



UNITED STATES
 NUCLEAR REGULATORY COMMISSION
 REGION II
 101 MARIETTA STREET, N.W.
 ATLANTA, GEORGIA 30303

Report Nos.: 50-424/84-23 and 50-425/84-23

Licensee: Georgia Power Company
 P. O. Box 4545
 Atlanta, GA 30302

Docket Nos.: 50-424 and 50-425

License Nos.: CPPR-108 and CPPR-109

Facility Name: Vogtle 1 and 2

Inspection Conducted: August 28-31, 1984

Inspectors:	<u>J. J. Blake</u>	<u>9/14/84</u>
	for E. H. Garard	Date Signed
	<u>J. J. Blake</u>	<u>9/14/84</u>
	for G. A. Hallstrom	Date Signed
Approved by:	<u>J. J. Blake</u>	<u>9/14/84</u>
	Jerome J. Blake, Section Chief	Date Signed
	Engineering Branch	
	Division of Reactor Safety	

SUMMARY

Scope: This routine, unannounced inspection involved 54 inspector-hours on site in the areas of licensee action on previous inspection matters, review of quality assurance implementing procedures for steel structures and supports, safety-related components, licensee identified items, and inspector followup items.

Results: No violations or deviations were identified.

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REPORT DETAILS

1. Licensee Employees Contacted

- *W. T. Nickerson, Deputy Project General Manager
- *H. H. Gregory, General Manager, Vogtle Nuclear Construction Department
- *C. W. Hayes, Vogtle, QA Manager
- *E. D. Groover, QA Site Manager
- *S. D. Haltom, QA Engineering Support Supervisor
- H. W. Swain, Mechanical QC Section Supervisor

Other licensee employees contacted included QA audit personnel, construction craftsmen, and QC inspectors.

Other Organization

- *J. P. Runyan, QA Manager, Pullman Power Products

NRC Resident Inspector

- *W. F. Sanders, Senior Resident Inspector

*Attended exit interview

2. Exit Interview

The inspection scope and findings were summarized on August 31, 1984, with those persons indicated in paragraph 1 above. The licensee was informed of the inspection findings listed below. The licensee acknowledge the inspection findings with no dissenting comments.

Unresolved Item 424, 425/84-23-01, Adequacy of Corrective Action, paragraph 5.d.

Inspector Followup Item 424, 425/84-23-02, Reactor Head Assembly Storage Adequacy, paragraph 6.c.

3. Licensee Action on Previous Enforcement Matters

(Open) Unresolved Item (424, 425/84-05-01): Insufficient Organizational Freedom/Control of Services Through Effective QA Audits

This item addresses actions taken by the site piping contractors construction management which intimidated QC personnel to an extent that their organizational freedom appeared to be excessively abridged. The inspectors reviewed a response to this item provided in a letter from D. O. Foster (Georgia Power Company) to H. C. Dance (NRC Region II) dated July 23, 1984. The inspectors informed the licensee that the matter was still under review by Region II management and would remain open pending determination of further actions to be taken.

4. Unresolved Items

Unresolved items are matters about which more information is required to determine whether they are acceptable or may involve violations or deviations. An unresolved item identified during this inspection is discussed in paragraph 5.d.(3).

5. Steel Structures and Supports - Quality Assurance Procedures (Units 1 and 2) (48051)

Steel structures and supports are being welded by Chicago Bridge and Iron (CB&I), Pullman Power Products (PPP), and Ingalls Iron Works (Ingalls) as indicated below. The inspector reviewed quality assurance procedures for this work as indicated below to determine whether specifications and procedures have been established, qualified, and controlled in accordance with NRC requirements, SAR commitments, licensee's QA program, and Code requirements, as applicable.

a. The applicable codes are as follows:

- (1) CB&I - Containment Welding - ASME Boiler and Pressure Vessel Code, Sections III and VIII, 1974 edition with addenda through S75.
- (2) Ingalls (Georgia Power Company procedures are used) - Miscellaneous structural steel - AWS Structural Welding Code D1.1-75.
- (3) PPP - Pipe Supports - ASME Boiler and Pressure Vessel Code, Section III, 1977 edition with addenda through W77.

b. (1) QA manuals and referenced documents, as identified (2) below, were reviewed to determine whether adequate QA plans and procedures, including QC procedures have been established (written, reviewed, approved, and issued) to assure accomplishment and control of the following activities:

- (a) Organizational structure including qualifications, training, and stop work authority
- (b) Audits including procedures, checklists, scope, frequency, and qualification of auditors
- (c) General quality requirements relative to material specifications, test reports, procurement documents, deviations, and control of components, structures, and systems
- (d) Work and inspection procedures including provisions for review, approval, and control
- (e) Control of material including traceability, handling, shipping storage, and identification of nonconforming material

- (f) Procedures for Control of Processes including special processes
 - (g) Procedures for corrective action
 - (h) Document control including control of QA manual and periodic review for adequacy of document control
 - (i) Test control and control of test equipment
 - (j) Quality records
- (2) The inspector reviewed in detail the following Georgia Power Company (GPC) Procedures for control of Ingalls work:
- ° Vogtle "QA Manual"
 - ° "QA Department Procedure Manual"
 - QA-01 Series "Organization Division"
 - QA-03 Series "Personnel Training Division"
 - QA-05 Series "Audits Inspection Division"
 - ° CD-T-08, Revision 6, "Field Fabrication Miscellaneous Steel"
 - ° DC-A-01, Revision 12, "Drawing Control"
 - ° DC-A-03, Revision 13, "Change Requests and Notices"
 - ° DC-A-06, Revision 9, "Review and Control of Quality Assurance Documentation"
 - ° DC-A-07, Revision 6, "Control and Distribution of Vogtle Field Procedures and Material Supplier Programs"
 - ° GD-A-04, Revision 9, "Calibration and Control"
 - ° GD-A-06, Revision 5, "Reporting of Defects and Non-Compliances to the Nuclear Regulatory Commission"
 - ° GD-A-08, Revision 13, "Procedure Development and Control"
 - ° GD-A-24, Revision 6, "On-Site Procurement Process"

c. During the review of these procedures, the inspector noted an apparent lack of procedures to establish GPC overview coordination requirements for control of documentation for some contractors on the site. Specific concerns are as follows:

- (1) The Bechtel Power Corporation (BPC) Vogtle Project Reference Manual (PRM) in Part C, Section 5, establishes requirements for BPC review of supplier data to ensure general feasibility and adequacy of design. This review covers design intent and conformance to necessary control dimensions at interfaces and establishes requirements under which work may proceed or stop work is mandated. After review, BPC assigns a "status" category to the data which indicates the controls applied. The significance of some status categories is as follows:

Status 1 - Work may proceed, reviewed with no technical comments

Status 2 - Revise and resubmit - work may proceed subject to incorporation of indicated changes (i.e., earlier revision superseded)

Status 3 - Revise and resubmit - stop work

Status 4 - Information only - i.e., does not require design review and acceptance

After assigning the status, the data identification together with its assigned status is entered into the supplier data register (SDR) which acts as the master control for documentation.

- (2) GPC procedure GD-A-08 establishes GPC overview coordination requirements to ensure standards are in effect at Plant Vogtle. The procedure states that its requirements are sufficient to satisfy the intent of "statusing" as defined in the PRM. However, GD-A-08 does not apply to contractors with "in-house" QA/QC responsibility, i.e., Pullman Power Products, CB&I, etc. In response to the inspectors' inquiry, the licensee stated that no procedures existed which established similar GPC overview coordination requirements for these contractors. The licensee further stated that this was one element of a problem with control of documentation identified by GPC auditors as outlined in paragraph d. below.
- d. The licensee informed the inspectors that instances of loss of control of supplier documents had been identified on a GPC QA audit held on April 2-10, 1984. The inspectors reviewed the pertinent Audit Finding Report (AFR #613-I) issued on May 2, 1984. AFR #613-I provides details of errors in the SDR with regard to 39 of 52 Status 2 documents examined, and identifies a generic failure to meet requirements of 10 CFR 50, Appendix B, Criterion VI, "Document Control."

On review of licensee corrective action documentation for the audit findings, the inspectors noted the following:

- (1) The respondent to the audit findings initially failed to meet requirements of GPC corporate QA manual procedure QA-05-01 for submittal of an adequate corrective action plan due to lack of response to the generic issues involved. This resulted in delay of corrective action implementation.
- (2) The licensee had yet to conduct an analyses of the impact on hardware even though specific possibilities are described in the Audit Report. In response to the inspectors' questions regarding the lack of hardware impact analyses, the licensee stated that the impact was estimated to be insignificant.

- (3) The licensee had not accomplished the initial step of the corrective action plan accepted by GPC QA on June 29, 1984. This initial commitment was that Status 2 documents were being routinely issued for use by GPC. A cross-check audit by GPC QA on August 30, 1984, established that this action had not been accomplished. The licensee attributed this failure to the complexity of the issue and the lack of sufficient attention by upper level GPC management.

The inspectors stated that the above failures raised concern as to the assurance of timely and appropriate corrective action of deficiencies that the licensee had identified as generic. The inspector informed the licensee that pending Region II's further evaluation of the promptness and adequacy of their corrective actions with regard to this matter, it will be identified as unresolved item 424, 425/84-23-01, "Adequacy of Corrective Action."

6. Safety-Related Components

a. Procedure Review (50071B)

The inspectors reviewed Westinghouse Procedure P.S.597760, Revision 4, "Cleanliness Requirements During Storage, Construction, Erection, and Start-Up Activities of Nuclear Power Systems," and Nuclear Installation Services Company (NISCO) procedures ES-67, Revision 0, "Cleanliness Requirements and Control," and ES4028-Vogtle-9, Revision E, "Control Rod Drive Mechanism, Thermal Sleeve Guide, Capped Latch Housing, Head Adapter Plug, Installation," as well as NISCO Maintenance and Surveillance Reports to determine whether specific activities associated with safety-related components are controlled and performed according to NRC requirements and licensee commitments in the below listed areas: installation, testing, and inspection activities meet applicable specifications and established procedures; post-inspection cleaning, preservation, and inspection requirements have been established before need; record keeping requirements are established and clearly indicate those responsible for record generation, and that provisions exist for their review by appropriate management personnel.

b. Work Observation (50073B)

The inspectors conducted independent evaluation of storage conditions for the reactor head assembly in accordance with procedures listed above to determine whether activities were in conformance to the procedures involved in the following listed areas: storage environment and protection of components; implementation of special storage and maintenance requirements (cleanliness); and performance of licensee/contractor surveillance and documentation.

- c. The inspectors noted that the reactor head assembly is presently maintained in a Zone IV cleanliness zone (no use of tobacco or eating) and that P.S. 597760 anticipates Zone II storage (addition of requirements for clean gloves and shoe covers as well as material and personnel accountability) when installation of closure head assembly components is complete. The inspectors requested that documentation be provided for their review which included the requirements for the change to Zone II storage and were informed of unavailability of this documentation due to absence of cognizant site personnel. The inspectors informed the licensee that pending review of this documentation, the matter will be identified as Inspector Followup Item 424, 425/84-23-02, "Reactor Head Assembly Storage Adequacy."

7. Licensee Identified Items (LIIs) [10 CFR 50.55(e) Items] (92700)

(Open) LII (424, 425 CDR 84-55): HVAC Duct Support Weld Discrepancies

This item was reported to Region II by the licensee in a letter dated March 2, 1984. It involves weld discrepancies detected in HVAC duct supports. The licensee has utilized MIL STD 105D sampling in their evaluation. The inspectors questioned the applicability of MIL STD 105D to the items and conditions being evaluated. The licensee informed the inspectors that, given sufficient notice, they would have individuals available to discuss and justify the use of the sampling procedure. The inspectors informed the licensee that they would discuss the matter with cognizant Region II specialists to arrange for discussion of the matter.

8. Inspector Followup Items (IFIs) (099014)

As a consequence of investigation followup conducted during NRC Inspection 424, 425/84-05, 13 items of concern requiring additional followup were identified to the licensee. One of the items was of particular concern and was identified as an unresolved item discussed in paragraph 3 above. The other items, which appeared of lesser significance, were identified as IFIs. The licensee examined these items and provided Region II with a written response to each item in a letter from D. O. Foster (Georgia Power Company) to H. C. Dance (NRC Region II) dated July 23, 1984. During the inspection described herein, the inspectors reviewed the responses and more detailed related information which had been compiled by the licensee, discussed the matters with cognizant licensee personnel, and examined procedures and work related to some of the items as described below.

- a. (Open) IFI (424, 425/84-05-02): Unsatisfactory Piping Welds from the Pullman Fabrication Shop

This item was opened to examine a concern expressed to the inspectors that certain welding deficiencies in piping fabricated by the Pullman Power Products (PPP) fabrication shop had not been identified and corrected. The licensee had previously identified weld defects in pipe

spools from the PPP fabrication shop and had reported their findings to Region II as a potential 10 CFR 50.55(e) item. In their July 23, 1984 response letter to the followup items, the licensee informed Region II that they had (previously) conducted extensive reinspections and evaluations of the quality of welding in the pipe spools and corrected all discrepancies. The inspectors reviewed further details of the licensee's evaluation of this matter as documented in GPC memo, File No. X7BG10-C1, Correspondence No. QCM-452, and questioned the PPP (site) QA Manager and the Georgia Power Company (GPC) Mechanical QC Section Supervisor as to how the reinspection of pipe spools had been controlled and documented. The inspectors were informed that records of the reinspections were not considered permanent records. The licensee's Mechanical QC Section Supervisor stated the subject reinspection records would be retained for review by Region II in a subsequent inspection. This item will remain open pending Region II's review and evaluation of the adequacy of the licensee's reinspection records and Region II's examination of examples of the questioned pipe welds.

b. (Closed) IFI (424, 425/84-05-03): Storage and Protection Deficiencies

This item was opened to followup on concerns expressed to the NRC regarding deficiencies in the storage and protection of materials, principally piping and supports. The concerns were specifically directed to materials stored near the installation locations (not at warehouses or storage yards), with contractor PPP responsible for inspection of the storage and protection.

Specific concerns identified by the NRC for followup under this IFI were as follows:

(1) Failure to promptly correct identified storage deficiencies

Note: Except for the deficiencies identified in (2) and (3) below, the deficiencies were minor as they involved no significant damage to materials or loss of identification.

(2) Inadequate protection of flange surfaces

(3) Damage to floor drains from acid spillage

(4) Storage inspections not being performed at the required frequency

The inspectors examined this item through review of details of the licensee's evaluation provided in the GPC documentation package for the item discussions with the PPP QA Manager, review of the PPP procedure for storage of items prior to installation (Procedure XIII-5), two inspection tours (on separate days and shifts) of the auxiliary and containment buildings and adjacent outside storage areas, and review of PPP Storage Inspection Reports covering the period from August 1983 through March 1984.

The inspectors' examination indicated the following:

- (1) Discussions and review of the file data indicated that the licensee had recognized problems in maintaining proper storage and obtaining prompt correction of deficiencies noted and that they had been and were continuing to make efforts to assure its adequacy.
- (2) File information and records indicated the licensee had acknowledged the damage to floor drains and initiated action to correct damage prior to its identification to the NRC.
- (3) Inspection tours performed by the inspectors discovered only isolated minor instances of storage deficiencies (e.g., a piece of pipe not on dunnage and a pipe cap missing). Many flanges were observed and all were satisfactorily protected.
- (4) The review of Storage Inspection Reports indicated they were generally performed at the required frequency. However, no reports were found for February 1984 and none for the containment in December 1983. The QA manager indicated that the reports might be filed separately with nonconformance reports.
- (5) The inspectors found no requirement that the Storage Inspection Reports be handled as permanent records or that they be accounted for such as to assure the records were generated and filed for each inspection required.
- (6) The review of the storage procedure revealed it did not require monthly inspections on each shift, only that monthly inspections were required. Therefore, the inspections may not be performed on a given shift for several months and individuals on that shift may believe the inspections are not being performed at the required frequency.

Based on the examination results described above and the fact that storage is frequently observed by resident and regional inspectors in the course of their routine inspections, the inspectors considered that this item does not warrant further specific attention and is considered closed.

- c. (Open) IFI (424, 425/84-05-04): Licensee Review of Charges of Fraudulent Welding Inspection Verifications

This item was opened to follow-up on reinspections that PPP QC supervision reportedly instituted to check the work of two PPP welding QC inspectors who were alleged to have fraudulently signed-off for inspections they had not performed or that (for one of the individuals) had been improperly performed. The licensee's response to this item in their July 23, 1984 letter was, in summary, that a sample of the work of each of the two welding QC inspectors had been reinspected and that

they were acceptable. According to the licensee, documentation errors were noted in one of the QC inspector's work but no evidence of fraudulent sign-offs was found. The NRC inspectors initiated their examination of this item by reviewing details of the licensee's evaluation included in the documentation package for the July 23, 1984, letter response. This package included summary results of interviews with the subject QC inspectors and of the weld reinspections. Based on discussions held with the PPP QA Manager, the NRC inspectors understood the sample for inspection was developed from a review of work records that are no longer available. The QA Manager stated, however, that there are other means, though less simple, whereby these individuals' work may be identified if any further checks of their work were required. The inspectors determine that this item will remain open pending further evaluation of work and/or records of the two QC inspectors.

Note: It should be noted that the original allegations against the two QC inspectors did not state that their alleged improper inspections resulted in acceptance of any deficient welds.

- d. (Open) IFI (424, 425/84-05-05): Adequacy of Training Program for Inspectors, Field Engineers and Craft

This item was opened to followup on the licensee's response to concerns that training for QC inspectors, craft and field engineers was inadequate. Concerns in this area had been identified separately to the licensee and the NRC. Specific concerns expressed to the NRC were for the adequacy craft training in procedures, reading drawings, and weld symbols; field engineers being insufficiently knowledgeable and referring craft questions to QC inspectors; and inadequate communication of procedure changes (especially to B and C shifts). In their previously referenced July 23, 1984 response letter to Region II, the licensee stated that their recommendations for improvement in this area had all been implemented. The NRC inspectors reviewed the details of the licensee's evaluating of this item as included in their documentation package for the July 23, 1984, letter response, which noted several specific actions which had been taken to improve training. The NRC inspectors determined that this item would remain open pending further inspection to examine whether the licensee's actions had been effective and that the original concerns had been completely addressed.

- e. (Open) IFI (424, 425/84-05-06): Controls on Foreign Materials In Piping

This item was opened to followup on concerns that, due to inadequate emphasis of the need for checking pipe as it was installed, some piping might contain foreign materials. Examples of foreign materials of concern that were identified included purge dams and rags and towels (utilized as purge dams). The licensee's previously referenced July 23, 1984 letter responded for this item that:

- PPP procedures provided for recording of purge dams and verification of their removal and that responsibility for this had now been transferred from craft to QC personnel.
- PPP procedures require verification of the cleanliness of the inside of pipe at fitup.
- GPC has taken steps to protect floor drains and that all drains will be cleaned as part of the flushing program.

This item will remain open pending further examination of the licensee's practices in assuring removal of foreign materials from piping during fitup.

f. (Open) IFI (424, 425/84-05-07): Pipe Improperly Sand Blasted

This item was opened to follow-up on a concern that the licensee might not have detected all underwall conditions in pipe that had been improperly sand blasted. The licensee's response to this concern, expressed in their previously referenced July 23, 1984 letter, stated only that their program for inspecting pipe after sand blasting had been modified to include wall thickness checks in February 1983 and that all pipe sand blasted previous to that had been checked for thinning and corrective action taken if necessary. The inspectors examined an extensive file that the licensee had compiled relative to this item which included copies (several revisions) of the procedure (SI-43) for inspection of the pipe for undersize conditions, sand blaster qualifications, deviation reports, the sand blasting and associated inspection procedures (AX4AZ01-273 and -238), and ultrasonic examination reports for thickness checks conducted. In reviewing the procedure (SI-43) that described the inspection of the pipe for thickness, the NRC inspectors noted that the original revision provided no instructions regarding the location of or number of checks to be performed on piping to identify thin areas. A later (1984) revision of SI-43 provided a more organized systematic approach, indicating pipe locations and numbers of checks repaired. The inspectors questioned an examiner who had performed thickness checks on the pipe as to whether he had had any specific instructions as to a pattern to be used or specific locations to be checked for the earlier revision SI-43 work. He stated he had not. The inspectors expressed their concern to the licensee that as a proper organized approach had not been used in the earlier thickness checks, there was further basis for concern that some instances of excessive thinning might not have been found. This item will remain open pending further review during a subsequent inspection.

g. (Open) IFI (424, 425/84-05-08): Control of Nonconformance Reports

This item was opened to followup on concerns regarding the control of PPP nonconformance reports (NCRs). Individuals expressed specific concerns that:

- NCRs were being voided without feedback to the originator.
- NCRs were rewritten without feedback to the originator, such that sometimes conditions were incorrectly described.
- NCRs were written in individuals' names when they were not even aware of the condition described.

The licensee was already aware of the above concerns when they were described to the NRC and stated that they were being addressed at the time. The inspectors reviewed the PPP NCR procedure (procedure XV-2), the licensee's response described in the previously referenced July 23, 1984 letter, and the results for this item documented in GPC Audit MD01-84/50; and discussed the matter with the PPP QA Manager. The inspectors were informed that the procedure and practices used for NCRs had been revised such that there was feedback to the inspector indicated as the originator as when a NCR was voided, revised or when it was generated by a different individual in response to an inspector's questions. The inspectors determined that this item would remain open pending further NRC review of the voiding, change, and different originator practices.

h. (Open) IFI (424, 425/84-05-09): Clarifications of Engineering and Procedural Practices

This item was opened to followup on concerns that:

- (1) QC procedural requirements (inspection techniques and acceptance limits) and drawing requirements were changed through verbal instructions (primarily) and memos.
- (2) The verbal instructions and memos, referred to above, sometimes appear incorrect and sometimes contradictory.
- (3) There is no apparent satisfactory means to obtain clearly authoritative answers to questions of procedural or drawing interpretation.

The inspectors reviewed the licensee's response to this item as described in their previously referenced letter to Region II and as stated in GPC Audit MD01-84/50. The inspectors also discussed the matter with the PPP QA Manager. GPC and PPP had been aware, at least in part, of the above concerns and were already considering actions to assure proper communication of requirement clarifications and explanations when this item was originally identified. From their review and discussions, the inspectors found that PPP had taken action to limit written interpretations and clarifications to an authoritative form. It also appeared that it was intended that these be limited in number - perhaps, that written responses were encouraged. The inspectors

determined that this item should be left open pending NRC examination of whether the practices used have resulted in satisfactory communication of requirements.

i. (Open) IFI (424, 425/84-05-10): NF Boundary

This item was opened for followup on a concern that the licensee's Architect and Engineer (A/E) had identified the pipe support boundary dividing the applicability of ASME and AISC Code applicability such that supports normally fabricated in accordance with ASME Section III, Subsection NF rules were being fabricated to AISC Code rules. The matter was further complicated by the A/E's alteration (reduction) of weld acceptance requirements for AISC code welds.

In their July 23, 1984 letter of response to this item, the licensee stated that the boundary established was satisfactory in that it met ASME Code rules for establishment of the boundary. The inspectors found that the A/E's interpreted the ASME rules in a manner inconsistent with industry practice in setting the boundary. The inspectors understand the the interpretation utilized by the A/E has been previously reviewed by the NRC. The item will remain open pending examination of the results of the previous NRC review of this matter and its relation to the boundary established for Vogtle.

j. (Open) IFI (424, 425/84-05-11): Welding Material Controls

This item was opened to followup on concerns that there were frequently errors or omissions in welding material issue records, specifically in recording quantities returned. The inspectors reviewed the licensee's response to this concern in their July 23, 1984, letter to Region II and GPC Audit MD01-84/50. The documents reviewed acknowledged that errors in this area had occurred but stated that training had reduced the errors and that PPP QA document reviewers review the records adequacy before they were filed. The inspectors determined that this item would remain open pending further checks on implementation of welding material controls with respect to issue and return record errors and omissions.

k. (Open) IFI (424, 425/84-05-12): Weld Symbols

This item was opened to followup on concerns that non-standard weld symbols were being used. The inspectors reviewed the licensee's response to this concern as stated in the licensee's July 23, 1984 letter to Region II and as recorded in the results of GPC Audit MD01-84/50. The inspectors found that the response in the letter and the audit both acknowledged some difficulties with welding symbols. The letter stated that the symbols utilized were in accordance with AWS A2.4 (no revision was identified). The audit noted occasional discrepancies in welding symbols on Bechtel drawings which had been resolved. The inspectors determined this item would remain open pending:

- (1) Examination of how the designers and inspectors are notified of the symbols to be used.
 - (2) Examination of where the designers and inspectors obtain knowledge of the symbols (e.g., through training, use of available AWS standard, etc.).
 - (3) Examination of examples of installed weldments and applicable drawings for evidence of proper symbol use and interpretation.
1. (Open) IFI (424, 425/84-05-13): Unqualified Welding Procedures

This item was opened to followup on concerns that unqualified welding procedures may have been used. The inspectors reviewed the licensee's response to this concern as stated in their July 23, 1984 letter to Region II and as recorded in the results of GPC Audit MD01-84/50. The licensee acknowledged past identification of some minor discrepancies in welding procedure qualifications and stated they had been identified in NCRs and corrected. The inspectors determined that this item would remain open pending further review of records and/or hardware and interviews with personnel for evidence of use of unqualified welding procedures.