



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**

REGION I
2100 RENAISSANCE BOULEVARD, SUITE 100
KING OF PRUSSIA, PENNSYLVANIA 19406-2713

January 10, 2022

Mr. David P. Rhoades
Senior Vice President
Exelon Generation Company, LLC
President and Chief Nuclear Officer
Exelon Nuclear
4300 Winfield Road
Warrenville, IL 60555

SUBJECT: NINE MILE POINT NUCLEAR STATION, UNITS 1 AND 2 – BIENNIAL
PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION REPORT
05000220/2021012 AND 05000410/2021012

Dear Mr. Rhoades:

On December 3, 2021, the U.S. Nuclear Regulatory Commission (NRC) completed a problem identification and resolution inspection at your Nine Mile Point Nuclear Station, Units 1 and 2 and discussed the results of this inspection with Mr. Brandon Schultz, Regulatory Assurance Manager, and other members of your staff. The results of this inspection are documented in the enclosed report.

The NRC inspection team reviewed the station's corrective action program and the station's implementation of the program to evaluate its effectiveness in identifying, prioritizing, evaluating, and correcting problems, and to confirm that the station was complying with NRC regulations and licensee standards for corrective action programs. Based on the samples reviewed, the team determined that your staff's performance in each of these areas was generally effective and adequately supported nuclear safety.

The team also evaluated the station's processes for use of industry and NRC operating experience information and the effectiveness of the station's audits and self-assessments. Based on the samples reviewed, the team determined that your staff's performance in each of these areas adequately supported nuclear safety.

Finally, the team reviewed the station's programs to establish and maintain a safety-conscious work environment, and interviewed station personnel to evaluate the effectiveness of these programs. Based on the team's observations and the results of these interviews the team found no evidence of challenges to your organization's safety-conscious work environment. Your employees appeared willing to raise nuclear safety concerns through at least one of the several means available.

One finding of very low safety significance (Green) is documented in this report. This finding involved a violation of NRC requirements. We are treating this violation as a non-cited violation (NCV) consistent with Section 2.3.2 of the Enforcement Policy.

If you contest the violation or the significance or severity of the violation documented in this inspection report, you should provide a response within 30 days of the date of this inspection report, with the basis for your denial, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region I; the Director, Office of Enforcement; and the NRC Resident Inspector at Nine Mile Point Nuclear Station.

If you disagree with a cross-cutting aspect assignment in this report, you should provide a response within 30 days of the date of this inspection report, with the basis for your disagreement, to the U.S. Nuclear Regulatory Commission, ATTN: Document Control Desk, Washington, DC 20555-0001; with copies to the Regional Administrator, Region I; and the NRC Resident Inspector at Nine Mile Point Nuclear Station.

This letter, its enclosure, and your response (if any) will be made available for public inspection and copying at <http://www.nrc.gov/reading-rm/adams.html> and at the NRC Public Document Room in accordance with Title 10 of the *Code of Federal Regulations* 2.390, "Public Inspections, Exemptions, Requests for Withholding."

Sincerely,

Erin E. Carfang, Chief
Projects Branch 1
Division of Operating Reactor Safety

Docket Nos. 05000220 and 05000410
License Nos. DPR-63 and NPF-69

Enclosure:
As stated

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SUBJECT: NINE MILE POINT NUCLEAR STATION, UNITS 1 AND 2 – BIENNIAL
 PROBLEM IDENTIFICATION AND RESOLUTION INSPECTION REPORT
 05000220/2021012 AND 05000410/2021012 DATED JANUARY 10, 2022

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**U.S. NUCLEAR REGULATORY COMMISSION
Inspection Report**

Docket Numbers: 05000220 and 05000410

License Numbers: DPR-63 and NPF-69

Report Numbers: 05000220/2021012 and 05000410/2021012

Enterprise Identifier: I-2021-012-0026

Licensee: Exelon Generation Company, LLC

Facility: Nine Mile Point Nuclear Station, Units 1 and 2

Location: Oswego, NY

Inspection Dates: October 18, 2021 to November 5, 2021

Inspectors: C. Lally, Senior Operations Engineer
B. Pinson, Reactor Inspector
B. Sienel, Resident Inspector
G. Walbert, Reactor Engineer

Approved By: Erin E. Carfang, Chief
Projects Branch 1
Division of Operating Reactor Safety

Enclosure

SUMMARY

The U.S. Nuclear Regulatory Commission (NRC) continued monitoring the licensee's performance by conducting a biennial problem identification and resolution inspection at Nine Mile Point Nuclear Station, Units 1 and 2, in accordance with the Reactor Oversight Process. The Reactor Oversight Process is the NRC's program for overseeing the safe operation of commercial nuclear power reactors. Refer to <https://www.nrc.gov/reactors/operating/oversight.html> for more information.

List of Findings and Violations

Failure to Establish Corrective Actions to Ensure Review and Approval of Torus Wall Measurement Data			
Cornerstone	Significance	Cross-Cutting Aspect	Report Section
Barrier Integrity	Green NCV 05000220/2021012-01 Open/Closed	[P.2] - Evaluation	71152B
The inspectors identified a Green finding and associated NCV of Title 10 of the <i>Code of Federal Regulations</i> (10 CFR) Part 50, Appendix B, Criterion XVI "Corrective Action," when Exelon failed to establish effective corrective actions to correct a condition adverse to quality. Specifically, Exelon did not establish corrective actions to ensure that the torus wall measurement data was reviewed and approved such that it was available for use in future torus wall thickness evaluations.			

Additional Tracking Items

None.

INSPECTION SCOPES

Inspections were conducted using the appropriate portions of the inspection procedures (IPs) in effect at the beginning of the inspection unless otherwise noted. Currently approved IPs with their attached revision histories are located on the public website at <http://www.nrc.gov/reading-rm/doc-collections/insp-manual/inspection-procedure/index.html>. Samples were declared complete when the IP requirements most appropriate to the inspection activity were met consistent with Inspection Manual Chapter (IMC) 2515, "Light-Water Reactor Inspection Program - Operations Phase." The inspectors reviewed selected procedures and records, observed activities, and interviewed personnel to assess licensee performance and compliance with Commission rules and regulations, license conditions, site procedures, and standards.

OTHER ACTIVITIES – BASELINE

71152B - Problem Identification and Resolution

Biennial Team Inspection (IP Section 02.04) (1 Sample)

- (1) The inspectors performed a biennial assessment of the licensee's problem identification and resolution in the following areas:
 - **Corrective Action Program Effectiveness:** The inspectors assessed the corrective action program's effectiveness in identifying, prioritizing, evaluating, and correcting problems. The inspectors also conducted a five-year review of the emergency diesel generators, reactor core isolation cooling, residual heat removal, and emergency condensers.
 - **Operating Experience, Self-Assessments and Audits:** The inspectors assessed the effectiveness of the station's processes for use of operating experience, audits and self-assessments.
 - **Safety-Conscious Work Environment:** The inspectors assessed the effectiveness of the station's programs to establish and maintain a safety-conscious work environment.

INSPECTION RESULTS

Assessment	71152B
Corrective Action Program Effectiveness –	
The inspectors determined that Exelon's corrective action program for Nine Mile Point was generally effective and adequately supported nuclear safety and security.	
<u>Problem Identification:</u> The inspectors determined that, in general, Exelon identified issues and entered them into the corrective action program at a low threshold. However, the inspectors identified issues with Exelon's management of scaffolds in plant. Additional details are documented below.	
<u>Problem Prioritization and Evaluation:</u> Based on the samples reviewed, the inspectors determined that, in general, Exelon appropriately prioritized and evaluated issues commensurate with the safety significance of the identified problem. Exelon appropriately	

screened issue reports (IRs) for operability and reportability, categorized IRs by significance, and assigned actions to the appropriate department for evaluation and resolution. However, the inspectors identified issues with Exelon's evaluation of equipment failures. Additional details are documented below.

Corrective Actions: The inspectors determined that, in general, the overall corrective action program performance related to resolving problems was effective. In most cases, Exelon implemented corrective actions to resolve problems in a timely manner. However, the inspectors identified one Green NCV associated with corrective actions. Additional details are documented below.

Assessment	71152B
<p>Use of Operating Experience –</p> <p>The team determined that Exelon appropriately evaluated industry operating experience for its relevance to the facility. Exelon appropriately incorporated both internal and external operating experience into plant procedures and processes, as well as lessons learned for training and pre-job briefs.</p> <p>Self-Assessments and Audits –</p> <p>The team reviewed a sample of self-assessments and audits to assess whether Exelon was identifying and addressing performance trends. In general, the team concluded that Exelon had an effective self-assessment and audit process.</p>	

Assessment	71152B
<p>Safety-Conscious Work Environment –</p> <p>The team interviewed site personnel across different functional areas to determine the adequacy of the safety-conscious work environment. The purpose of these interviews was to (1) evaluate the willingness of the licensee staff to raise nuclear safety issues, (2) evaluate the perceived effectiveness of the corrective action program at resolving identified problems, and (3) evaluate the licensee's safety-conscious work environment. The personnel interviewed were randomly selected by the inspectors from the operations, engineering, maintenance, security, chemistry, organizational effectiveness, and radiation protection work groups. To supplement these discussions, the team interviewed the employee concerns program (ECP) coordinator to assess their perception of the site employees' willingness to raise nuclear safety concerns. The team also reviewed the ECP case log and select case files. All individuals interviewed indicated that they would raise safety concerns.</p> <p>All individuals felt that their management was receptive to receiving safety concerns and generally addressed them promptly, commensurate with the significance of the concern. In general, interviewees indicated they were adequately trained and proficient on initiating IRs. All interviewees were aware of the licensee's ECP, stated they would use the program if necessary, and expressed confidence that their confidentiality would be maintained if they brought issues to the ECP. When asked whether there have been any instances where individuals experienced retaliation or other negative reaction for raising safety concerns, all individuals interviewed stated that they had neither experienced nor heard of an instance of retaliation at the site. The team determined that the processes in place to mitigate potential safety culture issues were adequately implemented.</p>	

Failure to Establish Corrective Actions to Ensure Review and Approval of Torus Wall Measurement Data			
Cornerstone	Significance	Cross-Cutting Aspect	Report Section
Barrier Integrity	Green NCV 05000220/2021012-01 Open/Closed	[P.2] - Evaluation	71152B
<p>The inspectors identified a Green finding and associated NCV of Title 10 of the <i>Code of Federal Regulations</i> (10 CFR) Part 50, Appendix B, Criterion XVI "Corrective Action," when Exelon failed to establish effective corrective actions to correct a condition adverse to quality. Specifically, Exelon did not establish corrective actions to ensure that the torus wall measurement data was reviewed and approved such that it was available for use in future torus wall thickness evaluations.</p>			
<p><u>Description:</u> On August 10, 2021, NCV 05000220/2021002-02 (ML21222A021) was issued as a result of Exelon's failure to meet the requirements of 10 CFR 50.55a(g)(4)(v) when Exelon performed an engineering evaluation that did not meet the applicable requirements in ASME Section XI, subsection IWE. Specifically, examinations of the Unit 1 torus identified areas of degradation, which were determined to be acceptable for continued service by engineering evaluation. However, Exelon's evaluation used wall thickness data from 2017 when more recent data was available. Additionally, the engineering evaluation did not address the rate of degradation to show the resulting margin satisfied the minimum design thickness requirements. Following issuance of this NCV, Exelon initiated IR 04440054 and referenced the actions planned and completed in IR 04435291 to address the NCV. The actions included performing and completing a work group evaluation (WGE) on August 26, 2021, to identify causes of the deficiencies. The WGE identified that engineering evaluators did not properly verify minimum wall thickness with a projected corrosion rate to the next scheduled inspection (Gap #1) and that engineering evaluators did not use the most up-to-date ultrasonic testing (UT) data available (Gap #2). The WGE determined that the cause of Gap #2 was a gap in technical rigor by site engineers, and that the most recently available UT data from 2019 had not been reviewed and approved by engineering at the time of the torus visual inspection.</p> <p>Actions developed to address the identified gaps included, in part, revising procedure N1-MPM-201-001, "NDE Support of Torus Corrosion Monitoring Program," to include additional locations for UT measurements, planning and implementing a work order prior to the next refueling outage to obtain additional torus wall thickness measurements, working with a vendor to develop a finite element analysis model, and preparing a crew learning associated with the gaps identified as part of the WGE. Following review of the planned and completed actions, and interviews with site engineering staff, inspectors determined that Gap #2 was not fully addressed. Specifically, the actions did not ensure that the most up-to-date UT measurement data would be reviewed and approved for use prior to the next scheduled torus wall thickness evaluation or in a manner consistent with Exelon procedures. Specifically, Exelon's actions were not designated as corrective actions and had assigned due dates scheduled to be completed after the next refueling outage in 2023. The inspectors also determined that while the most up-to-date data was available at the time, it was not reviewed and dispositioned fully in accordance with Exelon procedure CC-AA-309-101, "Engineering Technical Evaluations." Specifically, Section 4.2.2 of CC-AA-309-101 states, in part, that all Technical Evaluations must, "identify any inputs, assumptions or limitations that may be applicable including the rationale as to why those inputs and assumptions are appropriate for the evaluation." The rationale as to why the most up-to-date UT measurement data was not</p>			

used was not justified properly in accordance with CC-AA-309-101.

Following discussions with inspectors, Exelon revised their actions for Gap #2 to corrective actions with due dates that would ensure that the identified deficiencies would be adequately corrected prior to the next scheduled refueling outage in 2023.

Corrective Actions: Exelon modified existing corrective actions, created additional actions, and revised the due dates of some actions to ensure the identified deficiencies were corrected.

Corrective Action References: IR 04440054, IR 04435291

Performance Assessment:

Performance Deficiency: Exelon failed to establish effective corrective actions to ensure that the torus wall measurement data was reviewed and approved such that the most recent data was available for use in subsequent future torus wall thickness evaluations.

Screening: The inspectors determined the performance deficiency was more than minor because if left uncorrected, it would have the potential to lead to a more significant safety concern. Specifically, while Exelon identified gaps in engineering processes which resulted in using torus UT measurement data from 2017 when more recent data was available, NRC inspectors identified that actions to ensure the timely review and approval of the most current data had not been established.

Significance: The inspectors assessed the significance of the finding using Appendix A, "The Significance Determination Process (SDP) for Findings At-Power," and Exhibit 3, "Barrier Integrity Screening Questions," since the finding was associated with the Barrier Integrity cornerstone (reactor containment). The finding did not represent an actual open pathway in the physical integrity of reactor containment, was not a failure of containment isolation system logic or instrumentation, was not a failure of containment pressure control equipment, was not a failure of containment heat removal components, and did not involve an actual reduction in function of hydrogen igniters. Therefore, the finding was determined to be of very low safety significance (Green).

Cross-Cutting Aspect: P.2 - Evaluation: The organization thoroughly evaluates issues to ensure that resolutions address causes and extent of conditions commensurate with their safety significance. The finding had a cross-cutting aspect in the area of Problem Identification and Resolution, Evaluation, because Exelon's planned and completed corrective actions did not ensure that the most up-to-date torus UT measurement data would be reviewed and approved for use in future torus wall thickness evaluations and in accordance with Exelon procedure CC-AA-309-101.

Enforcement:

Violation: 10 CFR Part 50, Appendix B, Criterion XVI, "Corrective Action," requires, in part, that measures shall be established to assure that conditions adverse to quality, such as failures, deficiencies, and deviations, are promptly identified and corrected.

Contrary to the above, from July 15, 2021, until November 4, 2021, Exelon did not have actions in place to ensure that conditions adverse to quality would be promptly corrected. Specifically, NCV 05000220/2021002-02 identified, in part, Exelon's failure to use the most up-to-date data when evaluating the adequacy of the torus wall thickness. Following issuance

of that NCV, Exelon failed to establish corrective actions to ensure that the most up-to-date torus wall measurement data was reviewed and approved for use in future torus wall thickness evaluations.

Enforcement Action: This violation is being treated as an NCV, consistent with Section 2.3.2 of the Enforcement Policy.

Minor Performance Deficiency	71152B
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Minor Performance Deficiency: On October 20, 2021, during residual heat removal and emergency diesel generator system walkdowns, the inspectors identified two separate scaffoldings in direct contact with safety-related equipment. Specifically, the inspectors found that the scaffolding directly contacted residual heat removal heat exchanger piping insulation (RB-175-146) and emergency diesel generator service water piping insulation (2EGA-SV102). As a result, Exelon initiated corrective action IRs 4454047 and 4454780 for these conditions adverse to quality. Exelon determined that these scaffoldings did not have the required minimum 3-inch gap around plant equipment. Exelon also determined that the required engineering evaluations and 50.59 reviews for scaffolding installed greater than 90 days had not been performed, documented, or approved. Exelon's extent of condition on other scaffolding found four additional scaffolds that had been installed greater than 90 days but had not received a 50.59 review.

The inspectors determined that Exelon staff did not adequately construct and control scaffolding in accordance with station procedures. Specifically, MA-NM-796-024-1001, "Scaffolding Criteria for NMP," states that, "Scaffold builders shall maintain station-specific clearances from any plant equipment," and, "Direct contact with plant equipment/components is not allowed, except for scaffold support/bracing tie-off as specified by this procedure or as approved by the Authorized Engineering Inspector." At Nine Mile Point, the station-specific clearance requirement is, "3 inches in all areas unless evaluated and approved by Engineering and documented on Attachment 12, Scaffold Control Form." Additionally, Exelon procedure MA-AA-716-025, "Scaffold Installation, Modification, and Removal Request Process," states, in part, that the scaffold coordinator/designee is responsible for, "Maintaining a log or electronic equivalent of the status of all scaffolds, and reviewing the log to ensure that any Scaffolds approaching their ninety day limit are removed or converted to a Permanent Scaffold or requesting that an individual 10 CFR 50.59 Review be performed for the individual Scaffold required to be left in place beyond the ninety days." The inspectors determined that Exelon not following their procedural requirements for scaffolding was a performance deficiency that was reasonably within their ability to foresee and correct, and which should have been prevented.

Screening: The inspectors determined the performance deficiency was minor. This performance deficiency was minor because it did not adversely impact the Mitigating Systems cornerstone objective, it did not lead to a more significant safety concern and was not a precursor to a more significant event. Specifically, the deficiency did not result in reasonable doubt about the scaffold effect on the equipment's seismic qualifications.

Significance: The inspectors assessed the significance of the finding using Appendix A, "The Significance Determination Process (SDP) for Findings At-Power."

Minor Performance Deficiency	71152B
<p>Minor Performance Deficiency: On August 24, 2021, a feedwater control system trouble alarm was received in the main control room, and reactor water level remained stable with control in automatic on feedwater channel 12. Normally, the output of the 12 high pressure coolant injection (HPCI) level setpoint controls level at +72 inches. When the main control room received the alarm, the 12 HPCI setpoint failed low, controlling level at +2 inches while in HPCI mode, which is below the required technical specification (TS) operability limit. The failure of this setpoint resulted in the inoperability of the 12 HPCI controller and an unplanned entry of TS 3.1.8b. In response to the alarm, Exelon replaced the 12 HPCI controller power supply module, restoring the 12 HPCI controller to operable, and exited the TS.</p> <p>Exelon performed a WGE in response to the event, documenting in the statement of cause that the power supply failure was infant mortality due to a known issue with the Schottky diode based on similarly documented failures from internal and external operating experience. The inspectors reviewed this evaluation and the applicable operating experience. The inspectors determined that the 12 HPCI controller failure was not an infant mortality failure and that the plot of the controller output signal did not show a failure of the diode. In response to this, Exelon initiated additional actions to perform further investigation into the 12 HPCI controller failure. Based on this information, the inspectors determined that Exelon's evaluation, specifically the statement of cause as required by procedure PI-AA-125, "Corrective Action Program (CAP) Procedure," Revision 6, was inadequate. This represented a performance deficiency that was within Exelon's ability to foresee and correct, and which should have been prevented.</p> <p>Screening: The inspectors determined the performance deficiency was minor. This performance deficiency was minor because it did not adversely affect the Mitigating System cornerstone objective, it did not have the potential to lead to a more significant safety concern and was not a precursor to a more significant event. Specifically, 11 HPCI remained operable during the inoperability of 12 HPCI and the HPCI system could reasonably be considered operable despite the inadequate WGE.</p> <p>Significance: The inspectors assessed the significance of the finding using Appendix A, "The Significance Determination Process (SDP) for Findings At-Power."</p>	

Minor Violation	71152B
<p>Minor Violation: On December 3, 2019, Nine Mile Point Unit 1 experienced an unplanned start of the diesel and electric fire pumps. Nine Mile Point Unit 1 Renewed License Number DPR-63, Condition 2.D(7), Fire Protection, requires, in part, that the licensee shall implement and maintain in effect all provisions of the approved fire protection program that comply with 10 CFR 50.48(a) and 10 CFR 50.48(c), "National Fire Protection Standard NFPA 805-2001 Edition." Section 3.2.3 of NFPA 805, "Procedures," states, in part, that "Procedures shall be established for implementation of the fire program. In addition to procedures that could be required by other sections of the standard, the procedures to accomplish the following shall be established: (1) Inspection, testing, and maintenance for fire protection systems and features credited by the fire protection program." One of the procedures that tests fire protection systems is N1-IPM-FPM-A002, "Functional Test of the Fire Detection Zones for PNL-LFP2." Step 6.6.2 of this procedure states, "IF Maintenance switch SW-D4 for WP-2161 at LFP1 is NOT...THEN PLACE the switch in the SYSTEM INACTIVE position..."</p>	

Contrary to the above, the inspectors determined that Exelon did not implement all provisions of the approved fire protection program when a procedure established to accomplish testing for fire protection systems credited by the fire protection program was not followed. Specifically, procedure N1-IPM-FPM-A002, Step 6.6.2, was misread and the wrong switch (SW-D4 at LFP2) was repositioned. The inspectors determined that Exelon's failure to follow a fire protection surveillance procedure was a performance deficiency which was reasonably within Exelon's ability to foresee and correct.

Screening: The inspectors determined the performance deficiency was minor. The performance deficiency was minor because it did not adversely impact the Initiating Events cornerstone objective, it did not lead to a more significant safety concern and was not a precursor to a more significant event. Specifically, although the technician failed to follow the procedure and adequately self-check, there were no safety consequences. The inspectors noted that Exelon has taken action to address the performance deficiency and has also enhanced the surveillance procedure.

Enforcement: This failure to comply with Nine Mile Point Unit 1 Renewed License Number DPR-63, Condition 2.D(7), Fire Protection, constitutes a minor violation that is not subject to enforcement action in accordance with the NRC's Enforcement Policy.

EXIT MEETINGS AND DEBRIEFS

The inspectors verified no proprietary information was retained or documented in this report.

- On December 3, 2021, the inspectors presented the biennial problem identification and resolution inspection results to Mr. Brandon Schultz, Regulatory Assurance Manager, and other members of the licensee staff.
- On November 5, 2021, the inspectors presented the biennial problem identification and resolution inspection debrief to Mr. Pete Orphanos, Site Vice President, and other members of the licensee staff.

DOCUMENTS REVIEWED

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
71152B	Corrective Action Documents	01986919 01986935 02540636 02685869 04054560 04061009 04090785 04091604 04101954 04199179 04203104 04214964 04281645 04293947 04288091 04299492 04301315 04302103 04330163 04337608 04340639 04346387 04351417 04354160 04361279 04386046 04388052 04412752 04423089 04433439 04434797 04435291		

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		04440054 04440062 04442220		
	Corrective Action Documents Resulting from Inspection	04454047 04454054 04454684 04454694 04454697 04454780 04455916 04458014 04458022 04458711		
	Engineering Changes		ECP-19-000470	
	Miscellaneous	04291216	Part 21 – EMD fuel injector seized plunger and bushing	10/25/2019
		04405602	OPEX – Entry into HRA on incorrect RWP	03/01/2021
		04408464	Part 21 – Magneblast Breakers	03/12/2021
	Procedures	MA-AA-716-025	Scaffold Installation, Modification, and Removal Request Process	
		MA-AA-796-024	Scaffold Installation, Inspection, and Removal	
		MA-NM-796-024-1001	Scaffolding Criteria for NMP	
		N1-EPM-GEN-150	4.16KV Breaker Inspection P.M.	
		N2-EPM-GEN-550	GE 4.16KV Magne-Blast Breaker P.M.	
		N2-OP-35	Reactor Core Isolation Cooling	
	Work Orders	C93245621 C93283487 C93385103 C93650144 C93651111 C93705810		

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		C93763884 C93771761		