective measure
MD LOVEF EN	All he light in the second of
o Este	f any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS
o E Le	f any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Commissions NE-9947, ARK-F133 "N" "I" Signature Mational Board Factory Mutual Systems

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

			ions Inc.; Russel	lville, Arkansa		
			lear One; Russell	G accress)		
. 4	. Model No., Series No.,	or Type 80E-0	01 Drawing 91L-00	I Rev A	CRN N/A	100
	5. ASME Code Saction III	1977	S 1979		N/A	
). MONTE GOOD SECTION III	Edition	Addenda date	Class	Code Case no.	
			inlet size 1			
	7. Material: Borly SA-	182 F316L Bonnet	SA-479 316 Disk	SA-564 GR 630	ndicator Tube	
	(8)	(b)		_td)	(e)	
	Cert	Nat I	Body	Bonnet	Disk	indicator
	Holder's	Board	Serial	Serial	Se ial	Tube
	Serial No.	No.	No.	No.	No.	Serial No.
	75	N/A	5770	3514	2049	4099
	76	N/A	5763	3584	2043	4143
400	77	N/A	5771	3770	1965	4057
-	7.8	N/A	5766	3553	2014	4193
	79	N/A	5764	3631	1963	4124
7	80	N/A	5782	3549	2010	4187
V-1083	81	N/A	5783	3775	1960	4072)
A STATE OF THE PARTY OF THE PAR	82	N/A	5759	3640	2047	4178
	83	N, a	5760	3510	2001	4105
	84	N/A	5781	3560	2004	4233
	N/A	N/A	N/A	N/A	N/A	N/A
	-					
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				THE RELEASE OF THE PARTY OF THE	-	
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-	A PARKET					
900	and the second section of the second section is a second s	PROPERTY AND ADDRESS OF THE PARTY OF THE PAR				

^{*}Supplemental information in the form of lists, sketches, or drawings may be used provided (1) size is 8½ × 11, (2) information in items 1 unough 4 on this Data Report is included on each sheet, (3) outh sheet is numbered and the number of sheets is recorded at the top of this form

FORM NPV-1 (back)

		1000	Serial No.
Remarks			
	1500 TOO		N/A
Design conditions	psi nure) (temperatur	ef or valve pressure	class
Cold working pressure			
Hydrostatic test6575	psi Temp Ambient	°F Disk differential test p	ressure 4825 ps
	CERTIFICATION	OF DESIGN	
			4557
esign Specification certified by	Larry Young	Prof. Eng. state Arkan Prof. Eng. state NY	Reg. No. 056047
lesign Report certified by	Steven Karidas	Prof. Eng. state NS	Heg. No.
	CERTIFICATE OF SH	TOP COMPENSION	
Man manual a thing the examinate			かいか たい そういか かいはん かいけん ボデルタ アンプリアムロギアス・カングライアスプリアス
	made in this report are currect as	nd that this pump or valve conform	
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017		12-12-92
of the ASME Code, Section III.	1017	Expires .	12-12-92
of the ASME Code, Section III. N Certificate of Authorization No Dete 2/31/92 Name	Target Rock Corpora (N Certificate Holder) CERTIFICATE OF S	Expires . E. Ba SHOP INSPECTION	12-12-92 Priada Jadanana ector, Q.A
of the ASME Code, Section III. N Certificate of Authorization No Date 2/21/92 Name I, the undersigned, holding a v	Target Rock Corpora IN Certificate Holder) CERTIFICATE OF States of the commission issued by the	Expires E. Ba SHOP INSPECTION National Board of Boiler and P	Pressure Vessel Inspectors ap
of the ASME Code, Section III. N Certificate of Authorization No Date 2/31/92 Name I, the undersigned, holding a v	Target Rock Corpora IN Certificate Holder) CERTIFICATE OF Sealed commission issued by the	Expires E. Ba SHOP INSPECTION National Board of Boiler and P and employed by Comme	Pressure Vessel Inspectors apercial Union Ins. C
of the ASME Code, Section III. N Certificate of Authorization No Date 2/21/92 Name	Target Rock Corpora IN Certificate Holder) CERTIFICATE OF Stall d commission issued by the lew York have	SHOP INSPECTION National Board of Boiler and P Comme and employed by Comme inspected the pump, or valve, d	Pressure Vessel Inspectors appercial Union Ins. Co
I, the undersigned, holding a very state or Province of Ness N	Target Rock Corpora IN Certificate Holder) CERTIFICATE OF Stall d commission issued by the lew York have	Expires E. Ba SHOP INSPECTION National Board of Boiler and P and employed by Comme	Pressure Vessel Inspectors appercial Union Ins. Co
I, the undersigned, holding a very state or Province of Ness N	Target Rock Corpora IN Certificate Holder) CERTIFICATE OF States and commission issued by the law York have	Expires E. Ba SHOP INSPECTION National Board of Boiler and P — and employed by Comme inspected the pump, or valve, debest of my knowledge and believed.	Pressure Vessel Inspectors appercial Union Ins. Co
I, the undersigned, holding a vector of Boston, Mass.	Target Rock Corpora IN Certificate Holder) CERTIFICATE OF State of the York have 1992 and state that to the in accordance with the ASMI	SHOP INSPECTION National Board of Boiler and P Comme and employed by Comme inspected the pump, or valve, de best of my knowledge and belief Code, Section III.	Pressure Vessel Inspectors and Proceed Union Ins. Collegented in this Data Report of the N Certificate Holder has
I, the undersigned, holding a vector of Boston, Mass. constructed this pump, or valve.	Target Rock Corpora IN Certificate Holder) CERTIFICATE OF Stall d commission issued by the law York have 19 22 and state that to the in accordance with the ASMI	SHOP INSPECTION National Board of Boiler and P and employed by Comme inspected the pump, or valve, de best of my knowledge and belief Code, Section III.	Pressure Vessel Inspectors approcial Union Ins. Colescribed in this Data Report of the N Certificate Holder has assed or implied, concerning the
I, the undersigned, holding a vertex of Boston, Mass. Constructed this pump, or valve equipment described in this Dark Dark Dark Dark Dark Dark Dark Dark	Target Rock Corporal IN Certificate Holder) CERTIFICATE OF States and commission issued by the layer and state that to the in accordance with the ASMI ther the Inspector nor his employed the Report. Furthermore, neither	Expires Expires E. Ba SHOP INSPECTION National Board of Boiler and Part Comments and employed by Comments and employed by Comments and employed the pump, or valve, defected the pump of the pum	Pressure Vessel Inspectors approved Union Ins. Colescribed in this Data Report of the N Certificate Holder has a seed or implied, concerning the shall be liable in any manner for
I, the undersigned, holding a vertice of Boston, Mass. By signing this certificate, neither equipment described in this Dark.	Target Rock Corporal IN Certificate Holder) CERTIFICATE OF States and commission issued by the layer and state that to the in accordance with the ASMI ther the Inspector nor his employed the Report. Furthermore, neither	SHOP INSPECTION National Board of Boiler and P and employed by Comme inspected the pump, or valve, de best of my knowledge and belief Code, Section III.	Pressure Vessel Inspectors approved Union Ins. Collegeria Union In
I, the undersigned, holding a verthe State or Province of State or Mass. By signing this certificate, neither agriculture of the Dark of Boston, Mass.	Target Rock Corporal IN Certificate Holder) CERTIFICATE OF States and commission issued by the layer and state that to the in accordance with the ASMI ther the Inspector nor his employed the Report. Furthermore, neither	SHOP INSPECTION National Board of Boiler and P Comme and employed by Comme inspected the pump, or valve, de best of my knowledge and belief Code, Section III. Over makes any warranty, expressing from or connected with the inspector nor his employer the inspector nor connected with the inspector or connected with th	Pressure Vessel Inspectors and Pressure Vessel Inspectors and Pressure Vessel Inspectors and Pressure Vessel Union Ins. Collegation of the N Certificate Holder has a seed or implied, concerning the shall be liable in any manner to inspection.
I, the undersigned, holding a vithe State or Province of Boston, Mass. By signing this certificate, neither aggingment described in this Dark Dark Dark Dark Dark Dark Dark Dark	Target Rock Corporal IN Certificate Holder) CERTIFICATE OF States and commission issued by the layer and state that to the in accordance with the ASMI ther the Inspector nor his employed the Report. Furthermore, neither	SHOP INSPECTION National Board of Boiler and Pand employed by Comme inspected the pump, or valve, de best of my knowledge and belief Code, Section III. Over makes any warranty, express the inspector nor his employer trising from or connected with the N. V. STATE COM.	Pressure Vessel Inspectors apport of the N Certificate Holder has ssed or implied, concerning the shall be liable in any manner for its inspection.
I, the undersigned, holding a verthe State or Province of State or Province of Constructed this pump, or valve by signing this certificate, neith equipment described in this Da	Target Rock Corporal IN Certificate Holder) CERTIFICATE OF States and commission issued by the layer and state that to the in accordance with the ASMI ther the Inspector nor his employed the Report. Furthermore, neither	SHOP INSPECTION National Board of Boiler and Pand employed by Comme inspected the pump, or valve, de best of my knowledge and belief Code, Section III. Over makes any warranty, express the inspector nor his employer trising from or connected with the N. V. STATE COM.	Pressure Vessel Inspectors approved Union Ins. Collegeria Union In

FORM WIS-2 ENG-021

APPENDIX II - MAMDATORY

REVISED 06/30/89

FORM WIS-2 OWNER'S REPORT FOR REPLIES OR REPLACEMENTS As Required by the Provisions of the ASNE Code Section FI

1. OWN	ER APAL/ENTERGY	OPERATIONS. I	DRC.	DATE	4-8	2-92	
_87	. 3. BOX 137 G.	Address	AR. 72801	SHEET	1	of	
2. PLA	NT AREAMSAS MUC	LEAR ONE		UNIT ONE			
_RI	. 3. BOX 137G. R	SSELLVILLE. A	7. 72801	J. 0. # 008	542.	20 No., Joh	No. as
3. WORJ	FERFORMED BY AL	MANUAL OF	S. INC.	TYPE CODE STO			NO., 90
		W-OGT, 6 8 B		EXPIRATION DAY	TR.		
4. IDEN	TIFICATION OF ST	STEN Reaci	tor Con	lant Septen	r		
(E)	APPLICABLE CONS	ION OF SECTION	XI UTILI	ZED FOR REPAIRS	OR RE	PLACEDODYTS 1	9.86
NAME OF	T KANUFACTURES	HAMUFACTURER SERIAL NO.	MATIONAL BOARD BO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES
Value Value	Pagget	22	NA	8"-1091	1980	agaired	Mr.
1	-			Constitution and the constitution of the const			
1							
-	0. 1						T. COMMERCIAL STREET, S.
	IPTION OF WORK	<u> </u>			i		

REVISED 04/30/89

PORM MIS-2 (Back) .

). R	DIAMES N/A
	Applicable Manufacturer's Data Reports to be Attached
-	
1000	

-	
	CERTIFICATE OF COMPLIANCE
rej	We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.
Tyy	pe Code Symbol Stamp W/A
Cer	tificate of Authorization No R/A _ Empiration Date _ R/A
Christian Company	Owner er Owner's Designee, Title R. D. Gillespie - tanager, Central Support
	CERTIFICATE OF DESERVICE IMSPECTION
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REVISED 06/30/89

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

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R	D. Gillespie - Manager, Central Support
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REVISED 06/30/89

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

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	Applicable Manufacturer's Data Reports to be attached Draft 68 edition of code days at the
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	CERTIFICATE OF COMPLIANCE
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	repair or replacement conforms to the rules of the ADE Code, Section XI.
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	Owner or Owner's Designee, Title Date 7/17/97 . 19
	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMSERVICE IMSPECTION .
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4	I, the undersigned, holding a valid commission issued by the Mational Board of ARKANSAS and employed by "ARKVELGET NUTTIAL TAKEN
4	I, the undersigned, holding a valid commission issued by the Mational Board of ARKANSAS and employed by ARKANIGHT MUTUAL INSURANCE CO.
	I, the undersigned, holding a valid commission issued by the Mational Board of Sciler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKANIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that the transfer of the period O1-07-91
A STATE OF THE PERSON NAMED IN	I, the undersigned, holding a valid commission issued by the Mational Board of Soiler 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 and state that to the best of my knowledge and belief, the Owner based of the Components described in this state that to the best of my knowledge and belief, the Owner based of the Components described in this state that to the best of my knowledge and belief, the Owner based of the Components described in this state that to the best of my knowledge and belief, the Owner based of the Components described in this state that to the best of my knowledge and belief, the Owner based of the Components described in this state that to the best of my knowledge and belief.
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REVISED 06/30/89

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

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	Applicable Manufacturer's Data Reports to be Attached
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	R. D. Gillespie - Manager, Central Support
AND ADDRESS ASSESSED.	DOTY SENETAL SUPPORT
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REVISED 06/30/89

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

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	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this
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Owner and st examinaccord accord	CERTIFICATE OF DESCRIVICE INSPECTION undersigned, helding valid commission issued by the Mational Board of and Pressure Vessel Inspectors and the State or Province of USAS and employed by ARKVRIGHT MUTUAL INSURANCE CO. of have inspected the components described in this steethet to the best of my knowledge and belief, the Owner has performed attons and taken corrective measures described in this Owner's Report in signing this certificate meither the Inspector nor his employer makes any bed in this certificate meither the Inspector nor his employer makes any bed in this certificate meither the Inspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this this certificate meither the Enspector nor his employer makes any bed in this this certificate meither the Enspector nor his employer makes any bed in this this certificate meither the Enspector nor his employer makes any bed in this this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his employer makes any bed in this certificate meither the Enspector nor his certificate necessaries and the Enspector nor his certificate
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FORM NPV-1 CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES* As Required by the Provisions of the ASME Code, Section III, Div. 1

	Manufactured and	certified Ly Target Ro	ock Corp.: 1966E	Broadhollow Rd;	E. Farmingdale	, NY 11735
			Iname and addres	is of N Certificate Holder)		
2	Manufactured for .	Entergy Operation	ns Inc.; Russell	ville, Arkansas 7	2801	
			(name and address of Pu	irchaser or Owner)		
* 3	Location of installa	tion Arkansas Nuc	lear one; Russer	1 address)	76974	
. 4	Model No., Series	No. or Type 80E-00		NAT A	CRNN/A	
	. ASME Code Section	in III: 1977	\$ 1979	1	N/A	
6	Pump or valve	Valve Nominal is	Addenda date	Class Outlet size	Code Case no.	
		SA-18Z F31(L Bonnet	tin i		n.i SA-479 316	
	wateria: souy =	an amandring control of the control of	Commission American Miles		dicator Tube	
	(a)	(b)	(6)	(d)	(6)	
	Cert	Nati	Body	Bonnet	Disk	Indicator
	Holder's	Board	Serial	Serial	Senal	Tube
	Serial No.	No.	No.	No.	No.	Serial No.
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The same of the sa	86	N/A	5769	3773	2026	4215
	87	N/A	5756	3776	2028	4128
	88	N/A	5774	3762	2015	4201
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	2 2 2 000	Carlo Anna Anna Marana	* Assessment and a second seco	-		-
	and the second s					

^{*}Supplemental information in the form of lists, sketches, or drawings may be used provided (1) size is 8 % × 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.

FORM NPV-1 (back)

		Mfr. Serial No.	N/A
Remarks			
Design conditions 250 (pressure		PF or valve pressure class	N/A
. Cold working pressure 43			4838
Hydrostatic test6575	ps: Temp. Ambient	_oF Disk differential test pressure _	4825 psi
	CERTIFICATION C	F DESIGN	
Design Specification certified by	Larry Young	Prof. Eng. state Arkansas R Prof. Eng. state NY R	leg. No. 4557
Design Report certified byStr	even Karidas	Prof. Eng. state	leg. No.
We certify that the statements ma of the ASME Code, Section III. V Certificate of Authorization No	de in this report are correct and t	hat this pump or valve conforms to the r Expires	2-12-92
	arget Rock Corporati	on Signed E. Bajadare of	ada
		L. Dajada, Ori	eccor, gini
	CERTIFICATE OF SHO	OP INSPECTION	
No.	d commission issued by the Ne York	tional Board of Boiler and Pressure V	essel inspectors and Union Ins. Co.
the State or Province of New of Boston, Mass.	have ins	and employed by Commercial pected the pump, or valve, described in strong my knowledge and belief, the N Commercial Comme	n this Data Report on
constructed the pump, or valve, in			
equipment described in this Data I	Report. Furthermore, neither the	makes any warranty, expressed or im Inspector nor his employer shall be lia	ble in any manner for
2/28	mage or a loss of any kind arisin	g from or connected with this inspecti	on.
William (& Holandons	N. Y. STATE COMMISSIONED IN PEN	
(Inspector)		(Nat'l Bd., (incl. endorsements) \$	itate, Prov. and No.1

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

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RT. 3,	Box 137G, RUSS	SELLVILLE, AR.	72801	AUTHORIZATION DAT	100	N/A	-
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FORM MIS-2 (Back) .

REVISED 06/30/89

	Applicable Manufacturer's Date Reports to be Attached
	bate Reports to be Attached
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- AND DESCRIPTION OF THE PARTY	
OR DESCRIPTION	
THE RESERVE OF THE PERSON NAMED IN	
	CERTIFICATE OF COMPLIANCE
We	certify that the consenses
repair o	conforms to the rules of the ASPE Code, Section XI.
	e Symbol Stamp N/A
Certific	ete of Authorization No. N/A Empiration Date N/A
Signed _	
	OWDER OF OWNER'S PASSON OF THE
	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMPERVICE INSPECTION
	dersigned, holding a walid commission issued by the Mational Board of derseasure Vessel Inspectors and the State or Province of
Owner's R	eport during the period 01-07-91
	the requirements of the ASME Code, Section XT.
By 8	igning this certificate meither the Inspector per his
mployer or a loss	shell be liable in any manner for any personal injury or property damage
nspector	- NE-9947. ARK-T133 "W" N+H
J. O. E11	iott 7/2 1992

REVISED 06/30/89

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

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FORM MIS-2 (Back) .

REVISED 06/30/89

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 or replacement conforms to the rules of the ASPE Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Owner or Owner's Designee, Title Signed Date 5/1/92 .)_ R. D. Gillespie - Manager, Central Support CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the Mational Board of Soiler and Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. NORWOOD, MASS.

here inspected the components described in this 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 ARME Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any varranty, 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 Inspector's Signature Commissions NB-9947, ARK-II33 "N" "I"

Betional Board, State, Province, and Endorsements Date . Elliott may 12 1992

FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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E	I. 3.	BOX 137G. RU	SELLVILLE, A	R. 72801	J.O. # 008	555 Mation	PO No., Job	No., et
			L/ENTERGY OF		TTPE CODE STIC	OL ST	MEP N/A	
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(b)) APP	LICABLE EDITI	ON OF SECTION	EI UTILI	19 <u>63</u> FDIT ZED FOR REPAIRS PLACED AND REPL	OR RE	PLACENDATS 1	9 86
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REVISED 06/30/89

FORM MIS-2 (Back)

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	We con	CERTIFICATE OF COMPLIANCE								
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Micasa	R. I	voer or Owner's Designee, Title). Gillespie - Manager, Central Support								
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		may 12 19 92								

APPENDIX II - MANDATORY

REVISED 06/30/89

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

COMPONENT MANUFACTURER SERIAL BO. BOARD IDENTIFICATION SUILT OR REPLACEMENT OR N			ender as a		SHEET	-	men W.S services	CONTRACTOR CONTRACTOR
MORE PERFORMED BY APAL/ENTERCY OPS. INC. TYPE CODE STAND NO., Job No., NORE PERFORMED BY APAL/ENTERCY OPS. INC. TYPE CODE STAND N/A RT. 3, BOX 137G, RUSSELLVILLE, AR. 72801 Address BUTHORIZATION NO. E/A LIDENTIFICATION OF SYSTEM SEPARATE (E-4/A) (a) APPLICABLE CONSTRUCTION CODE Section 19 7/ EDITION, NA ADDRESS (b) APPLICABLE EDITION OF SECTION EI UTILIZED FOR REPAIRS OF REPLACEMENTS 19 8/A IDENTIFICATION OF COMPONENTS REPAIRED OF REPLACED AND REPLACEMENT COMPONENTS NAME OF NAME OF NAME OF NAMUFACTURES SERIAL NO. NATIONAL SOURCE STAND OF COMPONENT SERIAL NO. NATIONAL NAME OF NAME OF NAMUFACTURES SERIAL NO. NATIONAL NAME OF NAME O	. FLANT				CHIT ONE	ACCRECATION OF THE PERSONS ASSESSMENT		
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AND REAL PROPERTY.	
	CERTIFICATE OF COMPLIANCE
res	restancement conforms to the rules of the ASPE Code, Section XI.
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	tificate of Authorization No. N/A Expiration Date N/A
ard	Owner or Owner's Derignee, Title R. D. Gillespie - Manager, Central Support
	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION
Bo11	the undersigned, holding a valid commission issued by the Mational Board of
A	ler and Pressure Vessel Inspectors and the State or rowince of
Owne	NORWOOD, MASS. and employed by ARKVRIGHT MUTUAL INSURANCE CO. of the seport during the period 01-07-91 to 5-9-9.7 state that to the best of my knowledge and belief, the Owner has performed inations and taken corrective measures described in the second of the components.
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DR M	FACTORY MUTUAL SYSTEMS NB-9947, ARK-T132 "W" NTO
3. 0	D. Elliott 7/2 1992

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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SECTION XI - DIVISION 1

REVISED 06/30/89

PORM MIS-2 (Back) .

Applicable Manufacturer's Data Reports to be Attached Applicable Manufacturer's Data Reports We certify that the statements made in the report are correct and this repair or replacement Type Code Symbol Stamp M/A Empiration Date M/A Signed Data Data Data Data Data Owder or Owner's Designee, Title Data Data Data Data R. D. Gillespie - Manager, Central Support CERTIFICATE OF DESERVICE INSPECTION I, the modersigned, holding a valid commission issued by the Mational Board of Solier and Pressure Vessel Inspectors and the State or Province of ANKANAS Data Data NORMOOD, MASS Data Data Data NORMOOD, MASS Data Data Data NORMOOD, MASS Data Data Data NORMOOD MASS Data Data Data NORMOOD MASS Data Data Data NORMOOD MASS Data Dat		N/A
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FORM WIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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FORM MIS-2 (Back) .

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		CERTIFICATE OF IMPERVICE INSPECTION .
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In	spector's 8:	Metional Board, State, Province, and Endorsements
Da	te . Elliott	7/2 1992

FORM MIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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SECTION XI - DIVISION 1

REVISED 06/30/89

PORM MIS-2 (Back) .

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	Applicable Manufacturer's Data Reports to be Attached
	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.
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	the undersigned, holding a valid commission issued by the Mational Board of other and Pressure Vessel Inspectors and the State or Province of and employed by *ARKWRIGHT MUTUAL INSURANCE CO.
1086	the undersigned, holding a valid commission issued by the Mational Board of ciler and Pressure Vessel Inspectors and the State or Province of ARIANSAS and employed by "AREVRIGHT MUTUAL INSURANCE CO. of NORMOOD, MASS. have inspected the components described in this of state that to the best of my modeledge and belief, the Comer has performed examinations and taken corrective measures described in this Owner's Report in the requirements of the ASPE Code, Section XI.
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	the undersigned, holding a valid commission issued by the Mational Board of ciler and Pressure Vessel Inspectors and the State or Province of and employed by "AREVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this of state that to the best of my knowledge and belief, the Owner has performed state that to the best of my knowledge and belief, the Owner has performed coordance with the requirements of the ASPE Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any secribed in this Owner's Report. Furthermore, neither the Inspector nor his encountry described in any manner for any personal injury or property descree a loss of any kind arising from or connected with the injury or property descree

FORM MIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

PORM WIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENT As Required by the Provisions of the ASPE Code Section 1

1.	OWNER	APEL/ENTERGY	OPERATIONS. II	NC.	DATE 4-1	0-9	3	
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SECTION NI - DIVISION 1

REVISED 06/30/89

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	CERTIFICATE OF COMPLIANCE
repair or	rtify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.
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Certificate	of Authorization No. N/A Empiration Date N/A
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	D. Gillespie - Manager, Central Support
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FORM MIS-2 ENG-021

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APPENDIX II - NANDATORY

REVISED 06/30/89

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

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SECTION MI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Back)

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William I		CERTIFICATE OF COMPLIANCE
	repair or	rtify that the statements made in the report are correct and this conforms to the rules of the ASME Code, Section XI.
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	Signed	Owner or Owner's Designee, Title Date 5/1/92 19
Nices o	R,	Owner or Owner's Designee, Title D. Gillespie - Manager, Central Support
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	ZAZRAZZA	reigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of
	and state t	hat to the period 01-07-91 to 5-9-92
4	ccordance	s and taken corrective measures described in this Owner has performed with the requirements of the ADE Code, Section XI.
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I	J. O. Ellic	FACTORY MUTUAL SYSTEMS NB-9947, ARK-II33 "K" "I" Signature Metional Board, State, Province, and Endorsements The May 12 1992

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APPENDIK II - HANDATORY

REVISED 06/30/89

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

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SECTION EI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Back) .

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		CERTIFICATE OF COMPLIANCE
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100	R. D.	. Gillespie - Manager, Central Support
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NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR	REPAIRED, REPLACED,	ASME CODE STAMPED (YES OR NO)
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FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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SECTION EI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Back) .

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		CERTIFICATE OF COMPLIANCE
	repair or re	conforms to the rules of the ALMS Code, Section XI.
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nere c	R. D	. Gillespie - Manager, Central Support
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FORM NIS-2 ENG-021

APPENDIX II - HOMDATORY

REVISED 06/30/89

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

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SECTION XI - DIVISION 1

REVISED 06/30/89

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	Applicable Manufacturer's Data Reports to be Attached
	to be attached
	CENTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this
	repair or replacement conforms to the rules of the ASPE Code, Section XI.
	Time Code Combal as
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	Owner or Owner's Designee, Title
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	CERTIFICATE OF DESERVICE DESPECTION I, the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of AREANIAS and employed by the Mational Board of
	I, the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARLANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of Owner's Report Andrew Assets the Components described to
	I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State of Province of ARKANIAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed
	I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. Description and the period O1-07-91 to 5-9-92 Have inspected the components described in this land state that to the best of my knowledge and belief, the Owner has performed
	CERTIFICATE OF INSERVICE DESPECTION 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 than instinct and taken corrective measures described in this Owner has performed accordance with the requirements of the ASPE Code, Section XI.
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APPENDIX II - MANDATORY

REVISED 06/30/89

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

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Data 7/9	J. O. Elliott Mational Board, State, Province, and Endorsem-	ents
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FORM NPV-1 CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES* As Required by the Provisions of the ASME Code, Section III, Division 1 Pg. 1 of

2

1 Manufactured and certified by Control Components Inc. 22591 Avenida Empresa, Rancho Santa Margarita, CA 92688 (name and address of Certificate Holder) ENTERGY OPERATIONS, RUSSELLVILLE, ARKANSAS, 72801 2 Manufactured for (name and address of purchaser) 3 Location of installation ARKANSAS NUCLEAR ONE, RUSSELLVILLE, ARKANSAS (name and address) CRN N/A Rev. B 587751-1 Drawing 4 Model No., Serial No., or Type 100D N/A SUMER 1984 1983 5 ASME Code, Section III, Division 1: (Code Case no.) (class) (addenda data) 1.0" Outlet size 1.0" Nominal inlet size VALVE 6 Pump or Valve (in) (in) N/A Bolting Disk SA-4/9-316 SA-479-316 Bonnet Body SA-479-316 7 Material: (e) (d) (c) (b) Disk (a) Bonnet Body Nat'l Serial Serial Cert. Serial Board No. Holder's No. No No. Serial No 12034 21273 A11549 N/A RC-4 587751-1-1 12034 21273 A: 549 N/A 587751-1-2

^{*}Supplemental information in the 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.

FORM NPV-1 (Back - Pg. 2 of 2)

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)	(temperture)		
9. Cold working pressure 6000	psi at 100 Deg. F		
10 Hydrostatic test 9000	psi. Disk differential pre	ssure N/A	- 9i
11 Remarks PRESURIZER BY-F	PASS SPRAY VALVE		
	CERTIFICATE (DE DESIGN	
Design Specification certified by CHRI	STOPHER DAVENPORT	P.E. State ARKANSAS Re	
Design Report certified by		P.E. State Re	g. no.
	CERTIFICATE	OF COMPLIANCE	
			to the rules for construction
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 N Certificate of Authorization No.	2695	Expires JU	INE 7, 1994
		909	
Date 2/2/19 ZName CON	THOL COMPONENTS INC. (N Certificate Holder)	Signed (authorized rep	Township &
	CERTIFICATE	OF INSPECTION	
I, the undersigned, holding a valid of the State or Province of CALIFORN	IA and employed by HART	FORD STEAM BOILER INSPECT	ION AND INSURANCE COMPANY
WARTEORD CONNECTICAL	Y ha	ve inspected the pump, or valve,	described in this Data report on
2-22 92, and structed this pump or valve, in acc	state that to the best of r cordance with ASME Secti	ny knowledge and belief, the on III, Division 1.	Certificate Holder Has core
By signing this certificate, neither component described in this Data Re	port. Furthermore, neither	the inspector nor his employer st	hall be liable in any manner for
any personal injury or property los	ss of any kind arising from	or connected with this inspec	tion.
Date 2/22/92 Signed Lill	Com Much	Commissions C 1494	•
(Auti	norized inspector)	(Nat'l Bd. (including e	ndorsement) and state or prov and no.)

⁽¹⁾ For manually operated valves only.

FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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SECTION XI - DIVISION 1

BEVISED 06/30/89

PORM MIS-2 (Back) .

Applicable Manufacturer's Data Reports to be Attached
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CERTAGICATE OF COMPLIANCE
We certify that the statements made in the report and correct and this repair or replacement
Type Code Symbol Stamp N/A
Certificate of Authorization No. N/A Expiration Date N/A
Signed Bosileyer
Signed RD Siefer Designee, Title R. D. Gillespie - Manager, Central Support
CERTIFICATE OF DESERVICE DESPECTION .
I, the undersigned, holding a walld commission issued by the Mational Board of
ARKANSAS and employed by *ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in the and state that to the best of my knowledge and belief, the owner has performed examinations and taken corrective measures described in the
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or a loss of any kind arising from or connected with this inspection
Anspector's Signature NB-9947, ARK-T133 "N" "I" J. O. Ellicate Bational Board, State, Province, and Endorsements
Date 1992

FORM MIS-2 ENG-021

APPENDIX II - MAMDATORY

REVISED 06/30/89

FORM WIS-2 CAMER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section KI

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PLANT .	APRANSAS WOOL	EAR ONE		UNIT ONL	PERSONAL PROPERTY AND ADDRESS.		-
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NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8% in. m 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.

SECTION XI - DIVISION 1

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REVISED 06/30/89

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	Applicable Manufacturer's Data Reports to be Attached
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	CERTIFICATE OF COMPLIANCE
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ì	We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASPE Code, Section XI.
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FORM MIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section MI

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NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8% in. z 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.

SECTION EI - DIVISION 1

FORM MIS-2 (Back) .

REVISED 06/30/89

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-	K. I	D. Gillespie - Manager, Central Support
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APPENDIE II - MANDATORY

REVISED 06/30/89

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

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SECTION EI - DIVISION 1

REVISED 06/30/89

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	Applicable Manufacturer's Data Reports to be Attached
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FORM WIS-2 ENG-021

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APPENDIX II - MANDATORY

REVISED 06/30/89

FORM MIS-2 OWNER'S REPORT FOR REPLIES OR REPLACEDENTS As Required by the Provisions of the ASME Code Section XI

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FORM HIS-2 (Back) .

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•	R. D. Gillespie - Manager, Central Support
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FORM MIS-2 ENG-021

APPENDIX II - HANDATORY

REVISED 06/30/89

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

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SECTION EI - DIVISION 1

REVISED 06/30/89

PORH HIS-2 (Back) .

	Applicable Manufacture
-	Applicable Manufacturer's Data Reports to be Attached
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	CERTIFICATE OF CONFLIANCE
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Туре	Code Symbol Stamp N/A
Certi	ficate of Authorization No. H/A Empiration Date N/A
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-	Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMEERVICE INSPECTION .
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PORM NPV-1 N CERTIFICATE HOLDERS' DATA REPORT FOR NUCLEAR PUMPS OR VALVES* As Required by the Provisions of the ASME Code, Eaction III. Div. 1

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Series No.	Sorial	Registration	(d) Drawing	an world	Bd No	Built
or Type	No.	No.	No	(e) Class	80 40	
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(2) 866549	86=81A783	, assesses	B-48613	1	Caración	79.6
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(4) 0.000	88-214783	Spring	E-68613	-	Springs	198
(6) Gabe	BH-XIATEZ	April 100	E-68613	*		190
(7) Gate	PS-XIA782	AND THE PERSON NAMED IN	E-48613		enerth .	194
(8) 0406	AT-TT-2365	(Section)	E-88613		aconto	199
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7. Cold Working Pres 8. Pressure Retaining Mark No (e) Costings	p Process Mea	per at 100°F.	Manufe CONTROL NO	o QC	5.3-8 9.3	9

⁽¹⁾ For manually operated vatues only.

[&]quot;Supplemental sheets in form of lists, sketches or drawings may be used provided (1) size is 6-10³ x 1³°, (2) information in litera 1, 2 and 5 on this Data Ricport is insluded on each sheet, and (3) each sheet is numbered and number of sheets is recorded at top of this form.

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(Not'l Bd., State, Prov. and No.)

FORM WIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

1.	OWNER	APAL/EXTERST	OPERATIONS, I	ec.	DATE 5-	7-90	7	
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2.	PLANT	AREANSAS MUCL	LAP ONE		UNIT OFF	Market Market Market		
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3.	WORK PER	FORMED BY AND	L/ENTERGY OPS	INC.	TYPE CODE STHE	OL STA	JEP N/A	NO., EL
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FORM MIS-2 (Back) .

	Applicable Manufacturer's Data Reports to be Attached Devlaced 2 stude and 1 in to 1
	Applicable Manufacturer's Data Reports to
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	saint.
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	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this
	repair or replacement conforms to the rules of the ASME Code, Section XI.
	Type Code Symbol Stamp N/A
	Certificate of Authorization No. N/A Empiration Date N/A
	@ Lenn a A
	OWDER OF OWDER'S Designate Williams
enter.	R. D. Gillespie - Manager, Central Support
Market	
	CERTIFICATE OF THEFFULLOW
	CERTIFICATE OF INSERVICE INSPECTION .
	the understand bald
	t, the undersigned, holding a valid commission issued by the Mational Board of
	I, the undersigned, holding a valid commission issued by the Mational Board of Doiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKANSAS"
-	not be undersigned, helding a valid commission issued by the Mational Board of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the common of the state of of the stat
	notiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. beve inspected the components described in this and state that to the best of my knowledge and belief, the Owner, has
	notiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. bave inspected the components described in this and state that to the best of my knowledge and belief, the Owner, has
	to the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. Wher's Report during the period 01-07-91 to 5-9-92 inspected the components described in this land 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.
	in the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. Wher's Report during the period O1-07-91 to 5-9-92 to
	in the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by ARKVRIGET MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this 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 Sy signing this certificate neither the Inspector nor his employer makes any exercised or implied, concerning the examinations and is chiplied, concerning the examinations.
	NORWOOD, MASS. ARKANSAS ARKANSAS AND STATE OF THE PROPERTY
	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 ARKANSAS and employed by ARKANSAS and employed by ARKANSAS and employed by ARKANSAS. NORMOOD, MASS. bave inspected the components described in this uncer's Report during the period 01-07-91 to 5-9-92 and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ARMS Code, Section EI. By signing this certificate neither the Inspector nor his employer makes any escribed 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 of a loss of any kind arising from or connected with this interesting or property damage.
	In the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANIAS and employed by ARKANIGET MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed accordance with the requirements of the ARM Code, Section XI. By signing this certificate neither the Inspector nor his employer makes any associated in this Owner's Report. Furthermore, neither the Inspector nor his exployer shall be liable in any manner for any personal injury or property damage of a loss of any kind arising from or connected with this inspection. "FACTORY MUTUAL SYSTEMS"
The same	In the undersigned, helding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO." of NORWOOD, MASS. NEW Inspected the components described in this secrified in this and the period of the period of the components described in this owner has performed and state that to the best of my knowledge and belief, the Owner has performed accordance with the requirements of the ARMS Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any ascribed in this Owner's Report. Furthermore, neither the Inspector nor his mall over the liable in any manner for any personal injury or property damage of a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Commissions NB-9947, ARK-II33 "N" "I"
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FORM MIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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_RI	3. BOX 13	7G. RUS	SELLVILLE, AN	72801	J. O. # 0080 Repair Organis	6428	PO No. Joh	No.
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POSON R. . , Back) .

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

(MOTO)	
	CERTIFICATE OF COMPLIANCE
rep	We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section II.
Тур	e Code Symbol Stamp N/A
Cer	tificate of Authorization No. N/A Expiration Date N/A
Sig	ned KOZULL
	Owner or Owner's Designes. Title
-	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION
ī,	the undersigned, holding a walld complete to the
	the undersigned, holding a walid commission issued by the Mational Board of ler and Prosure Vessel Inspectors and the State or Province of
**************************************	NORWOOD, MASS: and employed by ARKWRIGHT MUTUAL INSURANCE CO. of have inspected the components described in thi state that to the best of my knowledge and belief, the Owner has performed
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emp.	By signing this certificate neither the Inspector nor his employer makes any ranty, empressed or implied, concerning the examinations and corrective measure cribed in this Owner's Report. Furthermore, neither the Inspector nor his loyer shall be liable in any manner for any personal injury or property damage a loss of any kind arising from or connected with this inspection.
	FACTORY MUTUAL SYSTEMS
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APPENDIX II - NAMDATORY

REVISED 06/30/89

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

	OWNER _	APAL/EXTERGY	DPERATIONS, IN	KC.	DATE 5-6	-92		
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NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8% in. m 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.

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	serialized.
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	CERTIFICATE OF COMPLIANCE
	Ne certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.
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	Certificate of Authorization No. N/A Expiration Date N/A
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	O'mer er Owner's Designee, Title Date 7/17/97 . 19
	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMMERVICE INSPECTION
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1 10 4 8	NORWOOD, MASS: NORWOOD, MASS: have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed
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APPENDIX II - MANDATORY

REVISED 06/30/89

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

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FORM MIS-2 (Back)

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

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	CERTIFICATE OF COMPLIANCE
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Type Code	Symbol Stamp N/A
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	CERTIFICATE OF IMEERVICE INSPECTION
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NO.	RUDOD WASS
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APPENDIX II - MANDATORY

REVISED 06/30/89

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SECTION XI - DIVISION 1

FORM MIS-2 (Back) .

REVISED 06/30/89

REPORTS NA 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 or replecement conforms to the rules of the ASPE Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Empiration Date N/A signed Rd Gilley Date 5/1/92 . 19_ Owner er Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the Maticaal Board of Boiler and Pressure Vessel Inspectors and the State or Province of AREANSAS

and emplo-14 by AREWRIGHT MUTUAL INSURANCE CO. of

NORWOOD, MASS.

h. 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, empressed 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 Inspector's Signature Commissions NB-9947, ARK-I133 "N" "I"
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FORM NIS-2 CHACK'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

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SECTION XI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Back) .

	Applicable Manufacturer's Data Reports to be Attached

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	CERTIFICATE OF COMPLIANCE
repeir or	conforms to the rules of the ASPE Code, Section XI.
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K.	D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION
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APPENDIX II - MANDATORY

REVISED 06/30/89

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

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SECTION XI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Back)

	Applicable Manufacturer's Data Reports to be Attached
	. Data Reports to be Attached

WHO	
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	CERTIFICATE OF COMPLIANCE
rej	We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.
Typ	Code Symbol Stemp K/A
Ces	ificate of Authorization No. N/A Expiration Date N/A
	Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION .
Own and exas	the undersigned, holding a valid cremission issued by the Mational Board of Frank Pressure Vessel Inspectors and the State or Province of ANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in the state that to the best of my knowledge and belief, the Owner has performed that the the taken corrective measures described in this Owner's Report in Sance with the requirements of the ASME Code, Section EI.
descies or a	By signing this certificate meither the Inspector nor his employer makes any inty, expressed or implied, concerning the examinations and corrective measury yer shall be liable in any manner for any personal injury or property dimage loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Commissions NB-9947, ARK-I133 "N" "I" Mational Board, State, Province, and Endorsement
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FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

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Superior Bechtel NA NA BCB-1-DH-11 1968 Quaired Mo-	IDENTIFI	CATION OF COM	ON OF SECTION POMENTS REPAIR MANUFACTURES	MI UTILI MED OR RE MATIONAL BOARD	ZED FOR REPAIRS PLACED AND REPL OTHER	GR RE	T COMPONENTS REPAIRED, REPLACED, OR	ASME CODE STANDE (TES
signment Questel NA NA BCB-1-DH-13 V968 Quaised No	IDENTIFIED NAME OF COMPONENT	NAME OF HANUFACTURER	ON OF SECTION PONENTS REPAIR MANUFACTURER SERIAL BO.	MATIONAL BOARD	PLACED AND REPL OTHER IDENTIFICATION	ACEPEN TEAR BUILT	PLACEMENTS 1 T COMPONENTS REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPE (TES OR MO)
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MA NA GC3-1-04-16 1968 Renaired no	IDENTIFIED NAME OF COMPONENT	NAME OF HANUFACTURER Buchtel Buchtel	MANUFACTURER SERIAL SO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION GC8-3-H-1 GC8-1-DH-11	TEAR BUILT	PLACEMENTS 1 T COMPONENTS REPLACED, OR REPLACEMENT Agranied Agranied	ASME CODE STANDE (TES OR NO)
sypart Bestel NA NA DH-306 1968 Repaired No	IDENTIFIE NAME OF COMPONENT LANGUAGE LANGUA	NAME OF HANUFACTURER Buchtel Buchtel	MANUFACTURER SERIAL SO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION GCB-1-DH-11 GCB-1-DH-13	TEAR BUILT	REPAIRED, EFFLACED, OR REPLACEMENT	ASME CODE STANDE (TES OR NO)

POF 228-2 (Back) .

9.	REKARKS 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 or replacement conforms to the rules of the ASME Code, Section XI.
	Type Code Symbol Stamp N/A
	Signed Roull Date N/A Signed Roull Designee, Title
Tableson.	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMPERVICE IMPRECTION
	I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by Arkansas
	NORHOOD, MASS. bave inspected the components described in this and state that to the period 01-07-91 to 5-9-92
	the requirements of the ASME Code, Section XI.
b	By signing this curtificate neither the Inspector nor his employer makes any excribed in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any nevertal the Inspector nor his
0	r a loss of any kind arising from or connected with this inopection.
Di	Despector's Signature NB-9947, ARK-II33 "N" "I" Mational Board, State, Province, and Endorsements Mational Board, State, Province, and Endorsements Mational Board, State, Province, and Endorsements
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NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPE (YES OR NO)
Suggest	Buttel	NA	NA	DH-91	1968	Regaried	14
Lugart	Bechtel	NA	NA	DH-92	1968	Resaired	10
asignoment Luggart	Bechtel	NA	NA	GCB-1- H30	1968	Quaired	14
supposent supposent	Bechtel	NA	NA	GCB-1-432	1968	Quaired	no
Current	Buchtel	NA	NA	DH-305	1968	agravied	no
Luyeort	Dechtel	NA	NA	6CB-1- H31		1	no
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AFPENDIX II - MANDATORY

REVISED 06/30/89

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

	APEL/ENTERGY	OPERATIONS, I	MC.	DATE 6-	12-9		
-RT. 1.	BOX 137 G. B	DSSELLVILLE.	AR. 72801	SHEET	/	_ of	/
2. PLANT _	ARKANSAS MUCL	EAR ONE	-	UNIT ONE			
RT. 3.	BOX 137G. RU	SELLVILLE. AS	72801	J.O. # 00 8 Repair Organia	239	148 ·· .	
. WORK PE	REPORTED BY API	AL/ENTERGY OPS	L. LUC.	TYPE CODE STHE	OL ST	NO N/A	NO., et
RT 3,	Box 137G, RUSS	SELLVILLE, AR.	72801	ATCHORIZATION DAY			
. IDENTIF	CATION OF STS	TO Serv	ice ava	ter ter			***************************************
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THE RESERVE AND ADDRESS OF THE PARTY OF THE		Andreas S. M. W. W. T.	KLED ON RE	PLACED AND REPL	y CEDADA	T COMPLAINTS	
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURES	MATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR	REPAIRED,	ASME CODE STAMPES (YES
NAME OF COMPONENT	NAME OF	MANUFACTURER	MATIONAL BOARD MO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPET (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	MATIONAL BOARD MO.	OTHER	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPES (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	MATIONAL BOARD MO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPET (YES OR NO)
NAME OF COMPONENT	NAME OF HANUFACTURER	NATUFACTURER SERIAL NO.	MATIONAL BOARD MO.	OTHER IDENTIFICATION HB8-3-H3	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPET (YES OR NO)
NAME OF COMPONENT Component Suprent DESCRIPT	MAME OF MANUFACTURER Bucktel ION OF WORK	MARITACTURER SERIAL NO. NA Madelia	MATIONAL BOARD MO.	OTHER IDENTIFICATION HB8-3-H3	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPED (YES OR NO)
NAME OF COMPONENT Component Component Component DESCRIPT	MAME OF MANUFACTURER Buckful ION OF MORK	MACRUFACTURER SERIAL NO. NA Madelia	MATIONAL BOARD NO.	OTHER IDENTIFICATION HBB-3-H3	TEAR BUILT	REPAIRED, OR REPLACEDONT	ASME CODE STAMPED (YES OR NO)
DESCRIPT TESTS CO	NAME OF MANUFACTURER Bucktel ION OF WORK NDUCTED: HYDR OTHE	Madelia Costatic D RESS	Suura PRETRIA URE //	OTHER IDENTIFICATION HB8-3-H3	TEAR BUILT	REPAIRED, BEPLACED, OR REPLACEMENT Quantit RATING PRESS P. NA	ASME CODE STAMPET (YES OR NO)

SECTION EI - DIVISION 1

FORM MIS-2 (Back) .

REVISED 06/30/89

	RDURS 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 or replacement conforms to the rules of the ASSE Code, Section XI.
	Type Code Symbol Stamp N/A
	Certificate of Aughorisation No. N/A Expiration Date N/A
	signed / O Self
	THE PARTY OF THE P
-	R. D. Gi? Manager, Central Support
	CERTIFICATE OF THOSPHOTO OR TO LAND
- 1	CERTIFICATE OF IMSERVICE INSPECTION .
1	, the undersioned halden a make
-	the undersigned, holding a valid commission of d by the National Board of ARKANSAS and employed by ARKANSAS
	the undersigned, holding a valid commission ' d by the National Board of ARKANSAS and employed by *ARKWRIGHT MUTUAL INSURANCE CO. of
10 8	the undersigned, holding a valid commission 'and d by the National Board of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD. MASS. have inspected the components described in this and state that to the beriod 01-07-91 to 5-9-92
10 8 8	the undersigned, holding a valid commission of the Mational Board of ARKANSAS and employed by ARKANSAS and employed by ARKANSGH MUTUAL INSURANCE CO. of NORWOOD, MASS. NORWOOD, MASS. Neve inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed
10 8 8 9	the undersigned, holding a valid commission 'and d by the National Board of ARKANSAS and employed by 'ARKANIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. Wher's Report during the period 01-07-91 to 5-9-92 Indicate that to the best of my knowledge and belief, the Owner has performed aminations and taken corrective measures described in this Owner's Report in Secondance with the requirements of the ASME Code, Section XI.
0.6 0.801	the undersigned, holding a valid commission 'and d by the Mational Board of ARKANSAS and employed by "ARKANIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. NORWOO
	the undersigned, holding a valid commission 'and d by the Mational Board of ARKANSAS and employed by 'ARKANIGHI MUTUAL INSURANCE CO. of NORWOOD, MASS. NORWOOD, MASS. NORWOOD the period O1-07-91 to 5-9-92 Wher's Report during the period O1-07-91 to 5-9-92 Examinations and taken corrective measures described in this Owner's Report in a secondance with the requirements of the ASME Code, Section XI. By signing this certificate meither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any escribed in this Owner's Report.
	coiler and Pressure Vessel Inspectors and the components of Province of ARLANSAS and employed by "ARRANIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this 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 the requirements of the ASPE Code, Section XI. By signing this certificate neither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer shell be liable in any manner for any personal injury or property design of a loss of any kind arising from or connected with this inspector nor his inspector.
- 10 8 8 8 9 9	coordance with the requirements of the ASME Code, Section XI. By signing this certificate meither the Inspector nor his employer makes any escribed in this Owner's Report to the requirements of the ASME Code, Section XI. By signing this certificate meither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer measures escribed in this Owner's Report. By signing this certificate meither the Inspector nor his employer makes any escribed in this Owner's Report. By signing this certificate meither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any escribed in this Owner's Report. FACTORY MUTUAL SYSTEMS
	coiler and Pressure Vessel Inspectors and the components of Province of ARKANSAS and employed by ARKANSGET MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this indistate that to the best of my knowledge and belief, the Owner has performed reminations and taken corrective measures described in this Owner's Report in Sy signing this certificate neither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, neither the Inspector nor his employer shell be liable in any manner for any personal injury or property decayer a loss of any kind arising from or connected with the property decayer.

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APPENDIX II - HANDATORY

REVISED 06/30/89

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

1. OWNER	APEL/ENTERGY	OPERATIONS, I	NC.	DATE	1-19	7-90	THE RESERVE OF THE PERSON NAMED IN
RT. 3	BOX 137 G. R	USSFLLVILLE, Address	AR. 72801	SHEET	/	of	
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. WORK PE	REFORMED BY AR	L/ENTERGY OF	S. INC.	TYPE CODE SYM			NO., 6
RT. 3,	Box 137G, RUS	SELLVILLE, AR.	72801	AUTHORIZATION			t Armen et anna hit ann harry an
	ICATION OF STS	odress		EXPIRATION DAY	TE	- K/A	***************************************
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,	AMERICAN OF COL	LONGENTS EXPE	RED OR RE	PLACED AND REPL	A CEPTON	T COMPONENTS	- I STATE OF THE S
NAMT OF COMPONENT	NAME OF MANUFACTURES	KANUFACTURER	MATIONAL BOARD NO.		TEAR	REPAIRED, BUPLACED	ASME CODE STAMPI
NAME OF COMPONENT	NAME OF MANUFACTURES	KANUFACTURER	MATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP! (YES OR NO)
NAME OF COMPONENT COMPONENT Component Supponent	NAME OF MANUFACTURES	MANUFACTURER SERIAL NO.	MATIONAL BOARD NO.	OTHER	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPI (YES OR NO)
NAME OF COMPONENT COMPONENT Component Supponent	NAME OF MANUFACTURES	KANUTACTURER SERIAL BO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPI (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURES	KANUTACTURER SERIAL BO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPI (YES OR MO)

SECTION EI - DIVISION 1

FGOM HIS-2 (Back)

REVISED 06/30/89

	RDARKS 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 of splacement conforms to the rules of the ASPE Code, Section XI.
	Type Code Symbol Stamp N/A
	Certificate of Authorization No. W/A
	Signed RO Sell MA
Pintal Maria	Signed AD Super or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE DESPECTION
	I, the undersigned, holding a valid commission issued by the Mational Board of
	NORWOOD, MASS. here inspected the components described in this and state that
	actordance with the requirements of the ASME Code, Section NI.
	By signing this certificate neither the Inspector nor his employer makes any varranty, expressed or implied, concerning the axaminations and corrective measures 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.
D	Inspector's Fignature J. O. Elliott May /2 1992 FACTORY MUTUAL SYSTEMS NB-9947, ARK-II33 "N" "I" Bational Board, State, Province, and Endorsements

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

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		ddress	AR. 72801	SMEET	_	_ of	3
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endhilalandahadi)	DX 137G. RUS	SELLVILLE, AS	72801	J.O. *00825700 Repair Organis	6, 808	1840340082 PO Mo Joh	233/
. WORK PERFO	RMED BY APE	L/ESTERGY OPS	INC.	TYPE CODE STOR	OL STA	AVP H/A	NO., e
RT. 3, Box	137G, RUSS	ELLVILLE, AR.	72801	AUTHORIZATION DAT	мо	N/A	
	TION OF SIS	THE MAKE	Us an	d KTERRY T	Vont		
(b) APPLI	CABLE EDITIO	ON OF SECTION	EI UTILI	19 63 EDIT	OR RE	PLACEDEDITS 1	9 86
	THE RESERVE THE PARTY OF THE PA	PERSONAL PROPERTY AND ADDRESS OF THE PERSONS	CONTRACTOR OF THE PERSON NAMED IN			1 COMPONENTS	
havenen t	NAME OF ANUFACTURER	MAMUFACTURER SERIAL NO.	THE RESERVE OF THE PARTY OF THE	OTHER IDENTIFICATION	TEAR	REPAIRED,	ASME CODE STAMP!
COMPONENT M	NAME OF ANUFACTURER Bechtel	NAMUFA CPTTO ES	HATTONAL BOARD	OTHER IDENTIFICATION	TEAR SUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP (YES OR NO
component Mi	NAME OF ANUFACTURER Bechtel Bechtel	MANUFACTURER SERIAL NO.	MATIONAL BOARD MO.	OTHER IDENTIFICATION DH-209	TEAR SUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP (YES OR NO
empenent lamonent lam	NAME OF ANUFACTURER Bechtel Bechtel Buchtel	MANUFACTURER SERIAL BO.	MATIONAL BOARD MO.	OTHER IDENTIFICATION DH-209 #C8-2-H4	TEAR SUILT	REPLICED, OR REPLACEDIENT Agravied Agravied	ASME CODE STAMP (TES OF NO
component warenest appearent appeare	NAME OF ANUFACTURER Bechtel Bechtel	MAMUFACTURER SERIAL BO.	NATIONAL BOARD NO. NA	OTHER IDENTIFICATION DH-209 #C8-2-H4	TEAR SUILT 1968 1968	REPLICED, DR REPLACEDIENT Replaced Replaced Replaced Replaced Replaced	ASME CODE STAMP! (YES OR NO)

SECTION XI - DIVISION 1

REVISED 06/30/89

FORM HIS-2 (Back)

	Applicable Kanufacturani
	Applicable Manufacturer's Data Reports to be Attached
	CERTIFICATE OF COMPLIANCE
	Me certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the LSME Code, Section XI.
	Type Code Symbol Stamp W/A
	Certificate of Authorization No. N/A Expiration Date N/A
-	Signed RD Sign
	Owner or Owner's Designed Date 5/11/92
-	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMPERVICE INSPECTION
200 000	to the undersigned, holding a valid commission issued by the Mational Board of ARKANSAS and employed by the Mational Board of
	ARKANSAS and employed by ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed Examinations and taken corrective measures described in the components.
8 8	the requirements of the ASPA Code, Section XI.
2 44	By signing this certificate neither the Inspector nor his employer makes any arranty, expressed or implied, concerning the exeminations and corrective measures escribed in this Owner's Report. Furthermore, neither the Inspector nor his exployer shall be liable in any manner for any personal life Inspector nor his
64	
2	FACTORY MUTUAL SYSTEMS
2	a loss of any kind arising from or connected with the

2.00 0000	25706,0081	04694000*	# 3 3 L		-	Page 2 of	A THE REAL PROPERTY.
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	YEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMPE (YES OR NO)
emponent	Buchtel	NA	NA	DH-214	1/0/ 9	Peraried	No
lignorst augronant	Bichtel	NA					The
autonent	Bechtel		NA	DH-205		Resaired	
expert amount		NA NA	NA	DH-146		agrained	115
Current	Buttel	NA	NA	DH-147	1968	Agrained	11/4
lygrant	Bechtel	I NA	NA	DH-210	1968	Agrained	No
Sugrant	Bechtel	NA	NA	HCD-15-H3	V968	agraised	No
Lugarent	Bechtel	NA	NA	HCB-2-H21	1968	Quaired	Mr
Lugrant	Buhtel	NA	NA	GCB-2-H2	V968	agrained	10
Suggest	Bechtel	NA	NA	DH-138	1968	Deraired	Mr
Suprait	Bechtel	NA	NA	DH-121		Deraired	
Sugrant	Bechtel	NA	NA	DH-54		Quaired	1
component	Bechtel	NA	NA	GC8-4-HI7		Derained	1
Supronent Solyronent	Bechtel	NA	I NA	DH-107		Quaired	Mr
Supponent Component	Bechtel					160 .	
Surponent,	The second secon	NA NA	NA	DH-51		Seraired	1
Supronent	Bechtel	NA	NA	DH-125	1968	The	1
Suprant	Bechtel	NA	NA	DH-53	1968	agrained	No
Surrent	Bechtel	NA	NA	DH-251	1968	Repaired	10
Surrout	Bechtel	NA	NA	DH-117	1968	agrained	10
Lyrant	Bechtel	NA	NA	DH-56	V968	Quaired	10
Coffeenent	Bechtel	NA	INA	1608-4-418	1968	1 .	No
Supranent	Bechtel	NA	NA	DH-130	1968	16.	
Suprort	Bechtel	NA	NA	DH-252	1968	16	
Egyponent	Bechtel	NA	NA	DH-122	1960	1 1	
Eggenenent	Bechtel	NA				1 4	
Supronent Suprort	Buchtel	NA	NA	DH-133	V962	8 Agraires	

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

	ER APEL/ENTERGY	OPERATIONS. I	ec.	DATE 4-	8-90	<	
_RI	. 3. BOX 137 G. B	USSFLLVILLE.	AR, 72801	DOXT	_	_ of	/
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SECTION EI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Back) .

	Applicable Manufacturer's Data Reports to be Attached Value serial number days ust with
	Applicable Manufacturer's Data Reports to be Attached
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	CERTIFICATE OF COMPLIANCE
	repair or replacement
	Type Code Symbol Stamp N/A
	A STATE OF THE PARTY OF THE PAR
	Certificate of Authorization No. N/A Expiration Date N/A
	Signed Addillar Designee, Title R. D. Gillespie - Manager, Central Support
erona,	R. D. Gillespie - Manager, Central Support
Money	TOTAL SUPPORT
	CERTIFICATE OF IMSERVICE IMSPECTION .
1	I, the understand halding a make
	I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANIAS
1	ARRANSAS and employed by "ARRANSIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that to the best of my moviedge and belief, the Owner has performed examinations and taken corrective measures described in this
-	and state that to the best of the period 01-07-91 to 5-9-92
4	examinations and taken corrective measures described in this Owner has performed accordance with the requirements of the ASSE Code.
4	accordance with the requirements of the ASME Code, Section XI.
	By signing this cartificate and
A 40	erranty, expressed or implied, concerning the examinations and corrective measures
幣	imployer shall be lights in any
0	employer shell 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.
Q	FACTORY MUTUAL SYSTEMS
Ī	DEPECTOR'S SIGNATURE COMMISSIONS NE-9947, ARK-II33 "N" "I"
	J. O. Elliott May 12 1992
B	a to a

FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

	OWNER .	APEL/ENTERGY	OPERATIONS, I	INC.	DATE 5-	7-9)	/	
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SECTION XI - DIVISION 1

PORM MIS-2 (Back) .

SEVISED 06/30/89

REMARKS N/A Applicable Manufecturer's Data Reports to be Attached CERTIFICATE OF COMPLIANCE We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASSE Code, Section XI. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A Signed Date 7/2 . 1992 Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF IMPERVICE INSPECTION I, the undersigned, holding a walld commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. NORWOOD, MASS. NORWOOD, MASS.

have inspected the components described in this 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 II. By signing this certificate meither the Inspector nor his employer makes any varranty, empressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shell 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 Inspector's Signature Commissions NB-9947, ARK-II33 "N" "I"

Mational Board, State, Province, and Endorsements J. O. Elliott 7/2 1992

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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PORM MIS-2 (Back)

	REMARKSN/A
	Applicable Manufacturer's Data Reports to be attached
NAME OF THE OWNER, OWNE	
	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASME Code, Section XI.
	Type Code Symbol Stamp N/A
	Certificate of Authorization No. N/A Excitation Date N/A
	Signed Rosillus Bate S/11/2
ecs	Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF DESERVICE DESPECTIONS
	* ***
The state of the s	I, the undersigned, holding a walid commission issued by the Mational Board of
3	I, the undersigned, holding a valid commission issued by the Mational Board of ARIANSAS and employed by *ARKWRIGHT MUTUAL INSURANCE CO.
1	I, the undersigned, holding a valid commission issued by the Mational Board of Golder and Pressure Vessel Inspectors and the State or Province of ARIANSAS and employed by *ARKWRIGHT MUTUAL INSURANCE CO. of Owner's Report during the period 01-07-91 to 5-9-97
	I, the undersigned, holding a valid commission issued by the Mational Board of Soiler and Pressure Vessel Inspectors and the State or Province of AREANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed examinations and taken to the best of my knowledge and belief, the Owner has performed
	I, the undersigned, holding a valid commission issued by the Estional Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARIANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. bave inspected the components described in this 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 Secondance with the requirements of the ASME Code, Section NI.
	I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. bave inspected the components described in this 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 By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report in the service of the ASME Code, Section NI.
	I, the undersigned, holding a valid commission issued by the Mational Board of Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this 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 Sy signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any 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.
	I, the undersigned, holding a valid commission issued by the Mational Board of Board and Pressure Vessel Inspectors and the State or Province of ARIANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this 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 By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any

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

. OWNER	APAL/DITERGY	OPERATIONS, IN	NC.	DATE 5-	8-90		Maria angles o mentales de la constante de la
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SECTION EI - DIVISION 1

FORM MIS-2 (Back) .

REVISED 06/30/89

- Million	Applicable Manufacturer's Data Reports to be Attached

	CERTIFICATE OF COMPLIANCE
repa	We certify that the statements made in the report are correct and this conforms to the rules of the ASME Code, Section XI.
Type	Code Symbol Stamp N/A
Cert	ificate of Authorisation No. N/A Expiration Date N/A
	Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION .
I, th Boile ARE	r and Pressure Vessel Inspectors and the State by the Mational Board of
owner and s	's Report during the period 01-07-91 to 5-9-92
****	dance with the requirements of the ASME Code, Section EI.
employ or a	By signing this certificate neither the Inspector nor his employer makes any nty, empressed or implied, concerning the examinations and corrective measure ibed in this Owner's Report. Furthermore, neither the Inspector nor his yer shall be liable in any manner for any personal injury or property decape loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS THE STATE OF T
T. 0	Elliott May 12 1992

APPENDIX II - HANDATORY

REVISED 06/30/89

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

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FORM HIS-2 (Back) .

REVISED 06/30/89

REMARKS	N/A
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	CERTIFICATE OF COMPLIANCE
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R.	Owner or Owner's Designee, Title D. Gillespie - Manager, Central Support
R	Manager, Central Support
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I, the under and AREANSAS NORWOODER'S Regard state to examination	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of bave inspected the components described in this that to the best of my knowledge and belief, the Owner has performed.
I, the under and AREANSAS NORWART'S Regard state texamination	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of bave inspected the components described in this that to the best of my knowledge and belief, the Owner has performed.
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I, the under some sold arkansas NORN Owner's Regard state to examination accordance	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of have inspected the components described in this cort during the period 01-07-91 to 5-7-92 that to the best of my Encwledge and belief, the Owner has performed as and taken corrective measures described in this Owner's Report in with the requirements of the ASME Code, Section MI.
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I, the under and AREANSAS NORWART'S Re; and state to examination accordance By signer and secondance accordance accordan	CERTIFICATE OF IMSERVICE INSPECTION Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of bave inspected the components described in this cort during the period 01-07-91 to 5-7-92 that to the best of my knowledge and belief, the Owner has performed with the requirements of the ASME Code, Section EI. Fining this certificate neither the Inspector nor his employer makes any an this Owner's Report. Furthermore, neither the Inspector nor his
I, the under sold areas and state to examination accordance By signature described is employer short a loss of the sold areas and the sold areas area	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of have inspected the components described in this corrective measures described in this Owner has performed with the requirements of the ASKE Code. Section XI. pring this certificate neither the Inspector nor his employer makes any in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any in this Owner's Report. Furthermore, neither the Inspector nor his is any manner for any personal injury or property demage any kind arising from or connected with this inspection.
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APPENDIX II - MANDATORY

REVISED 06/30/89

FORM WIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEDURTS As Required by the Provisions of the ASPE Code Section XI

	OWNER _	APEL/ENTERGY	PERATIONS. II	HC.	MT 5-7	- 9/		
	RT. 3.	BOX 137 G. R	SSELLVILLE,	AR. 72801	SHEET		_ of	
2.	PLANT	AREANSAS NUCLI	AR ONE		UNIT ONE		Address of the Addres	,
	RT. 3.	BOX 137G, RUS	SELLVILLE, Al	72801	J.O. # 00 8. Repair Organia	28 2.	06 PO No., Job	No. et
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REVISED 06/30/89

PORM MIS-2 (Back) .

Applicable Manufacturer's Data Reports to be Attached	
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	AND THE REAL PROPERTY.
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CERTIFICATE OF COMPLIANCE	THE PLANE WHEN
We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASSE Code, Section XI.	
Type Code Symbol Stamp N/A	
Certificate of Authorization No. N/A Expiration Date N/A	
Owner or Owner's Designate Williams	9
R. D. Gillespie - Manager, Central Support	
CERTIFICATE OF DESERVICE INSPECTION	***************************************
I, the undersigned, helding a valid commission issued by the Mational Board of ARKANSAS	
NORWOOD, MASS. have inspected the components described in and state that to the best of my knowledge and belief, the Owner has performed	this
the requirements of the ASPE Code, Section XI.	
By signing this certificate neither the Inspector nor his employer makes and 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 damages of any kind arising from or connected with this increase.	
Commissions NB-9947, ARK-T133 "N" nTN	
Inspector's Signature NE-9947, ARK-I133 "N" "I" Mational Board, State, Province, and Endorsesse Date May 12 1992	nts

FORM NIS-2 ENG-021

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APPENDIX II - NANDATORY

REVISED 06/30/89

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

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FORM MIS-2 (Back)

REVISED 06/30/89

REMARKS N/A Applicable Manufacturer's Data Reports to k Littached CERTIFICATE OF COMPLIANCE We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASPE Code, Section II. Type Code Symbol Stamp N/A Certificate of Authorization No. N/A Expiration Date N/A signed Rd Sellinger Date ___ 57/1/52 . 19_ Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support CERTIFICATE OF IMPERVICE IMPRECTION I, the undersigned, holding a valid commission issued by the Mational Board of Soiler and Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS.

have inspected the components described in this 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 NI. By signing this certificate neither the Inspector nor his employer makes any varranty, 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 Inspector's Signature Commissions NE-9947, ARK-I133 "N" "I"

Mational Board, State, Province, and Endorsements J. O. Elliott may 12 1992

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

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REVISED 06/30/89

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R.	D. Gillespie - Manager, Central Support
	CERTIFICATE OF INSERVICE DESPECTION .
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Owner's Repo	op. Mass. bave inspected the components described in this of during the period 01-07-91
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employer sha	ing this certificate meither the Inspector nor his amployer makes any pressed or implied, concerning the examinations and corrective measures this Owner's Report. Furthermore, neither the Inspector nor his any manner for any personal injury or property damage any kind arising from or connected with this inspection. "FACTORY MUTUAL SYSTEMS
7 0	FACTORY MUTUAL SYSTEMS NE-9947, ARK-I133 "N" "I" Estional Board, State, Province, and Endorsements may 12 1992

FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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FORM MIS-2 (Back)

	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 of replacement conforms to the rules of the ASSE Code, Section XI.
	. sperr or replacement
	Type Code Symbol Stamp K/A
	Certificate of Authorization No. N/A Expiration Date N/A
	Signed Kallespie Monter's Designee, Title R. D. Gillespie - Monter's Designee, Title
	Dete 5/11/97 10
	R. D. Gillespie - Managar Cantal
	R. D. Gillespie - Manager, Central Support
	Tanager, Central Support
	CENTIFICATE OF INSERVICE INSPECTION
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	CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of
	I, the undersigned, holding a valid commission issued by the National Board of ARKANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO.
	I, the undersigned, holding a valid commission issued by the National Board of ARKANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO.
	CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Board of Roiler and Pressure Vessel Inspectors and the State or Province of ARRANSAS and employed by "ARRANSIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that to the best of my mocwledge and belief, the Owner has performed
	CERTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the National Soard of Roiler and Pressure Vessel Inspectors and the State or Province of ARRANSAS and employed by "ARRANSIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed
	CENTIFICATE OF INSERVICE INSPECTION I, the undersigned, holding a valid commission issued by the Mational 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 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.
	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 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 Sy signing this continued of the ASME Code, Section XI.
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The company of the co	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 have inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed accordance with the requirements of the ASME Code, Section NI. By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, neither the Inspector nor his employer shell be liable in any manner for any personal injury or property demage for a loss of any kind arising from or commetted with this inspection. NB-9947, ARK-II33 "N" "I"
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FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions 22 the ASME Code Section XI

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REVISED 06/30/89

POSH HIS-2 (Back) .

	RDORS NA
	Applicable Manufacturer's Data Reports to be Attached
Marry 18	CERTIFICATE OF COMPLIANCE
ř	We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.
	ype Code Symbol Stamp N/A
S	igned A Sillus Bo. N/A Empiration Date N/A Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
I, Be	the undersigned, holding a valid commission issued by the Mational Board of ARKANSAS and employed by the State or Province of
040	NORWOOD, MASS. NORWOOD, MASS. have inspected the components described in this of state that to the best of my knowledge and belief, the Owner has performed saminations and taken corrective measures described in this owner's Report in cordance with the requirements of the ASNE Code, Section XI.
de em	By signing this certificate neither the Inspector nor his employer makes any cranty, empressed or implied, concerning the examinations and corrective measures scribed in this Owner's Report. Furthermore, neither the Inspector nor his player shell be liable in any manner for any personal injury or property damage a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Commissions NE-9947, ARK-II's "N" nrn
	O. Elliott may/2 1992

APPENDIX II - HANDATORY

REVISED 06/30/89

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

COMPONENT MANUFACTURER SERIAL NO. BOARD DENTIFICATION BUILT OR REPLACED OR NO. STAMP	OWNER	APAL/EXTERGY	OPERATIONS, I	NC.	DATE 4-/	7-9/	The species of the second	Market Market
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NOTE: Supplemental sheets in form of lists, sketches, or drawings may be used, provided included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

PORN HIS-2 (Back)

	Applicable Kanuracturer's Data Reports to be Attached
-	The state of the s
	CERTIFICATE OF COMPLIANCE
	Tepsir or replacement
	Type Code Symbol Stamp N/A
	Certificate of Authorization No. 2/4
	Over or Owner's Dead 5/1/91
Person	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMPERVICE IMPRECTION .
	I, the undersigned, helding a valid commission issued by the Mational Board of ARKANSAS and employed by *ARVANIANT Province of
	NORWOOD, MASS. have inspected the components described in this and state that
	accordance with the requirements of the ASME Code, Section XI.
-	By signing this certificate neither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, peither the Inspector nor his employer makes any described in this Owner's Report. Furthermore, peither the Inspector and corrective measures
1.3	described in this Owner's Report. Furthermore, neither the Inspector no- 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.
2	FACTORY MUTUAL SYSTEMS
12	Inspector's Signature Commissions NB-9947, ARK-II33 "N" "I" Hational Board, State, Province, and Endorsements
	J. O. Elliott may 12 1992
1	May. 12 18 92

FORM MIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

	_AFAL/ENTERGY	OPERATIONS.)	INC.	DATE 3-	3/-	92	
_RT3	. BOX 137 G. F	USSELLVILLE, Address	AR. 72801	SPEET		of	/
. PLANT	ARRANSAS WOOL	EAR ONE		CRITT ONE	Market House, Spinson,		
87. 3	. BOX 1376. RU	SSELLVILLE, A	R. 72801	J.O. # 008	3665 Mt.lon	56	- No
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FORM MIS-2 (Back) .

REVISED 06/30/89

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		CERTIFICATE OF COMPLIANCE
	repair or r	conforms to the rules of the ASPE Code, Section XI.
	Type Code S	ymbol Stamp W/A
		of Authorization No. N/A Expiration Date N/A
	Signed R	Calle Expiration Date MA
	- carolinals	Wher or Owner's Designee, Title Date 5/1/97 . 19
***	R.	D. Gillespie - Manager, Central Support
		CERTIFICATE OF IMSERVICE INSPECTION
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1	AREAMSAS	ressure Vessel Inspectors and the State or Province of
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4	eccoldance A	ith the requirements of the ASRE Code, Section NI.
ě	By sign	ing this certificate meither the Inspector nor his employer makes any
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0	Y	And the same of th
d	inspector's	Commissions NE-9947, ARK-1133 "N" NTR
a		Metional Board, State Province and Vada-
	J. O. Ellion	may 12 19 92

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

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REVISED 06/30/89

PORM MIS-2 (Back) .

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	Applicable Manufacturer's Data Reports to be Attached

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Marian Marian	
	CERTIFICATE OF COMPLIANCE
repa	We certify that the statements made in the report are correct and this conforms to the rules of the LSME Code, Section KI.
Тура	Code Symbol Stamp N/A
	ificate of Authorization No. H/A Expiration Date H/A
Sign	
	WW MARKE OF CHUTCHEF'S THE STATE OF A STATE OF THE STATE
	R. D. Gillespie - Manager, Central Support
	CERTIFICA OF THE PROPERTY OF
Y +1	CERTIFICATE OF IMSERVICE INSPECTION
Boile	r and Pressure Vessel Inspectors and the State or Province of
Owner and	NORWOOD, MASS. have coected the components described in this tate that to the best of my knowledge and belief, the Owner has performed nations and taken corrective measures described in the owner has performed
exami	nations and taken corrective measures described in this Owner's Report in
	mark code, section al.
erra	By signing this certificate neither the Inspector nor his employer makes any ibed in this Constitute oncerning the examinations and corrective measure.
erra lescr mplo	By signing this certificate neither the Inspector nor his employer makes any nty, expressed or implied, concerning the examinations and corrective measures the interest of the limit owner's Report. Furthermore, neither the Inspector nor his loss of any kind arising from or connected with this inspection.
varra descr ample or a	By signing this certificate neither the Inspector nor his employer makes any nty, expressed or implied, concerning the axaminations and corrective measures just the interpretation of the inspector nor his loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Commissions NS-9947, ARK-F133 "N" "IR
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FORM WIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS :

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FORM HIS-2 (Back)

REVISED 06/30/89

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***********	THE RESERVE AND ADDRESS OF THE PARTY AND ADDRE	
		CERTIFICATE OF COMPLIANCE
	We cer	tify that the accessory
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		· Production .
	Type Code 8	ymbol Stamp N/A
	Certificate	of Authorization No. N/A Empiration Date N/A
		Expiration Date N/A
	(Owner or Owner's Designee, Title Date 5/11/97 . 19
PERMIT	R.	D. Gillespie - Manager, Central Support
TAXABLE IN		Thanager, Central Support
		CERTIFICATE OF IMEERVICE INSPECTION
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	UWINEF'S BREA	no A
	mercen mrmre cu	At the the bear of
	exeminations	at to the best of my knowledge and belief, the Owner has performed and taken corrective measures described in this Owner's Report in
	eccoldence A	ith the requirements of the ASME Code, Section XI.
	Des - 1	mana, section XI.
	my sign	ing this certificate meither the Inspector nor his employer makes any
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1	napector's S	Egnature Bational Board, State, Province, and Endorsements
B	J. O. Elliot	may 12 1992
	and the second second	may 12 1992
Name and Address of the Owner, where the Owner, which is the Owner, which is the Owner, where the Owner, which is the Owner	THE REAL PROPERTY AND ADDRESS OF THE PARTY.	

FORM WIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

		month 489	AR. 72801	DEET		of/	THE PARTY COMPANY AND ADDRESS.
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FORM MIS-2 (Back) .

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	requirement for an N-2 Manufactures vata Beaut for the diedoc.
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	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this repair or replacement conforms to the rules of the ASPE Code, Section XI.
	Type Code Symt Stamp N/A
	Certificate of Authorization No. W/A Expiration Date N/A
	signed KD Gellenne
NAME OF TAXABLE PARTY.	R. D. Gillespie - Manager, Central Support
PERSONAL PROPERTY.	
	CERTIFICATE OF IMPERVICE INSPECTION .
-	oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARVANSAS"
Ö	wher's Report during the period 01-07-91 to 5-9-9-9
4	the requirements of the ASPE Code, Section EI.
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Da	. O. Elliott 7/2 1992
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FORM WIS-2 ENG-021

APPENDIK II - MANDATORY

REVISED 06/30/89

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

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REVISED 04/30/89

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	of he attached
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	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this
	repair or replacement conforms to the rules of the ASPE Code, Section XI.
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	Signed RD Gullegue
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-	K. D. Gillespie - Manager, Central Support
Ī	
	CERTIFICATE OF INSERVICE INSPECTION
	I, the understand bear
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	WANTER OF FIGURE OF
	NORMOOD MASS
	owner's Report during the period 01-07-91 to 5-9-92 examinations and taken corrective measures described in the components described in the c
-	Examinations and the best of my knowledge and belief the Comer has
The same of	examinations and taken corrective measures described in this Owner has performed accordance with the requirements of the ASSE Code Section 1
	and come, section XI.
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,	J. O. Elliott ste 7/2 1892

FORM MIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

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IDENTIF NAME OF COMPONENT	NAME OF MANUFACTURER	ON OF SECTION POMENTS REPAIR NAMUFACTURER SERIAL NO.	RED OR RE NATIONAL BOARD NO.	ZED FOR REPAIRS PLACED AND REPL OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEDENT	ASME CODE STANCE (YES OR MO

FORM MIS-2 (Back) .

	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 conforms to the rules of the ASPE Code, Section XI.
***	Type Code Symbol Stamp W/A
(Certificate of Authorisation No. N/A Profession No.
\$	igned Barellen Bare 7/
-	Owner or Owner's Designee, Title R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMPERVICE INSPECTION
	the undersigned, holding a valid commission issued by the Mational Board of ARKANSAS and semilored by the Mational Board of
0	the undersigned, holding a valid commission issued by the Mational Board of oiler and Pressure Vessul Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in thing state that the the transfer of the period 01-07-91
0	the undersigned, holding a valid commission issued by the Mational Board of oiler and Pressure Vessul Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of have inspected the components described in this of 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 cordance with the requirements of the ASME Code, Section EI.
- O & & A	the undersigned, holding a valid commission issued by the Mational Board of oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKANIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this of state that to the best of my knowledge and belief, the Owner has performed contains and tyten corrective measures described in this Owner's Report in Sy signing this certificate neither the Inspector nor his employer makes any excribed in this Owner's makes any escribed in this Owner's makes any escribed in this Owner's makes any escribed in this Owner's makes any
0 4 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	the undersigned, holding a valid commission issued by the Mational Board of oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD, MASS. have inspected the components described in this of the test of my knowledge and belief, the Owner has performed examinations and trken corrective measures described in this Owner's Report in cordance with the requirements of the ASME Code, Section KI.

APPENDIX II - HANDATORY

REVISED 06/30/89

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

	APAL/ENTERGY	OPERATIONS. I	KC.	DAYE 4	-9-9	72	
_RT3	BOX 137 G. R	USSELLVILLE.	AR. 72801	SHEET	_	of	/
2. PLANT	AREANSAS MUCILI	AR OKI		UNIT ONE			
_RT3	. BOX 137G. RUS	STLLVILLE, Al	72801	JOHOO Repair Organia	849 utlon	146	No.
3. WORK P	ENFORMED BY AN	Mame	INC.	TYPE CODE STOR	OL ST	UP N/A	No., et
RT. 3,	Box 137G, RUSS	SELLVILLE, AR.	72801	AUTHORIZATION DAT			-
. IDENTI	FICATION OF STS	TEM Deach	tor Cool	aut Septem	Coer	4-13-1)	-
(D) A3	PPLICABLE EDITI	ON OF SECTION	MI UTILI	19 <u>80</u> EDIT ZED FOR REPAIRS PLACED AND REPL	OR RE	PLACEDODYTS 1	. 8%
				The state of the s	TO STATE OF THE PARTY OF THE REAL PROPERTY OF THE PARTY O		
NAME OF COMPONENT	NAME OF MANUFACTURES	MANUFACTURER SERIAL NO.	NATIONAL BOARD BO.	OTHER IDENTIFICATION	TEAR SUILT	REPLACED, OR REPLACEDONT	(YES
		NAMUTACTURER SERIAL BO.	BOARD NO.	IDENTIFICATION	MUILT	REPLACEDONT	STAMPE
COMPONENT	KANUFACTURER	SERIAL NO.	BOARD NO.	IDENTIFICATION	MUILT	REPLACEDONT	CODE STAMPET (YES OR NO)
COMPONENT	KANUFACTURER	SERIAL NO.	BOARD NO.	IDENTIFICATION	MUILT	REPLACEDONT	CODE STAMPET (YES OR NO)
Malue Nalve	ANUTACTURE R	SERIAL NO.	BOLED BO.	IDENTIFICATION	WILT 1980	REPLACEDONT REPLACEDONT	CODE STANDET (YES OR NO)

REVISED 06/30/89

FORM HIS-2 (Back) .

	N/A
	Applicable Manufacturer's Data Reports to be Attached
-	
THE RESERVE OF THE PERSON NAMED IN	
	CERTIFICATE OF COMPLIANCE
repair or :	rtify that the statements made in the report are correct and this conforms to the rules of the ASME Code, Section XI.
Type Code S	ymbol Stamp N/A
Certificate	of Authorization No. N/A Empiration Date N/A
Signed	Owner or Owner's Designee, Title Date 5-9-92 . 19
R .	D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMSERVICE INSPECTION .
ARRANSAS	resours Vessel Inspectors and the State or Province of
NORWO	OD MASS
and state th	and employed by ARKVRIGHT MUTUAL INSURANCE CO. of ort during the period 01-07-91 to 5-9-92
and state the examinations accordance w	and taken corrective measures described in this Owner's Report in with the requirements of the ASME Code, Section EI.
and state the examinations accordance we sign warranty, expenses in the control of the control o	is and taken corrective measures described in this Owner's Report in the requirements of the ASPE Code, Section EI. Ling this certificate neither the Inspector nor his employer makes any pressed or implied, concerning the examinations and corrective measures.
and state the examinations accordance we suppose the serious and s	and taken corrective measures described in this Owner's Report in the requirements of the ASME Code, Section EI. Ling this certificate neither the Inspector nor his employer makes any pressed or implied, concerning the examinations and corrective measures this Owner's Report. Furthermore, neither the Inspector nor his liable in any manner for any personal injury or property desage any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS

APPENDIX II - MAMDATORT

REVISED 06/30/89

FORM WIS-2 CHMER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section EI

1. OWNER	APAL/ENTERGY	OPERATIONS. I	MC.	MT	5-92	7	-
_RT. 3.	BOX 137 G. R	USSELLVILLE.	AR. 72801	SHEET		of/	
PLANT	ARRANSAS MUCL	EAR ONE		UNIT ONE			4.75
_RT1,	BOX 137G. RU	SFILVILLE, Al	72801	J.O. # 0089	914	PO No. Joh	
work pe	RFORMED BY API	L/DETERGY OF	I. INC.	TTPE CODE STIC	OL STA	UOP N/A	MO., et
RT. 3,	Box 137G, RUSS	GELLVILLE, AF.	72801	AUTHORIZATION EXPIRATION DAT			
IDENTIF	ICATION OF STS	TON Reacta	2 Coolan	+ Sintin	-	N/A	ALCOHOLOGIC DE TORRESTORIO
(-) 22	LEGINE EDITI	ON OF SECTION	XI UTILI	IN BO EDIT	OR RE	PLACEOPPES 1	0.84
NAME OF	NAME OF MANUFACTURER	MANUFACTURES	MATIONAL BOARD BO.	OTHER IDENTIFICATION	YEAR	REPAIRED,	ASME CODE STAMPET
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD	OTHER	YEAR	REPAIRED,	ASME
NAME OF COMPONENT	NAME OF	MANUFACTURES	MATIONAL BOARD NO.	OTHER	TEAR BUILT	REPAIRED, SIPLACED, DR REPLACEDENT	ASME CODE STAMPET (YES
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, SIPLACED, DR REPLACEDENT	ASME CODE STAMPET (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, SIPLACED, DR REPLACEDENT	ASME CODE STAMPET (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURES	KANUFACTURER FERIAL MO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION SU-1083	YEAR BUILT	REPAIRED, DIPLACED, DR REPLACEDENT	ASME CODE STAMPED (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURER	REMUTACTURER SERIAL NO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION SU-1083 And Body to	TEAR SUILT	REPAIRED, DEPLACED, DE REPLACEDONT	ASME CODE STAMPED (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURER Pargut Con of work NDUCTED: NYDO	REMOVED AND STATIC D	MATIONAL BOARD NO.	OTHER IDENTIFICATION SU-1083 And Bodysto	TEAR BUILT	REPAIRED, DIPLACED, DR REPLACEDENT Required	ASME CODE STAMPED (YES OR NO)
NAME OF COMPONENT TESTS CO	NAME OF MANUFACTURER Pareck TON OF WORK NDUCTED: HYDE OTHE	REMOVED BERIAL BO.	MATIONAL BOARD NO.	OTHER IDENTIFICATION SU-1083 And Body to	TEAR BUILT	REPAIRED, DEPLACED, DE REPLACEDENT REPLACEDENT RATING PRESS P. NA.	ASME CODE STAMPET (YES OR NO)

REVISED 06/30/89

PORM MIS-2 (Back) .

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 conforms to the rules of the ASME Code, Section XI.
	Type Code Symbol StampN/A
	Certificate of Authorization No.
Н	Owner or Owner's Designee, Title R. D. Gillespie - Manager Contile
	Owner or Owner's Designes, Title Date 7/2 . 199
Mary Const.	R. D. Gillespie - Manager, Central Support
Manager of	TOTAL SUPPORT
	CERTIFICATE OF INSERVICE INSPECTION .
1	the undersigned, helding a valid commission issued by the Mational Board of
*	the undersigned, holding a valid commission issued by the Mational Board of ARKANSAS and employed by ARKANIGHT MUTUAL INSURANCE CO.
*	the undersigned, holding a valid commission issued by the Mational Board of ARKANSAS and employed by ARKANIGHT MUTUAL INSURANCE CO.
1000	certificate of immersion issued by the Estimal Board of oiler 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 and state that to the best of my Encyledge and belief, the Owner has performed maninations and taken of my Encyledge and belief, the Owner has performed
1000	certificate of inspection issued by the Estimal Board of oiler 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 and state that to the best of my Encyledge and belief, the Owner has performed
0 4 6 4	certificate of immersion issued by the Mational Board of other and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of wher's Report during the period 01-07-91 to 5-9-92 maninations and taken corrective measures described in this owner's Report of the requirements of the ASME Code, Section MI. By signing this carrificate of the ASME Code, Section MI.
A	the undersigned, holding a valid commission issued by the Mational Board of oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD. MASS. have inspected the components described in this over's Report during the period 01-07-91 to 5-9-9- and state that to the best of my Encoviedge and belief, the Owner has performed coordance with the requirements of the ASME Code, Section MI. By signing this certificate neither the Inspector nor his employer makes any escribed in this expressed or implied, concerning the examinations and corrective makes any escribed in this corrective makes any
- 10 e e e > 5 d a	certificate of intervice Despection the undersigned, helding a valid commission issued by the Estional Board of oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS NORWOOD, MASS: and employed by "ARKANIGHT MUTUAL INSURANCE CO. of have inspected the components described in this valer's Report during the period 01-07-91 to 5-7-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-9-
0 4 6 6	certificate of inservice inspection the undersigned, helding a valid commission issued by the Mational Board of oiler and Pressure Vessel Inspectors and the State or Province of arkansas and employed by "Arkvright Mutual Insurance co. of Norwood, Mass. have inspected the components described in this varies Report during the period 01-07-91 to 5-9-90 to 5-9-90 and state that to the best of my knowledge and belief, the Owner has performed coordance with the requirements of the ARME Code, Section XI. By signing this certificate meither the Inspector nor his employer makes any secribed in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any secribed in this Owner's Report. Furthermore, neither the Inspector nor his secribed in this Owner's Report. Furthermore, neither the Inspector nor his applied in any manner for any personal injury or property demage is a loss of any kind arising from or connected with this inspector property demage.
	certificate of Deservice Inspection the undersigned, helding a valid commission issued by the Estional Board of oiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of NORWOOD. MASS. have inspected the components described in this nd state that to the best of my Encycledge and belief, the Owner has performed coordance with the requirements of the ASME Code, Section NI. By signing this certificate neither the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, naiv's the Inspector nor his employer makes any escribed in this Owner's Report. Furthermore, naiv's the Inspector nor his employer shall be liable in any manner for any personal injury or property demage of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Commissions NB-9947, ARK-II33 "N" "Y"
0 0 0 0	certificate of inspectors and the State or Province of ARKANSAS and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of wher's Report during the period 01-07-91 was inspected the components described in this and state that to the best of my knowledge and belief, the Owner has performed coordance with the requirements of the ASNE Code, Section MI. By signing this certificate meither the Inspector mor his employer makes any exercised in this Owner's Report. Furthermore, meit's the Inspector mor his exployer shall be liable in any manner for any personal injury or property damage results of any kind arising from or connected with the property damage

APPENDIX II - MANDATORY

REVISED 06/30/89

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

	BOX 137 G. R	USSELLVILLE.		DATE 4-			/
	AREANSAS MUCL	war.ess		UNIT ONE			-
RT. 3.	BOX 137G. RU	SSELLVILLE, A	E. 72801	J.O. # 008	49/6 84 tion	PO No. Joh	
. WORK PE	REFORMED BY AP	AL/ENTERGY OF	S. INC.	TIPE CODE STIC			No., 6
RT. 3,	Box 137G, RUS		72801	AUTHORIZATION			The second second second second
		lddress.		EXPIRATION DAT	TK		
. IDENTIF	CATION OF SYS	TER Make	- 7/2 V.	Quilicati	on		
. (a) AP	PLICABLE CONST	RUCTION CODE	AISC .	1963 mm	TON.	A CVita	5.00.00
(b) API		POMENTS REPAI	RED OR RE	PLACED AND REPL	A CEPCEN	T COMPONENTS	ASKE
IDENTIFE NAME OF COMPONENT	NAME OF MANUFACTURER	POMENTS REPAI	RED OR RE	ZED FOR REPAIRS PLACED AND REPL OTHER IDENTIFICATION	TEAR	REPAIRED,	ASME CODE STAMP! (YES
NAME OF COMPONENT	NAME OF MANUFACTURER	POMENTS REPAI	NATIONAL BOARD	PLACED AND REPL	TEAR SUILT	REPAIRED, REPLACED, OR REPLACEDENT	ASME CODE STAMP (YES OR NO
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEMENT	ASME CODE STAMP! (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL NO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEDENT	ASME CODE STAMP! (YES OR NO)
NAME OF COMPONENT	NAME OF MANUFACTURER	MANUFACTURER SERIAL BO.	NATIONAL BOARD NO.	OTHER IDENTIFICATION ANU-153 MU-401	TEAR BUILT	REPAIRED, REPLACED, OR REPLACEDENT	ASME CODE STAMP! (YES OR NO)

FORM HIS-2 (Back) .

REVISED 06/30/89

	REYARKS NA
	Applicable Manufacturer's Data Reports to be Attached
-	
	CERTIFICATE OF COMPLIANCE
ř	We certify that the statements made in the report are correct and this conforms to the rules of the ASPE Code, Section XI.
T	ype Code Symbol Stamp N/A
c	igned _
	Owner or Owner's Désignee, Title R. D. Gillespie - Manager, Central Support
I, Bo	the undersigned, helding a valid commission issued by the Mational Board of iler and Pressure Vessel Inspectors and the State or Province of and employed by the Mational Board of ARKANSAS
merys	NORMOOD MASS
90.52	d state that the period 01-07-91
ac	the requirements of the ASME Code, Section ET.
de:	By signing this certificate beither the Inspector nor his employer makes any scribed in this Owner's Report. Furthermore, beither the Inspector and corrective measures ployer shell be lightly Report.
	FACTORY MUTUAL SYSTEMS
J.	Dector's Signature NE-9947, ARK-II33 "N" "I" Bational Sourd, State, Province, and Endorsements
ared (0. Elliott may 12 1992

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

		armer 4 6 8		SHEET	-	Maria G.L.	Marine Walkerson
PLANT _	ARRANSAS MUCT	LAR ONE		UNIT OFE	-		
		rddl 888		J.O. # 008	49/ Matloo	47 PO No., Job	No. e
WORK PE	REPORTED BY AND	HARO	INC.	TTPE CODE STIS			
RT. 3,	Box 137G, RUSS	ELLVILLE, AR.	72801	AUTHORIZATION			***************************************
				Expiration DAT Lysten (co	¥	N/A	***************************************
(w) ME	PLICABLE CONST	ON OF SECTION	XI UTILI	ZED FOR REPAIRS	OR RE	PLACEDODETS 1	0 0/
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IDENTIFI NAME OF OMPONENT - Globe alve-1"	CATION OF COOL	ON OF SECTION POWENTS REPAIR NAMUFACTURER	MATIONAL BOARD	CTHER IDENTIFICATION	TEAR BUILT	PLACEDODITS 1 T CONDONENTS REPAIRED, EXPLACED, OR REPLACEDENT	ASME CODE STANDE (YES OR NO)
IDENTIFI	NAME OF MANUFACTURES	POWENTS REPAIR NAMUFACTURER SERIAL NO. 45	MATIONAL BOARD	PLACED AND REPL OTHER IDENTIFICATION	TEAR BUILT	PLACEDODITS 1 T CONDONENTS REPAIRED, EXPLACED, OR REPLACEDENT	ASME CODE STAMPI (YES OR NO)
IDENTIFI NAME OF OMPONENT - Globe alve-1"	NAME OF MANUFACTURES	POWENTS REPAIR NAMUFACTURER SERIAL NO. 45	MATIONAL BOARD	CTHER IDENTIFICATION	TEAR BUILT	PLACEDODITS 1 T CONDONENTS REPAIRED, EXPLACED, OR REPLACEDENT	ASME CODE STAND! (YES OR NO)
(w) ME	NAME OF MANUFACTURES	POWENTS REPAIR NAMUFACTURER SERIAL NO. 45	MATIONAL BOARD	CTHER IDENTIFICATION	TEAR BUILT	PLACEDODITS 1 T CONDONENTS REPAIRED, EXPLACED, OR REPLACEDENT	ASME CODE STAND! (YES OR NO)
IDENTIFI NAME OF COMPONENT "- Globe Calve " Slobe"	NAME OF HANUFACTURER	NAMUTACTURER SERIAL NO. 45 43	MATIONAL BOARD NO.	CTHER IDENTIFICATION	YEAR BUILT	PLACEDODITS 1 T CONFONENTS REPAIRED, REPLACED, OR REPLACEDENT Repaired Repaired Repaired	ASME CODE STANDI (YES OR NO)

FORM	H	I	5	*	2
ENG-)

POSM HIS-2 (Back) .

REVISED 06/30/89

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

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TOTAL SECTION WHILE AND ADDRESS	
	CERTIFICATE OF COMPLIANCE
We o	conforms to the rules of the terms of the te
FRDAIL OF	conforms to the rules of the ASSE Code Section W
	conforms to the rules of the ASPE Code, Section XI.
	Symbol Stamp N/A
Certifice	te of Authorization No. N/A Empiration Date N/A
Simul	A L O L Repiretion Date N/A
arduses	Owner or Owner's Designee, Title Date
1	D. Gillespie - Manager, Central Support
CANADA SANCIA CONTRACTOR AND	Hanager, Central Support
	CERTIFICATE OF INSERVICE INSPECTION
I, the un	Sersioned balding
I, the un	dersigned, holding a walid commission issued by the Mational Board of
NO	dersigned, holding a walid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO."
NO	dersigned, holding a walid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO."
Owner's R	Sersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this that the first during the period 01-07-91
NO Owner's Re and state	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this that to the best of my knowledge and belief, the Owner has nextored
NO Owner's Re and state	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this that to the best of my knowledge and belief, the Owner has performed and and send and
NO Owner's Re and state examination accordance	dersigned, holding a walid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this that to the best of my knowledge and belief, the Owner has performed one and taken corrective measures described in this Owner's Report in with the requirements of the ASME Code, Section XI.
Owner's Reand state examination accordance By si	dersigned, holding a walid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this that to the best of my knowledge and belief, the Owner has performed one and taken corrective measures described in this Owner's Report in with the requirements of the ASME Code, Section XI.
NO Owner's Re and state examination accordance By si warranty, described	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this that to the best of my knowledge and belief, the owner has performed as and taken corrective measures described in this owner's Report in with the requirements of the ASME Code, Section MI.
Owner's Reand state examination accordance By siverranty, described employer s	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this that to the best of my knowledge and belief, the owner has performed on and taken corrective measures described in this owner's Report in with the requirements of the ASME Code, Section XI. Igning this certificate neither the Inspector nor his employer makes any in this Owner's Report. Furthermore, neither the Inspector nor his employer makes any that he inspector nor his employer makes any in this Owner's Report.
Owner's Reand state examination accordance by statementy, described employer sor a loss	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO." of heve inspected the components described in this port during the period 01-07-91 to 5-9-92 to 5-9-9
Owner's Reand state examination accordance by statementy, described employer sor a loss	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO." of heve inspected the components described in this port during the period 01-07-91 to 5-9-92 to 5-9-9
Owner's Reand state examination accordance by siverranty, described employer sor a loss	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of heve inspected the components described in this open that to the best of my knowledge and belief, the Owner has performed that to the best of my knowledge and belief, the Owner has performed as with the requirements of the ASME Code, Section MI. Igning this certificate neither the Inspector nor his employer makes any in this Owner's Report. Furthermore, neither the Inspector nor his enactive measures hall be liable in any manner for any personal injury or property damage of any kind arising from or connected with this inspection. "FACTORY MUTUAL SYSTEMS Commissions NB-9947, ARK-F133 "N" "I"
Owner's Reand state examination accordance by siverranty, described employer sor a loss	dersigned, holding a valid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO." of heve inspected the components described in this port during the period 01-07-91 to 5-9-92 to 5-9-9

APPENDIX II - NAMDATORY

REVISED 06/30/89

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

1. OWNER	APAL/ENTERGY	OPERATIONS. I	MC.	DATE 4-	16-9		
_RT1	BOX 137 G. R	USSELLVILLE. Address	AR. 72801	SPEET		of	
. PLANT	AREANSAS NUCL	EAR ONE		UNIT OFE	Tallet Printers and Assessment	3143-7-11-11-11-11-11-11-11-11-11-11-11-11-1	
_RT. 3.	BOX 137G. RU	SSELLVILLE, A	R. 72801	J. O. # 008 Repair Organi	37/0	PO No., Job	No., 95
WORK PE	REFORMED BY AN	L/ENTERGY OF	INC.	TTPE CODE STIM	OL ST	N/A	
	_	ddress		AUTHORIZATION DAT	TE .	The second secon	
IDENTIF	ICATION OF STS	TON Real	tor Con	aut System			
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***************************************	Applicable Manufacturer's Data Repo. to be Attached
	CERTIFICATE OF COMPLIANCE
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NAME OF THE OWNER, WHEN	Owner or Owner's Designose, Title R. D. Gillespie - Manager, Central Support
	(PPT PICLO)
	CERTIFICATE OF INSERVICE INSPECTION
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Owner's R and state examination accordance By sivarranty, described employer s or a loss	RWOOD, MASS. have inspected the components described in this that to the best of my knowledge and belief, the Corner best

APPENDIX II - HANDATORY

REVISED 06/30/89

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

. PLANT _	ARRANSAS NUCL	EAR ONE		UNIT ONE			· ·
_RT 3.	BOX 137G. RU	SSELLVILLE, A	R. 72801	J.O. # 008	4698	PO No., Job	No. 4
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FORM HIS-2 (Back) .

REVISED 06/30/89

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	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the remark
	repair or replacement
	. The replacement
	Type Code Symbol Stamp N/A
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1	Ovner or Ovner's Designee, Title R. D. Gillespie - Manager, Central Support
	Owner or Owner's Designee, Title
-	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMPERVICE INSPECTION
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8	xaminations and taken corrective measures described in this Owner has performed coordance with the requirements of the ASPE Code, Section XI
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	O. E. Illian FACTORY MUTUAL SYSTEMS
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1	nspector's Signature NB-9947, ARK-II33 "N" "I"
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FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section XI

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REVISED 06/30/89

FORM MIS-2 (Back)

REMARKS	Applicable Manufacturer's Data Reports to be Attached
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	CERTIFICATE OF COMPLIANCE
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repair or	replacement Code, Section KI.
Type Code	Symbol Stamp N/A
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celetites	te of Authorization No. N/A Empiration Date N/A
Signed /	() & DI
-	Owner or Owner's Designee, Title Date 5/4/97 . 19
	TITLE
R	. D. Gillespie - Manager, Central Support
R	. D. Gillespie - Manager, Central Support
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	CERTIFICATE OF INSERVICE INSPECTION
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I, the und Boiler and ARRANSAS	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the Religional Board of Pressure Vessel Inspectors and the State or Province of and amployed by "ARKWRIGHT MUTUAL INSURANCE CO."
I, the und Boiler and ARRANSAS	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the Pat Monal Board of Pressure Vessel Inspectors and the State or Province of and amployed by "ARKWRIGHT MUTUAL INSURANCE CO. of HOOD, MASS. bave inspected the
I, the und Boiler and ARKANSAS NOR Owner's Reg and state	CRETIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the Patalonal Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO. of port during the period 01-07-91 to 5-9-92 that to the best of my knowledge and belief, the Owner has performed
I, the und Boiler and ARKANSAS NOR Owner's Reg and state	CERTIFICATE OF INSERVICE INSPECTION ersigned, holding a valid commission issued by the National Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of have inspected the components described in thi that to the best of my knowledge and belief, the Owner has performed
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I, the und Boiler and ARKANSAS NOR Owner's Re and state examination accordance By sin warranty, described : employer sh or a loss of	CERTIFICATE OF IMSERVICE IMSPECTION ersigned, holding a valid commission issued by the Ballonal Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKWRIGHT MUTUAL INSURANCE CO of have inspected the components described in this that to the best of my incomplete and belief, the Owner has performed that to the best of my incomplete and belief, the Owner has performed with the requirements of the hims Code, Section MI. The province is a support of the section of t
I, the und Boiler and ARKANSAS NOR Owner's Regard state examination accordance By signature warranty, examination described semployer all cor a loss of Inspector's	CERTIFICATE OF INSERVICE DESPECTION ersigned, holding a valid commission issued by the Millonal Board of Pressure Vessel Inspectors and the State or Province of and employed by "ARKVRIGHT MUTUAL INSURANCE CO. of HOOD. MASS. have inspected the components described in this port during the period O1-07-91 to 5-9-97 that to the best of my Encyledge and belief, the Owner has performed has and taken corrective measures described in this Owner's Report in with the requirements of the ANG Code, Section MI. Sming this certificate meither the Inspector nor his employer makes any in this Owner's Report. Furthermore, Mither the Inspector nor his sall be liable in any manner for any personal injury or property demage

FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

	- Albert Marie Land & Rodins I	OPERATIONS, I	MC.	DATE	1-18.	-92	Market States States and States States
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PLANT	AREANSAS WUCL	EAR ONE		UNIT ONE			***************************************
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REVISED 06/30/89

FORM MIS-2 (Back) .

	REPORTS N/A
	Applicable Manufacturer's Data Reports to be Attached
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	CERTIFICATE OF COMPLIANCE
	repair or replacement conforms to the rules of the ASPE Code, Section XI.
1	Type Code Symbol Stemp K/A
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******	R. D. Gillespie - Manager, Central Support
	CERTIFICATE OF IMMERVICE INSPECTION .
-	, the undersigned, holding a walid commission issued by the Mational Board of ARKANSAS
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81	maminations and taken corrective measures described in this Owner has performed accordance with the requirements of the ASME Code, Section 27.
wa de	By signing this certificate neither the Inspector nor his employer makes any excribed in this Cameria Parasis concerning the examinations and corrective measures
or 	scribed in this Owner's Report. Furthermo.e, neither the Inspector nor his player shall be liable in any manner for any personal injury or property damage a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS Spector's Signature Mational Board, State, Province, and Endorsements

APPENDIX II - MANDATORY

PEVISED 06/30/89

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

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REVISED 06/30/89

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R.	D. Gillespie - Manager, Central Support
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FORM WIS-2 ENG-021

AFFENDIX II - MANDATORY

REVISED 06/30/89

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

			w entire		DATE 4		THE PERSON NAMED IN COLUMN CO. LANSING PRINTS OF PERSONS ASSESSMENT ASSESSMENT OF PERSON	
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	RT. 3.	BOX 137G. RUS	SELLVILLE, AS	72801	J.O. #00 83	721 ation	7	N.
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	RT. 3, 1	Box 137G, RUSS	ELLVILLE, AR.	72801	AUTHORIZATION			The desired resources
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REVISED 06/20/89

	REMARKS N/A
	Applicable Manufacturer's Data Reports to be Attached
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	CERTIFICATE OF COMPLIANCE
	We certify that the statements made in the report are correct and this
	repair or replacement conforms to the rules of the ASPE Code, Section XI.
	Type Code Symbol Stamp N/A
	Certificate of Authorization No. N/A Expiration Date N/A
	Signed RD Guller Bate 5/1/92
	WWW. AND BY
Name of Street	R. D. Gillespie - Manager, Central Support
ones.	
	CERTIFICATE OF IMMERVICE INSPECTION .
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	I, the undersigned, holding a walid commission issued by the Mational Board of
	Boiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and employed by Arkansas
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	examinations and taken corrective measures described in this Owner has performed accordance with the requirements of the ASME Code, Section XI.
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	By signing this certificate neither the Inspector nor his employer makes any
	varranty, expressed or implied, concerning the examinations and corrective measures implied this Owner's Report. Furthermore, Deather the Inspector and corrective measures
4	employer shall be liable in any manner for any personal injury or property damage
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E	J. O. Elliott may 12 1992
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FORM MIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS As Required by the Provisions of the ASME Code Section MI

RT. 3. 1	OX 137 G. RT			DATE 5-	10-9		Mariana manas
. PLANT A		SSPLLVILLE, A	LR. 72801	SHEET		_ of	/
		AR ONE	No and an enteresting descrip-	UNIT ONE			,
_RIJJ	OX 137G. RUS	SELLVILLE, AS	72801	J.O,# 00 84	265 ation	PO Mo., Joh	No at
. WORK PERF	ORMED BY ARE	L/PHIRGY OPS	L. INC.	TTPE CODE STIM	OL STE	JEP H/A	no., et
RT. 3, Bo	x 137G, RUSS	ELLVILLE, AR.	72801	AUTHORIZATION DAT	190	N/A	TOTAL PROPERTY AND ADDRESS.
. IDENTIFIC	ATION OF SYS	TEN Steam	n Lame	leijo Sexten	V:	money was a financial and a second	No over the last section of a section
(D) APPL	ICABLE EDITIO	ON OF SECTION	NI UTILI	1968 EDIT	09 22	PLACEDOENTS 1	9 86
NAME OF COMPONENT	NAME OF KANUFACTURER	MAMUFACTURER SERIAL BO.	NATIONAL BOARD MO.	GTHER IDENTIFICATION	TEAR BUILT	REPLACED, OR REPLACEMENT	ASME CODE STAMPE (YES
NATIONAL PROPERTY AND ADDRESS OF THE PARTY AND	magastrania property.	- AEABY EDITOR OF BUILDING STREET					
l'Alobe	Tasset	48	NA	SV-1842	1968	St. Continues day to the will be the second	OR MO)
l'Alobe	7azzet	48	NA	SV-1842	1968	St. Continues day to the will be the second	OR NO)
l'Alobe	Parset.	48	NA	SV-1842	1968	St. Continues day to the will be the second	OR NO)

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SECTION XI - DIVISION 1

REVISED 06/30/89

FORM MIS-2 (Back) .

	REMARKS NA
	Applicable Manufacturer's Data Reports to be Attached
ers.a	
	CERTIFICATE OF COMPLIANCE
	repair or replacement
	Type Code Symbol Stamp W/A
	Certificate of Authorization No. N/A Expiration Date N/A
	Signed A Sell
	Owner or Owner's Designee, Title Date 5/1/92 . 15
-	R. D. Gillespie - Marager, Central Support
	CERTIFICATE OF IMSERVICE INSPECTION .
	, the undersioned baseline
	Soiler and Pressure Vessel Inspectors and the State or Province of ARKANSAS and ampleved by the Mational Board of
	NORWOOD, MASS. wher's Report during the period 01-07-91 to 5-9-9-9
As 46	the requirements of the ASME Code, Section XI.
0000	By signing this certificate neither the Inspector nor his employer makes any carranty, expressed or implied, concerning the examinations and corrective measures may be seemed in this Owner's Report. Furthermore, neither the Inspector nor his apployer shall be liable in any manner for any personal injury or property damage r a loss of any kind arising from or connected with this inspection. FACTORY MUTUAL SYSTEMS
I D	nepector's Signature NB-9947, ARK-I133 "N" "I" Mational Board, State, Province, and Endorsements ats

FORM NIS-2 ENG-021

APPENDIX II - MANDATORY

REVISED 06/30/89

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

1. OWNER	APAL/ENTERGY	OPERATIONS, I	MC.	DATE 5-	10-9	_	
<u>RT. 3</u>	BOX 137 G. R	USSPLLVILLE.	AR. 72801	SPEET	_	_ of	/
2. PLANT _	ARRANSAS MUCT	EAR ONE		UNIT OFE			*
-RT. 3.	BOX 137G. RU	SELLVILLE,	72801	J.O. # 0084	265 Hatlon	PO No., Job	No., etc
3. WORK PE	REPORTED BY AP	L/ENTERGY OF	L. INC.	TTPE CODE SYNS	OL ST	AND N/A	
RT. 3,	Box 137G, RUS:	SELLVILLE AN	72801	AUTHORIZATION	190	N/A	
		Annual A B B		EXPIRATION DAT	T	R/A	
	CATION OF STS				NOTICE TO SERVICE AND ADDRESS.	POWER THE RESERVE AND THE PARTY OF THE PARTY	
(D) API	PLICABLE EDITI	ON OF SECTION	MI UTILI	19 <u>68</u> EDIT ZED FOR REPAIRS PLACED AND REPL	OR RE	PLACEMENTS 1	986
NAME OF COMPONENT	MANUFACTURER	MANUFACTURER SERIAL NO.	MATIONAL BOARD MO.	OTHER IDENTIFICATION	TEAR BUILT	REPLACED, OR REPLACED,	ASME CODE STAMPED (YES OR NO)
Value	Target Rock	56	KA	SV-1841	1968	agracied	- AND DESCRIPTION OF THE PARTY
-		THE RESERVE OF THE PERSON NAMED IN COLUMN 1	Article de la marie de magnetie	CONTRACTOR OF THE PROPERTY OF			
		Name and Address of the Association and the As					-
and the same of th		THE RESIDENCE OF STREET, STREE	-	White the contract of the contract was provided		ATT MEN AND ADDRESS OF THE PARTY OF THE PART	
		į.	i				
- DESCRIPT	ION OF WORK	demoved any	t rewel	ded body to	Loun	etseal me	lol
. TESTS CO	COUCTED: MYDR	OSTATIC D	PAST BY A	TTC CO MONTH			
OTE: Supples	ental sheets	in form of 14	V. CE	psi TE	ST TEM	2. <u>NA</u>	.,
i) size is 84	in. E 11 in.	, (2) informa	tion in i	ches, or drawing	ge may	be used, pr	ovided s
corded at th	e top of this	form.	ar 19 Dring	tems I through of the many the many through the many thro	mber	of absets is	

REVISED 06/30/89

PORM MIS-2 (Back) .

9.	REMARKS	N/A
	Applicable Manufacturer's Data Reports to be attached	
	Marie Marie Company	
	With the Control of t	
	ACCUSED THE PART OF LABOR WAY AND AND A	
CHYLLIA	THE RESERVE OF THE PERSON OF T	CERTIFICATE OF COMPLIANCE
	repair or	conforms to the rules of the ASSE Code, Section II.
		Symbol Stamp N/A
	Certificati	of Authorization No. H/A Empiration Date N/A
	a w Alt beld a	Owner or Owner's Designed Piles
ovier eur	R,	D. Gillespie - Manager, Central Support
ON MALES	ALCOHOL DE APOLY BUSINESSES AL CONSESSES CO.	
	T the male	CERTIFICATE OF IMEERVICE INSPECTION
	EAC NAAAA	reigned, holding a walid commission issued by the Mational Board of Pressure Vessel Inspectors and the State or Province of
-	NORW Owner's Rep	ood, Mass. have inspected the components described in this hat to the period 01-07-91 to 5-9-93
	and a marrie &	with the requirements of the ASME Code, Section XI.
- 10	mojoses sys	aing this certificate meither the Inspector nor his employer makes any appressed or implied, concerning the examinations and corrective measures this Owner's Report. Furthermore, neither the Inspector nor his all be liable in any manner for any personal injury or property damage of any kind arising from or connected with this injury or property damage
5	1.0.8.11	FACTORY MUTUAL SYSTEMS
D	nspector's J. O. Ellio ate	Signature NB-9947, ARK-II33 "N" "I" Setional Board, State, Province, and Endorsements may 12 1992
0	STATE OF THE PARTY	19 The second