

	CONDITION REPORT FORM 1	Manual CR NO. <u>112-2005-M-11</u>
		PAGE OF
CONDITION IDENTIFICATION FORM (PRINT/TYPE, USE BLACK INK ONLY)		
IDENTIFICATION OF PROBLEM (Please Print) Originator: <u>Geoff Schwartz</u> Ext.: <u>6684</u> Organization: <u>Engineering - Project Management</u> Supervisor: <u>Steve Verrochi</u> Date of Discovery: <u>9-1-05</u> Time of Discovery: <u>10:00</u>		For Operations Use Only Date Rec'd _____ Time Rec'd _____
CONDITION DESCRIPTION: A hairline crack several feet in length was found at approximately 60 foot level of Unit 2 spent fuel pool south wall on the loading bay side. The crack has evidence of liquid seepage with trace amounts of cesium 134. This was found during excavation associated with the dry cask storage project. The crack was inspected by a structural engineer and the Supervisor of Structural-Civil Engineering and does not pose an operability concern for the spent fuel pool. It is a typical concrete crack that develops during forming, and is non-propagating. It was not created by the excavation, since excavation only removed loose soil and rocks which was not load-bearing for the wall. The pool is an independent structure not supported by adjacent material. The activity is indicative of either a pinhole leak in the pool stainless steel interior liner, or is from seepage into the crack (which is now leaching out) during watering of the soil above the level of the crack to inhibit dust as it was being removed.		
[Include information pertinent to operability determination.]		
Work Document # (i.e., WRWO, OD, etc.) _____ Other: _____		
IMMEDIATE ACTION DESCRIPTION: Informed Shift Manager, Operations Manager, Plant Manager, Engineering Director. Performed inspections described above. Radiologically controlled the area. Also informed NRC Resident.		
AFFECTED EQUIPMENT/DOCUMENTS/MATERIAL:		
Number/Description(s) <u>Spent fuel pool south wall, loading bay, Unit 2.</u>		
SUGGESTED CORRECTIVE ACTION (S): Keep radiological controls in place, continue to monitor. Assign CR to Manager of Dry Cask Storage, who will develop and implement a repair plan such as seal injection. Test liquid samples for boron (there is no evidence visible).		
<input type="checkbox"/> Operability in question? No <input type="checkbox"/> Potentially reportable? No		

OPERABILITY REVIEW & IMMEDIATE REPORTABILITY DETERMINATION - FORM 3

I. OPERABILITY REVIEW

OPERABILITY EVALUATION REQUIRED ☐ NO ☒ YES

IF NO - EXPLAIN WHY: _____

(IF NO THEN LEAVE OPERABILITY EVALUATION SECTION BLANK - COMPLETE REPORTABILITY SECTION AND SIGN AS APPROVER)

II. OPERABILITY EVALUATION

EQUIPMENT/SYSTEM/TRAIN BEING ASSESSED: SFP fuel storagePLANT CONDITION/MODE: Operating at full power.

EFFECT OF THIS CONDITION ON EQUIPMENT/SYSTEM/TRAIN OPERABILITY:

☐ ADMIN - NA☐ EQUIPMENT INOPERABLE☐ CONSIDERED OPERABLE BASED ON REASONABLE ASSURANCE YET FURTHER EVALUATION REQUESTED☒ OPERABLE - JUDGMENT☐ EQUIPMENT OPERABLE ☐ NOT REQUIRED

Time Entered: _____

BASIS: OPERABILITY EVALUATIONS USING ENGINEERING JUDGMENT MUST BE SUBSTANTIATED

(Include Reasonable Assurance). Hairline non-propagating crack inspected by structural engineer J. Skonieczny and Supervisor of Civil-Structural Engineering R. Drake. Crack is typical of type which develops during concrete forming/curing and will not lead to significant breach. Stoppage is evidenced as either a pinhole leak in a weld seam of the stainless steel pool interior lining, or seepage that entered the crack during excavation of adjacent/above contaminated soil.

LCO ENTERED ☒ NO ☐ YES LCO NO. _____ LCO ACTION TIME _____

TECH SPEC/TRM ACTION STATEMENT # _____ DATE ENTERED _____ TIME ENTERED _____

IMMEDIATE ACTIONS TAKEN:

Sample taken no evidence of boron found

II. IMMEDIATE REPORTABILITY DETERMINATION

IS IMMEDIATE NRC NOTIFICATION REQUIRED? ☒ NO ☐ YES

IF YES (Mark appropriate time requirement and complete this section)

☐ 1-HR RPT☐ 4-HR RPT☐ 8-HR RPT☐ 24-HR RPT

DATE: _____ AND TIME: _____ OF REPORT.

NAME OF PERSON REPORT MADE TO: _____

CFR REQUIREMENT: _____ NAME OF PERSON MAKING REPORT: _____

NRC EVENT NO. _____

REACTOR POWER: _____ % REACTOR PRESSURE: _____ RX / RX COOLANT TEMP _____

[(BWR ONLY) CORE FLOW X 10⁶ lbm/HR REACTOR LEVEL _____ in]

III. PERFORMANCE/APPROVAL

PERFORMED BY: Subels DATE/TIME: 9/1/05 1615OPERATIONS REPRESENTATIVE APPROVAL: [Signature] DATE/TIME: 9-1-05 1615