



**UNITED STATES
NUCLEAR REGULATORY COMMISSION**

REGION IV
1600 EAST LAMAR BOULEVARD
ARLINGTON, TEXAS 76011-4511

January 13, 2022

Mr. Joseph Sullivan
Site Vice President
Arkansas Nuclear One
Entergy Operations, Inc.
N-TSB-58
1448 S.R. 333
Russellville, AR 72802-0967

**SUBJECT: ARKANSAS NUCLEAR ONE – BIENNIAL PROBLEM IDENTIFICATION AND
RESOLUTION INSPECTION REPORT 05000313/2021010
AND 05000368/2021010**

Dear Mr. Sullivan:

On November 18, 2021, the U.S. Nuclear Regulatory Commission (NRC) completed a problem identification and resolution inspection at your Arkansas Nuclear One. On December 1, 2021, the NRC inspectors discussed the results of this inspection with Mr. John Dinelli 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 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. However, the team did find some work environment challenges in the security department. Through interviews with staff members, the team identified a significant decline in morale that appears to permeate throughout the security department work environment. This degradation in morale appears to be caused mostly by inadequate staffing and excessive overtime. This is not a new issue at Arkansas Nuclear One. Our previous problem identification and resolution inspection, performed in 2019 (05000313/2019011 and 05000368/2019011

(ML19276E481)), identified similar concerns. The security staff have experienced some positive improvements in areas such as work environment cleaning, personalized radios, and chair replacement. Similarly, electrical maintenance, instrumentation and controls, and computer support indicated that staffing and overtime were recurring complaints. The team indicated that continued degradation of staff morale, due to fatigue, could negatively impact staff performance and the safety-conscious work environment, and potentially impact plant safety.

No findings or violations of more than minor significance were identified during this inspection.

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,



Signed by Ramirez Munoz, Frances
on 01/13/22

Frances C. Ramirez Munoz, Team Lead
Inspection Programs & Assessment Team
Division of Reactor Safety

Docket Nos. 05000313 and 05000368
License Nos. DPR-51 and NPF-6

Enclosure:
Inspection Report

cc w/encl: Distribution via Listserv

ARKANSAS NUCLEAR ONE – BIENNIAL PROBLEM IDENTIFICATION AND RESOLUTION
INSPECTION REPORT 05000313/2021010 AND 05000368/2021010 DATED – JANUARY 13,
2022

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

Docket Numbers: 05000313 and 05000368

License Numbers: DPR-51 and NPF-6

Report Numbers: 05000313/2021010 and 05000368/2021010

Enterprise Identifier: I-2021-010-0002

Licensee: Entergy Operations, Inc.

Facility: Arkansas Nuclear One

Location: Russellville, AR

Inspection Dates: November 1 to November 18, 2021

Inspectors: R. Azua, Senior Reactor Inspector and Team Leader
T. DeBey, Resident Inspector
L. Flores, Reactor Inspector
D. Reinert, Reactor Inspector

Approved By: Frances C. Ramirez Munoz, Team Lead
Inspection Programs & Assessment Team
Division of 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 Arkansas Nuclear One 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

No findings or violations of more than minor significance were identified.

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.

Starting on March 20, 2020, in response to the National Emergency declared by the President of the United States on the public health risks of the coronavirus (COVID-19), inspectors were directed to begin telework. In addition, regional baseline inspections were evaluated to determine if all or a portion of the objectives and requirements stated in the IPs could be performed remotely. If the inspections could be performed remotely, they were conducted per the applicable IP. In some cases, portions of an IP were completed remotely while other portions were performed on site. The inspection documented below met the objectives and requirements for completion of the IP.

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 corrective action program, use of operating experience, self-assessments and audits, and safety-conscious work environment.
 - 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 5-year review of the Arkansas Nuclear One, Unit 1, emergency feedwater and associated emergency feedwater initiation and control systems (EFIC).
 - 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
<u>Effectiveness of Problem Identification:</u> Based on the samples reviewed, the team determined that the licensee's performance in this area adequately supported nuclear safety.	

Overall, the team found that the licensee was identifying and documenting problems at an appropriately low threshold that supported nuclear safety.

Effectiveness of Prioritization and Evaluation of Issues: Overall, the team found that the licensee was appropriately prioritizing and evaluating issues to support nuclear safety. Of the samples reviewed, the team found that the licensee correctly characterized each condition report as to whether it represented a condition adverse to quality, and then prioritized the evaluation and corrective actions in accordance with program guidance.

Effectiveness of Corrective Actions: Overall, the team concluded that the licensee's corrective actions supported nuclear safety. Specifically, that the staff at Arkansas Nuclear One developed effective corrective actions for the problems evaluated in the corrective action program and generally implemented these corrective actions in a timely manner commensurate with their safety significance.

- As part of this inspection, the team selected the Unit 1 emergency feedwater and associated EFIC systems for a focused review within the corrective action program. For these systems, the team performed sample selections of condition reports, looking at the adequacy of the licensee's evaluation process for determining which items are placed in the corrective actions process, and the corrective actions taken. The team also reviewed the licensee's use of operational experience and the Part 21 process with respect to these systems. Finally, the team performed walkdowns of accessible portions of these systems.
- Based on these walkdowns, the material condition of the emergency feedwater system appeared to be adequate. However, regarding the EFIC system, a review of associated condition reports indicates a system that is experiencing aging issues. The system cards show signs of temperature susceptibilities, resulting in voltage drift. Even though the licensee has a vendor that can refurbish these cards, when needed, warehouse stock of these cards was found to be low. As a result, the team identified that low inventory may have been a contributing factor for a number of preventive maintenance activities being deferred. The licensee staff is aware of these issues and indicated that a replacement system is in the works. This effort will not begin until 2025, with completion to occur by 2028. In the meantime, the licensee indicated that they would evaluate the need for increasing warehouse stock of these cards. The licensee also recently purchased replacement cards from another facility and have indicated that they plan to evaluate whether they can dedicate them for use at Arkansas Nuclear One.

Corrective Action Program Assessment: Based on the samples reviewed, the team determined the licensee's corrective action program complied with regulatory requirements and self-imposed standards, and the licensee's implementation of the corrective action program adequately supported nuclear safety. The team found that management's oversight of the corrective action program process was effective.

Assessment	71152B
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<u>Operating Experience:</u> The team reviewed a variety of sources of operating experience including Part 21 notifications and other vendor correspondence, NRC generic communications, and publications from various industry groups including Institute of Nuclear Power Operations (INPO) and Electric Power Research Institute (EPRI). The team	
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determined that Arkansas Nuclear One is adequately screening and addressing issues identified through operational experience that apply to the station and that this information is evaluated in a timely manner once it is received. A couple of minor examples of process errors regarding Part 21 reports were identified and entered into the licensee's corrective action program.

Self-Assessments and Audit Assessment: The team reviewed a sample of the licensee's departmental self-assessments and audits to assess whether they regularly identified performance trends and effectively addressed them. The team also reviewed audit reports to assess the effectiveness of assessments in specific areas. Overall, the team concluded that the licensee had an effective departmental self-assessment and audit process. The audits that the team reviewed were very detailed, thorough, and identified issues.

Assessment

71152B

Safety-Conscious Work Environment: The team interviewed approximately twenty individuals in ten one-on-one sessions and two group interview sessions of five individuals each (individuals were masked and socially-distant during these group interviews). The interviewing inspector performed all of these interviews remotely. The purpose of these interviews was (1) to evaluate the willingness of your staff to raise nuclear safety issues, either by initiating a condition report or by another method, (2) to evaluate the perceived effectiveness of the corrective action program at resolving identified problems, and (3) to evaluate your safety-conscious work environment. The focus group participants included personnel from security, electrical maintenance, instrumentation and controls, and computer support. Overall, Arkansas Nuclear One has an adequate safety-conscious work environment.

Willingness to Raise Nuclear Safety Issues: In the interviews, the team found no evidence of challenges to the safety-conscious work environment. Individuals in these groups expressed a willingness to raise nuclear safety concerns and other issues through at least one of the several means available.

The team found some work environment challenges in the security department. Through interviews with the staff members, the team identified a significant decline in morale that appears to permeate throughout the security department. This degradation in morale appears to be caused mostly by inadequate staffing and excessive overtime. This is not a new issue at Arkansas Nuclear One. Our previous problem identification and resolution inspection identified similar concerns. The security department staff have experienced some positive efforts such as bullet resistant enclosure cleaning, personalized radios, and chair replacement.

Regarding electrical maintenance, I&C, and computer support personnel, staffing and overtime were a recurring complaint. Staff indicated they had good equipment, but not enough to go around. They indicated that resources shared during outages could be better managed so that the staff is not shorthanded at the end of the outage.

The team posited that continued degradation of staff morale due to fatigue, could negatively impact staff performance. Specifically, tired, distracted people make mistakes. Low morale may ultimately have a negative impact on the safety-conscious work environment.

Overall, the team concluded that all work groups at Arkansas Nuclear One maintained a healthy safety-conscious work environment. However, morale issues may have a deleterious effect on staff performance and potentially on plant safety.

Employee Concerns Program: The team looked at Arkansas Nuclear One's Employee Concerns Program (ECP). The team interviewed the ECP manager and reviewed a number of investigations. Overall, the team determined that the investigation packages were of excellent quality, clearly demonstrating steps taken and basis for conclusions. In addition, the ECP manager demonstrated detailed knowledge of all the cases that were reviewed.

Minor Violation

71152B

Minor Violation: Failure to Follow Procedure for Concurrent Verification

Screening: Licensee personnel failed to follow procedural requirements for performing concurrent verification as specified in Step 8.7.5.5. of Procedure OP-1304.041, "Unit 1 Reactor Protection System Channel A Calibration." The inspectors determined the performance deficiency was minor.

The licensee's procedure for concurrent verification Procedure EN-HU-102, "Procedure and Work Instruction Use and Adherence," states that the verifier will: "**OBSERVE performer** before and during execution, to confirm **performer** takes correct action on correct component." Contrary to this, technicians failed to follow the procedure. Specifically, the physical constraints of the location of the terminal board prevented the verifier from observing the performer's action during the execution of the step, so the technicians failed to perform the concurrent verification as specified in Procedure OP-1304.041, Step 8.7.5.5, resulting in an incorrect wire being lifted from a terminal board in channel A. This action caused the loop A reactor coolant system low signal to be lost and three unexpected annunciator actuations occurred in the control room: SASS Mismatch, A OTSG BTU limit, and RCS Flow Lo. Prior to the calibration activity, reactor protection system channel A had been placed in bypass for the planned I&C work and there were no valid plant trip signals generated and no plant transients occurred.

Through the review of this issue, the team identified a concern that was transmitted to licensee management. Specifically, technicians interviewed indicated that there were a number of procedures that required concurrent verification, where it may not be physically possible or where COVID restrictions would prevent concurrent verification. For these instances, licensee staff resorted to placing tape or plastic clips on the leads to be removed as unique visual identifiers. Through other conversations, it appeared that these compensatory measures had been tacitly accepted and informally approved by the staff's supervision, as a form of work-around, however, they had not been documented or formally approved. Further, some identified training efforts did not clearly explain that concurrent verification required the verifier to fully observe the whole evolution of landing leads. Finally, Procedure EN-HU-102, Step 11.3, "When to Apply," states in part that concurrent verification is to be used for actions that have a high potential to lead to irreversible consequences, such as fuel damage, loss of safety function, or loss of reactivity control. The use of concurrent verification for this step of the reactor protection system calibration was inconsistent with the intended use of this administrative tool. The team was concerned that the misuse and overuse of this critical administrative tool, coupled with the normalization of work-arounds, has diminished the positive effect of this tool, and could result in more serious events, if left uncorrected. The licensee entered the minor violation, and this specific concern, in their corrective action program (CR-1-21-3159 and CR-1-21-3160).

Enforcement: This failure to comply with procedural requirements did not affect the mitigating systems cornerstone objective. As a result, this issue is of low safety significance and 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 1, 2021, the inspectors presented the biennial problem identification and resolution inspection results to Mr. John Dinelli and other members of the licensee staff.

DOCUMENTS REVIEWED

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
71152B	Calculations	CALC-80-D-1083C-01	EFIC System Loop Error and Setpoint Analysis	8
71152B	Corrective Action Documents	CR-ANO-HQN-XXXX-XXXXX	2020-01572	
71152B	Corrective Action Documents	CR-ANO-X-XXXX-XXXXX	1-2012-00387, 1-2016-05281, 1-2017-00143, 1-2017-01565, 1-2017-02018, 1-2017-02543, 1-2018-01514, 1-2018-02595, 1-2018-03236, 2-2018-00852, C-2018-03684, 1-2019-00292, 1-2019-00797, 1-2019-02219, 1-2019-02250, 1-2019-02476, 1-2019-02493, 1-2019-02522, 1-2019-02553, 1-2019-02670, 1-2019-02820, 1-2019-02833, 1-2019-02963, 1-2019-02993, 1-2019-03440, 1-2019-03578, 1-2019-03716, 1-2019-04156, 1-2019-04660, 1-2019-04676, 2-2019-02163, 2-2019-02164, 2-2019-02396, 2-2019-02477, 2-2019-02607, C-2019-00070, C-2019-00271, C-2019-02561, C-2019-03186, C-2019-03880, C-2019-03949, C-2019-03958, C-2019-03992, C-2019-04182, C-2019-04254, C-2019-04684, C-2019-04711, C-2019-04770, C-2019-04842, 1-2020-00006, 1-2020-00015, 1-2020-00031, 1-2020-00085, 1-2020-00102, 1-2020-00118, 1-2020-00153, 1-2020-00160, 1-2020-00197, 1-2020-00218, 1-2020-00259, 1-2020-00316, 1-2020-00354, 1-2020-00445, 1-2020-00462, 1-2020-00558, 1-2020-00598, 1-2020-00668, 1-2020-00681, 1-2020-00776, 1-2020-00796, 1-2020-00840, 1-2020-00894, 1-2020-00952, 1-2020-01021, 1-2020-01124, 1-2020-01263, 1-2020-01268, 1-2020-01317, 1-2020-01479, 1-2020-01531, 1-2020-01663, 1-2020-01667, 1-2020-01681, 1-2020-01745, 1-2020-02463, 2-2020-00039, 2-2020-00100, 2-2020-00101, 2-2020-00117, 2-2020-00213, 2-2020-00232, 2-2020-00354, 2-2020-00560, 2-2020-00629, 2-2020-00658, 2-2020-00678, 2-2020-00751, 2-2020-00867, 2-2020-00872, 2-2020-01076, 2-2020-01305, 2-2020-01589, 2-2020-01630, 2-2020-01642, 2-2020-01688, 2-2020-01700, 2-2020-01770, 2-2020-02079, 2-2020-02248, 2-2020-02469, 2-2020-02473, 2-2020-02474,	

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
			2-2020-02585, 2-2020-02643, 2-2020-02797, 2-2020-02904, 2-2020-02921, 2-2020-02924, 2-2020-02964, 2-2020-02971, 2-2020-03036, 2-2020-03061, 2-2020-03815, 2-2020-03843, 2-2020-03913, C-2020-00259, C-2020-01523, C-2020-01762, C-2020-02818, C-2020-03099, 1-2021-00263, 1-2021-00300, 1-2021-00308, 1-2021-00319, 1-2021-00347, 1-2021-00378, 1-2021-00391, 1-2021-00457, 1-2021-01780, 1-2021-01986, 1-2021-02094, 1-2021-02377, 1-2021-02523, 1-2021-02573, 1-2021-02611, 1-2021-02634, 1-2021-02717, 1-2021-02718, 1-2021-02735, 1-2021-02978, 1-2021-03021, 1-2021-03075, 2-2021-00048, 2-2021-00060, 2-2021-00390, 2-2021-00952, 2-2021-01120, 2-2021-01189, 2-2021-01544, 2-2021-02416, 2-2021-02721, 2-2021-03343, C-2021-01274, C-2021-01649, C-2021-01749, C-2021-01942	
71152B	Corrective Action Documents	LO-ALO-XXXX-XXXXX	2020-00038	
71152B	Corrective Action Documents	OE-NOE-XXXX-XXXXX	2020-00150, 2021-00019, 2021- 00020, 2021-00089, 2021-00093, 2021-00104	
71152B	Corrective Action Documents Resulting from Inspection	1/2/C/HQN-XXX-XXXXX	1-2021-03075, 1-2021-03159, 1-2021-03160, C-2021-03034, HQN-2021-01881, HQN-2021-01899	
71152B	Engineering Changes	EC-86222	Improve Air Flow Inside Panels 2C36 and 2C37	1
71152B	Miscellaneous		Arkansas Nuclear One - Unit 2, Technical Specifications	Amendment 325
			Arkansas Nuclear One - Unit 2, Safety Analysis Report	Amendment 30
		ASME OM-2012	Operation and Maintenance of Nuclear Power Plants	04/08/2013
		LO-ALO-2019-00082	Pre-NRC Inspection Self-Assessment, Radiological Hazard & Exposure Controls and Occupational ALARA Planning and Controls	11/21/2019
		LO-ALO-2020-00048	Self-Assessment Radiation Safety – Hazard Assessment, Airborne Controls and Performance Indicators Plant: ANO	12/09/2020

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		NQ-2019-028	QA Audit Report QA-14/15-2019-ANO-1, 2019 QA Audit of Radiation Protection/Radwaste at Arkansas Nuclear One (ANO)	10/24/2019
		NQ-2020-021	QA-11-2020-ANO-1 Materials Purchasing and Contracts Audit Notification/Audit Plan Memorandum	05/07/2020
		NQ-2021-006	2021 QA Audit of Engineering Programs and Arkansas Nuclear One	04/08/2021
		NQ-2021-012	QA Audit of Combined Operation and Technical Specifications Program at Arkansas Nuclear One	07/15/2021
		NUREG-1482	Guidelines for Inservice Testing at Nuclear Power Plants	3
		PEAR-95-0290	Replacement Valve for 2CV-1456-2	11/03/1995
		PO-955564	Purchase Order	11/06/1995
		SEP-ANO-2-IST-1(2)(3)	ANO Unit 2 Inservice Testing Bases Document	8
		SIPD-9803	Addition of Reflash Capability to K16-C5 Electrical Equipment Room Temperature Hi	11/04/2021
		ULD-1-SYS-12	Upper Level Document ANO Unit 1 Emergency Feedwater System	10
71152B	Procedures	1104.027	Battery and Switchgear Emergency Cooling System	52
		1304.205	Unit 1 EFIC Channel A Monthly Test, SG Pressure Greater than 750 PSIG	34
		1304.207	Unit 1 EFIC Channel C Monthly Test, SG Pressure Greater than 750 PSIG	32
		2305.017	Local Leak Rate Testing	38
		EN-DC-313	Procurement Engineering Process	18
		EN-EC-100	Employee Concerns Program	13
		EN-FAP-MP-011	Identification & Processing of Potential Candidates for Commercial Grade Dedication and Alternate Sourcing	0
		EN-HU-102	Human Performance Traps & Tools	18
		EN-HU-106	Procedure and Work Instruction Use and Adherence	9
		EN-LI-102	Corrective Action Program	45, 46
		EN-LI-118	Causal Analysis Process	34
		EN-MA-106	Planning	2
		EN-MA-145	Maintenance Standard for Torque Application	11

Inspection Procedure	Type	Designation	Description or Title	Revision or Date
		EN-MA-157	Maintenance Configuration Control	5
		EN-OE-100	Operating Experience Program	34
		EN-OM-119	On-site Safety Review Committee	23
		EN-PL-187	Safety Conscious Work Environment (SCWE) Policy	3
		EN-QV-136	Nuclear Safety Culture Monitoring	22
		EN-RP-100	Radiation Worker Expectations	13
		EN-RP-101	Access Control for Radiologically Controlled Areas	16
		EN-WM-100	Work Request Generation, Screening and Classification	17
		OP-1000.120	ANO Fire Impairment Program	26
		OP-2104.029	Service Water Operations	117
71152B	Work Orders	WO	183059, 448859, 501163, 512454, 512455, 512457, 528417, 541573, 544453	
		Work Standard	T-23467	