



**UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION IV  
611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TEXAS 76011-4005**

March 7, 2006

Mr. James Shetler, Assistant General Manager  
Energy Supply  
Sacramento Municipal Utility District  
6201 'S' Street  
P.O. Box 15830  
Sacramento, California 95852

SUBJECT: NRC INSPECTION REPORT 050-00312/06-001

Dear Mr. Shetler:

An NRC inspection was conducted on February 6 through 9, 2006, at your Rancho Seco Nuclear Generating Station. At the conclusion of the site visit, an exit briefing was conducted with the acting Plant Manager and other members of your staff. The enclosed report presents the scope and results of the inspection.

The inspection was an examination of activities conducted under your license as they relate to safety and compliance with the Commission's rules and regulations and with the conditions of your license. Within these areas, the inspection included reviews of the organization, management and cost controls; safety reviews, design changes, and modifications; decommissioning status and schedule; and occupational radiation exposure controls.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter, its enclosure, and your response (if any) will be made available electronically for public inspection in the NRC Public Document Room or from the NRC's document system (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/Adams.html>. To the extent possible, your response should not include any personal privacy, proprietary, or safeguards information so that it can be made available to the public without redaction.

Should you have any questions concerning this inspection, please contact Mr. Emilio Garcia, Health Physicist, at (530) 756-3910 or the undersigned at (817) 860-8191.

Sincerely,

/RA/

D. Blair Spitzberg, Ph.D., Chief  
Fuel Cycle and Decommissioning Branch

Docket No.: 050-00312  
License No.: DPR-54

Enclosure:  
NRC Inspection Report  
050-00312/06-001

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**ENCLOSURE**

U.S. NUCLEAR REGULATORY COMMISSION  
REGION IV

Docket No.: 050-00312

License No.: DPR-54

Report No.: 050-00312/06-001

Licensee: Sacramento Municipal Utility District

Facility: Rancho Seco Nuclear Generating Station

Location: 14440 Twin Cities Road  
Herald, California

Dates: February 6 through 9, 2006

Inspector: Emilio M. Garcia, Health Physicist

Approved By: D. Blair Spitzberg, Ph.D., Chief  
Fuel Cycle and Decommissioning Branch

Attachments: Supplemental Information  
Partial List of Documents Reviewed

## **EXECUTIVE SUMMARY**

### **Rancho Seco Nuclear Generating Station NRC Inspection Reports 050-00312/06-001**

This inspection was a routine, announced inspection of decommissioning activities being conducted at the Rancho Seco Nuclear Generating Station. Areas inspected included organization, management, and cost controls; Safety reviews, design changes, and modifications; decommissioning performance and status review; occupational radiation exposure; and followup of an open inspection followup item. Overall, the licensee was conducting decommissioning in accordance with regulatory and procedural requirements.

#### **Organization, Management and Cost Controls**

- All managerial positions were staffed with experienced individuals familiar with their job responsibilities. The organization and staffing were as required by the Rancho Seco Quality Manual (Section 1.1).
- The licensee had implemented a program for plant personnel to identify safety concerns. A recent survey conducted by the licensee indicated that most individuals were comfortable or very comfortable reporting safety concerns (Section 1.2).
- The licensee met the requirements for annual reporting on the status of decommissioning funding. Based on licensee projections of decommissioning costs and the amount of work completed at the end of 2005, adequate funding would be available to complete site decommissioning (Section 1.3).

#### **Safety Reviews, Design Changes, and Modifications**

- Safety evaluations were conducted in accordance with the licensee's procedures and applicable regulations. Qualified reviewers and Commitment Management Review Group members and alternates were appropriately trained (Section 2).

#### **Decommissioning Performance and Status Review**

- Loading operations observed of the greater than Class C waste into an ISFSI canister were performed in a safe manner. The inspector reviewed a licensee schedule for final status radiological surveys (Section 3).

#### **Occupational Radiation Exposure**

- Audits and surveillances reviewed of the occupational radiation exposure program were performance-based, and their overall quality was very good. The licensee had an effective program for identifying and correcting deficiencies or weaknesses related to the control of radiation or radioactive materials (Section 4.1).

- Changes made to the occupational radiation protection program did not decrease its effectiveness (Section 4.2).
- The licensee was maintaining an effective program to monitor occupational radiation exposures. Occupational exposures for calendar year 2005 were below regulatory limits (Section 4.3).
- The 2005 ALARA exposure estimate significantly underestimated the number of hours required to conduct the reactor vessel internals segmentation. The estimate was subsequently revised in January 2006 to reflect the actual hours and associated increase in person-rem to complete the job. ALARA planning meetings had been conducted as directed by the licensee's procedure. The licensee had maintained the ALARA program including assigned responsibilities, procedures, training, planning, dose estimates, and dose goals (Section 4.4).

## **Report Details**

### **Summary of Facility Status**

The Rancho Seco Nuclear Generating Station was permanently shut down in June 1989. All spent reactor fuel has been moved to an onsite Independent Spent Fuel Storage Installation (ISFSI). At the time of this inspection, the licensee was conducting decommissioning activities at the site. Decommissioning was being performed under the provisions of the incremental decommissioning option of Rancho Seco's Post Shutdown Decommissioning Activities Report dated March 20, 1997.

Decommissioning work activities included the auxiliary building, reactor building, spent fuel building and exterior areas. All major components in the auxiliary building had been removed, packaged and shipped for disposal. In the reactor building, the major piping, the four reactor coolant pumps, the core flood tanks, reactor vessel head, pressurizer, pressurizer drain tank, and the two steam generators had been removed, packaged and shipped offsite for disposal. In the fuel handling building, the spent fuel pool water had been processed and released. Most of the pool liner plates had been cut, removed and shipped for disposal. During this inspection, the reactor vessel internals segmentation project was continuing.

### **1 Organization, Management and Cost Controls (IP 36801)**

#### **1.1 Organization**

##### **a. Inspection Scope**

The inspector compared the licensee's organizational structure against the requirements of the Rancho Seco Quality Manual, Section I, Organization.

##### **b. Observations and Findings**

The licensee's organization was consistent with the Rancho Seco Quality Manual (RSQM), Section I, Organization. There had been no changes to procedure RSAP 0101, "Nuclear Organization Responsibilities and Authorities," since this area was last inspected in September 2005. Procedure RSAP-0260, "Commitment Management Review Group and Commitment Tracking System," was revised on January 9, 2006, and included the changes in organization that had occurred in the fall 2005. The licensee had issued an updated Rancho Seco Management Organization Chart to reflect the individuals assigned to each position. This organization chart was dated February 2006. At the time of this inspection, all the managerial positions were staffed with experienced individuals with many years of service with the licensee. The managers interviewed by the inspector were familiar with their responsibilities.

##### **c. Conclusion**

All managerial positions were staffed with experienced individuals familiar with their job responsibilities. The organization and staffing were as required by the Rancho Seco Quality Manual.

## 1.2 Employee Safety Concern Program

### a. Inspection Scope

The inspector reviewed the licensee's employee safety concerns program.

### b. Observations and Findings

The licensee's employee safety concern program was described in procedure RSAP-1308, "Potential Deviation from Quality," also known as the PDQ process. During the October 2005 Safety Fair, the licensee conducted a Safety Survey. Although not exclusively related to nuclear safety concerns the survey included a number of questions related to the reporting of safety issues. Most of those who responded to the survey indicated they were comfortable or very comfortable reporting safety concerns. The Commitment Management Review Group (CMRG) had reviewed the result of the survey and had initiated a number of actions to address the results.

A total of 27 PDQs were opened in 2005. Four PDQs had been initiated as of February 6, 2006. All of the PDQs had been reviewed by the CMRG and were either closed or were being resolved.

### c. Conclusion

The licensee had implemented a program for plant personnel to identify safety concerns. A recent survey conducted by the licensee indicated that most individuals were comfortable or very comfortable reporting safety concerns.

## 1.3 Cost Controls

### a. Inspection Scope

The inspector reviewed the licensee's program for implementing the requirements of 10 CFR 50.75(f)(1) and reviewed the licensee's decommissioning fund status through the end of 2005. The inspector also discussed cost controls with the licensee's decommissioning/nuclear project control coordinator.

### b. Observations and Findings

Regulation 10 CFR 50.75(f)(1) requires each power reactor licensee that has already closed before the end of its licensed life to submit a report on an annual basis of (1) the amount of decommissioning funds estimated to be required for decommissioning; (2) the amount accumulated to the end of the preceding calendar year; (3) a schedule of annual amounts remaining to be collected; (4) the assumptions used regarding the rates of escalation in decommissioning costs; (5) the rates of earnings on decommissioning funds; (6) rates of other factors used in funding projections; (7) any contracts upon which the licensee is relying pursuant to 10 CFR 50.75(e)(1)(v); (8) any modifications occurring to a licensee's current method of providing financial assurance; and (9) any



material changes to trust agreements. This regulation requires the annual report to be submitted by March 31 of the reporting year.

The report covering the decommissioning fund status through calendar year 2004 was submitted to the NRC on March 2, 2005. This timely report included information on the nine items required by 10 CFR 50.75(f)(1).

The licensee's records for the 2005 decommissioning funding were also reviewed. The licensee's decommissioning/nuclear project control coordinator stated that the licensee internally updated their cost estimates twice per year and had estimated their costs through 2028. Based on the current value of the fund and the projected additions, the licensee indicated that sufficient funding to complete the decommissioning of the site would be available.

c. Conclusion

The licensee met the requirements for annual reporting on the status of decommissioning funding. Based on licensee projections of decommissioning costs and the amount of work completed at the end of 2005, adequate funding would be available to complete site decommissioning.

**2 Safety Reviews, Design Changes, and Modifications (IP 37801)**

a. Inspection Scope

The inspector reviewed selected 10 CFR 50.59 safety evaluations conducted since the previous inspection in this area.

b. Observations and Findings

The CMRG records for the period of January 2005 through February 7, 2006, were reviewed. During this time, four safety evaluations associated with the Part 50 license had been approved by the CMRG. Table 1 provides a list of the safety evaluations performed. The inspector reviewed the screening/safety evaluations packages. The packages were complete and had been reviewed in accordance with 10 CFR 50.59 requirements. The packages were signed by both a qualified reviewer and the CMRG chairman or alternate chairman. All reviewers were on the list of qualified reviewers. Training records indicated that they had successfully completed training as a 10 CFR 50.59 and 10 CFR 72.48 reviewer and had received refresher training within the last 12 months. The records of the CMRG indicated that the screening/safety evaluations packages had been reviewed, discussed and unanimously approved by the Group. Records maintained by the licensee indicated that CMRG members and alternates had been trained. The CMRG training included being a qualified reviewer.

**Table 1**  
**Rancho Seco Safety Evaluations**

#	Topic	Reviewed	CMRG Approval
1	Emergency Plan Change 5, Rev. 2	38356	38391
2	Procedure RSAP-0101, Rev. 30; RSQM-Policy, Rev. 8; RSQM Section I, Organization, Rev. 12; and Procedure RSAP-1900, Rev 10.	38552	38559
3	Process Control Program (PCP), Rev. 4	38595	38608
4	RSQM Section II, Quality Assurance Program, Rev. 11	38600	38608

c. Conclusion

Safety evaluations were conducted in accordance with the licensee's procedures and applicable regulations. Qualified reviewers and CMRG members and alternates were appropriately trained.

**3 Decommissioning Performance and Status Review (IP 71801)**

a. Inspection Scope

The inspector interviewed cognizant personnel, reviewed selected documents and observed portions of the movement and loading of the Transfer Cask (TC) and Greater Than Class C (GTCC) Canister with the GTCC waste Basket. The inspector interviewed cognizant personnel regarding the schedule for conducting final status radiological surveys to support license termination. The inspector also toured the reactor building to observe work activities including housekeeping, safety practices, fire loading and radiological controls.

b. Observations and Findings

The ISFSI Supervisor briefed the inspector on the procedure that they would use for the movements and loading of the TC and GTCC canister with the GTCC basket. The GTCC waste was generated from the reactor vessel segmentation project. The canister with the GTCC waste would eventually be stored in the ISFSI. The licensee used ISFSI Operations procedure ISFSI-02, "ISFSI Loading/Unloading," as the controlling document for the preparation, loading, welding, vacuum drying, and storage in the ISFSI of the canister containing the GTCC waste. This procedure had been developed based on the procedure and the lessons learned from the spent fuel dry storage campaign. The procedure had been reviewed and approved by the licensee's CMRG.

The Principal Mechanical Engineer also briefed the inspector on a problem they had encountered with GTCC basket lid. The GTCC basket lid was design to raise the center of gravity to approximately match the center of gravity of the other canisters that had been loaded with spent fuel. During installation, the licensee found that the vendor had not fabricated the basket to the design drawings in that the four lifting lugs were placed 90 degrees apart as opposed to 80/100/80/100 degrees that the design specified.

Since the lid was built as designed with openings at 80/100/80/100 degrees the opening for the lifting lugs did not match with location of the lifting lugs in the basket. The licensee evaluated this change and concluded that although it reflected a problem with the quality assurance practices of the vendor it did not result in a safety significant change. The licensee modified the basket lid to permit access to the lifting lugs in the basket.

The inspector observed portions of the transfer of the TC/GTCC canister to the segmentation pool, the loading of the GTCC basket in the canister and the removal of the combined TC/GTCC canister and basket from the segmentation pool. The inspector noted that the licensee and contractor personnel used the applicable procedure, were observant of radiological and industrial safety practices and performed the steps in a safe manner.

The Dismantlement Superintendent - Operations and the Dismantlement Superintendent - Radiological briefed the inspector on the licensee's projected schedule for dismantlement activities and final status surveys. Major survey locations had been broken down to a total of 236 survey units. The inspector informed the licensee personnel of the NRC intention to conduct confirmatory surveys on selected locations and survey units.

The licensee continued to segment the reactor vessel internals to separate and package the irradiated components into the various waste categories. A tour of the reactor building was conducted to observe dismantling and decommissioning activities in progress. The work observed was being conducted in a safe and orderly manner. Radiological controls, including postings and barriers, were in place. Good housekeeping and fire protection practices were noted in areas observed.

c. Conclusion

Loading operations observed of the greater than Class C waste into an ISFSI canister were performed in a safe manner. The inspector reviewed a licensee schedule for final status radiological surveys

**4 Occupational Radiation Exposure (IP 83750)**

4.1 Audits and Surveillances

a. Inspection Scope

Reports of recently conducted audits and surveillances were reviewed to determine implementation of the commitments made in the Section XVIII, Audits, of the RSQM, as it relates to the occupational radiation safety. The inspector also reviewed the qualification records for the individual involved in the audit and surveillance.

The inspector reviewed Radiation Protection Occurrences (RPO) prepared in 2005 and 2006 as of the time of the inspection.

b. Observations and Findings

The inspector reviewed audit Report 05-A-015, Radiological Safety and Control and ALARA Program, issued on December 15, 2005, and Surveillance Reports 05-S-015, 05-S-020, and 05-S-025. Audit 05-A-015 was conducted November 23 through December 14, 2005, and the report was issued on December 15, 2005. The inspector confirmed that the audit was conducted according to the commitments in the RSQM. The individual that conducted the audit was independent of the function being audited. The audit included the use of an approved checklist. The auditor was qualified and authorized to perform the audit in the area audited. The audit did not identify any item that constituted a PDQ. The audit was conducted in a timely manner and was overall of very good quality.

Surveillances 05-S-015 and 05-S-020 were performed to verify implementation of the radiological protection program in the reactor building. The surveillance report concluded that personnel in the reactor building were following proper radiation protection practices and radioactive materials and containers were posted and labeled as appropriate. Minor discrepancies were identified and closed. Surveillance 05-S-015 was conducted on August 29, 2005, and the report was issued on August 31, 2005. Surveillance 05-S-025 was conducted on December 5, 2005, and the report was issued on December 6, 2005.

Surveillance 05-S-020, was conducted on October 3-11, 2005, and was an investigation of the events surrounding the unescorted entry into a Secured High Radiation Area on August 10, 2005. The surveillance provided some recommendations to prevent recurrence. This surveillance is further discussed in Section 5 below. The surveillance report was issued on October 27, 2005.

The individual that performed these audits and surveillances was trained, qualified and currently certified to audit these functional areas as a Lead Auditor.

The RPO Reports are used by the licensee to document the identification, immediate actions, investigation, and corrective actions of any radiological deficiency or violation noted by any plant worker. The RPO Report does not replace the PDQ process. In some cases, the RPO can be the basis for initiating a PDQ. Procedure RP.305.36, "Radiological Protection Occurrence Report," was the procedure controlling this process.

The inspector reviewed the RPO log and noted that there had been one RPO initiated in 2005 and one in 2006 as of February 9, 2006. These two RPOs had been processed in accordance with the requirements of procedure RP.305.36. For each of these RPOs, the licensee had investigated the occurrence and taken corrective actions. The RPO in 2005 resulted in a Deviation from Quality Report.

c. Conclusions

Audits and surveillances of the occupational radiation exposure program were performance-based, and their overall quality was very good. The licensee had an

effective program for identifying and correcting deficiencies or weaknesses related to the control of radiation or radioactive materials.

#### 4.2 Changes

##### a. Inspection Scope

The inspector reviewed major changes since the last inspection in the areas of organization, personnel, facilities, equipment, programs and procedures with cognizant licensee staff to determine if these changes negatively affected occupational radiation protection.

##### b. Observations and Findings

Effective January 1, 2006, the Radiation Protection/Chemistry organization was realigned to have the dosimetry functions report to Regulatory/Decommissioning Supervisor. This realignment freed the Supervising Radiological Engineering Specialist to attend to the development of a database for the data loggers that will be used in data collection to support the final status surveys.

The number of radiation work permits (RWP) increased from 8 in 2005 to 12 in 2006. This change in the number of RWPs was to better reflect the variety of task and special projects being conducted. Changes in RWPs included splitting Multi-Agency Radiation Survey and Site Investigation Manual (MARSSIM) surveys and samples into outside radiation areas and inside radiation and high radiation areas, a separating radioactive waste functions into three activities, compacting, segregation, and routine operations. The licensee also added a RWP for general walkdowns and inspections. Three RWPs did not require electronic radiation dosimeters (ED). All three were for work outside of radiation areas. One RWP permitted access into the radiological control area (RCA) without wearing an ED under certain circumstances. RWP 06-003 permitted access to the RCA without an ED as long as access to a radiation area or high radiation area was not required. Individuals, other than short term visitors, would still need to wear optically stimulated luminescent dosimeters (OSL). The licensee used OSLs as the dosimeter of record.

The licensee made changes in the number of contract technicians employed through 2005 and into 2006 to reflect the work being performed. The licensee purchased and was placing into service new instruments to support the decommissioning final status surveys.

The inspector reviewed two procedures that were revised in 2005, Radiation Control Manual procedure RP.305.07, "Area Definitions, Posting and Requirements" and Dosimetry Manual procedure RP.312.1.14, "Exposure Limits and Extensions." Procedure RP.305.07 was revised to clarify the requirements to access Secure-High Radiation Areas. Procedure RP.312.1.14 was extensively revised. Major changes included the elimination of the administrative weekly radiation exposure limit and the updating of some definitions.

The inspector concluded that these changes would not have a negative effect on occupational radiation protection.

c. Conclusions

Changes made to the occupational radiation protection program did not decrease its effectiveness.

4.3 External and Internal Exposure Control and Other Radiation Protection Inspection Areas

a. Inspection Scope

The licensee's personnel radiation monitoring program was inspected for compliance with applicable requirements and commitments.

b. Observations and Findings

The licensee was continuing to use OSL dosimeters for evaluating beta/gamma external doses, and neutron dosimeters for neutron dose. The dosimeters were provided by a vendor which was accredited under the National Voluntary Laboratory Accreditation Program (NVLAP) for the type of dosimeters used. In addition, the licensee used EDs for controlling the day-to-day personnel exposures. The licensee continued to use a vendor supplied computerized dose tracking system for reading the EDs and automatically assigning the estimated dose to the individual. Electronic dosimeters were no longer required for entries into the radiologically controlled area that did not involve entries into radiation or high radiation areas.

During calendar year 2005 and as of February 7, 2006, no individual had been classified as a declared pregnant worker, and no planned special exposures had been conducted.

The annual reports required by 10 CFR 20.2206(b) and the RSQM, Appendix A, Sections 1.5.2.1 and 1.5.2.2, were due on April 30 and by the end of the first calendar quarter respectively. The data for these reports was available and was reviewed by the inspector.

Records maintained by the licensee indicated that the total effective dose equivalent (TEDE) received by occupationally exposed individuals was below the regulatory limit of 5 rem. The highest reported TEDE was 2.959 rem during calendar year 2005. Dose measurements for the lens of the eye dose, skin of the whole body dose, internal dose, and skin of the maximally exposed extremity dose were all below applicable limits.

The inspector inquired if any plant area had become unusable as a result of any operational occurrences. No plant areas had become unusable as a result of operational occurrences.

c. Conclusions

The licensee was maintaining an effective program to monitor occupational radiation exposures. Occupational exposures for calendar year 2005 were below regulatory limits.

4.4 Maintaining Occupational Exposure ALARA

a. Inspection Scope

The inspector discussed the licensee's program for maintaining occupational radiation exposures as low as reasonably achievable (ALARA) with the supervising radiation engineering specialist and reviewed the licensee's applicable organization, procedures, goals and objectives, worker awareness and involvement.

b. Observations and Findings

Procedure RP 0305.04, Radiation Work Permits, requires dose estimates for all RWPs and that ALARA job planning meeting be conducted for all RWPs that have a dose estimate of greater than 1.0 person-rem.

The inspector reviewed the list of RWPs for calendar year 2006 as of February 9, 2006, and noted that dose estimates had been prepared for each and that ALARA job planning meeting had been conducted for those RWPs with a dose estimate of greater than 1.0 person-rem.

The inspector reviewed a memorandum dated January 19, 2006, from the Supervising Radiation Engineering Specialist to the CMRG. This memorandum adjusted the 2005 year-end estimate to reflect the much higher number of hours required to conduct the reactor vessels internals (RVI) segmentation. The adjusted estimate was 33.295 person-REM. The actual exposures for 2005 were 32.798 person-REM.

The inspector reviewed the employee training manual and noted that both the Site Access (CAT I) and Radiological Controlled Area Access (CAT II) Training included modules on ALARA. During tours of the radiologically controlled areas, the inspector observed ALARA postings and observed individuals using good ALARA practices.

c. Conclusions

The 2005 ALARA exposure estimate significantly underestimated the number of hours required to conduct the reactor vessel internals segmentation. The estimate was subsequently revised in January 2006 to reflect the actual hours and associated increase in person-rem to complete the job. ALARA planning meetings had been conducted as directed by the licensee's procedure. The licensee had maintained the ALARA program including assigned responsibilities, procedures, training, planning, dose estimates, and dose goals.



**5 Followup (IP 92701)**

(Closed) IFI 050-00312/0503-02: Licensee's Independent Assessment of the Initial Investigation into the Unauthorized Entry into a Secured High Radiation Area. During a previous inspection, the NRC inspector identified that the licensee's investigations into the unauthorized entry into a secured high radiation area did not disclosed pertinent details. The licensee initiated an independent assessment of the initial investigation. The licensee's independent assessment, Surveillance Report 05-S-020, had been completed and made some conclusions and recommendations. The CMRG reviewed the draft Surveillance Report 05-S020 and prepared their own report. The CMRG report identified a number of recommendations that were similar to those made by Surveillance Report 05-S020. During this inspection, the inspector noted that all the corrective actions directed by the CMRG had been closed or assigned for action. This item is considered closed.

**6 Exit Meeting Summary**

The inspector presented the inspection results to the acting plant manager and other members of licensee staff at the exit meeting on February 9, 2006. The licensee did not identify as proprietary any information provided to, or reviewed by, the inspector.



## **ATTACHMENT 1**

### **PARTIAL LIST OF PERSONS CONTACTED**

#### **Sacramento Municipal Utility District**

M. Bua, Radiation Protection/Chemistry Superintendent  
J. Field, Engineering Superintendent  
L. England, Coordinator, Project Controls Decommissioning  
W. Hawley, Dismantlement Superintendent - Operations, Acting Plant Manager  
R. Jones, Sr. Nuclear Engineer  
D. Koontz, ISFSI Supervisor  
S. Porterfield, Supervising Radiological Engineering Specialist ALARA/MARSSIM  
G. Roberts, Maintenance Superintendent  
E. Ronningen, Dismantlement Superintendent - Radiological  
J. Walkin, Principal Mechanical Engineer

### **INSPECTION PROCEDURES USED**

IP 36801	Organization, Management and Cost Controls
IP 37801	Safety Reviews, Design Changes, and Modifications
IP 71801	Decommissioning Performance and Status Review
IP 83750	Occupational Radiation Exposure
IP 92701	Followup

### **ITEMS OPENED, CLOSED, AND DISCUSSED**

#### **Opened**

None

#### **Closed**

050-00312/0503-02	IFI	Licensee's Independent Assessment of the Initial Investigation into the Unauthorized Entry into a Secured High Radiation Area
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#### **Discussed**

None

## LIST OF ACRONYMS

ALARA	As Low As Reasonably Achievable
CFR	Code of Federal Regulations
CMRG	Commitment Management Review Group
ED	Electronic Radiation Dosimeters
GTCC	Greater than Class C
IP	Inspection Procedure
ISFSI	Independent Spent Fuel Storage Installation
OSL	Optically Stimulated Luminescent Dosimeters
PDQ	Potential Deviation from Quality
RPO	Radiation Protection Occurrences
RSQM	Rancho Seco Quality Manual
RWP	Radiation Work Permits
TC	Transfer Cask

## **ATTACHMENT 2**

### **PARTIAL LIST OF DOCUMENTS REVIEWED**

#### **Audits and Surveillances**

- 2005, Surveillance Log
- 2006 Surveillance Log as of February 2, 2006.
- Rancho Seco Audit Report No. 05-A-015, Radiological Safety and Control, ALARA Program, Audit dates November 23 through December 14, 2005. Report dated December 15, 2005.
- Surveillance Report 05-S-013, Objective: Verify Sampling for the buried pipe excavation was performed in accordance with DSIP-0300 and the Survey Sample Instruction Package. Surveillance period June 21, 2005.
- Surveillance Report 05-S-014, Objective: Verify Sampling for the buried pipe excavation was performed in accordance with DSIP-0300 and the Survey Sample Instruction Package. Surveillance period August 2, 2005.
- Surveillance Report 05-S-015, Objective: Verify implementation of the Incremental Decommissioning Action Plan (IDAP) Programs for Radiological Protection Program. Surveillance period August 29, 2005.
- Surveillance Report 05-S-020, Objective: Investigate the events surrounding the unescorted entry into a Secured High Radiation Area on August 10, 2005, and determine recommendations to prevent reoccurrence of the unescorted entry.
- Surveillance Report 05-S-025, Objective: Verify implementation of the Incremental Decommissioning Action Plan (IDAP) Programs for Radiological Protection Program. Surveillance period December 5, 2005.

#### **Data Sheets**

- Computerized Record Class Attendance Sheet, course ST01N0100, 50.59 Training - August 7, through November 15, 2005, print out dated February 8, 2006.
- Potential Deviation from Quality Log, 2005 and 2006 through February 2, 2006.
- Spreadsheet Titled Decommissioning Portfolio 12/31/2004.
- Spreadsheet Titled Decommissioning List of Investments Owned December 31, 2005.
- Training Attendance Roster, ST01N0100, Reading Assignment, Group Briefing and Computer Training Module, Procedure RSAP-0260, Revision 13, ComTrak Training. November 9, 2005 through February 9, 2006.

### Meeting Minutes

- CMRG Meeting Held on February 9, 2005.
- CMRG Meeting Held on April 27, 2005.
- CMRG Meeting Held on May 12, 2005.
- CMRG Meeting Held on July 27, 2005.
- CMRG Meeting Held on September 14, 2005.
- CMRG Meeting Held on October 12, 2005.

### Procedures

- Rancho Seco Administrative Procedure RSAP-0260, Commitment Management Review Group & Compliance Management Tracking System, Revision 13, effective January 9, 2006.
- ISFSI Operations Procedure ISFSI-02, ISFSI Loading/Unloading, Revision 2, effective February 7, 2006.

### Reports

- MPC&D 05-020, dated March 2, 2005, from Manager, Plant Closure and Decommissioning to U. S. Nuclear Regulatory Commission, Subject: Rancho Seco Report on Decommissioning Funding Status
- Well Fargo, Asset Summary as December 31, 2004, SMUD Decom Trust Fund Escrow Account.
- Well Fargo, Asset Summary as December 31, 2005, SMUD Decom Trust Fund Escrow Account.
- October 2005, Safety Fair Safety Survey results summary.

### Other Documents

- MPC&D 06-022, Subject Qualified Reviewer List, February 7, 2006.