

5.0 FORM NIS-2 DATA SHEETS

A total of 89 ASME Form NIS-2, "Owners Report for Repairs or Replacements," were filed during Byron Station Unit 2 Cycle 13. The following is a system summary of NIS-2's generated:

SYSTEM	TOTAL NIS-2 REPORTS	NUMBER OF PAGES
AF - Auxiliary Feedwater	1	1
CS - Containment Spray	1	1
CV - Chemical & Volume Control	13	14
DO - Diesel Fuel Oil	4	4
FP - Fire Protection	1	1
FW- Main Feedwater	2	2
MS - Main Steam	4	6
PC – Containment Penetration	1	1
RC - Reactor Coolant	10	11
RF – Reactor Building Floor Drain	1	1
RY - Reactor Coolant Pressurizer	7	7
SI - Safety Injection	20	20
SX - Essential Service Water	22	28
VP – Primary Containment Ventilation	2	3
TOTAL	89	100

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|--|--|------------------------|--|
| 1. | Owner | <u>Exelon Nuclear</u>
Name
<u>4300 Winfield Road, Warrenville, IL</u>
Address | Date | <u>04/17/07</u> |
| 2. | Plant | <u>Byron Nuclear Power Station</u>
Name
<u>4450 N. German Church Road, Byron, IL</u>
Address | Sheet | <u>1</u> of <u>1</u> |
| 3. | Work Performed by | <u>Byron Mechanical Maintenance</u>
Name
<u>4450 N. German Church Road, Byron, IL</u>
Address | Unit | <u>02</u> |
| | | | Work Order No. | <u>00692630-21</u>
Repair Organization, P.O. No., Job No., etc. |
| | | | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | | | Authorization No. | <u>Not Applicable</u> |
| | | | Expiration Date | <u>Not Applicable</u> |
| 4. | Identification of System | <u>[AF] Auxillary Feed</u> | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III 19 74 Edition, S/75 Addenda, N/A</u> | Code Case | <u></u> |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: | <u>2001 Edition/2003 Addenda</u> | | |
| | (c) Section XI Code Case(s) | <u>NONE</u> | | |
| 6. | Identification of Components | | | |

[illegible]

7. Description of Work TACK WELD STEM NUT TO VALVE DISC.
(Original Code parts re-used)
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
Other ☐ Pressure n/a psi Test Temp. n/a °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00692630-21

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed [Signature] Date 5/8, 20 07
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/15/07 to 5/9/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions 144-1854
Inspector's Signature National Board, State Province, and Endorsements

Date: May 9, 20 07

1.	Owner	<u>Exelon Nuclear</u>	Date	<u>04/19/07</u>
		Name		
		<u>4300 Winfield Road, Warrenville, IL</u>	Sheet	<u>1</u> of <u>1</u>
		Address		
2.	Plant	<u>Byron Nuclear Power Station</u>	Unit	<u>02</u>
		Name		
		<u>4450 N. German Church Road, Byron, IL</u>	Work Order No. 00855477-01	
		Address	Repair Organization, P.O. No., Job No., etc.	
3.	Work Performed by	<u>Shaw/Stone & Webster</u>	Type Code Symbol Stamp	<u>Not Applicable</u>
		Name	Authorization No.	<u>Not Applicable</u>
		<u>36400 S. Essex Road, Wilmington, IL 60481</u>	Expiration Date	<u>Not Applicable</u>
		Address		
4.	Identification of System	<u>CS (CONTAINMENT SPRAY)</u>		
5.	(a) Applicable Construction Code	<u>ASME Section III 19 74 Edition, S75 Addenda, _____ Code Case</u>		
	(b) Applicable Edition of Section XI Used for Repair/Replacement Activity	<u>2001</u> Edition / <u>2003</u> Addenda		
	(c) Section XI Code Case(s)	<u>NONE</u>		
6.	Identification of Components			

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
STUDS, 1-8" ASME SA-193 B7	Nova Machine Products	HT# 69463	N/A	2CS008A	1999	INSTALLED	No
NUTS, 1-8" ASME SA-194 2H	Nova Machine Products	HT# S71132	N/A	2CS008A	2006	INSTALLED	No
STUDS, 1-8" ASME SA-193 B7	Cardinal Industrial Products	Heat # 7658D	N/A	2CS008A	1983	REMOVED	No
NUTS, 1-8" ASME SA-194 2H	Texas Bolt Co.	Trace code GY68	N/A	2CS008A	1978	REMOVED	No

7. Description of Work **REPLACED ALL STUDS AND NUTS**

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
Other ☐ Pressure n/a psi Test Temp. n/a °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order No. 00855477-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

SAT RRR Coord
Owner or Owner's Designee, Title

Date 5/9, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/2/07 to 5/10/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

J. J. [Signature]

Inspector's Signature

Commissions

ILL-1754

National Board, State Province, and Endorsements

Date:

MAY 10, 20 07

REV. NO.: 0

1.	Owner	<u>Exelon Nuclear</u>	Date	<u>4/13/07</u>
		Name		
		<u>4300 Winfield Road, Warrenville, IL</u>	Sheet	<u>1</u> of <u>1</u>
		Address		
2.	Plant	<u>Byron Nuclear Power Station</u>	Unit	<u>02</u>
		Name		
		<u>4450 N. German Church Road, Byron, IL</u>	Work Order No. 00675817 - 01	
		Address	Repair Organization, P.O. No., Job No., etc.	
3.	Work Performed by	<u>Byron Mechanical Maintenance</u>	Type Code Symbol Stamp	<u>Not Applicable</u>
		Name		
		<u>4450 N. German Church Road, Byron, IL</u>	Authorization No.	<u>Not Applicable</u>
		Address	Expiration Date	<u>Not Applicable</u>
4.	Identification of System	<u>"CV" CHEMICAL & VOLUME CONTROL</u>		
5.	(a) Applicable Construction Code	<u>ASME Section III 19 71 Edition, W72 Addenda, NO Code Case</u>		
	(b) Applicable Edition of Section XI Used for Repair/Replacement Activity:	<u>2001 Edition/2003 Addenda</u>		
	(c) Section XI Code Case(s)	<u>NONE</u>		
6.	Identification of Components			

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
SEAL WELD BODY TO CAP	Exelon Corporation	N/A	N/A	2CV8442 S/N: MA7-13	2006	INSTALLED	NO

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
Other ☐ Pressure n/a psi Test Temp. n/a °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order No. 00675817 - 01Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

S. M. RRR Cook
 Owner or Owner's Designee, Title

Date 5/9, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 5/15/06 to 5/10/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

S. M. RRR Cook
 Inspector's Signature

Commissions

166-1854
 National Board, State Province, and Endorsements

Date: May 10, 20 07

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 4/24/07
4300 Winfield Road, Warrenville, IL Sheet 1 of 1
Address
2. Plant Byron Nuclear Power Station Unit 02
4450 N. German Church Road, Byron, IL **Work Order No. 00675817-06**
Address Repair Organization, P.O. No., Job No., etc.
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp **Not Applicable**
4450 N. German Church Road, Byron, IL Authorization No. **Not Applicable**
Address Expiration Date **Not Applicable**
4. Identification of System CV – CHEMICAL VOLUME AND CONTROL
5. (a) Applicable Construction Code ASME Section III 19 74 Edition, S75 Addenda, NONE Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: 2001 Edition/2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
U-BOLT W/HEX NUTS	Elcen	N/A	N/A	2CV86004X	1985	REMOVED	NO
U-BOLT W/HEX NUTS	BERGEN-POWER	BP JOB# 9558A	N/A	CAT ID #24580 2CV86004X	2005	INSTALLED	NO
HEAVY HEX NUTS	NOVA	HEAT: B87035 TRACE CODE F390	N/A	CAT ID #37029 2CV86004X	2002	INSTALLED	NO
HEAVY HEX JAM NUTS	NOVA	HEAT# B87035	N/A	CAT ID #1394873 2CV86004X	2006	INSTALLED	NO

7. Description of Work REMOVE/RE-INSTALL SUPPORT. REPLACE U-BOLT / REPLACE U-BOLT HEX NUTS / ADD HEX JAM NUTS.
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
 VT-3 Other ☒ Pressure n/a psi Test Temp. n/a °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order No. 00675817-06

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] RRR Good
Owner or Owner's Designee, Title

Date 5/4, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 5/10/06 to 5/10/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions 122-1254
National Board, State Province, and Endorsements

Date: May 10, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|--|--|--|-----------------------|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>4/24/07</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. 00675817-08 | |
| | | Address | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>Byron Mechanical Maintenance</u> | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | | Name | Authorization No. | <u>Not Applicable</u> |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Expiration Date | <u>Not Applicable</u> |
| | | Address | | |
| 4. | Identification of System | <u>CV – CHEMICAL VOLUME AND CONTROL</u> | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III 19 74 Edition, S75 Addenda, NONE Code Case</u> | | |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: | <u>2001 Edition/2003 Addenda</u> | | |
| | (c) Section XI Code Case(s) | <u>NONE</u> | | |
| 6. | Identification of Components | | | |

[illegible]

- | | | | | | | | | |
|----|--|---|------------------------------------|---|---------------------------------|------------|-----|----|
| 7. | Description of Work <u>REMOVE/RE-INSTALL SUPPORT. REPLACE U-BOLT / REPLACE U-BOLT HEX NUTS / ADD HEX JAM NUTS.</u> | | | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input type="checkbox"/> | Exempt <input type="checkbox"/> | | | |
| | VT-3 | Other <input checked="" type="checkbox"/> | Pressure | n/a | psi | Test Temp. | n/a | °F |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order No. 00675817-08

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] RRR Cook
Owner or Owner's Designee, Title

Date 5/9, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 5/15/06 to 5/16/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

166-1254

National Board, State Province, and Endorsements

Date:

May 10, 20 07

-CORRECTED-

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 10/7/05
Name
4300 Winfield Road, Warrenville, IL 60555
Address
2. Plant Byron Nuclear Power Station Unit 02
Name
4450 N. German Church Road, Byron, IL 61010
Address
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp Not Applicable
Name
4450 N. German Church Road, Byron, IL 61010 Authorization No. Not Applicable
Address Expiration Date Not Applicable
4. Identification of System CHEMICAL AND VOLUME CONTROL - CV
5. (a) Applicable Construction Code Section III 19 71 Edition, W72 Addenda, NONE Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacement Components 19 89
(c) Section XI Code Cases used, NONE
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
RADIAL SEAL HOUSING	AIRCO VIKING	67953-91-AB	207	2CV01PB S/N: 49773	1976	REPLACED	NO
RADIAL SEAL HOUSING	FLOWERVE CORP	RLSA07218	N/A	2CV01PB S/N: 49773	2005	REPLACEMENT	YES
*RADIAL SEAL HOUSING	FLOWERVE CORP	RLSA07218	N/A	2CV01PB S/N: 49773	2005	*REPLACED	YES
*RADIAL SEAL HOUSING	AIRCO VIKING	67953-91-AB	207	2CV01PB S/N: 49773	1976	*REPLACEMENT	NO
RADIAL SEAL PLATE	AIRCO VIKING	818398-62-AB	207	2CV01PB S/N: 49773	1976	REPLACED	YES
RADIAL SEAL PLATE	FLOWERVE CORP	RLSA07396	N/A	2CV01PB S/N: 49773	2005	REPLACEMENT	YES
*RADIAL SEAL PLATE	FLOWERVE CORP	RLSA07396	N/A	2CV01PB S/N: 49773	2005	*REPLACED	YES
*RADIAL SEAL PLATE	AIRCO VIKING	818398-62-AB	207	2CV01PB S/N: 49773	1976	*REPLACEMENT	YES

7. Description of Work REPLACE RADIAL (INBOARD) AND THRUST (OUTBOARD) SEAL HOUSINGS AND SEAL PLATES. (*) SEE REMARKS.

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒
Other ☐ Pressure 2660 psi Test Temp 70 °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

-CORRECTED-

FORM NIS-2 SUPPLEMENTAL SHEET

1. Owner Exelon Nuclear Date 10/7/05
Name
4300 Winfield Road, Warrenville, IL
Address
Sheet 2 of 2
2. Plant Byron Nuclear Power Station Unit 02
Name
4450 N. German Church Road, Byron, IL
Address
Work Order No. 00719874-01 & -12
Repair Organization, P.O. No., Job No., etc.
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp Not Applicable
Name
4450 N. German Church Road, Byron, IL
Address
Authorization No. Not Applicable
Expiration Date Not Applicable
4. Identification of System CHEMICAL AND VOLUME CONTROL - CV
5. (a) Applicable Construction Code Section III 19 71 Edition, W72 Addenda, None Code Case
(b) Applicable Edition of Section XI Utilized for Repairs or Replacement Components 1989
(c) Section XI Code Cases used, None
6. Identification of Components Repaired or Replaced and Replacement Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Repaired, Replaced, or Replacement	ASME Code Stamped (Yes or No)
THRUST SEAL HOUSING	AIRCO VIKING	67953-92-AA	207	2CV01PB S/N: 49773	1976	REPLACED	NO
THRUST SEAL HOUSING	FLOWERVE CORP	RLSA07217	N/A	2CV01PB S/N: 49773	2005	REPLACEMENT	YES
THRUST SEAL PLATE	AIRCO VIKING	818398-78-AD	207	2CV01PB S/N: 49773	1976	REPLACED	YES
THRUST SEAL PLATE	FLOWERVE CORP	RLSA07602	N/A	2CV01PB S/N: 49773	2005	REPLACEMENT	NO

(Final)

-CORRECTED-

FORM NIS-2 (Back)

9. Remarks Work Order No. 00719874-12

Applicable Manufacturer's Data Reports to be attached

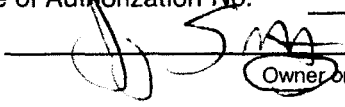
* WORK ORDER TASK -12 RE-INSTALLED THE ORIGINAL RADIAL SEAL HOUSING AND SEAL PLATE THAT WERE REMOVED IN TASK -01.

CERTIFICATE OF COMPLIANCE

We certify that the statements made in the report are correct and this REPLACEMENT conform to the rules of the ASME Code, Section XI.
repair or replacement

Type Code Symbol Stamp Not Applicable

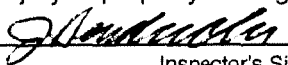
Certificate of Authorization No. Not Applicable

Signed  RRR Cond. Date 7/18, 20 06
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 7/13/06 to 7/18/06, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

 Commissions 126-1254
Inspector's Signature National Board, State Province, and Endorsements

Date: July 15, 20 06

DOCUMENT NO.: 3.1

REV. NO.: 0

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 04/12/2007
 Name
4300 Winfield Road, Warrenville, IL
 Address
2. Plant Byron Nuclear Power Station Unit 02
 Name
4450 N. German Church Road, Byron, IL
 Address
3. Work Performed by SHAW Type Code Symbol Stamp Not Applicable
 Name
36400 S. Essex Road, Wilmington, IL 60481
 Address
4. Identification of System CV – Chemical Volume Control
5. (a) Applicable Construction Code ASME Section III 19 74 Edition, S74 Addenda, 1644 Rev. 7,
1651, 1682, 1683, 1685, 1686, 1728, 1729, 1734, N-108, N-180 Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity 2001 Edition / 2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber PSA – 1	Pacific Scientific	17623	N/A	2CV08011S	1981	Removed	Yes
Snubber PSA – 1	Pacific Scientific	14767	N/A	2CV08011S	1981	Installed	Yes

7. Description of Work REPLACED SNUBBER

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
 VT-3 Other ☒ Pressure _____ psi Test Temp. _____ °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00855621-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed *Scott E. Smith* Date 4-28, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/13/07 to 4/28/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

John A. Smith

Inspector's Signature

Commissions

12L-1254

National Board, State Province, and
Endorsements

Date: April 28, 20 07

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|--|---|--|-----------------------|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>04/15/07</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>2</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. 00855771-01 | |
| | | Address | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>Byron Mechanical Maintenance</u> | Type Code Symbol Stamp | Not Applicable |
| | | Name | Authorization No. | Not Applicable |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Expiration Date | Not Applicable |
| | | Address | | |
| 4. | Identification of System | <u>CV – Chemical and Volume Control</u> | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III 19 71 Edition, W/72 Addenda, None</u> Code Case | | |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: | <u>2001 Edition/2003 Addenda</u> | | |
| | (c) Section XI Code Case(s) | <u>None.</u> | | |
| 6. | Identification of Components | | | |

[illegible]

7. Description of Work Replace Radial Seal Housing and Radial Seal Plate to accommodate installation of the new design Mechanical Seal.
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Exempt ☐
Other ☐ Pressure 2600 psi Test Temp. 68 °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WO 00855771-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

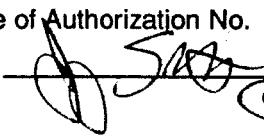
Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed



RRR
Owner or Owner's Designee, Title

Date 5/14, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 7/14/06 to 5/15/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.


Inspector's Signature

Commissions

166-1254
National Board, State Province, and Endorsements

Date: May 15, 20 07

FORM NIS-2 (Back)

9. Remarks REPLACEMENT OF VALVE 2CV8121 PER WO# 00856237-01
Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed [Signature] RRR Card Date 6/21, 20 07
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 5/23/06 to 6/21/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions 16L-1254
Inspector's Signature National Board, State Province, and Endorsements

Date: June 22, 20 07

As Required by the Provisions of the ASME Code Section XI

- [illegible]

- Note:** Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00876146-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

Scott E. Smith

Date 4-28, 20 07

Owner of Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 11/27/06 to 4/28/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James M. Smith

Inspector's Signature

Commissions

126-1254

National Board, State Province, and
Endorsements

Date: April 28, 20 07

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|------------------------------|---|---|---|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>04/05/2007</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. 00873147-01 | |
| | | Address | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>N P S & W VENTURE</u> | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | | Name | Authorization No. | <u>Not Applicable</u> |
| | | <u>36400 S. Essex Road, Wilmington, IL 60481</u> | Expiration Date | <u>Not Applicable</u> |
| | | Address | | |
| 4. | Identification of System | <u>CV</u> | | |
| 5. | (a) | Applicable Construction Code | <u>ASME Section III</u> | <u>19 74</u> Edition, <u>S74</u> Addenda, <u>1644 Rev. 7,</u> |
| | | | <u>1651, 1682, 1683, 1685, 1686, 1728, 1729, 1734, N-108, N-180</u> | <u>Code Case</u> |
| | (b) | Applicable Edition of Section XI Used for Repair/Replacement Activity <u>2001</u> Edition / <u>2003</u> Addenda | | |
| | (c) | Section XI Code Case(s) <u>NONE</u> | | |
| 6. | Identification of Components | | | |

[illegible]

- | | | | | | | |
|----|---------------------|---|------------------------------------|---|---------------------------------|----|
| 7. | Description of Work | <u>REPLACED SNUBBER</u> | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input type="checkbox"/> | Exempt <input type="checkbox"/> | |
| | VT-3 | Other <input checked="" type="checkbox"/> | Pressure | psi | Test Temp. | °F |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00873147-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed *Scott Caporale* Date 4-28, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/27/07 to 4/28/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Scott Caporale Commissions 111-1254
Inspector's Signature National Board, State Province, and Endorsements

Date: April 28, 20 07

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 04/15/07
4300 Winfield Road, Warrenville, IL
 Name
 Address
2. Plant Byron Nuclear Power Station Unit 2
4450 N. German Church Road, Byron, IL
 Name
 Address
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp Not Applicable
4450 N. German Church Road, Byron, IL
 Name
 Address
4. Identification of System CV – CHEMICAL VOLUME AND CONTROL
5. (a) Applicable Construction Code ASME Section III 19 71 Edition, S72 Addenda, NONE Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: 2001 Edition/2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
PLUG	COPEs VULCAN	9550-96109-1-1 (96-3)	N/A	2CV121	1996	REMOVED	YES
PLUG	COPEs VULCAN	0621-132359-1-2 (0602)	N/A	CAT ID #45442 2CV121	2007	INSTALLED	YES

7. Description of Work REPLACE VALVE TRIM, INCLUDING VALVE PLUG

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
 Other ☐ Pressure n/a psi Test Temp. n/a °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order No. 00904435-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] SAA RRR Coord
Owner or Owner's Designee, Title

Date 5/14, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 5/22/06 to 5/14/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

ILL-1254

National Board, State Province, and Endorsements

Date: May 14, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|--|--|--|-----------------------|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>3/25/07</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. 01004220-19 | |
| | | Address | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>Byron Mechanical Maintenance</u> | Type Code Symbol Stamp | Not Applicable |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Authorization No. | Not Applicable |
| | | Address | Expiration Date | Not Applicable |
| 4. | Identification of System | CV – CHEMICAL & VOLUME CONTROL | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III 19 74 Edition, S75 Addenda, NONE Code Case</u> | | |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: | 2001 Edition/2003 Addenda | | |
| | (c) Section XI Code Case(s) | <u>NONE</u> | | |
| 6. | Identification of Components | | | |

[illegible]

- | | | | | | | | | |
|----|---|--------------------------------------|------------------------------------|--|---------------------------------|-----|----|--|
| 7. | Description of Work <u>CUT DEMIN RESIN FILL LINE / PIPE NOZZLE TO REMOVE FILL LINE FOR ACCESS TO REPAIR INTERNAL RESIN SCREEN. REWELD ORIGINAL PIPE BACK IN PLACE</u> | | | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input checked="" type="checkbox"/> | Exempt <input type="checkbox"/> | | | |
| | | Other <input type="checkbox"/> | Pressure | 88 / 137 psi | Test Temp. | 105 | °F | |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WO#01004220-19

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature]
Owner or Owner's Designee, Title

Date 6/13, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 3/2/07 to 6/19/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions

111-1254
National Board, State Province, and Endorsements

Date: June 19, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 4/16/07
 4300 Winfield Road, Warrenville, IL
 Name Address Sheet 1 of 1
 4450 N. German Church Road, Byron, IL
 Name Address
2. Plant Byron Nuclear Power Station Unit 02
 4450 N. German Church Road, Byron, IL
 Name Address Work Order No. 01015964-01
 Address Repair Organization, P.O. No., Job No., etc.
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp Not Applicable
 4450 N. German Church Road, Byron, IL
 Name Address Authorization No. Not Applicable
 Address Expiration Date Not Applicable
4. Identification of System CV – CHEMICAL VOLUME AND CONTROL
5. (a) Applicable Construction Code ASME Section III 1971 Edition, W72 Addenda, NO Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: 2001 Edition/2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
DISC	KEROTEST	UP-9909-9-(1) CODE: KJ	5743	2CV8345 S/N DG7-17	1975	REMOVED	NO
DISC	KEROTEST	S/N: JAR3-6 HT# 28984	N/A	2CV8345 CAT ID #1924	1980	INSTALLED	YES

7. Description of Work REPAIR SEAT LEAKAGE, REPLACE DISC

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
 Other ☐ Pressure N/A psi Test Temp. N/A °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order No. 01015964-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

SA RRR Coord
Owner or Owner's Designee, Title

Date 5/10, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/5/07 to 5/11/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

SA
Inspector's Signature

Commissions

116-1254
National Board, State Province, and Endorsements

Date: May 11, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 4/16/07
4300 Winfield Road, Warrenville, IL
 Name
 Address
2. Plant Byron Nuclear Power Station Sheet 1 of 1
4450 N. German Church Road, Byron, IL
 Name
 Address
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp Not Applicable
4450 N. German Church Road, Byron, IL
 Name
 Address
4. Identification of System CV – CHEMICAL VOLUME AND CONTROL
5. (a) Applicable Construction Code ASME Section III 19 71 Edition, W/72 Addenda, None Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: 2001 Edition/2003 Addenda
 (c) Section XI Code Case(s) None.
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Body to Cover Seal weld	Kerotest	Body: UP-9911-1-(1)Z: KYA Cvr: UP-9911-2-(1)Z: KL	9433	2CV8372A S/N: KYA4-8	1976	Removed	Yes
Body to Cover Seal weld	Kerotest	Body: UP-9911-1-(1)Z: KYA Cvr: UP-9911-2-(1)Z: KL	9433	2CV8372A S/N: KYA4-8	1976	Installed	Yes

7. Description of Work Remove Existing Seal Weld, Replace gasket and Re-install Seal Weld
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Exempt ☐
 Other ☐ Pressure 2368 psi Test Temp. 105 °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WO 01016167-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed SM RRR Coord Date 6/21, 20 07
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/10/07 to 6/22/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions 121-125A
Inspector's Signature National Board, State Province, and Endorsements

Date: June 22, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | |
|---------------------------------|--|--|-----------------------|
| 1. Owner | <u>Exelon Nuclear</u> | Date | <u>3/1/06</u> |
| | Name | Sheet | <u>1</u> of <u>1</u> |
| | <u>4300 Winfield Road, Warrenville, IL</u> | | |
| | Address | Unit | <u>02</u> |
| 2. Plant | <u>Byron Nuclear Power Station</u> | | |
| | Name | | |
| | <u>4450 N. German Church Road, Byron, IL</u> | | |
| | Address | | |
| 3. Work Performed by | <u>Byron Mechanical Maintenance</u> | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | Name | Authorization No. | <u>Not Applicable</u> |
| | <u>4450 N. German Church Road, Byron, IL</u> | Expiration Date | <u>Not Applicable</u> |
| | Address | | |
| 4. Identification of System | <u>[DO] Diesel oil</u> | | |
| 5. (a) | Applicable Construction Code | <u>ASME Section III 19 77 Edition, S/77 Addenda, N/A</u> | Code Case |
| (b) | Applicable Edition of Section XI Used for Repair/Replacement Activity: | <u>2001 Edition/2003 Addenda</u> | |
| (c) | Section XI Code Case(s) | <u>NONE</u> | |
| 6. Identification of Components | | | |

[illegible]

- | | | | | | | | |
|----|--------------------------------|--|------------------------------------|--|---------------------------------|------|----|
| 7. | Description of Work | SET POINT CHANGE,BENCH TEST AND REPLACE RELIEF VALVE | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input checked="" type="checkbox"/> | Exempt <input type="checkbox"/> | | |
| | Other <input type="checkbox"/> | Pressure | 34 | psi | Test Temp. | 80.1 | °F |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00734959-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] SA RRR Coord
Owner or Owner's Designee, Title

Date 3/15, 2006

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 1/9/06 to 3/15/06, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions

1LL-1A54
National Board, State Province, and Endorsements

Date: March 15, 2006

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | | |
|----|--|--|------------------------|--|-------------|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>03-07-06</u> | |
| | | Name | | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> | of <u>1</u> |
| | | Address | | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> | |
| | | Name | | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. | <u>00734960-01</u> | |
| | | Address | | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>Byron Mechanical Maintenance</u> | Type Code Symbol Stamp | <u>Not Applicable</u> | |
| | | Name | | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Authorization No. | <u>Not Applicable</u> | |
| | | Address | Expiration Date | <u>Not Applicable</u> | |
| 4. | Identification of System | <u>[DO] Diesel Oil</u> | | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III 19 77 Edition, S/77 Addenda, N/A</u> | | | |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: | <u>2001 Edition/2003 Addenda</u> | | | |
| | (c) Section XI Code Case(s) | <u>N/A</u> | | | |
| 6. | Identification of Components | | | | |

[illegible]

- | | | | | | | | |
|----|--------------------------------|---|------------------------------------|--|---------------------------------|------|----|
| 7. | Description of Work | Set point change, bench test and replace relief valve | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input checked="" type="checkbox"/> | Exempt <input type="checkbox"/> | | |
| | Other <input type="checkbox"/> | Pressure | 39 | psi | Test Temp. | 84.9 | °F |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks W/O# 00734960-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed [Signature] RRR Creed Date 3/15, 20 06
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 1/19/06 to 3/15/06, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions 12L-1254
Inspector's Signature National Board, State Province, and Endorsements

Date: March 15, 20 06

DOCUMENT NO.: 4A

REV. NO.: 0

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 3/1/06
4300 Winfield Road, Warrenville, IL Sheet 1 of 1
Address
2. Plant Byron Nuclear Power Station Unit 02
4450 N. German Church Road, Byron, IL **Work Order No. 00734961-01**
Address Repair Organization, P.O. No., Job No., etc.
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp Not Applicable
4450 N. German Church Road, Byron, IL Authorization No. Not Applicable
Address Expiration Date Not Applicable
4. Identification of System [DO] Diesel Oil
5. (a) Applicable Construction Code ASME Section III 1977 Edition, S/77 Addenda, N/A Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: 2001 Edition/2003 Addenda
 (c) Section XI Code Case(s) N/A
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Relief Valve	Crosby Valve	N62578-00-0018	N/A	ETN: 2DO020C	1993	Removed	Yes
Relief Valve	Crosby Valve	N62578-00-0014	N/A	Cat Id# 1403705 ETN: 2DO020C	1980	Installed	Yes

7. Description of Work SET POINT CHANGE, BENCH TEST AND REPLACE RELIEF VALVE

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Exempt ☐
 Other ☐ Pressure 36 psi Test Temp. 80.1 °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order 00734961-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] RRR Coach
Owner or Owner's Designee, Title

Date 3/15, 20 06

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 1/19/06 to 3/15/06, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions

126-1254
National Board, State Province, and Endorsements

Date: March 15, 20 06

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | |
|--|---|------------------------|--|
| 1. Owner | <u>Exelon Nuclear</u> | Date | <u>03-07-06</u> |
| | Name | Sheet | <u>1</u> of <u>1</u> |
| | <u>4300 Winfield Road, Warrenville, IL</u> | | |
| | Address | Unit | <u>02</u> |
| 2. Plant | <u>Byron Nuclear Power Station</u> | | |
| | Name | | |
| | <u>4450 N. German Church Road, Byron, IL</u> | | |
| | Address | | |
| | | | <u>Work Order No. 00734963-01</u> |
| | | | Repair Organization, P.O. No., Job No., etc. |
| 3. Work Performed by | <u>Byron Mechanical Maintenance</u> | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | Name | Authorization No. | <u>Not Applicable</u> |
| | <u>4450 N. German Church Road, Byron, IL</u> | Expiration Date | <u>Not Applicable</u> |
| | Address | | |
| 4. Identification of System | <u>[DO] Diesel Oil</u> | | |
| 5. (a) Applicable Construction Code | <u>ASME Section III 1977 Edition, S/77 Addenda, N/A</u> | | |
| (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: | <u>2001 Edition/2003 Addenda</u> | | |
| (c) Section XI Code Case(s) | <u>N/A</u> | | |
| 6. Identification of Components | | | |

[illegible]

- | | | | | | | | |
|----|---------------------|---|------------------------------------|--|---------------------------------|----|--|
| 7. | Description of Work | Set point change, bench test and replace relief valve | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input checked="" type="checkbox"/> | Exempt <input type="checkbox"/> | | |
| | | Other <input type="checkbox"/> | Pressure 38 | psi | Test Temp. 84.9 | °F | |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks W/O# 00734963-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature]
Owner or Owner's Designee, Title

Date 3/15, 20 06

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 1/19/06 to 3/15/06, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions

166-1254
National Board, State Province, and Endorsements

Date: March 15, 20 06

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|--|--|--|---|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>2/21/07</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>00</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. 00972102-01 | |
| | | Address | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>Byron Mechanical Maintenance</u> | Type Code Symbol Stamp | Not Applicable |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Authorization No. | Not Applicable |
| | | Address | Expiration Date | Not Applicable |
| 4. | Identification of System | FP FIRE PROTECTION | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III</u> | <u>19 74</u> Edition, | <u>S75</u> Addenda, <u>None</u> Code Case |
| | | | <u>19 77</u> | <u>W78</u> (Valve) |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: | 2001 Edition/2003 Addenda | | |
| | (c) Section XI Code Case(s) | <u>N/A</u> | | |
| 6. | Identification of Components | | | |

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
VALVE	ITT GRINNELL VALVE CO.	80-52894-5-123	N/A	0FP623	1981	REMOVED	YES
VALVE	ITT ENGR.VALVES	733744-001-003	N/A	0FP623	2004	INSTALLED	YES
PIPE 2"	GULF STATES TUBE DIV	MK# AA	N/A	0FP262A	1977	REMOVED	NO
PIPE 2"	CONSOLIDATED POWER SUPPLY	HT: A82900	N/A	0FP262A	2006	INSTALLED	NO

- | | | | | | | | |
|----|---------------------|--------------------------------------|------------------------------------|--|---------------------------------|----|--|
| 7. | Description of Work | REPLACE THE VALVE AND PIPE | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input checked="" type="checkbox"/> | Exempt <input type="checkbox"/> | | |
| | | Other <input type="checkbox"/> | Pressure 180 | psi | Test Temp. 70.8 | °F | |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WO# 00972102-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

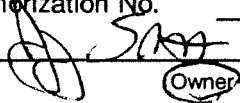
Type Code Symbol Stamp _____

Not Applicable

Certificate of Authorization No. _____

Not Applicable

Signed _____



RRR Coord

Owner or Owner's Designee, Title

Date 3/19, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 12/15/06 to 3/23/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.


Inspector's Signature

Commissions _____

ILL-1254
National Board, State Province, and Endorsements

Date: March 24, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|------------------------------|---|-------------------------|--|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>04/10/2007</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. | <u>00816429-01</u> |
| | | Address | | Repair Organization, P.O. No., Job No., etc. |
| 3. | Work Performed by | <u>SHAW</u> | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | | Name | Authorization No. | <u>Not Applicable</u> |
| | | <u>36400 S. Essex Road, Wilmington, IL 60481</u> | Expiration Date | <u>Not Applicable</u> |
| | | Address | | |
| 4. | Identification of System | <u>FW - Feedwater</u> | | |
| 5. | (a) | Applicable Construction Code | <u>ASME Section III</u> | <u>1974</u> Edition, <u>S74</u> Addenda, <u>1644 Rev. 7,</u> |
| | | <u>1651, 1682, 1683, 1685, 1686, 1728, 1729, 1734, N-108, N-180</u> | | <u>Code Case</u> |
| | (b) | Applicable Edition of Section XI Used for Repair/Replacement Activity | <u>2001</u> | Edition / <u>2003</u> Addenda |
| | (c) | Section XI Code Case(s) | <u>NONE</u> | |
| 6. | Identification of Components | | | |

[illegible]

- | | | | | | |
|----|---|---|------------------------------------|---|---------------------------------|
| 7. | Description of Work <u>REPLACED SNUBBER</u> | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input type="checkbox"/> | Exempt <input type="checkbox"/> |
| | VT-3 | Other <input checked="" type="checkbox"/> | Pressure | psi | Test Temp. °F |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00816429-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed *Scott E. Smith* Date 4-28, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period

4/19/07 to 4/29/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

John A. Smith
Inspector's Signature

Commissions 166-1254
National Board, State Province, and
Endorsements

Date: April 29, 20 07

(Final)

Sheet 1 of 1

Repair Organization, P.O. No., Job No., etc.

Expiration Date	Not Applicable
-----------------	----------------

Identification of System	Main Feedwater [FW]
--------------------------	----------------------------

(a) Applicable Construction Code ASME Section III 19 74 Edition, W/75* Addenda, None Code Case

(b) Applicable Edition of Section XI Used for Repair/Replacement Activity: **2001 Edition/2003 Addenda**

(c) Section XI Code Case(s) NONE

Identification of Components



Description of Work REPLACED THERMOCOUPLES TO 2FW009C VALVE BODY



FORM NIS-2 (Back)

9. Remarks Work Order No. 00866245-03

Applicable Manufacturer's Data Reports to be attached

* Thermocouple spot welding to be in accordance with ASME Section III NC-4311.2, 1992 Ed/1992 Addenda
per EC 347800 and Valve Drwg 80210 Revision L.

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] RPR Cook
Owner or Owner's Designee, Title

Date 5/8, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 1/23/06 to 5/8/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

ILL-1254

National Board, State Province, and Endorsements

Date: May 8, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|---|--|--|-----------------------|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>04/18/07</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. 00634675-01 | |
| | | Address | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>NWS Technologies</u> | Type Code Symbol Stamp | <u>VR/NR</u> |
| | | Name | Authorization No. | <u>632/81</u> |
| | | <u>131 Venture Boulevard, Spartanburg SC 29306</u> | Expiration Date | <u>4/3/09, 4/9/09</u> |
| | | Address | | |
| 4. | Identification of System | <u>MAIN STEAM (MS)</u> | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III 1974 Edition, No Addenda, None</u> Code Case | | |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity | <u>2001</u> Edition / <u>2003</u> Addenda | | |
| | (c) Section XI Code Case(s) | <u>NONE</u> | | |
| 6. | Identification of Components | | | |

[illegible]

- | | | | | | | | | | |
|----|---------------------|--|------------------------------------|---|--|------------|-----|----|--|
| 7. | Description of Work | REPLACE VALVE DISC WITH INCONEL X-750 VALVE DISC | | | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input type="checkbox"/> | Exempt <input checked="" type="checkbox"/> | | | | |
| | | Other <input type="checkbox"/> | Pressure | n/a | psi | Test Temp. | n/a | °F | |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WORK ORDER 00634675-01

Applicable Manufacturer's Data Reports to be attached
NWS Technologies performed work under Purchase Order 420985.

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] RRR Carol
Owner or Owner's Designee, Title

Date 5/14, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 11/1/06 to 5/14/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

5/14/07 to 5/14/07 122-1254
National Board, State Province, and Endorsements

Date: May 14, 20 07

FORM NVR-1 REPORT OF REPAIR ☒ REPLACEMENT ☒ OF NUCLEAR PRESSURE RELIEF DEVICES

1. Work performed by: NWS Technologies, LLC Purchase Order # 00420985
131 Venture Boulevard, Spartanburg, SC 29306
2. Work performed for: Exelon Corporation, Byron Nuclear Station
- 3/4. Owner - name, address and identification of nuclear power plant: Exelon Corporation,
Byron Nuclear Station 4450 N. German Church Road Byron, IL 61010
5. a: Repaired pressure relief device: Main Steam Safety Valve
b: Name of manufacturer: Consolidated / Dresser
c: Identifying nos.
- | | | | | | |
|---|----------------------------|--------------------------|--------------------------------|-----------------------------|----------------------------|
| <u>3707R</u> | <u>BU01488</u> | <u>n/a</u> | <u>steam</u> | <u>6"</u> | <u>78</u> |
| <small>(type)</small> | <small>(mfr's S/N)</small> | <small>(NB#)</small> | <small>(service)</small> | <small>(size)</small> | <small>(yr. built)</small> |
| d: Construction Code: <u>ASME Section III</u> | <u>1974</u> | <u>n/a</u> | <u>n/a</u> | <u>2</u> | |
| <small>(name/section/division)</small> | <small>(edition)</small> | <small>(addenda)</small> | <small>(Code Cases(s))</small> | <small>(Code Class)</small> | |
6. ASME Code Section XI applicable for inservice inspection: 2001 2003 n/a
(edition) (addenda) (Code Case(s))
7. ASME Code Section XI used for repairs, replacements: 2001 2003 n/a
(edition) (addenda) (Code Case(s))
8. Construction Code used for repairs, replacements: 1974 n/a n/a
(edition) (addenda) (Code Case(s))
9. Design responsibilities: n/a
10. Opening pressure: 1205 psig
Set-pressure adjustment made at: NWS Technologies, LLC using steam
11. Description of work (include name and identifying number of replacement parts): Disassembled, cleaned, inspected,
lapped nozzle & passivated seat area, installed anti-guide-movement modification EC#340678, replaced
spindle and compression screw, installed pre-oxidized X750 disc EC#79123, assembled. Certified
set-pressure and seat tightness using steam.
12. Remarks: New disc s/n ADG25 installed. NWS Traveler # 07-81.

CERTIFICATE OF COMPLIANCE

I, Cesar V. Sierra certify that to the best of my knowledge and belief the statements made in this report are correct and the repair, modification or replacement of the pressure relief devices described above conforms to Section XI of the ASME Code and the National Board Inspection Code "VR" and "NR" rules.

National Board Certificate of Authorization No. 632 to use the "VR" stamp expires April 3, 2009.

National Board Certificate of Authorization No. 81 to use the "NR" stamp expires April 9, 2009.

4/10/07 NWS Technologies, LLC [Signature] QA Manager
Date Repair Organization Authorized representative Title

CERTIFICATE OF INSPECTION

I, Charles F. Toegel Jr. holding a valid commission issued by The National Board of Boiler and Pressure Vessel Inspectors and certificate of competency issued by the jurisdiction of North Carolina and employed by Hartford Steam Boiler of CT of Hartford, CT have inspected the repair, modification or replacement described in this report on 10 APR. 2007 and state that to the best of my knowledge and belief, this repair, modification or replacement has been completed in accordance with Section XI of the of the ASME Code and the National Board Inspection Code "VR" and "NR" rules.

By signing this certificate, neither the undersigned nor my employer makes any warranty, expressed or implied, concerning this repair, modification or replacement described in this report. Furthermore, neither the undersigned nor my employer shall be liable in any manner for any personal injury, property damage or loss of any kind arising from or connected with this inspection.

4/10/07 [Signature] NB # 8462, A, N, I NC# 1073
Date Inspector's Signature Commissions (NB (incl endorsements), jurisdiction, & no.)

HSE-1000
904/07

133498

1.	Owner	<u>Exelon Nuclear</u>	Date	<u>04/15/07</u>
		Name		
		<u>4300 Winfield Road, Warrenville, IL</u>	Sheet	<u>1</u> of <u>1</u>
		Address		
2.	Plant	<u>Byron Nuclear Power Station</u>	Unit	<u>02</u>
		Name		
		<u>4450 N. German Church Road, Byron, IL</u>	Work Order No.	<u>00787945-01</u>
		Address		Repair Organization, P.O. No., Job No., etc.
3.	Work Performed by	<u>NWS Technologies</u>	Type Code Symbol Stamp	<u>VR / NR</u>
		Name	Authorization No.	<u>632 / 81</u>
		<u>131 Venture Boulevard, Spartanburg SC 29306</u>	Expiration Date	<u>4/3/09 / 4/9/09</u>
		Address		
4.	Identification of System	<u>MAIN STEAM (MS)</u>		
5.	(a) Applicable Construction Code	<u>ASME Section III</u>	<u>19 74</u> Edition,	<u>NO</u> Addenda, <u>None</u> Code Case
	(b) Applicable Edition of Section XI Used for Repair/Replacement Activity	<u>2001</u>	Edition /	<u>2003</u> Addenda
	(c) Section XI Code Case(s)	<u>NONE</u>		
6.	Identification of Components			

[illegible]

7.	Description of Work BY VENDOR	<u>REPLACE VALVE DISC WITH X-750 INCONEL DISC PER EC# 79123</u>
----	----------------------------------	---

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
Other ☐ Pressure n/a psi Test Temp. n/a °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WORK ORDER 00787945-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] RRR Coord
Owner or Owner's Designee, Title

Date 5/16, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 11/1/06 to 5/4/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions 166-1254
National Board, State Province, and Endorsements

Date: May 16, 20 07

FORM NVR-1 REPORT OF REPAIR ☒ REPLACEMENT ☒ OF NUCLEAR PRESSURE RELIEF DEVICES

1. Work performed by: NWS Technologies, LLC ✓ Purchase Order # 00420985
131 Venture Boulevard, Spartanburg, SC 29306
2. Work performed for: Exelon Corporation, Byron Nuclear Station
- 3/4. Owner - name, address and identification of nuclear power plant: Exelon Corporation,
Byron Nuclear Station 4450 N. German Church Road Byron, IL 61010
5. a: Repaired pressure relief device: Main Steam Safety Valve
b: Name of manufacturer: Consolidated / Dresser
c: Identifying nos.

<u>3707R</u> ✓ (type)	<u>BU01478</u> ✓ (mfr's S/N)	<u>n/a</u> (NBR)	<u>steam</u> (service)	<u>6"</u> (size)	<u>78</u> (yr. built)
--------------------------	---------------------------------	---------------------	---------------------------	---------------------	--------------------------
- d: Construction Code:

<u>ASME Section III</u> (name/section/division)	<u>1974</u> (edition)	<u>n/a</u> (addenda)	<u>n/a</u> (Code Cases(s))	<u>2</u> (Code Class)
--	--------------------------	-------------------------	-------------------------------	--------------------------
6. ASME Code Section XI applicable for inservice inspection:

<u>2001</u> ✓ (edition)	<u>2003</u> ✓ (addenda)	<u>n/a</u> (Code Case(s))
----------------------------	----------------------------	------------------------------
7. ASME Code Section XI used for repairs, replacements:

<u>2001</u> ✓ (edition)	<u>2003</u> ✓ (addenda)	<u>n/a</u> (Code Case(s))
----------------------------	----------------------------	------------------------------
8. Construction Code used for repairs, replacements:

<u>1974</u> (edition)	<u>n/a</u> (addenda)	<u>n/a</u> (Code Case(s))
--------------------------	-------------------------	------------------------------
9. Design responsibilities: n/a
10. Opening pressure: 1235 psig ✓
Set-pressure adjustment made at: NWS Technologies, LLC using steam
11. Description of work (include name and identifying number of replacement parts): Disassembled, cleaned, inspected,
lapped nozzle & passivated seat area, installed anti-guide-movement modification EC#340678, installed
anti-vibration modification EC#339376, installed pre-oxidized X750 disc EC#79123, assembled. Certified
set-pressure and seat tightness using steam.
12. Remarks: New disc s/n ADG12 installed. NWS Traveler # 07-80

CERTIFICATE OF COMPLIANCE

I, Cesar V. Sierra certify that to the best of my knowledge and belief the statements made in this report are correct and the repair, modification or replacement of the pressure relief devices described above conforms to Section XI of the ASME Code and the National Board Inspection Code "VR" and "NR" rules.

National Board Certificate of Authorization No. 632 to use the "VR" stamp expires April 3, 2009. ✓
National Board Certificate of Authorization No. 81 to use the "NR" stamp expires April 9, 2009. ✓

4/10/07 NWS Technologies, LLC *Cesar V. Sierra* QA Manager
Date Repair Organization Authorized representative Title

CERTIFICATE OF INSPECTION

I, Charles F. Toegel Jr. holding a valid commission issued by The National Board of Boiler and Pressure Vessel Inspectors and certificate of competency issued by the jurisdiction of North Carolina and employed by Hartford Steam Boiler of CT of Hartford, CT have inspected the repair, modification or replacement described in this report on 10 APR. 2007 and state that to the best of my knowledge and belief, this repair, modification or replacement has been completed in accordance with Section XI of the of the ASME Code and the National Board Inspection Code "VR" and "NR" rules.

By signing this certificate, neither the undersigned nor my employer makes any warranty, expressed or implied, concerning this repair, modification or replacement described in this report. Furthermore, neither the undersigned nor my employer shall be liable in any manner for any personal injury, property damage or loss of any kind arising from or connected with this inspection.

4/10/07 *Charles F. Toegel Jr.* NB # 8462, A, N, I NC# 1073
Date Inspector's Signature Commissions (NB incl endorsements), jurisdiction, & no.)

133498

DOCUMENT NO.: 3.2

REV. NO.: 0

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 4-4-07
4300 Winfield Road, Warrenville, IL Sheet 1 of 1
 Name
 Address
2. Plant Byron Nuclear Power Station Unit 02
4450 N. German Church Road, Byron, IL Work Order No. 00877381-01
 Name
 Address Repair Organization, P.O. No., Job No., etc.
3. Work Performed by SHAW Type Code Symbol Stamp Not Applicable
 Name
36400 S. Essex Road, Wilmington, IL 60481 Authorization No. Not Applicable
 Address Expiration Date Not Applicable
4. Identification of System MS - MAINSTEAM
5. (a) Applicable Construction Code ASME Section III 19 74 Edition, S74 Addenda, 1644 Rev. 7,
1651, 1682, 1683, 1685, 1686, 1728, 1729, 1734, N-108, N-180 Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity 2001 Edition / 2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
PIVOT PINS	GRINNELL	897	N/A	2MS08007S	1985	Removed	NO
TAPERED PINS	ANVIL	HT# 8868610	N/A	2MS08007S CAT ID 1396339	2006	Installed	NO

7. Description of Work REPLACED LOAD PINS
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
VT-3 Other ☒ Pressure _____ psi Test Temp. _____ °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00877381-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed *Scott Caporaso* Date 4-28, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 3/31/07 to 4/18/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Andrew...
Inspector's Signature

Commissions

ILL-1254
National Board, State Province, and
Endorsements

Date: April 28, 20 07

(Final)

DOCUMENT NO.: 3.2

REV. NO.: 0

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 4-4-07
4300 Winfield Road, Warrenville, IL Sheet 1 of 1
Address
2. Plant Byron Nuclear Power Station Unit 02
4450 N. German Church Road, Byron, IL Work Order No. 00877382-01
Address Repair Organization, P.O. No., Job No., etc.
3. Work Performed by SHAW Type Code Symbol Stamp Not Applicable
36400 S. Essex Road, Wilmington, IL 60481 Authorization No. Not Applicable
Address Expiration Date Not Applicable
4. Identification of System MS - MAINSTEAM
5. (a) Applicable Construction Code ASME Section III 1974 Edition, S74 Addenda, 1644 Rev. 7,
1651, 1682, 1683, 1685, 1686, 1728, 1729, 1734, N-108, N-180 Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity 2001 Edition / 2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
PIVOT PINS	GRINNELL	2673	N/A	2MS08007S	1983	Removed	NO
TAPERED PINS	ANVIL	HT# 8868610	N/A	2MS08007S CAT ID 1396339	2006	Installed	NO

7. Description of Work REPLACED LOAD PINS

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐

VT-3 Other ☒ Pressure _____ psi Test Temp. _____ °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00877381-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed Scott Esposito Date 4-28, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 3/31/07 to 4/28/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Inspector's Signature

Commissions 111-1254

National Board, State Province, and Endorsements

Date: April 28, 20 07

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|---|--|--|-----------------------|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>04/30/07</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. 00878358-01/03 | |
| | | Address | Repair Organization, P.O. No., Job No., etc. | |
| 3. | Work Performed by | <u>Shaw/Stone & Webster</u> | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | | Name | Authorization No. | <u>Not Applicable</u> |
| | | <u>36400 S. Essex Road, Wilmington, IL 60481</u> | Expiration Date | <u>Not Applicable</u> |
| | | Address | | |
| 4. | Identification of System | <u>PRIMARY CONTAINMENT PENETRATIONS - PC</u> | | |
| 5. | (a) Applicable Construction Code | <u>ASME Section III 19 74 Edition, S75 Addenda, NONE</u> Code Case | | |
| | (b) Applicable Edition of Section XI Used for Repair/Replacement Activity | <u>2001</u> Edition / <u>2003</u> Addenda | | |
| | (c) Section XI Code Case(s) | <u>NONE</u> | | |
| 6. | Identification of Components | | | |

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
STUD BOLT, 3/4", SA193 Gr. B7 (2)	Cardinal Industrial Products	Code: D3	N/A	2PC064M	1983	Removed	NO
STUD BOLT, 3/4", SA193 Gr. B7 (2)	Nova Machine Products	HT: 223432 ✓ Lot: 50002321	N/A	2PC064M	2004	Installed	NO
NUT, 3/4" SA194 Gr. 2H (4)	Chicago Tube & Iron	HT: 6024521 Code: JLC	N/A	2PC064M	1981	Removed	NO
NUT, 3/4" SA194 Gr. 2H (2)	Nova Machine Products	HT: S67159 ✓ Lot: 50067564	N/A	2PC064M	2006	Installed	NO
NUT, 3/4" SA194 Gr. 2H (2)	Nova Machine Products	HT: S67159 ✓ Lot: 50047815	N/A	2PC064M	2005	Installed	NO

- | | | | | | | | | |
|----|--|---|------------------------------------|---|-----|---------------------------------|-----|----|
| 7. | Description of Work <u>REPLACED STUDS AND NUTS ON FLANGE HOLES #4 AND #11.</u> | | | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input type="checkbox"/> | | Exempt <input type="checkbox"/> | | |
| | VT-3 | Other <input checked="" type="checkbox"/> | Pressure | n/a | psi | Test Temp. | n/a | °F |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks Work Order No. 00878358-01/03

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed [Signature] RRR Cook Date 5/14, 20 07
Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/4/07 to 5/14/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature] Commissions ILL-1254
Inspector's Signature National Board, State Province, and Endorsements

Date: May 14, 20 07

DOCUMENT NO.: 3.2

REV. NO.: 0

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 4-7-07
 Name
4300 Winfield Road, Warrenville, IL
 Address
2. Plant Byron Nuclear Power Station Unit 02
 Name
4450 N. German Church Road, Byron, IL
 Address
3. Work Performed by N P S & W VENTURE Type Code Symbol Stamp Not Applicable
 Name
36400 S. Essex Road, Wilmington, IL 60481
 Address
4. Identification of System RC - Reactor Coolant
5. (a) Applicable Construction Code ASME Section III 1974 Edition, S74 Addenda, 1644 Rev. 7,
1651, 1682, 1683, 1685, 1686, 1728, 1729, 1734, N-108, N-180 Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity 2001 Edition / 2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Snubber PSA-1/2	Pacific Scientific	13740	N/A	2RC17018S	1981	Removed	Yes
Snubber Lisega 3018	Lisega	30600272/013	N/A	2RC17018S	2006	Installed	No

7. Description of Work REPLACED SNUBBER
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
 VT-3 Other ☒ Pressure _____ psi Test Temp. _____ °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00488067-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

Scott Caporale

Date 4-27, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 11/27/06 to 4/27/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

James M. Mulla

Inspector's Signature

Commissions

ILL-1254

National Board, State Province, and
Endorsements

Date: April 27, 20 07

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIRS OR REPLACEMENTS

As Required by the Provisions of the ASME Code Section XI

- | | | | | |
|----|------------------------------|---|---|---|
| 1. | Owner | <u>Exelon Nuclear</u> | Date | <u>4-9-07</u> |
| | | Name | | |
| | | <u>4300 Winfield Road, Warrenville, IL</u> | Sheet | <u>1</u> of <u>1</u> |
| | | Address | | |
| 2. | Plant | <u>Byron Nuclear Power Station</u> | Unit | <u>02</u> |
| | | Name | | |
| | | <u>4450 N. German Church Road, Byron, IL</u> | Work Order No. | <u>00488069-01</u> |
| | | Address | | Repair Organization, P.O. No., Job No., etc. |
| 3. | Work Performed by | <u>N P S & W VENTURE</u> | Type Code Symbol Stamp | <u>Not Applicable</u> |
| | | Name | Authorization No. | <u>Not Applicable</u> |
| | | <u>36400 S. Essex Road, Wilmington, IL 60481</u> | Expiration Date | <u>Not Applicable</u> |
| | | Address | | |
| 4. | Identification of System | <u>RC – Reactor Coolant</u> | | |
| 5. | (a) | Applicable Construction Code | <u>ASME Section III</u> | 19 <u>74</u> Edition, <u>S74</u> Addenda, <u>1644 Rev. 7,</u> |
| | | | <u>1651, 1682, 1683, 1685, 1686, 1728, 1729, 1734, N-108, N-180</u> | <u>Code Case</u> |
| | (b) | Applicable Edition of Section XI Used for Repair/Replacement Activity | <u>2001</u> | Edition / <u>2003</u> Addenda |
| | (c) | Section XI Code Case(s) | <u>NONE</u> | |
| 6. | Identification of Components | | | |

[illegible]

7. Description of Work REPLACED SNUBBER
-
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☐
VT-3 Other ☒ Pressure _____ psi Test Temp. _____ °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00488069-01

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp Not Applicable

Certificate of Authorization No. Not Applicable

Signed *Scott E.posito* Date 4-27, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 11/2/06 to 4/27/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

Gradualsky Commissions 111-1254
Inspector's Signature National Board, State Province, and Endorsements

Date: April 27, 20 07

(Final)

DOCUMENT NO.: 4-1

REV. NO.: 0

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 4/16/07
 Name
4300 Winfield Road, Warrenville, IL
 Address
 Sheet 1 of 1
2. Plant Byron Nuclear Power Station Unit 2
 Name
4450 N. German Church Road, Byron, IL
 Address
Work Order No. 00851478-05
 Repair Organization, P.O. No., Job No., etc.
3. Work Performed by Byron Mechanical Maintenance Type Code Symbol Stamp Not Applicable
 Name
4450 N. German Church Road, Byron, IL
 Address
 Authorization No. Not Applicable
 Expiration Date Not Applicable
4. Identification of System RC (Reactor Coolant)
5. (a) Applicable Construction Code ASME Section III 1971 Edition, W/72 Addenda, None Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity: 2001 Edition/2003 Addenda
 (c) Section XI Code Case(s) None.
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Body to Cover Seal weld	Kerotest	Body: UP-9958-1-(1)Z Cvr: UP-9911-2-(1)	9392	2RC8045D S/N: KYA4-15	1976	Corrected	Yes

7. Description of Work Repair Body to Cover Seal Weld
re-install the seal weld.
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Exempt ☐
 Other ☐ Pressure 2241 psi Test Temp. 558 °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WO 00851478-05

Applicable Manufacturer's Data Reports to be attached

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature]

RRR

Owner or Owner's Designee, Title

Date 6/22, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 7/18/06 to 6/12/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]
Inspector's Signature

Commissions 166-1254
National Board, State Province, and Endorsements

Date: June 12, 20 07

DOCUMENT NO.: 4.2

REV. NO.: 0

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 04/17/07
4300 Winfield Road, Warrenville, IL Sheet 1 of 1
Address
2. Plant Byron Nuclear Power Station Unit 02
4450 N. German Church Road, Byron, IL **Work Order No. 00866719-02**
Address Repair Organization, P.O. No., Job No., etc.
3. Work Performed by Westinghouse Electric Co. Type Code Symbol Stamp Not Applicable
PO Box 158, Madison, PA 15663 Authorization No. Not Applicable
Address Expiration Date Not Applicable
4. Identification of System REACTOR COOLANT (RC)
5. (a) Applicable Construction Code ASME Section III 19 71 Edition, * Addenda, ** Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity 2001 Edition / 2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Mechanical Tube Plug (2)	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BA S/N 2095 Row 41 Col. 87	2007	Installed	NO
Mechanical Tube Plug (2)	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BA S/N 2095 Row 47 Col. 61	2007	Installed	NO

7. Description of Work INSTALL MECHANICAL TUBE PLUGS IN THE 2A SG HOT LEG AND COLD LEG TUBE ENDS

8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
 Other ☐ Pressure n/a psi Test Temp. n/a °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00866719-02

Applicable Manufacturer's Data Reports to be attached

* S72 / W74 for NB-2331(D), NB2332(A)(2), NB-4334, 4334.1 & 4334.2, NB-4335.1, NB-4335.2, & NB-4335.3

** 1355, 1493-1, 1484, 1528, NB-4642

Mechanical tube plugs fabricated to ASME Section III 1989 Edition No Addenda with Code Case N-474-1.

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] RRR Coord
Owner or Owner's Designee, Title

Date 5/3, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/25/07 to 5/8/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

ILL-1254

National Board, State Province, and Endorsements

Date: May 8, 20 07

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

- | | | |
|----|---|---|
| 1. | Owner <u>Exelon Nuclear</u>
Name
<u>4300 Winfield Road, Warrenville, IL</u>
Address | Date <u>04/15/07</u> |
| 2. | Plant <u>Byron Nuclear Power Station</u>
Name
<u>4450 N. German Church Road, Byron, IL</u>
Address | Sheet <u>1</u> of <u>1</u>
Unit <u>02</u>

<u>Work Order No. 00866723-02</u>
Repair Organization, P.O. No., Job No., etc. |
| 3. | Work Performed by <u>Westinghouse Electric Co</u>
Name
<u>PO Box 158 Madison, PA 15663</u>
Address | Type Code Symbol Stamp <u>Not Applicable</u>
Authorization No. <u>Not Applicable</u>
Expiration Date <u>Not Applicable</u> |
| 4. | Identification of System <u>REACTOR COOLANT (RC)</u> | |
| 5. | (a) Applicable Construction Code <u>ASME Section III 19 71</u> Edition, <u>*</u> Addenda, <u>**</u> Code Case
(b) Applicable Edition of Section XI Used for Repair/Replacement Activity <u>2001</u> Edition / <u>2003</u> Addenda
(c) Section XI Code Case(s) <u>NONE</u> | |
| 6. | Identification of Components | |

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Mechanical Tube Plug (2)	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BB S/N 2096 Row 37 Col. 95	2007	Installed	NO
Mechanical Tube Plug (2)	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BB S/N 2096 Row 27 Col. 11	2007	Installed	NO
Mechanical Tube Plug (2)	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BB S/N 2096 Row 257 Col. 11	2007	Installed	NO
Mechanical Tube Plug (2)	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BB S/N 2096 Row 40 Col. 18	2007	Installed	NO

- | | | | | | | | | |
|----|---|--------------------------------------|------------------------------------|---|--|------------|-----|----|
| 7. | Description of Work <u>INSTALL MECHANICAL TUBE PLUGS IN THE 2B STEAM GENERATOR</u>
<u>HOT LEG AND COLD LEG TUBE ENDS</u> | | | | | | | |
| 8. | Test Conducted: | Hydrostatic <input type="checkbox"/> | Pneumatic <input type="checkbox"/> | Nominal Operating Pressure <input type="checkbox"/> | Exempt <input checked="" type="checkbox"/> | | | |
| | | Other <input type="checkbox"/> | Pressure | N/A | psi | Test Temp. | N/A | °F |

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00866723-02

Applicable Manufacturer's Data Reports to be attached

* S72 / W74 for NB-2331(D), NB2332(A)(2), NB-4334, 4334.1& 4334.2, NB-4335.1, NB-4335.2, & NB-4335.3

** 1355, 1493-1, 1484, 1528, NB-4642

Mechanical tube plugs fabricated to ASME Section III 1989 Edition No Addenda with Code Case N-474-1

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature] SAA RRR Carol
Owner or Owner's Designee, Title

Date 5/4, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/25/07 to 5/8/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

ILL-1254

National Board, State Province, and Endorsements

Date: May 8, 20 07

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1. Owner Exelon Nuclear Date 04/15/07
4300 Winfield Road, Warrenville, IL Sheet 1 of 2
Address
2. Plant Byron Nuclear Power Station Unit 02
4450 N. German Church Road, Byron, IL **Work Order No. 00866724-02**
Address Repair Organization, P.O. No., Job No., etc.
3. Work Performed by Westinghouse Electric Co Type Code Symbol Stamp Not Applicable
PO Box 158 Madison, PA 15663 Authorization No. Not Applicable
Address Expiration Date Not Applicable
4. Identification of System REACTOR COOLANT (RC)
5. (a) Applicable Construction Code ASME Section III 19 71 Edition, * Addenda, ** Code Case
 (b) Applicable Edition of Section XI Used for Repair/Replacement Activity 2001 Edition / 2003 Addenda
 (c) Section XI Code Case(s) NONE
6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 33-Col. 64	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 32-Col. 65	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 33-Col. 65	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 34-Col. 65	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 35-Col. 65	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK	N/A	2RC01BC S/N 2097 Row 32-Col. 66	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK	N/A	2RC01BC S/N 2097 Row 35-Col. 66	2007	Installed	NO

7. Description of Work INSTALL MECHANICAL TUBE PLUGS IN THE 2C STEAM GENERATOR
8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☐ Exempt ☒
 Other ☐ Pressure N/A psi Test Temp. N/A °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks 00866724-02

Applicable Manufacturer's Data Reports to be attached

* S72 / W74 for NB-2331(D), NB2332(A)(2), NB-4334, 4334.1 & 4334.2, NB-4335.1, NB-4335.2, & NB-4335.3

** 1355, 1493-1, 1484, 1528, NB-4642

Mechanical tube plugs fabricated to ASME Section III 1989 Edition No Addenda with Code Case N-474-1

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

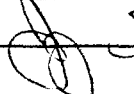
Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

 Owner or Owner's Designee, Title

Date 5/4, 20 07

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/25/07 to 5/8/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report. Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.



Inspector's Signature

Commissions

166-1254
National Board, State Province, and Endorsements

Date: May 8, 20 07

FORM NIS-2 SUPPLEMENTAL SHEET

1. Owner Exelon Nuclear
Name
4300 Winfield Road, Warrenville, IL
Address

Date 04/15/07

Sheet 2 of 2

2. Plant Byron Nuclear Power Station
Name
4450 N. German Church Road, Byron, IL
Address

Unit 02

Work Order No. 00866724-02
Repair Organization, P.O. No., Job No., etc.

3. Work Performed by Westinghouse Electric Co.
Name
PO Box 158, Madison, PA 15663
Address

Type Code Symbol Stamp Not Applicable
 Authorization No. Not Applicable
 Expiration Date Not Applicable

4. Identification of System **REACTOR COOLANT (RC)**

5. (a) Applicable Construction Code ASME Section III 1971 Edition, * Addenda, ** Code Case
(b) Applicable Edition of Section XI Used for Repair/Replacement Activity 2001 Edition / 2003 Addenda
(c) Section XI Code Case(s) NONE

6. Identification of Components

Name of Component	Name of Manufacturer	Manufacturer Serial No.	National Board No.	Other Identification	Year Built	Corrected, Removed, or Installed	ASME Code Stamped (Yes or No)
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 32-Col. 67	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 33-Col. 67	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 34-Col. 67	2007	Installed	NO
Mechanical Tube Plug	Westinghouse	HT#: NX4418HK Lot 11	N/A	2RC01BC S/N 2097 Row 35-Col. 67	2007	Installed	NO

(Final)

FORM NIS-2 OWNER'S REPORT FOR REPAIR/REPLACEMENT ACTIVITY
As Required by the Provisions of the ASME Code Section XI

1.	Owner	<u>Exelon Nuclear</u>	Date	<u>4/16/07</u>
		Name		
		<u>4300 Winfield Road, Warrenville, IL</u>	Sheet	<u>1</u> of <u>1</u>
		Address		
2.	Plant	<u>Byron Nuclear Power Station</u>	Unit	<u>02</u>
		Name		
		<u>4450 N. German Church Road, Byron, IL</u>	Work Order No. 00866726-01	
		Address	Repair Organization, P.O. No., Job No., etc.	
3.	Work Performed by	<u>Shaw/Stone & Webster</u>	Type Code Symbol Stamp	<u>Not Applicable</u>
		Name	Authorization No.	<u>Not Applicable</u>
		<u>36400 S. Essex Road, Wilmington, IL 60481</u>	Expiration Date	<u>Not Applicable</u>
		Address		
4.	Identification of System	<u>REACTOR COOLANT</u>		
5.	(a) Applicable Construction Code	ASME Section III	19 71 Edition, S72 Addenda, 1355, 1484, Code	
			W74* 1493-1, 1528 Case	
	(b) Applicable Edition of Section XI Used for Repair/Replacement Activity	<u>2001</u>	Edition /	<u>2003</u> Addenda
	(c) Section XI Code Case(s)	<u>NONE</u>		
6.	Identification of Components			

[illegible]

7.	Description of Work	INSTALLED NEW HAND HOLE COVER FOR MJ-156B
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8. Test Conducted: Hydrostatic ☐ Pneumatic ☐ Nominal Operating Pressure ☒ Exempt ☐
Other ☐ Pressure 1089 psi Test Temp. 557 °F

Note: Supplemental sheets in form of lists, sketches, or drawings may be used, provided (1) size is 8½ in. x 11 in., (2) information in items 1 through 6 on this report is included on each sheet, and (3) each sheet is numbered and the number of sheets is recorded at the top of this form.

FORM NIS-2 (Back)

9. Remarks WO# 00866726-01

Applicable Manufacturer's Data Reports to be attached

*W74 for NB-2331(D), NB-2332(A)(2), NB-4332, NB-4334, 4334.1, 4332.2, NB-4335, 4335.1, 2, 3

CERTIFICATE OF COMPLIANCE

I certify that the statements made in the report are correct and this conforms to the requirements of the ASME Code, Section XI.

Type Code Symbol Stamp

Not Applicable

Certificate of Authorization No.

Not Applicable

Signed

[Signature]

RRR Coord

Date 6/21, 20 07

Owner or Owner's Designee, Title

CERTIFICATE OF INSERVICE INSPECTION

I, the undersigned, holding a valid commission issued by the National Board of Boiler and Pressure Vessel Inspectors and the State or Province of Illinois and employed by HSB CT of Hartford, CT have inspected the components described in this Owner's Report during the period 4/13/07 to 6/22/07, and state that to the best of my knowledge and belief, the Owner has performed examinations and taken corrective measures described in this Owner's Report in accordance with the requirements of the ASME Code, Section XI.

By signing this certificate neither the Inspector nor his employer makes any warranty, expressed or implied, concerning the examinations and corrective measures described in this Owner's Report.

Furthermore, neither the Inspector nor his employer shall be liable in any manner for any personal injury or property damage or a loss of any kind arising from or connected with this inspection.

[Signature]

Inspector's Signature

Commissions

ILL-1254

National Board, State Province, and Endorsements

Date:

June 22, 20 07

(Final)